



Neighbours, Friends & Families

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Facilitator Guide

# Neighbours, Friends, & Families

Nova Scotia



A facilitator resource developed by the  
Transition House Association of Nova Scotia.

## Land Acknowledgment

This work takes place on the ancestral and unceded territory of the Mi'kmaq Nation. This land is covered by the Peace and Friendship Treaties, first signed in 1725. These treaties did not involve the surrender of land or resources, but affirmed Mi'kmaq title and established the foundation for ongoing relationships rooted in mutual respect.

We recognize that gender-based violence is deeply connected to colonialism, and that these impacts continue to be felt across Indigenous communities. As such, this work requires a commitment to decolonizing education, prevention, and support systems. It calls on us to unlearn colonial assumptions, relearn truths that have long been known by Indigenous Peoples, and honour the leadership and knowledge of those who have endured and resisted systemic violence for generations.

We also honour the long-standing presence, resistance, and contributions of Black and African Nova Scotian communities, who continue to confront the legacies of displacement, and systemic exclusion. Their leadership in movements for justice, healing, and liberation has been – and continues to be – essential to the work of ending gender-based violence.

Much of what informs prevention work has been shaped by the vision, wisdom, and activism of Indigenous and Black women, grassroots organizers, land and water protectors, residential school survivors, families of Missing and Murdered Indigenous Women, Girls, and Two-Spirit people (MMIWG2S), and all those impacted by colonial and racial violence. We express deep gratitude for their contributions and commit to centering their voices as we work toward justice and safety for all.

## Authors

This guide was adapted and developed by Krystal Lowe (Education & Prevention Lead, THANS), based on the original Neighbours, Friends and Families (NFF) public education program developed by the Centre for Research and Education on Violence Against Women and Children (CREVAWC) at Western University. The structure, facilitation approach, and learning outcomes are rooted in the foundational work of the NFF program. Special thanks to Margaret MacPherson (Research Associate, CREVAWC) for her leadership in co-developing the original NFF materials and for her continued guidance during the revitalization of the Nova Scotia adaptation.

## About the Transition House Association of Nova Scotia

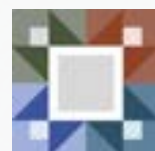
The Transition House Association of Nova Scotia (THANS) is an umbrella association of violence against women (VAW) organizations across the province. Our members support women and children experiencing or at risk of violence through services such as emergency shelter, counselling, safety planning, outreach, referrals, and more.

THANS collaborates with community and all levels of government to strengthen services, secure funding, advocate for systemic change, and raise public awareness. Learn more at [www.thans.ca](http://www.thans.ca).

For more information about THANS and the work of our members, visit [thans.ca](http://thans.ca) or follow us on socials.



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## Acknowledgments

We are deeply grateful to the frontline workers, survivors, and advocates who dedicate their time, energy, and hearts to the ongoing work of preventing gender-based violence in all its forms. Their courage and commitment to safety, justice, and healing are the foundation upon which this work stands.

We are also incredibly grateful for the team at the Centre for Research & Education on Violence Against Women (CREVAWC) for their leadership and decades of dedication to evidence-informed prevention education that has shaped the NFF program across Canada. Their support has been critical as we work towards preventing violence in Nova Scotia through education.

Finally, we acknowledge the Nova Scotia Department of Justice for their support and investment in violence prevention. Their commitment has made it possible to bring this program and resources to communities across the province, and to strengthen capacity for education and prevention work throughout Nova Scotia.

A special thanks is extended to the following individuals whose leadership and collaboration have made this work possible:

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Margaret MacPherson, Research Associate with CREVAWC, for her many years of dedication to the NFF program across Canada, and for supporting the provincial revitalization with her wisdom, guidance, and facilitation of the first Nova Scotia train-the-trainer since before the pandemic.

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Lydia Quinn, Intimate Partner Violence Case Worker with the RCMP, for her belief in the NFF program and for playing a key role in connecting THANS to CREVAWC, helping to make this collaboration possible.



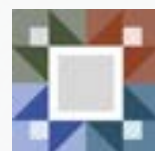
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# Introduction

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Intimate partner violence (IPV) remains an ongoing and devastating issue in Nova Scotia, impacting individuals, families, and entire communities. In response to the ongoing epidemic of IPV, the Transition House Association of Nova Scotia (THANS), alongside community organizations, advocates, the provincial government, Royal Canadian Mounted Police, and other partners, are working collaboratively to prevent further harm and build safer communities through prevention education.

Neighbours, Friends, and Families (NFF) is one of the tools being used in this collective effort. This public education initiative helps individuals recognize the warning signs of intimate partner violence, respond from a place of trauma- and violence-informed care, and refer to appropriate resources in Nova Scotia. The NFF program was developed by the Centre for Research and Education on Violence Against Women and Children (CREVAWC) at Western University, and is considered best practice for prevention education surrounding intimate partner as domestic violence.

## About This Guide

This guide is intended for trained facilitators delivering NFF in Nova Scotia. As a trained facilitator, you play such an important role in sharing the NFF program with your community. This guide is designed to support you in delivering NFF sessions. Together, through awareness, education, and community action, we can help prevent violence and equip our communities with the skills to recognize, respond, and refer.

This facilitator guide is adapted for use in Nova Scotia and is based on the Neighbours, Friends and Families (NFF) public education program developed by the Centre for Research and Education on Violence Against Women & Children (CREVAWC) at Western University. The guide preserves the core NFF framework while integrating local data, resources, and examples relevant to Nova Scotia.

# Section 1: Pre-Session Information

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## Purpose

Neighbours, Friends, and Families sessions are designed to raise awareness of intimate partner and domestic violence so that people close to those at risk can recognize, respond, and refer. Research on bystander engagement has shown that, with the right education and support, neighbours, friends and family members can respond safely by providing information and support that makes a real difference.

## Learning Outcomes

By the end of your session, participants will be able to:

- ✔ Recognize warning signs and risk factors for intimate partner and domestic violence (IPV/DV)
- ✔ Respond to individuals experiencing or at risk of experiencing IPV/DV
- ✔ Refer individuals experiencing or at risk of experiencing IPV/DV to appropriate local resources
- ✔ Use the SNCit conversation method as a tool for engaging in supportive conversations with victims/survivors

This session is meant to be an accessible, introductory, and skills-based. While gender-based violence is deeply complex, this training focuses on practical information that is easy to understand and apply. As facilitators, we recognize the urge to unpack these complexities—but from a learning perspective, keeping the content simple and digestible helps community members feel empowered, not overwhelmed.



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## Session Best Practices

Before facilitating this session, there are a few important considerations to keep in mind. While not all best practices may be possible in every setting, we encourage you to reflect on how you can help participants feel safer, more comfortable, recognized, and supported throughout the session.

### **1 Facilitate in Pairs When Possible**

Whenever possible, co-facilitate the session with a partner—ideally from a relevant community organization. Co-facilitation models collaboration, distributes emotional and facilitation labour, and allows for a broader range of perspectives and strengths.

### **2 Recognize Diverse Lived Experiences**

Participants will come with different personal experiences, identities, and relationships to the issue of gender-based violence. Acknowledge that no two journeys are the same, and strive to create a space where all voices are respected.

### **3 Ensure Physical & Emotional Accessibility**

Consider how to make your session physically accessible (e.g., wheelchair access, clear signage, seating options) and emotionally inclusive (e.g., offering content warnings, optional participation in activities, or breaks). Check in with participants beforehand when possible to learn about access needs.

### **4 Use Clear and Inclusive Language**

Avoid jargon or academic terms, and use everyday language that feels relevant and understandable. Be mindful of gendered assumptions and strive to use inclusive and affirming language.

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### **5 Meet Your Group Where They're At**

Every audience is different—and sometimes you'll only have 30 minutes instead of a full session. Ask yourself: What will be most helpful for this group in this time? Feel empowered to adapt the content and select the tools that make the most impact. This session is designed to be flexible and responsive to community needs.

### **6 Adapt to the Group's Needs**

Pay attention to how the group is responding and be willing to slow down, skip, or adjust content as needed. Flexibility is key to meeting people where they are.

### **7 Stay Grounded in the Purpose of NFF**

This session is designed to offer community members simple, practical tools they can use right away. While facilitators may be familiar with the broader systemic and structural roots of gender-based violence, the emphasis here is on raising awareness and building everyday skills. Trust that starting small—by helping participants notice warning signs and feel confident offering support—can have a meaningful impact.

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## Handling Disclosures

Presentations and sessions often create a space where participants may disclose experiences of violence, either while the session is happening or after it has ended. Occasionally a participant may realize for the first time in the session that what they have experienced is a form of intimate partner or domestic violence.

At the beginning of the session, you might consider adding the following:

*“Before we begin, I want to take a moment to acknowledge that the content we’re about to explore may bring up strong feelings or memories — whether from your own life, someone you care about, or your work. These are not just issues “out there”, they are deeply personal and affect many people. Please take care of yourself in whatever way you need during this session.*

*While we’re going through the session, I ask that we not share personal stories or disclosures in the group setting. That’s to protect your privacy and the emotional safety of everyone in the room. If something comes up for you, and you’d like to talk more privately, I’m available after the session, or I can help connect you with someone who can support you.*

*Let’s hold space for one another with respect, care, and confidentiality as we move forward.*

If someone discloses during the session, thank them and say something like, “I’m sorry that happened to you.” Let them know you’re available to talk after. Disclosures during sessions may involve private details the person later regrets or may trigger others.

