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When Other Doors Were Closed,
Ours Were Open

ACWS
Alberta Council of
Women's Shelters

The Impact of the COVID-19 Pandemic on Domestic Abuse
Survivors and the Shelters and Staff that Support Them

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Executive Summary

The conditions created by the pandemic led many scholars, advocates, and activists to label domestic abuse as “the shadow pandemic.”

Through it all, shelters never gave up, and they never closed their doors.

For domestic violence and abuse survivors and the domestic violence shelters and staff that support them, the last three years have been tough. When the World Health Organization declared the COVID-19 outbreak a global pandemic in March 2020, the lives of many survivors changed. The public health restrictions that governments put in place to mitigate the spread of the virus accelerated and intensified the experiences of domestic abuse for many survivors. As workplaces closed or moved online, many survivors found themselves trapped at home with their abuser, unable to safely reach out for help. Those survivors who were able to reach out had less help to reach out to, as government and community-based organizations closed their doors or moved their services online. The conditions created by the pandemic led many scholars, advocates, and activists to label domestic abuse as “the shadow pandemic.”

Domestic violence shelters have been on the front lines of the shadow pandemic. When the COVID-19 pandemic was declared, and governments put health restrictions in place, they adapted their service delivery models to continue to support survivors. When public messaging campaigns urged people to “stay home, stay safe,” shelters recognized that home was not a safe place for all people to stay, and developed their own public messaging campaigns to let survivors know that shelters were open and available to support them both in-person and virtually. Through it all, shelters never gave up, and they never closed their doors.

Now, four years into the pandemic, little has changed for the better. As public health restrictions lifted, more survivors began reaching out for help, with more severe and complex cases of abuse, and greater need for support. Many of the systems of support that survivors rely on for support—including mental and physical wellness supports and supports for managing substance use—have been stretched thin by the pandemic, and survivors are experiencing more barriers than ever accessing them. And after four years of supporting survivors during pandemic conditions, without any sustained increase in funding or resources, shelters have been stretched past their breaking point.

This report speaks to the long-term impact the COVID-19 pandemic has had on survivors, shelters, and staff. **The first part of the report features quantitative data that ACWS and our members have gathered over the past three years.** Some of the most significant findings include:

- » **Calls for help** and the number of survivors that shelters are **unable to house** are both at **ten-year highs**.
- » **85% of staff** surveyed reported that **economic abuse has increased** since the pandemic began.
- » **81% of staff** surveyed reported that since the pandemic began, **survivors have increasingly struggled to meet their basic needs**, including paying for groceries, clothing, and medication.
- » **65% of survivors** surveyed in the last year are at **severe or extreme risk of being killed**.
- » **76% of staff** surveyed reported **increases in stress** caused by the pandemic.
- » **72% of staff** surveyed reported **increases in burnout** caused by the pandemic.
- » As of the writing of this report, the Government of Alberta **has not increased domestic violence shelter funding** since 2015–2016.

The second part of the report features qualitative information that ACWS gathered specifically for this project, through focus groups with both survivors and staff that we held across Alberta. This is the real heart of the report. Survivors and staff shared how the unique conditions created by the pandemic impacted them, their work, their children and their families, and their communities. They spoke about the systemic barriers that are making it harder for survivors to heal, and how navigating these barriers can itself become an additional form of stress and trauma. They warned us that we have only just begun to see the impacts of the pandemic, and that things will get worse before they get better. And they gifted us with their stories of resilience, innovation, and success, stories that serve as a guidebook for how to escape and address domestic violence and abuse even amid extraordinarily challenging circumstances.

We hope you find strength and hope in these stories. And we hope you heed the warning of survivors and of those who support them that the worst is yet to come, and that they cannot face it alone.



Land Acknowledgment

ACWS acknowledges the traditional lands upon which we live, work, and play. We recognize that all Albertans are Treaty people and have a responsibility to understand our history so that we can learn from the past, be aware of the present, and create a just and caring future. ACWS celebrates and values the resiliency, successes, and teachings that Indigenous people have shown us, as well as the unique contributions of every Albertan.

**We honour the courage
and strength of
Indigenous women.**

The ACWS office is located on Treaty 6 land in Amiskwacîwâskahikan, which is the traditional territory of the Plains Cree and an ancient gathering place of many Indigenous peoples for thousands of years. These lands have also been home to, and a central trading place of, the Blackfoot, Nakota, Assiniboiné, Dene, the Métis People of western Canada, and the home of one of the largest communities of Inuit south of the 60th parallel.

We honour the courage and strength of Indigenous women. We honour them as life givers and care givers as we honour and learn from their continuing achievements, their consistent strength, and their remarkable endurance.

Our members serve all nations and all peoples. They are located on Treaty 6, 7, and 8 lands across this province which include the five Métis territories of Alberta.

Acknowledgments

ACWS offers our deep thanks to all the survivors and the staff who support them who contributed their information and stories to this report, as well as to the shelters who warmly and generously hosted us in their space and their communities for in-person focus group sessions. This work would not have been possible without your courage, strength, and generosity.

This report was funded by the *COVID-19 Response and Recovery Fund* established by Women and Gender Equality (WAGE) Canada and administered by Women's Shelters Canada (WSC). We thank both WAGE and WSC for making this work possible, and for their ongoing support of domestic violence shelters and the survivors they serve.

This report was independently researched and written by ACWS. Miranda Pilipchuk, Ph.D. was responsible for overseeing the research and writing the report. Miranda Pilipchuk and Tosha Duncan facilitated all the in-person focus groups, as well as the online focus groups. Tosha Duncan provided guidance and support throughout the project, especially on clinical matters. Irene Hoffart provided comprehensive disaggregated quantitative data analysis as well as qualitative analysis of focus group transcripts. Ashley Reimer and Hannah Friesen supported the project on everything from survey design to data analysis and compilation, online focus group facilitation, report structure and design, and so much more. And Duyen Truong, Ph.D. supported the project by conducting a literature review of existing research on the COVID-19 pandemic and domestic violence.

Thank you to everyone who contributed to this work.

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About This Report

This report brings together data from multiple sources to provide a comprehensive picture of the long-term impacts the COVID-19 pandemic has had on domestic abuse survivors as well as the shelters and staff that support them.

The quantitative data featured in this report was compiled from three primary sources: (1) the 2021–2022 and 2022–2023 ACWS Annual Data Releases, (2) the 2021–2022 ACWS Workforce Survey, and (3) a survey about the state of economic abuse in Alberta and the economic impacts of the COVID-19 pandemic on survivors, which was completed by ACWS members and community partners.

ACWS has chosen to use “survivor” as a term of respect for people who are currently experiencing or have experienced violence and abuse that emphasizes their personal power, courage, and resiliency.

The qualitative information featured in this report was gathered through a series of focus groups run specifically for this project. In the summer of 2023, ACWS held a total of fifteen in-person and online focus groups on the impact of the COVID-19 pandemic. Eleven focus groups were for staff, and four were for survivors. Two of the focus groups were held online. Thirteen of the focus groups were held in-person, in domestic violence shelters across the province. ACWS held focus groups with members in northern, central, and southern Alberta, and across a range of municipality types—including members operating in large urban centers, in smaller municipalities, and in small towns or rural areas.

A note about terminology: ACWS uses the term “survivor” to represent all people who are currently experiencing or have experienced domestic violence or abuse. We recognize that not all people who have experienced domestic violence or abuse identify with the term “survivor,” and that some people may prefer to describe themselves and their experiences using different terms. We acknowledge that no term can adequately describe what it means to have experienced violence and abuse. In consultation with our Survivor Advisory Committee, which is composed of people with lived experience of domestic violence and abuse, ACWS has chosen to use “survivor” as a term of respect for people who are currently experiencing or have experienced violence and abuse that emphasizes their personal power, courage, and resiliency. We also honour and respect the choice to be identified by a different term.

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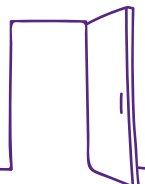
By the Numbers

Quantitative data collected over the past three years shows that the pandemic has had a marked impact on domestic violence and abuse survivors, as well as the shelters and staff that serve them.

The data reveals that, especially in the 2022–2023 fiscal year, after most pandemic restrictions had been lifted, domestic violence shelters experienced a huge increase in survivors needing support. They also reported corresponding increases in many types of abuse as well as danger to survivors, complex factors that can impact survivors and their healing, and the length of time survivors need to spend in shelter. Shelters and their staff are navigating these challenges while also experiencing stagnant government funding and decreasing donations from the community. The toll of all of this is staff wellness, with many staff reporting increased levels of stress and burnout, and with more staff than ever before choosing to leave the sector.



Scan to see related
recommendations.



Increasing Need

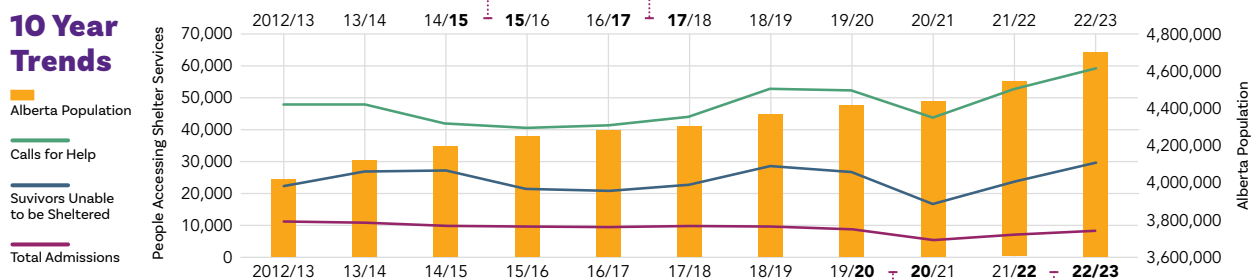
Some of the most striking impacts of the pandemic can be seen by looking at ten-year trends in the number of calls for help, the number of survivors who were admitted to shelters, and the number of survivors that shelters were unable to house. Here are some key findings.



2015: An injection of provincial funding for additional staff in domestic violence shelters had a direct and positive impact on survivors. Additional staff and resources meant shelters had capacity to provide support to a greater number of survivors, even as the Alberta population was increasing.

2017: The one-time funding injection in 2015 was unable to keep up with the steady increase in population and demand. In 2017, the number of survivors unable to be sheltered began to increase.

10 Year Trends



2020: During the pandemic, many survivors had to isolate or quarantine at home with their abusers, making it more dangerous for them to reach out for help. This danger, combined with the public messaging of “stay home, stay safe,” resulted in fewer survivors reaching out for help. Calls to shelters and admissions dropped as survivors and their children were trapped at home with abusers. Admissions to second stage shelters—which provide self-contained accommodation rather than a communal living space—remained high.

Even though the number of survivors reaching out for help declined during the pandemic, shelters experienced an increasing workload. As other support services closed or moved online, every ACWS member remained open. Many shelters became the sole lifeline in their community, and they stepped up to fill the gaps in services that widened during the pandemic. They did all this while adapting service delivery models to the unique conditions caused by lockdowns and health restrictions, and while navigating health guidelines that constantly changed as health authorities learned more about COVID-19.

2022: As pandemic restrictions lifted, more survivors who had delayed reaching out began to do so. Shelters experienced an increase in need for their services which coincided with historic inflation rates and stagnant funding levels. All combined, these factors placed extraordinary stress on shelters, shelter staff, and on survivors.

2023: Shelters today are experiencing unprecedented and multiple pressure points. Calls for help continue to outpace population growth. Since 2012–2013, the Alberta population has grown by 16.9%, while calls for help have increased by 23.7%.¹ Over the past three years, **calls for help have increased 27.8% per capita**. In addition to this increase in sheer volume, continued fallout from the pandemic, rising inflation, staff burnout and historic highs in staff turnover,² and stagnant funding have stretched shelters far past their limits.

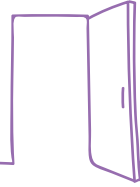
Since the last funding increase in 2015, inflation has risen by 25%.³ **Shelters are now answering 46% more calls for help than they did in 2015 but with only three-quarters of the spending power.**

¹ Population growth was calculated based on the Government of Alberta’s annual population reports for 2019–2020, 2020–2021, and 2021–2022, available here: <https://open.alberta.ca/publications/annual-population-report>, as well as the Government of Alberta’s second quarter population reports for 2013 through 2019, available here: <https://open.alberta.ca/publications/4420320>.

² Alberta Council of Women’s Shelters (ACWS), *Survivors Deserve Better. Shelters Deserve Better. Alberta Deserves Better. The 2021–22 ACWS Domestic Violence Shelter Workforce Survey* (2022). <https://acws.ca/workforcesurvey/>

³ See the Bank of Canada’s inflation calculator, <https://www.bankofcanada.ca/rates/related/inflation-calculator/>.

Increasing Abuse



Data collected by ACWS members indicates that abuse is increasing across Alberta. Rates of verbal, emotional, and psychological abuse remain consistently high, with three-quarters of survivors surveyed by shelters reporting that they have experienced one of these types of abuse.⁴ 51% of survivors surveyed reported experiencing physical abuse, and 18% reported experiencing sexual abuse.⁵ Over the past four years, there have also been increases in electronic and non-electronic stalking, as well as sexual and spiritual abuse, cultural abuse, animal abuse, and trafficking.

ACWS members report that economic abuse, in particular, has increased significantly during the pandemic. 85% of shelter staff surveyed reported that they saw an increase in economic abuse since the start of the COVID-19 pandemic, along with increased debt.

These trends are particularly concerning given that shelter staff are also reporting that survivors are having a difficult time meeting their basic needs, such as groceries, clothing, and medical care. 81% of staff surveyed indicated that since the pandemic began, the survivors they support have increasingly struggled to meet their basic needs. 80% reported that survivors are having increasing difficulties gaining access to affordable housing.

Shelters also reported that access to childcare, transportation, and stable employment also became more difficult since the pandemic began. Recent data from the ACWS 2022-2023 data release confirms that these issues have not been resolved, and many survivors are still struggling with basic needs, affordable housing, access to childcare and, many other issues.⁶

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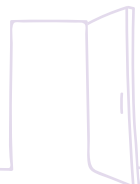


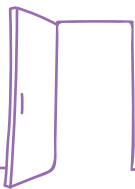
Scan to see related recommendations.

⁴ Alberta Council of Women's Shelters (ACWS), *On the Front Lines: Striving to End Domestic Violence and Abuse Together—2023 Data Release* (2023). <https://acws.ca/acws-data-release-2023/>.

⁵ Ibid.

⁶ Ibid.



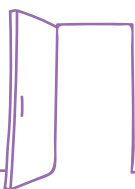


Increasing Danger

The number of survivors ACWS members surveyed who were at extreme risk of being killed by their current or former partner noticeably increased in the first year of the pandemic (2021-2022), across all shelter programs, including outreach programs as well as programs for survivors who stay in shelter. These numbers have remained high since then and are showing signs of further increase. In 2021-2022, 56% of survivors surveyed experienced severe or extreme risk of being killed. In 2022-2023 that number rose to 65%, which is one of the two highest numbers recorded in the past decade.⁷

Over the past three years, the number of survivors who reported that their partner has threatened them with a lethal weapon, strangled them, and forced them to have sex have also increased. A greater number of survivors are also reporting an increase in the frequency and severity of physical violence, and that they believe their partner or former partner is capable of killing them.⁸

This data is consistent with staff reports—which are detailed below—that they are seeing more extreme cases of violence in shelters.



Increasing Complexity

Complexity refers to a set of factors in a survivor's life that can intersect in ways that intensify their experience of domestic violence and abuse, create barriers to their healing journey, and increase their need for support as they move towards safety and freedom from violence. According to the ACWS 2021-2022 Workforce Survey, 69% of shelter staff surveyed indicated that the COVID-19 pandemic has resulted in an increase in the complexity in the cases of the survivors that their organization serves.⁹ In particular, staff reported that because of the pandemic, survivors have experienced increased isolation, declining mental wellness, and reduced service availability.

These observations are supported by recent data published by ACWS which reported that 83% of survivors surveyed in 2021-2022 and 72% of survivors surveyed in 2022-2023 experienced high or very high complexity.¹⁰

⁷ For more information, see ACWS, *On the Front Lines*.

⁸ For more information, see ACWS, *On the Front Lines*.

