

Violence and its influence on the wellbeing and integration of Immigrant and Refugee
Women in Canada.

By

Labe Songose

A Thesis submitted to the Faculty of Graduate Studies of

The University of Manitoba

In partial fulfillment of the requirements of the degree of

MASTERS OF ARTS

Department of Sociology and Criminology

University of Manitoba

Winnipeg

Copyright © 2021 by Labe Songose

Abstract

Violence against women has severe health and social repercussions for everyone involved. As a result, gender-based violence (GENDER-BASED VIOLENCE) has become a greater concern for activists, feminists, scholars, and increasingly, migration workers. Although the issue of gender-based violence is the subject of much research, the experiences of newcomer women are often ignored. Several factors make newcomer women more vulnerable to GENDER-BASED VIOLENCE in their new country. These factors are exacerbated by migration, change in environment, socioeconomic status, cultural differences, language barriers, and lack of awareness of resources that prevent them from receiving assistance. Studies have shown that immigrant and refugee women face additional systemic, interpersonal, sociopolitical and cultural barriers that are reproduced through the interaction of multiple forms of identity dimensions and forms of oppression (Jayasuriya, 2018; Thurston et al., 2013). My study is informed by the intersectional theory which is used to understand the experience of newcomer women survivors. My research is part of a larger international project examining the experience of gender-based violence among immigrant and refugee women in seven countries (Freedman et al., 2021). I conducted six (6) semi-structured interviews with immigrant and refugee women in British Columbia, Alberta, Saskatchewan and Manitoba to answer the question, “How does violence against immigrant and refugee women affects their psychological well-being and integration process in Canada? My results indicate that lack of safe and alternative housing, social support, access to social services, financial independence coupled with unemployment, and lack of awareness are major reasons for newcomer women not seeking or leaving abusive relationships. I conclude by providing some suggestions regarding policy and programing around newcomer women and GENDER-BASED VIOLENCE.

Acknowledgments

I am profoundly thankful to my Family in Ghana, especially my elder brothers who sacrificed their resources for me to be able further my education to this level after the passing of our dear father in 1997. I could not have done this without their unconditional support.

Prof. Lori Wilkinson, my great advisor and mentor, gave me continuous encouragement and helped me revise various drafts before they became a published thesis. To her I am genuinely indebted. My sincere gratitude to my committee members, Dr. Gregg Olsen and Dr. Shawna Ferris for critical comments on various drafts of this thesis. Canadian Institutes for Health Research and GenderNet Plus Grant from the Canadian and European Union governments respectively supported the data collection and paid for my research assistantship (CIHR CNG406470). I also would like to express my profound gratitude to GENDER-BASED VIOLENCE-MIG Project team in Canada, Dr. Evangelia Tastsoglou – Principal Investigator, Dr. Myrna Dawson – co-investigator, Dr. Catherine Holtman – co-investigator, and Dr. Lori Wilkinson- co-investigator for permitting me to use part of the data collected for this project for my thesis. To them, I am forever indebted. I want to thank the six anonymous women who were brave enough to share their experiences. To the settlement organizations that helped to advertise the study, I am grateful. I would also like to express my gratitude to my friends at the University of Manitoba, especially the Sociology and Criminology Department for their continued support.

Dedication

To my late father who passed away on January 22, 1997

Table of Content

| | |
|---|-----|
| Abstract | i |
| Acknowledgments | ii |
| Dedication | iii |
| Table of Content | iii |
| Chapter One | 1 |
| 1. Introduction..... | 1 |
| 1.1. Definition of terms | 3 |
| Chapter Two: Theoretical Framework and Literature Review | 7 |
| 2. Introduction..... | 7 |
| 2.1 Intersectionality Theory | 7 |
| 2.2. Literature Review..... | 10 |
| 2.2.1. Alternative and Affordable Housing..... | 10 |
| 2.2.2. Fear of Family Separation or Isolation..... | 15 |
| 2.2.3. Lack of Awareness and Access to Social Services | 16 |
| 2.2.4. Social Determinants of Health | 20 |
| 2.2.5. Lack of social support..... | 21 |
| 2.2.6. Socioeconomic status | 23 |
| 2.2.7. Sense of Belonging | 25 |
| 2.3. Conclusion | 27 |
| Chapter Three: Methodology | 29 |
| 3. Introduction..... | 29 |
| 3.1. Qualitative Research | 29 |
| 3.2. Data collection method | 29 |
| 3.2.1. Interviews..... | 30 |
| 3.3. Participants..... | 32 |
| 3.4. Participant selection process | 35 |
| 3.5. Study Area | 35 |
| 3.6. The International Part of the Study | 36 |
| 3.7. Philosophical paradigm..... | 37 |
| 3.8. Support and Dissemination of Results | 39 |
| 3.9. Data Analysis | 40 |
| 3.10. Reflexivity..... | 42 |
| 3.11. Ethical Issues | 43 |

| | |
|---|-----|
| 3.12. Conclusion | 45 |
| Chapter Four: Findings | 46 |
| 4. Introduction..... | 46 |
| 4.1. Synopsis of Participants..... | 47 |
| 4.2. Alternative and Safe Housing | 50 |
| 4.3. Social Supports | 52 |
| 4.4. Access to a Social Services..... | 54 |
| 4.5. Unemployment..... | 56 |
| 4.6. Financial Abuse | 58 |
| 4.7. Social Benefits | 60 |
| 4.7. Fear of Family Separation..... | 63 |
| 4.8. Lack of Awareness..... | 65 |
| 4.9. Safety | 68 |
| 4.10. Intersectionality Theory | 69 |
| 4.11. Discussion..... | 71 |
| 4.12. Conclusion | 73 |
| Chapter Five..... | 75 |
| 5. Conclusion | 75 |
| 5.1. Policy implications..... | 75 |
| 5.2. Summary of Recommendations | 78 |
| 5.3. Limitations of the study | 80 |
| 5.4. Future Research | 81 |
| 5.5. Concluding remarks | 83 |
| References..... | 84 |
| Appendices..... | 93 |
| Appendix A..... | 93 |
| Appendix B | 95 |
| Appendix C | 96 |
| Appendix D..... | 96 |
| Appendix E | 97 |
| Appendix F..... | 98 |
| Appendix G..... | 104 |

Chapter One

1. Introduction

Violence against women is a global phenomenon that assumes several shapes and involves many controlling, threatening, aggressive, and abusive actions, which can be physical, sexual, or psychological (e.g., intimate partner violence) (Guruge et al., 2012). Women are the most common victims of gender-based violence in Canada, as is the case in other settings globally (Jayasuriya, 2018). Throughout the world, one in every three women has been beaten, coerced into sex or otherwise abused during her lifetime (McGee, 2018). Violence against women is a severe health and social problem for women worldwide.

Among the diverse range of stresses faced by newcomer families, gender-based violence is a significant source of concern (Jayasuriya, 2018). Research on gender-based violence and the experiences of immigrant and refugees settling in developed countries is sparse despite concerns from service providers and policymakers that these communities are experiencing violence and that is negatively affecting the well-being and successful settlement (McGee, 2018). Research indicates that immigrant women's experiences of gender-based violence can begin at any time during the migration process. It can occur pre-migration, during migration, and post-migration (Mason et al., 2008; Jayasuri, 2018). The type of violence experienced by women may change pre- and post-migration as well. Verbal, psychological, emotional and physical abuse can change depending upon the effect of migration stressors on the family unit. Studies reveal that a substantial proportion of women have experienced physical and mental health impairment, which could be a result of the various types of violence they had experienced throughout their lifespan (Guruge et al., 2017). For instance, when considering the healthy immigrant effect, evidence shows that on average, immigrants and refugees have similar or slightly higher rates of mental

illness compared with non-immigrants, although rates vary between different ethnocultural groups (Mental Health Commission of Canada, 2016).

Studies have also shown that immigrant and refugee women face additional systemic, interpersonal, sociopolitical and cultural barriers, which are reproduced through the interaction of multiple forms of identity dimensions and forms of oppression (Mason et al., 2008; Jayasuri, 2018). Lack of education, limited access to culturally appropriate services, and financial insecurity are examples of the disadvantages faced by immigrant and refugee women when seeking help or leaving abusive relationships and this further affects their integration process (Walsh et al., 2016). Violence against newcomer women becomes a concern when the responsibility for addressing women's vulnerability to gender-based violence is placed on the newcomer communities, those who are referred to as bearing the burden of their culture, without having to recognize that there are barriers that have created conditions that systematically increase these groups' vulnerability to abuse (Jayasuriya, 2018). Abraham and Tastsoglou (2016) find that among certain minority groups such as the newcomers and Indigenous peoples, women face unique risk factors for domestic/ intimate partner violence due to structural inequalities at the intersection of newcomer women identity, gender, ethnicity and class that act as a hindrance to seeking help.

This study contributes to existing knowledge by examining the experience of newcomer women who survived gender-based violence. For this research, I address the question: ***To what extent does violence against immigrant and refugee women affect their psychological well-being and integration process in Canada?*** This study examines data collected from six (6) semi-structured interviews with immigrant and refugee women in Western region of Canada. Intersectionality theory helps me understand how multiple factors interact to render newcomer

women more vulnerable to gender- based violence and how structural barriers continue to help exacerbate to their experience.

This study investigates the experiences of newcomer women regarding gender-based violence (GENDER-BASED VIOLENCE) and how it may influence their integration in Canada. Newcomer women's voices are central in this study as they are often silenced in discourse on this and other issues. By analyzing interviews on immigrant and refugee women with thematic analysis will also add to the literature on thematic approach and interviews.

1.1. Definition of terms

Immigrant and Refugee Women

In this study, the term 'immigrant and refugee women' is used to refer to women born outside of Canada. This broad term is used intentionally to include longterm residents, newcomers, that is landed immigrants who came to Canada up to five years prior to a given census year, temporary residents, asylum seekers, and people with precarious or no immigration status and aligns with the definitions used by several other studies (Jayasuriya, 2018; Tabibi et al., 2017). Although women of all cultures or economic classes experience gender-based violence, several factors makes the experience of newcomer women more vulnerable and unique. The vulnerability of newccomer women may be caused by migration process, change in environment or cultural differences, change in socioeconomic status, language barriers, traditional gender roles, lack of services or resources and other structural barriers. It is these conditions that my thesis focuses on and how they may influence the experience of violence.

Gender-based violence : O'Toole and Schniffman(1997) gave a broad definition to include "any interpersonal, organizational or politically oriented violation perpetrated against

people due to their gender, identity, sexual orientation, or location in the hierarchy of male-dominated social systems such as family, organisation or the labour force”(p.xii). I chose this definition because it includes not only violence directed at women because they are women but that the definition also includes hostile actions towards other gender minorities, while it emphasizes the social context of inequality in which these hostile actions tend to occur.

Gender-based violence includes a range of interactions, from verbal harassment and institutional discrimination to enslavement and murder(Gordon & Collins, 2013). This includes but not limited to acts of physical, sexual, emotional, verbal, economic and psychological violence by intimate partners, family members, sexual assault, sexual harassment and intimidation, and forced prostitution (Russell, 1984). For the purpose of this study, the focus is on intimate partner violence. Intimate partner violence (IPV) is the experience of a threat of physical, sexual, emotional/psychological, economic abuse, or violence by a current or previous marital, dating, or cohabiting intimate partner(). There are three types of intimate partner violence according to Feminist perspective namely; intimate terrorism, violent resistance and situational couple violence(Johnson, 2011). This study focused on intimate terrorism, which is a type of intimate partner violence that involves the combination of physical and/or sexual violence with a variety of non-violent control tactics, such as economic abuse, emotional abuse, the use of children, threats and intimidation, invocation of male privilege, constant monitoring, blaming the victim, threats to report to immigration authorities, or threats to “out” a person to work or family (McKenna&Larkin, 2002).

Although intimate partner violence can take place between same-sex partners and can be perpetrated by women against men, this study focused on male violence against women in heterosexual relationships, specifically among immigrant and refugee women in Canada. I chose

this type of violence because violence against women perpetrated by male partners is one of the most concerning and prevalent public health issue in the world today. Research shows that it is a major cause of injury and mental illness among women and children ((Guruge et al., 2017).

In agreement with O'Toole and Schniffman(1997), I extended the concept of violence in this study from individual relationship to include structural barriers or systems that produce inequality such as access to social services (English classes, healthcare etc.), cultural racism and discrimination which further exacerbate newcomer women experience of violence in Canada.

Woman: In this study, refers to any adult female from the age of 18 and older. While a commonly used terminology of “sex” is commonly used to identify and categorize men and women in many studies of the past, these binaries can be limiting and affect research at all levels from data collection to methodology (Cameron &Stinson, 2019). For this study, persons who participated in this study and were self-identified as females, although this approach can have its limitation as gender is complex and impacted by relation, institution, and societal roles (Tannenbaum et al., 2016). By allowing women to self-identify, I am giving them the agency and voice to direct the identification of themselves, an act of ethics and of empowerment.

Women Survivors: In this study, survivors refer to women who are being targeted for abuse or are alive after an abuse. This could refer to a woman who remains part of a group for support and encouragement or ones who copes well with their experiences in their lives and inspires others to do the same. Using the word survivor rather than victim gives the women a sense of strength and agency.

This study is sociologically relevant because gender-based violence is a serious and significant social problem that affects the health and wellbeing of women in general. However, there are

certain groups including newcomer women who are experiencing violence in Canada but are not getting help.

Secondly, this study is sociologically relevant because newcomers account for 22% of current population of Canada and as immigration in Canada continues to increase (IRCC, 2020), there is need to be concerned about the wellbeing of newcomer women. A further justification for this research is to provide settlement service providers, women's shelters and other social service organizations with data that can assist them in applying for supports for their programming. For instance, we lack even a simple accounting of the types of services or resources that are available, nor are there extensive examinations of the gaps in services which are needed in order to address abuse occurring within some newcomer families.

Finally, this study is sociologically important as knowledge from this study can be used to inform the development of programs that educates and empowers newcomer women who are experiencing abuse and want to leave their abusive relationships.

Following this introductory chapter, Chapter 2 provides a brief review of the relevant research on gender based violence and a theory from which this study draws on to analyze the findings. Chapter 3 provides a description of the methodology adopted for data collection and also outlines the characteristics of the participants involved. Chapter 4 describes the findings of the participant interviews. Finally, Chapter 5 concludes with a summary of the findings and recommendations and provides suggestions for future directions.

Chapter Two: Theoretical Framework and Literature Review

2. Introduction

Gender-based violence has become a global social and health problem which has led to public activist movements such as # MeToo movement which was developed to support national strategies to end gender-based violence (Ross et al., 2021). In 2020, 160 females were killed in Canada, according to a report published by the Canadian Femicide Observatory for Justice and Accountability (CFOJA) at the University of Guelph (CBC News, 2021). The effects of gender-based violence are compounded for those who are socially, racially and economically marginalized.

2.1 Intersectionality Theory

My thesis uses intersectionality to explore some of the factors influencing gender-based violence among immigrants and refugee women in Canada. Intersectionality theory explores how the intersections of gender, 'race', class, culture and other social locations shape the experiences of individuals (Godoy-Ruiz et al., 2015). Using intersectionality as an interpretive lens allows for the illumination of the experiences of women facing marginalization and whose voices have been hidden or silenced in dominant cultural discourses on this issue. This growing body of research uses intersectionality to examine the experiences of women survivors of gender-based violence from diverse racial, ethnic, socioeconomic class, religious, sexual orientation, and immigrant backgrounds (Sokoloff & Dupont, 2005, Godoy-Ruiz et al., 2015).

Intersectionality theory was coined by Kimberle Crenshaw in 1989 and it has its roots in the writings of African- American feminists who challenged the notion of a universal gendered experience and argued that marginalized women's experiences were also shaped by race and class (Viruell-Fuentes et al., 2012). These feminists argued that white western feminism was ill-

equipped to analyze the complexity of marginalized women experience, as gender relations were seen as the primary status and all other forms of inequalities were seen as secondary (Pease et al., 2008).

The intersectionality of race, class, culture, and gender has real-life consequences for many women survivors who are seeking safety (Sokoloff & Dupont, 2005). For instance, a woman taught that “saving face” and family unity preempt individual safety maybe reluctant to seek outside help for gender-based violence. As a member of a devalued racial identity, some women of color, particularly African American women, may fear that calling the police will subject their partners to racist treatment by the criminal justice system, as well as confirm racist stereotypes of Black men as violent (Sokoloff & Dupont, 2005). Studies in Canada also found that for racial or cultural minorities, the systemic colonial, racist and anti-immigrant forces intersect to encourage silence or result in inadequate responses from those when abuse is reported (James 2007; Bannerji, 1999). The continued practice of racist stereotyping or labelling of newcomer communities as violent also influences newcomer women’s ability to seek for support or services in times of abuse. According to James (2007), the act of reporting violence by an immigrant woman can contribute to the notion that violence is inherent part of newcomer communities. Such labelling draws our attention away from the need to help newcomer women who are experiencing violence.

There is considerable empirical evidence suggesting that the most severe and deadly intimate partner violence occurs disproportionately among low-income women of color (Benson & Fox, 2004; Websdale, 1999). Studies consistently find that many homeless women are previously victimized by intimate partner violence (Browne & Bassuk, 1997) and that more than half of all women receiving public assistance were once victims of intimate partner violence

(Lyon, 1998). Intersectionality proposes that these systems of oppression are mutually constituted and work together to produce inequality; for example, in this case gender and low income together cause significant consequences (e.g., homelessness) of intimate partner abuse that might not occur for more affluent women. In other words, multiple axes of social identity (race, class, gender, immigration status) overlap and intersect to oppress the marginalized. As such, analyses that focus on gender, race, or class independently are insufficient because these social positions are lived simultaneously (Viruell-Fuentes et al., 2012).

From an intersectional standpoint, violence against women is not only gender-based (i.e., women are more likely to be victimized by men because they are women). Violence against women is further compounded by factors such as poverty and weaker social ties, making them more vulnerable than they would have been because of their female gender or when they were in their home countries (Guruge et al. 2010). Immigrant and refugee women are also at risk for depression due to their gender and low socioeconomic status and are also exposed to the additional stressors associated with migration and resettlement — including discrimination, language, cultural barriers, loss of social status, and social isolation — that threaten their mental well-being (Godoy-Ruiz, et al., 2015). Migrants experience multiple forms of social inequity and stressors related to being a foreigner in a new country that places them at risk of developing depression (Godoy-Ruiz, et al., 2015). Yet people from immigrant, refugee, ethno-cultural, and racialized groups often have poorer access to care and receive poorer treatment.

Despite the importance of intersectional theory, it has been criticized because certain identities such as race, class, and gender tend to be the focus of research and tend to ignore other aspects of intersection such as immigrant status, disability status, relationship status, and others. This means that the influence of other identities are sometimes ignored. Researchers have also

warned against the danger of treating class, gender, and ethnicity as if they function according to identical logics. The argument is that although complexity and interaction between the categories or processes must be thematized, it is important to maintain an awareness that gender functions in a different way than class, which in turn functions different way than ethnicity (Christensen & Jensen, 2012). Despite these limitations, intersectionality theory provides a vital lens for understanding how the identities of the marginalized groups overlap to affect their experience of gender-based violence. In other words, how identities of newcomer women such as gender, immigration status, race and class affect their experience of violence in Canada.

2.2. Literature Review

Turning to the literature review comprises of alternative and affordable housing, fear of family separation, lack of awareness and access to social services, social determinants of health, socioeconomic status, sense of belonging and conclusion.

