SUPPORTING IMMIGRANT NON-STATUS SURVIVORS OF INTIMATE PARTNER & DOMESTIC VIOLENCE: RECOMMENDATIONS FOR CANADIAN SERVICE PROVIDERS

by

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Abstract

This thesis examines the experiences of Gender-Based Violence (GBV) service providers supporting Immigrant Non-Status Survivors of Domestic Violence (INSDV) in Canada. Drawing on interviews with service providers in British Columbia and Ontario, the study explores their preparedness and experiences in serving INSDV. It highlights the challenges service providers face, such as navigating the immigration system and providing effective assistance. Participants offer recommendations to improve the support system, including increasing shelter availability, funding, information dissemination, and enhancing cultural understanding. The findings emphasize the urgent need to address these challenges and ensure equitable support for INSDV in Canada. The study contributes to the understanding of how service providers can better assist INSDV and the systemic gaps that need to be addressed to provide effective services that support their unique needs.
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List of Acronyms:

Domestic Violence (DV)

Family Violence (FV)

Gender-Based Violence (GBV)

Humanitarian and Compassionate Considerations (H&C)

Immigrant Non-Status Survivors of Domestic Violence (INSDV)

Immigration Refugee Citizenship Canada (IRCC)

Intimate Partner Violence (IPV)

Permanent Resident (PR)

Temporary Resident Permit (TRP)

Violence Against Women (VAW)
Chapter 1: Introduction: Understanding the Intersection of Immigration and Gender-Based Violence

Statistically very few people migrate internationally, but immigrants constitute a large population in Canada, and it’s projected to grow in the coming years. As one of these immigrants, I moved here on a temporary resident permit, with the intention of making this my home in 2020. It marked my first journey to Canada. Although I had relocated to other countries before, the Canadian experience proved to be remarkably unique, and the complexities were further compounded by the challenges brought on by the pandemic. Motivated by job opportunities for my partner, we embarked on this journey, embracing new opportunities. While I was looking forward to the new experiences in Canada, I was nervous about moving to a new country I knew nothing about and apprehensive about the limitations associated with my temporary immigration status. My first year in Canada, navigating the physical and emotional changes, from the warmth of India to the blushing hues of Fall, building new friendships, and surviving the winters, was a transformative experience.

One of the many challenges of living with temporary status was that I had to apply for a separate work permit and wait for a few months to receive the document that would allow me to seek employment to become financially independent. Meanwhile, because of the pandemic, my temporary immigration status inhibited my travel and contact with my family back home. Without the work permit, I was not eligible for provincial or federal health care and could not access or open a bank account because I did not have a social insurance number. While I processed all these applications, I was mentally prepared to receive a visit from Canadian Border Control Officer at my door.
asking me to leave Canada at any time. There was no logical explanation of that ever happening, but it had turned into a recurring nightmare, resulting in many sleepless nights spent ensuring meticulous paperwork and documentation to secure stable immigration status. Essentially, living with temporary status demanded constant vigilance over immigration rules and permits, recognizing that any lapse could jeopardize my sense of belonging and stability in the country I now called home. I have now received all the permits and stable immigration status. However, my initial experience has sparked a deep curiosity and interest in the lives and experiences of immigrants in Canada, especially those who reside in the country under temporary or precarious status.

This thesis is a product of my personal experience of immigration and my professional engagement with gender-based violence (GBV) service providers in Canada. I am currently employed with Women’s Shelters Canada, a non-profit organization that offers a unified, pan-Canadian voice on the issue of violence against women. The organization runs multiple projects to support shelters and transition houses across Canada that support survivors of GBV. One of their initiatives, known as Communities of Practice, brings together service providers from across Canada dedicated to assisting immigrant, refugee, and non-status survivors of GBV. The discussions held during these group meetings were both eye-opening and heart-wrenching. I was inspired to explore and learn more about immigration policies, and the abilities and capacities of service providers when it came to serving Immigrant Non-Status survivors of Domestic Violence (INSDV) and meeting their specific needs. I recognize that there are multiple limitations to using a single category to define and represent a large and diverse group of people. The use of the category (INSDV) in this thesis is not to minimize, simplify, or offer a
comprehensive understanding of their multiple intersecting identities and social contexts. I recognize the diversity of this group's experiences, consider the interplay of various social factors, and am mindful of the potential for categories to reinforce power hierarchies. Feminists have argued against and critiqued categories for being unstable, reinforcing hierarchies, oversimplifying, homogenizing, and being restrictive (Collins, 1993; Harding, 1986). The INSDV category aims to create a critical, loose, intersectional, and flexible grouping that can be dynamic, expanded, and adapted.

