



KNOWLEDGE HUB
CENTRE DE
CONNAISSANCES

WELCOME

to the 2025

Trauma- and Violence-Informed
Community of Practice

Knowledge Exchange

REMINDERS

- 1 Please read and complete the Research Letter of Information and Consent if you haven't already.



- 2 Please share your views about the Knowledge Hub's facilitation of this Community of Practice on our **Graffiti Board!**

The board is in **International Boardroom** and you can write on it anytime today!

REMINDERS

- 3 Photography, videography, graphic recording, and note-taking will take place throughout the day.





Welcome, Brittany Datchko of Fuselight Creative!

Graphic Recorder & Animator

Welcome, Alice Echaquan and Thérèse Niquay



National Day for Truth and Reconciliation

Here is where your
presentation begins





PROJECT PRESENTATIONS

*We encourage you to take notes on major themes, overlaps,
and other reflections (especially on project impacts)!*

STEP PROJECT

A prenatal program for survivors of complex trauma aiming to prevent family violence and to promote maternal and child health

Project realized at the *Centre de recherche interdisciplinaire sur le développement de l'enfant et la famille* of the *Université du Québec à Trois-Rivières*

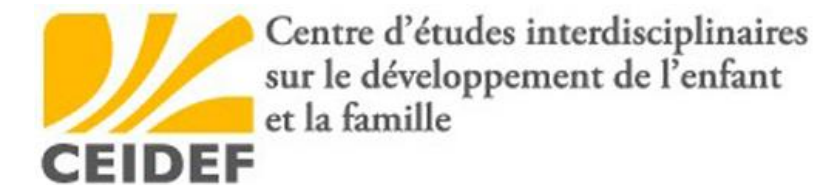
Under the direction of:

Nicolas Berthelot, Ph.D. clinical psychologist

Canada Research Chair in Developmental Traumas

Professor, Université du Québec à Trois-Rivières

projet.step@uqtr.ca



The STEP project was made possible thanks to financial support from the Public Health Agency of Canada and the Canada Research Chairs Program (SSHRC)



Agence de la santé
publique du Canada

Public Health
Agency of Canada

Reach of the STEP project

What is the STEP program ?

- A mentalization-based group intervention that incorporates the concept of trauma;
- Offered to pregnant women who have experienced a difficult childhood (abuse, neglect, or other forms of interpersonal trauma);
- Aims to promote maternal health, support the formation of a secure attachment with the child, and interrupt intergenerational trajectories of childhood maltreatment.

Practical and societal reach

- First prenatal group intervention specifically designed for pregnant women who have experienced trauma.
- Supports resilience and psychological well-being during a period of critical vulnerability.
- Influences public policy (e.g., Special Commission on the Rights of Children and Youth Protection).
- 90 pregnant women have participated in the program to date.
- Ongoing implementation in the health and social services network.
- Adaptations of the program for the Atikamekw community and women with a history of migration.

Communication reach

- > 30 articles and interviews in the media.
- > 60 000 visits to the STEP project website.
- > 600 registrations for the French-version of the ASTRA training.
- 3 160 followers of STEP and ASTRA on Facebook.
- Several scientific awards contributing to visibility.

Academic reach

- 30 articles et > 150 scientific presentations resulting from STEP.
- Demonstration of the relevance of the STEP program, its conceptual foundations, and its effects on the health and well-being of participants.

Educational reach

- ASTRA: a free asynchronous online training course on trauma-informed practices in perinatal care.
- One training course and four intervention support guides available in English and French.

Geographic reach

- Developed in Quebec.
- Pilot implantation pilote in Saskatchewan and France.
- Invitations to present STEP and ASTRA internationally.

Collaborative reach

- Multiple partners from the health and social services network, the community sector, and academia.

Lessons learned

1. Implementing a program within large organizations is a real challenge that requires numerous adjustments and prior identification of obstacles and opportunities.
2. STEP is one element of a multilevel response strategy that should be implemented in the face of the public health challenge posed by the intergenerational trajectories of childhood traumas.

Sustainability

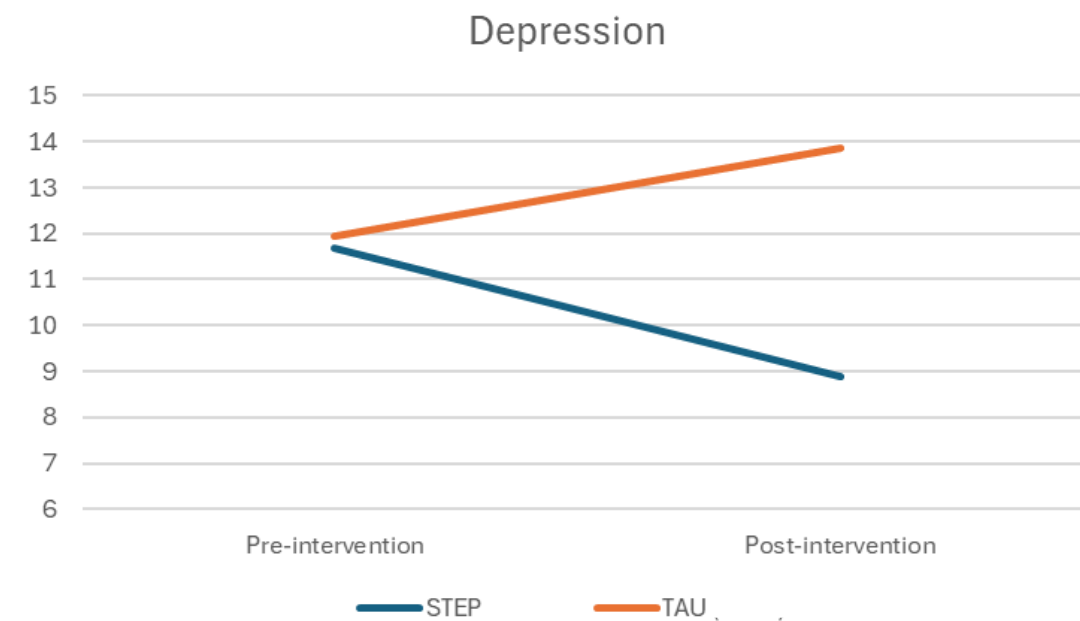
Sustainable tools:

- A unique evidence-based intervention program.
- New culturally secure adaptations of the program.
- A training on the STEP program and on trauma-informed practices in the context of perinatal care.

At this stage of STEP's development and deployment, the program's sustainability still depends on securing funding.

Outcomes that are...

mesurables



felt and expressed



practical

“This training is a valuable tool for all professionals and settings involved in maternity care and childbirth. It should be included in professional health training programs.”

Céline, midwife

structuring



full of hope



The Implementation of an Advocacy Intervention for Diverse Women in Midlife and Older Experiencing Intimate Partner Violence: Effectiveness and Experiences of Participants and Community-based Researchers

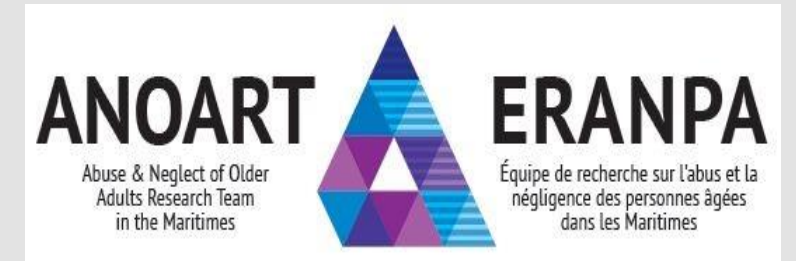
Principal Investigators:

Dr. Lori Weeks, Dalhousie University

Dr. Cathy Holtmann, University of New Brunswick

Trauma-informed Community of Practice - Knowledge Exchange

September 30, 2025



The AIM Study



Muriel McQueen
Fergusson Centre
for Family Violence Research



Centre Muriel
McQueen Fergusson
pour la recherche sur la violence familiale



AIM Program Reach



The AIM Study

Participants:

- 27 completed AIM Program (Total of 205 hours of programming)
- 22 CG participants received info package
- 7 CG participants currently taking part in AIM Program

Organizations

- 20 showed interest in project
- 12 helped with recruitment
- 3 helped recruit and facilitate program
- Recruited a total of 24 Participants

Facilitators:

- 15 service providers participated in facilitator training session
- 5 delivered programming
- 3 participated in interviews
- 2 delivered program to CG participants

Knowledge dissemination

- Presented in 3 webinars
- Presented at 5 National conferences and 1 international conference
- 2 published papers
- 1 In-person symposium (20 participants)

Lessons Learned



The AIM Study

Recruitment:

- Lengthy & costly
- Family violence sector participation
- Midlife women vs. older women
- Importance of safety & stage of leaving
- Participants genuinely want to help other women

Implementation:

- Length of sessions
- Importance of flexibility
- Importance of support for facilitators
- Importance of using a trauma-informed approach

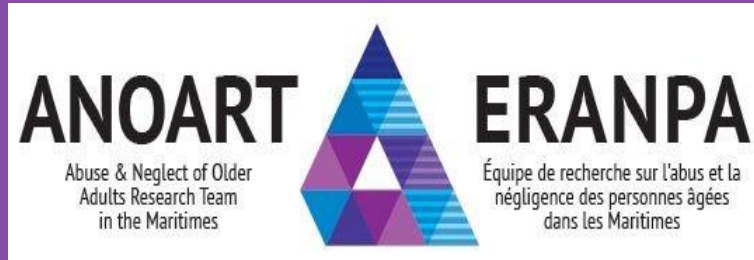
Quantitative Data Collection:

- Surveys can be difficult to conduct
- Consider the length of surveys & response options
- Offer flexible options
- Opportunity for participants to tell their story & receive validation/support

Qualitative Data Collection:

- Importance of relationship with facilitator
- Importance of social support for midlife and older women
- Leaving & recovering is a lengthy process, women face many barriers

Sustainability



The AIM Study

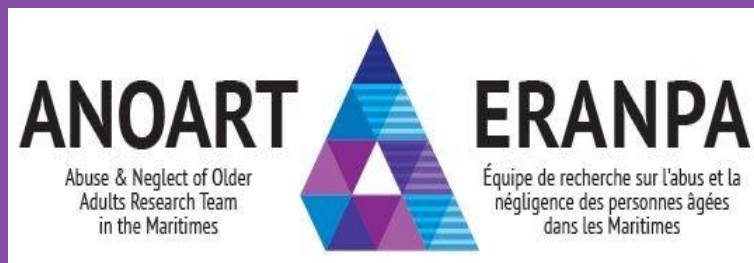
Adapting AIM Program for other vulnerable populations:

- Caregivers who experience IPV in the Maritimes

Development of the CAN-AIM Program:

- Scale-up and spread of the AIM Program across Canada
- Development of a virtual training course for service providers

Project Impact



The AIM Study

Quantitative Findings:

- Reductions in decisional conflict and IPV severity
- Improvements in perceived social support, uptake of safety strategies, depressive symptoms, and mental health quality of life

Qualitative Findings:

- Helping women recognize IPV and process past abuse
- Supporting women through separation and legal matters
- Helping women heal process and moving forward
- Providing tailored info and resources

When I didn't think I had it in me, when I thought I was just falling backwards through a black hole, speaking with [facilitator] was like somebody threw me a rope and helped me out of the hole and out of the dark and after I had conversations with her, I remembered my own power and strengths, and she was very, very good at reminding me that its ok to feel and its ok to be in pain, that this kind of abuse take a long, long time [to heal from].

Acknowledging and Responding to Mistreatment in CARegiving (ARMCAR)

Authors: Mélanie Couture, Kevin St-Martin, Renée-Pier Filiou, Flora Aude Le Cerf, Rosalie Lacasse, Jessie Berthiaume



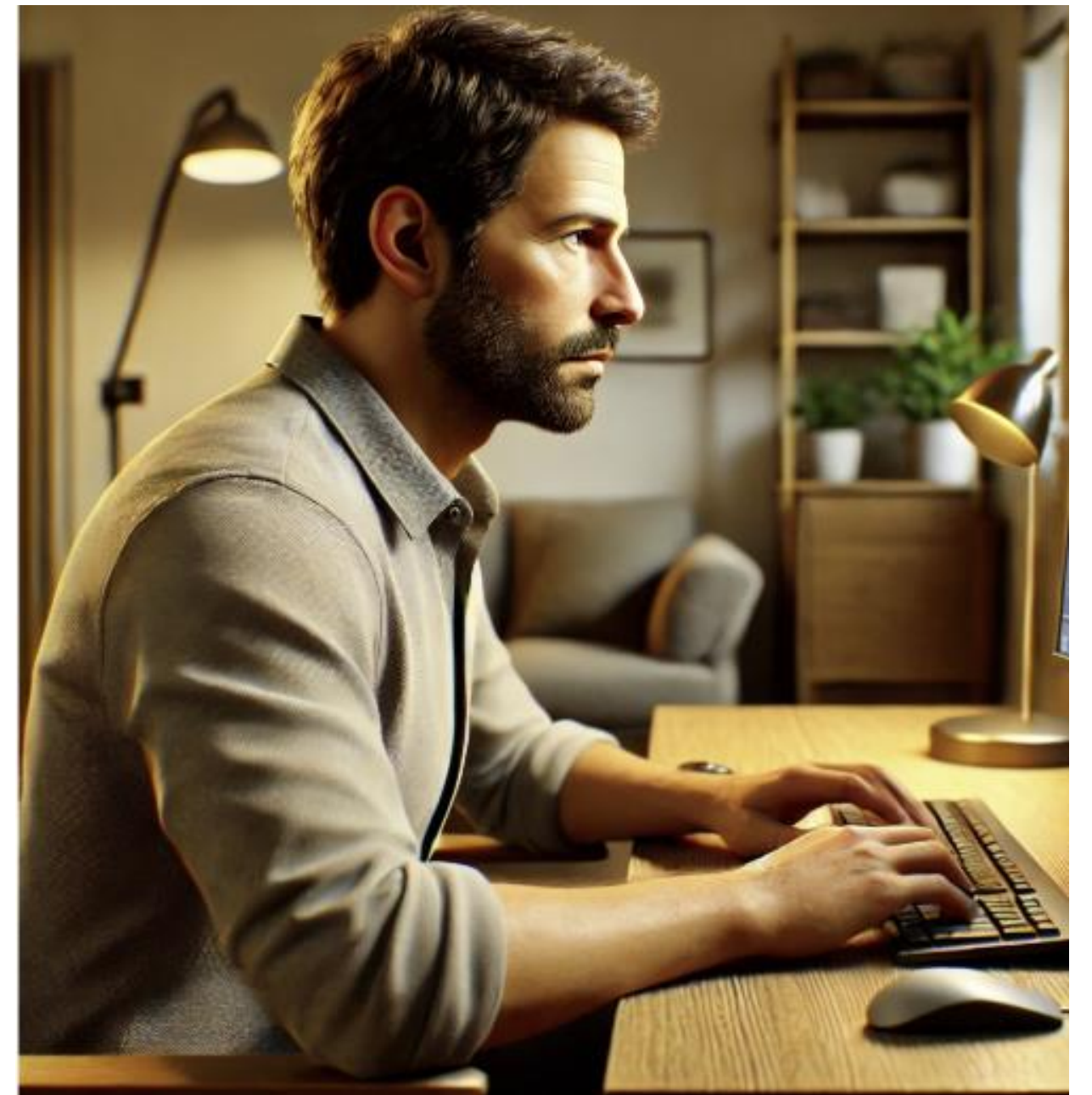
Chaire de recherche sur la maltraitance
envers les personnes âgées
Research Chair on Mistreatment of Older Adults



UNIVERSITÉ DE
SHERBROOKE

Reach of the project

- **ARMCAR is an internet-based** multicomponent program to improve:
 - **Knowledge** of caregivers and community organizations workers/volunteers about older adult mistreatment in the context of family caregiving.
 - **Identification and reporting** of mistreatment situations.
 - **Help seeking behaviors, social support and health** of caregivers.