2.2.1. Alternative and Affordable Housing

Although Canada is considered a country with high-income, housing security and homelessness in Canada remains major social problems, particularly for immigrants and refugees. In a 2014 study, housing numbers indicate that about 500,000 immigrant households in Canada are in core housing need (Bell, 2019). This is a clear indication of system failure in addressing the pressing housing needs of immigrant and refugees in Canada. According to intersectionality theory, housing needs can influence various life events, including gender-based violence.

Fewer alternate solutions for housing exist for this group as informal supports that could offer temporary accommodations are limited or non-existent (BC Society of Transition Houses, 2015). Refugees and asylum seekers often have even fewer social networks than other immigrants (Brell et al., 2020). This is particularly significant given theories of help-seeking for Gender-Based Violence (GENDER-BASED VIOLENCE) which shows the importance of informal help e.g., from family or friends, which are important emergency resources for women (Kaukinen, 2002; Kershner & Anderson, 2002). Informal assistance has been suggested to be a pathway to more formal supports and services from health, criminal justice, and social service systems (Kaukinen, 2002). Thus, housing instability can further exacerbate the trauma that women experience when living with abusive partners or attempting to leave them. One Canadian study finds that 31% of shelter users intended to return to the abuser because of a lack of housing options (Taylor-Butts, 2007).

Limited short and long-term housing options, coupled with a long waiting period to obtain safe, secure, and affordable housing, can also compel women to return to their abusive partners (BC Society of Transition Houses, 2015). Homelessness is often the result of a variety of interconnected structural and individual factors and may differ according to gender. GENDER-BASED VIOLENCE is a leading cause of homelessness for women and children and affects their experiences of homelessness, poverty, trauma, and substance abuse (Gulliver-Garcia, 2016; Thurston et al., 2013). Immigrant and refugee women experience homelessness due to violence either occurring pre-arrival or post-arrival (Van Berkum & Oudshoorn, 2015; Thurston et al., 2013).

There is a dire shortage of emergency shelter for abused persons in Canada. A study conducted by CBC News in 2020 finds that even if the abused woman is “fortunate” enough to

find a spot in an emergency crisis shelter in Canada, her stay there is limited and so are her prospects for finding a safe, affordable place to live when her time is up. According to Allen (2020) the average stay in an emergency shelter is limited to just 30 days. In her study, many abuse survivors and workers at these shelters suggest that it is unrealistic and dangerous to expect abused women have experienced abuse to be able to live safely by themselves after short stay in crisis shelter (Allen 2020). Its important to note that without these shelters dozens of women will be at the risk of becoming homeless which means many have no choice but to return to an abusive relationship. CBC's (2020) reporting also found that both women and children are being turned away from domestic violence shelters by the tens of thousands of times a month. They also found that majority of those shelters are short-term crisis shelters with restrictions ranging from 21 days to three months (Allen, 2020). Out of the 140 second-stage shelters in Canada, CBC News contacted 65 of these shelters, and nearly all were full. About 1,900 requests for help were rejected by those shelters in just the month of November 2019 (Allen, 2020) simply because there was no room to house them.

Housing is an important remedy for all women experiencing GENDER-BASED VIOLENCE. These experience of violence may be physical in nature; however, they can also include social isolation, financial control, and sponsorship status threats (Van Berkum & Oudshoorn, 2015). A study indicated that the relationship between violence and health outcomes could be mitigated by the combined personal, social, and economic resources a woman has available to her (e.g., housing) (Ford-Gilboe et al., 2009). These include language and literacy barriers, limited knowledge of Canadian systems, laws, and policies (Thurston et al., 2006), precarious citizenship status, inadequate support systems, cultural beliefs, and family dynamics.

Yet another barrier that immigrant and refugee women face when accessing social housing is racial discrimination and harassment. This can affect their already compromised well-being and safety (BC Society of Transition Houses, 2015). The brunt of this racialized housing discrimination is borne unequally. One study finds that African and South Asian Canadian applicants experience the highest levels of rental discrimination and that landlords discriminate based on accents or neighbourhoods they were coming from (Teixeira, 2008). Linda MacLeod and Maria Shin were commissioned by Health Canada to study the service delivery needs of immigrant and refugee women; they find that many immigrants and refugees who are abused are isolated due to language and cultural barriers, racism, the ‘strangeness’ of their environment and the power that their immigration sponsors held over them (Bhuiyan et al., 2014). The “healthy immigrant effect” recognizes that although immigrants enter the country with higher levels of physical and mental health than the native born population, these decline after immigration partly due to the stressors of migration, settlement, and racism and discrimination faced by racialized immigrants (Thomson et al., 2015). For most women experiencing GENDER-BASED VIOLENCE, seeking alternative living arrangements and leaving abusive relationships are complicated under the best of conditions. Many immigrant women already experience discrimination because of their skin colour, race, ethnicity, and culture as newcomers to Canada (Du Mont and Forte, 2012).

In addition to the gender, race, and class-based barriers to accessing health and social services, immigrant women are further constrained because their rights and entitlements are tied to their immigration status and the sponsors’ status in Canada (Hyman et al., 2009). Individuals may apply to the Department of Citizenship and Immigration Canada for admission into Canada as a permanent resident under four categories: Family Class Immigrants (overseas or in Canada),

Economic Class Immigrants, Refugees or under Humanitarian and Compassionate (H&C) grounds. Family Class applicants are sponsored by a spouse or other family member who is an eligible Canadian citizen or permanent resident (Jayasuriya-Illesinghe, 2018)

Compared to females, in 2017 a more significant proportion (55.6%) of male permanent residents were admitted under the economic class as principal applicants (sponsors), while even fewer men (28.8%) were admitted under the family class. A similar proportion (14.5%) were admitted as refugees (IRCC, 2019). What this means is that most immigrant and refugee women are admitted into Canada either as sponsored spouses or dependents, or through the Family Class, hence they are mostly sponsored and economically and legally 'dependent' on their male partners. This creates a dependency relationship where the sponsors can take advantage of and abuse their female dependents. The resulting unequal power relationship often begins when the principal applicant threatens to have women deported and/or be alienated from their Canadian children. Canadian immigration regulations impose many restrictions on family class migrants, which includes sponsored-spouses by stipulating the conditions under which they can come to Canada, whether and how long they can stay in the country, and what benefits and rights they can claim (Jayasuriya, 2018). Fear of loss of status and deportation and loss of custody of the children are some of the barriers to care-seeking reported by immigrant women who experience GENDER-BASED VIOLENCE (Guruge, 2014; Hyman et al., 2009). Some service providers have not adopted anti-racism, anti-oppressive principles and may have staff that are not sufficiently trained to work with clients from different backgrounds. New regulations from IRCC, however, are starting to change this as all agencies that receive funding from the federal government must adopt anti-oppressive measures otherwise they become ineligible for funding.

2.2.2. Fear of Family Separation or Isolation

Threatening deportation, not filing appropriate paperwork, or destroying identification and immigration papers, threatening the loss of custody of children, and threatening to inform immigration authorities for real or imagined infractions, are all methods of isolation that spouses may use against women whose immigration status is uncertain or is dependent on them.

Violence against women does not just affect women in a relationship, but it affects children as well. Parental alienation has become a new way to ignore violence against women. Women who are experiencing violence and who attempt to protect their children from domestic violence may fear that their children will be „turned against them“. This could make them lose custody of children which is a great fear of most abused women. For instance, domestic violence shelter workers in Quebec have raised concerns about abused women in the province perceived as “alienting” their children (Lapierre & Côté, 2016). Findings from consultation conducted in domestic violence shelters in Quebec further revealed serious concerns regarding child protection practices in domestic violence cases can involve the likelihood of positioning women as “engaging in parental alienation”. A recent story in CBC News in British Columbia concerned an abused woman who was hoping the law will provide some form of protection for her and her son who has been experiencing domestic violence from her partner (Carman, 2020).

Based on findings of a study conducted by Lapierre and Côté in 2020, they argued that domestic violence perpetrators use “parental alienation” as a common tactic to discredit reports of abuse by women and children. This means that the child protection services and the family court system reproduce the perpetrators' accounts and discredit reports of abuse by women and children, and therefore undermine their core mandate.

2.2.3. Lack of Awareness and Access to Social Services

Another factor that could prevent immigrant and refugee women from seeking for help is their lack of awareness on available resources and Canadian rules and regulations. For instance, proficiency in English among immigrant and refugee women who came from non-English speaking countries may find it very difficult to express themselves in case they want to seek for help from legal services. Research indicates that lack of access to language specific resources and services in immigrant communities prevents these women from seeking for help been it health, social and/or legal services (Erez and Harper, 2018). Likewise, lack of access to services such as language translation and interpretation can be a major barrier for many immigrant and refugee women to seek or access domestic violence service in the country. Also, immigrant and refugee women with non-legal status are not able to access these language services. A study showed that in instances where there are translators present, many have inadequate knowledge of domestic violence hence are unable to communicate women survivors needs and experiences correctly (Erez and Harper, 2018). Many times, certified interpreters are not available so women and shelter services must rely on untrained assistance. Some immigrant and refugee women also prefer female translators because of cultural and religious related reasons. Understandably, the presence of male interpreters may not be acceptable (Wilkinson et.al., 2019). Another study showed that refugee women may experience fear and shame about disclosing their personal experiences especially sexual abuse when the interpreter is male and/or a member of their community with the fear that their story might become a topic for gossip within their community, particularly if the interpreter is a community member (Delara, 2016). Further, because GENDER-BASED VIOLENCE is generally perpetrated by a male on a female, survivors may not feel comfortable using male interpreters in legal and medical matters.(Wilkinson et al.,2019).

As I mentioned earlier, many immigrant and refugee women do not access transitional housing due to their lack of awareness about what transitional housing is and their concerns about transitional home environments and communal living (BC Society of Transition Houses, 2015). These specificities, when associated with other linguistic and cultural barriers, may limit access to transitional housing. For instance, newcomer women from non-English or French countries may find it difficult to express themselves well when trying to seek help available. Their inability to communicate functionally in English or French prevents many from seeking help. Furthermore, immigrant and refugee women have specific needs that directly result from their status and their victimization experiences related to IPV (Abu-Ras, 2007). Immigrant and refugee women, especially undocumented immigrants, may have fear of being deported when seeking for help from agencies or legal services due to lack of documents that prove they are legal to live in the country. This becomes a major barrier for such women to seek help in times of domestic violence. A study conducted in U.S found that undocumented immigrants perceived the host country's policies as a threat to them and their families (Martinez, et al., 2015). In other words, the laws of some host countries do not permit undocumented immigrants access to services, such as health and other social services, hence it becomes challenging for these women to leave an abusive home. Undocumented immigrants do not only fear deportation but also the discrimination they face from these governmental and non-governmental institutions in the host country. The reason why many of the newcomer women without proper documentation major fear of being deported is the fear of losing their children to their abusive partners. This is what makes numerous immigrant and refugee women stay with their partners in dangerous and humiliating situations.

Understanding that violence is experienced differently by racialized communities redirects attention away from the fact that systemic inequalities contribute to the prevalence of IPV, and that there are gaps in services and supports made available to such women. Both public and academic discourses around violence against immigrant women in Canada help reinforce the importance of cultural factors than the structural ones. According to Bannerji (1999), violence against immigrant and refugee women, aggressive and hateful attitudes towards the religion of these women especially towards Islam, become the bedrock of normal community identity. Muslim women in an instance like this might not seek help when they are been abused due to the continuous labelling of all Muslims to be violent. Such behaviour maintains a racist contempt for us, while being treated permissively by the State. Bannerji further explained in her study that there are different ways in which the Canadian state mark out the social “other” and this others implies racism, ethnicization and homogenization.

In addition, the media also play a major role in reinforcing existing systemic marginalization of immigrant and refugee women. Popular media highlight and depict violence against immigrant women, including IPV and intimate partner violence, as culture-driven (Caplan, 2017). For instance, the term “honour killing” is used to denote a specific deliberate crime against women of a specific ethno-cultural group, generalizing this to indicate violence experienced by all ethno-racial women in all communities. Canada reinforces the systemic marginalization of immigrant and refugee women in the country. This further draws the attention of people from the structural barriers faced by these women by focusing on their communities. Reitmanova and colleagues (2015) in their study indicated that negative representations of immigrants in the Canadian Press persist despite compelling evidence that these emotionally charged ethnic stereotypes have no basis in scientific fact. The racist

ideologies on which these representations are based are both morally wrong and resistant to change. Falkof (2019) also discussed the issue of discrimination against certain group of women in the media, the unsympathetic coverage of violence against women in the news or media. The media choose the type of information to publish for its viewers and which not to publish (Falkof, 2019). In Canada, the media represent violence against Indigenous women as victims of GENDER-BASED VIOLENCE in similar, unsympathetic ways. A good example is the murder of Tina Fontaine, whose body was recovered in the Red River in Winnipeg in 2014. The media presented Tina Fontaine as a sex worker and a drug addict which drew people's attention from the perpetrator to victim blaming.

Although cultural norms and beliefs and social factors also create additional barriers faced by immigrant and refugee women. For some women, social and cultural norms can create stigma and shame for those who speak about violence experienced in their relationships (Thurston et al., 2013; Alaggia et al., 2009; BC Society of Transition Houses, 2015, Bannerji, 1999). In some cultures, women are not willing to leave their abusive homes, especially immigrants, married women who still hold onto their traditional/ religious ideologies and the fear of social stigma from their communities. Research conducted on Intimate Partner Violence against Portuguese aged women in Canada found that participants' personal beliefs, and their legal situations as immigrants in Canada, may influence their action, either in a way that would try to maintain their relationships or tried to escape the violent situation (Souto et al., 2019). In other words, internal barriers (such as emotions and perceptions), traditional gender roles, and cultural norms are also factoring that could influence a woman's decisions to seek help. As women age, their social support networks change, friends and family move, and community resources decrease, all of which result in the need for emotional/personal support (Souto, 2019).

As a result, the responsibility for addressing immigrant and newcomer women's vulnerability to GENDER-BASED VIOLENCE tends to be placed on the women and their communities. Women are referred to as bearing the burden of their culture, without having to recognize that government policies have created conditions that systematically increase certain population groups vulnerability to abuse (Jayasuriya, 2018).

2.2.4. Social Determinants of Health

Social determinants of health such as social (e.g., interpersonal and family violence) and physical (e.g., appropriate housing) environments, and migration, can undermine the health of immigrant and refugee populations (Mental Health Commission of Canada, 2016). In addition to availability and accessibility of health, social, and welfare services, a sense of stability and income security that enables one to live independently and support themselves are important, yet often challenging conditions that prevent immigrant and newcomer women from seeking IPV-related services in Canada (Alaggia et al., 2009; Bhuyan, 2012). Intimate Partner Violence (IPV) has serious effect on the mental health of women in general. A study conducted on the Intimate Partner Violence and Depression Among Latin American Women in Toronto research group found that almost all the participants had experienced psychological abuse often prior, during or following physical and sexual assaults by intimate partners, and this, the survivors indicated had a very strong connection between their mental health problems and their lived experiences of IPV (Godoy-Ruiz et al., 2015).

Violence against women has both physical and mental health consequences that continue even after the violence has stopped, resulting in serious public health implications. Psychological health consequences such as depression, anxiety, trauma symptoms, feeling of been trapped, constant fear, stress, worry, and nervousness, disrupted sleep patterns, experiencing sadness and

suicidal ideation are examples of some of the experience of women survivors of Intimate Partner Violence as indicated in studies (Thompson, 2021). This is a clear indicator of psychological distress women undergo during and after violence. Reports around the world shows that there is often a close connection between Intimate Partner Violence and mental health, with the recent pandemic even had a more profound effect on people's mental health (Thompson, 2021; WHO, 2020).

2.2.5. Lack of social support

Social support is very crucial for immigrant and refugee women, and this could be a potential factor that may protect them from adverse mental health. Migrating into a new environment can be a little frustrating, especially when the new environment has a very different culture altogether. Migration has a profound impact on the lives of immigrant and refugee couples, for some women, the process of immigration often includes the acquisition of new language and culture as well as changes in both social status and income level. In instances where these women move into Canada without their extended families who would give them social support in times of difficulty, mental distress and violence in the home can lead to isolation. In this sense, social ties or social support give meaning to immigrant and refugee women life by providing them with full participation and attachment to their community and an obligation to be even a supporter for others (Delara, 2016). According to Delara (2016), social networks may influence mental health status of immigrant women by promoting social integration which refers to the “involvement” with ties spanning the range from intimate to extend. Research finding revealed that social support can have a positive effect on immigrant women's mental health and well-being and facilitate social inclusion and the use of health

services (Guruge et al., 2015). This shows that when social support or social network is lacking, it could have negative effects on immigrant women's mental health (Guruge et al., 2015).

COVID-19 has worsened the conditions experienced by immigrant and refugee women who are experiencing GENDER-BASED VIOLENCE. With the recent implementation of lockdown in many countries, physical distancing measures to contain the spread of COVID-19 further limits women's ability to access services or organizations for help in times of abuse or emergency. These women are confined in one place with their perpetrators and unable to reach out for help or support from family members, close friends or organizations who could otherwise support them. To many women, their access to help during lockdown due to the pandemic was cut off.

Call volumes at centralized help resources have also rapidly increased during the COVID-19 pandemic restrictions. Reports from April 1 and September 30, 2020, further indicate that Canada's Assaulted Women's Helpline received 51,299 calls compared to 24,010 in 2019. Between September 1 and December 31, 2020, the centre recorded 20,334 calls from abused women, compared to 12,352 in 2019 (Thompson, 2021). In short, the number of women requesting assistance to escape from violence in the home has roughly doubled due to the pandemic. There are no reports about the number of callers who are immigrant or refugee women.

Women who experience partner abuse may need social support, for several reasons. However, some abused women may not disclose abuse or seek social support because they may feel stigmatized if others know of their abuse, they may see violence in the home as a private matter, or they may fear retaliation from their partners if they disclose the abuse (Guruge, 2012).

Hence, isolation is a significant predictor of abuse because isolation prevents women from seeking support (Rai and Choi, 2018) and the pandemic restrictions have only exacerbated their situations.

Yet another contributing factor for the continues violence against immigrant and refugee women in our communities is victim blaming. The community members that are supposed to support these women to flee any abuse may be the ones discouraging women from leaving an abusive home or from seeking assistance. Akinsulure-Smith and colleagues (2013) in their study that West African women who sought support from community and religious leaders after experiencing abuse reported dissatisfaction with the responses they received because of the organizations blamed the women for their situation and for not leaving abusive relationships.

2.2.6. Socioeconomic status

Employment rates for dependent immigrants, who are disproportionately women, are lower than for the principal applicants in the skilled worker category (Jayasuriya, 2018). This suggests that temporary employment may be particularly significant among immigrant women insofar as they face poorer labour market prospects than their male counterparts generally and experience greater pressures to accommodate employment to the demands of household labour. According to the 2016 Canadian Census, newcomer immigrants, particularly women and 'visible minorities,' are more likely to be unemployed and living in poverty (Jayasuriya, 2018). There is evidence that socioeconomic status of immigrant women displaying itself as lack of finances can influence immigrant women's help-seeking behavior (Delara, 2016). This shows that there is an association between mental health and women's economic status. The psychological mechanism underlying the association between mental health and women's economic status becomes clearer when adopting a broad definition of poverty and wealth, which encompasses the need for

empowerment, freedom, and autonomy over the circumstances determining immigrant women's life and health (Delara, 2016).