These caveats and considerations had a profound impact of me, as I contemplated the unimaginable hardships survivors endure when their immigration journey intersects with the trauma of violence. It made me question the fundamental principles and ideologies underpinning our immigration policies and systems. I sought to shed more light on this specific intersection of immigration and GBV support, and service provider's capacity to adequately cater to the needs of survivors.

In this thesis, I will discuss the experiences of service providers, like social workers, lawyers, community workers in the non-profit sector in British Columbia and Ontario who serve INSDV clients and families. I will discuss their preparedness to serve this group and their experiences of navigating the immigration pathways designed to support INSDV. I will also highlight their recommendations for how services can be better integrated to support survivors in immigrant communities. My research questions include understanding the experiences and capacity of service providers when serving INSDV. For example, developing a more nuanced understanding about the relationship between services like aids, subsidies and immigration status and its impact on service providers ability to offer meaningful services to INSDV. Furthermore, I will explore
service providers experience of navigating immigration pathways like Permanent Residence (PR) under Humanitarian and Compassionate (H&C) and Temporary resident permit (TRP) including challenges, usefulness, and recommendations. This thesis is an opportunity to improve our understanding of how service providers support INSDV, the challenges and barriers encountered by service providers, and ways the various systems that shape INSDV experiences can be improved to offer meaningful services and cater to the specific needs of this vulnerable population.

The Shadow Pandemic: Gender-Based Violence

Family Violence (FV) is when someone uses abusive behaviour to control or harm another member of their family. Family violence may include physical, emotional, financial, sexual violence, and neglect. It can happen within a marriage, common law, or dating relationship. It can include people of the opposite sex or same sex and can happen at any time during a relationship, including while it is breaking down, or after it has ended. (D. of J. Government of Canada, 2001). Methods of violence can include but is not limited to stalking, reproductive coercion control tactics, insulting or verbal abuse, threats, intimidation, and surveillance to gain power over one’s partner (Anderson, 2017). The person using abuse may try to control what their partner wear, whom they meet, how they spend time, when they can talk to their friends and family, how they spend money, etc. (D. of J. Government of Canada, 2001). Intimate Partner Violence (IPV) or Domestic Violence (DV) is a type of FV. It is synonymous with Gender-Based Violence (GBV) because a disproportionately large number of women experience severe forms of IPV/DV (Breiding et al., 2014). GBV may include rape, foeticide, sexual harassment, trafficking, dowry-related violence, honour killing, female genital mutilation, acid attacks, and
femicide. GBV is known to severely affect women’s rights, equity, health, and economic participation globally. There is growing recognition that IPV has severe public health implications and repercussions on women’s general and mental health, quality of life, as well as social and occupational functioning. (Garcia-Moreno et al., 2005; Jhonson et al., 2008; World Health Organization, 2020). GBV has been called the shadow pandemic because of its impact on health and human rights, and because emerging data suggest that the number of women affected by violence is likely to increase after the COVID 19 pandemic (UN Women, 2021).

One-third of women globally who have been in a relationship experience DV, and 38 percent of all murders of women are committed by intimate partners (World Health Organization, 2020). A prevalence study using data from many countries reveals that 35 percent of women worldwide have experienced violence, most of it being IPV/DV. A 2017 Department of Justice report based on self reported data stated that 92,000 people in Canada experienced IPV, out of which 79% were women. This number only reports Police Reported crimes that represents a subset of the actual figure because most IPV cases remain unreported to the police (Conroy, 2021; World Health Organization, 2020). Data also reveal that women victims of homicide are more likely to be killed by their intimate partner. In 2019, solved cases of homicide reported that 47 percent of women victims were killed by their intimate partner in Canada (Cotter, 2018). In 2021, out of 788 homicide victims, 90 were killed by their partners. The number has been gradually increasing, from 84 in 2020 and 79 in 2019 (David & Jaffray, 2022).
Immigrant Women as a Vulnerable Population

A deeper understanding of the various demographics of women who experience violence reveals that one in ten women who are visible minorities have experienced some form of IPV in their lifetime. One third of this group experienced physical or sexual assault and one in four under the age of 24 years experienced IPV in the past one year (Cotter, 2021). This data does not indicate that women from visible minorities are more likely to experience abuse but highlight the severity of violence experienced by these women in Canada. An increasing portion of visible minorities are immigrant women, for example around 28 percent of immigrant women in Canada are visible minorities and from South Asian Countries (Cotter, 2021; Tina Chui, 2011).