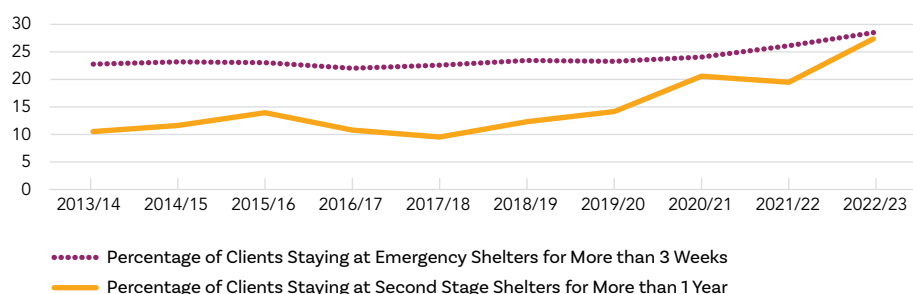
⁹ ACWS, *Survivors Deserve Better. Shelters Deserve Better. Alberta Deserves Better*, 7.

¹⁰ ACWS, 2021/22 Annual Data Release (2022), <https://acws.ca/wp-content/uploads/2022/12/2022-12-06-Data-Release-2022-FINAL.pdf>; ACWS, *On the Front Lines*.

Increasing Length of Stay

The amount of time survivors are staying in both emergency and second stage shelters has been steadily increasing over the past three decades, with particularly noticeable increases since the pandemic began.

10 Year Trend of Percentage of Clients Staying in Shelter for Longer Periods



The length of time survivors stay in emergency shelters has been increasing since 2019–2020, with 24%, 26%, and 28% of survivors staying longer than three weeks in the last three years respectively. This is compared to about 22%–23% of survivors staying in emergency shelters longer than three weeks in previous years.

In 2022–2023 approximately 28% of survivors stayed in emergency shelters for longer than three weeks; this is the highest number recorded in the last 10 years. Additionally, the highest average length of stay ever recorded in emergency shelters occurred in 2022–2023. In 2022–2023, survivors stayed in emergency shelters an average of 45% longer than they did 30 years ago.¹¹

In second stage shelters, length of stay began noticeably increasing since 2020–2021, with 21%, 20%, and 28% of survivors staying longer than one year in the last three years respectively. 2020–2021 represents the first time in the last ten years that more than 20% of survivors stayed in second stage shelters for longer than one year. And 2022–2023 saw the highest number ever of survivors staying for longer than one year, at 28%. This past year, survivors stayed in second stage shelters an average of 25% longer than they did a decade ago.¹²

In 2022–2023, survivors stayed in emergency shelters an average of 45% longer than they did 30 years ago.¹¹

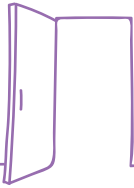
This past year, survivors stayed in second stage shelters an average of 25% longer than they did a decade ago.¹²

¹¹ ACWS, *On the Front Lines*.

¹² ACWS, *Survivors Deserve Better. Shelters Deserve Better. Alberta Deserves Better*.

Seniors' shelters, like other shelters, are also experiencing increased length of stay. One shelter has seen the average length of stay increase to 74 days, from 61 days previously, and expects to see the length of stay continue to increase as limitations to affordable seniors housing become stricter.¹³

Healing from abuse takes time, and all survivors deserve the opportunity to stay in shelter for as long as they need. The increasing length of stay numbers speak to the fact that survivors are experiencing greater negative impacts of abuse, and they need more time and support to recover. An increase in systemic barriers—such as access to affordable housing—are also contributing to longer stays in shelter and are preventing survivors from returning to their communities when they are ready.



Increasing Staff Strain

The ongoing legacy of the pandemic is having a tremendous impact on staff. Research done by ACWS in 2022 found that 76% of staff surveyed reported that their stress had increased because of the pandemic. 72% reported an increase in burnout. And 51% reported a decrease in their overall well-being.¹⁴

For all the work they do, shelter staff are unable to meet the level of need in their communities, and this has only increased since the pandemic began. In 2022, 51% of staff surveyed reported that they had experienced an increase in workload since the pandemic.¹⁵ And 83% of shelters reported that they need additional staff to meet the current demands of their shelter.¹⁶

These challenges have both contributed to, and been exasperated by, high levels of staff turnover. In 2021-2022, the turnover rate for ACWS member shelters reached 45%, which is unprecedented in Alberta's domestic violence shelter sector and is 18% higher than the national average for domestic violence shelters.¹⁷ Shelter leadership has also been impacted by high turnover rates. Since the pandemic began, more than half (55%) of domestic violence shelter director positions have turned over.¹⁸ This turnover creates a substantial loss of knowledge and skill in the domestic violence shelter sector that impacts the ability of shelters to serve survivors, as well as survivors' ability to access effective supports and resources.

In 2021-2022, the turnover rate for ACWS member shelters reached 45%, which is unprecedented in Alberta's domestic violence shelter sector and is 18% higher than the national average for domestic violence shelters.¹⁷

¹³ Ibid.

¹⁴ ACWS, *Survivors Deserve Better. Shelters Deserve Better. Alberta Deserves Better*, 8.

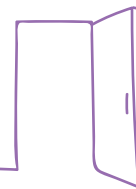
¹⁵ Ibid, 10.

¹⁶ Ibid, 11.

¹⁷ Ibid., 19.

¹⁸ Ibid., 21.

Decreasing Funding



In the midst of increasing need in their communities, and increasing stress on their workforce, domestic violence shelters have also experienced stagnant government funding and decreases in the amount they are able to fundraise. Inflation soared to new heights over the past three years, but shelter funding has not kept pace. As of the writing of this report, the Government of Alberta has not increased funding for domestic violence shelters since 2015–2016. Since that time, the cost of living has risen by almost 25%.¹⁹

Shelters have also struggled with reduced fundraising due to the COVID-19 pandemic and inflation. In 2021–2022, 45% of shelters surveyed reported that the COVID-19 pandemic has reduced fundraising revenues by 25–50%.²⁰ An additional 30% of shelters report that the pandemic has reduced fundraising revenues by over 50%.²¹ Shelters must rely on community donations more than ever just as communities across Alberta are struggling to keep up with the rising cost of living.

Domestic violence shelters are now navigating a precarious funding situation that jeopardizes their ability to serve their communities, and the survivors in those communities. They need adequate, sustainable funding to continue doing the valuable work they do.

As of the writing of this report, the Government of Alberta has not increased funding for domestic violence shelters since 2015–2016. Since that time, the cost of living has risen by almost 25%.¹⁹



Scan to see related recommendations.

¹⁹ See the Bank of Canada's inflation calculator, <https://www.bankofcanada.ca/rates/related/inflation-calculator/>.

²⁰ ACWS, *Survivors Deserve Better. Shelters Deserve Better. Alberta Deserves Better*, 14.

²¹ Ibid.



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Hearing from the **Experts**

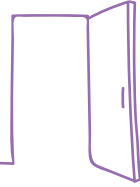
ACWS *considers survivors and the staff who support them to be the ultimate experts on domestic violence and abuse. An important part of this project included creating opportunities for survivors and staff to share their experiences of the pandemic and the insights they gained from it.*

In the summer of 2023, ACWS conducted a total of fifteen focus groups about the impact of the COVID-19 pandemic on domestic abuse survivors and the shelters and staff that support them. Four of these focus groups were with survivors. Eleven of the focus groups were with staff from domestic violence shelters and other organizations that serve survivors. It was an honour and a pleasure to speak with these experts from across the province, and we thank them for the knowledge and insights they shared with us.

In each of the focus groups, we asked participants to talk about both the challenges that the pandemic has caused and the positive ways they learned and grew in response to these challenges. Below, we describe in detail what they shared with us.



Challenges and Barriers



Survivors and staff identified many of the same challenges and barriers. Hearing stories both from the perspective of the people directly experiencing the barriers, and from the people supporting them through that experience, was a powerful experience for the researchers. We have tried to recreate that experience in this report as best we can. All the stories shared in this section of the report speak to how the COVID-19 pandemic created new challenges and exacerbated existing barriers. Both survivors and staff spoke at length about how the pandemic and the public health measures put in place by governments to respond to it created a unique set of conditions that both replicated and worsened abuse and its impacts. Both survivors and staff spoke at length about how existing barriers that pre-dated the pandemic became worse as government and community-based support organizations closed, reduced services, or moved online.

None of these challenges and barriers are the fault of survivors. Survivors do the best they can to navigate situations of violence and abuse and shelters do the best they can for survivors. All the challenges and barriers featured in this report are systemic issues that speak to the need for sustained system-wide changes to better support survivors.

Survivors

ACWS had the great privilege of interviewing fourteen survivors of domestic violence and abuse, during four in-person focus groups across Alberta. The survivors we spoke with were powerful, resilient, and insightful. They were all dedicated to healing, growing, and moving forward from the abuse they had experienced. They had also all experienced significant systemic barriers that made it much more difficult for them to move forward. Most of these barriers still either remain in place, or have worsened, four years into the pandemic.

The Intersection of COVID and Domestic Violence

The single greatest challenge that we heard from survivors across the province was that the COVID-19 pandemic intersected with their experiences of domestic violence and abuse in ways that amplified the impacts of both the abuse and the pandemic. Survivors reported that the conditions created by the pandemic mirrored the abusive conditions they experienced in their relationships by isolating them from their communities, placing increasing strain on their support networks, and controlling how they lived. They also shared experiences of being retraumatized and feeling stigmatized by some of the public health measures put in place during the pandemic—including

masking requirements, vaccine mandates, and the widespread use of temperature guns. For many of the survivors we spoke with, the combination of these impacts intensified the trauma of their abusive relationships and made their healing journeys more complex.

Isolation

Isolation is one of the most common abusive tactics.²² Abusers will often control what a survivor does, who they socialize with, who they talk to, and where they go. Many abusers isolate survivors from their extended support networks—which are often comprised of some combination of the survivor’s biological or chosen family, their friends, and their broader communities. A survivor’s support network is often the first place they turn to for help in leaving an abusive relationship.²³ If that network has been strained or damaged by the abusive relationship, survivors may have fewer built-in supports and resources to turn to as they leave their abuser and rebuild their lives.

Social distancing, cohorting, and self-isolation were some of the most predominant tools that governments and public health authorities relied on to slow the spread of the COVID-19 virus. Although these tools were effective at keeping more people safe from COVID-19, they unintentionally amplified the conditions of isolation many survivors experienced.

For survivors who were living with their abuser, the social distancing requirements became one more tool of abuse. It also made it impossible for survivors to reach out for help, as their abusers were almost constantly with them, and they were less able to find time and space alone to safely reach out. For survivors who had left the abusive relationship, the social distancing requirements could feel like they were right back in the relationship all over again.

“
Survivor
Quote²⁴



How am I going to feel safe? And then during the pandemic, how do you leave, you can't leave, like you're stuck there with this person. Nobody knows what's going on in your home. And my phone calls were always monitored, I was not allowed to talk on the phone, unless he was there, he would take my phone, he would look through everything. So not being able to go anywhere.”



²² Domestic Abuse Intervention Programs, “The Duluth Model Power and Control Wheel,” *The Power and Control Wheel*, <https://www.theduluthmodel.org/wp-content/uploads/2017/03/PowerandControl.pdf>; Deborah M. Capaldi et al., “A Systematic Review of Risk Factors for Intimate Partner Violence,” *Partner Abuse* 3, no. 2 (2012): 231–280.

²³ Amanda M. Stylianou, Elisabeth Counselman-Carpenter, and Alex Redcay, “‘My Sister Is the One That Made Me Stay Above Water’: How Social Supports Are Maintained and Strained When Survivors of Intimate Partner Violence Reside in Emergency Shelter Programs,” *Journal of Interpersonal Violence* (2018).

²⁴ Throughout this report we have condensed and edited quotes for the purposes of length and clarity, with the goal of ensuring that this report clearly communicates the insights of the focus group participants.

Across the board, survivors reported that the isolation caused by the pandemic was extraordinarily difficult and made them incredibly lonely. Some survivors reported that the only way they could make it through the isolation was by relying on substances, online gambling, or online shopping. Survivors with children who had been removed from their care expressed that the loneliness and isolation was particularly difficult for them. Child and Family Services (CFS) and other agencies that supported supervised access programs closed many of their services during the pandemic, which meant that some survivors had little or no contact with their children.

 *It really impacted me in that way. It was very lonely. Like, super lonely. I don't think I've ever felt that lonely in my life.*  **Survivor Quote**

 *Because you were trapped at home, there was a lot of kind of patterns and behavior that developed around those online kind of pieces, whether it was shopping or gambling or whatever it was, they picked up something new.*  **Survivor Quote**

Control

Control is at the heart of domestic abuse, so much so that it is often included in the definition. The United Nations defines domestic abuse as “a pattern of behavior in any relationship that is used to maintain power and control over an intimate partner,”²⁵ and the Duluth Model centralizes the words “power and control” in their *Power and Control Wheel* in recognition of the fact that domestic abuse “is characterized by the pattern of actions that an individual uses to intentionally control or dominate his intimate partner.”²⁶ Abusers will often use different tactics, including threats, intimidation, coercion, and isolation, to maintain control over their partners and their partners’ lives. This use of control has devastating impacts on survivors.

Although the health restrictions put in place by the federal, provincial, and local governments were intended to protect lives and prevent healthcare systems from collapsing, many of the survivors we spoke to reported that they experienced these restrictions as a form of control similar to what they experienced during their abusive relationships.

Survivors reported that for people who were still in abusive relationships, the pandemic restrictions allowed abusers to exercise even more control over their lives. The restrictions became another tool of control that abusers used,

²⁵ United Nations, “What Is Domestic Abuse?” United Nations, <https://www.un.org/en/coronavirus/what-is-domestic-abuse>.

²⁶ The Duluth Model, “Understanding the Power and Control Wheel,” *Domestic Abuse Intervention Programs*, <https://www.theduluthmodel.org/wheels/faqs-about-the-wheels/>.

as well as a way for abusers to justify their controlling actions by blaming those actions on the pandemic or by saying they were only trying to keep themselves, their partners, and their families safe from catching COVID.

“
Survivor
Quote

With the restrictions being imposed, and the loss of freedom associated there with having to be at home, that increased vulnerability to others kind of taking control or trying to have more control.”

For survivors who had left the abusive relationship, the restrictions on where they could go, who they could socialize with, and what they could do felt like the restrictions their abusers had imposed on them, which could lead survivors to feel like they were right back in the abusive relationship.

“
Survivor
Quote

Not being able to make those decisions and just having that lack of freedom really is parallel to the abusive dynamic. And I also think that's where a lot of abusive situations have developed between partners, family, children, and society. I think a lot of that has developed as a result of being told, not even being asked. We were told, that choice was not ours to make. And it didn't just happen here. It happened all over the world.”

“It’s Super Triggering”

One of the strongest themes that came out of our conversations with survivors were feelings of stigmatization and retraumatization. Survivors expressed feeling pressured by families, friends, governments, businesses, and members of the community to make health choices and to take health measures they were not always comfortable with. They also spoke about feeling judged for the health choices they did make.

Some survivors talked about being concerned by conflicting information they heard about the safety of the COVID-19 vaccines, but feeling pressured to get vaccinated even if they had concerns. Some survivors shared that given their history of trauma, they found wearing masks to be a triggering and retraumatizing experience, but that this was not recognized or accounted for in policies that required them to wear masks. Some survivors shared stories of being publicly harassed when they did choose to wear masks or take other measures to protect themselves from COVID. Both staff and survivors raised concerns about the widespread use of temperature guns, and how retraumatizing it was for so many survivors when they had to stand still while someone pointed a gun at their head.

Survivor Quotes

You're pointing [a temperature gun] at somebody's head. And also a mask. For me when I first had to start wearing them they were super triggering because my whole face is being covered. When you cry, it sticks to your face, you can't breathe, and then you're breathing in your mask and you're like hyperventilating and having an anxiety attack and you're getting hot and sweaty, and you can't take it off. It's super triggering and there's a few other girls I work with, same thing. They've had trauma happen to them in the past, same thing, the masks freak them out and we had to wear them. And everyone yelled at us [for wearing them], family members slammed doors in our faces.

I was never sworn out as much in my life as I was then.

Many survivors talked about how difficult and concerning these experiences were. They described these experiences as painful, traumatizing, and dehumanizing. An undercurrent that ran through all these stories was the sense that the survivors weren't being respected as people, but instead were criticized, belittled, or harassed because of the choices they made. Some survivors expressed feeling like they were either being treated themselves, or were expected to treat others, like they were dangerous or contaminated. All the survivors who spoke about these experiences expressed deep feelings of discomfort because of them.

And [you're] basically ostracized, if you touched somebody or didn't have your mask on, or your phone didn't turn green, or you couldn't go and spend time with family. Being ostracized, that's wrong.