Afterward, listen with care, and remember it is not on you to “fix” the situation. Share resources and offer to connect them with trained professionals. Encourage them to seek support and remind them they’re not alone—abuse can affect anyone.

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**Facilitators should be aware of trauma- and violence-informed principles of responding, and how to refer to local experts and resources, such as THANS member organizations, if needed.**

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## Navigating Challenging Moments

Most of the time, presentations and sessions go off without a hitch and people appreciate the information you are providing. However, when we facilitate conversations about intimate partner violence, we're addressing complex and often deeply personal topics. It's not uncommon for strong emotions, difficult opinions, or disclosures to arise.

When uncomfortable issues do arise, you can be prepared with ideas for how you might respond. Listed below are some issues most likely to arise in a session:

- Disclosures of personal abuse or that experienced by another.
- Someone monopolizing the conversation.
- A participant making a harmful (e.g., racist, sexist, misogynistic, etc.) comment.
- Victim-blaming comments.
- Suggestions that are unsafe (e.g., confronting the person causing harm in a way that can do more harm than good).
- Suggestions that focus on fixing or solving the problem.
- Suggestions that focus on fixing or solving the problem.
- Someone being argumentative or dismissive.

These reactions—however uncomfortable—often signal that the material is touching on deeply held beliefs or lived experiences. As facilitators, we don't need to have all the answers. Our role is to hold space, guide the conversation back to safety, and help participants reflect.





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Below are some strategies for facilitators to use in the moment:

### Pause and Ground

Take a moment to ground yourself before responding. A brief pause can:

- Prevent reactive responses.
- Allow time to assess emotional tone in the room.
- Model thoughtful engagement.

### Redirect & Reflect

Invite reflection or offer a reframe:

- “Can you say more about what you meant by that?”
- “I wonder how we might say that differently, keeping in mind the lived experience of others.”

A good practice is to set community guidelines or agreements at the beginning of the session, so you can always point back to these if something comes up.

### Use Boundaries to Re-Center Safety

When needed, firmly but respectfully shift the conversation:

- “Let’s steer away from language that blames survivors.”
- “We hold space here for diverse experiences- let’s bring it back to our shared values of respect and inclusion.”

### Name the Harm, Not the Person

Focus on the impact, not the intent or labelling the individual:

- “I want to pause here because what was just said may be harmful or feel unsafe for folks in the room.”
- “Let’s take a moment to reflect on how that comment might land for others.”

### Normalize Discomfort, Not Harm

Remind the group: “We can feel uncomfortable and still be respectful. Growth often comes with discomfort, but our safety and care for one another comes first.”

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## Materials Needed

This session outline is designed to be flexible and accessible for facilitators working in a variety of settings. To support smooth delivery, we have broken down the materials into two categories:

- **Basics:** Essential items needed for sessions.
- **Additional Considerations:** Optional items that enhance participant comfort and engagement when funding, time, and resources allow. Not all facilitators will have access to these, and that is perfectly okay.

### **The Basics**

- Computer or Laptop.
- Projector and Screen (note: ensuring sound for videos is working in advance of the session is often helpful).
- USB/Flash Drive with Presentation.
- Participant handouts (e.g., SNCit conversation method, resource pamphlets).
- Printed Copies of Participant Evaluation (post-session, for those who cannot scan the QR code).
- Flip Chart or White Board.
- Markers, Pens, Notepads, Sticky Notes, etc.

### **Additional Considerations**

- Comfort Items (e.g., water, a quiet break space, fidget toys, etc.)
  - Snacks or Light Refreshments.
  - Additional technology for facilitator (e.g., clicker for slides).
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## Participant Evaluation

At the end of each presentation, you will see a QR code. Once scanned, this QR code directs participants to a feedback survey that is housed with CREVAWC following the session. Once participants complete the feedback survey, they will be redirected to another page where they can input the information they would like to see on their certificate of training. Once they complete this, their certificate is sent directly to their email.

*To ensure we are continuing to learn and grow, we evaluate.*

The results of the feedback surveys are anonymous and used to track engagement as well as continuously improve the program.

### *What about those who do not have access to a phone to scan the QR code?*

We recognize that scanning a QR code may not be accessible for everyone. To help address this, we've included printed copies of the evaluation form that you're welcome to distribute at the end of your session. Please note that using this option requires a bit of extra work: after your session, you would need to manually input participant feedback into the system. This also creates challenges around maintaining anonymity and ensuring participants receive their certificate directly from CREVAWC.

As an alternative, you may wish to have a laptop or tablet available during the session. This allows participants without a phone to complete the online survey themselves and ensures they receive their certificate by email without delay.

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# Section 2: Facilitation Guide

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## Using This Guide

The following section provides suggested speaking notes aligned with each slide in the Neighbours, Friends, and Families session. These notes are intended to support your delivery—not as a script to be read word-for-word, but as a guide to help you communicate the core messages with clarity and confidence.

Feel free to adapt the language to suit your facilitation style, the needs of your audience, and the time available. You may wish to add your own examples, stories, or local context to make the material more relevant and engaging.

Note: sections in italics are meant as a note to the facilitator, and regular font indicates speaking notes.

## *Together We Are Wiser*

Presenters and facilitators should also be prepared to be inspired and moved by the participants, stories and experiences that will take place. Amazing things happen when people are supported and have opportunity and encouragement to show that they care.

Together, we are learning to be more and more effective at engaging bystanders, our neighbours, friends and family members. It all adds up to positive social change in small and large ways.







“

Do the best you can  
until you know better,  
and when you know  
better, do better.

*Maya Angelou*

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## Suggested Speaking Notes

### **Slide 1: Introduction**

*Introduce facilitators and session; provide a note on content and any other relevant information about the space.*

### **Slide 2: Land Acknowledgement**

*Begin your session by offering a land acknowledgement that is relevant to the location where you are delivering the session. A land acknowledgement is more than a statement—it is a practice of reflection.. It recognizes the ongoing presence, resilience, and rights of Indigenous peoples and our shared responsibility to truth, reconciliation, and decolonization.*

*Below is an example of one type of land acknowledgement we use at THANS. While you may use this for inspiration, we encourage you to make it your own and take time in advance to learn:*

- We'd like to begin by expressing our gratitude for the privilege to live, learn, and work on the ancestral and unceded territory of the Mi'kmaq Nation. This territory is covered by the Peace and Friendship treaties which were first signed in 1725. These treaties did not deal with surrender of lands and resources but in fact, recognized Mi'kmaq title and established the rules for what was to be an ongoing relationship.
- We come to this space with a willingness to unlearn and relearn, and with a commitment to listening to and amplifying the voices of Indigenous Peoples – who have endured and resisted colonial violence for centuries. We know that gender-based violence is directly related to colonialism and that this continues to impact many Indigenous communities today.

*Offer learning resources, such as  
whose.land, for folks to learn more.*





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## Slide 3: Terms We Are Using

- Different terms have been used over the years to describe violence in relationships. The terms have different connotations, for example domestic violence is language used most often in legislation and refers specifically to a couple. Family violence is a broader term that includes other family members who may be perpetrating violence. In this session, we will mainly use the terms:
- *Read from the slide but also use your own language – don't forget to make your language consistent in the session.*

## Slide 4: Al O'Marra Quote

**“In almost every case of domestic homicide, we found that the people around the victim knew what was going on – but didn't know what to do about it...”**

*This quote by the former Chief Counsel Coroner's Office of Ontario highlights the very core of NFF and the importance of empowering neighbours, friends, and families with information and skills to recognize, respond, and refer.*

- Starting in 2002 with evidence from Ontario's Domestic Violence Death Review Committee (DVDRC), we learned that “people closest to the family” are most likely to see warning signs.
- This includes neighbours, friends, family members as well as co-workers.
- This presentation is a national response to the evidence of death reviews that show the general public needs to understand how to recognize domestic violence, how to respond safely, supportively and effectively and how to refer to find help in the community.
- Recognize-Respond-Refer

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## Slide 5: Current Context Nova Scotia

- Nova Scotia has the highest rate of self-reported intimate partner violence in the country, and in our rural communities, the impacts of IPV are intensified by geographic isolation, limited resources, and fewer specialized support.
- Women make up 79% of victims/survivors, while men account for 21%. We also know that our 2SLGBTQIA+ communities experience increased rates of violence as well, which highlights that intimate partner and domestic violence impacts everyone.
- As over 30% of the population has experiencing intimate partner or domestic violence

### ***Facilitator Guidance***

The purpose of this slide is to ground the session in the current reality we are facing in Nova Scotia. This province is small and closely connected, and it's likely that someone in the room may personally know someone who has experienced or been impacted by gender-based violence—including some of the high-profile and deeply tragic cases that have occurred in recent years.

When introducing this slide, it's important to approach the content with sensitivity and care. Acknowledge that these events are not just statistics or headlines—they represent real lives, families, and communities. Many people carry these experiences with them, and for some, the trauma may be recent or ongoing.