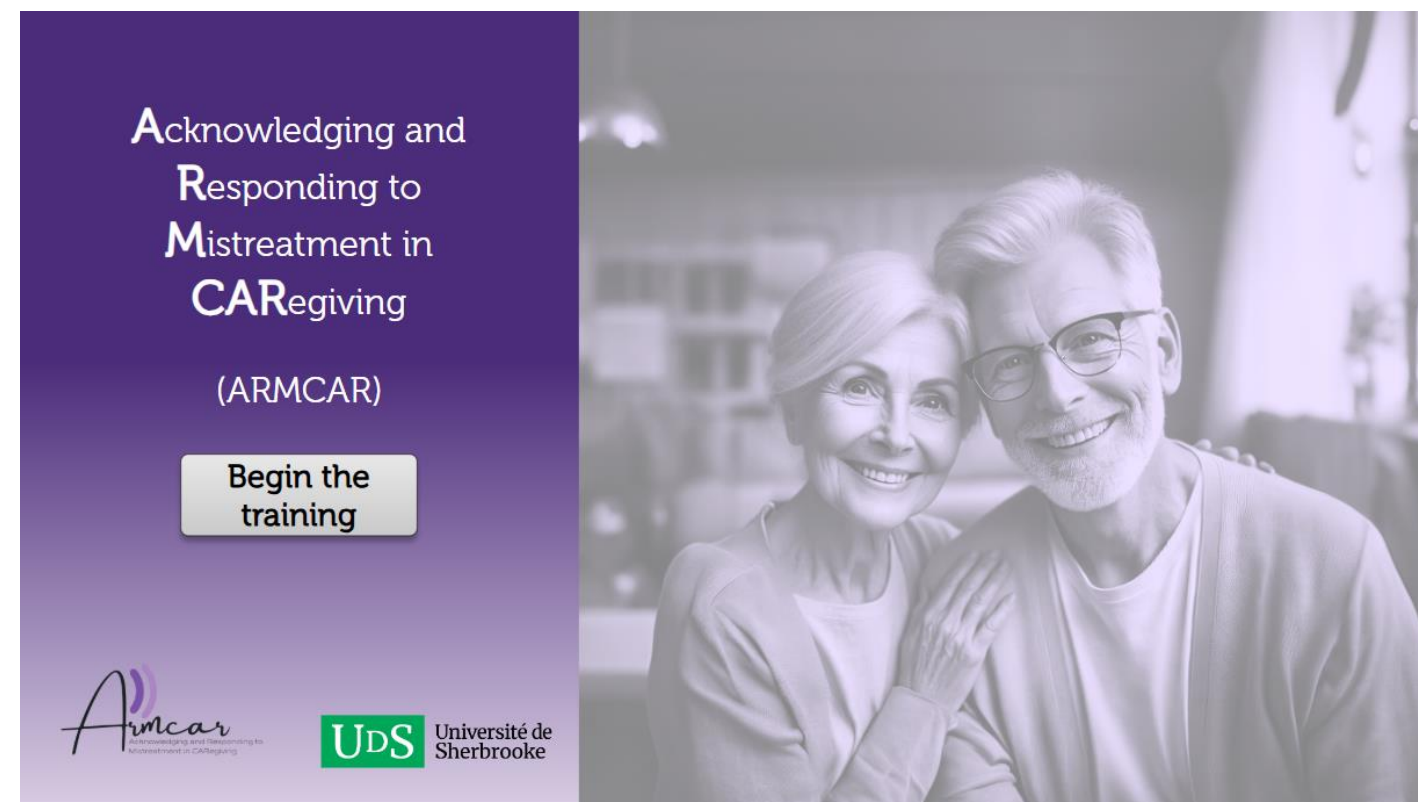
Lessons learned



- Impacts of the political climate on recruitment
 - The budgetary adjustment of the Ministry of Health and Social Services and the reform of the health and social services network have created a **climate of uncertainty** for our community partners.
 - The latter were unable to take part in the project because of a lack of resources even if they considered the training **highly relevant**.
- What you might do differently next time?
 - We need help for future solutions:
 - The project is already based in a **partnership approach**.
 - The Research Chair has a **great reputation** in the community (15 years+).
 - We used multiple platforms to promote the research project and personally reached out to **more than 80 organizations**.

Sustainability

- At the end of the project, the ARMCAR program will be available **online** in **French** and in **English** on:
 - The research Chair's website and/or
 - One of our partners in the community network's website (ex. Proches Aidance Québec)





Project impact

- Evaluation of **training needs** of community workers and caregivers – **Multiple problems identified**
- Usability assessment – **Positive reception** of online training for emotionally-charged content.
- **Knowledge transfer to multiple audiences**
 - Dedicated page on our website
 - Webinars on the subject that reached **more than a 1000 people** (x2)
 - Meetings with the MSSS and regional coordinators
 - Book chapter
 - Summary sheets(x2)
 - CAG symposium (x2)

Art et contes en famille (Art and Storytelling in the Family): An Art Therapy Project to Strengthen Family Bonds and Resilience in Immigrant Families



Project Reach

Participants

- +80 immigrant families (271 individuals: 154 children, 117 adults) in the Parc-Extension neighbourhood in Montreal
- 18 families in the research component

Implementation

- Family workshops at home and family groups in various locations: schools, parks, and community centres.
- **Methodology**
- 8-10 Art intervention workshops: storytelling, artistic creations, opening/closing rituals, sharing.
- Evaluation Tools: family drawings (KFD), GAD-7, qualitative observations.
- **Indirect Reach:** ~2000 people sensitized through dissemination and knowledge sharing.

Learnings & Evolving Practices

What we have learned in our practice:

- Cultural humility and inclusion: use of cultural and linguistic translators → improved communication and family participation.
- Creation of safe spaces, empathetic listening, and privacy: the cultural heterogeneity of the group becomes a source of security allowing authenticity.
- Adapting artistic proposals to the strengths and limitations of each family.

What we will continue to develop:

- Targeted support for parents (stress management, parenting skills, positive communication, and strengthening the parent-child bond)
- Ecosystem work: strengthening partnerships with schools, LCSCs, community organizations, cultural and social services
- Constantly transforming our art intervention approach as a lever for family resilience and preventing violence.

Sustainability

What remains after the project:

- Clinical follow-up and prevention through art therapy at CPSC (Centre de Pédiatrie Sociale PEYO)
- Make our intervention guide available to our partners to share our approach
- Strengthen intergenerational and collaborative ties through our community art workshops
- Strengthen and expand our partnerships through ongoing collaboration with community organizations, schools and local institutions.

Project impact

Direct impact on families :

- Reduced family stress and parental anxiety
- Strengthening emotional ties and positive dynamics
- Re-emergence of hope through children and the process
- Engaging personal and cultural resources to rebuild in the present
- Strengthening social ties and sense of belonging

Overall impact:

- Knowledge dissemination (conferences, scientific articles and symposiums)
- Contributing to the evidence base in family violence prevention
- Inspire similar interventions in other settings (schools, community centers)



Building Opportunities for Women (B.O.W.)

*Financial contribution from
Avec le financement de*



Public Health
Agency of Canada

Agence de la santé
publique du Canada

Connecting to Community after Intimate Partner Violence

Jen Johnson, PhD*

Bernouse Davilus, RSW, MSW

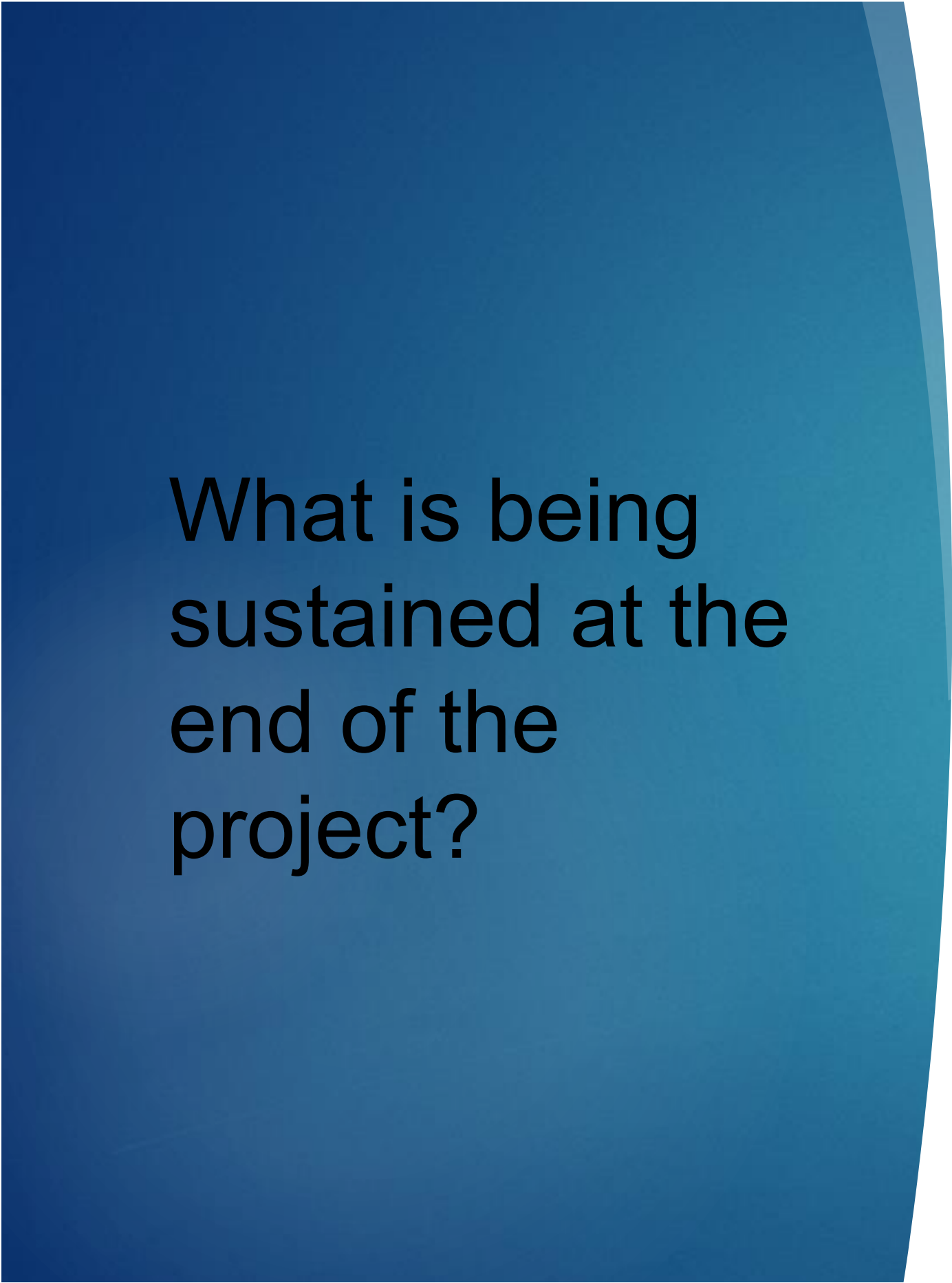
Marlene Gorman, RSW, MSW

The BOW Program
reached 111
participants
between
2023-2025

- ▶ Self-identified women, ages 16-84
- ▶ Formal education: < gr 10 - postgraduates
- ▶ Language: English, French, Urdu, Luganda, Gujarati, Hindi, Farsi, Spanish
- ▶ ~ 30-40% of participants self-identify as Black, racialized, Indigenous
- ▶ Commonalities: isolation from peers, family, and local services; unsure how to improve access to education, housing and healthcare; interest in learning more about gendered violence

Lessons Learned

- ▶ Engage a larger research team! Attempt comparative work between similar programs
- ▶ Provide a Facilitator's 'helper' to ethically document the reactions of participants during the group and further enhance the program evaluation
- ▶ Consider ways to follow the successes and challenges women face, post-BOW Program



What is being
sustained at the
end of the
project?

- ▶ Facilitator's Manual - can be revised, updated, adapted to future groups
- ▶ Program Evaluation methodology and materials can be repurposed
- ▶ Research Ethics Training for staff
- ▶ NEW partnerships reflect emerging needs in community



Project Impact, 111 participants cumulatively:

- ▶ 90 % participants report changes in knowledge and/or skills
- ▶ 90% participants report changes in behaviour
- ▶ 82% participants report improved health outcomes

Thank you
Merci Miigwech

Jen Johnson	Program Evaluator and Lead Researcher
Bernouse Davilus	BOW Program Facilitator
Eloho Ologan	BOW Program Facilitator
Kristen Conroy	Researcher Assistant
Marnie Mooney	Manager, YWCA Sudbury
Marlene Gorman	Executive Director YWCA Sudbury

A group of diverse Black people, including men and women of various ages, are shown from the chest up, looking upwards and smiling. They are arranged in a circular pattern, with their heads tilted back. The background is a light, neutral color. The text is overlaid on the image in a white, sans-serif font.

Fostering Violence Prevention and Well-being for Black Women, Families and Communities Project

Principal Investigator: Dr. Patrina Duhaney
University of Calgary

Project Reach

Communities: Calgary & Toronto

60+ participants (focus groups, interviews); 13 collaborators (CGG, community developers)

3 co-developed manuals: Trainer, Facilitator, Participant

Knowledge Sharing: 100+ KM contacts; conferences (Panama, Mexico, Ghana, TFEL, ACCEC)

Lessons Learned

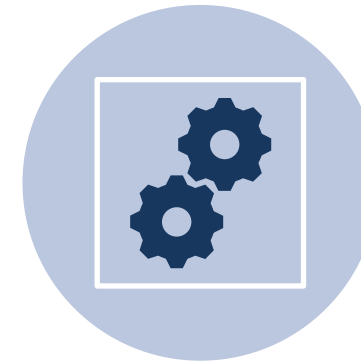
- Trust takes time: relationship > timelines
- Black men's underrepresentation reflects systemic exclusion
- Trauma-informed care must include racial trauma and CRT
- Co-development is slower but more meaningful



Sustainability



**Train-the-Trainer model
supports intergenerational
leadership**



**Manuals, infographics, policy
briefs, and digital stories as
legacy tools**



**Several peer-reviewed
manuscripts to advance
structural change**



**Exploring partnerships for
future implementation
(schools, agencies)**

Impact or Successes

- Raised national awareness about the need for Black-led, trauma-informed DV prevention
- Developed 3 comprehensive manuals used to train Black men, facilitators, and trainers
- Fostered healing spaces that center dignity, accountability, and collective care
- Built community leadership among Black men through mentorship and engagement
- Strengthened the evidence base with qualitative data and forthcoming manuscripts



CHANGING CONTEXTS

A primary prevention approach to working
in male dominated settings

PRESENTER: LANA WELLS,
MSW, RSW

*Brenda Strafford Chair in the Prevention of Domestic Violence
Associate Professor, Faculty of Social Work
Fellow, School of Public Policy
Director, Shift: The Project to End Domestic Violence
Co-Founder, Shift2learn*

CONTRIBUTORS: Elizabeth Dozois and Melissa Innes

REACH: KEY INFLUENCER COHORTS IN CALGARY POLICE SERVICE (2021-2025)

- **14 cohorts** across six workplace settings (achieved tipping point in 4/6 settings)
- **157 key influencers** received training/capacity building through customized learning sessions
- **135 research participants** consented to giving us feedback on the approach



PRELIMINARY RESULTS:

POST-PARTICIPATION QUESTIONNAIRE

- **90%** reported increased understanding of the importance of psychological safety and belonging in the workplace
- **88%** reported increased ability to recognize and mitigate own biases
- **90%** reported more aware of workplace dynamics related to inclusion
- **92%** reported increased to self-regulate
- **86%** reported increased confidence and skill to model prosocial behaviours
- **89%** reported increased confidence and skill to disrupt problematic behaviours

6 MONTH FOLLOW UP

- **69%** modelling prosocial behaviours in the workplace
- **52%** disrupting problematic behaviours
- **71%** state improved psychological safety and belonging in the workplace

“I have increased confidence to address bullying and harassment and nip it in the bud.”

LESSONS LEARNED

1. **Framing matters for male engagement:** Positioning the intervention around shared priorities like psychological safety, team cohesion, or operational excellence increased buy-in, even from those who might not initially prioritize gender equity or violence prevention.
2. **Social norms drive lasting change:** Behaviour change is more likely to stick when it is reinforced and rewarded within a person's network, making a social norms and network-based approach key to fostering non-violent, equitable behaviours.
3. **Embed micro-actions in daily life:** Behaviour change strategies are most effective when they reflect the context and everyday interactions and operational routines, rather than delivered as isolated, one-off activities.
4. **Go slow to go fast:** Spending time with them (e.g., attending parades, ride-alongs, meetings, district barbeques) helped us to: 1) build trust and credibility, 2) customize the content so it resonated, 3) understand the dynamics/system so that we could make meaningful recommendations for changes to behaviours, skills, policy and practice.

SUSTAINABILITY

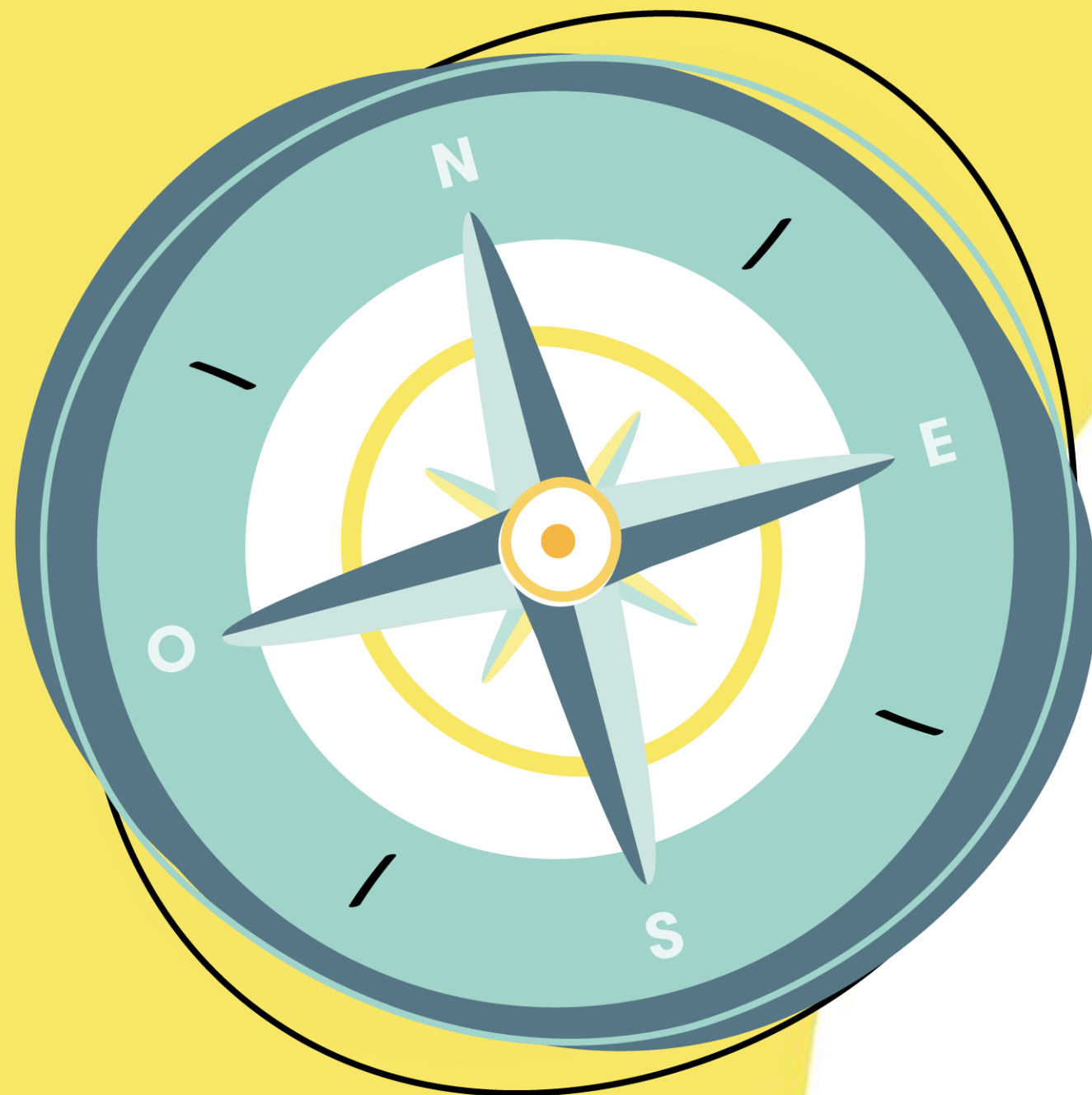
1. Testing *The Signal System*TM in a Canadian tourist destination's hospitality and tourism sector to explore how it can be adapted for other workplace settings.
2. Commercializing approach and content for sustainability.