They are unable to find work or take a long time to do so and take up jobs that are not commensurate with their previous education and work experience. Some immigrant and refugee women have challenging economic circumstances that may put them at a further disadvantage in accessing affordable housing. Although educational attainment is higher among the immigrant population, the labour force participation rate is lower when compared to Canadian-born women (Statistics Canada, 2015). In addition, women without legal status or without a work permit are not able to work or access to services like English language classes due to federal immigration regulations.

Immigrant women who have children and want to leave their abusive relationships can find it difficult because of a lack of or insufficient child benefits to sustain themselves after leaving. For new immigrants' children in Canada, they need to live in Canada for eighteen months before they are eligible for child benefits. To confirm this, I called the Manitoba Child Benefits Centre, and confirmed that for an immigrant child who is new in Canada, she/he needs to receive Canada Federal Child Benefit before he or she becomes eligible for the Provincial Child Benefits (personal communication, 2020). As a result, for a new immigrant or refugee woman who has remained with her partner for less than one year but want to leave the abusive relationship with her kid(s) she faces a lot of financial challenges. Because of this condition, most women choose not to leave but stay in the relationship and endure the pain because the economic consequences of leaving are too harsh. Even those who are eligible for these benefits but do not have jobs, the child benefit might not be enough to take care of their bills, considering the amount a child receives a month (\$420.00) in Canada. As a result, they would have to pay for

daycare to be able to go to work, pay rent, and most at times, they are unable to take full-time jobs because of their responsibilities. Imagine an immigrant or refugee woman working a part-time job with a low-income rate but at the same time must pay for her child(ren) daycare.

Furthermore, some newcomer women experience gender discrimination at the workplace. Research indicates that many immigrant women work in informal sectors than men occupying lower professional ranks and lower wage jobs and as a result, they experience differential employment conditions and work-related mental health risks (Delara, 2016). In addition to the above, some policies and regulations in host societies are gender-based. For instance, for women who are sponsored dependents, this legal category makes them ineligible for various government benefits, job training, and other services (O'Mahony and Donnelly, 2010) which would greatly benefit them if they were to leave abusive relationships. The World Health Organization conceptualizes gender as a powerful structural determinant of mental health that interacts with other determinants including age, family structure, education, occupation, income, and social support. With respect to gender differences in mental health outcomes such as depression and anxiety, gender has explanatory power and must be viewed as a determinant of mental health (WHO, 2000).

2.2.7. Sense of Belonging

Social belonging refers to one's psychological sense of connectedness with their surroundings (Hagerty et al., 1992). One major factor that influences the mental health of immigrant and refugee women in Canada is the availability of social networks or social support in her community. According to Delara (2016), social connections provide the basis for intimacy and attachment which has meaning both for intimate and for more extended ties. In other words, when newcomers' social relationships are strong, they feel powerful bonds and attachments to

places such as neighborhood. A study conducted by Berret and his colleagues (2020) on survivors of Intimate Partner Violence identified that there was a significant association between social belonging and an increased probability of seeking support from friends or neighbours. Creating social connections or networks for immigrant and refugee through opportunities for engagement such as in community roles could give them a sense of identity, value, belonging, and attachment. There is evidence that possessing social rules promote self-esteem and self-worth which in turn reinforce adaptation to stressful life events and prevents depression. A successful integration of immigrant and refugee women provides them opportunities which in the long run gives them a sense of belonging in the community they find themselves. Evidence shows that some factors such as discrimination and lack of social network can hinder immigrant women to be successfully integrated and included in the new society and consequently making them socially excluded (Delara, 2016). Lack of these factors mentioned above manifests themselves as lack of social support, social influence, or social exclusion and this is significant determinant of immigrant women's mental health.

The need to question the primacy of gender becomes apparent when one realizes that the violence and control by an individual abuser is not the only form of violence experienced by marginalized survived women (Dupont and Sokoloff, 2006; Jayarisuya, 2018). Instead, a lack of adequate institutional support in the form of social services and public housing, as well as the intrusions and coercive controls by the state and its agencies (e.g., welfare) are another level of violence experienced by abused women, which occur in ways that are racialized as well as gendered and classed.

Although the immigrant population is heterogeneous (i.e., from different origin countries and having many different reasons for leaving their homes and arriving in different years for

different reasons), there are certain characteristics and barriers that are shared by them in their host countries that may help increase their vulnerability to experiencing different types/forms of victimization. For example, some of the women immigrated without proper documentation, some are confronted with cultural differences and alienation due to social isolation resulting from the migratory process (Gonçalves & Matos, 2016). Others have a subsequent lack of social support (Garcia-Linares et al., 2004) and experience social exclusion, poverty, and economic dependency because it is difficult to find a job (Algan et al., 2010). These specificities related to their immigrant status, when associated to other linguistic and cultural barriers, may even limit the access to protection, for example, when a woman is illegal in the host country and/or has no access to information about the specialized services available (Freedman and Jamal, 2008).

Housing plays a very central role in settlement, especially among newcomers. Adequate and affordable housing, identified as an under-provided resource, is critical to facilitating a woman's ability to leave a violent relationship (BC Society of Transition Houses, 2015). Although Canadian-born women face numerous barriers to fleeing violence and accessing adequate and affordable housing, additional difficulties faced by immigrant and refugee women can exacerbate these barriers and can create new ones.

2.3. Conclusion

This chapter examined how gender-based violence can affect the lives of newcomer women in Canada. I recommended the need for a sociological understanding of Gender-Based Violence especially since there are multiple structural barriers that make it difficult for newcomer women to leave abusive conditions. Jayasuriya-Illesinghe and other scholars argued that structural barriers are more threatening to immigrant and refugee women experiencing GENDER-BASED VIOLENCE. In addition, I illustrated how GENDER-BASED VIOLENCE and the experiences of immigrant and refugee women as newcomers in Canada intersects. It is for these reasons that a theory of intersectionality is the most

appropriate analytical framework to use in the thesis. The next chapter briefly outlines the methodology for this work.

Chapter Three: Methodology

3. Introduction

This chapter outlines the methodological procedures I used to address the research question. I begin this chapter with a discussion of type of research approach I adopted and then discuss the methods I employed to select, recruit, and interview research participants and a section on the international part of the study. Further, a section on ethical concerns is described, and issues relating to ethics, data analysis, and an overall plan of the study are also presented in this chapter.

3.1. Qualitative Research

My study employed a qualitative research approach which is the most appropriate methodology to address my research question. In this research, one major objective was to empower research participants, and as such there was the need to create the space so that the voices of newcomer women could be heard. For this reason, interviews were determined to be the best approach.

A qualitative approach helps us to understand the meanings and context of women's experiences, their values, perceptions and attitudes about intimate partner violence. It offers the opportunity to listen to the participants and place them at the centre of the analysis. The qualitative research strategy recognizes humans as active and creative and constantly negotiating through their actions to construct and sustain the meaning of the world around them. The research questions are best answered through an interpretative approach that tries to explain and understand social phenomena and their contexts (Snape and Spencer, 2003), through people's meanings and perspectives, individual feelings and experiences of their everyday lives.

Such meanings could not easily be attained using impersonal numerical formulas and statistical measures (Strauss and Corbin, 1998), but understanding was achieved by asking questions concerning their lived experiences on gender, class, and race. As I used the Intersectionality theory as a framework in this study, questions such as: “As a woman, do you think you have faced a different problems/difficulties from men?”; “Do you think you have faced different problems/difficulties from those faced by women and men generally in this country?”; “What are your experience/views on accommodation situations?”; “What are your experience/views on your current economic situation?”; “What are your experience on religious groups/faith organisations?”; “What are your experiences on your relationship to ‘community’/your wider relationship?”; “And how do you feel about how others perceive you in this country?” (See appendix A for full interview guide). These questions gave research participants voice and enable them to speak more about their lived experiences, inequalities, and intimate partner violence. The contributions of my participants helped me to better grasp how gender, class, and race influence their daily lives and understand the conditions of immigrant and refugee women in Canada. I believe that my findings are helpful for researchers and social movements who fight for women’s rights.

3.2. Data collection method

Qualitative interviewing is a data collection tool that is useful in different methodological approaches which may be used in addressing several research questions. Among the inherent benefits of conducting qualitative interviews is that it gives the researcher a detailed and flexible understanding of individuals’ beliefs, perceptions, and accounts relating to issues (Lloyd et al., 2006). Striving for an understanding of newcomer women's subjective perspective on gender-

based violence rather than generating generalization of such group of people, qualitative interviews become the appropriate method to use compared to other methods (McGrath et al., 2019). In addition, the qualitative interview gives minority groups such as newcomer women a voice in the society which may not be heard elsewhere (Reeves et al., 2015).

3.2.1. Interviews

To gain a “greater breadth of information” (Boyle et al., 1998), and to help understand how participants make meaning of their lives in their different gendered domains, I used semi-structured interviews to allow for flexibility and enable participants to share their perspectives without imposing a structure on them. Semi-structured interviews consist of several key questions that help to define the areas to be explored. This allows the interviewer and interviewee to diverge and probe in order to pursue an idea or response in more detail. The flexibility of this approach, particularly compared to structured interviews, also allows for the discovery or elaboration of information that is important to participants but may not have previously been thought of as pertinent by the research team. Moreover, the purpose of a research interview is to explore the views, experiences, beliefs and/or motivations of individuals on specific matters (Alabi, 2017).

An interview schedule was followed for the semi-structured interviews to help focus the interviews and to provide standardization across the national and international teams (See in appendix for interview schedule B). To enable a detailed examination of the data collected and considering the limitations of writing responses *verbatim*, I audio-recorded all the interviews (with participants’ permission), which was subsequently transcribed. The Interviews took 1 - 2 hours to complete.

Due to the recent implementation of pandemic restrictions, with the need to observe social distancing protocols, the Research Ethics Board at the University of Manitoba required the interviews to be conducted electronically. As a result, I conducted all the interviews via videoconference using Zoom to be able to observe health protocols. Despite getting the ethics approval to conduct interviews on video conference, there were limitations with conducting the interviews on mediums such as videoconference/phone. The researcher was not able to fully read and comprehend the body language and facial expressions of participants which are very important in conducting qualitative interviews. Most of the participants did not want their faces to be seen, hence, they kept their video cameras off. Also, some of the participants got triggered talking about their past experiences and subsequently needed immediate emotional support or break to recover, but I was not able to notice these signs as their cameras were turned off. This confirms studies conducted by (Agllias, 2011 & Campbell et al., 2010), indicating that in conducting qualitative interviews on vulnerable populations or sensitive topics tends to be emotionally intense and distressful to participants. I kept reminding them that their participation is voluntary, and they may discontinue the interview should they feel to do so, but all the participants insisted they wanted to continue with the interview and indeed finished the interview. Some of them argued that although sharing their experiences was difficult, their stories needed to be heard with the hope that talking about their experiences may be of benefit to others (Wolgemuth et al., 2015). Moreover, I could not give respondents the needed emotional support in person since the interviews were conducted online. However, a list of resources and their contact information were sent to all the participants where they could seek assistance. (See Appendix E for the list of resources) In all social science research, the researcher must develop a personal relationship with the research process such as establishing trust with research

participants. It is important for the researcher to develop a good rapport with participants to be able to gain their trust in order to share their experience without any resistance. While this is important to develop an emotional empathy towards the research, it is critical not to allow this empathy to influence the outcome of the research.

Despite the importance of conducting qualitative interviews, there are inherent risks associated with this activity (Love et al., 2021). This is because in instances where the abuser and participant live together or abuser is in proximity to participant could affect the safety of the participant. This was the case with one of my participants as it was not safe for her to be interviewed on the scheduled date because her partner was in the house. As a result, I had to reschedule her interview several times for safety concerns. A study conducted on challenges of conducting qualitative research on abusive intimate partner relationships found that interviewing a participant in proximity of perpetrator places participants at risk of further violence (Love et al., 2021). This was further exacerbated by the Covid-19 as participants were confined to one place and in some cases with the perpetrators.

However, I managed these limitations by making sure all participants I spoke to on the phone or interviewed, it was safe to do so. And in instances where I phoned participants to follow up, I ensured I did not leave detailed messages with family members or on answer machines about the nature of the study.

3.3. Participants

My role in the larger Canadian project allowed me to interview immigrant and refugee women in the western provinces of Canada (Manitoba, Saskatchewan, Alberta, and British Columbia). Participants included immigrant and refugee women who currently live or used to live with abusive partners, have experienced abuse, and are currently 18 years or older. In total, I

interviewed six respondents including three refugee women and three immigrant women who are part of my thesis and the larger research project. All the three refugee women interviewed were currently living with their abusive partners while the three immigrant women were no longer living with their abusive partners, one was divorced and the other two were separated. Out of the six participants interviewed, two of them were temporary residents without proper documentation and this limited their ability to seek help or eligibility for social assistance. Many of these women were legally and financially sponsored by their partners who subsequently abuse them so many women continue to endure the violence due to the fear of deportation. This makes this group very vulnerable to gender-based violence, a major theme of Chapter 4.

This research is extremely sensitive; hence it was very difficult to recruit and identify experiential women due to the sensitivity of the topic. Recruitment was further hampered by the pandemic of 2020/21 and the need to conduct interviews online which meant that some women (lower income, remotely living women) did not have access to the materials they needed to participate in an online interview. Connections with service providers in shelter homes for abused women and with immigrant settlement workers in these four provinces assisted in the recruitment for this study. See Participant selection process section below explaining in detail how recruitment was made.

The coronavirus pandemic meant significant changes to our original research and recruitment design. Lockdown measures in Canada meant that for many women, it was physically impossible for them to escape abusive homes and seek shelter. This made recruitment extremely difficult at this time and reduced the number of women I was able to interview for this thesis and the larger project.

The pandemic, however, made it an important time to study gender- based violence among newcomer women. Studies have indicated that the number of reported cases of domestic violence to service providers has declined in many countries (World Health Organization, 2020). Yet the actual violence has increased in most countries including Canada, the second wave of the COVID-19 pandemic did not stop the rise of domestic violence reports in Canada (Thompson, 2021). This may be due to women's inability to leave the home or access help privately whilst confined with a perpetrator. Recruiting immigrant and refugee women through shelter homes for abused women created limitations in my data collection since the number of women reaching out to these organizations had declined, but this method was the most prudent way to obtain participants for the study.

Perpetrators of intimate partner violence may use COVID-19-related concerns to exercise greater power and control over their victims, including limiting access to critical information and resources, and monitoring communication (e.g., telephones, mobile/ internet), thus making it difficult to contact support services, and access health service should there be a need for support. For instance, one of the participants I interviewed was currently living with her abusive partner. She had to hide in her garage to call me to schedule a meeting just in case he returned home during our call. We tried three times to conduct the interview, it was only on the third try that we were able to talk because her partner was at home during our first two attempts. This indicates how Covid-19 is affecting the lives of women.

Yet another significant limitation is participants' access and knowledge on how to use internet communication technology. This is especially the case with older women who do not have computers or smart phones which would enable them to participate in an online interview. Others who were willing to participate in the study were also having the difficulty in signing

unto Zoom because they are not familiar or have not used it before, which made it very difficult to include more participants.

3.4. Participant selection process

Qualitative research uses nonprobability modes of participant recruitment. In this study, the researcher contacted the managements of Shelters for Abused Women and newcomer settlement organizations in the western provinces. An invitation letter, a poster, and other recruitment documents explaining the purpose and objectives of the study were sent to them and sought for their help and consent to recruit women migrants and refugees from their organizations who have had the experience of Gendered-Based Violence (GENDER-BASED VIOLENCE) to participate (See Appendix F for recruitment documents). I included posters which were shared on their organization websites, various social media platforms, and among their clients who were interested in participating in the study. I received confirmation emails from the managements of some newcomer organizations approving to help the research team recruit immigrant and refugee women for this study.

The recruitment process continued until the researcher received permission from 6 participants who agreed to be interviewed. I transcribed these interviews and shared with the research team. The recruitment for the larger team project continued after this but I had to leave the project early for personal reasons.

3.5. Study Area

I collected the data with the help of Shelter Homes for Abusive Women in the four western provinces. The team prepared and distributed a recruitment letter to agencies that either deal with women experiencing domestic violence or immigration settlement agencies that assist such women (See appendix C for list of agencies). With the help of management of these

shelter homes, the researcher was able to contact some of the women who have experiences abuse and were still living in the shelter homes or women using various immigration settlement services. In the situation where these women were no longer living in the shelters, the management made connections with them to find out if they were interested in participating in this study. The management of these organizations also helped with the recruitment process by sharing posters of our project on their organizations' websites and other social media platforms. Through that advertisement, some participants contacted the researcher directly and showed interest in participating in the study.

3.6. The International Part of the Study

My thesis research was made possible due to a grant from the European Union and the governments of Canada and Israel under the Gendernet Plus Research Consortium in 2020. In Canada, funding was provided by the Canadian Institutes for Health Research under grant number CIHR CNG406470. Under the direction of Dr Jane Freedman, University of Paris, the project brings together 26 researchers from 8 universities across seven different nations to study aspects of Gender and Sexually-Based Violence as experienced by immigrant and refugee women (Freedman et al., 2021). The goal of the study is to highlight best practices in domestic violence services provided to newcomer women and to understand if social context plays a role in how violence is addressed.

Evie Tastsoglou, Saint Mary's University, is the lead investigator for Canada. The team consists of Kathy Holtman at University of New Brunswick, Myrna Dawson at University of Guelph, and my supervisor, Lori Wilkinson at the University of Manitoba. We are joined by three postdoctoral fellows Chantelle Falconer (Saint Mary's), Mia Sisic (Guelph) and Pallabi

Bhattacharyya (Manitoba). My role was the research assistant and interviewer for the western region, consisting of Manitoba, Saskatchewan, Alberta, and British Columbia.

Before the pandemic, our intention was to send me out to the main cities of each province to conduct the interviews in person. A face-to-face interview is more personable and we had promises from various shelters and newcomer settlement agencies to provide us with the private space necessary to conduct interviews in private. Sadly, our plans were derailed as weeks after we received the grant, all eight research teams were restricted to virtual work only. In fact, none of the countries has been allowed to resume in person interviews at the time of writing this thesis. Although interviews are currently ongoing, we are hopeful that some of them can be conducted in person.

The sample goal for Canada is approximately 75 experiential immigrant and refugee women. Given the pandemic, the larger study is uncertain that we can reach that goal, having only been able to interview 26 women during the lockdown. My interviews are confined to the six women that I was able to interview personally. These interviews are part of the sample for the larger Canadian and international components of the study.

3.7. Philosophical paradigm

Research in the social sciences is guided by a philosophical paradigm on how knowledge is constructed and generated. These paradigms set the parameters on how a phenomenon could be studied. For this research, the interpretive/constructionist paradigm was adopted in studying the experiences of abused women. The adoption of this paradigm is first premised on the position that our knowledge of reality including human action is a social construction by human actors, which equally applies to researchers. Constructionist perspectives place more emphasis not just

on what participants say but how they say it, the meanings they create, and how these are related to the processes by which people narrate their identities.