You may wish to say something like:

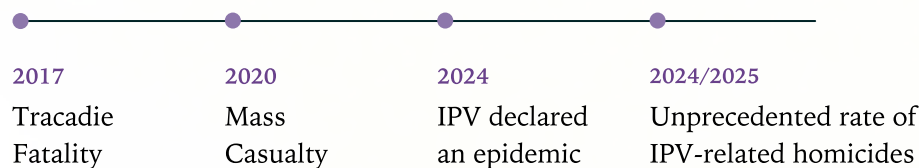
*"We know that Nova Scotia is a small province, and many of us are connected in some way. The examples included here are not meant to retraumatize, but to recognize the lived reality of violence in our communities."*



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## Timeline

- We've added a visual timeline below, as we have also witnessed the ripple effects of IPV through nationally recognized tragedies that have happened right in our backyards, such as the tragedy in Tracadie which highlighted the devastating intersections between IPV, PTSD, and systemic failures in addressing mental health and family violence.
- The 2020 Mass Casualty, which began as an act of IPV before escalating into the largest mass shooting in Canadian History.
- Nova Scotia declaring IPV an epidemic, and
- In the months that followed, an unprecedented number of IPV-related homicides in our province.



### ***Note on the DFI***

We use the language of “Tracadie” when referring to the tragedy that the Desmond family faced in 2017, while also recognizing that not everyone in the community supports the use of the place name. What is commonly known as the Desmond Fatality Inquiry (DFI) Final Report from 2024 raised concerns about the centering of the person’s name in the report’s title—particularly in contrast to the MCC Final Report, which did not name the white perpetrator. This shift in language is intended to center the broader systemic injustices that impacted not only the Desmond family, but the wider community of Tracadie and other Black and African Nova Scotian communities.

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## Slide 6: Neighbours, Friends, & Families

*This slide provides information on the background of NFF and why we are here today.*

- The NFF public education campaign is a bystander campaign that follows from the evidence of the Ontario Domestic Violence Death Review Committee DVDRC [you might want to provide a link to the Canadian Domestic Homicide Initiative: <https://www.cdhpi.ca/>]
- Designed to prevent domestic homicide by recognizing situations that carry the highest risks for lethality.
- People of all genders experience violence in their relationships.
- NFF initially used the term 'woman abuse'. In 2005 when the campaign launched we weren't really talking about sexism and the gendered nature of intimate partner violence. Women experience the highest risks for serious injury and death. Since 2005 we have learned more about the intersections with race, ability, gender, class and other forms of discrimination that put women and gender diverse people at even higher risks for violence.
- The blue brochure introduces safety planning, the purple brochure lists warning signs and risk factors and the yellow brochure provides information about how to have a conversation with a man who is behaving abusively. [please note that these are dated]
- These are some of the original brochures and really highlight how language has changed and evolved

*Background on NFF: The NFF campaign was created as the cornerstone of the Ontario government's Domestic Violence Action Plan (DVAP) that was launched in 2005. The information in these three brochures also provide the foundation for the workplace program. The brochures represent the best thinking of a multi-discipline table of experts. Other provinces and countries have adapted the materials.*



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## Slide 7: Being Supportive Matters

“Don’t underestimate the power of your support. Showing sensitivity to how widespread trauma is a way to be supportive.”

*This slide offers an opportunity to link back to how empowering communities to know they can create change truly makes a difference.*

*It’s also important to acknowledge that being supportive isn’t always easy—especially when the person impacted by intimate partner or domestic violence is someone we care deeply about. Take a moment to name this complexity and remind participants that support doesn’t have to mean having all the answers—it often starts with listening, believing, and being present.*

*This is also a good time to highlight that caring for ourselves while caring for others is so important. Creating space for our own wellness—whether through boundaries, debriefing, or accessing support ourselves—is an important part of sustaining community care.*

## Slide 8: Intimate Partner & Domestic Violence as a Community Issue

- Intimate Partner and Domestic Violence were historically viewed as private matters of the home, and unfortunately, this view continues to persist, although attitudes began to shift in the 80’s and 90’s, and today we are seeing a lot more awareness surrounding the issue. The perception of violence as a private matter is one of many barriers that exist for survivors.
- What we have learned overtime is that IPV and DV are a community issue, and with that, we have come to learn of the many different types of abuse that fall under these, which we will unpack in the following slides.

## Slide 9: Who You Are Makes a Difference

This section is about helping participants understand that violence doesn't happen in a vacuum. Some groups experience higher rates of violence because of systemic inequities and the ways society disadvantages people based on who they are or where they live. As facilitators, it's important to name that identity and social location—things like race, gender, ability, or income level—can shape both someone's risk of experiencing violence and their access to support. These disparities aren't random; they reveal where our systems are failing and where we need to focus prevention efforts.



- Why do some groups experience higher rates of violence?
- There are ways that society disadvantages and discriminates against people because of who they are and where they live.
- Everyone has a unique social location that can create social advantages and disadvantages based on identity and characteristics such as class, gender, race, ethnicity, ability, age, sexual orientation, geographical location.
- You can see the structural inequities of society by the stats of whole groups of people who experience higher rates of violence. These rates show us where society is failing and point to the places where intervention and investments in prevention need to occur.
- We'll spend some time through the next few slides unpacking this a bit more



## Slide 10: Intimate Partner Violence & Gender

- While anyone in Canada can experience violence, women, girls and young women, Indigenous women and girls, people who are 2SLGBTQIA+, women living with a disability and women living in rural and remote regions, are at greater risk of violence. Until recently, Stats Canada has not tracked the experience of trans and non-binary people.
- Women in Canada are more likely than men to experience intimate partner violence. According to 2018 police-reported data, women accounted for almost 8 in 10 victims (79%) of intimate partner violence.
- In Canada, women also account for the vast majority of victims of intimate partner homicides. According to police-reported data, women accounted for close to 8 in 10 victims (77%) of intimate partner homicides committed in 2018 in Canada.
- More than 11 million Canadians have been physically or sexually assaulted since the age of 15. This represents 39% of women and 35% of men 15 years of age and older in Canada, with the gender difference driven by a much higher prevalence of sexual assault among women than men (30% versus 8%).

### ***“What about men?”***

It's very common, and valid, for people to ask about men's experiences. The reality is that anyone can experience violence, including men, and those experiences matter. Men may experience different forms of violence, and some men, particularly those who are racialized, 2SLGBTQIA+, living in poverty, or living with disabilities, may also face elevated risks. Their experiences deserve support, attention, and services.

At the same time, the data consistently shows that IPV/DV disproportionately impacts women, especially in the context of IPV and homicide. The goal here isn't to minimize men's experiences, but to recognize patterns and risk.



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## Slide 11: Increased Exposure to Violence

### Indigenous Women

- In 2018, police-reported data showed that the homicide rate for Indigenous women and girls was nearly seven times higher than amongst non-Indigenous women and girls (4.54 versus 0.67 incidents per 100,000 population respectively).
- Among people living in the provinces of Canada, self-reported data show that Indigenous women are significantly more likely to have been sexually assaulted at least once in their lifetime (since age 15) when compared with non-Indigenous women (44% versus 30%, respectively).

### Women with Disabilities

- More than one in five (23%) women with a disability experienced emotional, financial, physical or sexual violence or abuse committed by a current or former partner in the past 5 years, a similar proportion as men with a disability (22%). For both women and men, this was roughly two times higher when compared to those without a disability.
- Among victims of spousal violence with a disability, women were more likely than men to have experienced the most serious forms of spousal violence (39% versus 16%), to be physically injured due to the violence (46% versus 29%), to fear for their life (38% versus 14%), and to contact or use formal support services following the violence (71% versus 29%).

### Women who are Immigrants

- While immigrant women report lower rates of violent victimization, there are many structural vulnerabilities that can heighten risk, such as isolation, precarious immigration status, language barriers, etc.
- Research shows many newcomers may not disclose victimization due to fear of deportation, distrust of authorities, limited knowledge of their rights, or cultural norms that treat such experiences as private.



- Based on self-reported data, more than half (53%) of immigrant victims of violence chose not to report the incidents to the police. Of all victims who reported the incident to police, immigrants were also more likely to have been dissatisfied with police action than non-immigrants (55% versus 28%).

### Young Women

- Police-reported data show that female children and youth in Canada were more likely to experience family violence when compared to their male children and youth (327 versus 207 incidents per 100,000 population). Of the 18,965 child and youth (17 years and younger) victims of family violence in Canada for that year, 60% were female.
- According to 2018 self-reported data, young women aged 15 to 24 living in the provinces of Canada were significantly more likely than women of any other age groups to report having been sexually assaulted at least once in the 12 months preceding the survey, or to have experienced unwanted sexual behaviours in a public space during the same time period.

### Women Living in Remote and Rural Areas

- Of women and men of all ages groups, young women aged 18 to 24 living in the North had the highest rate of police-reported violent incidents in Canada.
- Women living in rural areas experienced the highest overall rates of police-reported IPV in Canada with rates that were significantly higher than women living in urban areas (789 versus 447 incidents per 100,000 population).

### 2SLGBTQIA+ Canadians

- More than 1 in 10 (11%) sexual minority [note that this is a StatsCan term] Canadians reported that they had been physically or sexually assaulted within the past 12 months in 2018—nearly three times higher than the proportion of heterosexual Canadians (4%).