Questions: Lana Wells lmwells@ucalgary.ca

<https://preventdomesticviolence.ca/our-work/workplace-culture/>

TO LEARN MORE





The Compass program: preventing sexual violence among children aged 6 to 12 and those around them

By Jessica Martin, Project Manager and Trainer, and Mélanie Murphy,
Prevention coordinator for 0-12 year olds
Marie-Vincent

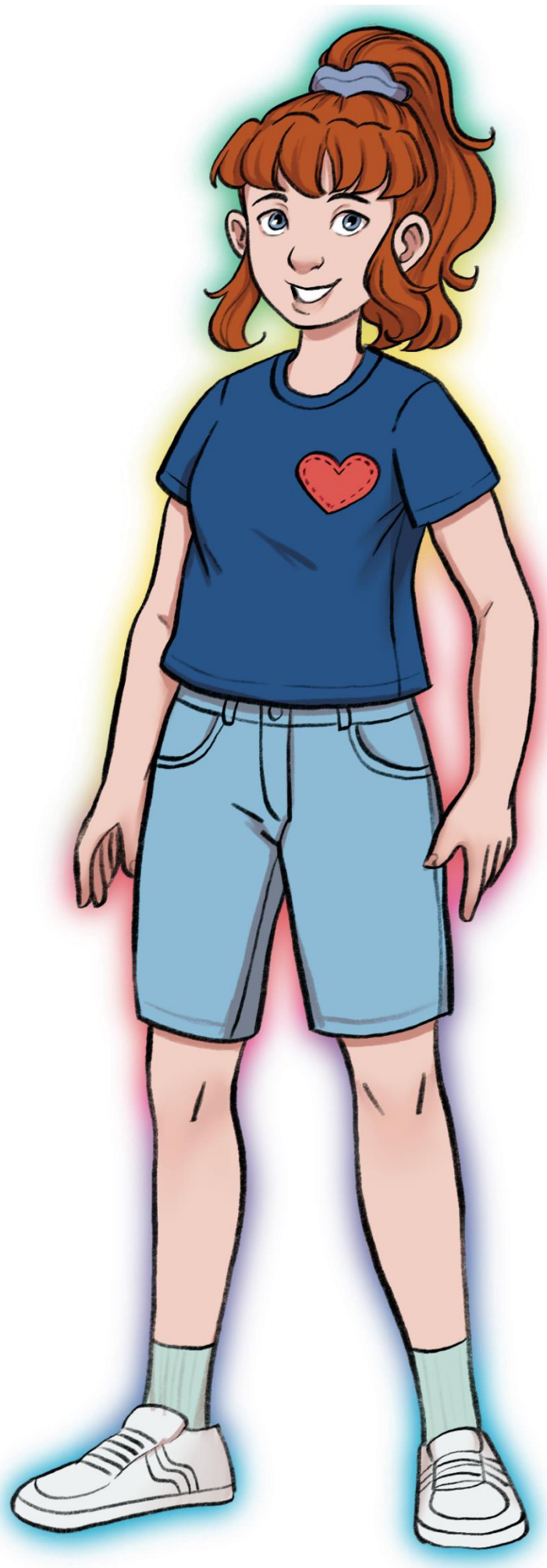
Contribution financière :



Agence de la santé
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Public Health
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Project Reach

Since the training program has launched (summer 2024), we have trained :

- 81 community organizations, for a total of 236 stakeholders;
- 38 camp settings, for a total of 108 managers and outreach workers;
- 166 leaders have taken the Compass e-learning course since its launch in summer 2024.

We plan to train up to 90 additional people in the fall of 2025, as we will offer 6 complete training courses.

We have trained 3 trainers in New Brunswick. We plan to offer 5 online training sessions (45 hours of training) for the last year of funding, which represents up to 100 additional people reached.

Lessons Learned

- Targeting the project more closely in terms of clientele
- It's important to plan training periods carefully, and to gain a better understanding of the various settings where training sessions will be held
- Allocate more time to manage resources and external suppliers
- Further develop the parent component
- A wish: to get the children more involved while the tool is being developed and assessed



Sustainability

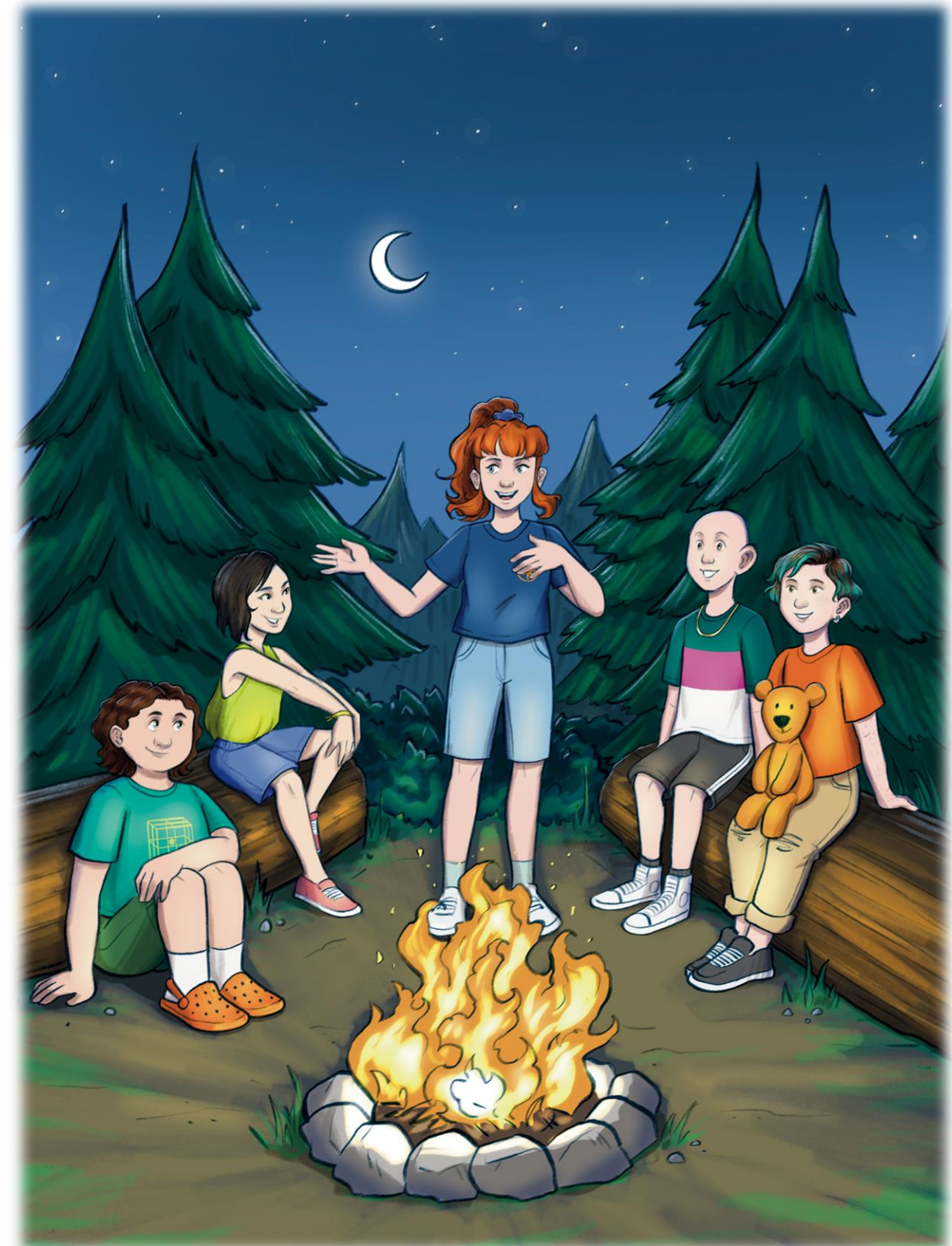
1. Support knowledge transfer

2. Strengthen the training program

3. Program scaling

4. Strengthen collaboration and networking

5. Support impact assessment



Project benefits

- Offer continuing education in conjunction with the Lanterne program for the community sector
- Address a significant need for training in the camp sector with regards to sexual violence, child sexual behaviour and disclosure
- Our partners recognize Marie-Vincent's expertise in sexual violence prevention
- Number of youth potentially reached by the project: **3,500**
- The school sector and health and social services network are interested in adapting and implementing the project in their respective environments.



CONNECTED PARENTS



A Tech-driven Approach for Empowering Parents to Prevent Adolescent Dating Violence (ADV)

Presenter:

Lianne Lee, Project Manager

Shift: The Project to End Domestic Violence

UCalgary, Faculty of Social Work

sh!ft
THE PROJECT TO END
DOMESTIC VIOLENCE



Reach and Participation



163 parents/caregivers and 5 service provider staff participated in the project



3 parent settings: Facebook group, community organization, and text-only



About half of parents had a child 6 to 10 years old



83% of parents stayed until the end of the project. Of these, 100% received all texts



- **Micro-learning, texting, and parent-centered design** can support parents to prevent ADV and promote healthy youth relationships.
- **Micro-learning, tech-based nudges** may support **service providers and community leaders** to advance ADV prevention.
- **Healthy online environments** support active and **passive** learning in parents.
- **Parent-child relationships** are both a foundation and outcome of healthy relationships conversations.
- ADV prevention content must feel relevant and resonate deeply with parents, and **AI and a skills-first approach** can help.
- ADV prevention for parents need **targeted influencer and diffused peer support** approaches.
- ADV prevention efforts need to influence parents' **broader communication environment**.



Sustainability

- Online resource library with micro-learning materials
- 28 text-learning modules on texting platform for future parent cohorts
- Peer-reviewed article and community report
- Automated email learning campaigns for future cohorts of service providers and community leaders
- Active social media presence and webinars
- Ongoing collaboration with community, policymakers, researchers, and parents
- Applied for more funding



Impact of ConnectED Parents



01

Improved parents' knowledge, skills, confidence, and comfort to teach healthy relationship skills, and they're having more conversations

02

Strengthened service providers' ability to build healthy social environments for and with parents

03

Set a new standard for parent engagement in ADV prevention through micro, text-based learning

04

Promising approach for effectively going upstream to prevent ADV



THANK YOU



Lianne Lee

LiLee@ucalgary.ca

sh!ft
THE PROJECT TO END
DOMESTIC VIOLENCE





Connections for Breaking The Cycle of Violence (C-BTC)



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ASSOCIATE PROFESSOR
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BROCK UNIVERSITY



DR. MARY MOTZ
CLINICAL PSYCHOLOGIST
BREAKING THE CYCLE
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Breaking the Cycle

C-BTC | EVALUATING A NATIONAL INITIATIVE TO END THE CYCLE OF VIOLENCE



C-BTC Project

The *Connections* intervention has been implemented across Canada and evaluated for IPV-experienced pregnant people and mothers of children from birth to 6 years.

The C-BTC project includes:

of people we have reached

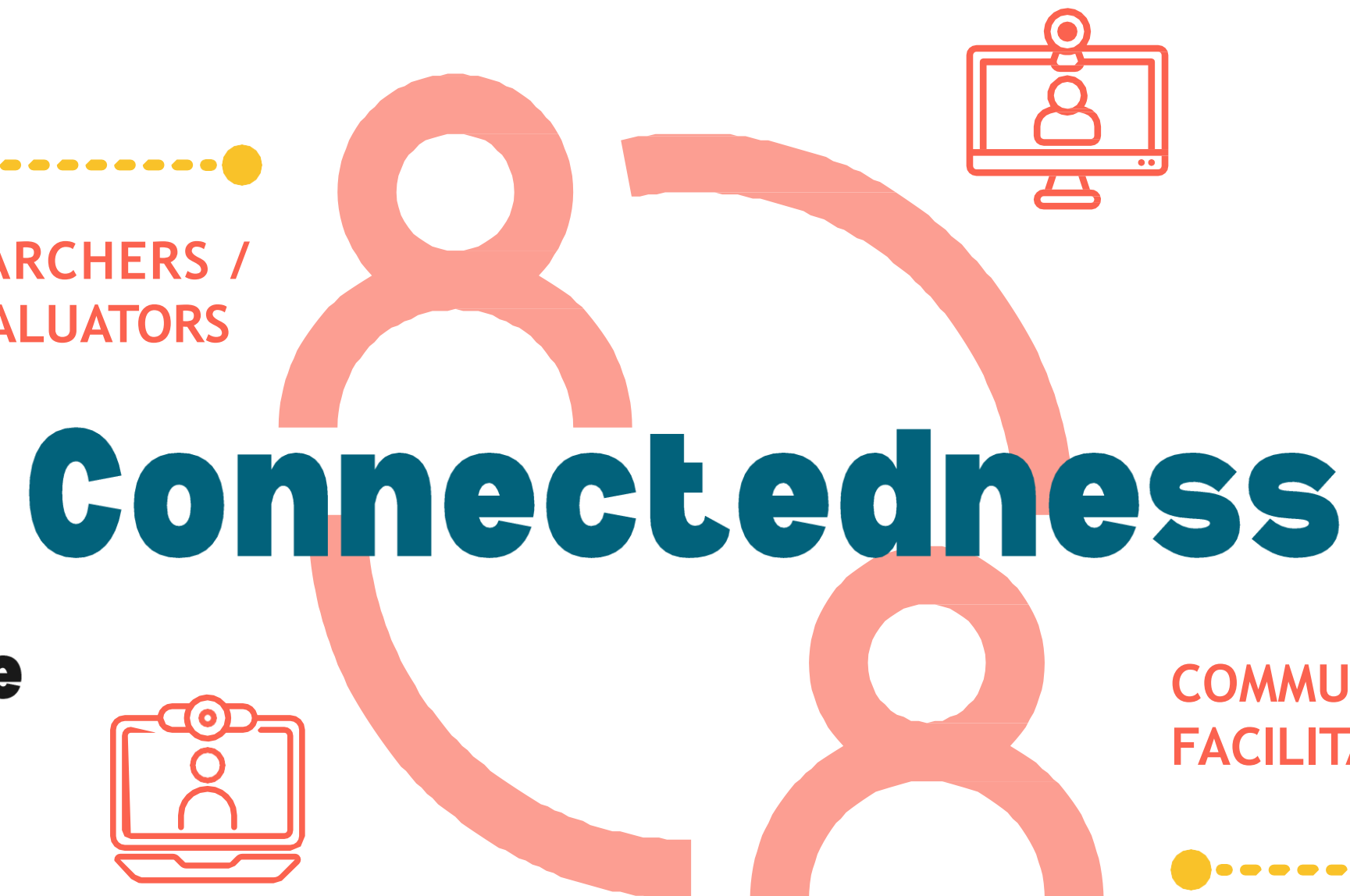
1	C-BTC Community Training on Evidence-Based Practices and Approaches (Community Webinar)	A total of 259 participants , including <i>Connections</i> certified facilitators and clinicians in partnered communities , have attended the webinars to date.
2	C-BTC <i>Connections</i> Certified Training	A total of 46 certified facilitators completed the certification.
3	C-BTC Community of Practice (CoP)	A total of 108 times that the certified facilitators have attended the bi-weekly CoP meeting.
4	Delivery of the <i>Connections</i> Intervention	A total of 159 mothers have attended, and 121 mothers completed the <i>Connections</i> intervention to date.