No objective reality can be discovered or identified by researchers. Results cannot be replicated much like positivists presume (Guest, Namey, and Mitchell, 2012). Constructionists argue that in order to understand the experience of women, we should listen to the people studied rather than explain the human phenomenon through cause and effect as we would do in positivism. Another reason for choosing this paradigm is that social reality is constructed jointly through meaningful interaction between the researcher and the researched, which takes place within the context – political, social, economic and culture – of the researched (Rugg and Petre, 2007). In other words, this study is rooted in the constructionist approach with the assumption that knowledge, meaning, and understanding are “individual constructions of reality” and that knowledge is created, maintained, and altered through an individual’s interaction with and within his or her discourse community rather than discovered (Guest et al., 2012).

The focus of this research is on understanding the experience of violence among immigrants and refugee women and its effect on their psychological well-being and integration process in Canada. And therefore, how the participants understand and interpret their ideology on violence and how this is influenced by the context in which they live and work. Within these contexts, participants have different and multiple meanings and interpretations, which are subjective. This study looked for these multiple meanings and interpretations given to violence against immigrant and refugee women to generate multiple categories for analysis. Acknowledging that social reality is subjective, this study envisions those different interpretations will be encountered even though similarities are not ruled out. In adopting the

constructivist approach in this study, the participants are given the opportunity to greatly express their opinions and viewpoints with respect to violence against women.

3.8. Support and Dissemination of Results

This study is a very sensitive topic, as it recalled some unpleasant memories of some of my participants during the interview process. However, I was able to manage this by first reminding them that participation is voluntary and may discontinue anytime. All the participants argued that even though sharing past experiences was hard, they believe sharing their experiences could empower or be a source of encouragement to other women who are experiencing violence (Wolgemuth et al., 2015). Secondly, I sent each participant a list of community resources with emergency contact even before the interview took place. Some of the participants were living with their abusers hence I made sure it was safe for them to be interviewed for safety reasons. In an instance where it was not safe, I stopped and postponed the interview.

Also, after the interview, I followed up with all my participants to be sure they were safe (Wolgemuth et al., 2015). In an instance where I followed up with a phone call, I made sure not to leave a detailed message of the project with family members or an answering machine. Some of the participants also contacted me afterwards for other community resources contact information such as immigration law offices, which were sent to them. Again, this study is part of the bigger project as already discussed in the participants selection section above. We were able to recruit newcomer women with the help of shelters for abused women and settlement organizations. And because one of my major objectives was to empower my research participants and to create the space for their voice to be heard, the findings of this study were

shared with all the participants as well as the organizations that helped us with the recruitment process.

3.9. Data Analysis

The simultaneous collection and analysis of data are integral to this research process, following Attride-Stirling's (2001) method. A theoretical foundation provides a framework for inquiry, but it is the data collection and analysis processes and the outcome of those processes that are paramount (Guest et al., 2014). A thematic approach was used based on the interface of data collection, analysis, and interpretation, going back and forth to code data into central ideas/concepts. The coding involves identifying relevant data within each data item, and then labelling them with a few words that captures the meaning of that data segment to the researcher. As suggested by Terry and his colleagues (2017), a good coding is open and inclusive, identifying and labelling all segments of interest and relevance within the dataset, and everything that is of relevance within those segments.

As an interpretative study, the researcher carefully read the data several times to gain familiarity. Reading the transcripts several times allowed me to look for key words, trends, themes, or ideas in the data that will help outline the analysis, before any analysis takes place (Guest et al., 2014). The thematic analysis seeks to unearth the themes salient in the text at a different level. Clearly, the process of deriving themes from textual data and illustrating these with representation tool is well established in qualitative research (Attride-Stirling, 2001).

Common concepts were then derived from the narratives and named based on the context (Strauss and Corbin, 1998) as the data was transcribed, coded, and critically analyzed. Interview extracts based on the concepts were copied to another file as a basis for categorizing different phenomena. Concept identification was simultaneously repeated in the process of transcribing

interviews, supplementing with participant observation field notes by coding, building concepts and categorizing into thematic issues. As indicated by Coffey & Atkinson (1996), an open approach to qualitative coding is more grounded in the data and relies on the participant's own words or phrasing. As a result, the researcher stayed close to the participant's own words when naming the concepts or codes. I read the transcripts several times to allow themes to emerge inductively, which enabled the researcher to view the data in new ways that has been taken-for-granted knowledge.

Transcribed material was categorized by reading reflectively, based on Watson and Wilcox's close reading method "zooming in" (2000), enabling the researcher to identify themes and gain a deeper understanding of the data. Themes are extracted based on connections, and comparisons were added to previously defined categories, ensuring that they are related to the gendered discourses and research questions. According to Charmaz (2000), categories structure emerging analytic frameworks. Intersectional theory helped the researcher to understand how gender, race, culture, and class impact immigrants' and refugees' experiences of Sexual and Gender Based Violence.

Although thematic analysis has proven to provide qualitative researchers a process for ensuring rigorous and systematic engagement with data. And to develop a strong and defensible analysis that is independent of any predetermined theoretical framework, reliability is of greater concern with thematic analysis than with word-based analyses because more interpretation goes into defining the data items (i.e., codes) as well as applying the codes to chunks of text (Guest et al., 2012). Studies have indicated that this limitation is even more pronounced when working in teams with multiple analysts (Guest et al., 2012). To maintain rigor, strategies for monitoring and improving intercoder agreement, and therefore reliability, should be implemented in the analytic

process. To achieve this, first I gave a clear description of the coding and reliability testing which I used in this study to assist in demonstrating rigour in the analysis. Reliability here means been consistent with judgment to lessen the contamination of projection. Secondly, a well description of my methodology also helped me demonstrate and ensure the same effect.

Furthermore, thematic analysis has been criticized for not really being a particular or distinctive method, but as simply referring to a process for identifying patterns, something common to many qualitative approaches. This critique relies on the merging of method and methodology (Terry et al., 2017). This was mitigated by ensuring that there was a rigorous and systematic engagement with the data to develop a robust and defensible analysis, that is independent of any predetermined particular theoretical framework.

3.10. Reflexivity

Reflexivity involves questions such as what do I know? How do I know it? Who am I? Who have I been? In what ways might I affect data collection and analysis? And how knowledge is acquired, organized and interpreted? (Pillow, 2003). It is very important for the reader to know that I am taking on this research because of my background as an immigrant and a Black woman who is racialized. I have also had a prior experience of intimate partner violence, but this happened before I migrated to Canada. It is my responsibility to understand the research participants, their past, circumstances, suffering and traumatic experiences in order to capture the essence of their reality and develop reciprocity through listening and equal research relation. While this is important to develop an emotional empathy towards the research, it is critical not to allow this empathy to influence the outcome of the research. That said, having had this experience myself and being a racialized newcomer to Canada, I do have an understanding of some of the experiences of the women I met. That said, no one's experience is the same—and I

have endeavored to keep that in mind as I approached the interviews, analysed the data and have written this thesis.

In conducting this study, I made it a point to establish some self-reflexivity. At the stage of data collection, through the in-depth interviews, reflexivity is established by building a cordial relationship with the interviewee to understand from her/his point of view and what her/his opinions are with regards to the peace processes. Moreover, in the process of interpreting the data, I took a personal reflection about the meanings of the data generated. This helped the researcher to come out with conclusions based on the opinions of the respondent, the views of the researcher, and what is contained in the literature. This perspective is what defines the constructivists' view about knowledge and how it is constructed.

3.11. Ethical Issues

Ethics approval was attained from the Psychology and Sociology Research Ethics Board of the University of Manitoba (see appendix D). Ethical approvals from Saint Mary's University, University of New Brunswick, and University of Guelph were also obtained before conducting the research.

Before I started any interview, I provided a summary of the project, detailing the objectives of the research and participants' involvement in it, emphasizing the fact that participation is voluntary. An information sheet and invitation letter were emailed to the participants prior to the interview. In addition, before scheduling interview date/time for each interview, consent form, contact information, and list of community resources forms were sent to participants that further explained the purpose of the research and stated that their participation is voluntary. The women were also told that they were free to leave the research at any stage. All women completed the entire interview and consented to having their data shared as part of the

project. As part of the consent process, participants were asked to sign the consent forms indicating the participation is voluntary and have also given their consent to record an audio of the interview. Since the researcher could not conduct a face-to-face interview due to Covid-19, the consent forms were sent to them by email to read and sign and send back before the scheduled date/time of the interview. For those who could not return the form before the interview, I read the consent forms to them and sought for their verbal consent at the beginning of the interview and was recorded in the audio.

At the beginning of the interview, I introduced myself and the project and sought their informed consent to participate. I was aware of the potential vulnerability of the participants and of some sensitive questions that might be directed to them. Participants were asked questions about various forms of abuse they might have experienced, which could emotionally disturb them because they might recall unpleasant memories. as a researcher, I must listen to their voices and consider their hardship, suffering and the traumas they might have been through. If any of my participants experience any sort of distress or psychological breakdown during the interview, I immediately paused the interview and offered participants help by giving them a break and also reminded them that the participation is voluntary and that they are free to withdraw from the study anytime or continue some other time. There were two instances where a respondent paused or cried while sharing their experiences with me. This is understandable given the nature of what we were discussing. I paused the interview the moment I noticed or sensed that they were getting very emotional and gave them support, and suggested for them to take a break. All the women wanted to continue and complete the interview, so after a pause, we continued. A list of available community resources including emergency contacts was provided to the women after the

interview. The phone number of my supervisor, plus the canadian lead of the project was also provided. No one contacted Dr Tastsoglou or Dr Wilkinson.

As part of the ethical procedures, I removed personal information such as respondents' identity, names and personal information that may lead to the identification of a respondent. I explained all the procedures we use in this study to protect confidential data and removing all identifying information. I also assured the women that any information of their identity is anonymous. I also asked each participant to provide a pseudonym that the research team could use in the final report, this thesis and any future publications and presentations.

An honorarium, in the form of a \$30 gift card sent electronically, was approved by the REB and distributed to all the women as thanks for their time and for sharing their important information with the team.

3.12. Conclusion

Although this was not the first time I was conducting interviews specifically semi-structured interviews, I came to realize that women need to tell their stories and speak against the gender-based violence they have experienced especially among the newcomer communities. These experience or stories could empower not only individuals who narrate these stories but also policy makers and academics and to understand how violence against immigrant and refugee women could affect their mental health and integration process in Canada. I learned more about sensitivity and approaching difficult topics and I learned more about myself during this process.

Chapter Four: Findings

4. Introduction

Gender-Based Violence against women is a social and health problem experienced in all societies. Sadly, GENDER-BASED VIOLENCE as experienced by immigrant and refugee women is ignored or unfairly stereotyped as part of the culture. This, when combined with a system that prevents women who are dependent either financially or legally to their abusive partners from obtaining financial or social assistance, makes it very difficult for this group to escape and report violence. Studies worldwide indicate that the barriers faced by newcomer women are similar (Gonçalves et al., 2016). Violence against newcomer women can lead to further marginalization, especially when societies ignore GENDER-BASED VIOLENCE in newcomer communities (Jayasuriya, 2018). An example, which received great coverage in the Canadian media, is what has been described as the ‘honour killing’ of four family members in Kingston Ontario in 2009 (*National Post*, 2015). The Shafia family immigrated from Afghanistan to Canada in 2007 via Dubai and Australia. Three sisters and their stepmother (posing as an aunt) were killed by their parents and their 19-year-old brother for bringing dishonor to the family because the females were acting “too Canadian”. In stigmatizing the horrific event as an ‘honour killing’, the Canadian media was contributing to the unfair stereotype that Muslim families are violent. In turn, this stereotype makes it less palpable for community organizations to address GENDER-BASED VIOLENCE for fear that they are further stereotyping an entire community. Such discriminatory labelling is the reason why some newcomer women do not get or may not seek for help in times of abuse because they are afraid of drawing negative attention to themselves or their religion. Immigrant and refugee women may be vulnerable to different kinds of violence which may take place in their homes, communities,

workplace or even larger social institutions. As a result, many of these women are confronted with social alienation, lack of social support, social exclusion, poverty and economic dependency (Gonçalves et al., 2016).

4.1. Synopsis of Participants

Below are summaries of the events leading up to the violence the women in my study reported to me. This information is important as it allows us to contextualize the information that they so graciously provided me in the interviews.

***Monica** moved into Canada with her husband and children in 1981 from Germany at age 30. They were excited to move here. Monica's husband worked as an engineer in Germany, so he quickly found a job in Canada. However, Monica had difficulty finding employment after her arrival to Canada. She was a secretary back in Germany, but in Canada she was limited to a job as a cashier at a small retail shop. Her job was not well paid and that limited her options. Monica decided to return to school to earn a university degree. It was then the family violence started. Monica's husband became verbally and physical abusive towards her. The violence increased to the point that Monica had to be admitted in the hospital several times to receive treatment for various injuries inflicted by her husband. On one occasion, her husband assaulted her and she was admitted in the hospital to have a wound on her head stitched. Monica could not report the abuse initially due to the stigma of domestic violence and her fear of retribution from her ethnocultural community. She could not flee the violence because she had no stable income to support herself and her children in Canada. Monica was traumatized on another occasion when her husband became violent again, smashed a coffee maker, yelling and shouting while moving towards her. When Monica could not bear the physical and psychological abuse any longer, she sought help from the police to protect herself and her children. Monica's husband was given restraining order to stay away from her and their children, hence he was removed from their home.*

Ginny is a 27-year-old immigrant woman from China who came to Canada to study. Being a single woman, she faced a lot of barriers as she settled into her new environment. Some of the barriers she faced were access to health, economic assistance alternative housing and awareness of Canadian laws and regulations to be able to help herself. Ginny also faced significant racial discrimination from her workplace because of her Asian ethnicity. During her time as an international student, she encountered violence from her Canadian ex-boyfriend who stalked her and threatened to deport her back to her country. Ginny could not report any of the abuse she faced because as an international student she was afraid that reporting the abuse would prevent her from obtaining permanent residency. As a result, she did not report the abuse to authorities. According to Ginny, her priority was getting her permanent residency in Canada, so she felt she had no other option than to suffer through abuse. Ginny is currently a Permanent Resident in Canada

Zette is a 32-year-old female who came to Canada to visit her boyfriend in January 2019. Zette's boyfriend told her not to leave Canada at the end of her visa, and instead they got married. A few weeks after their marriage, she became pregnant. Her husband was displeased by this and began abusing Zette both physically and psychologically. Two weeks after her baby was born, Zette could not endure the abuse anymore and she decided to leave the marriage. She tried several times to leave, but on each occasion her husband prevented her by threatening have her deported and separated from her baby. Zette finally decided to seek help from the police and is now living in a women's shelter with her newborn baby. Though the living conditions in the shelter are not the best, Zette has no work permit so she cannot legally look for employment to support herself and her baby. She used all her savings provide basic needs for herself and her child. She continues to receive threats from her abusive husband demanding that she withdraw her application for a work permit. These continued threats make Zette afraid to leave the shelter. She has tried to access services like health support or English classes, but she does not qualify for those services as a temporary resident in Canada. Zette petitioned the courts for protection from her husband and full custody of her baby but was denied. Currently, Zette continues to depend on the shelter to provide necessities for herself and her baby.

Sarah is a 40-year-old refugee woman who came to Canada with her husband and six children from Congo. Before moving into Canada, she had already experienced violence in her country of origin and in the refugee camp from her husband and his family. Sarah's husband abandoned her and her six children in the refugee camp. He returned five years later, and only because she called to tell him they received approval to come to Canada (which included him in the application as the principal applicant). Upon arriving in Canada, her husband found a full-time job quickly. She struggled to find a job and was eventually employed as a cleaner. She decided to take English classes so she could return to school. She enrolled but became pregnant in her first year, and left school to have her baby. Sarah now has eight children and is unable to work full-time or pursue her education. Sarah continues to

experience economic and verbal abuse from her husband. Her husband takes funds from their joint account and children's benefits to send to his family back home, leaving Sarah without enough money to cover their bills here in Canada. When Sarah asks what he has done with their money, her husband becomes furious. He verbally abuses her, asserting that because she is a woman, he does not need permission from her to use the money in their joint account.

***Fatima** came to Canada from Kenya as a refugee. She is originally from Congo but lost her parents to the war and then moved to Kenya as a refugee. She came to Canada alone, three months pregnant, with her first child. Fatima encountered series of challenges such as finding her way to food banks and transportation while trying to settle in the country. Her husband later joined her in Canada, bringing his children from a previous marriage. Fatima tried to go back to school but was forced to drop out when she became pregnant with her second child. Fatima started to experience economic abuse from her husband after he began working and she was left at home to take care of the children. The economic abuse escalated to the point where she had to beg for food and essentials from friends to take care of her children. The husband took control of the children's benefits to pay for their mortgage, leaving her with no money to feed the children. Though Fatima has tried to find help, she stopped after becoming afraid that she and the children would face stigma if their situation were known.*

***Safi** came to Canada with her husband and 1-year old son from a refugee camp in Zimbabwe 2009. In Canada, her husband took a student loan and returned to school, but Safi could not go to school because her son still very young, and she was by then pregnant with her second child. She became a housewife, taking care of the home and children while the husband was in college. Safi started experiencing sexual and financial abuse from her husband even though initially she did not know see it that way. She explained that her parents advised her when she was getting married that her husband would make the decisions and that abuse was permitted, much like her parents' own marriage. Finally, Safi could not bear the sexual and financial abuse from her husband, so she started to discuss her difficulties with her friends. It was then she realized that her marriage was not normal but abusive. Safi is currently separated from her husband, but they are co-parenting.*

My research question, 'How does violence against immigrant and refugee women affect their psychological wellbeing and integration in Canada?' asks a pertinent question about newcomer women. Although individual stories of gender-based violence vary with each woman encountering unique barriers, there are some similarities that we can identify to gain a broad

perspective in order to better address the problem. In this chapter, I discuss the themes derived from interviews with immigrant and refugee women in western Canada. In this chapter, I will discuss the themes as they relate to each participant's experience respectively. The themes discussed in this chapter highlight newcomer women's experiences of gender-based violence with their abusive partners as well as structural barriers newcomer women face while transitioning from an abusive relationship.

Most immigrant and refugee women who are survivors of gender-based violence experience challenges when exiting abusive relationships, much like women born in Canada. Some of these challenges, however, are starkly different in terms of newcomer women's experience compared to women born in Canada. For newcomer women, access to shelters, financial assistance and other aspects related to escaping abuse, are not available or have strict limitations. For women without legal status, the services available are scant. Canadian immigration laws and policies that unnecessarily tie newcomer women to their abuser, and low or unstable socioeconomic status. For some women, a primary concern may also be fear of losing custody of their children. These challenges concern all women who experience, but the social context that newcomer women experience may exacerbate these challenges.

4.2. Alternative and Safe Housing

One major concern of most immigrant and refugee women fleeing from an abusive relationship is finding shelter that will accommodate them and their children.