Systemic Barriers

In addition to reporting on how the pandemic intersected with and amplified their experiences of abuse, survivors reported that the pandemic has increased the number of systemic barriers that they have experienced as they work to heal. The most common barriers survivors identified involved Income Support, children's services, access to affordable housing, support with managing substance use, and mental wellness supports. Survivors also reported experiencing increased acts of discrimination.

...survivors reported that the pandemic has increased the number of systemic barriers that they have experienced as they work to heal.

Income Support

For many survivors, Income Support offers a crucial lifeline as they rebuild their lives after leaving abusive relationships. Especially for survivors who have experienced economic abuse, Income Support can be a crucial part of their healing journeys. For survivors who are staying in second stage shelters, which provide survivors longer stays ranging from six months to two years in their own apartment, receiving Income Support can allow them to fully engage with the second stage programming without worrying about how they will pay for their rent, groceries, or other basic needs.

Survivors identified that the financial support they do receive has been stretched even thinner since the pandemic, as inflation rates have soared. All of the survivors we spoke with were determined to have healthy and violence-free lives for both themselves and their children but many felt that this was almost impossible given the level of support they receive from the government.

Despite how important Income Support is for so many survivors, the survivors we spoke with identified many problems with Income Support that have intensified during the pandemic. Survivors reported difficulties accessing and filling out the Income Support application, especially after the application moved online. They also reported receiving hostile treatment from government employees when they reached out for help. Some survivors commented that it seemed as if the employees they spoke with automatically assumed they were trying to take advantage of the system and treated them suspiciously. These challenges were exacerbated by the fact that many organizations that had previously facilitated access to technology—including public libraries—were also closed, making the application process even more difficult.

By far, the single greatest barrier that survivors reported in relation to Income Support was inadequate funding. Every survivor who spoke to us about receiving Income Support emphasized that the amount of money they received was not enough to meet their basic survival needs. Survivors identified that the financial support they do receive has been stretched even thinner since the pandemic, as inflation rates have soared. All of the survivors we spoke with were determined to have healthy and violence-free lives for both themselves and their children but many felt that this was almost impossible given the level of support they receive from the government.



Survivor
Quote

When you think about living on Alberta Works, [even] with a child tax benefit [it's] still not enough money to live.



Survivor
Quote

When you're on a fixed income, a fixed budget, obviously, it's fixed for a reason. But we want to be able to eat. And eat healthy. Like, fruit and veggies. And some people [have] special dietary needs. Some people's meds are paid for and others, it costs money.



Child and Family Services

One of the most incredible aspects of talking with survivors is their phenomenal dedication to their children. In every focus group we ran with survivors, they spoke about their children with astonishing passion, dedication, and care. Many survivors identified their children as their primary motivation for leaving the abusive relationship and for seeking health and healing in their own lives. All the survivors with children who we spoke with were determined to ensure that the abuse ended with them, and that their children would not have to live through what they had lived through.



I don't want my son to ever see me get punched out by a man.

Survivor

Quote



But they also spoke about the systemic barriers they face as they work to ensure that their children, too, can lead lives free from violence and abuse. Virtually all the barriers survivors and their children face have been caused by systems that have failed to understand the realities of domestic violence and abuse or to account for the unique needs of survivors and their children. The two foremost examples of these systemic failures are (1) survivors being required by law to ensure that their abuser has access to their children, and (2) survivors being denied access to their children due to unethical applications of child apprehension policies.

Survivors reported that even when there was evidence that they had been abused by their former partner, the legal system did not recognize that their former partner could also become abusive towards their children, and that courts often prioritized their abuser's right to see their children above their children's right to safety.

Virtually all the barriers survivors and their children face have been caused by systems that have failed to understand the realities of domestic violence and abuse or to account for the unique needs of survivors and their children.



I had no choice but to send my daughter on court-ordered visits. If I didn't, I was held in contempt. And that's terrifying. That's absolutely heart-wrenching. Not wanting to send your child with your abuser. And it's not just me he abused. He will deny it until he's blue in the face, but he didn't parent our child. So, wondering if she was going to be fed properly, if he was going to lose his shit and hurt her.

Survivor

Quote



Survivors also reported experiencing unethical apprehensions of their children, including Child and Family Services (CFS) apprehending their children because of malicious rumors spread by their abuser. Survivors shared that the pandemic severely impacted agreements they had with CFS. Survivors lost access to their children after the support services that were part of their agreement closed due to the pandemic, and they were unable to access any comparable supports in a timely manner.



“ Survivor Quote ”

I had everything set up with CFS, with my children. I told CFS I wanted to go to treatment. Well, now I can't go to treatment because COVID closed treatment. So how was I going to get my kids back?

These situations caused both survivors and their children immense harm.

Housing

Across Alberta, survivors reported that they could not find housing in their communities.

Lack of access to safe, affordable, and appropriate housing was one of the greatest systemic barriers survivors reported experiencing. Across Alberta, survivors reported that they could not find housing in their communities. Some survivors talked about travelling between communities to search for housing and being unsuccessful in every community they visited. Survivors identified the three biggest barriers to securing housing as (1) lack of affordable housing available in communities, (2) discrimination, and (3) unethical and/or illegal conduct by landlords.

Indigenous survivors, survivors with disabilities, and survivors on Income Support all reported experiencing discrimination from landlords.

Especially for survivors on Income Support or with low income, rent prices across the province are far beyond what they can afford. Indigenous survivors, survivors with disabilities, and survivors on Income Support all reported experiencing discrimination from landlords. Many survivors reported experiencing unethical or illegal treatment from landlords, including being asked to provide payment to view apartments, and being evicted because of medical conditions that required hospitalization. Survivors also reported experiencing discrimination because they had stayed in domestic violence shelters.

“ Survivor Quote ”

My landlord should never have moved me out of there when I was in the hospital. I paid rent for three years, never late. And when I came [home from the hospital], the key was changed. There was a number that I could call for my stuff in a storage unit. There's little accountability right there as far as the control that [landlords] have.

“ Survivor Quote ”

Everywhere you go, people won't rent to you, if you're on Alberta Works. It's just like, you're turned away, no matter what little town you go to. I've had two places that have asked me for the damage deposit before they let me go and see it. And I know that's not legal.

“ I don't really, pardon me for saying it this way, play the cancer card very often, but this guy asked me a direct question. 'Why aren't you working?' And so I sat there for a minute, and I decided, well, do I want to make up some story? You know, or what am I going to tell him? I was honest with him. And he basically laughed and said, 'well, why would I rent some place to you if you're gonna die?' **”**

Survivor
Quote

“ There is definitely a stigma that we're scumbags. So there's judgment. If you're staying in the shelter, they already think you're at your lowest and they think that you don't want to do anything about it. So they don't want to do nothing, or we can be used and taken advantage of. It's like we're the bad apples. **”**

Survivor
Quote

Access to Substance Use and Mental Wellness Supports

Access to trauma and violence-informed mental wellness supports as well as supports to manage substance use is a crucial part of the healing journey of many survivors. Research demonstrates that domestic abuse has substantial impacts on survivors' mental wellness and substance use. Domestic abuse often has serious, long-term emotional and psychological consequences. And many survivors, especially survivors who do not have access to mental wellness supports, may use substances to provide relief from the negative consequences of domestic abuse.²⁷

During the pandemic, many mental wellness and substance use supports closed. Many of the ones that remained open experienced a huge increase in demand and lengthening wait times. Many of the supports also shifted service delivery modalities to accommodate health restrictions and provided services online or over the phone instead of in person, which made them less accessible to some survivors.

The survivors we spoke to reported experiencing increased difficulties accessing substance use and mental wellness supports in their communities. Some also reported that virtual service delivery options did not fully meet their needs and contributed to their feelings of isolation.

²⁷ Echo A. Rivera et al., *An Applied Research Paper on the Relationship Between Intimate Partner Violence and Substance Use* (National Center on Domestic Violence, Trauma & Mental Health, 2015); Carole Warshaw et al., *Mental Health and Substance Use Coercion Surveys: Report from the National Center on Domestic Violence, Trauma & Mental Health and the National Domestic Violence Hotline* (National Center on Domestic Violence, Trauma & Mental Health, 2014); Larry Bennett and Patricia O'Brien, "Effects of Coordinated Services for Drug-Abusing Women Who Are Victims of Intimate Partner Violence," *Violence Against Women* 13, no. 4 (2007): 395-411; Julie A. Schumacher and Deobrah J. Holt, "Domestic Violence Shelter Residents' Substance Abuse Treatment Needs and Options," *Aggression and Violent Behavior* 17, no. 3 (2012): 188-197; Gina M. Wingwood, Ralph J. DiClemente, and Anita Raj, "Adverse Consequences of Intimate Partner Abuse Among Women in Non-Urban Domestic Violence Shelters," *American Journal of Preventative Medicine* 19, no. 4 (2000): 270-275.

“ Survivor
Quote

I’m also a recovering addict, because of my abusive relationships and something else that had happened. And there were no treatment centers during COVID. People weren’t allowed to go, everything was closed down. And again, not having that connection with people—the opposite of my addiction is connection. And I can’t have connection when I can’t see people. And even if I didn’t have that abusive person in my life, talking to somebody over Zoom, and over a phone call is not talking to somebody in person.”

“ Survivor
Quote

And then during COVID you had to make an appointment and that appointment could be like, four months and for me, for counseling, I had to do it on the phone. I wanted the personal connection.”

Impact on the Community

One of the most striking themes that came out of our conversations with survivors is the impact the pandemic has had on broader communities. The survivors we spoke with were incredibly tuned into the health of their communities, and in every focus group we ran, survivors raised concerns about the negative toll the pandemic has taken on the health and well-being of communities. Our conversations about community most often revolved around the subjects of (1) loss of life, (2) loss of empathy, and (3) discrimination.

Loss of Life

Many of the survivors we spoke with talked about losing loved ones. Some lost loved ones because of the COVID-19 virus itself. Some lost loved ones because of the impacts of the pandemic, including the emotional strain of living through a pandemic and increases in discrimination. Some survivors noted that the loss of life was more severe in rural communities, where people have less access to extensive health resources and other sources of support. Whatever the cause, this loss of life has taken an immense toll on survivors and their communities.

“ Survivor
Quote

My son committed suicide. And leading up to that point, and just to try to get support and stuff, they still didn’t have any support for nothing in place.”

Survivor Quotes

I lost a lot of family. Friends too, through COVID, and you're only allowed so many people, and you're just thinking, should I go or should I not go, and I never went. I lost my brother to COVID.

I think I lost a lot of friends, not just because of the pandemic, but they might have lost a partner or a child or anything and then they just kind of fell into depression.

Here, people who had COVID, they're gone.

"It Brought Out the Worst in Us"

Survivors reported noticing a general change in the people around them, with many survivors reporting a substantial decrease in empathy, compassion, and kindness, and increasing divisiveness in their communities. Some survivors directly linked this change to the health restrictions implemented during the pandemic and the polarized responses to the restrictions. Some survivors reflected on how the loss of life during the pandemic may have contributed to a decline in kindness, care, and togetherness.

Survivor Quote

The way I see it in a small town COVID had a big impact on people. They're more judgmental. They don't talk to you no more. They don't say hi. They used to be friendly people and now they just keep their distance. It's like that even on the reserves. It's all different. It's just totally different from before COVID.

Survivor Quote

I think a lot of the reason why we don't have empathy anymore is because we all got played against each other. If you don't get the shot, you're gonna make people die. If you don't wear a mask, you're gonna make someone die. If you don't stay home, someone's gonna die. If your neighbours have their family members over, make sure you call the police.

Many survivors spoke about how this lack of empathy played out within their social support systems, including their families and friends. Survivors reported that COVID placed intense strain on these support networks as they navigated

relationships with families and friends who had differing opinions or approaches to the pandemic. This point is particularly noteworthy, given that many survivors often rely on their support networks as they are leaving and healing from abusive relationships.

“ Survivor Quotes ”

It brought out the worst in the best of us. And I think with having toxic members in your family and your being close together like that, it's really, really, really hard, not only fighting your partner, but your family. It's scary.

It [the pandemic] just made everyone turn against each other.

Discrimination

Many survivors reported experiencing or noticing increases in discrimination based on race, disability, and other identity factors during the pandemic. In the most extreme cases, this discrimination led to death by suicide. In some cases, discrimination led to precarious housing or even homelessness. Even in less extreme cases, survivors have reported that the increase in discrimination has harmed themselves, their families, and their communities.

“ Survivor Quote ”

My daughter's friend told her she got into a lot of fights [in school] because they would call her 'wagon burner' or call her names, and then they beat her up and if she fought back, she'd be the one to get suspended.

“ Survivor Quote ”

Why is it acceptable for somebody to say that they won't rent me a place, not because I can't pay for it, but they don't want to rent to me because I have cancer? Where is the milk of human kindness in that statement?

Survivors also noted that because of events that happened during the pandemic—such as the police killings of Black people and the discoveries of unmarked graves at the sites of former residential schools—created both greater awareness of issues of racism and discrimination in their communities, as well as increased burdens for people in IBPOC (Indigenous, Black, People of Colour) communities.

The George Floyd thing. That triggered off a bunch of stuff [for my son]. That opened his eyes to what racism really was. He realized that people were making racist jokes about him his entire life.

Going into the pandemic, when you see just how all of the different things—not just stuff related to domestic violence—but when we saw George Floyd die, then it really kind of shed a light on different aspects of the system. It makes you start to wonder if some people are really on your side, more so now, with the pandemic, than it was before. It's kind of like the pandemic opened everybody's eyes.

It [the pandemic] has changed a lot of people.

“It Will Take a Long Time”

In each of the focus groups we held with survivors, we always asked them if they thought things were better now that we have four years of experience dealing with the pandemic, vaccinations, and more effective treatments, and now that the health restrictions that were put in place early in the pandemic have been lifted. We received mixed responses to that question in most of the focus groups. Some survivors thought some things were getting better, such as access to services and opportunities. Many survivors noted that even if some things were improving, things were nowhere near what they used to be before the pandemic. Some of the survivors reported that their situation now is more difficult than it was at the beginning of the pandemic. All the survivors we spoke with agreed that the pandemic has had substantial long-term impacts, that they and their communities are still living with those impacts, and that Alberta has a long road to recovery ahead.

All the survivors we spoke with agreed that the pandemic has had substantial long-term impacts, that they and their communities are still living with those impacts, and that Alberta has a long road to recovery ahead.

I see it everywhere, it's in everybody. There's real change. How will they ever get back to normal? Nobody will ever know. Or if they will ever get back to normal.

It will take a long time just to get back to the way it was.



Scan to see related recommendations.

Children

Across all the focus groups we ran, both with survivors and with staff, one of the strongest themes that emerged was children. Both survivors and the staff who support them are dedicated to the well-being of children. And they all expressed serious concerns about the impact the pandemic has had on children. In this section of the report, we have brought together the conversations we had with both survivors and with the staff who support them on the impact the pandemic has had on their children. Here is what they shared with us.

Domestic violence shelter staff reported that as pandemic restrictions were put in place and families were spending more time at home together, children were being exposed to more acts of violence and abuse.

The Impact of COVID on Children

Both survivors and staff identified that the COVID-19 pandemic has had a substantial impact on children. The most common themes that came out of our conversations were (1) increased exposure to violence and abuse, (2) increased aggressive behaviour, and (3) reduced education and socialization opportunities.

Increased Exposure to Violence and Abuse

Domestic violence shelter staff reported that as pandemic restrictions were put in place and families were spending more time at home together, children were being exposed to more acts of violence and abuse. This increased exposure is concerning, given that research has consistently demonstrated that children who are exposed to domestic violence and abuse are at risk of experiencing numerous negative effects, including behavioral problems, aggression and anxiety, academic challenges, and difficulties forming healthy relationships in the future.²⁸

“ Staff
Quotes

Kids started witnessing things more because everybody was stuck at home.

With children we're seeing a huge increase in the acuity and the experience of the violence. Not necessarily violence against the children, although there is that somewhat. It's more the mental health realities that we're seeing the children come in, in terms of kids that are incredibly angry, dysregulated bombs that are exhausted trying to deal with their own trauma, [and parents] really struggling with being able to consistently parent.

²⁸ Jassamine Tabibibi, Linda Baker, and Robert Nonomura, *Understanding Resilience in Children Exposed to Intimate Partner Violence – What We Know from Current Literature*, Learning Network Brief 38 (Learning Network, Centre for Research & Education on Violence Against Women & Children, 2020), <https://gbvlearningnetwork.ca/our-work/briefs/briefpdfs/Brief-38.pdf>.

Staff Quote

I definitely also noticed a lot more children being exposed to a lot more of the abuse during the day because everyone was in their home 24/7. And also, I think limited resources, with so many agencies closing their doors, they weren't able to access some of the same supports that they may have been using to cope prior to COVID because doors were now shut that used to be open.