BreakingtheCycle

C-BTC | EVALUATING A NATIONAL INITIATIVE TO END THE CYCLE OF VIOLENCE





**Proactive & Initiative
Approach**

RESEARCHERS /
EVALUATORS

**Active Community
Outreach**

COMMUNITY PARTNERS /
FACILITATORS



Breaking the Cycle

C-BTC | EVALUATING A NATIONAL INITIATIVE TO END THE CYCLE OF VIOLENCE



Mothercraft®
Shaping Children's Lives Through Learning

**Online
Manuals /
Resources**



**Knowledge
Mobilization
Products**
(e.g., publication,
annual reports)



**Community
Webinars**



**Families in
Healthy
Relationships**



BreakingtheCycle

C-BTC | EVALUATING A NATIONAL INITIATIVE TO END THE CYCLE OF VIOLENCE



Mothercraft®
Shaping Children's Lives Through Learning

The Impact of C-BTC



14 PARTNERED COMMUNITIES

BRITISH COLUMBIA

- Babies New Beginnings / Prince George and District Elizabeth Fry Society
- Babies Best Chance / Campbell River Family Resource
- Bellies to Babies Pregnancy and Family Resource Program

ONTARIO

- Breaking The Cycle / Mothercraft
- Program Without Walls / Macaulay Child Development Centre
- Growing Healthy Together / Strides Toronto
- F-CAP / YMCAGTA - Durham
- The Salvation Army Bethany Hope Centre
- ConnectWell Community Health - Lanark
- Algoma Family Services (3 locations)
- Strive Niagara

NOVA SCOTIA

- Cape Breton Family Place
- Kids First Association (2 locations)

NEW BRUNSWICK

- Under One Sky Friendship Centre



Breaking the Cycle

C-BTC | EVALUATING A NATIONAL INITIATIVE TO END THE CYCLE OF VIOLENCE



Cross Sectoral Solutions



Cross-Sectoral Solutions: Strengthening Community Capacity to Address the 'Parallel Pandemic' of Gender-Based Violence-Related Brain Injury Through a *Survivor-Led* Support Program

WomenatthecentrE
September 30, 2025
Knowledge Exchange



Project Reach

- We supported:
 - **25** GBV-BI survivors through the pilot program across **5** provinces & territories
 - **25** interdisciplinary students across **10** programs at **7** schools in **3** provinces
 - **99+** professionals & service providers
- We developed, delivered, & participated in:
 - **46+** unique multi-level & interdisciplinary partnerships
 - **111+** knowledge mobilization products
 - **38+** knowledge mobilization events
 - **3+** political advocacy campaigns



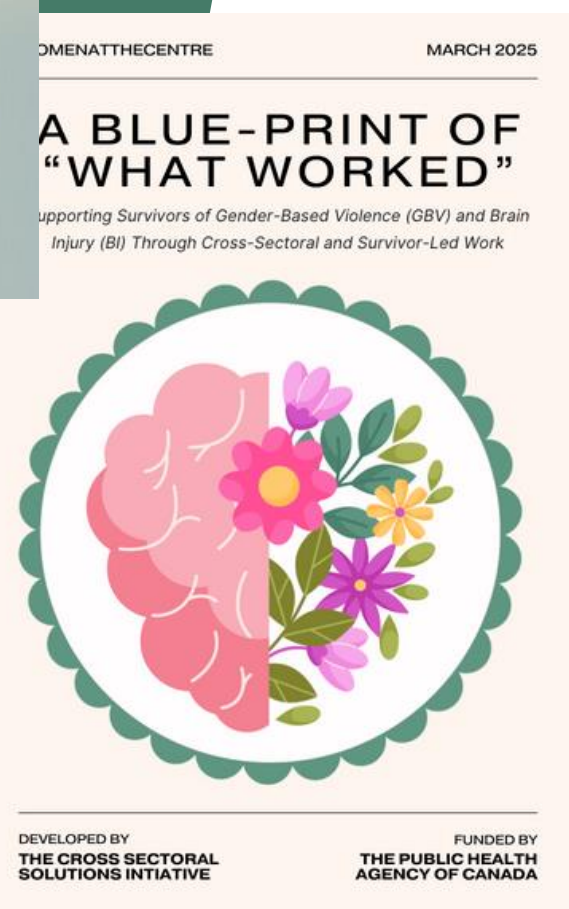


Knowledge Exchange →

Lessons Learned

Through the development, delivery, & evaluation of a survivor-led cross-disciplinary program

- An Adapted, Tailored and Flexible Approach
- Cross-Sectoral Collaboration & Communication
- Peer Support
- Survivor-Centred & Led
- Knowledge, Awareness & Practice Gaps
- Increased Time, Funding & Capacity





Sustainability

"I'm sad when I have to end because when will I be heard again? ... I don't want to be left on my own again." - Survivor Participant

Knowledge

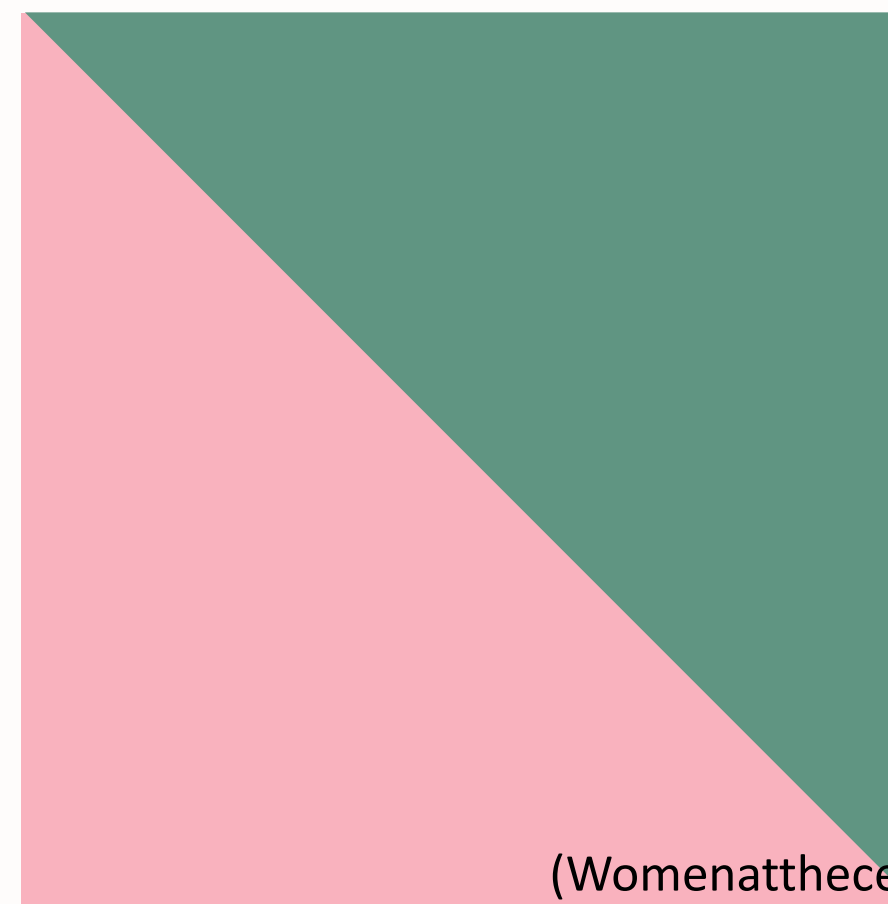
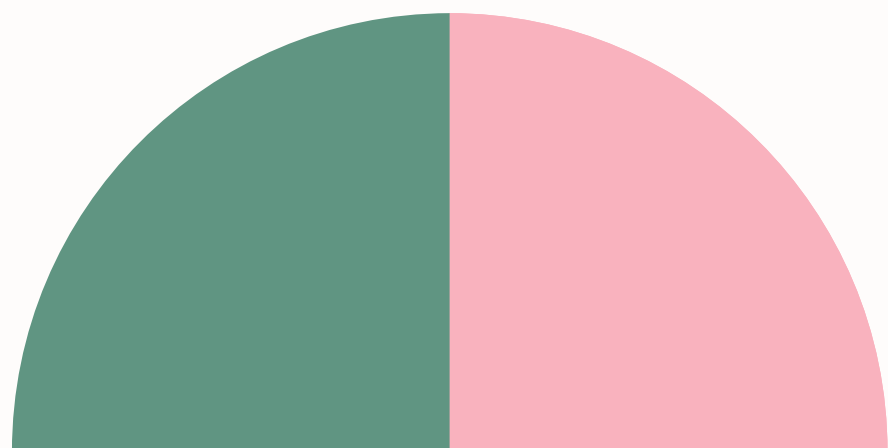
- Knowledge Hub
- Knowledge Products & Events
- Trainings & Workshops
- Partnership Support

Collaboration

- Student/School Partnerships
- Multi-Level Partnerships
- Cross-Sectoral Partnerships

Impact

- Funding Opportunities
- Integrated Capacity





Impact

KNOWLEDGE EXCHANGE →



Increased feelings of empowerment, sense of belonging, knowledge of GBV & BI, coping strategies, sense of community, & survivor mental & physical well-being

“The one thing that stood out for me is the importance of making the space survivor led! The survivors of GVB with TBI have a space to come to where they are not only learning new skills but they are teaching us new skills as well. I have learned so much here that school doesn't and can not teach, which is the lived experiences and that is so important.” - **Placement Student**

“The collaborative approach of the advisory committee was a supportive aspect. Hearing diverse perspectives—especially those from sectors I don't typically work with—helped broaden my understanding of the intersections between brain injury and gender-based violence. “ - **Interdisciplinary Partner**

"I think in terms of what I did enjoy was this [...] sisterhood, the kinship, the being[...] I think there's nothing more powerful in life than finding someone who may have the same problem and then coming to a solution." - **Survivor**

Participant

(WomenatthecentrE, 2025)

Hubs of Expressive Arts for Life

Expressive Arts Healing for Newcomer Survivors
of Gender Based Domestic Violence



Hubs of Expressive Arts for Life

Led by Access Alliance Multicultural Health and Community Service, the HEAL Project is an inter-sectoral, expressive arts, culturally safe multipronged, capacity enriching project identifying and preventing to address and prevent family violence among vulnerable newcomer populations.

Community Participants Newcomer Women Survivors of Domestic Violence	Implementing Partner Organizations and Relevant Staff	Relevant Stakeholders Related to Research, Program & KmB
50+ Program Participants - Self-identified newcomer women survivors of gender based domestic violence. 6 Pilot Groups Include: - Arabic, Bengali, Farsi, and Tigrinya speaking - Women with shelter experience 2SLGBTQ+ Broader Network Participant friends, families and communities	13+ Partner Organizations Healthcare, Settlement, Academia and Domestic Violence focused agencies and service providers 30+ Trained peer researchers, staff, volunteers and placement students to implement the HEAL Program 6 Art Based Facilitators: Expressive Art Therapists, Art Therapists, and/or art based mental health professionals 4 Guest Speaking organizations including shelters, settlement, and domestic violence advocacy groups	8 - 10 Advisory Committee Additional Stakeholders - Local Immigration Partnership Groups - Researchers and academics - Policy makers - Graphics designers and website developers - Knowledge disseminating organizations - Educational institutions - Arts and Culture sites

Who does the project impact?



Learnings

Outreach and recruitment of vulnerable newcomer participants

- Difficulties in attracting and retaining participants, which impacted the consistency and flow of the programs. Continued stigma and discrimination of gender based domestic violence among newcomer communities is prevalent.

Retention of participants with complex and challenging needs

- There is a need for extended, targeted support for long-term trauma recovery, as many participants, despite gaining tools for emotional regulation, continue to struggle with deeper issues like self-blame.
- Language barriers, lack of culturally tailored services, unclear access pathways, and fear of discrimination all limited participants' ability to access support services.

Staff Support and Mentorship Increase

- Staffing turnover and limited resources caused the program to be postponed multiple times, disrupting continuity and reducing participant engagement.
- Increase capacity for facilitator team mentorship especially art based facilitator supervision and ongoing mental health support

More Robust Sustainability Strategy

- Harnessing internal and external partnerships to create a tailored sustainability strategy for participants following the program e.g. housing, employment, culturally suitable mental health providers



Sustainability Strategy

Strengthening Partnerships and Expanding Collaboration among healthcare and mental health, settlement, and the art sector to increase inter-sectoral care to mitigate fragmented care.

Knowledge Mobilization - Resource Hub Platform to host a variety of KmB products including webinars, service provider trainings, published articles, research and program tools, and integration of arts and mental wellbeing

Culturally Relevant Frameworks Broadly Shared Future interventions should adapt the program to diverse communities through culturally relevant, participatory frameworks that can be scaled across different groups

Implementing Interdisciplinary Art Programing Multigenerational and interdisciplinary art programming strengthens familial relations and builds community of networks of care, making it a valuable tool for future interventions



Intended Impact: Health Promotion Model

MACRO: SYSTEMS & POLICY Building Healthy Public Policy

- **Contribute to the Community of Practice** ([Knowledge Hub](#))
- **Increase peer-reviewed research** on expressive arts interventions to contribute evidence based practice
- **Contribute to Canada's gender-based violence strategy** by furthering best practices among newcomer communities
- **Policy scan and review** of domestic violence policies locally and globally to understand newcomer perspectives and limitations within policy

MACRO: ORGANIZATIONAL & COMMUNITY CAPACITY BUILDING Community action & reorient healthcare services

- **Increase equity-informed** planning and evaluation for programs and services
- **Service provider training** to increase knowledge on gender based violence, arts integration for mental wellbeing, and increase capacity to
- **Increased knowledge and implementation** of expressive art intervention as an effective approach to improving newcomer mental health
- **Strengthen interdisciplinary team based care** bridging healthcare, settlement, and arts sectors

MICRO: INDIVIDUAL & INTERPERSONAL Creating supportive environments & developing personal skills

- **Increased Knowledge** of human rights, healthy relationships, empowerment, self-defense, and newcomer mental health concepts
- **Strengthened Community Connections** and knowledge exchange, reducing social isolation
- **Peer-Engaged Co-Design** enabled participants to act as cultural consultants, shaping content and boosting engagement
- **Created Supportive Environments** that enhanced social connections, community engagement, and sense of belonging
- **Improved Relationships** through better boundary-setting, prioritizing needs, and constructive conflict management
- **Enhanced Mental Wellbeing** with reduced helplessness and self-blame, increased self-esteem and optimism, improved stress management, and stronger coping skills



Connect with Us

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Toronto, Ontario M5T 3A9

www.accessalliance.ca

arts@accessalliance.ca



Access Alliance

Multicultural Health and Community Services

An Evidence-Based Health Promotion Initiative (iHEAL) for Women Experiencing IPV: Implementation in Diverse Contexts, Evaluation and Scale Up

Marilyn Ford-Gilboe, RN, PhD, Project Lead

Caitlin Burd, PhD, Research Associate

Arthur Labatt Family School of Nursing, Western University

For the iHEAL Team

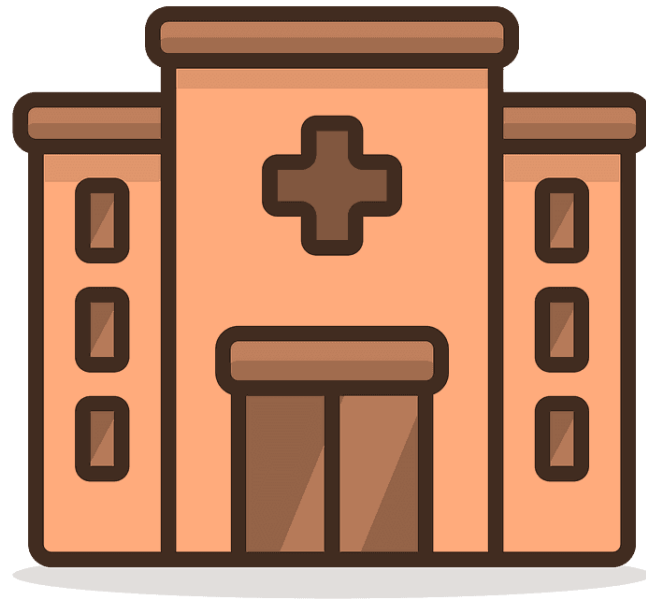


Public Health
Agency of Canada

Agence de la santé
publique du Canada



Project Reach



British Columbia
Indigenous Health Cooperative



Ontario
Public Health Unit



New Brunswick
Community Health Center

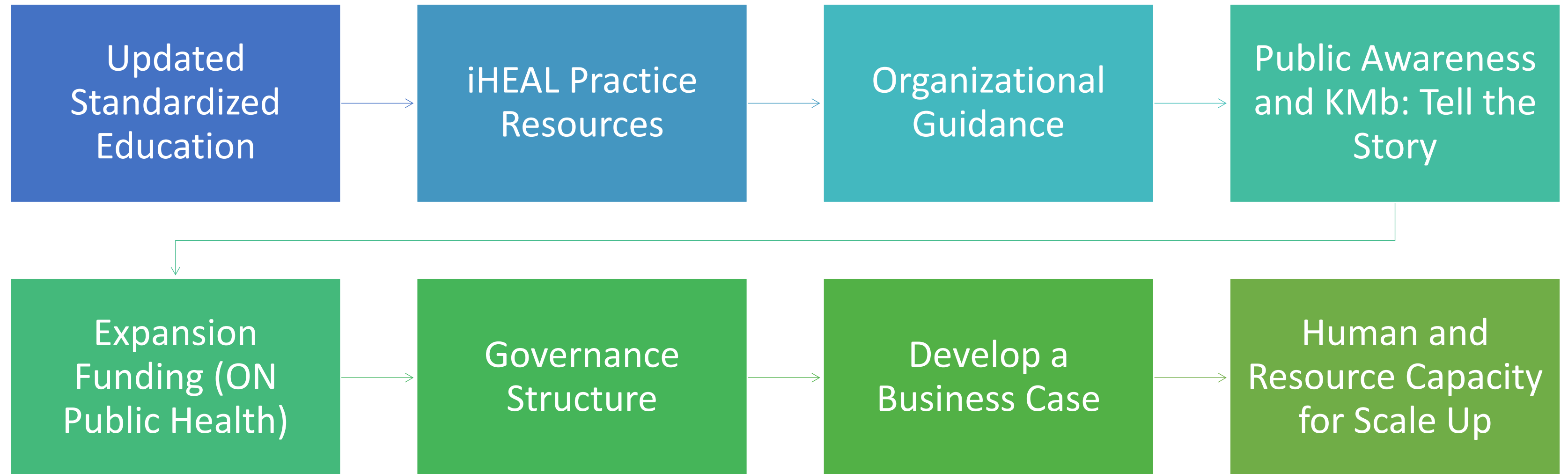
3 diverse Organizations offered the iHEAL program
25 Registered Nurses trained to offer iHEAL (full-and-part-time roles)
7 Supervisors/Managers trained to provide mentoring and support
149+ Women of diverse backgrounds enrolled in iHEAL program