"It was bad, bad because living in a transition house or shelter is ... temporary and you cannot take all your belongings with you because they give you a room so there is no extra space to store your belongings especially having a baby like me." (Zette, 32-year Temporary resident)

Housing plays a central role in settlement, especially among newcomers. Many factors contribute to the reasons immigrants and refugee women stay in an abusive relationships, including lack of access to affordable housing or shelters and discrimination. Adequate and affordable housing (identified as an under-provided resource) is critical to facilitating a woman's ability to leave a violent relationship (BC Society of Transition Houses, 2015). Although women who are born in Canada also face numerous barriers to fleeing violence and accessing adequate and affordable housing, finding housing can be particularly difficult for newcomer women. As Ginny tells us below how challenging it was for her to find safe and affordable housing as a newcomer in Canada,

“Oh, it was very challenging. When I got here, I went to the Reception Centre, yet still I had to pay some amount, the whole purpose of the homestay was to help people assimilate quickly into the Canadian culture. However, later they said they don't want to do home stay anymore, they want to rent it out. But even with that I will say, people know that you are an immigrant, and they sometimes want to take an advantage of you because you don't know much about the Canadian system.”
(Ginny)

It's important to note that without these shelters or affordable housing dozens of women will be at risk of becoming homeless, which means many will be left with no choice but to return to an abusive relationship. Allen (2020) also found that both women and children are turned away from domestic violence shelters tens of thousands of times a month in Canada. Most of those shelters were short-term crisis shelters with length of stay restrictions ranging from 21 days to three months (Allen, 2020). There is a significant shortage of safe living space for all women experiencing domestic abuse in Canada. As I reported earlier, out of 140 second-stage shelters in Canada, CBC News contacted 65 of them; nearly all were at capacity in 2020, early in the

pandemic. About 1,900 requests for help were turned away by those shelters during November 2019 (Allen, 2020).

Yet another important factor to note is discrimination against immigrant and refugee women when accessing social housing. Immigrants and refugee women constantly face significant discrimination due to language barriers and culture. According to the British Columbia Society of Transition Houses, immigrant and refugee women face racial discrimination and harassment when accessing social housing which can further compromise their well-being and safety (BC Society of Transition Houses, 2015). For instance, one of the participants indicated how challenging it was for her to find affordable and safe housing, she also indicated she was treated differently because she was a newcomer and also had no knowledge of the Canadian law.

4.3. Social Supports

One of the main questions I asked participants was about their relationship with the wider community and how that has affected their experience of gender-based violence in Canada. Social support provides integration assistance and can protect newcomer women from adverse mental health outcomes (BC Society of Transition Houses, 2015). Social support in a form of knowing someone cares give newcomer women some sense of belonging, and this protects them from been isolated and distressed. Migrating into a new environment can be frustrating, especially when combined with cultural and linguistic differences. Migration has a profound impact on the lives of immigrant and refugee couples. For some women, the process of immigration includes the acquisition of a new language and culture as well as changes in social status and income. In instances where women move to Canada without their extended families (who provide social support in times of difficulty) they tend to face mental distress leading to

isolation and disintegration. In this sense, social ties or social support give meaning to immigrant and refugee women's lives by providing them with full participation and attachment to their community and an obligation to support others (Delara, 2016). All the participants indicated how connections to families and friends could have helped them seek for help or flee from an abusive partner. As one of the survivors says,

“We didn't have friends at the time, it takes time to make friends and we also didn't know any German people you know, so we didn't know anybody right, we didn't go to the clubs and those things you know. It was a German community, most people came in the 50s after World War II, it wasn't really our generation. So, we were quite isolated. But you know as a woman especially an immigrant woman you are very vulnerable, you have no family, you are really all alone.” (Monica).

Lack of familial and community support, coupled with limited housing options due to financial insecurity, can also increase the risk of homelessness (Delara, 2016). COVID-19 has worsened the impact of isolation on the lives of immigrant and refugee women when it comes to intimate partner violence. With population lockdowns and the implementation of social restrictions in Canada and around the world, physical distancing measures to contain the spread of COVID-19 further limit immigrant and refugee women's ability to access services or organization for help in times of abuse or emergency (WHO, 2020). Abused women are confined in one place with their perpetrators and unable to reach out for help or support from family members, close friends or organizations who could support them. For many women, access to various services simply stopped. Isolation due to the pandemic was noted by most of the participants as a major barrier preventing them from seeking help from organizations or from family and friends as they are confined at one place with the abusers. As stated by Zette,

“So, yea, sometimes I feel I am stuck here in the women shelter with my baby, and I cannot do anything to help my situation and now the Pandemic is even affecting us more in different ways. My family cannot come here because of the Covid-19 because the borders are closed. I heard in the news during the pandemic there has been a drastic increase of domestic violence in the country. So, I was like the pandemic is affecting people lives in different ways, economically and mentally.” (Zette, 32-year Temporary Resident)

One of the participants indicated how hard it was for her to even make a call in the house.

Sometimes she must go into the garage to be able to make a call when her partner is around. This is a clear indication of how isolation during the pandemic has affected the lives of women who are already experiencing gender-based violence. One common observation made during interviews was that most of the participants were scared to participate in the interview because their partners were home. They had to be sure they were out of the house before they were able to make a call.

4.4. Access to a Social Services

One of the major concerns of most participants was lack of access to services due to their immigration status, especially those without proper documentation. One of the controlling mechanisms used by abusive partners is to withhold or hide the woman’s passport and visa. One of the participants expressed how her status as temporary resident has affected her ability to access health, language and other welfare services. Women with temporary residency status are excluded from receiving language, health and other social services. When this group of women are experiencing Sexual and Gender-Based Violence, their immigration status makes it more difficult for them . As indicated by Ginny,

“It was very difficult for me because my choices on finance and health were very limited. I didn’t have a health card, so I was very scared to go to the doctor because I didn’t have

money to pay for the services and it was very expensive. I got sick sometime for a week and I couldn't go to the hospital, and it really got serious, so I had to go the community clinic to see a nurse practitioner because they do attend to people without health card. But even with that they keep it very low key because they don't want people to find out.” (Ginny, 27-year female)

Likewise, lack of access to services such as English classes renders many immigrant and refugee women vulnerable to intimate partner violence especially those coming from non-English speaking countries. Some of the participants indicated that their status in Canada continues to render them ineligible for English Language classes. One of the participants who was a temporary resident contacted the immigration centre in her community to enroll in English classes to be able to find a job- but was turned down because those services are available only to those with permanent residency or a work permit. As Zette stated below,

“I wish there will be services for women like us without documentation to get English classes to be able to communicate with people. But because I do not have work permit, I am not able to have access to these services. So, you could imagine women with non-legal status, how they will struggle to communicate.” (Zette)

This situation prevents Zette from getting help with GENDER-BASED VIOLENCE organizations. In addition to what the participant stated above, free language services are only available to people in their first three years in Canada. There are more needing English language services than there are spots, which means that the paid spaces for English language classes are expensive and out of reach for many immigrants.

Lack of language translation services can be a major barrier for immigrant and refugee women seeking domestic violence services in Canada. And the participant stated above,

immigrant women without legal status are not able to attend English language classes. Erez and Harper (2018) found that even where there are translators available to assist immigrant and refugee women, many lack knowledge and training on domestic violence and are unable to communicate women survivors needs and experiences. Translators and interpreters are in very short supply, particularly for obscure languages (most often spoken by refugees) that having anyone available to translate, qualified or not, is the only option. To ask that interpreters have SGENDER-BASED VIOLENCE training would make it more difficult to get important language support. Furthermore, some immigrant and refugee women prefer not to have male translators attend to them due to cultural and religious reasons (Wilkinson et al., 2019). It can be very traumatizing to share intimate information with a non-relative male. If only men are available, their presence may not be accepted by some female refugees. Studies showed that refugee women may experience fear and shame about disclosing their personal experiences especially sexual abuse when the interpreter is male and/or a member of their community (Wilkinson et al., 2019; Delara, 2016). These studies find that fear of their story might becoming a topic for gossip within their community, that is if the interpreter is a community member is the reason for not wanting to disclose their experience. Immigrant and refugee women's inability to access these services renders them more vulnerable to gender- based violence.

4.5. Unemployment

A major concern of all the survivors I interviewed was financial dependance on the abuser, which often prevented them from leaving their abusive relationship in the first place. In addition to availability and accessibility of health, social, and welfare services to newcomer women in the country, a sense of stability and income security that enables one to live independently and support themselves are important, yet often challenging conditions that prevent immigrant and newcomer women from seeking GENDER-BASED VIOLENCE related

services in Canada (Delara, 2016) The employment rates for immigrant and refugee women are lower as due to several reasons. Employment rates for family-class immigrants, who are disproportionately women, are lower than for the principal applicants in the skilled worker category (Jayasuriya, 2018). This suggests temporary employment may be particularly common among immigrant women because they face poorer labour market prospects and experience greater pressures to accommodate employment to the demands of household labour. As indicated below by one of the survivors,

“Because my children are young and due to the lockdown, all the children are home, and I can only work for two days in a week in order to take care of the kids. And my salary is not enough to pay for the bills of the house.” (Sarah).

Precarious employment makes it more difficult for a woman to leave abusive situations.

Another important factor raised by some of the participants was the inability for newcomer women to secure a well-paid job in Canada even though some have qualifications. In other words, they are unable to find work in their profession and commonly accept jobs not commensurate with their education and work experience. These women risk becoming part of an unskilled, cheap, and exploitable labour force (Folson, 2004) because they are only able to access temporary, unskilled, low paid jobs. The challenging economic circumstances of immigrant and refugee women put them at a further disadvantage in accessing affordable housing when trying to leave an abusive relationship. As indicated by Monica below,

“I used to be a secretary like administrative work in my home country, but coming to Canada, my English was pretty good because I learnt it in school, but it was really difficult to get a job here in Canada so that was not easy. The first two years, my family we decided I stay at home so that the children can settle in. And then after two years which is 1983, I

was actively looking for work even if part-time work and I couldn't find work. Then I took on a job, it was ok, but it was grocery retail. But it was more financial reasons I guess at the time when he started the physical abuse and verbal abuse. If I had financial income, I probably would have left with my children.” (Monica).

Furthermore, some of the participants indicated that in attempt to find jobs to able save money and leave an abusive relationship, they tend to experience more discrimination at the workplace. Research indicates immigrant women are more likely than men to work in informal sectors and occupy lower professional ranks and lower wage jobs (Delara, 2016). As a result, they experience differential employment conditions and work-related mental health risks. One of the survivors indicated in her story how she was constantly treated differently by her supervisor at workplace because of her ethnicity. She tried everything possible to please her supervisor but to no avail. She tried to ask him why she was treated differently,

“I remember the experience I had there was very horrible. I found it to be more of violent in nature, he was never satisfied with anything I do. My supervisor was very hard on me and treated me harshly. I asked him why he was treating me differently and he told me he cannot trust me because I roll my eyes a lot. And the only reason I can think of is because I am not his desired ethnicity or because I am an immigrant and Asian.” (Ginny)

Financial independence is very key for women experiencing abuse in their relationships to flee. Most of the participants interviewed indicated that one of the major reasons why they could not leave their abusive homes was because they were not financial stable. However, as Ginny indicated in her statement above, in attempt to work and become financial independent, she had to face a lot of discrimination and racism from her boss at work.

4.6. Financial Abuse

Aside from newcomer women being unable to find well-paid jobs, most of the survivors I interviewed also said they constantly experience financial abuse from their partners even though

the jobs that they do only pay minimum wages and yet their partners still tend to take control of their finances. For instance, one of the survivors said her abusive partner keeps using her savings and their children's benefits for himself by sending it to his family back home for his building project. Yet she was unable to object because her husband keeps reminding her of their traditional gender roles, and that she is a woman and cannot question his authority over what he does with his wife's money. As Sarah one of the participants stated,

"We started doing the savings in 2013, when we save like \$4000, by the time I will look in the account he has used the money without informing me, he continued doing that then when I questioned him why he keeps using the money we are saving together for our family, he will get furious and start saying "now we are in Canada so I don't respect him and I don't listen to him. He will tell me he used the money to do something, and he does not need my permission to use the money we saved together because I am a woman, and he is the man." (Sarah)

I asked participants whether they tried seeking for help from the authorities or other organizations. Most of the participants responded first that they did not know that financial abuse was considered abuse, their knowledge about gender-based violence was limited to physical abuse. Secondly, they said they did not report their partners because of the fear of stigma from families back home and from community in the host country. One survivor said,

"I didn't report him because I know he will be telling everyone back home lying that this is how I am treating him here now. And because of my kids are here, I didn't want to report him. Also, if I report him, he will tell everyone in our community here in Canada which I didn't want to experience. And you know, sometimes it very hard for you to share things that you are still living in, and you are still looking for solution, but you don't know which solution is better, even when I want to go seek for help from the government, you try to think about the children because they need both their parents to be with them because it could affect the kids negatively. So, it is so hard to talk about such experience. (Fatimah)

Economic abuse is one of the areas that less attention has been paid to when it comes to the discussion of gender-based violence (GENDER-BASED VIOLENCE). The findings of this study showed that immigrant and refugee women face a lot of economic abuse in their homes even most do not like to talk about it. Many newcomers maintain their cultural practices even after migrating into a new environment with a whole different culture. For example, refugee women from Africa in this study explained how their culture as an African woman gives the men control over them. Even when they are experiencing economic abuse, they thought it was a normal part of marriage. The maintenance of “traditional” gender roles seems to be an instrument used by the perpetrators to abuse women economically. One of the participants explained that her husband uses the child benefits they receive from the government for his own expenses and also does not contribute to paying household bills. As a result, Fatimah is struggling to pay the bills and sometimes begs for children essentials from her friends in the community for childminding. She is currently unemployed because she had to stay home and take care of the children during the lockdown. She mentioned her friends advised her to report her husband to the authorities- but due to the fear of stigma, she decided not to report him.

4.7. Social Benefits

When I asked participants their reasons for not leaving their abusive relationship, they explained that lack of funds (either from being unemployed or underemployed, and/or insufficient child benefits) to sustain themselves and their children was the major reason for not leaving. One participant said,

- *“And one other thing, I don’t get child benefits because I am not a permanent resident, and neither am I receiving a stable child support from my husband. So, it is the shelter home that provides us with food, clothes and diapers for my baby and sometimes my sisters send me money to buy things for the baby. But you know as a woman especially an*

immigrant woman you are very vulnerable, you have no family, you are all alone. And you know it's probably a little easier if you have income, you have a good job and income and you can provide for yourself and your child.” (Zette).

Immigrant and refugee women (with or without children) who want to leave an abusive relationship find it challenging due to lack of financial support or insufficient child benefits to be afford a place to stay and take care of their children. Some of the policies in Canada make it difficult for newcomer women who have not been in the country for a long time to get help government assistance. For instance, for new immigrant children in Canada to be eligible for child benefits, they have to reside in the country for at least eighteen (18) months. To confirm this, I made a call to Manitoba Child Benefits Centre, the employee confirmed that for an immigrant child who is new in Canada, he or she need to first be qualified for Provincial Child Benefits. Newcomer women who have stayed with their partner for less than one year but want to leave the abusive relationship with their child(ren) therefore face significant financial challenges while still ineligible for support. As a result, many immigrants and refugee women choose not to leave their abusive partners. For those who are eligible for these benefits but do not have or well-paid jobs, the child benefit might not be enough taking care of their needs, especially considering, if they would have to pay day care for their children to be able to go to work which mostly is part-time jobs due to household responsibilities.

In addition, some policies and regulations in host societies are gender-based. For instance, Immigration Refugees and Citizenship Canada controls legal access to various settlement services for women with legal status in Canada. Undocumented immigrant women tend to be the ones that suffer the consequences of these rules as IRCC has strict enforcement of access to services among the settlement agencies they sponsor. Delara’s (2016) research agrees and finds that newcomer women with low socioeconomic status are less likely to exhibit help-

seeking behavior. This becomes very complicated when discussing undocumented women who are not eligible for many governments funded services. Since the government funds most domestic violence shelters and newcomer settlement organizations, there are few legal avenues for her to pursue assistance.

When asked how their economic status has affected their lives, all the survivors indicated their lack of sufficient finances have had a greater impact on their mental health. One of the survivors pointed out that even though she was able to flee from an abusive relationship with her newborn baby and is currently living in a shelter, her inability to financially support herself and her baby has affected her psychologically and she is constantly distressed. The association between mental health and women's economic status becomes clearer when adopting a broad definition of poverty and wealth, which encompasses the need for empowerment, freedom, and autonomy over the circumstances determining immigrant women's life and health (Delara, 2016). From an intersectional standpoint, immigrant and refugee women are at risk for depression due to their gender and low socioeconomic status and are also exposed to the stressors associated with migration and resettlement which includes discrimination, language and cultural barriers, loss of social status, and social isolation — that threaten their mental well-being (Godoy-Ruiz, et al., 2015). The World Health Organization (WHO) conceptualizes gender as a powerful structural determinant of mental health that interacts with other determinants including age, family structure, education, occupation, income, and social support. With respect to gender differences in mental health outcomes such as depression and anxiety, gender has explanatory power and must be viewed as a determinant of mental health (WHO, 2000).

4.7. Fear of Family Separation

There are numerous multi-level factors determining a woman's risk of experiencing abuse in intimate relationships. However, immigration policies create conditions that make this a more complex problem for newcomer women in Canada (Jayasuriya, 2018). Family class applicants are sponsored by a spouse or other family member who is an eligible Canadian citizen (or permanent resident). This is mainly male partners sponsoring their spouse and children to join them in Canada. When there is abuse in the relationship, immigrant and refugee women then face threats to their continued residence in Canada when they attempt to leave the abuser. Threats of deportation, destroying identification and immigration papers, loss of custody of children or threatening to report or inform immigration authorities on false information about survivors are all methods of isolation that abusers may use against women whose immigration status is uncertain. One of the participants said she continues to receive threats from her husband because he was her sponsor. As she stated,

“And on the other hand, my husband called again and threatened to call the Immigration, Refugees and Citizenship Canada (IRCC) to tell them that I am a criminal and that I committed a fraud. Somehow, he doesn't want me to have my work permit to work legally here, so yea I don't really know what is in his mind.” (Zette)

One of the greater concerns of all the participants interviewed is how the violence they experience could affect their children when making the attempt to leave an abusive relationship. Violence against women affects the children who are involved as well. Parental alienation has become a new way to ignore violence against women. Women who are experiencing violence and try to protect their children tend to be accused of turning their children against the other parent (Carman, 2020). This could cause them to lose custody of their children which is a great fear of most abused women. As stated by Zette,

“And I get more distressed when I think of the possibility that I can be kicked out of the country anytime without my baby. The fear of losing my baby worries me all the time. So, I do feel I am lost and there is nothing I can do, and I just feel this is unfair to me and my baby” (Zette)

Violence against women has become a greater concern for most of the organisations for domestic violence in most of the provinces in Canada, as “alienation” has become a new tactic for discrediting reports of domestic abuse. For instance, domestic violence shelter workers in Quebec has raised concerns on a significant number of abused women in the province perceived as “alienating” their children (Lapierre & Côté, 2016). As indicated below by Zette,

“...But the court was not fair to me, after providing all the evidence of abuse and himself stating that he does not want to be a dad, the court still said they are giving him the benefit of doubt that he will one day be a good father. And the court said again that even if the relationship did not work for him and I, the child is still his son, and he must spend time with him. I am glad you want to dig more into that, because for me it's very disappointing that regardless of what happened to me, if the Ministry of Children gets involved and the lawyer mentioned it before that regardless of all that the court will still give him the benefit of the doubt” (Zette)

Zette stated that from her experience with the court system in Canada, the law doesn't seem to protect migrant women and children from domestic abuse and instead, insists that the father have some ability to have a relationship with his children. To her, this is one of the most depressing aspects of her life in Canada. She further explained that she does not feel like she belongs in Canada and so would other immigrant and refugee women in her similar situation. She also mentioned she feels unsafe anytime she wants to go out, afraid of running into her abusive husband who continues to make constant threats against her.