Staff reported that in addition to children being exposed to more violence and abuse in the household, children also directly experienced more violence and abuse themselves. Because of the pandemic restrictions, children had less opportunities to disclose or report these acts of violence and abuse to safe people in their lives. Staff raised concerns that this lack of opportunity to talk about what was happening to them may have created a sense of betrayal in children and could itself be an additional source of trauma.

Staff Quote

We've also seen a very big increase in kids' disclosures of sexual abuse since the pandemic.

Staff Quote

Some scary things came out of COVID with kids and [there being] nobody there to hear them or to be able to report. There's some violence coming out of that for the children.

Increased Aggressive Behaviour

Children who are exposed to domestic abuse often respond by turning to aggressive behaviour themselves.²⁹ Difficulty regulating emotion is a common symptom of trauma exposure and behaviorally this can manifest through acts of aggression. Trauma robs children of safety, security, and predictability and has significant implications for wellness. Attachment may be impacted, depressive and anxiety symptoms may surface, and sleep disturbances are common.³⁰ Both survivors and shelter staff reported noticing substantial changes in children's behaviour since the pandemic began, including decreases in empathy in children and increases in children acting aggressively. Shelter staff described numerous cases where they had to ask survivors and

Both survivors and shelter staff reported noticing substantial changes in children's behaviour since the pandemic began, including decreases in empathy in children and increases in children acting aggressively.

²⁹ Linda Baker et al., *Children Exposed to Domestic Violence* (The Learning Network, December 2012), https://gbvlearningnetwork.ca/our-work/issuebased_newsletters/issue-3/index.html.

³⁰ For more information on the impact of domestic abuse on children who are exposed to it, see Alberta Council of Women's Shelters, *Walk Proud, Dance Proud: Footprints on a Healing Journey*, (2014), <https://acws.ca/wp-content/uploads/2021/05/Walking-the-Path-Together-Tools-GuidePHII.pdf>.

their children to leave the shelter because their child was acting in ways that jeopardized the safety of other survivors, other children, and shelter staff. Staff also reported that an increasing number of survivors are reporting being abused by their teenage children.

These challenges were made worse by staff not receiving the support they need from government organizations to manage these cases. Many staff spoke of contacting Child and Family Services (CFS) for support and receiving little or no response. This lack of response left survivors and staff to deal with the behaviour alone and required that staff prioritize the safety of other survivors and children staying in shelter when these behaviours could not be managed.

“
Staff
Quote

We’ve had to exit two families and they have since become homeless because they can’t be in shelter because the child is so violent—like physically going after other children and people and stuff.

“
Staff
Quote

I’ve noticed a lot of our referrals from the police have been child and parents. There’s been a lot of teenagers, seventeen to eighteen, when mom was like, I can’t do this anymore, I’m calling CFS, because they just don’t know which way to go anymore. So they’re calling the police. There’s been a big increase about identifying their children as abusers.

“
Staff
Quote

We have seen a huge, huge increase in negative behaviors with the children. Huge increase. We’ve had, unfortunately, many violent children lately, [at] very young ages. And, unfortunately—I will say it is really unfortunate because it’s not the child’s fault—we have to ask people to leave because the behaviors are so bad. They’re not going to be successful someplace else, because the behaviors are continuing with the children moving them somewhere else.

Some of this increase in aggression may have been caused by children being increasingly exposed to—and increasingly experiencing—violence and abuse during the pandemic. Survivors in particular noted that the decrease in empathy that they’ve seen in children could be related to increases in the amount of time children spend interacting virtually. Survivors suggested that skills like empathy cannot be taught or learned as easily in a virtual environment as they are in person, and that as children increasingly rely

on their mobile phones, computers, and other electronic devices to communicate with each other, they are losing opportunities to learn and build their empathy skills.

“ I noticed a huge difference in my kids’ attitudes when they’re on their phone or the internet, or in front of a screen for more than a few hours. You take the phone away, or you take the computer away for a few hours, [there are] attitude changes, or withdrawal. **”**

Survivor
Quote

“ One thing computers can’t teach is empathy. I noticed since they started using computers more since COVID, their empathy towards other people or other kids [is] going straight down. So I’m trying to teach them to be nice and actually talk to other kids and interact, you know, maybe invite a friend over from school. **”**

Survivor
Quote

Reduced Educational and Socialization Opportunities

Survivors and staff both identified one of the biggest impacts of the pandemic on children is reduced educational and socialization opportunities. They reported when schools physically closed at the beginning of the pandemic, and classes moved online, many children struggled both educationally and socially. Survivors and staff report that many children have not developed the educational and social skills that are commonly associated with their age. They are struggling with gaps in knowledge and with developing the skills expected in their grade. Survivors and staff noted that many children exposed to violence and abuse did not learn well in an online environment. Combined with the stress of the pandemic itself, this meant they did not absorb or retain the information they were taught throughout much of the pandemic.

Survivors and staff report that many children have not developed the educational and social skills that are commonly associated with their age. They are struggling with gaps in knowledge and with developing the skills expected in their grade.

“ Children are not developing their language the way they should. Those kids are not getting that support that they need and then moving into the fact that now we’ve got kids that are struggling academically and that are coming into our shelters, they’re struggling behaviorally and they have a lack of communication. They don’t know how to communicate between each other, and then they come into this situation. And on top of that is the whole trauma. This is a huge impact for young children. **”**

Staff
Quote

“ Survivor
Quote

I was in school at that time when COVID hit. I was in grade ten/eleven. And it wasn't really good because mostly all the kids quit school. Because they're like, 'oh, it's online we don't really have to do it.' My mom was just like, 'no, you're staying on the computer, you're gonna do school,' [but] I just want to be outside with my friends.

“ Survivor
Quote

She would have been in grade two. So that's right when she was learning how to read and do all these really important things. They start learning how to follow sentences and all that kind of reading skills that she never got to learn because it's not the same to read on a computer as it is to read in a book. And everything was just on the computer.

“ Survivor
Quote

And I've noticed now, like I talked to [my child's] teacher about it last year and she said that was the biggest problem, how they're seeing so many students not being able to read when they were in grade two, three. [They] didn't get those skills, because they missed out on that whole chunk of year.

Survivors and staff expressed frustration that the education system has not acknowledged or addressed the impact the pandemic has had on children, and that children are not receiving the educational supports that they need to address their gaps in knowledge. Multiple focus group participants commented that it seems like the education system is trying to push children through and pretend everything is okay, and they worry about the ongoing harm this is causing children. They noted that children are responding to feeling overwhelmed in school by shutting down, tuning out, or skipping school, which will have even greater long-term negative consequences for them. Participants suggested that the education system needs to slow down and give children time to catch-up and re-learn basic skills and knowledge.

“ Staff
Quote

The children that we support, of course a lot of the kids, they navigate already feeling really overwhelmed at those kinds of intense levels in classrooms. And we're already seeing patterns of skipping school and things like that in response to feeling overwhelmed. They started at a place of already struggling a lot, so where are we going now? We're increasing these difficulties and I believe making it more likely that these children aren't going to graduate.

Parenting Stress

Both survivors and staff reported experiencing increased parenting stress during the pandemic. Much of this was due to schools and childcare centers closing, and classes moving online. The parents in our focus groups reported that when the pandemic hit, they were suddenly expected to become their children's teachers and tutors, in addition to being their full-time caregiver, and all the other responsibilities they already had. For parents with jobs, these requirements were particularly difficult, as they had to find a way to balance caring for their children 24/7 with their workplace responsibilities. The parents in our focus groups also reported that the pandemic reduced or eliminated their access to parenting and childcare supports, which increased the stress they experienced. And even though all the parents we spoke to expressed deep love and care for their children and were willing to do anything it took during the pandemic to support their children, many of the parents found having to be a 24/7 caregiver—with no opportunities for breaks—overwhelming.

“There was a lot of parenting stress, there were a lot of clients that would call and just say like, I don't even know what to do anymore. And they had no supports because nobody could go into the home and the kids weren't leaving.”

Staff

Quote

“There was an added pressure for parents to kind of turn into teachers. A lot of them had to be willing to stay home with their kids. They didn't really have that break, but they had that extra responsibility and trying to teach. And some parents weren't used to doing things online. So they had to kind of be taught how to teach their kids. So that added one more thing to the stress of the household.”

Staff

Quote

“There were a lot of parents, that were used to their kids [being] on the bus at eight o'clock, and now nobody leaves. So that's a lot of stress. The whole day [and] night dynamics and living—just getting through each and every moment of each and every day. For whatever the situation, everything became challenging.”

Survivor

Quote



Scan to see related recommendations.

Systemic Barriers

Just as survivors reported experiencing barriers in systems that should support them, survivors and staff reported similar barriers in systems that should support children. In addition to the concerns involving the education system outlined above, survivors and staff reported experiencing the greatest barriers with Child and Family Services (CFS). Many survivors expressed feeling let down or betrayed by CFS. Staff at times expressed sympathy for the demands CFS staff experience, noting that they have incredibly stressful jobs that have only gotten more so during the pandemic, but they also expressed frustration with the near constant barriers they've experienced with CFS.

“
Staff
Quote

I know that Children's Services is just there feeling completely tapped out as well. And the unfortunate thing is that becomes a cycle. When their staff are tapped out, then the clients aren't getting the support, and then they're short staffed, and then it's that ripple effect that just results in people falling between the cracks.

“
Staff
Quote

The frustration with trying to deal with Child and Family Services. And I get they're overworked, overwhelmed and stuff like that. But they don't seem to have an understanding that we do not have the capability to deal with a child with this severity of issues.

Staff across Alberta reported difficulties getting CFS to engage with them or to provide supports. They expressed concern that CFS staff did not seem to fully understand the impact of domestic abuse on survivors and children, or the level of support they need to heal. Numerous staff also reported experiencing “dump and run” situations, where CFS would refer survivors they had been supporting to domestic violence shelters, only to suspend all CFS support once the survivor was in shelter. For survivors, these practices can feel like abandonment. For shelters, these practices can feel like they are being asked to do the government's work for them, without any of the funding or the resources that come with a government position.

“
Staff
Quote

We've, especially in the recent times, been feeling like the families being connected to us actually creates this sort of idea of safety for CFS where they can say, well, this family is in shelter, it's your problem now, and they will not get involved for things that maybe they would have gotten involved if this was in community.

Staff Quote

We do see that quite frequently with CFS in general, they call for a woman and their children to be brought into shelter; most of the time the children don't even want to be there. So they don't really engage with us. But CFS is supposed to be working with them and following up but as soon as they're in shelter, there is no follow-up. They pretty much just say if they leave the shelter with the child, call us.

Shelters do everything they can to support survivors and their children, but in some cases, survivors and their children need more resources than shelters alone can provide. Staff shared that when CFS refers survivors to the shelter and then suspends support it can feel like CFS is trying to outsource their most difficult cases to shelters. In these cases, the result is that shelter staff work twice as hard to attempt to do the work of CFS in addition to their own work, and survivors are less likely to receive the full support they need and more likely to fall through the cracks.

Staff Quote

It is just so disheartening. And to be honest, there are times where we just say to ourselves, I hope nothing happens to these children in our care because we seem to be the only ones that give a shit.

System Successes

For all the problems that the focus group participants identified with CFS, they also shared some positive stories. Shelter staff noted that in the cases where CFS had responded to and engaged with the survivors staying in shelter, the survivor and their children had received better support than they might otherwise have. CFS workers have access to funding, supports, and resources that shelters do not, and when they use them to support survivors and their children who are staying in shelters, the results can be incredible. Staff noted that the level of care and support survivors and their children receive would increase substantially if CFS would routinely work with shelters to support survivors and their children.

Staff Quote

Clients that have CFS workers, it is actually awesome having them because they have government funding and a lot more resources that our clients are able to utilize.

Shelters

ACWS also had the great privilege of interviewing seventy-three staff who work in domestic violence shelters or other organizations that support survivors of domestic violence and abuse, in eleven focus groups. Nine of these focus groups were conducted in-person, in shelters across Alberta. Two focus groups were conducted online. During these focus groups, staff shared with us the impact they have experienced and witnessed because of the COVID-19 pandemic on the survivors they support, on domestic violence shelters, and on the staff themselves. We have divided these observations into two sections. This section of the report will focus on the impact staff observed on shelters, including the impact they have witnessed on survivors who have accessed shelter services. The next section of the report will focus on the impact of the pandemic on staff themselves.

Domestic violence shelters have had to fill the service gaps caused by the pandemic, and they have willingly stepped up to this task out of care and concern for survivors and their communities, but paired with stagnant government funding and pandemic-related fundraising challenges, this has led to immense strain on shelters that are now doing more work than ever with less funding.

In all our conversations with staff they raised serious concerns about the state of Alberta's domestic violence shelter sector. All the staff we spoke to expressed great passion and conviction for their work. Shelter staff affirmed without hesitation that shelters do everything they can to support survivors and will continue to do so. And in every focus group, staff talked about how the conditions caused by the pandemic, together with almost a decade of stagnant funding for domestic violence shelters, is making it increasingly harder to do their vital work.

Staff reported that they are currently seeing increases in the levels of violence and abuse in their communities, along with increasing need for their services. Much like the survivors did, staff pointed out the many systemic barriers that are making it more difficult for survivors to access the full range of supports they need. Staff also pointed to an increasing number of service gaps that have happened because of the pandemic. Domestic violence shelters have had to fill the service gaps caused by the pandemic, and they have willingly stepped up to this task out of care and concern for survivors and their communities, but paired with stagnant government funding and pandemic-related fundraising challenges, this has led to immense strain on shelters that are now doing more work than ever with less funding. Staff spoke about how shelter space is becoming an increasingly valuable and rare commodity, and emphasized the need for more shelter space, and the importance of adequate and sustainable funding to ensure that shelters can continue to serve Albertans in need.

Scan to see related recommendations.



Increase in Violence and Abuse

One of the dominant themes that came out of all the focus groups we ran with staff was the increase in violence and abuse they have seen since the start of the pandemic. Many staff noted that the abuse they see now is also more severe than it was prior to the pandemic. They reported seeing more cases of physical abuse, more severe kinds of physical abuse, and a wider range of abusive tactics than they had seen previously.

I felt that the challenges faced by community members experiencing domestic violence were more severe. They were coming up in more unique ways than what we [used to] see. Like, the physical aspect of it, I think that was more evident. We would see other various forms of abuse that came out early on.

Staff

Quote

Staff provided two interconnected explanations for this increase. They pointed out that the job loss and economic strain of the pandemic directly played into the patriarchal standards still in existence in our society that expect men to be primary earners in their household. Staff noted that many men in Alberta seek employment in the oil and gas industry, where they are often required to work long shifts away from home, and that there were many layoffs in the industry when the pandemic began. The experience of job loss and increased financial strain, set against a patriarchal background that conveyed the message that their unemployment reduced their worth as men, led to a substantial increase in stress for many men. Staff suggested that an increasing number turned to violence and abuse as a way of coping with this stress.

It was a male figure usually that had lost their job, or was working hard, and the kids were at home. [Survivors] felt that they had a responsibility, and they had to stay, for the kids and for him. It was a lifestyle change for a lot of families. There were many [families] where typically, one person was working away a lot. And then that was no longer [the case], so then they were around each other for way longer stretches of time than they were ever accustomed to before, which led to more issues.

Staff

Quote

So he's, he's at his boiling point, and they've been together now for months and months.

Staff

Quote

There are a lot of couples that do well when they're apart for ten hours a day and then they can come back. So now you're putting people together that may not be compatible to be together for all that time, so then that's creating even more problems.

...survivors had to live through more abuse—and more severe forms of abuse—before leaving the relationship.

Much like the survivors had, staff also explained that because of the COVID lockdowns and other health restrictions, many survivors were stuck at home with their abusers, and were unable to safely reach out for help. The result is that survivors had to live through more abuse—and more severe forms of abuse—before leaving the relationship. Staff also noted that survivors felt responsible for supporting their partners through the difficulties of the pandemic and for maintaining the family for the sake of their children, even when that meant being abused by their partners, and they may have been willing to live with more abuse if it meant trying to maintain support and stability for their partners and their families.

“**Staff**
Quote

I think people were wanting to stay home where they knew they were safer from COVID-19, [but] not necessarily safer from their abuser. I felt that people were waiting a lot longer than they would have to access shelter supports or even to call the help line. Maybe it would have been a push or something like that that would have clued them in, like, I need help. But because they were scared to leave the house and be around other people, putting themselves more at risk for COVID-19, I think they waited through more abuse. Their tipping point was more abusive than it would have been had the pandemic not been going on. Maybe it would have been a broken nose, or broken ribs, or something that was more extreme compared to prior to or after the pandemic.