Lessons Learned



- Nurses working in community-based health services can offer iHEAL with *fidelity* when the ‘right’ organizational structures and supports are put in place
 - Sufficient time and flexibility, access to education/professional development, experienced supervisors and mentors, teamwork, support for nurses working to full scope, committed leadership, organizational policies that align with principles of iHEAL (e.g. harm reduction)
- Under these conditions, women report similar benefits to previous studies
 - A focus on the women’s health and well-being is novel and appreciated as addressing a critical gap that fosters wellness, confidence in managing daily life, control, sense of self and power
- Fidelity is a multi-level, ongoing process (more than program delivery)
 - Prioritize organization planning and preparation with clear expectations and guidance before hiring and training staff (***Plan first – train last***)
- Without appropriate support, the well-being of nurses is at-risk
 - Organizational strategies for staff well-being must move beyond a focus on ‘burnout’ or ‘vicarious trauma’ to consider the impacts of structural and systems factors; in supportive contexts, nurses also experience multiple benefits (e.g. role satisfaction, commitment)

Sustainability Strategies



Multiple, Concurrent Pathways

Project Impacts

Broader Impacts

- Understanding key **drivers** of implementing of a complex, health promotion intervention that challenges to 'usual' care with *fidelity* and *impact*
- ***Readiness for expansion and scale***

Community Impacts

- **Fills a service gap** for women experiencing IPV (health, well-being, longer-term recovery)
- Enhanced intersectoral collaboration

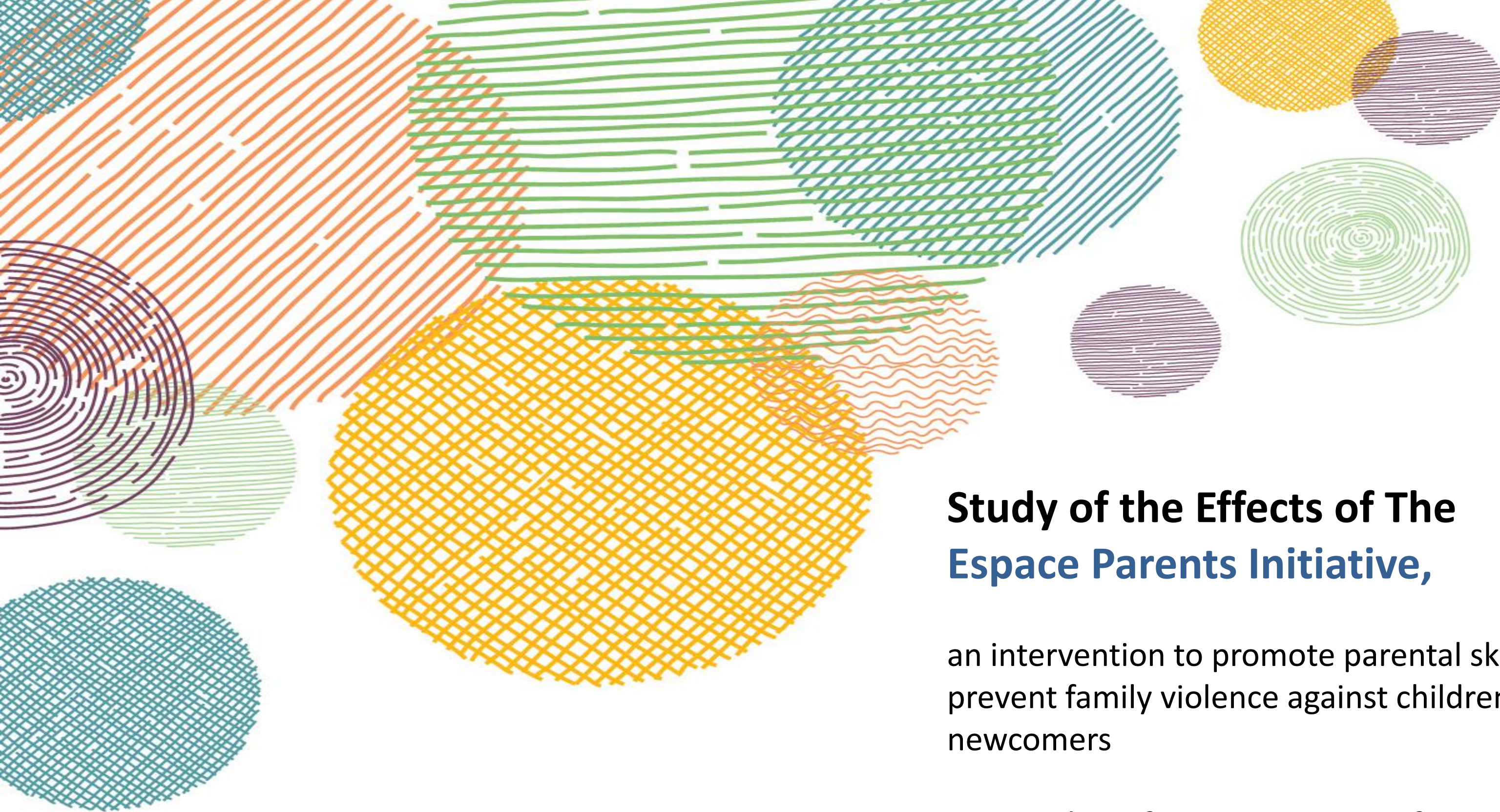
Organizational Impacts

- Improved **awareness/commitment to IPV**
- Organizational **policies and processes** more aligned with TVIC, Harm Reduction
- **Credible** partners in 'newer' space

Individual Impacts



- **Women:** improved quality of life, mental health, physical health, confidence, control, etc.
- **Nurses:** improved knowledge and confidence for delivering iHEAL and working with women experiencing IPV, satisfaction with work

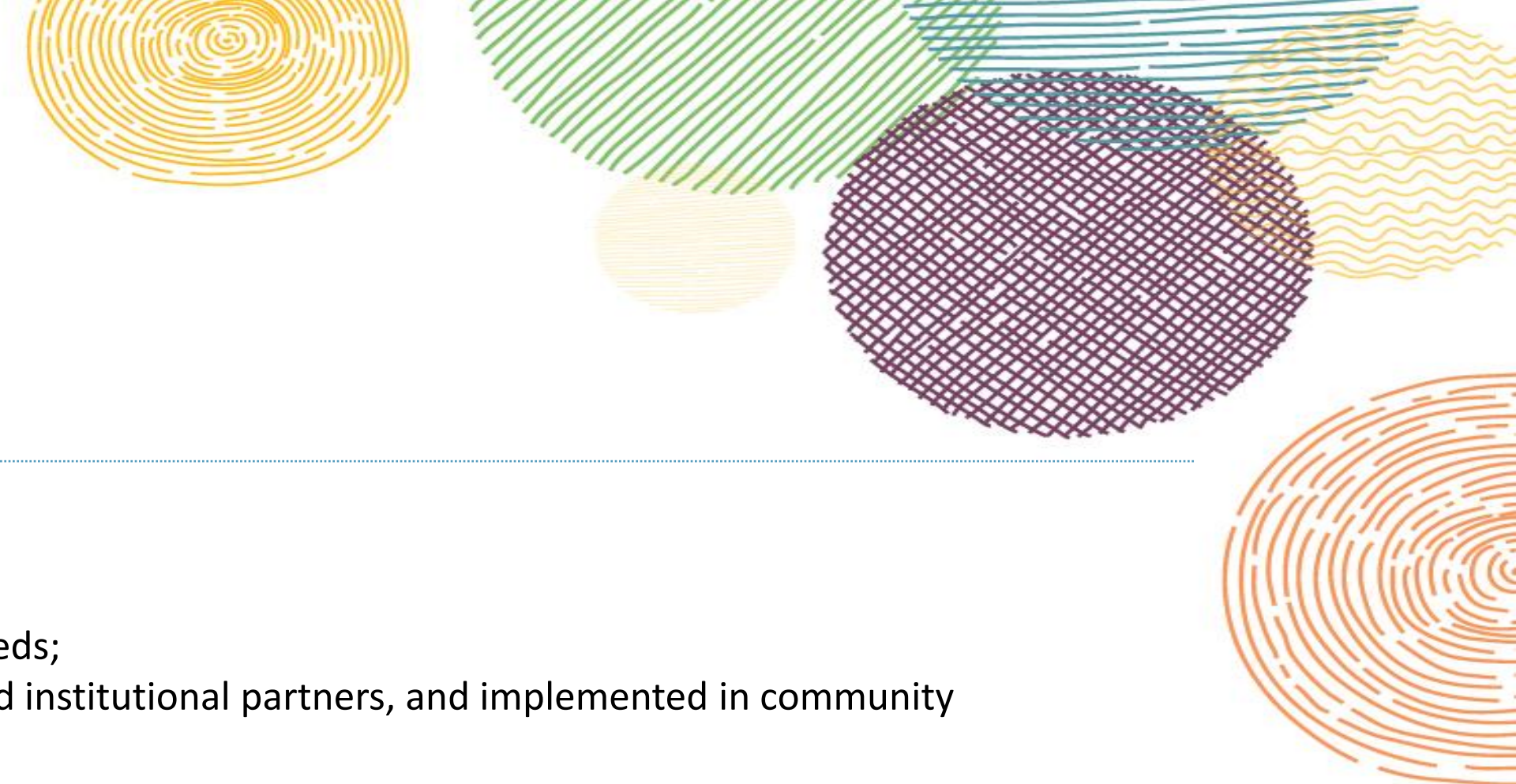


Study of the Effects of The Espace Parents Initiative,

an intervention to promote parental skills and
prevent family violence against children among
newcomers

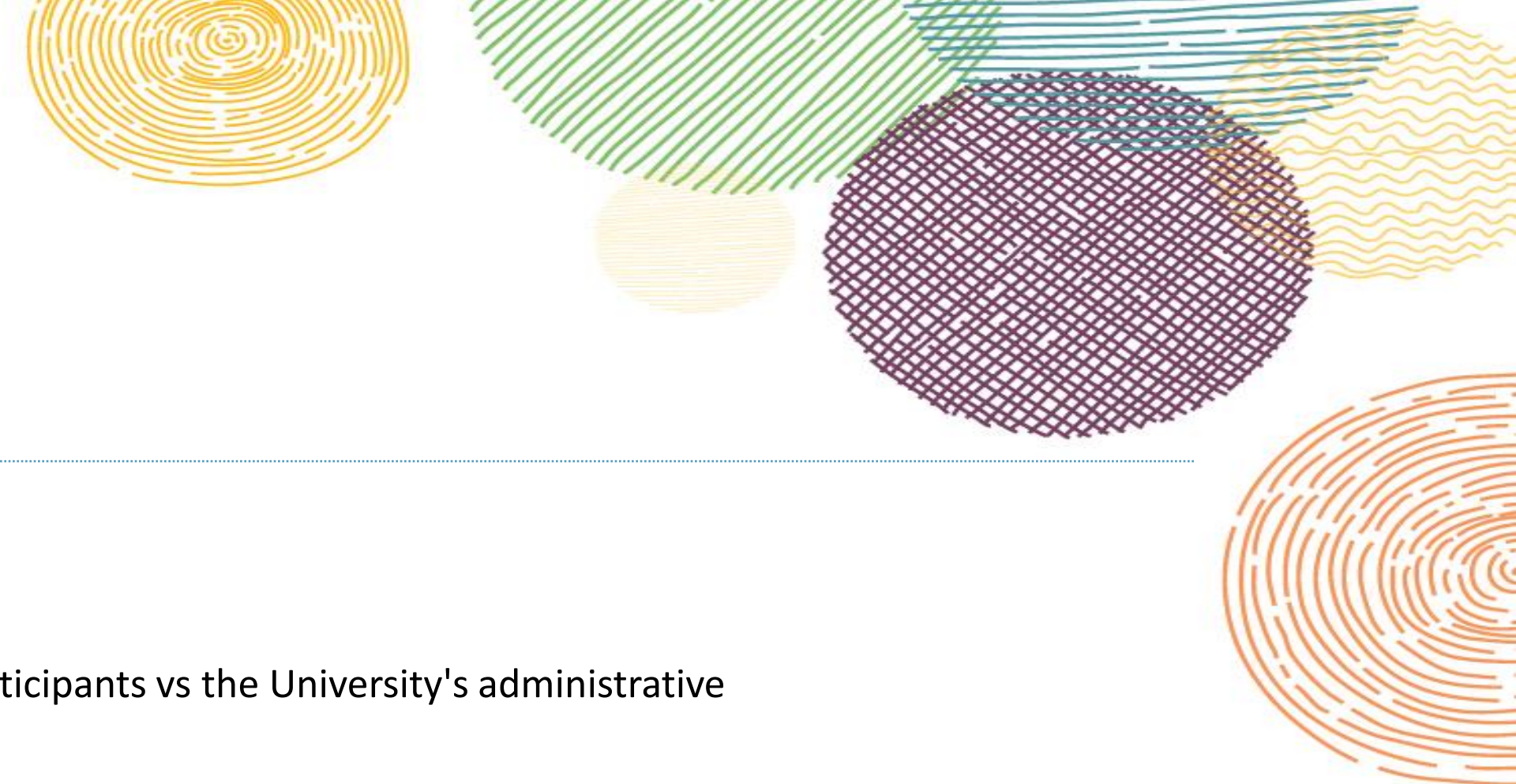
By Sarah Dufour, University of Montreal

Knowledge Exchange - Knowledge Hub
Toronto, September 2025



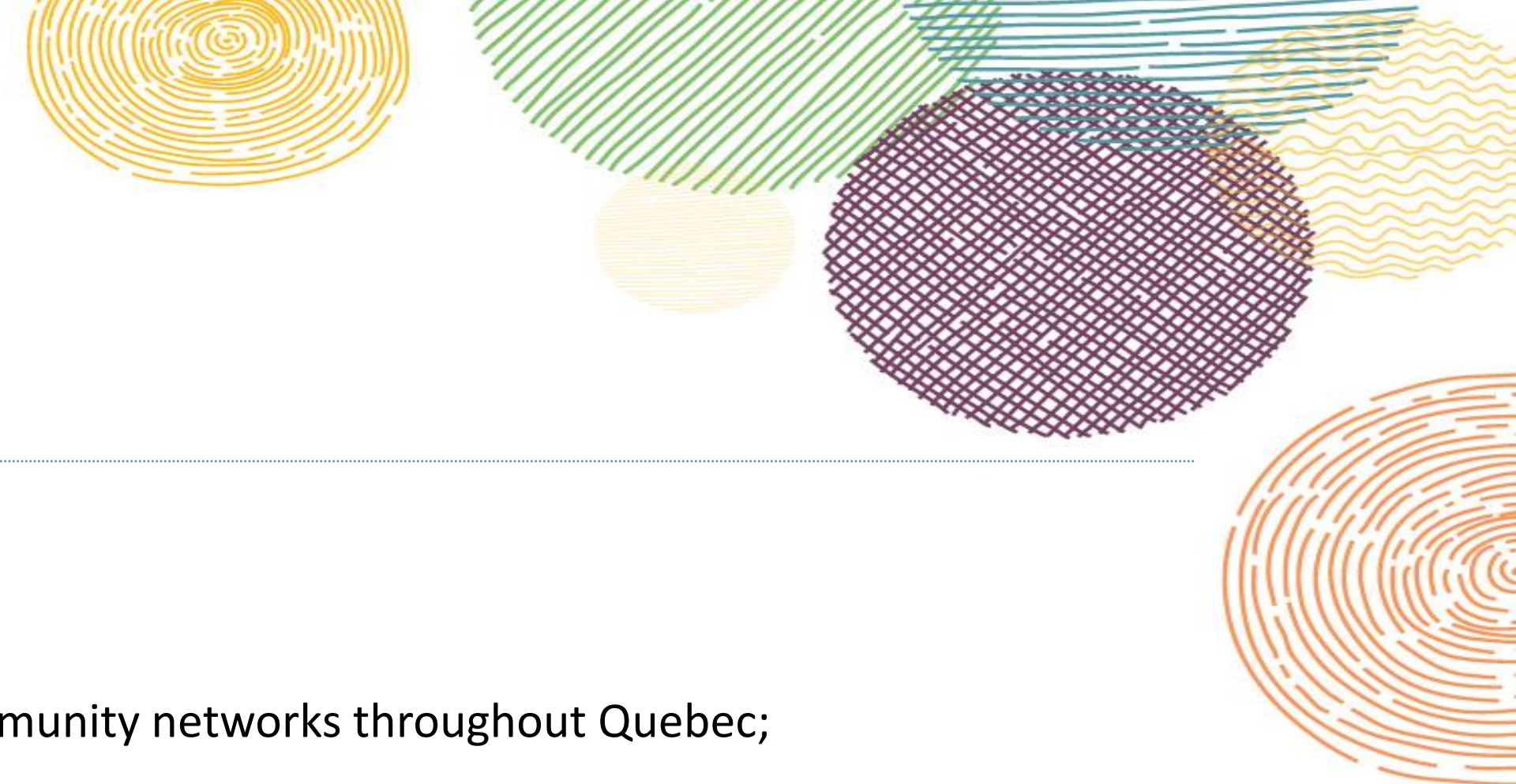
Project Reach

- What is Espace Parents?
 - Support for parental adaptation following immigration;
 - Preventive, intercultural intervention approach adapted to parents' needs;
 - Cross-sector initiative, carried out by several university, community, and institutional partners, and implemented in community settings;
 - Program:
 - Nine workshops, each lasting two hours
 - Themes such as the impact of migration on the family, help resources including the Director of Youth Protection (DPJ), discipline
 - One-Time Activities
 - (a) Paternal involvement and (b) awareness of support resources and help-seeking
- Individuals reached in the current project
 - A total of 374 newcomer parents (including refugees) participated in person
 - 202 for the program
 - 172 for the one-time activities
 - From 13 community organizations
 - Among them, 321 parents participated in the evaluation
 - 145 for the program
 - 176 for the one-time activities
 - In addition, 165 individuals were reached for the control group