## Slide 12: Ontario Domestic Violence Death Review

Although these statistics come from Ontario, the patterns of domestic violence-related deaths are similar across Canada, including Nova Scotia. The high rates of victimization among women and children, and the prevalence of homicide-suicides involving male perpetrators, reflect broader national and systemic issues. Although Nova Scotia did establish a Death Review Committee in 2023, no statistics or reports have been released. However, the Ontario data helps us understand the scope and severity of the problem locally and highlights the urgent need for prevention and intervention efforts in our province.



- This slide comes as a shock to many people, and although it is from Ontario, it is still relevant to us here in Nova Scotia. [note: the 2019 is the most recent DVDRC report as of Jan 2023, and a new 5-year report will be released soon]
- The Ontario DVDRC is led by the Coroner's Office. They review all domestic homicides in Ontario and make recommendations to prevent future deaths. Women and children are killed at a much higher rate than most people understand. This is because there is little reporting on these deaths – usually only in local media.
- There were 390 domestic homicide and/or homicide-suicide cases that occurred in Ontario between 2002-2017 (based on cases investigated by the Office of the Chief Coroner for Ontario, where domestic violence was identified as an involvement code).
- Of those 390 cases, 280 (72%) were homicides and 110 (28%) of the cases were homicide-suicides; the 390 cases resulted in a total of 543 deaths.
- Of the 543 deaths, 433 (80%) were homicide victims and 110 (20%) were perpetrators who committed suicide or were otherwise killed (e.g. shot by police).



- There was an average of 24 domestic homicide and/or homicide-suicide cases per year from 2002-2017. Some of these cases may have included multiple victims.
- There have been 433 domestic homicide victims from 2002-2017.
- There was an average of 27 domestic homicide victim deaths per year from 2002-2017.
- Of the 433 homicide victims, 349 (81%) were adult females, 40 (9%) were children and 44 (10%) were adult males.
- Of the 110 perpetrator deaths, 107 (97%) were adult males.

### **Slide 13: Femicide Observatory**

The Canadian Femicide Observatory for Justice and Accountability (CFOJA) is a web-based research and information centre which aims to conduct, mobilize, exchange and promote research and knowledge to prevent femicide and other forms of gender-based killings in Canada.

- The establishment of the CFOJA responds to a call from the Special Rapporteur on violence against women, its causes and consequences on November 25, 2015, the International Day for the Elimination of Violence against Women.
- On that date, the Special Rapporteur called on all countries to establish a femicide observatory or 'watch' to document gender-related killings of women which would collect, analyze and review data on femicides with the aim of prevention.
- Future reports of the Observatory will also monitor the characteristics and circumstances of homicide involving male victims to identify current and emerging themes.

## But why focus on the killings of women and girls?

- 1 Global findings show that women and girls continue to bear the largest burden of gender-based violence and lethal victimization which is attributed to the historical and ongoing impacts of entrenched gender stereotypes and inequality (UNODC, 2018).
- 2 When women and girls are killed by violence, it is almost always in the context of their intimate relationships with men and/or the result of men's sexual violence. For example, the World Health Organization (2002) emphasized that women bear the greatest burden of intimate partner violence worldwide (WHO, 2002). As such, the killing of women is significantly different from the killing of men, which is more commonly the result of male-on-male violence by acquaintances and strangers, a consistent finding documented nationally (David, 2017) and internationally (UNODC, 2013).
- 3 The phenomenon of femicide, what is also referred to as gender-related killings of women and girls, has been defined by the United Nations Special Rapporteur on violence against women, its causes and consequences (UN SRVAW) as the "most extreme form of violence against women and the most violent manifestation against women and their inequality" (UN General Assembly, 2016). Consequently, the UN S issued a call for all governments to set up a femicide watch or observatory to collect data as a crucial tool for the development of effective strategies to address this "serious human rights violation" (ACUNS, 2017: 1).

### Slide 14: CFOJA

- 187 women and girls were killed across Canada in 2024. Of these 187, 8 happened here in Nova Scotia and all 8 occurred between June and December (within 7 months).
- In 2024, NS had the 3rd highest rate of femicide per capita among all provinces.



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## Slide 15: Transition Slide

- It is still a common misconception that if there is no physical violence, it is not domestic violence. But...

*Note that this is when we begin unpacking some of the different forms of intimate partner and domestic violence*

## Slides 16-17: Types of Intimate Partner & Domestic Violence

*This is by no means an exhaustive list of types of abuse within relationships, but it is a start. Oftentimes, when we think about intimate partner or domestic violence, we immediately think of physical abuse. However, it is very rare for intimate partner and domestic violence to only be physical.*

### Physical Abuse

Any intentional use of physical force against a person that causes or has the potential to cause harm, injury, pain, or fear. This can include hitting, slapping, pushing, choking, restraining, or using objects or weapons to cause harm.

### Criminal Harassment (Stalking)

Refers to repeated and unwanted attention, contact, or behavior that causes a person to fear for their safety or the safety of someone they know. This can include following someone, repeatedly showing up at their home or workplace, making threats, sending unwanted messages, or watching them closely

### Sexual Violence/Abuse

Any non-consensual sexual act, attempt, or advance. For a long time, there have been harmful misconceptions that sexual abuse cannot happen in intimate relationships, but it absolutely can.

## Emotional/Psychological Abuse

Involves the use of words, actions, or gestures to control, intimidate, isolate, or belittle a person, undermining their sense of self-worth and mental well-being.

## Coercive Control

A pattern of behaviours used to dominate, isolate, and intimidate someone. It includes tactics like surveillance, threats, emotional manipulation, controlling access to money, time, or relationships, and undermining a person's independence and autonomy

## Financial Abuse

Involves controlling, exploiting, or limiting a person's access to money, credit, or other financial resources. This can include stealing money, withholding access to bank accounts, preventing someone from working, forcing financial decisions, or accumulating debt in their name without consent.

## Spiritual Abuse

Refers to manipulating or controlling someone using their religious or spiritual beliefs.

## Reproductive Coercion

A form of control where someone interferes with another person's reproductive choices, such as pressuring them to become pregnant, preventing birth control use, or forcing a decision about pregnancy.

## Technology Facilitated Violence

The use of technology to harass, threaten, monitor, or control someone. This includes things like cyberstalking, non-consensual sharing of images, abusive messaging, GPS tracking, or hacking personal accounts.

## Abuse by Immigration Status

Includes using a person's immigration status or fear of deportation to exert control, manipulate, or harm them.



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## Slide 18: Is there a difference between conflict and IPV?

It is important to recognize that as soon as there is any type of violence, it is IPV/DV, even if it only happens once.

- Sometimes it is both people in the relationship who are fighting with each other. Each may feel like the victim, blaming the other for their own behavior.
- Every situation where there is abusive behavior causes harm and should be taken seriously. This is something we will unpack in the next few slides.

## Slide 19: Relationship to Power

To distinguish between conflict and abuse, we need to understand how power is used in the relationship.



- Conflict involves a disagreement between equals, where both people can express themselves safely. However, calling each other names or putting one another down is verbally abusive, and is a form of IPV/DV. Occasional, or situational, disagreements that escalate to verbal or physical abuse does not make it any less harmful.
- Even when the violence appears to be “back and forth,” women are more likely to experience serious injury and hospitalization.
- The distinction we want to make here is about the power within the relationship; unhealthy, abusive relationships involve a pattern of power and control by one person over another, where one partner’s needs, safety, or autonomy are undermined.
- Consider, does the couple share power, struggle for power or is there one partner who is exerting power over the other partner? (taking away their voice, autonomy, ability to act and make choices).

- While all couples experience normative conflict, there is a difference in relational skills when it comes to resolving conflict in healthy ways.

#### ASK

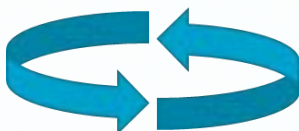
- Do both partners have the ability and capacity to have a voice and to be heard in decision-making processes?
- Do both partners have volition, bodily integrity, and personal autonomy?

### Slide 20: Power Dynamics

- Conflict that escalates to abusive behavior that goes untreated or unresolved can become patterned in a relationship.
- Power-struggling relationships may look like two people who are fighting with each other.
- From the outside, it is hard to know whether a couple is caught in a power struggle or one partner is exerting power in the relationship to control the other (i.e., power-over) who is more likely to be trying to protect themselves.
- Here is where it becomes crucial understand the difference to between a power-struggle and power-over.
- In this section, we're going to explore the difference between three types of power dynamics.

#### Power-Sharing

Healthy, functional relationships, where the inevitable, normative kinds of conflicts present in relationships are responded to with negotiation and compromise.



#### Power-Struggle

Relationships that manage conflicts in unhealthy, escalated, or volatile ways.



#### Power-Over

One-directional assertion of power and control by one partner over the other to erode their autonomy and create a terroristic environment.





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## Slide 21: Janelle & Michael

The purpose of this brief scenario is to have participants critically reflect on just the facts, and to unpack what is happening between Janelle and Michael.

### Scenario



Janelle and Michael have been married for a year. Janelle is pregnant and Michael's elderly mother is ill. Janelle's hours at work have just been cut. She thinks Michael is drinking too much. They are experiencing economic and family issues that are causing fights.