It is recognized in academic literature that survivors' experiences of violence, help-seeking behaviors, and ability to rebuild their lives can vary based on factors such as race, ethnicity, and immigration experiences. Studies confirm that immigrant women’s experiences of IPV/DV, help seeking attitude is vastly different from other survivors, they experience multiple challenges and barriers when seeking safety and in successfully re-establishing their lives (Guruge et al., 2010; Guruge & Humphreys, 2009; Lipsky et al., 2006). Immigration status and experiences of immigration creates specific condition for survivors who are fleeing violence that can impede their capacity to overcome violence. Studies have found positive correlation of being an ethnic minority with a higher risk of experiencing mental health problems and IPV. These studies also established the presence of various barriers that prohibit survivors who belong to ethnic minority groups from seeking mental health services. (Lipsky et al., 2006; Rodríguez et al., 2009) Studies also suggest that immigrant women experience several unique
challenges, including language barriers, isolation from community and family, immigration related economic changes, legal status, lack of knowledge about services, immigration status, and cultural differences to seeking IPV related services (Giesbrecht et al., 2023; Menjívar & Salcido, 2002; Raj & Silverman, 2002; Tabibi et al., 2018). Immigrant women also delay seeking support from people like family doctors until abuse has intensified, compounded by the lack of social or collective support like mothers and sisters, financial dependence owing to migration, cultural ideas of being patient towards partners, and social stigma. (Ahmad et al., 2009) Studies reveal that there are differences in perceptions about immigrant culture that presume that immigrant communities bring DV to Canada or even go as far as to blame DV on cultural values, which influences immigrant women’s capacity to seek services for IPV (Okeke-Ihejirika et al., 2020a). Laws and policies related to immigration also creates further systemic and structural barriers, often pushing immigrant victims to remain in abusive relationships (Alaggia et al., 2009).

Immigration is a significant part to support Canada’s economy, labour needs, and population. Yet, there is a lack of large-scale studies and data to estimate the number of women from immigrant communities who are experiencing FV in Canada. According to Statistics Canada’s population projection, given Canada’s immigration trend, by 2031, 27 percent of Canada’s female population will be immigrants. (Tina Chui, 2011). Given the growing number of immigrant women in Canada and their socio-economic contribution, IPV can create a significant threat to their safety, security, and rights. While there is inconclusive evidence and a general lack of studies that show that immigrant
women experience a higher degree of IPV, it’s important to recognize how IPV is affecting this specific group and examine how prepared Canada is to handle their needs.

**The Role of Gender-Based Violence Service Providers in Supporting Survivors**

There are various non-profit services that support survivors of GBV to re-build their lives. They also spread awareness and educate people about the dangers to GBV. *ShelterSafe* is Canada’s online resource for women and children seeking safety from violence. The website mentions that there are over 600 GBV shelters across Canada for survivors of IPV/DV. These shelters offer critical information, support, and resources for a survivor to live an abuse free life. There are emergency shelters or transition houses and second stage shelters where the survivors can get support to rebuild their lives. Apart from GBV shelters and transition houses there are non-profit legal aid organizations, resettlement agencies, emergency help lines, etc. that offer an array of services to support survivors. GBV service providers offer confidential support based on the needs of the survivor to help them navigate the complex web of social services. They liaise across other services like legal, financial, medical, housing etc.

An Ontario based study about GBV shelters report that, except for larger urban areas, the average number of beds in a shelter are 17, and the median number of staff in a shelter are 12 full-time and 9 part-time; all of them rely heavily on volunteers (Harris et al., 2014). This study highlighted that there is invisible unpaid care work undertaken by the shelter professionals apart from their assigned responsibilities like providing safe refuge, material support, education, and counselling, informational, and social system navigation support. The study confirms that GBV shelters irrespective of size, geographic location, or specific mandate provide critical support that are not available anywhere else.
or not offered by anyone else in the community, going above and beyond their professional requirements to meet the needs of the clients (Harris et al., 2014; Maki, 2019).

GBV service providers can offer meaningful insight and recommendations to create better infrastructure to support survivors. They can also help in building a better understanding of how IPV affects specific groups like immigrant, non-status, newcomer survivors. GBV service providers are uniquely and advantageously placed to highlight the needs of Immigrant Non-Status Survivors of Domestic Violence (INSDV) and identify the gaps in GBV services for INSDV in Canada. There are multiple scholarly studies that highlight experiences of INSDV and their unique challenges and barriers. However, most of these studies share the perspectives of INSDV, highlighting survivors experience and challenges. This thesis serves as an opportunity to improve our understanding of how service providers can effectively support INSDV, highlighting the challenges and barriers they encounter and offering recommendations to better serve this vulnerable population.