4.8. Lack of Awareness

The limited knowledge of domestic violence within immigrant communities significantly undermines the potential to develop enough and effective policies and services. All the participants indicated that due to lack of knowledge on the Canadian policies, they could not tell what the law of the country says about such acts. As one of the participants stated,

“I was once stalked by my ex after we broke up, he was not happy about it. He started following me everywhere I go, and I told him to stop following else I will call the police. And because not knowing much the Canadian law and criminal system, he said to me so far as he certain feet from me the police cannot do anything to him. He could follow me every day. And I didn’t know what to do because I thought he was right. Also, I did not seek for help (at) that time I was nervous, and I did not want to get involved in the legal system. For a lot of immigrants, your status is your priority, and I cannot do anything to jeopardize my status. Even if I must suffer a little bit now, my status comes first. A lot of immigrants will do anything to get their status and that includes not calling the police.” (Ginny)

From the statement of the above participant, there is a clear indication that some perpetrators take advantage of newcomer women ignorance of the Canadian policies to continue abusing them. This shows how vulnerable newcomer women are in a host country with a new culture and new regulations which they have no idea about. Such incidents become even worse for women who do not have legal documents in Canada, as they are not able to contact organizations for free education on the laws and regulations of the country due their ineligibility of getting access to such services and the fear of been deported. Again, the fear of jeopardizing their immigration status in the country makes some immigrant and refugee women avoid involving the legal system. To some newcomer women, coming to Canada means everything to them, it is an opportunity to escape poverty and violence especially those from war-thorn countries as well as violence experienced by some women in refugee camps. Some of the participants reported that their conditions in refugee camps were very bad and it is something they would not want to

experience again and something that they feared would happen again if they were deported. One of the participants indicated that she has experienced violence throughout her life back in her country of origin. If it means she has to endure the pain she is experiencing from her partner, it is better than for her to return to her country where violence is still in effect.

In addition, lack of knowledge about sexually and gender-based violence is another important factor most of the participants mentioned as the reason why they did not seek for help. Aside from inadequate support services, some studies also found that immigrant and refugee women are not always aware that domestic violence occurs in many forms, including social, psychological, spiritual, and economic abuse (Holtmann, 2016). Immigrants and refugee women from countries that do not consider violence against women abuse, especially married women, tend to see domestic violence as a common issue that does not bear reporting. Also, for some newcomer women, past exposure to violence may make the reality of intimate partner violence more normal and acceptable. Safi said,

“So initially I did not know what I was living in was gender-based violence, till I started the counselling and then I told them my situation and what I was experiencing in the house with my husband and then they told me that was violence. Where I came from, when you are getting married, they advise you to keep your marriage issues a secret, and they teach us that as woman if your man wants to have sex with you, you have no right to refuse. So that was what was in my mind, and I could not tell anyone about what I was going through till I had friends after few years in Canada then I told my friends what my husband was doing to me, and they told me that was an abuse.” (Safi)

Furthermore, there are additional challenges that stands in the way of addressing domestic violence among Canadian immigrants is lack of knowledge on available resources as

well as failure of support systems on which women survivors can lean on is one common reason why many women either stay with or return to abusive spouses. Most participants reported that they had no idea initially that there were resources available in their communities. This has made most newcomer women more isolated and helpless in times of abuse, most especially those with language barriers. As stated by Monica

“I think we have good resources but often immigrant and refugee women do not know where to go because of language barriers so there is a stigma you know they don’t want to talk about their family or their background, they are very scared of those things you know. So, it will be good to have places for women that are new to the country, so that they will know that help and support is out there for them if they wanted it.” (Monica).

For instance, proficiency in English among newcomer women who English or French is not their first language finds it difficult expressing themselves when they want to seek for help from legal services. Also most of these organisations have few language translation services and this can be a major barrier for seeking help. Secondly, some organisations that have these services may lack training or knowledge about domestic violence about hence are not able to correctly translate survivors experience correctly translate survivors experience. Research indicates that lack of access to language specific resources and services in immigrant communities prevents these women from seeking for help been it health, social and/or legal services (Erez and Harper, 2018).

During the interviews, I observed that those from non-English speaking countries even after staying in Canada for more than five (5) years still had problems expressing their experiences in English. The good thing was because I am also an immigrant from an African country I was able to understand their accent and help them when they are trying to pronounce certain English words. In recent stories covered by CBC News in September, 2020 of women

experiencing domestic violence in Canada, one of the stories of a woman from BC who was experiencing domestic abuse failed to get police protection despite the severity of her case due to her inability to express herself well in English (Carman, 2020). For newcomers who English is not their first language finds it difficult seeking for help from authorities.

4.9. Safety

I asked a question regarding how safe they feel in Canada. Zette responded she does not feel safe here because of her husband's constant threats and that also makes her scared to go out with the fear of running unto him outside. As stated by Zette,

"If not for my husband I would say I feel safe here in Canada than my country of origin, but because of the constant threats I receive from him, I do not feel safe in this country. I do feel very scared sometimes going out because I fear I might meet him outside somewhere. But for example, in my country of origin in the festive like Halloween, it becomes very dangerous for people to be outside that" (Zette)

Zette further stated in her experience that the law is not protecting her and her child and she feels this is due to her status as a temporary resident in Canada without a work permit. Even though she wants to go back to her family back in her country because her husband and her child are Canadians, she fears she will lose her child should she try to go back to her country. The fear of been separated from her child is a major concern and for that reason, she decided to stay in the shelter home with the hope that things will get better. Others like Sarah, Fatimah and Safi also stated that even though their partners make them unsafe sometimes they still prefer to be in this country than their war-thorn countries due to the kind of violence they have experienced prior to coming to Canada.

4.10. Intersectionality Theory

Intersectionality proposes that systems of oppression are mutually constituted and work together to produce inequality. In other words, systemic inequality is compounded when one is a member of more than one minority group hence immigrant and refugee women who are marginalized in two or more areas interacts to create a different experience. Using intersectionality as a lens allows for the illumination of the experiences of women facing marginalization in multiple ways, who have been hidden from dominant cultural discourses. Newcomer women are particularly vulnerable to victimization due to several factors. For instance, for women, their gender immediately makes them more likely to be a victim of abuse. However, from an intersectional standpoint violence against women by male partners is not only gender-based, i.e., women are more likely to be victimized by men because they are women but also determined by other factors such as poverty, precariousness, and the downward social migration (as experienced by immigrant and newcomer women) which can compound this risk, making them more vulnerable than they would have been because of their female gender or when they were in their home countries (Guruge et al. 2010). For the women in my study, they are also made more vulnerable because of their status as newcomers. Some had “legal status” to be in Canada, but were financially tied to their sponsor. Others were undocumented—and having no status made them even more vulnerable as they are not eligible for most SGENDER-BASED VIOLENCE and newcomer services.

As noted by most of the women interviewed, financial constraints are one of their major reasons for not leaving an abusive relationship and this has intersectional implications. In this case, gender and low income together cause significant consequences (e.g., homelessness) of Gender-Based Violence that might not occur for more affluent women. In other words, multiple intersections of social identity (race, class, and gender) overlap and intersect to oppress the

marginalized. As such, analyses that focus on gender, race, or class independently are insufficient because these social positions are experienced simultaneously (Viruell-Fuentes et al., 2012).

Immigrant and refugee women are at risk for depression due to their gender and low socioeconomic status and are also exposed to the stressors associated with migration and resettlement — including discrimination, language and cultural barriers, loss of social status, and social isolation — that threaten their mental well-being (Godoy-Ruiz, et al., 2015).

Furthermore, migrants experience multiple forms of social inequity and stressors related to being a foreigner in a new country which places them at risk of developing depression and other mental illnesses (Godoy-Ruiz, et al., 2015). As mentioned by one of the participants, lack of access to social services such as healthcare, financial support and language education due to her status in the country got her stress and depressed all the time. She indicated how that makes her feel lost and helpless in Canada.

Newcomer women who experience gender-based violence encounter a myriad of obstacles to transitioning out of the relationship and then afterwards, being able to function independently in society. Interviews conducted with newcomer women in this study not only highlight the many barriers they encounter, but also the commitment they must make to the process involved in transitioning out of abuse. It takes extreme courage to leave an abusive spouse and endure a process where little security and support is provided, and hardship is ever-present.

I observed during the interviews that almost all the participants traditional gender roles made them accept submissive role in the relationship even when they are experiencing violence,

leaving them feeling less empowered hence low self-esteem. One of the participants (Safi) indicated that her culture as an African woman is to be submissive to the husband no matter what the condition, due to this she had to endure sexual abuse from her husband for so many years. Such cultural values made most of the participants more reluctant to report or seek for help as they feel it is normal to experience such abuse. Low self-esteem in this study was seen to be the reason most women are reliant on their abusive partners as such, they choose to stay with their husbands even as the violence towards them is escalated. As such, newcomer women who are victims of abuse are also victims of inequality as demonstrated by the structural barriers as well as lack of specified efforts made to help them escape such abuse.

I asked participants what they thought could be done to improve the immigration system for newcomer women experiencing abuse. Some responded that the government should enhance rights and legal education for everyone. Others thought the law should make the protection of its women and children a priority when it comes to domestic violence. Although the observations in this study are speculative, one important area for future research may be a study that looks at how gender-based violence among newcomer communities could have an impact on their children.

4.11. Discussion

The main purpose of this study was to gain an understanding of newcomer women experience of violence and its connection with their psychological health and integration process in Canada. Arising from the narratives were the participants strong personal experience of gender-based violence. The results of this study showed a greater connection between violence and the experience of emotional and other mental health problems. Participants described a range of experiences from feeling sad, distressed, sleeping disturbances (Thompson, 2021; WHO,

2020). In other words, gender-based violence further reinforces newcomers' mental health and vice versa, which render newcomer women more vulnerable in a host country (Godoy-Ruiz et al., 2015).

Findings from this study highlight the existence of knowledge on violence against newcomer women in host countries within intimate relationships (Goncalves, 2016). However, in addition were other structural factors such as lack of social support, legal status in Canada, Canadian law, unemployment, social services, affordable and safe housing, economic status were all factors raised by participants as barriers they face adding to their stress and exacerbating their emotional effects and sense of belonging in Canada (Delara, 2016; Berret et al., 2020; Hudon, 2015; Guruge et al., 2015). Applying the intersectionality theory, newcomer women's experiences of gender-based violence in this study were shaped by multiple social factors such as being a woman, a migrant, having a low-socioeconomic status, and immigration status of their home and host country and among others (Viruell-Fuentes et al., 2012). Immigration policies of host countries may, themselves, increase newcomer women's vulnerability to violence, especially for undocumented women (Jayasuriya, 2018).

The findings of this study also revealed the importance of social support in newcomer women's ability of leaving an abusive relationship as well as in mediating its effect on mental health (Godoy-Ruiz et al., 2015). While some immigrant and refugee women remained silent or kept putting up with an abuse for years and not seeking for help from any organization. Their experience shared in this study spoke lengthily on the important role family relatives, friends and community members could play when it comes to social support. Newcomer women sought help from friends in cases where they fear to report to authorities. Social support, therefore, is critical

for newcomer women to be able to transition from an abusive relationship and in reducing emotional, mental health problems and feel inclusive in the society. An important topic for future research among this population would be how to enhance newcomer women's access to social services, social support and other resources in their communities.

Other studies have also found that there are structural barriers in host countries that also further exacerbate newcomer women experience of violence (Goncalves et al., 2016; Algan et al., 2010). The findings of this study showed that although newcomer women experience abuse in their intimate relationships, but there are also of barriers that prevent them from leaving their abusive homes. For instance, safe and alternative housing, social support in terms of immigration policies,

4.12. Conclusion

This chapter discussed three major themes namely, lack of integration and settlement support, socioeconomic status, and Canadian law and policies. Most participants indicated that they did not get the support they needed to be able to integrate or settle well in Canada as newcomer women. For instance, most of them indicated that a safe and alternative housing was a major concern for not leaving their abusive relationships. Safe and affordable housing was stated as critical concern for most of the participants for not leaving their abusive partners. Some of those who were able to access shelters for abused women also expressed concern of the living conditions as well as discrimination they face in getting access to these shelters.

Secondly, another concern for all the participants was financial independence. They all expressed their financial dependence on their abused partners as the reason for their inability to leave the relationship. This was a common characteristic among all the newcomer women

interviewed as many were unable or only able to work part-time jobs due to the demands of household duties, hence they not financial stable to be able to leave their partners.

Finally, Canadian law and policies were also expressed as a greater barrier for most newcomer women who tempt to leave an abusive home. For instance, some sponsorship policies were seen as an instrument used by perpetrators to threaten newcomer women who wants to leave an abusive relationship as well as their lack of knowledge on Canadian law. Threats such as family separation, deportation were some of the tactics used to prevent women from fleeing and abusive home.

Chapter Five

5. Conclusion

It is clear from the findings in this study that knowledge on gender-based violence on newcomer women is limited. Failure to examine the challenges newcomer women faces as a result of gender-based violence as well as the structural barriers faced by these women in attempt to flee an abusive relationship are major obstacles to resolving issues regarding violence against migrant and refugee women in Canada. Although GSBV is a challenge that is also experienced by Canadian-born women, however, the vulnerability of newcomer women in a new environment with less knowledge about the system as well as lack of access to resources further exacerbates their experience of violence in the country. It's equally important for us to know about GSBV in general but specifically we need to focus more on examining GSBV among the newcomer communities.

This chapter summarizes the findings and recommendations derived from the data collected and concludes by discussing opportunities for future research.

5.1. Policy implications

There are several findings and corresponding recommendations that can be shared from this study. One of the major findings is the lack of social support and networks. Lack of social support was seen to be one of the major reasons for newcomer women not leaving an abusive relationship or seeking help. Social support is very crucial for immigrant and refugee women, and this could be a potential factor that may protect them from adverse mental health. Migrating into a new environment can be a little frustrating, especially when the new environment has a very different culture altogether. Migration in general has a profound impact on the lives of newcomers, to some, it involves the acquisition of new language and culture. In most cases,

where newcomers move into a new country without the family members and friends who could give them the support they need in times of difficulties; they tend to experience a lot of mental distress and sometimes isolation. Community networks and connections would be great step to help newcomer women to integrate well in the community they find themselves. Isolation was identified in this study to be a significant predictor of abuse because isolation represses women from getting help.

A second finding was limited housing and shelter for abused newcomer women. Insufficient alternative housing to assist newcomer women who are experiencing abuse temporarily was one of the greatest concerns for most of the participants interviewed for not leaving an abusive home. Alternative housing is very crucial in assisting women to flee an abusive relationship. It is important to note that without these shelters many women are at risk of becoming homeless, which means many will be left with no choice than to return to an abusive relationship or even suffering another attack. Providing an accessible and affordable alternative housing for newcomer women is a great step to protect women and children from domestic violence.

The third finding revealed that socio-economic status of newcomer women is the reason many women do not leave abusive relationships, and this is due to their dependence on abusers. To most newcomer women, a sense of stability and income security that enables one to live independently and be able to support themselves is the reason they decide to stay with their abusive partners. Employment rates for immigrant and refugee women are lower and most of newcomer women are not able to take up full time job positions due to the demands of household labour leaving them with insufficient funds to be able to live independently. Furthermore, the immigration system itself puts women in positions of vulnerability. Being legally dependent

upon the spouse for their status in Canada often means that abused women must remain with their abusers for fear of being deported and/or separated from children. Until very recently, the onus of proving abuse fell upon the woman—further jeopardizing her legal status, especially if she were undocumented or was a spousal dependent.

A fourth finding is the fear of family separation due to misunderstanding of Canadian immigration policies. The participants indicated that even though they sometimes think of leaving their abusive homes but the fear of losing their children due to their immigration status is the reason they choose to stay with their abusive partners. Many immigrant and refugee women were sponsored by their partners and many believe that by leaving their partners, their partner can actually initiate deportation proceedings. This is incorrect. Only the Canadian government can initiate deportation. These policies make it challenging for newcomer women who are experiencing domestic violence to flee an abusive relationship.

Finally, the fifth finding also revealed that lack of knowledge on gender-based violence and Canadian law is another reason most newcomer women do not report an abuse or seek for help. Immigrants and refugee women from countries that do not take violence against women as abuse, especially married women, tend to see domestic violence as a common issue, hence there is no need to report their partners. Some of the participants indicated that initially they did not know that what they were experiencing was categorised as gender-based violence in Canada. Again, for some newcomers, their past exposure to violence especially those from war-torn countries may normalise their experience of gender-based violence as was indicated by one of the participants who have experienced domestic violence her whole life in her country of origin before coming to Canada.

5.2. Summary of Recommendations

Meeting and responding to the needs of immigrant and refugee women fleeing violence and experiencing homelessness requires developing, implementing, and evaluating policies that are women-centered, trauma-informed, and inclusive. The findings suggest that there are policy gaps and a lack of alignment between housing/homelessness programs and the needs of immigrant and refugee women. For instance, while a useful tool in addressing homelessness, the “Housing First model” must be adapted to meet the unique needs of women fleeing violence effectively. The Government of Canada adopted the Housing First model in 2007 with the aim to address homelessness across Canada. This was a recovery-oriented approach that involves moving people who experience homelessness to independent and permanent housing without any preconditions and providing them with additional support and services (Tabibi et al., 2017). It is postulated on the belief that people will be better equipped to move forward with their lives if they are first provided with housing. However, the criteria for Housing First models seeking to address homelessness must be seen through a gender and immigration lens. This will help reflect the realities of immigrant and refugee women experiencing violence, fear of losing children, and a chance to leave an abusive home. Many newcomer women simply are not eligible for housing, particularly those without legal status. As a result, Housing First models don’t work for these women.

Collaboration and coordination among different sectors involved in supporting immigrant and refugee women with housing, violence, mental health, and settlement in Canada are vital. Given the complex intersection of immigrant and refugee women, violence, health/mental health and trauma, the issues and challenges cannot be addressed by one sector alone. One study found that

immigrant women disclosed their abuse primarily to immigrant-serving agencies, rather than Violence Against Women (VAW) agencies, as they had already established a secure relationship during the settlement process (Thurston et al., 2013). Once abuse was reported, VAW and immigrant-serving agencies coordinated efforts to support the women during housing insecurity after leaving their violent relationships (Thurston et al., 2013). There is a need for training in all settlement agencies on gender-based violence, and also the ability to send these women to VAW agencies. Effective responses are likely to require multiple agencies to play a critical role in supporting women. Immigrant and refugee women face numerous systemic, interpersonal, and cultural barriers that impede their ability to escape violence and find accessible, safe, secure, and affordable housing. In addition, Violence Against Immigrant Women agencies need culturally specific as well as immigrant and refugee training to deal with the needs of newcomer women.

Due to their lack of knowledge about gender-based and violence, most of these women seem to see themselves as to blame for the abuse. If education on gender-based violence and Canadian policy were made accessible to all newcomers irrespective of their status in the country, then the rate of violence in the newcomer community might decrease. An educationally component built within the welcome to Canada packages in all settlement agencies across Canada should be mandatory describing gender-based violence and where to get help. International students and other visa holders should be given a welcome to Canada training package on gender-based violence and other aspects of life and law in Canada. About half of these students will remain in Canada permanently upon graduation so this is a worthwhile investment given that Canada welcomes over 425,000 international students per year (IRCC, 2020). Again, social service workers must be very familiar with immigration law so that they can inform the women seeking consultation of their rights.