Lessons Learned

- To be done differently:
 - Recruitment strategy for the control group;
 - Management of University affairs, e.g.: compensation for research participants vs the University's administrative procedures;
 - A dream: a budget spread over the whole project, not by year!
- To be continued/redone:
 - Key role of the field partner's liaison officer
 - Strategic clarity - getting to know yourself and your ecosystem better, to increase your fundraising and advocacy capacity



Sustainability

What we've learned

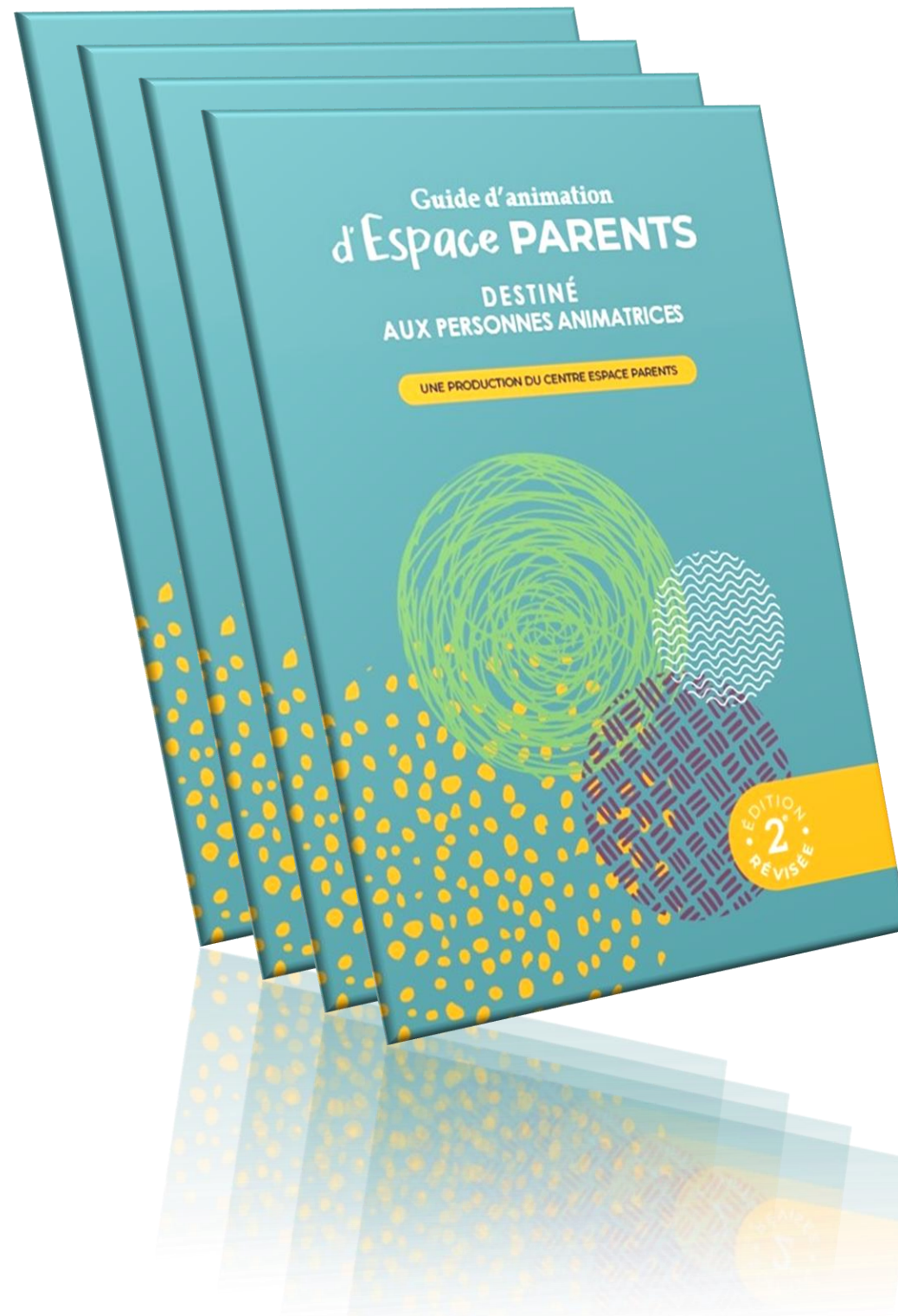
- A credible initiative, recognized and widely adopted in community networks throughout Quebec;
- A strong, cross-sectoral, and stable steering committee;
- The Université de Montréal's VRRDCI will promote Espace Parents.

Awaiting response on the Ministry of the Economy, Innovation and Energy competition

"Innovating Together: The Centre for parenting, immigration, and culture, a cross-sectoral partnership to strengthen preventive support for immigrant parents and their children"

The financial future of the Espace Parents Center is uncertain

Benefits



A proven program

Most robust research design to date:

Longitudinal

Comparison of intervention and control groups

Example of positive effects:

Reduced parental stress due to immigration

Improved relations with the Director of Youth Protection

Increased knowledge of help resources for families

Increased use of formal resources in the event of personal or child difficulties

Version 2 in English and French

A stronger Espace Parents community,

meaning that, in the long term, immigrant parents are better supported while they integrate into Quebec... and their children thrive!

Kaskinomasowin

Transmitting Through Culture



Public Health
Agency of Canada

Agence de la santé
publique du Canada

UQAC
Université du Québec
à Chicoutimi

AQUA
RELLE
CHAIRE DE RECHERCHE DU CANADA
SUR LA VIOLENCE SEXUELLE
CHEZ LES JEUNES VULNÉRABLES
UNIVERSITÉ DU QUÉBEC À TROIS-RIVIÈRES



Project Reach

► Community involvement

Mothers, fathers, elders

Community workers and health

► Training

Practitioners and parents

► Awareness

Broader dissemination in the community

Discussion on the role of parents in material sexuality education around video and visual tools

(e.g. psychosexual development)



Image: Eruoma Awashish, Atikamekw artist from Opitciwan.

Lessons Learned

- Allow more time to build trust and prepare the groundwork before data collection.
- Always have local people present at each stage of the project and respect their pace.
- Speak less and simplify a lot.



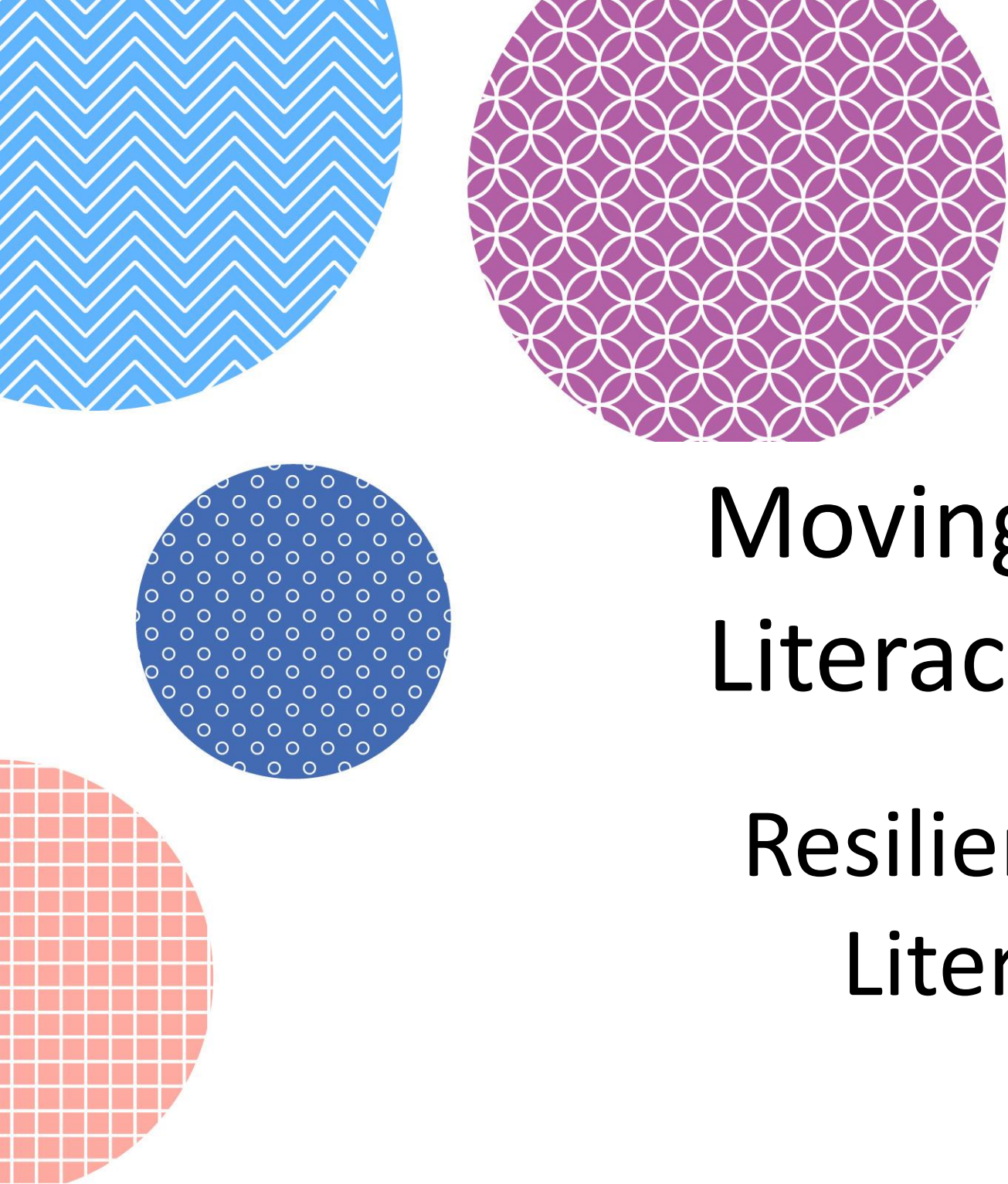


Sustainability

- ▶ Continued training for caregivers and parents on the psychosexual development of children and adolescents
- ▶ Continued sharing circles for people to exchange and promote healing
- ▶ Broadcast of the documentary video on sexuality education for Atikamekw youth

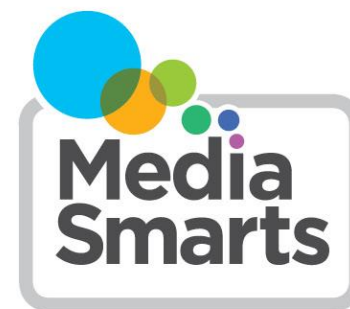
Success: Sharing circles and training with Alice and her colleagues





Moving On: Digital Empowerment and Literacy Skills for Survivors (MODELSS)

Resilience through DigitalSmarts – Digital
Literacy for Survivors of Technology-
Facilitated Violence



Project Reach

- 103 participants reached in 2024-25 (4 youth, 97 adults, 2 older adults) across 11 sites in 5 provinces
- 35 professionals trained, including VAW practitioners and service delivery partners in BC, Alberta, Ontario, Quebec, Nova Scotia.
- Service delivery: Ranging from 6–36 workshops per site
- Program resources available in English, French, and 10 additional languages (Farsi, Hindi, Mandarin, Punjabi, Somali, Tagalog, Turkish, Ukranian, Urdu)



Lessons Learned

- Flexibility is crucial for survivors' needs – modular workshop design, evaluation planning, and flexible program delivery
- Trauma- and violence-informed evaluation must be iterative and survivor-centred, improving response rates and relevance
- Cultural safety and humility are essential – resources developed with Indigenous facilitation experts
- Translation and cultural adaptation improve accessibility
- Digital literacy directly impacts safety (examples: disabling location services, detecting spyware)



Sustainability

- Developing a knowledge mobilization and program delivery plan post PHAC funding
 - Balance accessibility with trauma-and-violence-informed program delivery
- Expansion of delivery in process with new partners: Canadian Nurses Association and campus sexual assault centres
- MediaSmarts continues to provide ongoing training to interested partners (Feb 2026 virtual session) and is seeking funding to support additional MediaSmarts staff to deliver the program

Impact/Successes



- Survivors took immediate safety actions (e.g., removing spyware, disabling location services)
- Improved skills in spotting scams and using online services
- Workshops fostered collaborative peer learning and community safety culture

“ Well, I loved the workshop... such (an) activity brings the women together once in a while.” “I hope that with this new knowledge, it will benefit myself and my family first, but I will (also) share with my friends. And I hope that other women will have the opportunity like me(...) to learn these important things from the workshop.”

FAMILY VIOLENCE: ONLINE PROGRAMMING IN RURAL AND REMOTE AREAS OF ATLANTIC CANADA

DR. CATRINA BROWN 2025 ©
September 30, 2025
School of Social Work
Dalhousie University

PROJECT REACH

- ▶ **Study Objectives:** Assess needs, improve access, and evaluate impact of online family violence programming in rural Atlantic communities.
- ▶ Implemented across **6 organizations** in Atlantic Canada (Nova Scotia, New Brunswick, Newfoundland and Labrador, and PEI*).
- ▶ **15 group sessions** delivered virtually, each with trained facilitators and **up to 10 participants**.
- ▶ Involved **community-based service providers** and **service users** in needs assessments, interviews, and surveys.

LESSONS LEARNED

- ▶ **Online delivery** helped reduce multiple obstacles and barriers to accessing services including availability, travel, childcare, work conflict, cost, and stigma/privacy challenges.
- ▶ Value in the **anonymity/safety** afforded by online programming.
- ▶ Virtual group sessions **built trust, increased sense of support, safety and reduced isolation**, while allowing men to **express feeling vulnerable** with each other.
- ▶ **Internet connectivity, device access, and privacy** can be potential limitations in rural areas (data cards/tablets were made available to those who needed them).
- ▶ *The Safety & Repair approach* provided structure, but facilitators identified **need for more detailed training**.

SUSTAINABILITY

- ▶ Built **local facilitator capacity** through training in the *Safety & Repair approach*.
- ▶ Created potential for **digital library of resources** adaptable across communities.
- ▶ **Strong community partnerships** highlight opportunities for integration with existing services.
- ▶ Identified **need for stable funding and cross-agency collaboration** to maintain programming.

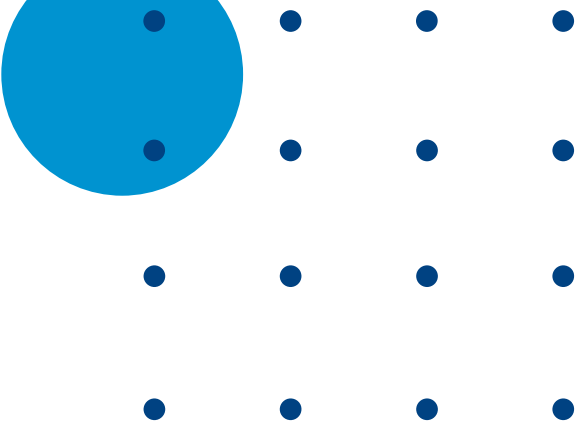
IMPACT/SUCCESSSES

- ▶ 85% of providers and 71% of service users believed **online programming improves rural access.**
- ▶ **Virtual program delivery addresses:** geographic barriers/isolation, long travel times, lack of transportation, cost, child-care, work conflict, limited community-based service available, wait lists for urban center supports, reduced privacy, and stigma and shame in small communities.
- ▶ **Increased comfort** discussing sensitive issues around being harmed and causing harm, focus on **safety and repairing harm.**
- ▶ Participants reported valuing **shared experiences and less social isolation.**
- ▶ **Facilitators gained confidence** with online tools and approaches.



Stories of Strength





Land Acknowledgement

DIVERSEcity recognizes that our work takes place on the ancestral, traditional and unceded territories of the SEMYOME (Semiahmoo), q̓íçəy̓ (Katzie), kʷikʷəłəm (Kwikkwetlem), q̓ʷɑ:ńłəń (Kwantlen), qiqéyt (Qayqayt), xʷməθkʷəy̓əm (Musqueam) and the s̓cəwaθən məsteyəxʷ (Tsawwassen) First Nations. The knowledge, traditions and ongoing contributions of these communities are significant in providing context to the work we do, and DIVERSEcity recognizes the importance that reconciliation has in building truly inclusive and strong communities.