“**Staff**
Quote

The opportunity to get help—because their spouse was at home all the time or the kids were around all the time, they weren't in school—there wasn't the opportunity for them to call the helpline or to come to the shelter. It had to be way more planned.

Scan to see related recommendations.



Increase in Economic Abuse

Many staff reported that since the pandemic began, they've seen significant increases in the number of survivors who report experiencing economic abuse. Staff explained that some of this increase is likely due to the financial strain that the pandemic caused. As many people lost jobs and experienced increasing financial pressures, some abusers became increasingly controlling of their families' and partners' financial and economic situations.

Many staff reported that since the pandemic began, they've seen significant increases in the number of survivors who report experiencing economic abuse.

I'm seeing more reports of financial abuse. And I do wonder if that's correlated [with] the pandemic. [The pandemic] changed a lot for people and their financial resources. And I'm seeing that reported a lot.

Staff
Quote

There's a lot of financial strain within the relationships and a lot of financial control and we're continuing to see that escalate a lot more with our clients.

Staff
Quote

Staff also reported that the financial supports governments put in place during the pandemic unintentionally became a new tool that abusers used to control and exploit survivors. In virtually every focus group, staff talked about the Canadian Emergency Response Benefit (CERB), and how it was widely used as a vehicle of economic abuse. Staff explained that many of the survivors they support were pressured by their abusive partners to apply for CERB, and that the abusive partners would then take the money the survivors received and use it for their own purposes. Staff also reported many cases where abusers had taken out CERB in the survivor's name and without the survivor's knowledge. Many survivors are now required to pay back CERB, even in cases where their abuser fraudulently applied using their name, which is causing immense financial hardship. Some survivors are having other sources of government support confiscated—such as GST rebates or child tax benefits. These confiscations place immense strain on survivors and their families, as they often rely on government supports to meet their own and their children's basic needs. Staff report that in some cases, combined with the other financial struggles survivors are experiencing, the requirement that survivors pay back CERB is contributing to homelessness.

I think what we're seeing a lot in second stage [shelters] is more and more people coming to us with massive amounts of debt that were accumulated over COVID. We've heard lots of stories of abusers applying for CERB under their names, things like that.

Staff
Quote

“ Staff Quotes ”

We actually do have clients whose partners made them get CERB and now they've left their relationship, and they owe \$30,000, and they didn't even want that much from CERB.

I've heard a lot of struggles with finding job opportunities and that leads to homelessness. As well, those financial struggles, where now they can't afford to pay rent because they're trying to pay back their CERB.

Staff noticed that the problems with CERB disproportionately impacted clients who come from communities that have been marginalized, oppressed, or targeted. For example, they explained that some survivors with disabilities did not understand the complexities of CERB, or that they would have to pay it back. They also shared that some of the Indigenous survivors they serve reported that they had been told CERB worked the same way as other government supports, and they were not aware of the possibility that they could be responsible for repaying it.

Staff joked that they didn't even understand CERB, with all their experience navigating government systems and supports, and so there was no way we could expect survivors to understand it, especially while they were living through trauma and the impacts of abuse. They also noted that the government itself seemed confused about CERB eligibility, and that it is very unfair to expect survivors to understand the intricacies of CERB when the government itself didn't. Some staff noted that this dynamic itself constituted a form of structural abuse, and that it felt like survivors were being gaslit by the government.

“ Staff Quotes ”

We see a lot of clients living with FASD, so navigating CERB independently, or even with a worker, it's unrealistic. It's an unrealistic expectation. And honestly, it's unethical, and now people are having to pay these huge lump sums and they won't be able to get back on their feet. It's not possible.

The CERB thing, it kind of touches on clients' identity factors. Some clients who were, for example, on AISH, or [who had] FASD, they didn't understand.

I didn't understand. The government didn't understand. And that's why we're paying it back now.

I feel like clients that owe CERB are getting gaslit by the government and are being financially abused by the government right now because even if they did qualify, they're being told they do not qualify.

It's like they changed the rules after they rolled it out.

Increase in Need

With this increase in violence and abuse came a corresponding increase in the level of need for shelter services. Shelter staff reported that an increasing number of survivors are reaching out for help. They also reported that an increasing number of survivors who are reaching out for help come from communities that have been oppressed, marginalized, or targeted—in particular, Indigenous and newcomer communities. An increasing number of older adults are also reaching out for help. Staff also note that they are receiving calls for help from a much wider geographical range, with calls coming from across Alberta, and some calls coming from outside the province and as far away as the Maritimes.

We're getting the crossover with adults living at home with their parents being abusive and controlling and unsafe. I think that's an increase, we've seen that it's not just intimate partner violence, but that elder abuse, that intra-family violence.

Staff

Quote

I would say that another change too is socioeconomic, in that a large number or quite a few more than I expected of the women reaching out [are] from wealthier socioeconomic standings. Their experience of it is a brand-new experience, and then that coercive control over finances is even more pronounced because they don't actually have their name on a lot of things.

Staff

Quote

We're seeing that trend where [survivors] have never been off reserve and this will be their first time and it's culture shock. There's [also] an increase in the immigrant population [we serve]. Right now, we have been having a huge influx.

Staff

Quote

In every focus group, all the staff agreed that the level of need is currently increasing, and it is increasing faster now than it did earlier on in the pandemic. Staff noted that earlier on in the pandemic, many survivors were hesitant to reach out for support, either because they were in constant proximity to their abuser and were unable to safely reach out, or because they were concerned about exposing themselves, their children, and their families to COVID by coming into a shelter. That trend has reversed, and staff report experiencing a tidal wave of calls for help.

“ Staff Quotes ”

I did find though that the amount of domestic sexual violence obviously went up. It skyrocketed.

When it first initially started, and everything was shut down, it was very eerie, the phones never rang. When they finally did, it was from victim services or the hospital and there was a severe assault. And then afterwards, when everything opened up again, that's when the phones just started ringing, the floodgates opened, and the severity of the violence was to a level we've never seen before. More lethal tactics where there's more isolation, strangulation, use of weapons.

Prior to COVID, in the shelter, we would have ups and downs where we would have slow times and low numbers in shelter. And initially with the lockdowns we were very, very empty because people just were not even safe to get out of their homes. But once things started to open up a little bit, the shelter has been full since then. We haven't had the regular ups and downs and slow months that we had seen historically.

These trends speak to the lasting impact the pandemic has had on communities across the province. Communities that have experienced marginalization and oppression have been disproportionately impacted, but even wealthier communities that may not have previously relied as much on formal supports like domestic violence shelters are now reaching out for help. The need in communities across the province is immense, and it is only increasing.

Systemic Barriers

Staff spoke about many of the same systemic barriers that survivors identified. Staff reported that the survivors they support experience barriers accessing mental wellness, substance use, and physical wellness supports, and safe, appropriate, and affordable housing. They also reported that many survivors are experiencing increasing financial strain, as well as barriers accessing government support that would help ease that strain. Staff also noted that their clients are now experiencing more food insecurity than ever before. All these systemic barriers negatively impact survivors and make it increasingly difficult for them to live free from violence and abuse. Staff raised serious concerns about the ways in which multiple systems are failing to adequately help survivors.

Mental Wellness, Substance Use, and Physical Wellness Supports

Across the board, staff reported that the biggest barriers survivors experience in gaining access to mental wellness, substance use, and physical wellness supports are (1) a severe lack of services, and (2) long waitlists. In each community ACWS visited as part of this project, staff reported that there are not enough mental wellness, substance use, and physical wellness supports available in their communities, and the supports that do exist often have long waitlists.

Even getting into a rehabilitation for addictions, some of these women are looking at six months to a year waiting list.

Staff
Quote

Walk-in clinics filled up so fast, now the closest is forty minutes away for someone to see a walk-in doctor, and we don't have access to transportation. So people either have to go sit at the hospital for hours and hours and hours and hope that they're seen in our little town, or pay the \$150 to get a taxi into [a large urban centre] for a walk-in.

Staff
Quote

Staff also reported concerns that the services that are available are not operating in ways that are accessible to, or effective for, survivors. Staff noted that most rehab centers require that survivors detox before entering the program. There are very few detox centres across the province, and survivors—especially those in rural, remote, and northern communities—must often travel far outside their communities to access them. Combined with the long waitlists to enter rehab centres, the requirement that survivors detox first can be dangerous, as it leaves survivors in an especially vulnerable place without a lot of formal support, putting them at high risk of relapse, homelessness, exploitation, and further abuse. For mental wellness supports, staff noted that survivors are only allowed to receive six free treatment sessions, which is nowhere near enough to deal with the complex trauma and Post-Traumatic Stress Disorder (PTSD) many survivors experience, and that the only way survivors can get further treatment is by paying out of pocket, which is something many of them cannot afford.



Scan to see related
recommendations.

“ Staff Quotes ”

You get through detox but it's still a wait for treatment. And that's still dangerous. Because if you're detoxing from the drugs, but then you're just in limbo waiting for treatment, there's no housing, you're still around the people who got you there. If you don't have housing, then you're back, often to the streets or the shelters, and then it's just right back to where you just left.

The last time I called for mental health and addictions, it was a six-week waitlist. And then after that, you only get six appointments. And that's the part that I think is so hard, is they're so limited. It's mental health, that doesn't go away, they often will just have to go through that whole process again.

These barriers are especially concerning given that decreased mental and physical wellness and increased substance use are common side effects of domestic violence and abuse.³¹ To support them on their healing journey, survivors need access to long-term, trauma and violence-informed mental and physical wellness and substance use supports that account for the complexities of domestic abuse and the unique needs of survivors, and that use modalities that are evidence-based with a demonstrated efficacy for addressing complex trauma and associated mental wellness concerns.

Some of the most disturbing reports we heard involved survivors experiencing discriminatory treatment when they reached out for supports. Staff shared that in the physical health system in particular, the survivors they support had experienced intense and repeated discrimination. Indigenous survivors, and survivors struggling with mental health disorders or substance use disorders experienced the worst forms of discrimination, to the point that staff reported that local medical systems refused to treat these survivors, even in extreme cases of danger or need.

Staff reported struggling with the ethics of referring survivors to services that engage in discriminatory treatment. There are times when survivors need access to services but the only services available may expose them to further forms of trauma. Staff said that in those cases, it is very difficult to know if referring survivors to other sources of support will meet their needs or will cause them additional harm.

There are times when survivors need access to services but the only services available may expose them to further forms of trauma.

³¹ Vincent J. Felitti et al., "Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study," *American Journal of Preventative Medicine* 14, no. 4 (1998): 245–58; Amy E. Bonomi et al., "Health Outcomes in Women with Physical and Sexual Intimate Partner Violence Exposure," *Journal of Women's Health* 16, no. 7 (2007): 987–97; Laura P. Chen et al., "Sexual Abuse and Lifetime Diagnosis of Psychiatric Disorders: Systematic Review and Meta-Analysis," *Mayo Clinic Proceedings* 35, no. 7 (2010): 618–29; Lucy C. Potter et al., "Categories and Health Impacts of Intimate Partner Violence in the World Health Organization Multi-Country Study on Women's Health and Domestic Violence," *International Journal of Epidemiology* 50, no. 2 (April 2021): 652–62; Jeff R. Temple et al., "Differing Effects of Partner and Nonpartner Sexual Assault on Women's Health," *Violence Against Women* 13, no. 3 (2007): 285–97.

Staff

Quote”

We had a sixteen-year-old that was living [in shelter] and she wanted to die so bad she went and laid down on the avenue out here at about lunchtime, which is one of the busiest times on this road. So we called paramedics and within half an hour she was back here. The doctor, the psychiatrist, refused to see her because she was [using substances].

Staff

Quote”

And she was in the waiting room. And she told me she was bleeding. And still they made her wait three hours, even though she was bleeding all over the seat. And so after those kinds of stories it becomes a question of ethics, even for yourself. How do I even tell her to go back?

Housing

Similarly to the focus groups with survivors, the focus groups with staff identified housing as one of the largest barriers survivors currently experience. Housing was a major theme in each focus group ACWS ran with staff. In every region of Alberta staff reported severe shortages of safe, appropriate, and affordable housing in their communities. One of the major side effects of this housing shortage is that survivors must stay in shelter longer as they search for a safe and affordable place to live. These extended lengths of stay create backlogs in the domestic violence shelter system, where shelters do not have enough room to house additional survivors who reach out for help because the current clients they are serving must stay for longer periods of time.

In every region of Alberta staff reported severe shortages of safe, appropriate, and affordable housing in their communities.

Staff

Quotes”

There's very little housing and there's no affordable housing. And then it's not safe. And the type of housing—it's easy [to find] a one bedroom or bachelor but, if we have a family with kids, there's absolutely none. They're with us because they just can't find housing. We have, on average, [a] four to six weeks stay. And again, a lot of times people end up returning to unsafe situations.

Because of the cost of housing, and because there's nothing available, clients are stuck here. And so then the emergency shelters are completely full and their clients are unable to get into any houses.

We are in a housing crisis in [rural community]. You cannot find housing. They have no available units or that which would be more affordable for clients.

Staff reported that they are seeing less public housing options and more private landlords in their communities, and that private landlords are increasingly engaging in unethical and discriminatory practices. Staff shared many stories of private landlords refusing to rent to IBPOC survivors, survivors recovering from substance use disorders, survivors receiving Income Support, and survivors who have received support from domestic violence shelters. For these survivors, securing safe and affordable housing is even more challenging, and the process can itself become a source of trauma.

“
Staff
Quote

[Landlord asking questions] ‘Are you recovering?’ Like, what do you mean? Why are you asking those questions when she’s only applying for a house? Do you need a criminal record check first before you will apply? ‘Oh, you’re very Native.’ Some landlords are really ridiculous.

”

“
Staff
Quote

And another thing I did notice with our outreach as well is that once they have a worker connected to them, landlords will have a bias, they’ll stigmatize those clients, they will pretty much kind of avoid our clients just because they’re gonna think, oh, they’re on Alberta Works or [they’re] Asian.

”

“
Staff
Quote

They don’t want to rent to an Indigenous woman. So some of the women have to try and change their last name. So if they had a different name and it sounds more Caucasian, for lack of a better term, they use that just so they can even get a chance to try and get housing because they’re being discriminated against just because of their last name.

”

Income Support

Just like the survivors, staff also identified Income Support as one of the largest systemic barriers that survivors encounter. **Staff noted that with the lasting impacts of the pandemic and historic rates of inflation, many survivors are experiencing increasing financial difficulties, and are having a harder time meeting basic needs like rent, utilities, groceries, and medications. These financial difficulties can lead to survivors returning to abusive relationships.** For survivors who are unable to secure enough income for themselves and their children to live on, returning to their abuser may be the only option they have to keep their families housed and fed.

Staff
Quote

The more and more issues that we're seeing [is] with these basic needs, Alberta Works, and not having finances and not knowing where your next meal is gonna come from. All these challenges, they really make it very difficult for people to be engaged in meaningful and in-depth counseling. A lot of counseling that I do has gone from us doing lots of trauma work to now clients wanting to debrief and just talk about these basic needs that are not being met.

Staff
Quote

People are really struggling to pay and that seems to be the biggest reason why people are going back to their partners is purely just the cost of everything right now. So that's what we're really seeing is that people are stuck in these relationships.

In each of the focus groups we ran with staff, staff reported experiencing substantial difficulties with accessing Income Support. Of all the themes that came out of the focus groups, problems with Income Support was—by far—the most common. Staff repeatedly emphasized that the amount of money survivors on Income Support receive is nowhere close to enough to meet even their most basic of needs. This not only puts immense strain on survivors themselves, it also creates conditions that are conducive to unethical and unsafe living arrangements that can negatively impact whole communities.

Staff
Quote

And not to pick on Alberta Supports, but please. When you look at what a single person gets to a single person with two children, I don't even know how a single individual receives \$330 for [rent], you can't even rent a room for that. Then you run into situations where you have multiple people packing into small spaces, which just creates a powder keg. And not only that, then it creates problems within the community because that situation becomes problematic.