Furthermore, there are challenges with certain laws and policies that do impact newcomer women's ability to leave abusive relationships. For example, the conditional measures surrounding sponsorship contracts as stipulated in the *Immigration and Refugee Protection Act* makes it difficult for a spouse to gain financial independence; as well as other policies that restrict sponsored spouses from accessing social assistance may further prevent newcomer women from leaving. Although these policies are meant to prevent people from abusing the system, however, these same policies prevent victims from getting help. There is a need to amend some of the policies that give sponsors much power over their dependents. For example, there should be sharing of social assistance especially if newcomer women are deemed 'dependents' to principal applicants(sponsors) who are the abusers.

There is also a need to educate all newcomer women on their legal rights in Canada. It was seen clearly in the findings that most of the newcomer women lack knowledge on the Canadian law and policies, which perpetrators are taking the advantage of their ignorance to abuse them. While legal workshops are provided to certain groups of newcomers, especially those arriving as refugees, other newcomer women are not provided these educational experiences.

5.3. Limitations of the study

This study serves as a brief overview of the lived experiences of six immigrant and refugee women who are survivors of gender-based violence, and the challenges presented during the study. The first limitation is the inability to interview participants in-person due to Covid-19 pandemic and its corresponding public health restrictions. The need to observe Covid-19 health protocols did not permit me to have a face-to-face interview with the participants. All interviews were conducted using video/conference (Zoom). This limited my ability to read the body

language and gestures of participants during the interview process as that is important part of conducting a qualitative study. During the interview most of the participants did not want their face to be seen hence they off their cameras which further depersonalized the experience.

The last limitation of the study had to do with the sensitivity of the topic. Gender based violence is an intensively private for them to disclose or even discuss with someone they do not know. To many women, opening to such experience is difficult because it triggers sad memories. I noticed during the interview that there were a lot of reluctance of most of the participants discussing their abuse experiences. Some of the participants were still living with the perpetrators hence they were hesitant and afraid of talking about it especially those with precarious status in Canada. However, these women still spoke with me. Undoubtedly, there were other women who learned about my research but were too afraid to share their information with me.

5.4. Future Research

Future research should consider tracking the prevalence and the effect of gender-based violence among newcomer communities through quantitative study. This will help the government to improve available resource options, and further develop policies and procedures that may benefit vulnerable newcomer women. Secondly, future research should consider how gender-based violence among newcomer communities affect newcomer children who are witness to domestic abuse. Despite the research in general, most of it ignores the experiences of children and youth. Understandably, this group is more difficult to identify and to work with given they are too young to consent. However, it would not be surprising to learn that just like their mothers, newcomer children's unique context and environment make them vulnerable in ways that are different from their Canadian-born peers.

Lack of awareness and education on Canadian law and policies is a major concern of participants. Future research should consider researching on how to enhance gender-based awareness as knowledge on the law, policies and their rights in Canada. Making this information available to a larger group of newcomers, especially international students and temporary workers, will benefit everyone.

Cultural sensitivity training and culturally-sensitive supports in the gender-based violence organizations would also help. My research has highlighted that many of the women who do seek assistance do so from a women's shelter—most of whom serve a population that was born and raised in Canada. Workers at these organizations would benefit from training about the immigrant and refugee experience. Conversely, the integration and resettlement networks could also benefit from training on gender-based violence as these problems are also reported to immigrant agencies whose workers are largely ill-equipped to respond to reports of gender-based violence.

In addition, future research should consider, doing a comparative study on the experience of gender-based violence by immigrants and refugee women in Canada to other newcomer women in different host countries such as the Europe countries

Finally, future research should consider how to empower immigrant and refugee women. This is crucial training as it would better prepare newcomer women to leave abusive relationships in the first place. My colleagues on the international study are already working on this question, as is a PhD student in the Department of Sociology and Criminology. This, combined with a systemic approach to providing financial, housing and social assistance for

newcomer women who leave abusive relationships, regardless of their immigration status, is essential for any empowerment program to work.

5.5. Concluding remarks

Violence against women is a severe health and social problem for women worldwide. It is a denial of women's fundamental human rights, making them feel unsafe in their own homes. The outcomes of gender-based violence experienced by newcomer women within Canada can be severe, and support for survivors is needed. In the case of newcomer women, the supports they require maybe similar or different to what we provide for Canadian-born women and our national and provincial governments need to be sensitive to that. Providing these supports nationwide will better assist women to integrate in Canada as independent citizens who are not tied to their spouses for financial support or to maintain their status in Canada.

Provincial and federal governments need to invest in addressing laws and policies that address inequities experienced by newcomer women experiencing gender-based violence. Collectively local community groups, front-line workers, informed collaterals, researchers and policy makers representative from provincial and federal levels of government, and survivors of abuse need to collaborate and develop innovative ways of thinking about this ever-changing, complex and multi-dimensional problem. While gender-based violence is certainly a challenge to address, it is possible to strategize ways to resist it while striving for the elimination of violence against women altogether.

References

- Abraham, M., & Tastsoglou, E. (2016). Addressing domestic violence in Canada and the United States: The uneasy co-habitation of women and the state. *Current sociology*, 64(4), 568-585.
- Abu-Jamal, M. (2008). Echoes of a freedom struggle (a book review). *Turning the tide*, 21(1), 2.
- Abu-Ras, W. (2007). Cultural beliefs and service utilization by battered Arab immigrant women. *Violence against women*, 13(10), 1002-1028.
- Agllias, K. (2011). Utilizing participants' strengths to reduce risk of harm in a study of family estrangement. *Qualitative Health Research*, 21(8), 1136-1146.
- Akinsulure-Smith, A. M., Chu, T., Keatley, E., & Rasmussen, A. (2013). Intimate partner violence among West African immigrants. *Journal of aggression, maltreatment & trauma*, 22(2), 109-126.
- Alaggia, R., Regehr, C., & Rishchynski, G. (2009). Intimate partner violence and immigration laws in Canada: How far have we come?. *International journal of law and psychiatry*, 32(6), 335-341.
- Algan, Y., Dustmann, C., Glitz, A., & Manning, A. (2010). The economic situation of first and second-generation immigrants in France, Germany and the United Kingdom.
- Alabi, V. A. (2017). Research design: Research paradigms, population, sample along with sampling techniques and design types. *perspectives on conducting and reporting research in the humanities*.
- Amy Van Berkum, R. N. (2015). Dr. Abe Oudshoorn, RN, PhD In partnership with Women's Community House.
- Attride-Stirling, J. (2001). Thematic networks: an analytic tool for qualitative research. *Qualitative research*, 1(3), 385-405.
- Bannerji, H. (1999). *A question of silence: Reflections on violence against women in communities of colour. Scratching the surface: Canadian anti-racist feminist thought*, 261-277.
- Barrett, B. J., Peirone, A., & Cheung, C. H. (2020). Help seeking experiences of survivors of intimate partner violence in Canada: The role of gender, violence severity, and social belonging. *Journal of family violence*, 35(1), 15-28.
- Bell, J. (2019). Systems of Inequity: Representations of Immigrants, Refugees, and Newcomers

- in Canada's National Housing Strategy.
- Benson, M. L., Wooldredge, J., Thistlethwaite, A. B., & Fox, G. L. (2004). The correlation between race and domestic violence is confounded with community context. *Social Problems*, 51(3), 326-342.
- Brell, C., Dustmann, C., & Preston, I. (2020). The labor market integration of refugee migrants in high-income countries. *Journal of Economic Perspectives*, 34(1), 94-121.
- Browne, A., & Bassuk, S. S. (1997). Intimate violence in the lives of homeless and poor housed women: Prevalence and patterns in an ethnically diverse sample. *American journal of orthopsychiatry*, 67(2), 261-278.
- Campbell R, Adams AE, Wasco SM, Ahrens CE and Self T (2010) ‘What has it been like for you to talk with me today?’: the impact of participating in interview research on rape survivors. *Violence Against Women* 16: 60–83.
- Caplan, G. (2017). Honour killings in Canada: even worse than we believe. *The Globe and Mail*. Accessed online at: <https://www.theglobeandmail.com/news/politics/second-reading/honour-killings-in-canada-evenworse-than-we-believe/article1314263/>
- Carman, T. (2020). “Survivors of domestic abuse told to keep quiet about it in court or risk jeopardizing child custody”. *CBC News*. Accessed online March 05, 2021 at: <https://www.cbc.ca/news/canada/domestic-abuse-custody-1.5738149>
- Cameron, J. J., & Stinson, D. A. (2019). Gender (mis) measurement: Guidelines for respecting gender diversity in psychological research. *Social and personality psychology compass*, 13(11), e12506.
- CBC News. (2021). Violent deaths of women in Canada increased in 2020, study finds. Accessed online on June 20, 2021 at: <https://www.cbc.ca/news/canada/femicide-canada-1.5953953>
- Charmaz, K. (2000). Grounded theory: Objectivist and constructivist methods. *Handbook of qualitative research*, 2, 509-535.
- Christensen, A. D., & Jensen, S. Q. (2012). Doing intersectional analysis: Methodological implications for qualitative research. *NORA-Nordic Journal of Feminist and Gender Research*, 20(2), 109-125.

- Coffey, A., & Atkinson, P. (1996). Making sense of qualitative data: Complementary research strategies. Sage Publications, Inc.
- Coker, A. L., Smith, P. H., Thompson, M. P., McKeown, R. E., Bethea, L., & Davis, K. E. (2002). Social support protects against the negative effects of partner violence on mental health. *Journal of women's health & gender-based medicine*, 11(5), 465-476.
- Delara, M. (2016). Social determinants of immigrant women's mental health. *Advances in Public Health*, 2016.
- Du Mont, J., & Forte, T. (2012). An exploratory study on the consequences and contextual factors of intimate partner violence among immigrant and Canadian-born women. *BMJ open*, 2(6), e001728.
- Erez, E., & Harper, S. (2018). Intersectionality, immigration, and domestic violence. *The handbook of race, ethnicity, crime, and justice*, 457-474.
- Falkof, N. (2019). Sex and the devil: Homosexuality, Satanism, and moral panic in late apartheid South Africa. *Men and Masculinities*, 22(2), 273-293.
- Ford-Gilboe, M., Wuest, J., Varcoe, C., Davies, L., Merritt-Gray, M., Campbell, J., & Wilk, P. (2009). Modelling the effects of intimate partner violence and access to resources on women's health in the early years after leaving an abusive partner. *Social science & medicine*, 68(6), 1021-1029.
- Freedman, J., Jamal, B., & Euro-Mediterranean Human Rights Network (EMHRN). (2008). Violence against migrant and refugee women in the Euromed region. *Euro-Mediterranean Human Rights Network: Copenhagen*.
- Freedman. (2021). Violence against women migrants and refugees: Analyzing causes and effective policy response. Accessed online October 2021 at:
<https://gbvmigration.cnrs.fr/the-project/>
- Garcia-Linares, M. I., Sanchez-Lorente, S., Coe, C. L., & Martinez, M. (2004). Intimate male partner violence impairs immune control over herpes simplex virus type 1 in physically and psychologically abused women. *Psychosomatic medicine*, 66(6), 965-972.
- Godoy-Ruiz, P., Toner, B., Mason, R., Vidal, C., & McKenzie, K. (2015). Intimate partner

- violence and depression among Latin American women in Toronto. *Journal of immigrant and minority health*, 17(6), 1771-1780.
- Gonçalves, M., & Matos, M. (2016). Prevalence of violence against immigrant women: a systematic review of the literature. *Journal of family violence*, 31(6), 697-710.
- Gordon, S. F., & Collins, A. (2013). "We face rape. We face all things": Understandings of gender-based violence amongst female students at a South African university. *African Safety Promotion: A Journal of Injury and Violence Prevention*, 11(2), 93-106.
- Gulliver-Garcia, T. (2016). *Putting an end to child & family homelessness in Canada*. Raising the Roof= Chez toit.
- Guruge, S., Roche, B., & Catallo, C. (2012). Violence against women: an exploration of the physical and mental health trends among immigrant and refugee women in Canada. *Nursing research and practice*, 2012.
- Guest, G., MacQueen, K. M., & Namey, E. E. (2012). Introduction to applied thematic analysis. *Applied thematic analysis*, 3, 20.
- Guruge, S., Thomson, M. S., George, U., & Chaze, F. (2015). Social support, social conflict, and immigrant women's mental health in a Canadian context: a scoping review. *Journal of psychiatric and mental health nursing*, 22(9), 655-667.
- Hancock, A. M. (2013). Empirical intersectionality: A tale of two approaches. *UC Irvine L. Rev.*, 3, 259.
- Hyman, I., Forte, T., Du Mont, J., Romans, S., & Cohen, M. M. (2009). Help-seeking behavior for intimate partner violence among racial minority women in Canada. *Women's Health Issues*, 19(2), 10-108.
- Jayasuriya-Illesinghe, V. (2018). Immigration Policies and Immigrant Women's Vulnerability to Intimate Partner Violence in Canada. *Journal of International Migration and Integration*, 19(2), 339-348

- James, L. (2007). Censure and silence: Sexual violence and women of the African diaspora. *Theorizing empowerment: Canadian perspectives on black feminist thought*. Toronto: Inanna Publications.
- J. M. O'Mahony and T. T. Donnelly, "A postcolonial feminist perspective inquiry into immigrant women's mental health care experiences," *Issues in Mental Health Nursing*, vol. 31, no. 7, pp. 440–449, 2010.
- Kaukinen, C. (2002). The help-seeking of women violent crime victims: Findings from the Canadian violence against women survey. *International Journal of Sociology and Social Policy*, 22(7-8), 5-44. doi:10.1108/01443330210790085
- Kershner, M., & Anderson, J.E. (2002). Barriers to disclosure of abuse among rural women. *MinnesotaMedicine*, 85(3), 32-37. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/11915526>
- Lapierre, S., & Côté, I. (2016). Abused women and the threat of parental alienation: Shelter workers' perspectives. *Children and youth services review*, 65, 120-126
- Love, B., Henderson, J., Johnson, A., Stephens-Lewis, D., Gadd, D., Radcliffe, P., ... & Gilchrist, G. (2021). The Challenges of Conducting Qualitative Research on “couples” in Abusive Intimate Partner Relationships Involving Substance Use. *Qualitative Health Research*, 31(4), 767-777.
- Lloyd, V., Gatherer, A., & Kalsy, S. (2006). Conducting qualitative interview research with people with expressive language difficulties. *Qualitative health research*, 16(10), 1386-1404.
- Lyon, T. D. (1998). Are battered women bad mothers? In H. Dubowitz (Ed.), *Neglected children: Research, practice and policy* (pp. 237–260). Thousand Oaks, CA: Sage.

- Martinez, O., Wu, E., Sandfort, T., Dodge, B., Carballo-Diequez, A., Pinto, R., ... & Chavez-Baray, S. (2015). Evaluating the impact of immigration policies on health status among undocumented immigrants: a systematic review. *Journal of immigrant and minority health, 17*(3), 947-970.
- McGee, T. (2018). Saving the survivors: Yazidi women, Islamic State and the German Admissions Programme. *Kurdish Studies, 6*(1), 85-109
- McGrath, C., Palmgren, P. J., & Liljedahl, M. (2019). Twelve tips for conducting qualitative research interviews. *Medical teacher, 41*(9), 1002-1006.
- McKenna, K., & Larkin, J. (2002). Violence against women: New Canadian perspectives.
- O'Toole, L., & Schiffman, J. R. (1997). The roots of male violence against women. *O'Toole, LL & Schiffman, JR, Gender Violence. Interdisciplinary Perspectives, 3-9.*
- Pease, B., & Rees, S. (2008). Theorising men's violence towards women in refugee families: towards an intersectional feminist framework. *Just policy: a journal of Australian social policy, (47)*, 39-45.
- Pillow, W. (2003). Confession, catharsis, or cure? Rethinking the uses of reflexivity as methodological power in qualitative research. *International journal of qualitative studies in education, 16*(2), 175-196.
- Rai, A., & Choi, Y. J. (2018). Socio-cultural risk factors impacting domestic violence among South Asian immigrant women: A scoping review. *Aggression and violent behavior, 38*, 76-85.
- Reeves, S., McMillan, S. E., Kachan, N., Paradis, E., Leslie, M., & Kitto, S. (2015). Interprofessional collaboration and family member involvement in intensive care units: emerging themes from a multi-sited ethnography. *Journal of interprofessional care, 29*(3), 230-237.
- Reitmanova, S., Gustafson, D. L., & Ahmed, R. (2015). "Immigrants Can Be Deadly": Critical Discourse Analysis of Racialization of Immigrant Health in the Canadian Press and Public Health Policies. *canadian Journal of communication, 40*(3), 471.

- Roberts, K., Dowell, A., & Nie, J. B. (2019). Attempting rigour and replicability in thematic analysis of qualitative research data; a case study of codebook development. *BMC medical research methodology*, 19(1), 1-8.
- Ross, N.M., & Zubriski, S. (2020). Federal election 2021: Gender-based violence is an issue we should all prioritize. Accessed online October 24, 2021 at:
https://theconversation.com/federal-election-2021-gender-based-violence-is-an-issue-we-should-all-prioritize-167028?utm_medium=email&utm_campaign=Latest%20from%20The%20Conversation%20for%20September%209%202021&utm_content=Latest%20from%20The%20Conversation%20for%20September%209%202021+CID_4342d9153d62cdd5944a898f4a612e68&utm_source=campaign_monitor_ca&utm_term=Federal%20election%202021%20Gender-based%20violence%20is%20an%20issue%20we%20should%20all%20prioritize
- Rugg, G., & Petre, M. (2007). *A Gentle Guide to Research Methods*. 1st.
- Shawn, W. (2008). *Research is ceremony: Indigenous research methods*. Halifax and Winnipeg: Fernwood Publishing.
- Sokoloff, N. J., & Dupont, I. (2005). Intimate partner violence at the intersections of race, class, and gender: Challenges and contributions to understanding violence against marginalized women in diverse communities. *Violence against women*, 11(1), 38-64.
- Souto, R. Q., Guruge, S., Merighi, M. A. B., & de Jesus, M. C. P. (2019). Intimate partner violence among older Portuguese immigrant women in Canada. *Journal of interpersonal violence*, 34(5), 961-979.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research techniques*. Thousand Oaks, CA: Sage publications.
- Statistics Canada. (2015). *Family violence in Canada: A statistical profile, 2013*. Ottawa, ON: Canadian Centre for Justice Statistics.