Project Reach

Three communities – Middle East, African
and South Asian: Adults, Seniors and Youth





Lessons Learned

- Culturally Agile approach to Empowerment planning
- Usage of culturally suitable terminology to invite collaboration for discussions
- Youth was very resourceful and an engaging group in self reflection



Sustainability

Roots of Safety framework used in Stories of Strength is applicable in all empowerment planning situations

Individuals, families and communities can use the tool of 3 columns for future empowerment planning

Community toolkits will be distributed towards the end of the project to the 3 cultural communities engaged

Roots of Safety training will continue providing professional training to the interested organizations

Impact/ Successes

- Project was received very positively by the communities and participants
- Champions reported skills enhancement in their communities and personal lives due to the Roots of Safety training
- Professionals reported that the tool has assisted them to empower their clients especially new immigrants, refugees and seniors



QUESTIONS?

THANK YOU

VISIT US AT [DCRS.CA](https://dcrs.ca) | FOLLOW US [@DIVERSECITYBC](https://twitter.com/DIVERSECITYBC)    [in](https://www.linkedin.com/company/diverse-city-community-resources-society)

Strong Women:

A Program Supporting Recovery from Substance Use and Intimate Partner Violence

Dr. Nancy Poole

Knowledge Hub Conference - September 30, 2025

“... women really shared and I really enjoyed how they were supportive of one another and could help each other through their own experiences and recommend different social supports and things like that it.

— Strong Women Facilitator



centre of excellence
for women's health

Phase	Partners	Location	# Participants	# SPs
Pilot	Karis Support Society	Kelowna, BC	5	8
	Atira Women's Resource Society	Lower Mainland, BC	6	8
Implementation	YW Calgary	Calgary, AB	7	10
	Aventa Centre of Excellence for Women with Addictions	AB	11	10
	Jean Tweed Centre	Toronto, ON	10	10
	Sophia Recovery Centre & Hestia House	Saint John, NB	8	10

Lessons Learned

- Offering the Strong Women social support group weekly rather than bi-weekly
- Offering two facilitator training sessions instead of one (the additional training session provided an opportunity for facilitators to ask additional questions that emerged during the first Strong Women social support group session)
- Removing the Timeline Followback (TLFB) from the pre- and post-test measures for women
- Updated the service provider measures to reflect a quality improvement/assurance format rather than a KAP (this format allowed the research team to collect similar information, while accounting for low follow-up response rates and high turnover at each of the agencies)
- Making slight content and design updates to the Strong Women workbook to better reflect the target population (feedback gathered during the pilot facilitator focus group)
- Updated the six-month follow up to a three-month follow up to reduce loss-to-follow up

Sustainability

- Partner organizations will implement the SW intervention as capacity allows
- Expanding the reach through organizations beyond our initial partners
- SW intervention materials and findings will be disseminated through:
 - Webinars
 - Conference presentations
 - CEWH website – cewh.ca
 - 2 Journal articles

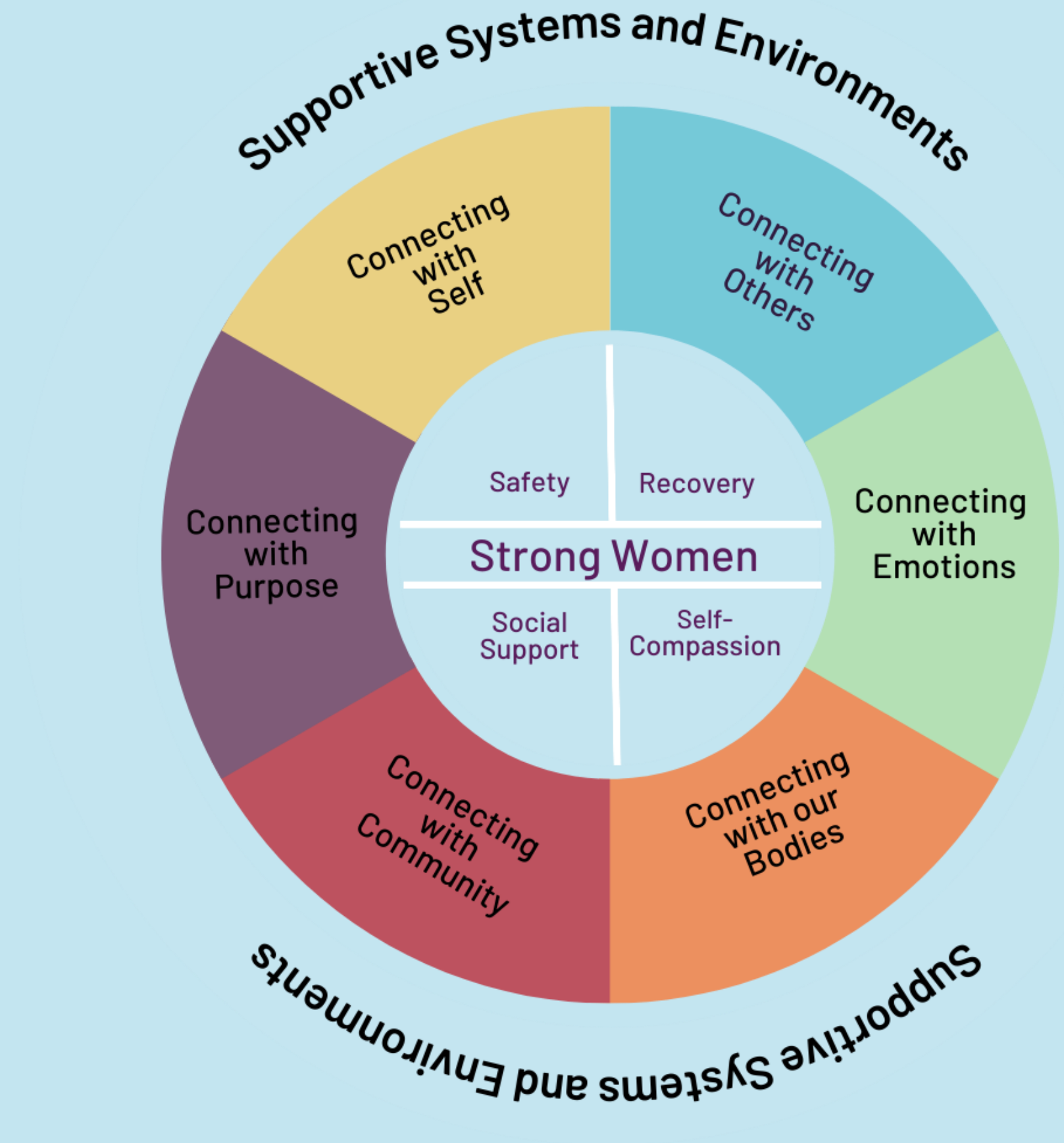
Strong Women Social Support Group Facilitator's Guide



Social Support Group Workbook

Impact

- Raised critical awareness about the interconnections between violence and substance use
- Highlighted the importance of building capacity and integrating complementary approaches such as mindful self-compassion and Motivational Interviewing, to address the interconnections between IPV and SU
- Developed an intervention -a social support group and a workbook- that has been positively received by both participants and service providers.



Leveraging **trauma- and violence-informed physical activity** to support individuals who have experienced family violence:

A community-based participatory approach



Knowledge Exchange

September 30th, 2025

Francine Darroch, PhD, MEd, MPH & Candace Roberts, MSc, PhD(c)

Project Reach



Module 3

- ✓ Understand the impacts of **trauma** on the brain, body, and behaviour.
- ✓ Recognize how PA can support **mental health** and recovery.
- ✓ Define **vicarious trauma**, identify its sources and effects, and develop strategies for seeking support.

Raising the Bar



TVIPA Programming

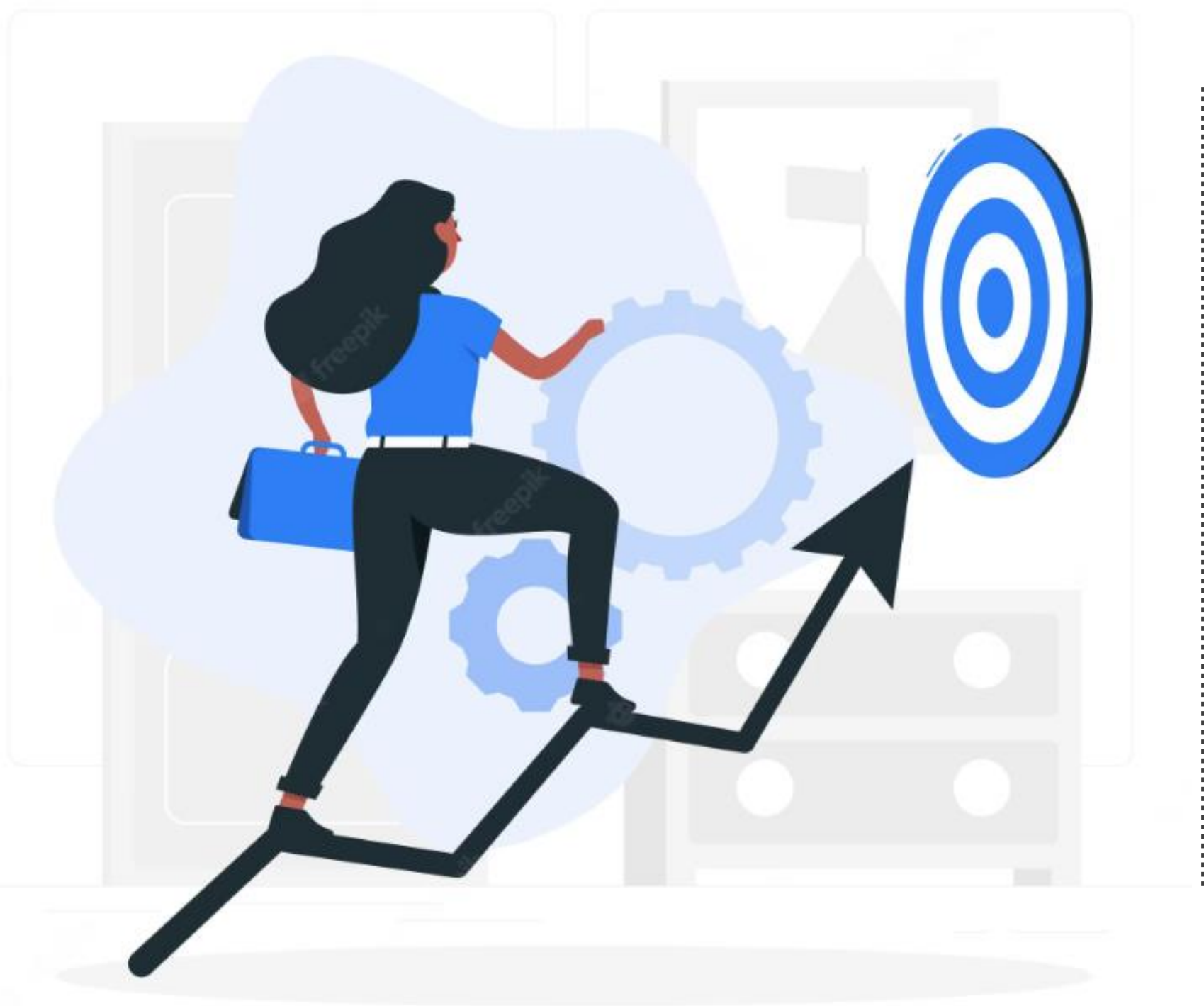
- ✓ **Intervention** participants $n = 300$
- ✓ **Research** participants $n = 156$

Training Modules

- ✓ **Accessed** modules $n = 869$ (ongoing)
- ✓ **Completed** evaluation component (closed Dec. 2024)
 - ✓ Pre: $n = 224$
 - ✓ Post $n = 163$

Knowledge Mobilization

- ✓ Landscape of Practice $n = 745$
- ✓ Community/Academic presentations $n = 414$
- ✓ Publications= 6 in review/revise & re-submit



Slow down

Allow longer preparation period before rolling out interventions

Ensure all partners are on the same page

Develop and agree on shared definitions of community-based research

Pivot and adapt as needed

Adapting to organizational/research team capacity

Lessons Learned

Sustainability



Accessible Online Trainings

Free, online training and tools are available



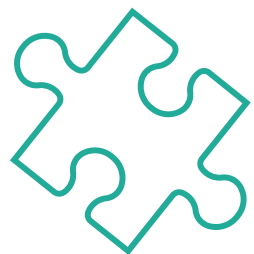
Explored varied modes of funding

Sustained programming for an additional year across sites through grant co-development



Developed/Strengthened Partnerships

Established new partnerships between organizations and instructors



Fidelity / Sustainability Review

Ongoing

Project Impact





Instagram @HEResearchGroup

YouTube [@HEResearchGroup](#)

Website traumainformedmovement.ca/

Email Francine.Darroch@Carleton.ca



OCH FOUNDATION
FONDATION LCO



St. Mary's Home
Maison Sainte-Marie

CARLETON UNIVERSITY
Health & Wellness
EQUITY RESEARCH GROUP

YWCA
CRABTREE CORNER

Supporting the health of survivors of family violence:

Kids Club and Moms Empowerment - Pilot a health promotion program for children exposed to family violence in New Brunswick



Centre de ressources et de crises familiales Beauséjour inc
Beausejour Family Crisis Resource Centre Inc



Public Health
Agency of Canada

Agence de la santé
publique du Canada

WHAT IS KIDS' CLUB AND MOMS' EMPOWERMENT PROGRAM?

- An evidence-based intervention program for children aged 6 to 12 years who are, or have been, exposed to family violence (10-week program, 1 hour/wk) (Transition House residents and community members)
- KC is designed to help children emotionally regulate and to challenge their belief in the acceptability of violence.
- ME program helps to build mother's empowerment and improve parenting skills to support their child.
- Developed by Dr. Sandra Graham-Bermann, Professor of Psychology at the University of Michigan. Dr. Graham-Bermann's area of research explores the impact of family violence on children, using ecological theory, trauma theory, and relationship theory.

Primary Audience:

Rural francophone minority community of Shediac and Cap-Acadie.

Urban anglophone in the Fredericton & Moncton regions

Participants:

Moms: 24* Avg age of moms: 36.91 (37)

Children: 37* Avg age of children: 8.29 (8)

* *can include repeat participants*

LESSONS LEARNED



Participant Recruitment Strategy – Partner with local community organizations, schools, and family support services to ensure diverse participation.



Staff Training and Support – Staff confidence increased with hands-on training and ongoing support.



Clear Objectives are Key – Define goals clearly for both staff and participants.



Flexibility is Crucial – Stay adaptable to unexpected challenges and participant needs.



Stakeholder Engagement Matters – Early and ongoing stakeholder input builds trust and improves the program.



Data Collection Needs Streamlining – Tracking is hard without appropriate integrated tools and clear outcome metrics.



Sustainability Needs Planning – Post-pilot success depends on formalized supports and processes.

PROGRAM SUSTAINABILITY



Working with New Brunswick's Women's Equality Dept (New Funders)

Consult to explore potential training opportunities and develop Accompanying Guides



Develop Fidelity Measures

Ensure intervention quality and consistency :

- *Staff training*
- *Quality improvement processes*
- *Data collection systems*



Update Pre-Implementation Materials

Create or redesign materials to prepare communities for Program Readiness



Design Enhanced Training & Implementation Plan

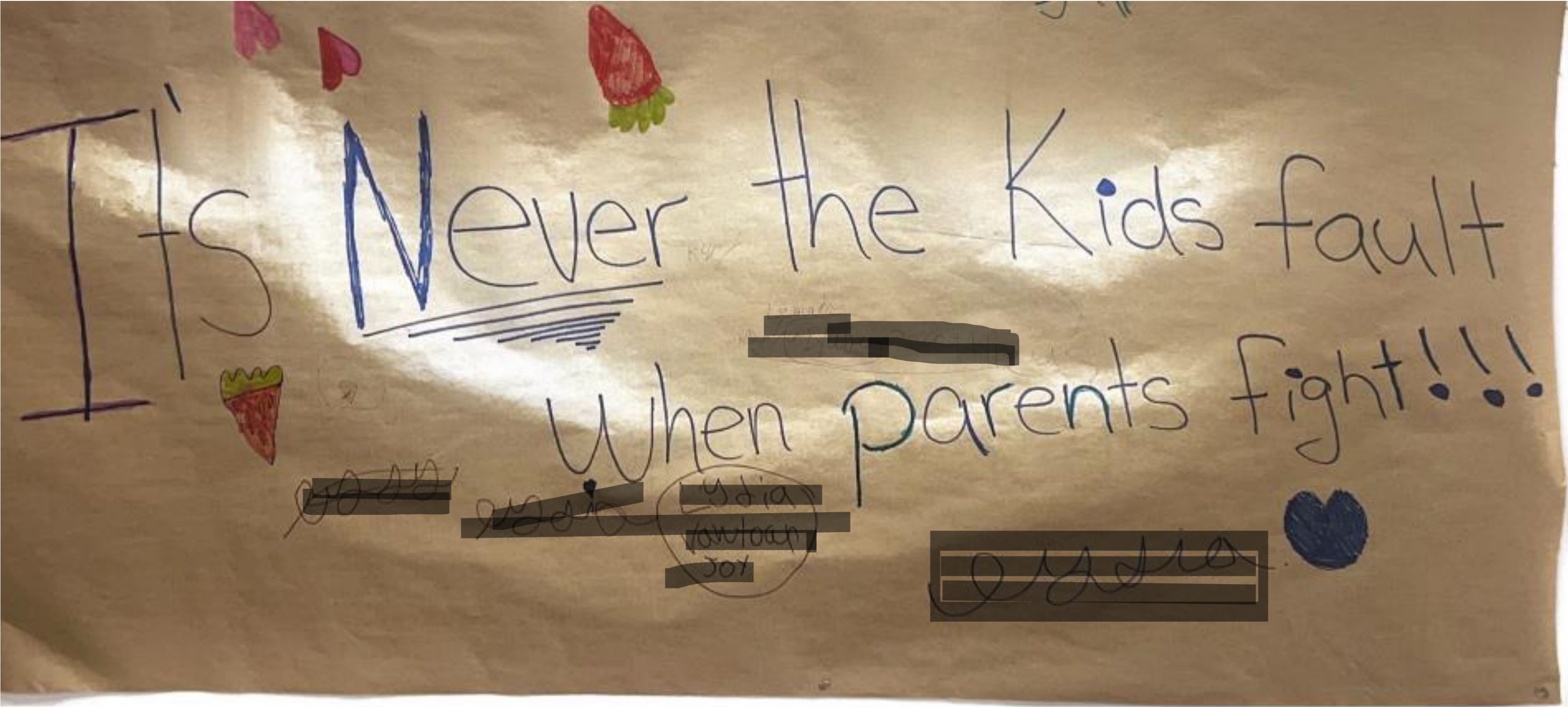
Develop a new province-wide implementation strategy



Build Program Adaptability

Adapt program design to fit the unique budgets and resources of each community.