The fight escalates from name-calling and when Michael begins to leave the room Janelle tries to stop him and hits him on the chest. He pushes her out of the way, and she falls down.

They are both shocked by what has happened.

## Slide 22: Is it Intimate Partner/Domestic Violence? Who is The Victim?

*Facilitate a group discussion before moving to the next slide, which provides more details on the situation.*

## Slide 23: Continued Scenario

### Janelle and Michael

- They are experiencing struggles in relation to income and a family illness.
- Michael may be drinking to avoid conflict or to cope
- Janelle is pregnant, increasing her vulnerability and tolerance level.
- After the fight they are both emotional – they talk it out and agree on several strategies



*Encourage participants to elaborate and consider additional factors, such as intersectionality and systemic biases. For example, what might happen if the neighbours called the police on Janelle and Michael? It's important to explore how race, gender, and other identity factors could shape the outcome in a situation like this.*

## Slide 24: Mutuality

- Healthy relationships are grounded in mutuality — a sense of shared power, respect, and emotional reciprocity. In mutually supportive relationships, both people feel heard, valued, and able to express their needs.
- Some couples may appear to have mutual give-and-take, but underlying issues like control, manipulation, or unresolved trauma can still exist, and these may be hard to see. It's also important to remember that in relationships impacted by abuse, mutuality is often compromised — even if on the surface it looks like both partners contribute equally.

In any relationship where there is violence or abuse, mutuality is compromised.



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## Slide 25: IPV is Abusive & Controlling Behavior

- This is a distinction between IPV/DV and a bad relationship - the presence of violence and abuse.
- When one person feels as though they have to walk on eggshells to keep themselves safe, this is power-over, also known as coercive control.

## Slide 26: Coercive Control - Power Differences

- The person who is targeted by their partner experiences a narrowing of choices and options, and increased restriction and danger. There is no option for mutuality here, whether it be sharing power or struggling over it. Rather, the person experiencing coercive control must plan carefully, with whatever support they can gather, to survive, maintain, or escape the situation.
- The Femicide Observatory has written extensively on coercive control and has excellent content for anyone who wants to learn more about it.

## Slide 27: Quote

- “Research consistently shows that coercive control is associated with future physical harm and an increased risk for lethality.”
- In many cases of domestic homicide, the homicide was the first incident of physical violence in the relationship, which really highlights that physical violence alone is not always the best predictor of lethality.

## Slide 28: Potential Break

*Note: this is a good time for a break before moving into the 3 R's and videos if you are doing a longer session.*

## Slide 29: Power & Control Wheel

- This is the power and control wheel. It describes the way different kinds or expressions of violence can be used to maintain power and control in a relationship.
- The wheel describes a 'system of abuse' that is the most dangerous.... called 'coercive control'



## Slide 30: Origins of Our Understanding

*This slide provides a thought-provoking video of Ellen Pence, co-creator of the Power & Control Wheel and co-founder of the Domestic Abuse Intervention Project.*

*Play the video for participants and invite them to share their thoughts if they feel comfortable doing so.*



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## Slide 31: Recognize, Respond, Refer

Neighbours, Friends, and Families in grounded in the three R's:

### 1 Recognize

*Recognizing the signs of intimate partner violence risk among victim-survivors and those causing harm.*

### 2 Respond

*Responding from a place of care, using the SNCit framework.*

### 3 Refer

*Referring to the appropriate supports and experts.*

*The next half of our session will unpack the 3 R's and provide guidance around these pieces as tools that anyone can use in their daily lives*

## Slide 32: Recognize

- How do we know that what we are seeing is intimate partner or domestic violence?
- One thing that is always important is for us not to assume, but rather be mindful and tune in to the signs we see.

*Let participants know that you will be showing them a video scenario in the following slides.*

## Slide 33-34: Meet Brian & Gail

- This is Brian and Gail, a couple that we will be working with throughout this session. We will begin by playing a brief video of Gail coming home from work. Please note that some participants have “jumped” when Brian slams his fist on the table, but there is no other physical violence present in the video.

## Slide 35: Change is Possible

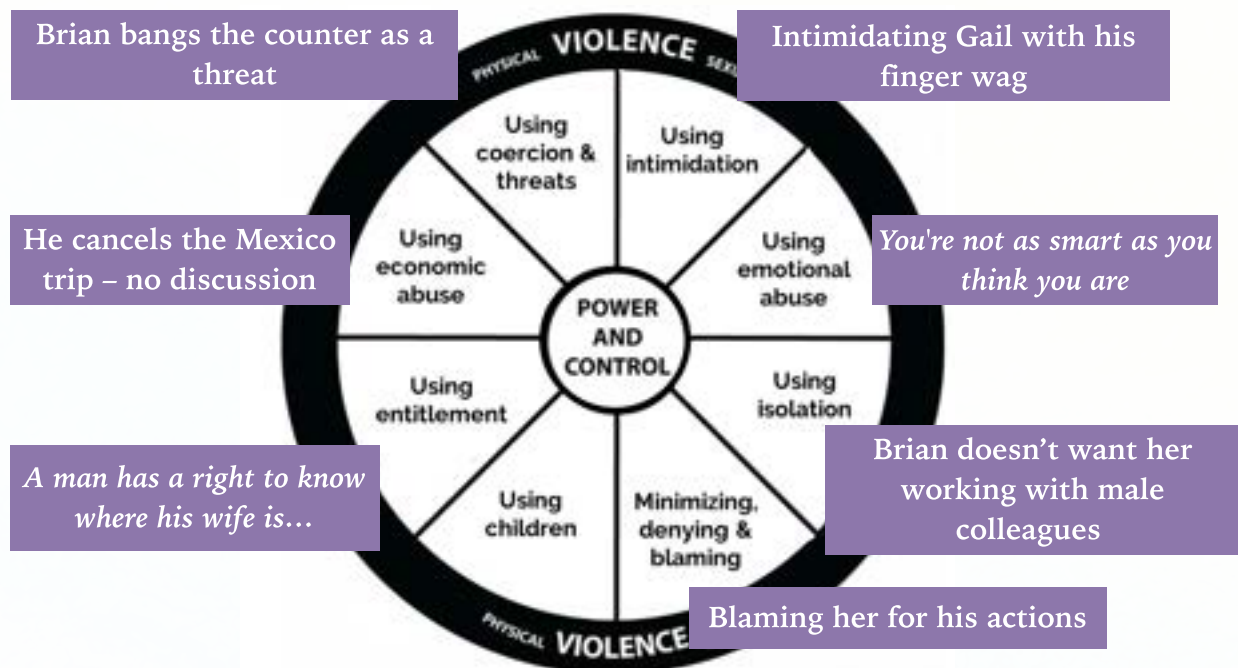
It is possible that Brian does not recognize that he is engaging in escalating behavior that increases his risk for violence.

Addressing Brian's risk to commit violence is one way to reduce risk.

A (2013) study of high risk offenders in Ontario showed that over 80% of men who were charged for domestic violence were shocked to discover they were being flagged as high risk by police. They did not recognize they were engaging in escalating behaviour with risk for violence attached. What this shows us reflects a system issue - no one is talking to men about their risk for violence.

- Whether Brian is your friend, family member or a neighbour that you care about, you might be the best person to talk with him about what you see happening and your concern for him and his family. We can reduce the risk for violence if we learn to engage with those who pose the threat.
- We always want to hold Brian accountable for his behaviour AND it is important to acknowledge that most people who use abusive behaviour can change that behaviour. Only a small percentage of people are unreachable.

### Slide 36-37: Power & Control Wheel - Brian





## Slide 40: Pie Graph

*The purpose of this is to highlight that, more often than not, risk factors are present, and those closest to us are often best positioned to recognize these factors and respond.*

- Between 2003–2018, the DVDRC found that 70% of domestic homicides involved 7 or more known risk factors — often recognized by people close to the victim. In only 1% of cases were there no warning signs or indications of escalating risk observed or known.



## Slide 41: Learning from Tragedy - Recognizing Risk for Lethality

*This slide highlights the most common risk factors for domestic homicide, and outlines which ones are present for Brian. This is a good place for discussion, leading into the next slide, which invites participants not to minimize risk.*



- ✗ A history of domestic violence.
- ✗ Actual or pending separation.
- ✗ Obsessive behaviour from the perpetrator.
- ✗ Depression/poor mental health of the perpetrator.
- ✗ The level of violence is increasing.
- ✗ Prior threats/attempts of suicide
- ✗ Threats to kill
- ✗ Prior attempts to isolate the victim
- ✗ Victim had intuitive sense of fear
- ✗ Perpetrator unemployed

## Slide 42: Don't Minimize Risk

*The challenge for family and friends is to take the indications of escalating risk seriously. While it is common to think a friend or family member “would never,” we must recognize that anyone is capable of causing harm under certain circumstances.*

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## Slide 43: Respond

*Indicate to participants that you will be moving into the next section, which focuses on how we can respond when we recognize risk in neighbours, friends, or family members. In this section, they will meet Gayle's friend, Rhea, and Brian's friends as well.*

## Slides 44-47: Rhea's Response

- Gail and Rhea, her friend and coworker, went out for lunch.
- Watch for what Rhea has noticed about warning signs, and how she approaches the situation with Gayle.