- Tabibi, J., & Baker, L. L. (2017). Exploring the intersections: immigrant and refugee women fleeing violence and experiencing homelessness in Canada. In *Centre for Research & Education on Violence Against Women & Children*. Disponible à l'adresse suivante: <http://www.vawlearningnetwork.ca/our-work/reports/2017-summary-report-1-ESDC-CREVAWC-Meeting-Report.Pdf>.
- Tannenbaum, C., Greaves, L., & Graham, I. D. (2016). Why sex and gender matter in implementation research. *BMC medical research methodology*, 16(1), 1-9.
- Taylor-Butts, A. (2007). "Canada's shelters for abused women, 2005/2006." *Juristat*. Vol. 27, no. 4. Statistics Canada Catalogue no. 85-002. Retrieved from <http://www.statcan.gc.ca/pub/85-002-x/85-002-x2007004-eng.pdf>.
- Teixeira, C. (2008). Barriers and outcomes in the housing searches of new immigrants and refugees: a case study of "Black" Africans in Toronto's rental market. *Journal of Housing and the Built Environment*, 23(4), 253-276.
- Terry, G., Hayfield, N., Clarke, V., & Braun, V. (2017). Thematic analysis. *The Sage handbook of qualitative research in psychology*, 17-37.
- Thurston, W. E., Roy, A., Clow, B., Este, D., Gordey, T., Haworth-Brockman, M., & Carruthers, L. (2013). Pathways Into and Out of Homelessness: Intimate partner violence and Housing Security for Immigrant Women. *Journal of Immigrant & Refugee Studies*, 11(3), 278-298. doi:10.1080/15562948.2013.801734
- Thompson, C. (2021), "Reports of domestic, intimate partner violence continue to rise during pandemic". CTV News. Accessed online February 16,2021 at: <https://www.ctvnews.ca/health/coronavirus/reports-of-domestic-intimate-partner-violence-continue-to-rise-during-pandemic-1.5309118>

- Tongco, M. D. C. (2007). Purposive sampling as a tool for informant selection. *Ethnobotany Research and applications*, 5, 147-158.
- United Nations High Commission. Sexual and Gender-Based Violence against Refugees, Returnees and Internally Displaced Persons: A Guideline for Prevention and Response. May, 2003.
- Viruell-Fuentes, E. A., Miranda, P. Y., & Abdulrahim, S. (2012). More than culture: structural racism, intersectionality theory, and immigrant health. *Social science & medicine*, 75(12), 2099-2106.
- Walsh, C. A., Hanley, J., Ives, N., & Hordyk, S. R. (2016). Exploring the experiences of newcomer women with insecure housing in Montréal Canada. *Journal of International Migration and Integration*, 17(3), 887-904.
- Websdale, N. (1999). *Understanding domestic homicide*. UPNE.
- Wilkinson, L., Bhattacharyya, P., Riziki, A., & Abdul-Karim, A. B. (2019). Yazidi Resettlement in Canada-Final Report 2018.
- Wolgemuth, J. R., Erdil-Moody, Z., Opsal, T., Cross, J. E., Kaanta, T., Dickmann, E. M., & Colomer, S. (2015). Participants' experiences of the qualitative interview: Considering the importance of research paradigms. *Qualitative research*, 15(3), 351-372.
- World Health Organization. (2020). *Addressing violence against children, women and older people during the COVID-19 pandemic: Key actions* (No. WHO/2019-nCoV/Violence_actions/2020.1). World Health Organization.
- World Health Organization, *Women's Mental Health. An Evidence Based Review*, World Health Organization, Geneva, Switzerland, 2000, http://www.who.int/mental_health/media/en/67.pdf

Appendices

Appendix A Interview Guide for Participants

Possible opening questions

1. Have you participated in this type of interview before?
2. What was your first impression of Canada?
3. How long have you been in Canada?
4. How long have you been in this community / city [identified by name]?
5. Did you come alone? Are you alone here? Or can you tell me a bit about your household -who you live with?

Migratory Journey

6. What would you like to share about your migration experience / story / journey?
7. What has been some of the most positive/encouraging aspects about your experience?
8. What are some of the difficulties that you have faced?
9. What were you able to do to improve/address your situation?
10. Did you seek any help/support and what was it (or from where)? a) Probe: What kind of response did you get?
11. Do you feel that people understand your situation?

Personal Views and Life Experiences

12. What are your experience/views on:
 - a. Your accommodation situation
 - b. Your health situation/access to health services
 - c. Your economic situation d. Access to education/training/courses
 - e. Your family/relationships/children
 - f. Your relationship to “community”/Your wider relationships
 - g. religious groups/faith organizations h. Your relationship to wider society?
 - i. Experiences of GENDER-BASED VIOLENCE

Gendered Experiences and Safety in Canada

- This next group of questions is meant to help me understand some of the things you have experienced as a woman, so how your experiences as a woman may be different -or the same -as those of a man

13. As a woman in society do you think you have faced different problems/difficulties from men?

a) Probe: As a woman, have you faced GENDER-BASED VIOLENCE more often than the men in your life?

b) Probe: How would you explain these differences between your experiences and men's experiences?

14. As an immigrant or refugee woman in Canada, do you think you have faced different problems/difficulties from those faced by women and men generally in this country?

a) Probe: Can you recall a specific time/instance?

b) Probe: Do you think, as a migrant or refugee woman, you are more likely than Canadian-born to have prior experiences of GENDER-BASED VIOLENCE?

c) Probe: With respect to GENDER-BASED VIOLENCE, are migrant and refugee women's situations more likely to improve in this country?

d) Probe: Has Covid-19 had a different impact on you than the men in your life? Would you share an example?

15. Do you feel safe(r) in this country in comparison to your country of origin (or any other country of previous residence)?

a) Probe: As a woman, do you think you are safer in this country compared to men? Why or why not?

b) Probe: Have you noticed any differences in how people talk about GENDER-BASED VIOLENCE in Canada, compared to your country of origin? Or perhaps any differences in the way that society provides support to people who have suffered from GENDER-BASED VIOLENCE (support services)?

16. Have you ever been in contact with police? What was your experience of this?

a) Probe: Did this relate to a violent incident in which you were the victim?

17. Have you ever been in contact with immigration services/offices? What was your experience of this?

a) Probe: Have you been in touch with other services such as services addressing GENDER-BASED VIOLENCE? b) Probe: If yes, what was your experience with these services?

18. Have you met Canadian people (men or women), and what has been your experience?

19. How do you feel about how others perceive you in this country?

20. How do you perceive people generally in this country?

Closing

21. Do you think that it's useful/important to carry out this kind of research with women migrants and refugees?

22. What do you think a positive outcome of the research would be?

23. Is there anything else you would like to tell us about these experiences?

Background Information (not for audio recording)

- Country of Origin
- Length of time in Canada
- Immigrant or Refugee
- Legal status
- Gender
- Age
- Ethnicity
- Religion
- Family/Personal Status (i.e., Married/Single/Cohabiting)
- Children
- Paid work in Canada
- Education level
- Language spoken at home

Appendix B

Interview Schedule

The interview will last about one to two hours. We can provide the services of an interpreter. To help defray any costs you may incur by participating in this interview we will compensate you with \$30. Your participation in this research is entirely voluntary. Your safety and confidentiality are important to us and we will work with you to ensure your privacy and security.

Appendix C

Agencies Contacted

- Vancouver Association for Survivors of Torture (VAST)
- The Today Centre, Edmonton
- Immigrant Services Association of Nova Scotia
- International Women of Saskatoon
- Saskatchewan Association of Immigrant Settlement and Integration Agencies

Appendix D

Themes and sub-themes of the experience of Gender-Based Violence among Newcomer women in Canada

| THEMES | SUB-THEMES |
|--|---|
| Lack of integration and settlement support | <ol style="list-style-type: none"> 1. Alternative Housing 2. Access to social services 3. Social support |
| Socioeconomic Status | <ol style="list-style-type: none"> 1. Unemployment 2. Financial abuse 3. Social Benefits |
| Canadian Law and Policies | <ol style="list-style-type: none"> 1. Fear of family Separation 2. Lack of awareness |

Appendix E

Ethics Approval



Human Ethics
208-194 Dafoe Road
Winnipeg, MB
Canada R3T 2N2
Phone +204-474-7122
Email: humanethics@umanitoba.ca

PROTOCOL APPROVAL

TO: Evie Tastsoglou – Principal Investigator

Lori Wilkinson – University of Manitoba Investigator

FROM: Jonathan Marotta, Chair

Psychology/Sociology Research Ethics Board (PSREB)

Re: Protocol #P2019:099 (HS23173)

Violence against Women Migrants and Refugees: Analyzing Causes and Effective Policy Response

Effective: August 7, 2019 Expiry: August 7, 2020

Psychology/Sociology Research Ethics Board (PSREB) has reviewed and approved the above research. PSREB is constituted and operates in accordance with the current Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans.

This approval is subject to the following conditions:

1. Approval is granted for the research and purposes described in the application only.
2. Any modification to the research or research materials must be submitted to PSREB for approval before implementation.
3. Any deviations to the research or adverse events must be submitted to PSREB as soon as possible.
4. This approval is valid for one year only and a Renewal Request must be submitted and approved by the above expiry date.

5. A Study Closure form must be submitted to PSREB when the research is complete or terminated.
6. The University of Manitoba may request to review research documentation from this project to demonstrate compliance with this approved protocol and the University of Manitoba Ethics of Research Involving Humans.

Funded Protocols:

- Please e-mail a copy of this Approval, identifying the related UM Project Number, to the Research Grants Officer at [REDACTED]

Research Ethics and Compliance is a part of the Office of the Vice-President (Research and International)

umanitoba.ca/research

Appendix F
Recruitment Documents

Poster:

Are you an immigrant or refugee woman?

**We want to hear your
story**

Violence Against Women Migrants and Refugees: Analyzing Causes and Effective Policy Response

This research has been reviewed and approved by the Saint Mary's University Research Ethics Board (# 19-092), the Research Ethics Board of the University of New Brunswick (#2019-113), the University of Guelph Research Ethics Board (# 19-09-004), and the University of Manitoba Human Ethics Board (#P2019:099)

We are interviewing migrant and refugee women across Canada on the theme of violence against women. We want to learn about your migratory journey and your settlement experience here in Canada. By sharing stories with us, we hope to better understand experiences of violence against women, the strategies women employ to prevent violence and deal with its impacts, and how services that support migrant and refugee women can be improved.

The interview will last about one to two hours. We can provide the services of an interpreter. To help defray any costs you may incur by participating in this interview we will compensate you with \$30. Your participation in this research is entirely voluntary. Your safety and confidentiality are important to us and we will work with you to ensure your privacy and security.

This is a 3-year collaborative project supported by funding from the Canadian Institutes of Health Research (CIHR) and the GENDER-NET Plus ERA-Net Cofund. This project is part of a larger comparative initiative, the GBV-MIG project, which includes research teams in France, Ireland, Austria, Israel, Turkey, and Norway
<https://gbvmigration.cnrs.fr/the-project/> <https://smu.ca/gendernet/welcome.html>

This research has been reviewed and approved by the Saint Mary's University Research Ethics Board (# 19-092), the Research Ethics Board of the University of New Brunswick (#2019-113), the University of Guelph Research Ethics Board (# 19-09-004), and the University of Manitoba Human Ethics Board (#P2019:099)

Recruitment letters (newcomer women):

Violence Against Women Migrants and Refugees: Analysing Causes and Effective Policy Response

SMU REB # 19-092
UofG REB # 19-09-004

UofM REB # P2019:099 (HS23173)
UNB REB # 2019-113

Dear.....,

We invite you to participate in an interview for our research project, *Violence Against Women Migrants and Refugees: Analysing Causes and Effective Policy Response*. This is a 3-year collaborative project supported by funding from the Canadian Institutes of Health Research (CIHR) and the GENDER-NET Plus ERA-Net Cofund. For this project, we will be interviewing migrant and refugee women across Canada on the theme of violence against women. This project is part of a larger comparative initiative, which includes research teams in France, Ireland, Austria, Israel, Turkey, and Norway.

The interview will last approximately one to two hours and we can provide the services of an interpreter if you would like. During the interview, you will be asked questions about your migration journey and your experiences settling here in Canada. By sharing stories with us, we hope to better understand experiences of violence against women, and how services that support migrant and refugee women can be improved.

Your participation in this research is entirely voluntary. This is a confidential interview, meaning any details that may identify you such as your name will be changed before sharing or publishing findings from this research project. To help defray any costs you may incur by participating in this interview we will compensate you with \$30.

On behalf of the research team, thank you for your time and consideration,

Sincerely,

Labe Songose

Research Team Contact Information

Dr. Evie Tastsoglou, Principal Investigator
Saint Mary's University

Dr. Myrna Dawson, Co-Investigator
University of Guelph

Dr. Catherine Holtmann, Co-Investigator
University of New Brunswick

Dr. Lori Wilkinson, Co-Investigator
University of Manitoba

Dr. Chantelle Falconer, Postdoctoral Fellow
Saint Mary's University

Labe Songose
University of Manitoba

Project Website

<https://smu.ca/gendernet/welcome.html>

Research Ethics Board Contact Information

The Saint Mary's University Research Ethics Board has reviewed this research. If you have any questions or concerns about ethical matters or would like to discuss your rights as a research participant, you may contact the Chair of the Research Ethics Board.

This project has been reviewed by the Research Ethics Board for compliance with federal guidelines for research involving human participants. If you have any questions regarding your rights and welfare as a research participant in this study (REB #19-09-004), please contact: Director, Research Ethics; University of Guelph. You do not waive any legal rights by agreeing to take part in this study.

This research has been approved by the Human Ethics Board. If you have any concerns or complaints about this project you may contact any of the above-named persons or the Human Ethics Coordinator at [REDACTED]. A copy of this consent form has been given to you to keep for your records and reference

This research has been approved by the Research Ethics Board of the University of New Brunswick (UNBF). In case of questions, please contact [REDACTED]

Community Partners:

Violence Against Women Migrants and Refugees: Analysing Causes and Effective Policy Response

SMU REB # 19-092

UofG REB # 19-09-004

UofM REB P2019:099 (HS23173)

UNB REB #2019-113

Dr. Evie Tastsoglou, Principal Investigator
Saint Mary's University

Dr. Myrna Dawson, Co-Investigator
University of Guelph

[REDACTED]
[REDACTED]

Dr. Catherine Holtmann, Co-Investigator
University of New Brunswick

Dr. Lori Wilkinson, Co-Investigator
University of Manitoba

[REDACTED]
[REDACTED]
Dr. Chantelle Falconer, Postdoctoral Fellow

Saint Mary's University
[REDACTED]
[REDACTED]
[REDACTED]

Dear,

We invite you to participate in our research project, *Violence Against Women Migrants and Refugees: Analysing Causes and Effective Policy Response* as a community partner. This is a 3-year collaborative project supported by funding from the Canadian Institutes of Health Research (CIHR) and the GENDER-NET Plus ERA-Net Cofund. This project is part of a larger comparative initiative, which includes research teams in France, Ireland, Austria, Israel, Turkey, and Norway. We will be interviewing settlement service providers, policy makers, and migrant and refugee women, across Canada. The goal of this project is to understand the dynamics that produce patterns of violence in order to make policy recommendations and increase migrant and refugee women's access to support services.

We have been working with a pan-Canadian Expert Advisory Group to identify organizations that may be interested in partnering with us. We recognize you as the leading settlement service providers in Nova Scotia. As a community partner we would also seek your guidance on culturally-sensitive recruitment of migrant and refugee women interviewees and trauma-informed interview conduct and your recommendation for interpreters and translators.

We hope this research will help policy makers, settlement service providers, and researchers better understand how gender-based violence can be prevented and how services that support migrant and refugee women survivors of gender-based violence could be improved. We hope our findings will be useful to your organization to help leverage funding and design programs.

On behalf of the research team, thank you for your time and consideration,

Labe Songose

[REDACTED]

Project Website

<https://smu.ca/gendernet/welcome.html>

Research Ethics Board Contact Information

The Saint Mary's University Research Ethics Board has reviewed this research. If you have any questions or concerns about ethical matters or would like to discuss your rights as a research participant, you may contact the Chair of the Research Ethics Board at [REDACTED]

Violence Against Women Migrants and Refugees: Analysing Causes and Effective Policy Response

CONSENT FORM

Go through following list point by point, making sure interviewee understands each point (head nod, verbal acknowledgement such as "okay")

- Your participation in this study is voluntary.
- You can decide to stop at any time, for whatever reason.
- If you decide to stop the interview, there will be no consequences to you.
- If you decide to stop after we have begun the interview, I will ask you how to handle the questions you have already answered. It is up to you whether or not they will be included in the research project.
- If you do not want to answer a specific question, we can skip it.

- *give interviewee information sheet* Here is the information about the project. This is our website where we will post research findings. Here is the contact information for myself, and the other researchers working on this project.
- If you have any questions or decide you do not want your interview included in this project, please contact us. You can withdraw from participating in this research at any time, up until we have written the final research report.
- This project was reviewed by the ethics board. If you have any questions or concerns about your rights as a participant or how this research was conducted, you may contact the ethics board

Do you have any questions?

Do you agree to participate in this study? Please note your agreement to participate does not mean you are waiving your right to legal recourse in the event of research-related harm.

Yes _____ No _____

It is helpful to me to take an audio recording of this interview, so I can go back and carefully listen to our conversation. I will listen to this conversation and transcribe it. I will address you in the audio record by your chosen pseudonym so your real name will not appear on the audio record. When I transcribe the recording I will change any details that might identify you. I will store both the transcript and the audio recording on a secure drive at Saint Mary's University. **Is it okay if I take an audio recording of the interview?**

Yes _____ No _____

Is it okay if I take notes during the interview?

Yes _____ No _____

Appendix G

List of Community Resources

MANITOBA:

Klinic Crisis Line (24/7)



Westman women's shelter Y.W.C.A

Address: 148 11th St, Brandon, MB R7A 4J4.

Phone: 1(204) 571-3680

The Portage Family Abuse Prevention Centre

PO Box 1541

Portage La Prairie, MB R1N 3P1

[REDACTED]

Parkland Crisis Centre and Women's Shelter (Including refugee women)

Address: Dauphin, MB R74 3B3

[REDACTED]

Bravestone Centre

Address:

St. Norbert P.O 202

Winnipeg, MB R3V 1L6

[REDACTED]

[REDACTED]

West Central Women's Resource Centre

640 Ellice Ave

Winnipeg, MB R3G 0A7

[REDACTED]

ALBERTA:

YW Calgary

Domestic Violence Support Outreach Program

[REDACTED]

1715 17 Avenue SE
Calgary, AB, T2G 5J1

Calgary women's emergency shelter

24-hour family violence helpline:

Toll Free:

[REDACTED]

[REDACTED]

[REDACTED]

YWCA Sheriff King Home (Including Refugee women)

Address:

320 – 5th Avenue SE

Calgary, AB, T2G 0E5

[REDACTED]

Calgary Women's Emergency Shelter

Edmonton Trail N.E

Calgary AB T2E 8K9

[REDACTED]

Big Stone Cree Nation Women emergency shelter

Address: PO Box 900

Desmarais, AB T0G 0T0

[REDACTED]

SASKATCHEWAN:

YWCA of Saskatoon

510 25th Street E.
Saskatoon, SK S7K 4A7
[REDACTED]

[REDACTED]
Web site: www.ywcaskatoon.com

Piwapan Women's Centre

PO Box 888
La Ronge, SK S0J 1L0
[REDACTED]

E-mail: piwapanwomenscentre@yahoo.ca
Web site: piwapan.shelternet.ca

Waskoosis Safe Shelter

PO Box 3368
Meadow Lake, SK S9X 1Z7
[REDACTED]
[REDACTED]

North East Crisis Intervention Centre

PO Box 2066
Melfort, SK S0E 1A0
[REDACTED]
[REDACTED]

Web site: necic.shelternet.ca

Moose Jaw Women's Transition House

PO Box 1866
Moose Jaw, SK S6H 7N6
[REDACTED]

[REDACTED]
[REDACTED]

Prince Albert Safe Shelter for Women

PO Box 21025
Prince Albert, SK S6V 8A4

[REDACTED]
[REDACTED]
[REDACTED]

Isabel Johnson Shelter

c/o YWCA
1940 McIntyre Street
Regina, SK S4P 2R3

[REDACTED]
[REDACTED]
Web site: www.ywcaregina.com/shelter.html

Regina Transition Women's Society

PO Box 1364
Regina, SK S4P 3B8

[REDACTED]
[REDACTED]
[REDACTED]