Project Impact - Children no longer blamed themselves for the violence





Knowledge Hub:

Facilitating a Community of Practice on Preventing and
Addressing Family Violence

September 30, 2025

Anna-Lee Straatman



REACH



24

projects engaged in a
community of practice

53,667

website visits in past year

> 36,000

mailing list members

7,226

participants in live
webinars in past year

1,695

participants for live KH
Presents events in past year

> 32,000

views of webinar
recordings

THE KNOWLEDGE HUB:

A Story

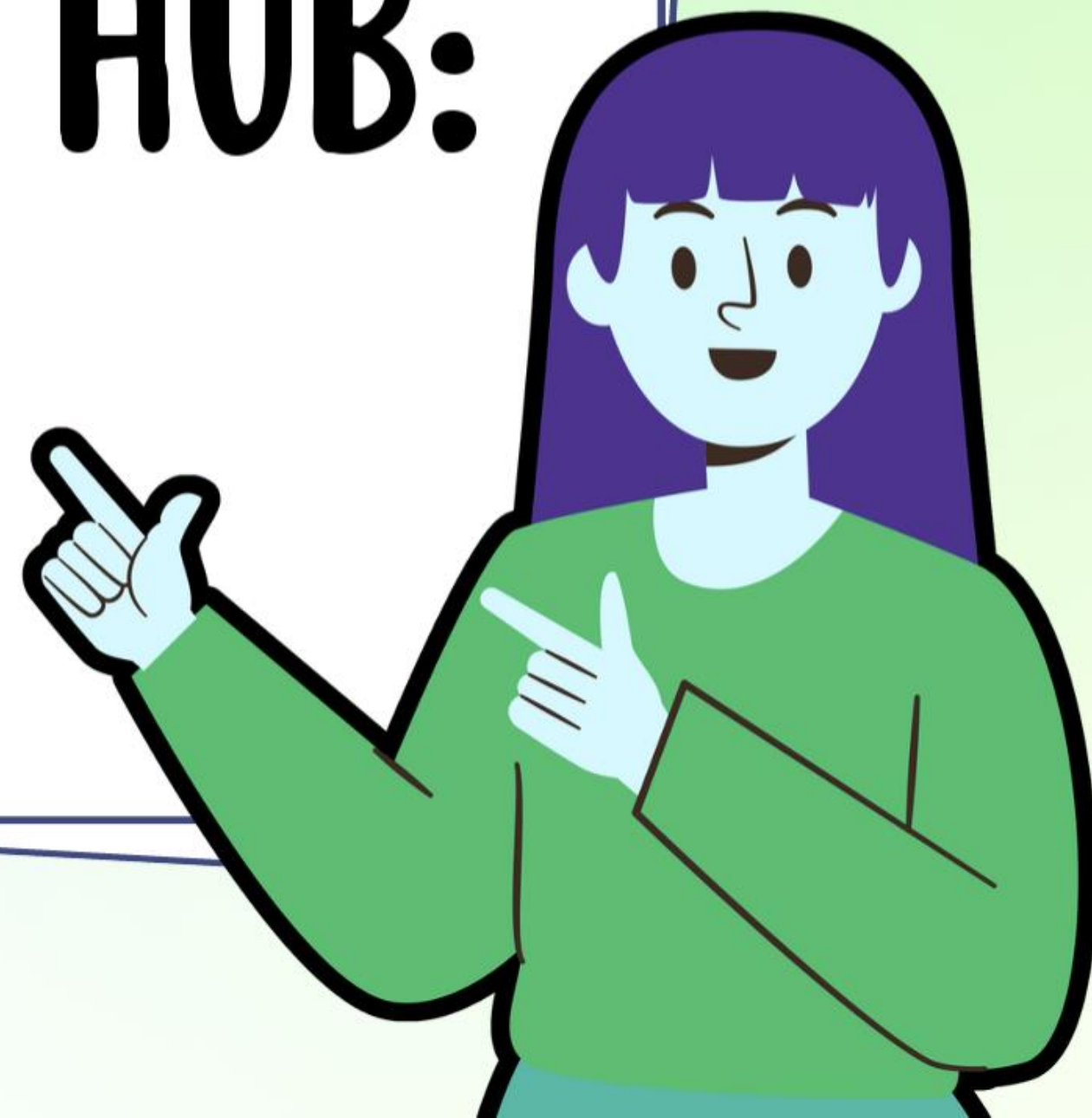


Financial contribution from



Public Health
Agency of Canada

Agence de la santé
publique du Canada



SUSTAINABILITY



Conference will
share information
with a wider
audience



Website provides a
clearinghouse of
information and
resources related to
trauma-and violence-
informed practice and
research



Co-created
resources with
CoP members



IMPACT

“

It really transformed the way that we work as a whole. Because the more we went forward in the project, the more we learned from the community. And we noticed that one of the aspects was to be culturally sensitive and to double up the efforts when it comes to understanding the ways, the cultural ways in which trauma is expressed. Previously, we weren't aware enough to be able to see how every community expresses their needs.

”

“

I have a great experience with the CoP. Through the different activities, I have gained more theoretical knowledge that is useful and practical in supporting survivors of IPV in my area of work.

”



LUNCH

KC

KNOWLEDGE HUB
CENTRE DE
CONNAISSANCES

FOCUS GROUP ACTIVITY: Community of Practice Value & Collective Impact



PART ONE: PROJECT IMPACT

What **IMPACT** has your project had and how?



PART TWO: CoP VALUE

What has been the **VALUE** of the CoP for you or your project?

What was the change or outcome?

- new/improved action, way of thinking, or outcome of your work
- positive or negative
- big or small
- anticipated or unanticipated
- fully realized or in progress

What did you gain from the CoP that led to the change?

- new/improved insight, skill, relationship, confidence

What worked to support the change?

- CoP or external conditions, activities

What didn't work or got in the way of the change?

- CoP conditions, activities



Describe the full story in detail: What happened and who was involved?

During the second in-person Knowledge Exchange event in June 2023, I learned from one of the guest speakers that an important component of trauma- and violence-informed work is seeking input from community partners and people with lived experience. I would have liked an opportunity to get one-on-one advice on how my team might seek this input, but I was still able to take this new insight back to my team for future planning. We decided to invite a few clients with relevant lived experience to a meeting to provide feedback on our program activities and research methods. These clients helped us adapt one of our program activities so that it was more trauma-informed (less triggering while still promoting learning).

What was the change or outcome?

Trauma-informed program activities that were less triggering.

What did you gain from the CoP that led to the change?

Knowledge about trauma- and violence-informed work (importance of seeking input from community partners and people with lived experience).

What worked to support the change?

Expert guest speaker who provided useful information.

What didn't work or got in the way of the change?

No opportunity for one-on-one advice relevant to my own project at in-person Knowledge Exchange event.



Describe the full story in detail: What happened and who was involved?

During the second in-person Knowledge Exchange event in June 2023, we were given time in discussion groups to talk about ongoing challenges. My group was talking about recruitment, and I explained that my project was having difficulty recruiting men who have used violence to participate in the research component. Several other CoP members helped me troubleshoot and provided specific suggestions, such as using strengths-based rather than deficit-based language on recruitment materials. Some parts of the discussion were not relevant to me, but I felt comfortable raising my team's recruitment challenges and asking for help because I had already connected and developed a trusting relationship with most of the CoP members in my discussion group.

What was the change or outcome?

Change in recruitment strategies and improved recruitment.

What did you gain from the CoP that led to the change?

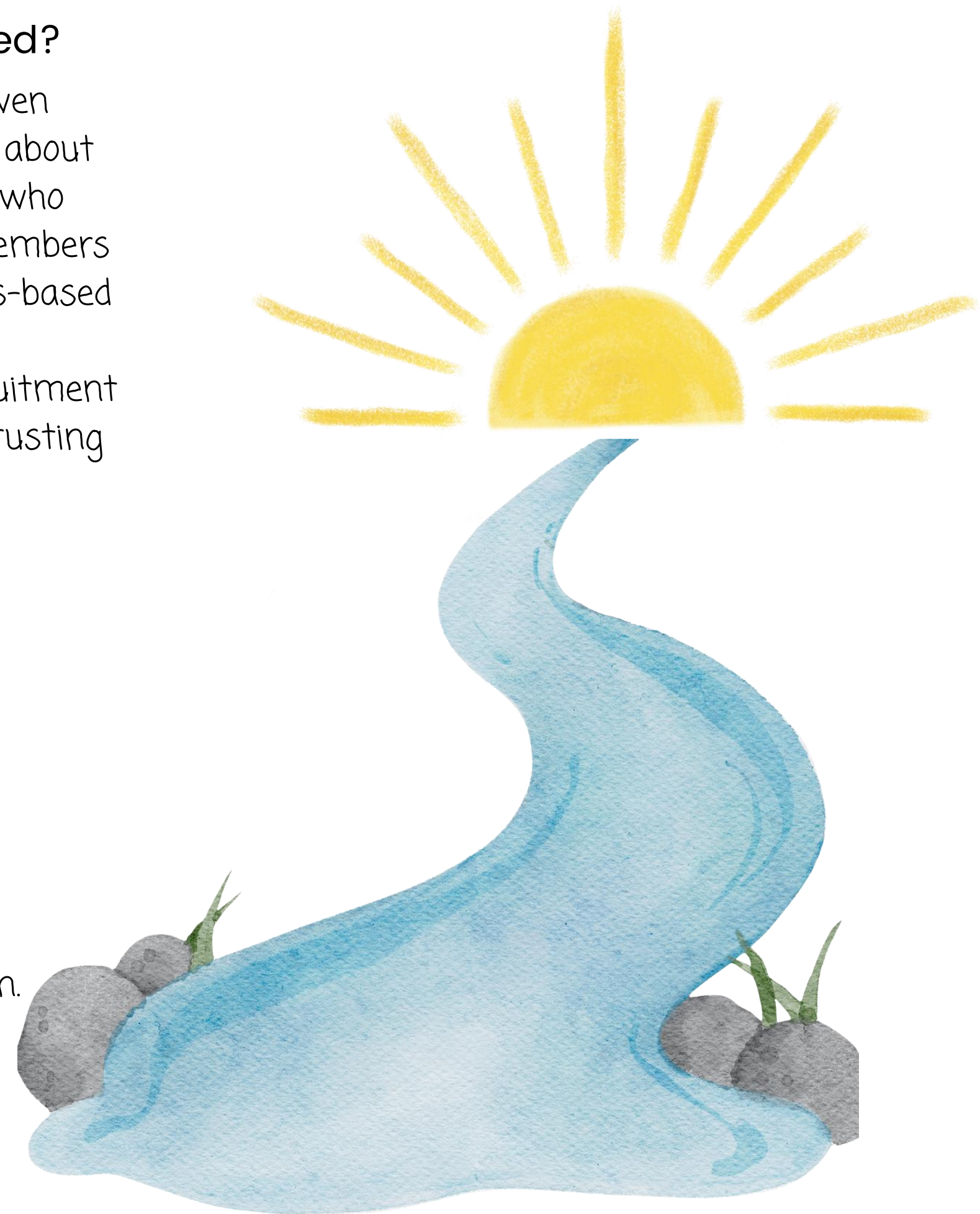
Suggestions from other CoP members on strategies for recruiting reluctant participant population.

What worked to support the change?

Opportunity for group discussions and problem-solving with other CoP members.
Trusting relationships built with CoP members over time and lots of communication.

What didn't work or got in the way of the change?

Some irrelevant discussion time.



PART TWO: CoP VALUE

What has been the **VALUE** of the CoP for you or your project?

What was the change or outcome?

- new/improved action, way of thinking, or outcome of your work
- positive or negative
- big or small
- anticipated or unanticipated
- fully realized or in progress

What did you gain from the CoP that led to the change?

- new/improved insight, skill, relationship, confidence

What worked to support the change?

- CoP or external conditions, activities

What didn't work or got in the way of the change?

- CoP conditions, activities



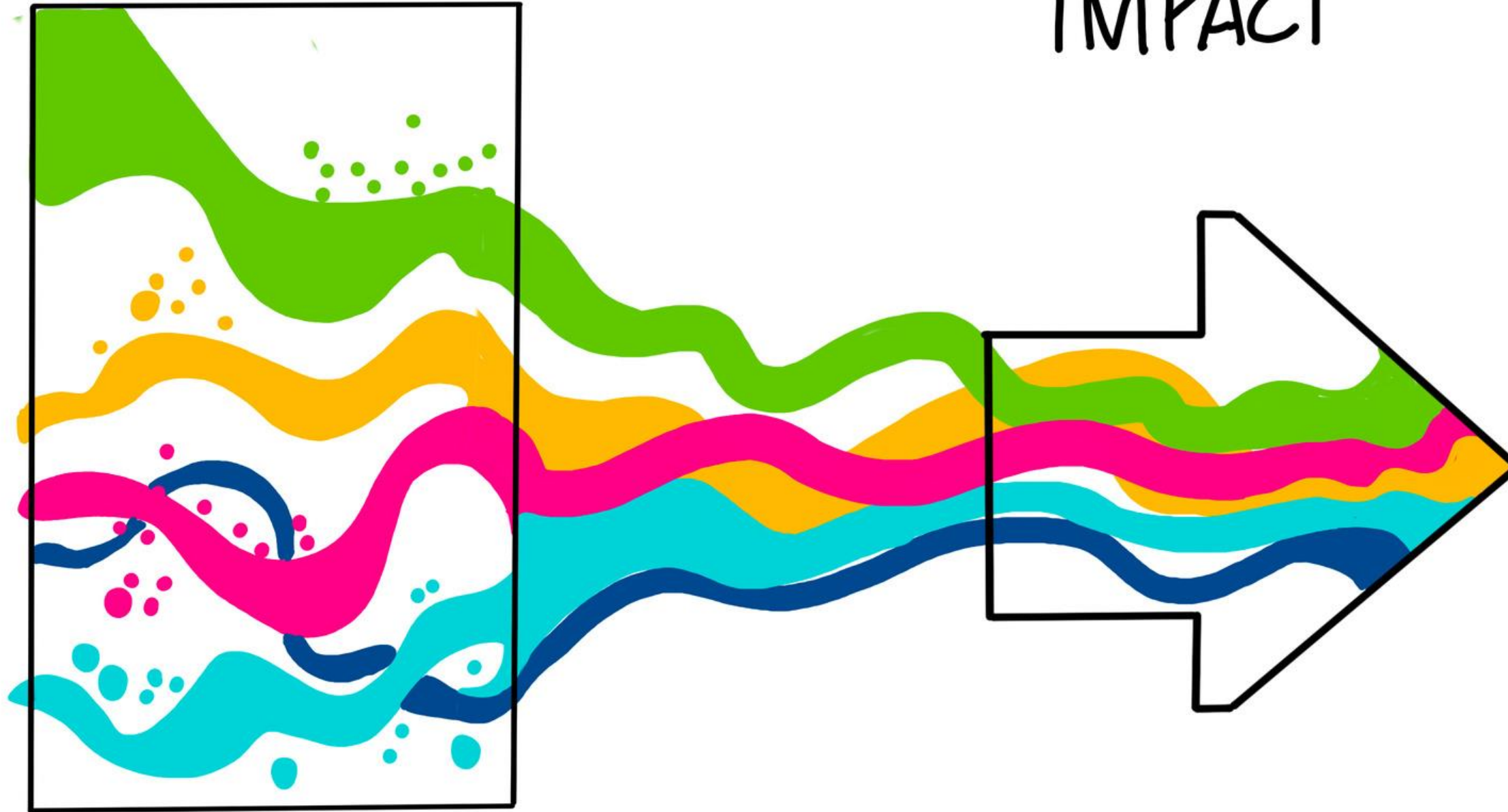


BREAK

Collective Impact

SHIFT FROM THIS ...

TO COLLECTIVE
IMPACT



PART THREE: COLLECTIVE IMPACT

What **IMPACT** has the CoP had beyond what any individual person or project could have had?

What supported that impact?



PART FOUR: DREAMS FOR THE FUTURE

Given unlimited funding and resources, what more would you hope to **ACHIEVE** together and how?

ONLINE SURVEY

The Knowledge Hub team would like to invite you to participate in a **20-minute online survey** that we are conducting as part of our final evaluation research

October 15, 2025



CELEBRATION BANQUET

Join us in the
Terrace Room at
6:00pm for dinner
and a cash bar!





THANK

YOU