Staff reported that they or their clients have experienced unprofessional and retraumatizing treatment by staff at Income Support. Staff report that clients experience substantial barriers to receiving a support that is their right to access as Albertans. Staff described Income Support requirements and processes that were so arduous they were virtually inaccessible to many survivors. Some shelter workers recounted having to navigate situations where Income Support staff disregarded well-established protocols that shelters had worked out with their local Income Support offices. **Some cases were so bad that staff wondered why survivors would even attempt to leave abusive relationships, if the systems that are supposed to support them either fail to effectively respond to their needs or respond in ways that are stigmatizing and retraumatizing.**

“ Staff
Quote

We had a client in our second stage shelter that was trying to get Income Support sorted out. And she spent four hours three days in a row before she could actually talk to somebody, because she just couldn't stay on [the phone] past the four hours. And that was somebody who fortunately was under our roof and was safe, but [what] if it's somebody who's borrowing a phone, at the library, or somebody who can't do that for six hours sitting [and waiting]? And not all the applications are approved for emergency supports.

“ Staff
Quote

[There is] a lot of pressure on the women [in applying for Income Support]—asking them why they weren't working and why they needed the money. We would have to advocate strongly for them and still it was a continuous problem. So oftentimes, women would think, well, maybe I should have just stayed. At least we had financial support, even though we were being abused.

Staff noted that these problems with Income Support got worse during the pandemic when Income Support closed their physical offices and moved their services online. Staff conveyed that the move to online services created many additional barriers to survivors, especially survivors in rural, remote, and northern communities who many not have access to smart phones, stable internet, or the other technology they would need to successfully complete an Income Support application. **All the staff we spoke with strongly advocated for Income Support to return to in-person services, to increase the amount of funding available to survivors, and to address the barriers survivors experience when applying for support.**

“ Staff
Quote

I don't even know if their offices are open. I've been arguing, through the whole pandemic—our clients don't have computers, you can't tell them to go online and fill out a form. So then they can use our computers, but not all clients have that ability. And during the pandemic, for example, libraries were closed. So that's where a lot of people use free Wi-Fi or computers so that they could get online. It just becomes a vicious cycle of they don't have phones or computers. You can't move it to that kind of system for people who are vulnerable.

Scan to see related
recommendations.



Staff
Quote

We need to be forced to be back in person, because it doesn't work in rural areas, we needed the office to be [open] for people to go in and actually talk to a human and get a paper because they can't print it off. And for a lot of the online applications, you have to be able to photocopy stuff, upload it, scan it, email it all at the same time. And if you don't know how to do those things, or don't have access to a scanner, or printer, or phone.

Staff
Quote

I had a lady who didn't have a phone during the pandemic. So I was doing all her calling for her, three times a week. I had one woman without a phone, and she had to report in every week about her job search. And she didn't have a phone. It was COVID, so I would drive over there. I would disinfect my phone and hand it to her. And we would both stand outside when it was minus 40. And she had to call in and make her report. And it was like we were having to do a lot more, having to jump through a lot more weird hoops to satisfy requirements for other organizations.

Staff also expressed serious concerns about survivors accessing the Escaping Violence Benefit. The Escaping Violence Benefit provides support to Albertans who are currently experiencing, or who have left an abusive relationship, including transportation to domestic violence shelters and funding to stay in a hotel or motel if they are unable to access a shelter or if the shelter is full. The Benefit is administered and managed by Income Support. Staff reported that they and their clients have experienced numerous problems accessing the Benefit, including having claims denied without explanation, and being told that they need police evidence of violence before a claim can be approved, a practice which is especially concerning given that most survivors do not report acts of domestic abuse to the police. Staff also report cases where they have been full and have called Income Support to provide a hotel room for survivors in need, only to have Income Support tell them that they are too busy to help, and that if staff want the survivor to receive help, they must find the hotel themselves.

Staff
Quote

It has been years since I've had a client successfully apply to get funds for a hotel room. I've had several [shelter] workers tell me their approach is literally hanging up on emergency social services and just continue to call until you get someone who listens a bit more.

“ Staff Quote

I remember calling 6, 7, 8 hotels on behalf of Alberta Works. We had to call on their behalf because they were like, we don't have time to do this. If we want this lady to be in a hotel, you start calling.

Food Insecurity

Finally, we had many conversations with staff about the problem of food insecurity. Many staff reported that the number of survivors they support who are currently experiencing food insecurity is higher than ever before. Staff spoke of having to do more to support survivors with basic access to food, including providing them with food or with gift cards or vouchers they can use to purchase groceries. Many staff are also doing more to support their broader communities. They shared stories of having community members come to the back door of their shelter and ask for food. Staff do everything in their power to support people who reach out for help, whether that is survivors who are accessing their shelter services, or community members who show up at their door.

Some staff noted that during COVID the government had provided extra funding to food banks to support food security in communities. That funding has ended, and staff are reporting that food insecurity is worse than it was at the start of the pandemic. **Staff reported that their shelters are now struggling to keep up with the level of need they see in their communities, with many reporting that they are spending exponentially more on food without any increases in funding, and some staff reporting that shelter cupboards are starting to run bare.**

“ Staff Quotes

It blows my mind that it has gotten so bad in the last five, six years. We've got single moms who are like, I don't know, do I pay my rent and my utilities or buy groceries? We are giving out so many food cards. We didn't used to give out that many.

We have an increase of clients coming to the doors, asking for food. And then what we do is, leftovers, we will use those for the clients that come to the door.

I think food security too has been something very front and center with inflation really hitting the cost of groceries.

COVID's over, so all the extra money is gone now. The needs are still there, but there's no way to meet them.

Service Gaps

One of the biggest long-term impacts of the pandemic staff spoke about was increasing service gaps. Staff reported that many agencies closed during the pandemic. Some of them closed temporarily, and have been able to reopen. Many of them closed permanently. In either case, these closures have increased service gaps that were already present in communities, and they have created a substantial backlog in the number of people who were able to access the supports they needed. **Combined, the service gaps exacerbated by pandemic-related closures along with a corresponding increase in need for supports have led to a systems overload, with more people in need of more help, and less services available to help them.** Staff report that many of the services that are still available and that some survivors may need to rely on are experiencing such overload that they cannot provide the same level of support or response, and shelters and survivors are sometimes left trying to figure out how to navigate complex and dangerous situations alone.

I think the limited resources with so many agencies closing their doors, they weren't able to access some of the same supports that they may have been using to cope prior to COVID because doors were now shut that used to be open.

Staff Quote

I think systems overload, because so many people neglected themselves. Now something that maybe you could have dealt with really easily has compounded. And so when you go to the doctor, now, they're not just dealing with one thing, you've got this plethora of stuff that you're trying to [deal with] and then the systems are already overloaded. It's just a huge compounding issue.

Staff Quote

We've had police once just straight up tell us they're not coming. 'I have two people in the squad right now. I have no one to dispatch. We're not gonna get there. We'll get there when we get there.' And I mean, I hate the response, but I get it. Who's gonna come there? You have no one. But yeah, we're in danger. And who's collateral now? Our clients.

Staff Quote

Staff also note that these service gaps disproportionately impact people who experience the greatest vulnerabilities, including survivors, and especially survivors from communities that have been marginalized and oppressed.



“ Staff Quotes

Our clients are predominantly or disproportionately affected by any big changes in the systems and the systems were rocked by this—children’s services systems, school systems, financial systems, you know, economic, workplace systems like all of those were rocked in a way that they weren’t really prepared to know how to handle them.

The more vulnerable you were, the worse it was.

Shelters are now providing far more supports and services without any sustained increases in funding. And staff are stretched beyond their limits trying to meet needs that are far outside their area of expertise.

Domestic violence shelters have stepped up to meet these service gaps, as best they are able, out of care and concern for survivors and for their broader communities. Across the province, staff consistently maintained that they would do what needs to be done, but this willingness to step in and fill gaps left by other organizations has taken a toll on shelters and their staff. Shelters are now providing far more supports and services without any sustained increases in funding. And staff are stretched beyond their limits trying to meet needs that are far outside their area of expertise.

Some of the most harrowing stories of shelter staff filling in the gaps involve the medical system and support for substance use. As survivors across the province experience increasing barriers accessing physical wellness supports, and as many survivors report experiencing discrimination in the supports they can access, staff report that many survivors are less willing or able to access medical attention—even in cases of extreme need. A similar phenomenon is happening in relation to substance use. Many safe consumption sites across the province have closed, and in some cases, communities have been left entirely without any safe consumption sites.

Domestic violence shelters have well-established reputations in their communities as sources of safety and care. Staff report that in the absence of safe alternatives, survivors and other people in need are reaching out to shelters for services or treatment that should be handled within the medical system, or at a safe consumption site. Staff are now having to respond to emergency situations, and sometimes even life or death situations, because of systemic service gaps.

“ Staff Quote

We used to have a safe consumption site. And then that shut down. So now people are coming and running over to us asking for Narcan because someone’s overdosing at the library, or across the street, or in the alley. People feel very safe to use here, because they know that most of us are trained with Narcan and Naloxone. So a lot of people would make it a point to use outside the property or nearby because they know they could come to the door and say someone’s overdosing and one of us would go out.

Staff Quote

I had a man who had his shoulder dislocated and he said ‘Can you set it back for me?’ [And in these cases] we’d say ‘Hey, you should be going to the hospital.’ But they say, ‘I don’t want to go to the hospital. It’s terrible.’ Nobody wants to go to the hospital, and they feel safer here. And it’s terrible because you don’t want to be an unsafe place. You’re like, man, I wish I could locate your shoulder again. But I’m not—I can’t.

Staff Quote

People who have been maced, too, they’ll come here. I’ve poured milk in their eyes.

Staff Quote

I had a client here who had frostbite up to her fingers, most of her fingers were gone, and she refused to go [to the hospital] because she did not want to deal with the hospital staff. And we had to resort to giving her first aid, the bare minimum of medical attention, because she didn’t want to go, even though her fingers were rotting in her hand. It was the most awful thing I’ve ever seen.

Stagnant Funding

In the midst of increasing violence and abuse, increasing need for shelter services, increasing systemic barriers for survivors seeking support, and increasing service gaps that shelters are stepping in to fill, shelters are dealing with the problem of stagnant funding. Domestic violence shelters have not received a funding increase from the government since 2015, and since then, inflation has soared, and donations have declined.³²

During our focus groups, shelter staff reported that their budgets have been stretched to the breaking point. Shelters have stepped up, and they have responded to the pandemic and the complex impacts of the pandemic in innovative and creative ways, but this work has been hampered by stagnant funding. Shelters have had to increasingly turn to the community for donations and support, but communities across the province are struggling, and many staff reported that they have not received the same level of donations as before the pandemic. Every shelter ACWS visited reported struggling with funding. Every shelter told us that domestic violence shelters desperately need a sustained funding increase to keep providing the level of services to survivors and their communities that they have been.

Shelters have stepped up, and they have responded to the pandemic and the complex impacts of the pandemic in innovative and creative ways, but this work has been hampered by stagnant funding.

³² ACWS, *Survivors Deserve Better. Shelters Deserve Better. Alberta Deserves Better.*



Staff
Quote

You need funding to or the flexibility in funding to [operate creatively]. And we haven't seen that. If anything from the government we've seen no increments, no staff raises. No changing in the staffing model and no changes in our contracts. But everything else around us? Our shelving, it's empty. We have no food—but we're doing our food drive in a couple of weeks. And we're relying more and more on the community for that funding that people in the community can't afford to give us.



Staff
Quote

The shelter resources are being stretched beyond capacity as far as those basic needs. We can't keep up toiletries right now. We're putting out on social media almost weekly, for just the basic needs, shampoos, deodorants, those kinds of things. Panties, as we all know, are an ongoing thing, we will never have enough panties and stuff like that. It comes out of the budget because we can't get enough donations.



Staff
Quote

Just cost of living. Just seeing, you know, the budget hasn't changed, but the costs have certainly changed and you're still trying to do more with less.



Need for More Shelters

Underlying all our focus groups with staff was the recognition that the work domestic violence shelters do is invaluable, and there is an incredible need in communities for more of exactly this kind of work. **As Albertans continue to experience the consequences of the pandemic, and the number of survivors needing support continues to increase, the work shelters do will become even more vital.**



Staff
Quotes

[Shelter space is] a very valuable resource that is only increasing in its preciousness.

There is really a demand for emergency shelters.



Staff identified the need to recognize both that shelters provide a continuum of support to survivors and to communities, including addressing current acts of violence and abuse and preventing future acts of violence and abuse. They stressed that although we are hearing increasing messaging about the importance of prevention work—and they agree that prevention work is crucial—it is imperative that we not lose sight of the need to respond

to acts of violence and abuse that have already occurred, and to support survivors who have already experienced those acts. Some staff described this need using the language of ethics, noting that as a society, we have an ethical obligation to support survivors.

Staff
Quote

There's a lot of [focus on] prevention and all of this stuff that we say, you know, get out of these relationships, read the red flags, and abuse awareness and all of that. And while all that work is great, if we are getting to a point where we cannot provide the basic needs for these families, it's actually unethical for us to be screaming those things because we're asking these women to put their kids, their livelihoods, at risk. So, I think we need to see the other side of it, too. Not that we want people to stay in abusive relationships, but alongside the prevention work, we need to focus on making sure that basic need are met for these clients when we ask them to leave these relationships.

Staff

In addition to speaking about the impact of the COVID-19 pandemic on domestic violence shelters and the work they do, the staff who participated in ACWS' focus groups also spoke about the impact the pandemic has had on their own lives. Staff reported navigating risks to their own health as well as their families' health, and experiencing moral pain caused by having to impose health restrictions and guidelines on survivors and by not being able to fully help all survivors to the extent that they need. Staff lived and worked through the impacts of the pandemic while also struggling with stagnant wages, and as a result, many staff reported that they or their colleagues were experiencing extreme levels of burnout. Here are their stories.

Increased Workload

Staff reported that many of the health restrictions and guidelines put in place substantially increased their workload. Staff who supported survivors living in shelters had to engage in frequent deep cleaning and sanitization practices in addition to their regular work, which they described as challenging and exhausting. Some staff shared stories of having to follow extensive gowning, masking, and gloving protocols whenever they interacted with clients. Many staff felt this impacted their relationship with their clients, and although their clients were very understanding, staff did not feel that they were able to build the same relationships with their clients when they were wearing extensive protective gear.



Staff
Quote

You had to wear the PPE [personal protective equipment], which I always hated. It's so big, like I'm fighting and then it is so big. It's just really hard. You have to wear the PPE, you have to wear the mask, you have to wear the gloves.



Staff
Quote

The [clients] need to go out to smoke. I was like, okay, that's fine. So they're just out the back door or whatever. And they're like, actually, you need to put on the gown, then the shield, then the gloves and open the door for them. And I did it each and every time.



Staff who worked in outreach programs talked about the impact of having to learn how to use new technologies as they shifted many of their programs to a virtual format. Many staff were unfamiliar with Zoom and other online meeting platforms when the pandemic began. So too were many of the survivors they supported. Staff reported that they not only had to learn how to use the platforms themselves, but they also had to teach their clients to use the platforms, which substantially increased their workload. Staff also noted that the move to online service delivery methods had a negative impact on clients who did not have access to technology or to reliable internet, or who didn't know how to use technological devices.



Staff
Quote

One of the challenges we really did see when things were transitioning into online support, for us, are our older clients that didn't know how to use computers or Zoom or how to FaceTime on the phone. Or they didn't have a cell phone. They only had their landlines so then they still didn't really have that space to go to for safety reasons.



Across the board, all staff reported that they had to do more work during the pandemic to support survivors, meet public health standards, and to respond to the changing needs and dynamics created by the pandemic. They accomplished this additional work without substantial increases in funding or resources. Staff are still feeling the toll of this demand.



Staff
Quote

There were additional demands put on different teams in different departments. But with no additional resources. And obviously, that has implications for mental wellness and for just the fatigue that goes with it. So those are the things that are important to hear as well, that we survived.



Health Risks

Many staff also reported that because they work with the public daily, and so much of their work involves directly interacting with survivors, a significant part of their pandemic experience involved navigating increased risk to their own health and the health of their families. Staff shared stories of struggling to figure out how to balance the connection needs of their clients with the need to protect themselves and their families from the COVID-19 virus. This concern was especially pertinent to staff with disabilities or other health concerns, as well as to staff who were pregnant during the pandemic. Some staff reported that this placed them in an ethical dilemma, where they felt like protecting themselves meant sacrificing their relationships with their clients. Staff who worked with small children, in particular, expressed feeling great conflict and pain over not being able to physically engage with the children like they had been able to prior to the pandemic. Some staff expressed feeling like they had betrayed or rejected the kids they worked with.

A lot of kids are huggers and sometimes they like to hug the staff. And I remember I was at Walmart and I was pregnant during COVID and this kid recognized me, and we had a good relationship. She ran up to me and was like, hug me! And I was like, oh. It was such a horrible reaction to see the joy in her face go to like, oh, she doesn't want to hug me. It was so sad. And I was really trying to weigh—like, what should I have done? Should I put my physical health at risk for her emotional need for connection? Yeah, I really beat myself up over that one for a while.