*Play video for participants.*

- Ask: "do you understand Rhea's reaction?" and "is Rhea blaming Gayle?"

## Slide 48: Isolation

"Isolation can increase risk for those experiencing violence, and how we respond can sometimes further isolate someone — especially if we judge, pressure them to leave before they're ready, or withdraw our support when they don't take the steps we think they should."

- It is likely that Rhea's initial response to Gayle further isolated her.
- Isolation goes hand in hand with abusive relationships. As abuse intensifies, so too does the isolation. As a situation escalates, the abuse and the isolation grow. People become more isolated as the situation escalates.



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## Slide 49: Reduce Isolation, Increase Safety

- The strategy is to reduce isolation to increase safety. And we do this with the SNCit conversation framework.

## Slide 50: SNCit Conversation (sink it)

*Handout SNCit conversation framework.*

- The SNCit conversation framework is a tool that we can all use when responding to someone who is experiencing or at risk of experiencing intimate partner or domestic violence.

### 1 SEE IT

*This is when you see something that makes you feel uncomfortable; you know something isn't quite right. There has to be a willingness on your part to see what is happening and then to overcome your (understandable) hesitation to step into the conversation*

- See warning signs or risk factors of abuse
- Be knowledgeable about the signs and risk factors. Learn more at <https://www.neighboursfriendsandfamilies.ca/>

### 2 NAME-IT

*Name the warning sign by putting a name to that feeling; "I saw or I heard.... [insert the warning sign]."*

- Just the facts. A warning sign is like a lever that can help open the door to support. Then take the next step of checking what's happening with the person you are worried

### 3 CHECK-IT

*This is about taking the step back. Think of it this way: See it and Name are the two steps toward a situation and then a step back to check what is happening to make sure you are not rushing to judgement.*

- Remember that a warning sign doesn't mean that abuse is automatically happening.

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## Slide 51: SNCit Conversational Goal

- Remember, the goal of a SNCit conversation is to open the door for support.
- Let's let Rhea try again with Gayle [click to the next slide]

## Slide 52-55: SNCit with Rhea

*Play video for participants, and invite them to observe how Rhea does the SNCit conversation. After the video, proceed to the next slides with the following information:*

1

### SEE IT

*"Gayle is taking lots of overtime because Brian is unemployed. Brian is checking her email." (Stick to the facts, don't jump to conclusions)*

2

### NAME-IT

*"I see you working so hard... he's checking up on you... I'm a little concerned...I think you should be careful..."*

3

### CHECK-IT

*"I'm just a phone call away."*

---

*Ask participants whether they think the door for support is open for Gayle.*

### Don't Push

You can't 'make her' tell you. She is more likely to tell you what is happening if she feels respected and supported. Sometimes it takes time for a story to come out



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## **Slide 56: Respond**

Responding is not about fixing the situation; it's about holding space from a place of compassion, validating their experience, and avoiding judgement or blame.

The purpose of our response is to open the door for support, and we do that with SNCit.

- Your most important job is to listen and show concern.
- Respect that she is the expert in her life.
- Inform yourself – know where to find services and support in your community.
- Seek advice from your local women's shelter if you fear for her safety.

## **Slide 57: It's hard to admit you are in an abusive relationship.**

- Even if you SNCit perfectly – she may not tell you what is happening. Sometimes it takes time for the story to come out.
- There are many reasons why it's hard to admit you are in an abusive relationship, such as internalized shame, self-blame, protecting the abusive partner from a place of love and care, or not wanting to be seen as a "victim."

## **Slide 58: Why Doesn't She Just Leave?**

- This is the wrong question. Many factors keep people trapped in an abusive relationship, and relationships are complex.
- Some factors include fear for safety, financial dependence, concern for children, emotional attachment, or a lack of safe and supportive options.

We know that separation is the most dangerous time in an abusive relationship, and the last thing you want to do is push her to leave.

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## Slide 59: What About Brian?

- To truly prevent and respond to violence, we also need to think about the person using harm. This slide marks a shift in our conversation: What about Brian? What supports or interventions could help someone like him take accountability, understand the impact of their actions, and stop the abuse?
- This doesn't mean excusing the behavior — it's about recognizing that without intervention, the cycle continues

Those closest to Brian are in the best position to intervene and support, and the SNCit conversation method works here as well! Let's see how Brian's friends approach it without SNCit first.

## Slide 60: Video - Brian & Friends

*Play video for participants, and invite them to observe how Brian's friends approach his behavior without the SNCit method.*

## Slide 61: Video - Recognizing Warning Signs in Brian

*This slide provides a list of warning signs that Brian's friends may have tuned into. Take some time to unpack and discuss.*

## Slide 62: Talk to Brian

If you're Brian's friend, you may be the best person to talk with him, but there are some considerations to keep in mind:

- Approach the conversation when he is calm
- Don't confront him about his behaviour – it could put Gail at risk
- See the warning signs of abusive behaviour – name them – just the facts of what you know



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## Slide 63-65: SNCit with Brian

*Inform participants that you will show another video of Brian's friends using the SNCit method. Use this time for discussion.*

## Slide 66: Safety Planning - For Everyone

- We advise people to do safety planning with professionals who have training and expertise on coercive control.
- A safety plan should address the specific risks that are identified through the assessment of risk.
- Safety planning is a crucial part of supporting those who are experiencing violence. Professionals working within THANS 14 member organizations (e.g., transition houses, Mi'kmaw family healing centers, and outreach) have specialized training to assess risk and help develop personalized plans to keep people safe.
- But safety planning isn't a one-time event, it's an ongoing process. As situations change, new risks may emerge. It's important that we revisit the plan regularly and adapt it as needed.

People do not need to be staying in a THANS shelter to access risk assessment and safety planning services. These services are open to anyone experiencing or at risk of experiencing IPV/DV.



## Slide 67: Safety Planning & Empowerment

- Safety planning is a survivor-centered process that helps reduce risk and increase safety for those experiencing intimate partner or domestic violence.
- It's not a checklist — it's flexible and tailored to each person's needs, whether they are staying, leaving, or navigating post-separation risks.
- The goal is to support survivors' choices, enhance safety, and reflect their real-life circumstances like parenting, work, or legal concerns.

## Slide 68: Refer

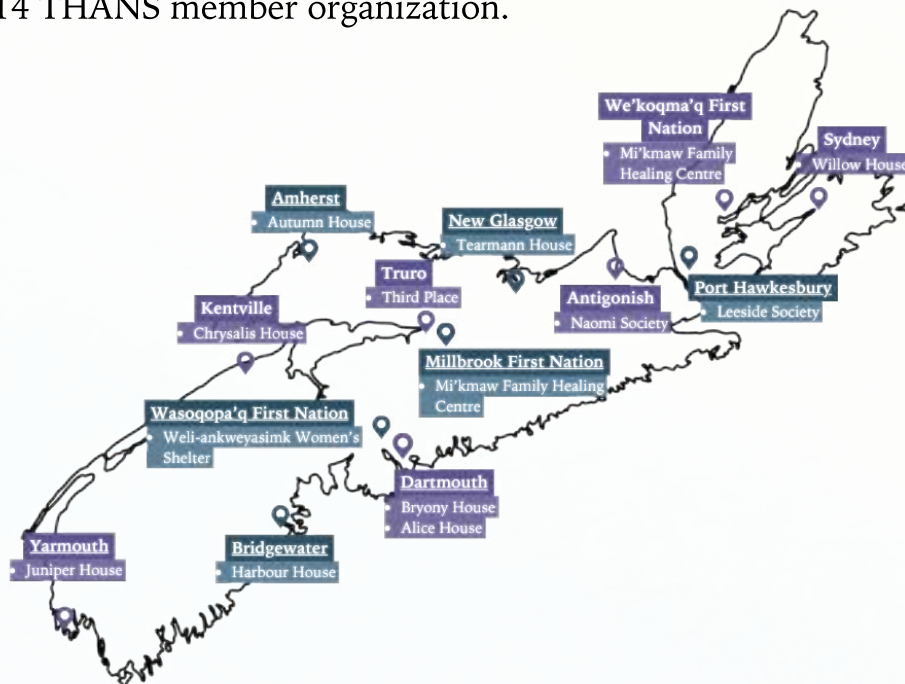
*Helping people connect to the right supports is an important part of responding to intimate partner and domestic violence. As supporters, our role is not to fix the situation, but to help connect individuals to the right resources. This often means referring to the experts, like those working within THANS 14 member organizations, who are trained to provide trauma-informed, safety-focused support.*

*This section outlines provincial and regional resources, but please feel free to add resources that are local to the community you are presenting to.*

*Inform participants that you will be moving into the final piece of the session, highlighting resources and supports available.*

## Slide 69: Support for Victims/Survivors

- The Provincial Neighbours, Friends, and Families helpline is available 24 hours a day, 7 days a week. Anyone experiencing or at risk of experiencing intimate partner or domestic violence, as well as those concerned about someone, can call or text this line. All services are free and confidential. When someone calls this number, they are connected with an expert from one of the 14 THANS member organization.