Staff

Quote”

Especially working with kiddos with trauma, it felt like a consistent rejection and they, especially with the littles, it was very hard to talk about health and that kind of stuff. And then in this new world, it felt like a consistent rejection to this child who was now getting really big trauma things. But it needed to be done because of course we have to prioritize our health.

Staff

Quote”

Moral Pain

One of the most dominant themes that came out of our focus groups with staff was the sense of moral pain they felt because of the pandemic. This moral pain had two primary causes: (1) staff felt that many of the health restrictions and guidelines that Alberta Health Services (AHS) had established for shelters replicated the abusive conditions the survivors had left. When

staff had to enforce these guidelines, many expressed feeling like they were harming survivors, or like they themselves were acting like abusers. (2) Not being able to fully meet all the needs of every survivor and their children who reach out for help.

“And So, We’re Abusers”

Throughout the earlier parts of the pandemic, AHS put standards in place that all domestic violence shelters were required to follow. These standards included personal protective equipment (PPE) and isolation protocols. The standards were not established by shelters, and they were not designed specifically for domestic violence shelters, but shelter staff were required to enforce them. The staff we spoke with reported that survivors were very understanding of this, but also that many of the standards—especially the standards surrounding isolation—replicated the abusive dynamics survivors had just left. Many staff expressed that they felt they were causing harm to the survivors they supported by enforcing the AHS requirements. Some staff said they felt like the requirements turned them into abusers.

““ Staff
Quote

One of the challenges I think—because we had to follow through Alberta Health Services, otherwise we’d be shut down—is the isolation of [clients]. The last thing you want to do to a traumatized individual who’s been isolated, is isolate them. And there was a lot of pushback in regards to the [clients]. Many decided to leave, but they broke isolation protocols, so we couldn’t take them back in. There was definitely an ethical kind of dilemma of what we have to do, and what we feel that we should do.”

““ Staff
Quote

It was just a lot of unnecessary control that we felt we had to put on people who were already feeling very controlled.”

““ Staff
Quote

So originally, we did things backwards. Initially it was like, we don’t want you to go out and we don’t want you to leave the premises. Because that’s what we’re being informed. And so, we’re abusers. We’re keeping people locked up and telling them they can’t leave when they want.”

These experiences were echoed by the survivors we spoke with. Some of the survivors shared stories of being required to isolate in shelter, how retraumatizing this experience was for them, and how they almost returned to their abuser as a result.

Survivor Quote

We did a COVID test then she locked us in our room. Holy shit. Like, I almost went back to my [abuser]. I was so mad. We've been locked up for a long time. And then we got locked up here.

Some staff reported that because the AHS standards did not account for the realities of domestic abuse, they did not effectively balance the risk that survivors experienced from domestic abuse with the risk they experienced from COVID, and that the standards may have endangered survivors by creating additional barriers to leaving their abusers.

Staff Quote

No balance [between protecting people from the risk of COVID and keeping them safe from domestic abuse] there, whatsoever. I almost felt like it created so many barriers, you might as well stay [with the abuser].

“You’re Letting Me Down”

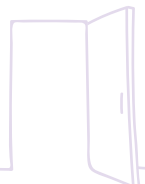
Domestic violence shelter staff do everything in their power to help every survivor who reaches out for help. Limited funding and resources mean that they are not always able to provide every survivor with all the help they need. Staff reported that this was one of the greatest sources of moral pain they’ve experienced since the pandemic began. **Despite their best efforts, shelters are unable to keep up with the level of need in their communities, and staff are the ones who must tell survivors that they will not be able to access all the supports they need. This experience is devastating, both for the survivors and for staff.**

Staff Quote

As a staff person, having to tell somebody that [you can’t help them] and to speak to them and not be able to help them in that situation was really awful. I think for me as a staff person doing that job, I did it for a year and a half and then it was just like, I can’t. I’m not going to last, not because of the work and not because of the stories, but because I couldn’t help.

Staff Quote

Having people tell you, You’re letting me down. You’re the only person that can help me. That’s hard. And knowing it’s probably true.



Stagnant Wages

Staff have been navigating the increased workload and moral pain caused by the pandemic without a corresponding increase in wages. The wages that staff working in domestic violence shelters make are largely determined by a Government of Alberta staffing model that establishes the maximum amount shelters are allowed to pay staff from out of their government funding. Some shelters are able to fundraise to provide top-ups above the government wage maximums, but many shelters—especially shelters in smaller towns and rural communities—are unable to raise enough funds to provide top-ups, meaning that they can only pay their staff what the government specifies. The Government of Alberta has not increased shelter staff wages since 2014–2015. Research ACWS performed in 2022 revealed that the average wage of domestic violence shelter staff is 15% lower than what the average Albertan makes, 21% lower than comparable business sector wages, and 33% lower than comparable wages in the Government of Alberta.³³ Shelter staff wages have not kept pace with inflation or with the increasing workload of shelter staff, they are inadequate to meet the needs of staff, and they do not reflect the value of the work that shelter staff do. Stagnant wages are placing increased stress on staff, especially as they are filling service gaps left by other supports and organizations—including government supports.

Staff report experiencing many of the same systemic barriers, struggles, and vulnerabilities with access to affordable housing and food security as the survivors they support. Survivors deserve the full support they need as they heal from abuse. And staff deserve to be paid living wages that reflect the value of the work they do as they support survivors on their healing journeys.

“
Staff
Quote

Our wages from the government, our contracts haven't changed and so that's very much front of mind for me as well, [on top of] a preexisting need to increase the contracts that can support better wages.

“
Staff
Quote

I would say I'm seeing a lot of staff that are struggling with these same concerns as well, so it isn't just my clients that are vulnerable with this. There's also a boomerang effect with staff as well, who are also very vulnerable, because to pay \$2,500 a month [for rent] is not in the salary of most of my staff members.

³³ ACWS, *Survivors Deserve Better. Shelters Deserve Better. Alberta Deserves Better*. 15-16

Burnout

One of the most common points of discussion in our focus groups with staff was burnout. Many staff talked about how they pushed through COVID, they did what they needed to do to keep shelters running, and they just kept on going. No matter what the obstacles, staff kept going, because that was what survivors needed, and that was what their communities needed. Now staff are reporting that after more than three years of pushing through the conditions caused by the pandemic, they are burned out.

Some staff reported that this burnout has been caused by the sheer workload they've been carrying. Some reported that the isolation and stress of the pandemic contributed to it significantly. Others noted how disheartening it was to continue to run into systemic barriers, and how much of a toll this has taken on them physically, psychologically, and emotionally. Most staff expressed concern for the state of the domestic violence shelter sector, and how it will be able to move forward and continue to support survivors in the midst of widespread sector burnout. All the staff we spoke to agreed that the sector itself needs funding, resources, and support to sustain it, and it needs them now.

No matter what the obstacles, staff kept going, because that was what survivors needed, and that was what their communities needed. Now staff are reporting that after more than three years of pushing through the conditions caused by the pandemic, they are burned out.

Staff
Quotes

A lot of us went on medical leave this last year, because we are absolutely exhausted. I had a mental health breakdown. Because I was done. I didn't want to lose my job because I love my job. But in these last few years, I've been isolated. I had nobody, so when I was at home, I had nobody to talk to.

Just that burnout, compassion fatigue, having so many barriers but not really being able to address the barriers, like with Children's Services. Just people getting disappointed and let down and just not able to deal with it anymore.

I'm actually quite troubled and concerned about our capacity to handle it because typically the staff are not experiencing the situations—they're outside of that. But we we've also experienced the pandemic and all of the anxiety and mental health stuff related to the isolation, the lockdowns, the insecurity, not knowing, we've all experienced that in real time.

Our staff are so burned out. They're here, they give their 110%, and then there's nothing left after.

“The Tip of the Iceberg”

Like survivors, staff also identified that as a society, we have a long road to recovery ahead of us. Some staff did note that there are some things that seem to be improving. But overall, staff expressed how the isolation, stress, and financial hardship caused by the pandemic created conditions conducive to domestic abuse. Many staff commented on how we are only just now beginning to see the impacts of the pandemic. **Combined with increasing service gaps and systemic barriers and increasing levels of need in communities, staff expressed concerns that the pandemic will continue to negatively impact survivors, and the shelters and staff who support them, for years to come.**

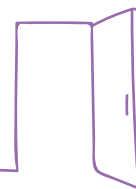
““ Staff
Quote

At the same time as our clients, the fatigue that staff are exhibiting is pretty typical from what we’re seeing in society at large. I feel pretty strongly we’re just seeing the tip of the iceberg when it comes to this because we know when anxiety is on the rise, domestic violence increases as well. And I think we’re starting to the full aftereffects of what we all went through.”

Scan to see related
recommendations.



Innovations and Strengths



In each of the focus groups ACWS ran, we always asked about strengths and innovations in addition to challenges. Through our ongoing work of supporting domestic violence shelters and working with them to advocate for survivors, ACWS knows that survivors, shelters, and staff have immense strength, and they have had to become deeply innovative to adapt to the conditions caused by the pandemic. We also know that talking about your own strengths is something many people—especially women and gender-diverse people—find deeply uncomfortable. Indeed, the strengths-based questions inevitably led to the greatest periods of awkward silence during every focus group. But they also led to some of the most profound insights, and we are honoured to be able to share those in this report.

Survivors

“I Can Get Through Absolutely Anything in Life”

When we asked survivors what they had learned and what they were most proud of accomplishing during the pandemic, their answers were both simple and profound. Most survivors reported being proud of things they said seem simple and easy but are actually phenomenally difficult. Many of these things speak to survivors finding a value in themselves that others have not always shown them. All of them speak to the core of what makes us human. Together, the accomplishments of survivors not only serve as a symbol of everything survivors were able to achieve during the pandemic, they also form a guidebook for how to live free from violence and abuse.

Together, the accomplishments of survivors not only serve as a symbol of everything survivors were able to achieve during the pandemic, they also form a guidebook for how to live free from violence and abuse.



I was able to get away from my abuser before he murdered me.

I'm more aware of my worth. Before, if somebody wanted something of mine, I would give it to them. And I got taken advantage of. And COVID taught me to look after myself a little better.

I feel more comfortable making my own choices.

I took two years to get therapy and get myself right. Without the pandemic I wouldn't have been able to. I would have been forced to go back to work right away. But because of the pandemic, I was able to take the extra time to be a good parent to my daughter, to get therapy, to get on the meds I needed, and my life has changed.

Survivor

Quotes



“ Survivor Quotes

I'm just being myself, for the rest of my life.

I just think empathy, and cheer, and positivity. I try and spread that like it's confetti.

I want to be loved in the right way. I want to love in the right way.

I can get through absolutely anything in life if I have people by my side.

Now I get to speak at the women's shelter so I'm going to do speeches here. Honestly, I'm just super proud of how much my life has changed and that now I can go talk about things that used to basically destroy me and I can help other people.

“It Was Incredible”

In our focus groups with staff, we also asked them to reflect on the strengths the survivors they have worked with demonstrated throughout the pandemic. Their answers highlight the resiliency and courage of survivors, and they speak to the deep respect and admiration staff have for the survivors they support.

“ Staff Quotes

The amount of resilience in some of those ladies. There are a lot that come to mind that I'm very impressed and proud of, how far they've come.

They were resilient and adaptable and understanding.

I think we've seen our clients really build strong advocacy on their end because they might not have had those skills before. But just with COVID and the restrictions, we weren't able to make those calls or those in-person things. So we would talk them through a hypothetical situation, they took that knowledge and then advocated for themselves. Their confidence grew—it was incredible.

“I'm Very Grateful for the People”

One of the strong themes that ran through most of our focus groups with survivors was the positive impact domestic violence shelters and their staff have had. Survivors reported that shelters and their staff have helped them develop crucial knowledge and skills and increase their self-advocacy and self-worth. Survivors also identified shelters as a place where they have met many people they are grateful to have in their lives. Some survivors explicitly identified shelters as having saved their lives.

If it wasn't for [shelter staff] doing this stuff, I probably wouldn't be sitting here. My obituary probably been in the paper a very long time ago.

I found that one of the best things that I've learned at the shelter is—before when I first came there, it was very difficult for me to ask for help, I thought that asking for help was a weakness. The ladies at the shelter here have made it so that I feel the opposite. Now I feel like I am doing things for myself by asking for help. Not for wanting somebody to do something for me.

And the group things are huge, its one place that you learn how to talk in front of people. It's good for your self-worth. It builds your confidence because you will start learning how to talk in front of other people that you're not comfortable with. And I feel like when I first got clean, I hated groups, I never wanted to go to group, I did not want to talk in front of people. And it's really made me feel better about myself being able to speak in front of people. And I think groups are super important.

I wouldn't know all the things I know now and have the skills that I do if I didn't have the women's shelter.

You know, for all the horrible reasons why I'm here, there are moments when I'm very grateful for the people that I've met here, for sure. And the things that I have learned about myself.

Shelters

When we asked staff what innovative practices their organizations had developed in response to the conditions created by the pandemic, many of their responses revolved around providing support not just to survivors, but also to each other. They also stressed the importance of building connection and community—both within their organizations and with other organizations in their communities and across the province. Finally, staff reported that their shelters used the pandemic as an opportunity to develop new service modalities, and to expand their services to communities and survivors who might not otherwise had access to them.

Just as survivor strengths can serve as a guidebook to how to live free from violence and abuse, the reflections of the staff can serve as a guidebook to other organization for not only how to make it through a pandemic, but how to increase service delivery during a global health crisis that is shutting down other supports and services.

“Everyone Does an Amazing Job and We Need to Support That”

Many of the staff we spoke to reported that during the pandemic, their shelters recognized the impact the pandemic was having on staff as well as clients and made climate and policy changes to better support staff wellness. These changes included encouraging staff to engage in self-care, encouraging staff to take their sick days, offering virtual yoga and meditation sessions, providing staff with care packages, and establishing wellness funds for staff. Many of these changes have become permanent. All the staff that spoke about these changes expressed deep gratitude for the fact that shelter leadership had explicitly acknowledged and addressed their needs, and had taken concrete actions to sustain and support them.

““ Staff Quotes

I think as staff we're honoring our sick days more. We would always push through, come to work with a cough, and no one cared before. And now it's like, let yourself rest. Now I'm like, no, you deserve to rest, honour that. That's positive, for sure.

Our boss got us a big basket and she's stocked us up on all the emergency things. We got echinacea and a whole vitamin set with Vitamin C.

We also transitioned some of our yoga stuff, over Zoom, to help with that aspect of grounding, meditation, all of that self-care during the pandemic, which helped us. And we did that a lot.

We got a wellness, healthy living fund. Each of the staff had a certain amount of money, and we could use that on anything to do with self-care, health, wellness. That was really nice. And we still get it now. It's just a little less, but it's still nice to have.

And [the board] really saw the need for investing in staff wellness. So that was another benefit that came out of [the pandemic]. We have wellness funds that staff can access each year just for whatever enriches your wellness, you can use those funds. That was something that came out of acknowledging that it's tough work, and we don't stop, and everybody does an amazing job and we need to support that.

Scan to see related
recommendations.



“Having that Communication Really Helps to Build on All Our Capacities”

Across our conversations with staff, communication and connection emerged as one of the biggest factors that helped shelters make it through the pandemic, especially in the earliest days when everything was new and evolving rapidly, and no one knew exactly what to do or expect. Staff reported that active communication within their shelters helped them stay connected to each other, helped sustain their work even through the most difficult times, and helped them find innovative solutions to the problems they faced.

Staff
Quotes

Just our ability to work together, our ability to think outside the box, and just handle situations face on when there was a lot of uncertainty. Just the importance of working together and building that team was quite beautiful.

We know that we have to be together as a unit now. And if we're together, then we could live through anything after that.

I'm really proud of how the team stepped up and just had each other's backs through everything.

Staff also emphasized the importance of connecting with other organizations, both in their communities and across the province. ACWS visited nine shelters as part of this project. Most of them reported that the pandemic had negatively impacted their relationships with other service organizations in their communities, as many organizations shut down, reduced services, or changed their mandate. Only one shelter reported being able to sustain relationships with other organizations in the community throughout the pandemic, and that shelter emphasized how important those connections were in helping them withstand the impacts of the pandemic.

Staff—particularly those in leadership positions—also spoke about the importance of the work ACWS does connecting shelters across the province. They reported that being able to connect with shelters across Alberta sustained them in their work, helped them navigate difficult situations, and supported all ACWS member shelters in building their capacity.