- The 211 helpline is available to anyone of any gender for resource navigation and support. When people call this number, they are connected with a community resource navigator.
- 

## Slide 70: THANS Members

*This slide is meant to compliment the map on the previous slide, and lists all THANS organizations including their catchment areas.*

## Slide 71: More Than Just a Bed

*A common misconception people have is that, to receive services from THANS organizations, they need to be staying in shelter. This is NOT true, and unfortunately, this misconception can prevent some people from accessing the life-saving services provided by THANS member organizations.*

*This slide is intended to highlight this misconception, and outline the many services that are available.*

- THANS member organizations across the province have been supporting survivors since 1978, often as the primary organization in their area providing specialized service to survivors of IPV and DV. Some of these services include:
  - Safety Planning
  - Outreach
  - Emergency Shelter
  - Programming, including for children and youth
  - Court Accompaniment
  - Education & Awareness
  - Supportive Counselling
  - Crisis Information & Support Lines
  - Referrals & Advocacy
  - Support with Peace Bonds & Emergency Protection Orders

Services are free and confidential; you do not need to be staying in a transition house to receive support!



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## Slide 72: Women's Centers in Nova Scotia

*Women's Centres are supportive, feminist-centred spaces that provide support for women and girls. They provide advocacy, accompaniment, information, referrals, counselling, and outreach services.*



## Slide 73: Women's Centers

*This slide is meant to compliment the map above, and lists all women's centres across Nova Scotia, including their locations.*

## Slide 74: iHeal App

- The iHEAL app is a free, trauma-informed tool designed to support women who have experienced intimate partner violence.
- Developed in collaboration with survivors and experts, it helps users reflect on their experiences, identify safety needs, and connect to local resources, all in a secure, user-controlled environment.
- The app does not collect personal data, ensuring privacy and discretion.
- While it is not a replacement for direct support, iHEAL can be a helpful companion in a survivor's healing journey and a valuable referral option for service providers.



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## Slide 75: Somebody Must Say These Things - THANS Podcast

*Many people may be interested in learning more about the context of intimate partner and domestic violence in Nova Scotia. For those who would like to dive deeper into the issue, we recommend listening to the Somebody Must Say These Things Podcast.*

- THANS member organizations came together in 2021 and 2023 to develop a podcast featuring survivors and the women who make it their mission to end GBV in Nova Scotia.
- The podcast includes 2 seasons, and is available online via the THANS website or on Spotify.



## Slide 76: Thank You

*This slide marks the end of the session before we invite participants to complete the evaluation form. Please thank the participants for their time, inform them about the survey and their certificate, and invite questions.*

## Slide 77: Participant Evaluation & Certificate

- Please take a moment to provide anonymous feedback and receive your certificate by scanning the QR code.
- The data goes directly to the Centre for Research and Education on Violence Against Women (CREVAWC) and is shared with THANS.
- Your certificate will be emailed directly to you from CREVAWC.



*Note: please have paper copies available if needed, or a laptop/tablet for folks who may not have a phone*

## Guidance on Facilitating Scenarios

The overview of the scenarios in this section is intended to support you in leading discussions by providing an initial analysis of the scenes. Each of the scenarios provides an opportunity to increase public awareness and knowledge to:

- Recognize the warning signs and risk factors of abuse.
- Recognize that power imbalances are involved in abusive relationships – there are different motivations to maintaining power over another person. It can be intentional or unintentional. In the Brian and Gail scenario, the person behaving abusively may not recognize that what they are doing is abusive, and the person experiencing the behavior may not recognize it as abusive either.
- Recognize the complexity in relationships; we need to move away from labelling people as being either ‘good’ or ‘bad’. Most of us are capable of abusive behaviour in the right conditions.
- Respond with meaningful support that is respectful and helpful and SAFE!
- Recognize the need for both informal and formal supports.
- Refer to professional services.



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## Discussion Tips

Below are some discussion tips for facilitating scenarios:



### **Focus on The Facts**

Remind participants during the discussion that when we are looking at warning signs, we want to focus on the facts. If we assume we know about the internal motivations of a character, we move into judgement of the situation.

This will inevitably happen during a group discussion and can become a teachable moment. People will have different ideas about what actions ‘mean’ in the scenario. There is seldom a single shared perspective – everyone has different ideas about motivations and meaning. It is useful to point this out. Bring people back to the facts of the situation as the most useful information we want to work with.



### **Address Discriminatory Remarks**

There are opportunities to introduce the idea that abusive behaviour is common, and that we can agree to help each other recognize when it shows up. Make a verbal agreement with the group that when comments show up in discussion that start with “those people” or “that culture” are flags we will use to help us surface stereotypes and discriminatory attitudes and beliefs.



### Recognize Victim-Blaming

Observations or comments about the person suspected of experiencing abuse that include the words or phrases like “allows” or “lets it happen” when speaking about victims shows the way we blame victims for being in abusive relationships. It is never the victim’s fault that abuse is happening.



### Create a Supportive Environment for Discussion

Victim-blaming, racist, sexist, ageist comments will happen and need to be challenged in a non-aggressive way. This is no small task. Establish an agreement early in the session with participants to surface the ways that language points to hard-to-see attitudes. Focus on the language, the actual words can be used, as a ‘clue’ to help us unearth our own widely shared biases. Emphasize that we all part of the same society, that we all contribute and that we have to help each other make change

While we want to challenge blaming and discriminatory comments, we don’t want to shame the person making the comment such that people feel silenced. We don’t want to make people ‘wrong’. Political correctness is not our goal. Rather we want people to feel comfortable to voice opinion and then invite reflection. It is tricky and will involve trial and error to find the ways that work for you.



### Safety is a Priority

Whether you are facilitating discussions or leading SNCit practice, safety is always the priority for everyone involved. Keep safety at the forefront by asking participants to talk about it throughout your event.



# Section 3: Local Resources

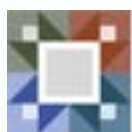
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This section includes a list of supports and services available to individuals in Nova Scotia who are experiencing, or at risk of experiencing, gender-based violence. These resources are intended to help people access safety, information, and assistance—whether they are seeking shelter, legal guidance, emotional support, or culturally relevant services.

We encourage facilitators to share their own resources as well as familiarize themselves with these resources, share them with participants when appropriate, and ensure that those impacted by violence know that they are not alone and that help is available.

## **Provincial Helpline (THANS x Neighbours, Friends, & Families): 1-855-225-0220**

If someone needs immediate support, a safe place to stay, or simply someone to talk to, they can reach out 24/7. Our trained staff provide free, confidential, and trauma-informed support around the clock. This line is open to anyone — whether they are currently experiencing intimate partner violence, at risk, or concerned about someone they know. Individuals do not need to be staying in shelter to access services. Our team can offer crisis support, safety planning and referrals to other resources.



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## 211 Nova Scotia

211NS is a not-for-profit, no-cost service which connects callers of all genders with social services. They have a comprehensive database of free services across the province. They partner with THANS in providing support to those leaving, or living with, violence.



To be connected with services at any time, you can call 2-1-1.

## THANS Member Organizations

THANS 14 member organizations provide a wide-range of services, including but not limited to outreach services, supportive counselling, legal navigation and court accompaniment, emergency shelter, prevention education, and more.

### Alice House (Halifax Regional Municipality)

Second-Stage Housing and Supportive Counselling.

For more information, visit: <https://alicehouse.ca/>

General inquiries: 902-466-8459 | [livesafe@alicehouse.ca](mailto:livesafe@alicehouse.ca)



### Autumn House (Amherst & Cumberland County)

24 Hour Help Line: (902) 667-1200

[info@autumnhouse.ca](mailto:info@autumnhouse.ca)



### Bryony House (Halifax Regional Municipality)

Call or text 902-422-7650

[staff@bryonyhouse.ca](mailto:staff@bryonyhouse.ca)



### Cape Breton Transition House/Willow House (Sydney, Cape Breton)

24 Hour Help Line: 902-539-2945 |

Toll Free: 1-800-563-2945

[cbtha@cbtha.com](mailto:cbtha@cbtha.com)





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**Chrysalis House (West Hants, Kings, & Annapolis Counties)**

24 Hour Help Line: (902) 679-1922 |  
Toll-free: 1-800-264-8682  
[support@chrysalishouse.ca](mailto:support@chrysalishouse.ca)



**Harbour House (Bridgewater, Lunenburg & Queens Counties)**

24 Hour Support Line: (902) 543-3999 | Toll-free: 1-888-543-3999  
[thw@harbour-house.ca](mailto:thw@harbour-house.ca)



**Juniper House (Yarmouth, Digby & Shelburne)**

24 Hour Help Line: (902) 742-8689 |  
Toll-free: 1-800-266-4087  
[juniperhouse@juniperhouse.ca](mailto:juniperhouse@juniperhouse.ca)



**Leeside Society (Richmond & Inverness Counties, & Port Hawkesbury)**

24 Hour Help Line: (902) 625-2444 |  
Toll Free: 1-800-565-3390



**Mi'kmaw Family Healing Centre - Millbrook**

24 Hour Help Line: (902) 893-8483 |  
Toll-free: 1-800-565-4741



**Mi'kmaw Family Healing Centre - We'koqma'q**

24 Hour Help Line: (902) 893-8483 |  
Toll-free: 1-800-565-4741

**Naomi Society - Outreach Only (Antigonish & Guysborough County)**

For support, call (902) 863-3807 or email  
[info@naomisociety.ca](mailto:info@naomisociety.ca)



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**Tearmann Society (New Glasgow, Pictou,  
Antigonish, & Guysborough Counties)**

24 Hour Help Line: (902) 752-0132 |  
Toll free: 1-888-831-0330  
[info@tearmann.ca](mailto:info@tearmann.ca)



**Third Place (Colchester & East Hants Counties  
& Truro)**

24 Hour Help Line: (902) 893-3232 |  
Toll free: 1-800-565-4878  
[support@thirdplaceth.ca](mailto:support@thirdplaceth.ca)



**Weli-ankweyasimk Women's Shelter (Acadia  
First Nation)**

Opening in Summer 2025, Weli-ankweyasimk Women's Shelter is an Indigenous-led initiative of Wasoqopa'q First Nations (Acadia First Nation), offering culturally grounded, holistic supports for Indigenous women and their children rooted in Mi'kmaw values and land-based healing.

[wws@wasoqopaq.ca](mailto:wws@wasoqopaq.ca)



**Sexual Violence Supports & Services**

**Avalon**

General inquiries line: (902) 422-4240  
Trauma therapy: (902) 817-3821  
For more information, contact  
[info@avaloncentre.ca](mailto:info@avaloncentre.ca), or visit: [avaloncentre.ca](http://avaloncentre.ca)





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## **Sexual Assault Nurse Examiner (SANE) Program**

Sexual Assault Nurse Examiners (SANEs) are nurses with specialized training in forensic care of patients who have experienced sexual assault or abuse. On-call SANE nurses provide immediate care within seven days of a sexual assault to people who would like wraparound care and support, such as medical attention, connection to resources, or to have forensic evidence collected. This is a 24/7, on-call program. Sexual assault is never the fault of the victim or survivor. SANE nurses uphold the right of the victim or survivor to be treated with dignity and respect at all times during the process, and to prevent further victimization or harm.

To access this service, visit the nearest OPEN emergency department to you and request a SANE nurse.

Call (902) 425-0122 to speak directly to a SANE nurse in the Halifax region. For more information, visit: <https://www.nshealth.ca/sane>

## **Nova Scotia Women's Centres**

Women's Centers across Nova Scotia are community-based organizations that serve women of all ages and backgrounds in environments that are sensitive to women's needs. They offer a variety of services such as supportive counselling, advocacy, outreach, community education, and more.

### **Antigonish Women's Resource Centre & Sexual Assault Service Association**

204 Kirk Place, 219 Main Street, Antigonish, NS B2G 2C1  
Phone: (902) 863-6221

### **Every Women's Centre**

21 Trinity Avenue, Sydney, NS B1P 4Z4  
Phone: (902) 567-1212

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### **LEA Place Women's Resource Centre**

22709 Hwy #7, P.O. Box 245, Sheet Harbour, NS B0J 3B0  
Phone: (902) 885-2668

### **Pictou County Women's Resource & Sexual Assault Centre**

503 S. Frederick Street, New Glasgow, NS B2H 3P3  
Phone: (902) 755-4647  
Text: (902) 921-4647

### **Second Story Women's Centre**

18 Dufferin St. P.O. Box 821, Lunenburg, NS B0J 2C0  
Phone: (902) 640-3044

### **Strait Area Women's Place**

609 Church Street, Suite 102, Port Hawkesbury, NS B9A 2W2  
Phone: (902) 625-1614

### **The Lotus Centre: A Resource for Women Society**

67 Dominion Street, Truro, NS B2N 3P2  
Phone: (902) 895-4295

### **The Women's Place Resource Centre**

694 Main St., P.O. Box 549, Kingston, NS B0P 1R0  
Phone: (902) 363-2030

### **Tri-County Women's Centre**

12 Cumberland Street, Yarmouth, NS B5A 3K3  
Phone: (902) 742-0085  
Toll-free: 1-877-742-0085



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## Support for Men in Nova Scotia

There are a number of resources available across the province for men who have either experienced or used intimate partner violence. While many of the services listed below are designed for those who have used violence, support is also available for survivors. People can change, and healing is possible. Men are an essential part of the conversation when it comes to ending gender-based violence in all its forms.

### Mi'kmaw Family Healing Centres - Men's Support Workers

The Mi'kmaw Family Healing Centres run a variety of programs supporting men who are Indigenous across the province.

24 Hour Help Line: (902) 893-8483 | Toll-free: 1-800-565-4741

### New Directions

New Directions is a program of the Cumberland County Transition House Association that offers assistance to men who engage in abusive behaviour. New Directions offers support counselling, peer support groups, and a variety of other support services to men who want to move towards peaceful relationships.

16 Church Street (Main Floor), Amherst, NS, Canada, Nova Scotia  
Contact: 902-667-4500 | [newdirections@autumnhouse.ca](mailto:newdirections@autumnhouse.ca)

### Bridges Institute

Domestic violence counselling, research and training institute located in Truro. Houses the GuysWork and Fatherhood Matters programs.

676 Prince Street, Truro, Nova Scotia | (902) 897-6665 |  
[bridges@bridgesinstitute.org](mailto:bridges@bridgesinstitute.org)

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### The People's Counselling Clinic

Community-based mental health clinic in the Halifax Regional Municipality, focused on intimate partner and sexual violence.

Some programs include:

- ManTalk, group therapy for male victims of sexual abuse.
- Inside Out, group therapy for men who are at risk of harming others in various ways.
- And more.

202-6169 Quinpool Road, Halifax NS B3L 4P6

902-832-1593 | [thepeoplescounsellingclinic@gmail.com](mailto:thepeoplescounsellingclinic@gmail.com)

### New Start Counselling

Offers individual and group counselling to people who have used domestic violence and/or abusive behaviour in their intimate partner relationship. Also offers counselling to partners affected by the abuse.

45 Alderney Drive, Suite 900, Dartmouth, NS, B2Y 2N6

902-431-3033 | [info@newstartcounselling.ca](mailto:info@newstartcounselling.ca)

### Cornerstone Cape Breton Association

Provides psycho-educational groups for men that looks at the intimate and spousal relationships where person directed violence occurs.

329 George Street, Sydney, NS, B1P 1J7

902-567-0979 | [connect@cornerstonecb.ca](mailto:connect@cornerstonecb.ca)

### Pictou County Opportunity for Men Association

Provides group sessions for those who are struggling with their behaviours in their intimate relationships.

902-396-2440



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## Legal Information & Support

### Safely on Your Way - Legal Information Nova Scotia

A legal information and resource guide for survivors of intimate partner violence and their service providers in Nova Scotia.



### Emergency Protection Orders

Information on emergency protection orders under the Domestic Violence Intervention Act.



### Making Changes - NS Status of Women

Information on everything from safety planning to receiving support to how to talk to someone who engages in violence.



### Legal Help for Survivors of Intimate Partner Violence [Quick Reference]

Quick reference guide including information on services, emergency protection orders, Domestic Violence Leave, financial support, and family law.



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## Online Resources

### iHeal App

While we encourage seeking support, we recognize that not all women feel ready or able to do so. The iHEAL App offers a safe, private space to reflect, build awareness, and explore healing strategies.

Free, bilingual, and secure, the iHEAL App supports Canadian women experiencing current or past intimate partner violence. It offers tools to enhance safety, health, and well-being, and is also helpful for friends, family, and service providers.



### Alice on The Go

Alice on the Go is a free, self-directed online program from Alice House for women and fem-identifying individuals. It helps participants understand healthy relationships, recognize abuse, and explore healing from trauma. To join, complete the intake form on their website or email [aotg@alicehouse.ca](mailto:aotg@alicehouse.ca) for more information.



### E-Learning: Trauma- and Violence-Informed Care Foundations

This program is for anyone who wants to increase their knowledge and skills when working with people from diverse groups, impacted differently by social determinants of health and seeking care in health services and beyond.



Public Health  
Agency of Canada





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## *Dear Facilitators,*

As an organization dedicated to supporting survivors and ending gender-based violence in all of its forms, we extend our heartfelt gratitude to you for your commitment to prevention. The time, energy, and care you put into this work matters so much.

We know that this work is not easy, and that most, if not all of us, know someone who has been personally impacted by intimate partner and domestic violence. Many of us in this sector are survivors ourselves, channeling our painful experiences into something greater, in hopes that others won't have to suffer in the ways that we have. This takes courage, and this takes heart.

We live in a time that often feels divided, and yet, we believe that through education, connection, and meaningful conversation, we can create safer communities that foster and build healthy relationships.

The Neighbours, Friends, and Families framework is built on the idea that prevention starts with all of us, and that community care can be the first response. It's about meeting people where they are, calling them in rather than calling them out, and understanding that real change rarely happens through shame, but through compassion and collective responsibility.

We must hold onto what Kari Grain calls "Critical Hope," an action-oriented belief in the possibility of transformation that acknowledges injustice, embraces complexity, and commits to meaningful change. Even when the work is heavy, we must remember that our efforts ripple outwards in ways that we may never fully see.

Thank you for being a part of this movement; for bringing your voice, your values, and your lived experience into these conversations.

*With gratitude and solidarity,*

**Krystal Lowe (Education & Prevention Lead, THANS)**  
***education@thans.ca***



# THANS

Transition House Association of Nova Scotia



## Neighbours, Friends & Families

Western



Centre for Research & Education on  
Violence Against Women & Children

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