Staff
Quote

Having more interagency meetings was really cool and kind of laying a framework for seeing all these things that were changing and how we could fit into it, rather than just following the traditional path of what has been done.



Staff
Quote

It was very, very helpful connecting. So all the managers across the province, we would have monthly meetings with them. And then really good conversations came out of how those meetings in regards to how certain people were dealing with the pandemic and how they would deal with certain situations. So that was a really good, positive thing.



Staff
Quote

We learned how to think outside the box and be creative in so many different ways and aspects. And we might have been on this one path, a whole different way of doing services. But the pandemic showed us we can do it in so many different ways. And working as a team, and having that communication really helps to build on all our capacities.



Expanding Service Delivery Through New Modalities

One of the most innovative things shelters did during the pandemic was to leverage the technological advancements that were happening to expand service delivery to survivors, especially survivors who experienced barriers to meeting in person or lived in remote communities with access to fewer services. Shelters also explored using new modalities to help the survivors they already support access services that might otherwise have been unavailable to them.

“We Reached a Different Demographic of People”

Staff reported that new and evolving technologies—including Zoom, Facebook, and other online platforms—have helped them to reach survivors who might otherwise not have accessed services. Staff also noted that by using online platforms, they have been able to make some of their programs more accessible to survivors in a broader range of communities. Although many of these advancements developed in response to social distancing and isolation requirements that have since been lifted, all the shelters we spoke to have continued to provide virtual service delivery to survivors, and plan to continue doing so permanently.



Staff
Quote

Some clients continue to choose Zoom now because it works better for them. And to be able to have that option for them is really nice. I mean, obviously face to face is great as well, there's a different kind of connection that happens there. But for some, when they don't have transportation up here, we can do Zoom and we can still see each other. So that works.



We ran self-empowerment programming at that time, and it all moved online, which had positives for people in surrounding communities and people with limited transportation and childcare. We could provide programming for them that they wouldn't normally have access to. We also had a real increase in the amount of people attending when they didn't have to come in person, they didn't have to turn on their camera.

In recent years there was a lot more Facebook, messaging, emails, and things like that, so that really increased. So that was part of the response, creating another avenue for individuals to reach out. It's just not even safe to make a phone call when your abuser is in the next room. But you can send a message.

I think we reached a different demographic of people offering services virtually. We always provided phone services, but now it's a viable option for people that aren't comfortable meeting in person or who can't for whatever reason.

“We Could Access a Lot More Services”

Shelter staff also reported that the technology developed during the pandemic enabled them to build partnerships with support organizations outside their communities, which has expanded the range of services the survivors they support are able to access. Most of these partnerships revolve around providing mental and physical wellness supports, which are two of the areas where survivors experience the greatest barriers, meaning that these innovative partnerships have been able to reduce systemic barriers that impede survivor wellness.

We've connected with [an organization in a different community] that will give our clients four to six sessions of counseling virtually, which I think is amazing because we haven't had that pre-COVID. Never had access to that at all. Also the ability to even hold doctor's appointments if people can, can be done a lot over the phone.

We offer supportive counseling, but not clinical counseling, and we now have partnerships virtually to be able to offer clinical counseling supports. And I think there's probably a connection to more virtual supports and that was probably accelerated by the pandemic.

A lot of that innovation around collaboration and working together and really leveraging the expertise of different organizations and new ways of looking at the work, which I think has been really great and helpful for our families.

“ Staff
Quote

I will say it was nice that we could access a lot more services here for ladies in outside communities that we wouldn't normally have access to, like child psychologists and people with specialties that were in different cities. Because they were working remotely now, a lot of our ladies could access specialist services that they wouldn't have been able to transport themselves to and from before, or at least not easily.

“It’s Amazing How Children Warm Up to Chickens”

And finally, what would a COVID report be without an appearance by at least one pet? One of the biggest, and most adorable, cultural shifts that has happened because of the pandemic is the greater presence of pets in workspaces. Pets really found their stride during the era of online meetings, and they seem to have carved out a greater place for themselves in person as well. Staff report that they are increasingly using pets in therapeutic ways since the pandemic began. Some of these pets were pandemic adoptions who proved to be naturals at providing emotional support to survivors. Some showed up at the shelter door seeking help and became an integral part of the shelter environment. The ACWS research team had the distinct pleasure of being introduced to several pets—either in person or by reputation—including Trucker the cat, Sky the dog, and a truly delightful assortment of chickens. All these animals play integral roles in their shelters and have become valued members of their shelter team.

“ Staff
Quote

Sky [the dog] was also part of COVID. I rescued her during COVID. She worked night shifts with me, so it's a safety plan. And she just lifts the atmosphere around here like nothing else can.

“ Staff
Quote

It's amazing how children warm up to chickens. They're amazing support animals. And they're super cute with a baby!

Scan to see related
recommendations.



Staff

An important part of this project involved capturing the impact of the pandemic on shelter staff. The focus of our work in the domestic violence sector is (rightfully) predominantly on survivors, and it can be easy to overlook the wellness of staff. In addition to capturing the challenges staff have faced, and the work they have done to support survivors throughout those challenges, we also wanted to highlight the ways staff have themselves learned and grown throughout the pandemic. Just as it was for survivors, this was a very difficult question for staff to answer, and they were often more comfortable speaking to the accomplishments of the survivors they support than to their own accomplishments. But those accomplishments are vast, and should not be overlooked. Staff were able to achieve incredible things during the pandemic that emphasize just how incredible they are, and how valuable they are both to the domestic violence sector and to society more broadly. When we pulled the staff accomplishments together, we found that they largely fell into two categories: (1) personal growth, and (2) unwavering support.

Staff were able to achieve incredible things during the pandemic that emphasize just how incredible they are, and how valuable they are both to the domestic violence sector and to society more broadly.

“I’m Stronger than I Thought I Was”

Staff shared many ways that they had grown and developed during the pandemic. Some staff learned new skills. Others developed skills they already had. Some gained a deeper appreciation for who they are. Most of the staff reported being changed in some way by the pandemic. The fact that they were able to harness these changes into positive growth is inspirational.

“I think, for me, it increased my compassion, to understand what’s really going on, and how you can really give the support that you could give to the client. And not only creativity, but being innovative in delivering the service.”

Staff Quote

“I think the whole put your oxygen mask on first, like with airplanes. Make sure you’re okay first. And then we’re gonna [help] everybody else. And only [do] the things that you can control.”

Staff Quote

“I think for myself, just a stronger emphasis on boundaries, because work was at home. So having that routine and trying to be more mindful of making sure I’m shutting off everything happening, that separate space of work versus home, that kind of stuff.”

Staff Quote

“ Staff Quotes ”

Being resilient to the situation. If another thing was going to happen, then we already know we will not be shaken by this situation, because we already know what we need to do and how we're going to address the problem or the situation that is coming or what is happening. And we already know how we can access resources in a way that will benefit the clients that we're serving.

I definitely had an opportunity to exercise how I was going to manage my own feelings in the midst of a really difficult situation. So, learning how to be this stable person while not ignoring that I'm also a human, but finding out how do I process [this] and then also be a really steadying safe harbour for people in the midst of it? I think it's made me a stronger leader.

I learned that I'm stronger than I thought I was.

No ACWS member shelter closed during the pandemic. Every single one remained physically open and accessible to survivors, even as other organizations stopped services or closed their physical offices. Shelters never stopped. Shelter staff never stopped.

“We Never Stopped Helping People”

Despite the impressive accomplishments staff achieved in their own lives during the pandemic, the achievements they reported being most proud of usually revolved around their support of survivors. Every shelter we visited was proud of the fact that they had stayed open throughout the pandemic. As they should be. No ACWS member shelter closed during the pandemic. Every single one remained physically open and accessible to survivors, even as other organizations stopped services or closed their physical offices. Shelters never stopped. Shelter staff never stopped. And that, in itself, is an astonishing achievement.

Staff Quotes

I think one thing that personally I'm really proud of is that at no point during all of the uncertainty of COVID was there ever a day that I thought I couldn't do my work. I found innovation, adaptability, whatever it was, the harder it got, the more passion and drive I felt to do the work that I do.

All of those things are happening and you're surviving and you're still continuing to provide support. Because we're an essential service and people do need help. Especially at a time like that.

I think it was kind of whatever needed to be fulfilled, you stepped up.

Every staff that works in this program, everyone pulled whatever skills or knowledge they have to be able to provide support.

Some of us had to work a lot of extra shifts and stuff where, you know, we're sick and the bosses stepped in. The bosses stepped in to cover shifts. We did it and made it through.

If it's not illegal, we can probably help with that!

We never stopped helping people whatever way we could. Sometimes it was just talking to them over the phone or leaving a bag outside for someone. But we never stopped.

When other doors were closed, ours were open. So that was a success for us.



Scan to see related
recommendations.

“

Our Biggest Learnings

Survivors and the staff who support them have so much wisdom and insight to share, and we all have a lot to learn from them. This project resulted in very many learnings. Although no report could ever fully capture all of them, here are some of the biggest learnings that came out of this project.

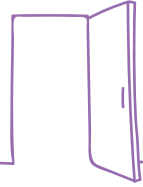
Scan to see related recommendations.



In consultation with our members, ACWS has also established a set of recommendations for how to address the challenges and barriers the COVID-19 pandemic created for the domestic violence sector. Those recommendations are available on our website, [here](#).



Structural Abandonment



Public health measures were designed to mitigate the risk of COVID on a population-wide scale, but these measures did not take into account the complexities of domestic abuse, the needs and experiences of survivors, and the impact the measures would have on survivors and the organizations that serve them. The public health measures unintentionally endangered survivors and placed immense strain on shelters, and there was very limited recognition of this fact even after survivors, activists, academics, and journalists raised the alarm.

We in no way want to suggest that governments should not have put public health measures into place to mitigate the impact of the pandemic. One of the important learnings of the pandemic is that instances of domestic abuse and the experiences of domestic abuse survivors and the staff who support them are strongly impacted by public health measures. Given how widespread, dangerous, and damaging the problem of domestic abuse is, public health measures must account for domestic abuse and be attentive to the needs of domestic abuse survivors in their design.

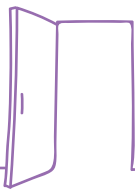
The failure to account for domestic abuse and the needs of survivors in the response to the pandemic meant that on a structural or systems level, survivors were abandoned. Public health measures made it much more difficult for survivors to get away from their abusers. For survivors who were able to reach out for help, in many cases, the only place they could turn to was a shelter. Most other community and government supports had literally closed their doors.

Domestic violence shelters also experienced structural abandonment. Although they were provided with some additional funding by both the provincial and federal governments to mitigate the difficulties caused by COVID, they did not receive the same level of acknowledgment and support as other first responders, and they had to navigate increasingly dangerous and complex situations during a tidal wave of closing doors. Four years into the pandemic, shelters still have not received a sustained funding increase, and the temporary funding put in place to help them navigate COVID has dried up—right as we’re only just beginning to deal with the full impact of the pandemic. As governments and the public have worked to move on from the pandemic, survivors and shelters are still navigating the consequences, and now they are doing so essentially alone.

Four years into the pandemic, shelters still have not received a sustained funding increase, and the temporary funding put in place to help them navigate COVID has dried up—right as we’re only just beginning to deal with the full impact of the pandemic.

“COVID was gone, in [the government’s] eyes, but the residual factors were left for everybody.”

Staff
Quote”



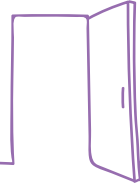
The Invisibility of Domestic Abuse

No government has taken comparable action to respond to domestic abuse in a way that fully recognizes how many people it impacts, and how much harm it causes.

One of the most interesting learnings that has come out of this project is how governments respond differently to different kinds of danger. Federal, provincial, and local governments in Canada all took swift action and put substantial health measures in place to protect as many people as possible from COVID-19—as they should have. COVID-19 was, and still is, a serious public health matter that has the potential to cause much harm to many people. But so is domestic abuse. No government has taken comparable action to respond to domestic abuse in a way that fully recognizes how many people it impacts, and how much harm it causes.

Combined with the fact that governments also failed to consider how the public health measures they put in place to mitigate the effects of the pandemic would impact domestic abuse and domestic abuse survivors, the COVID-19 pandemic has revealed just how invisible the problem of domestic abuse still is. Domestic abuse survivors and the advocates, staff, and organizations that support them have done incredible work to bring increased government and public attention and response to the problem. The last four years demonstrate that there is still much more work to be done.

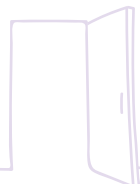
System Response

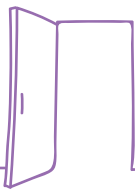


One of the learnings from this project that bears emphasizing is that when systems work well, survivors and their children succeed. Shelter staff reported that when their clients were able to access government services and other systemic supports, and when these systems worked to support them without doubting their stories or requiring them to prove their experiences or their need, magic happened. Survivors and their children were able to get the help they needed to heal and move forward with their lives. When these systems failed to work, when they were inaccessible or required that survivors jump through hoops to access them, survivors were more likely to struggle.

These stories demonstrate the importance of systemic responses to domestic abuse. Systems have the power to either profoundly help or substantially hinder survivor healing. Every survivor deserves to be helped. No survivor deserves to be hindered. It is imperative that these systems are designed and developed to support survivors on their healing journeys, and that they are held accountable when they fail to do so.

Systems have the power to either profoundly help or substantially hinder survivor healing.





The Power of Connection

One of the biggest themes we heard in this project, from survivors, shelters, and staff across the province, is the power of connection. In so many ways, the COVID-19 pandemic damaged our ability to connect—both to connect with each other and to connect with formal sources of help and support. But it also taught us just how powerful connection is. **Domestic violence shelters made it through the pandemic, without ever closing their doors, because of connection. Within shelters, staff connected with and supported each other, just as they continued to connect with and support survivors. Across the province, shelters and shelter leadership connected with each other, and supported and sustained each other through the darkest days of their collective work.**

As the ACWS research team toured the province, one of the most pressing needs we heard both from survivors and from staff was for more connection. And this is indeed a need, not simply a desire. The pandemic created a lot of isolation, and it exacerbated many social tensions. The last four years have caused many rifts between individuals, families, and communities, and fueled the problems of loneliness and hate. As we navigate new phases of the pandemic and attempt to return to—or establish a new form of—normalcy, survivors and the staff who support them identified the need for us to do so with more empathy, kindness, and care for each other. We have all been through a lot over the past four years, and one of the most important learnings of this project is that we can let that drive us apart, or we can hold onto each other and pull through together.



Staff
Quote

I've learned that we can be there for each other, and we can be resilient, and we can do tough stuff.



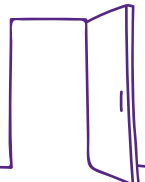
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Conclusion:

Personal Note from a Researcher

Undertaking this project has been a phenomenal journey, and I couldn't bring it to a close without sharing some of what it felt like to experience it from the inside. This was the first time since the pandemic began that ACWS went out to visit our members and hold in-person focus groups with them and the survivors they support, in their own space. I knew this was the right decision, but especially after all the stressors and challenges of the past four years, I wasn't sure what to expect when we began. What happened next was astonishing.

Shelter staff and survivors welcomed us into their spaces and their communities with warmth, kindness, and enthusiasm. They shared their stories with an openness and honesty that was humbling. And their stories are incredible. Survivors made it through the very worst of what the world has to offer. Shelter staff never stopped supporting them as they did. Both survivors and staff have faced extraordinary barriers during the pandemic, and this has undoubtedly had an impact on them, with many of them



**Survivors made it through
the very worst of what
the world has to offer.
Shelter staff never
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reporting feeling exhausted, stressed, and burned out. But despite all of this, they made it through, and they did so with grace, compassion, and humor. I was surprised—and thrilled—by the level of laughter that happened across so many of our focus groups. The survivors and staff we spoke to have found light through the darkest of times, and they are determined to light the way for others to do so as well.

I hope you are as inspired by their stories as I am. I am continually amazed by how dedicated survivors, shelters, and staff are to ending violence and abuse. The last four years has proven that nothing will stop them from working toward this goal.

They cannot do it alone. For all their dedication and their hard work, survivors, shelters, and staff are all facing increasing systemic barriers with stagnant funding and decreasing resources. And so many of the shelters we visited said the same thing: this is only just the beginning. We are only now just starting to see the full impact of the pandemic. Shelters need our help, survivors need our help, and now is the time to step forward.

To help, consider donating to ACWS or to the domestic violence or seniors' shelter in your community. We also encourage all Albertans to join the work of ending gender-based violence in their communities, and to advocate for the needs of survivors and the domestic violence shelters that support them.

For more information, please visit our website: acws.ca



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