The upcoming chapter will explore the various immigration pathways in Canada, including Permanent Residence (PR) under Humanitarian and Compassionate (H&C) grounds and Temporary Resident Permits (TRP) that INSDV can use to gain stable immigration status in the country. Understanding these pathways is crucial in assessing their usefulness and challenges for INSDV and service providers.
Chapter 2: Canada’s Immigration Pathways for Immigrant Non-status Survivors and Gender-Based Violence Services

The Canada Immigration Act, 1976, states that immigration has three main objectives; 1) to meet the country’s demographic, economic, and social goals in terms of size, growth, socio-cultural fabric, trade, and commerce. 2) Meet international legal obligations in terms of refugees. 3) Re-unite families of Canadian citizens and permanent residency status holders who live abroad (Refworld | Canada, 1976). There are three main categories through which immigrants are accepted in Canada to meet these objectives: Family Class, Economic Class, and Refugee Class. Family class, the focus of this study, includes individuals who have been granted status based on their sponsorship by Canadian citizens or permanent resident, including spouse/partners, children, parents, grandchildren, or other relatives included in policy definitions of family (S. C. Government of Canada, 2016). Family Sponsorship allows Canadian citizens and permanent residents to sponsor their spouse or common law, dependent children, parents or grandparents, or other eligible relatives to immigrate to Canada. Sponsor and sponsored relatives must meet certain criteria and follow application process. The person who sponsors them, mostly their spouse or partners, are responsible for their basic needs like food, clothing, shelter, everyday needs, and health care that are not covered by the public health care like dental and eye. The sponsors bear full economic and social responsibility for the sponsored family member, who should not need government support or social assistance (Immigration, 2011). The Family Sponsorship program demonstrates country’s commitment to family values and the importance of supporting family unity for social cohesion and economic prosperity (Immigration, 2007). The
sponsorship program has also been criticized for being narrow and discriminatory towards immigrant families. As Canadians enjoy the freedom to shape their familial units according to their preferences, this flexibility is not mirrored in the Sponsorship policies. Instead, the definition of family has progressively narrowed, leading to the implementation of more stringent regulations concerning reunification. The Sponsorship feature involves the state's active role in creating and perpetuating the ideal conjugal family unit through the granting of citizenship of specific types of relationships ignoring sexual minorities in refugee and immigrant communities (Gaucher, 2018).

In 2009, around 29 percent of immigrant women belonged to the Family Class, and 39 percent were dependents admitted as spouses of individuals entering under the Economic Class, while 49 percent of all individuals under Refugee Class were women (Tina Chui, 2011). These crude figures show that a significant portion of immigrant women enter Canada as dependents and sponsored individuals. Immigrant non-status survivors of domestic violence (INSDV) are immigrant women survivors of GBV in Canada who do not have permanent immigration status. They may be refugee status holders, under a temporary work or study permit, or residing as the family class as sponsored applicants. They may also be victims of human trafficking. INSDV often experience a loss or breakdown of sponsorship if their relationship breakdown with their abusive sponsor, putting them in jeopardy. Sometimes immigration processes are used as a tool by abusers to further enact violence and control. For example, spreading misinformation or withholding information about the status of their immigration application. As highlighted above, multiple academic studies proved that immigrant survivors of GBV lack information about resources and their rights, community and
family support, and experience cultural and language barriers (Alaggia et al., 2009; Giesbrecht et al., 2023; Menjivar & Salcido, 2002; Okeke-Iheijirika et al., 2020a; Raj & Silverman, 2002). Overall, INSDV experience multiple barriers and challenges to seek safety and overcome abuse in Canada. Their situation is often worsened by the lack of permanent residency status, as they have little to no access to social assistance, support, and services like health care, employment or study opportunities that are often tied to their sponsorship. INSDV’s ineligibility to access these services because of the residency status in the country creates further barriers for service providers to offer meaningful services to this group (Vecchio, 2019). To overcome these challenges, INSDV can apply for permanent residency status independent of their abusive sponsor. To do this, they should meet the requirements of the in-Canada application for residency.

INSDV can apply for permanent residency (PR) under the Humanitarian and Compassionate stream that allows the applicant to apply for PR under exceptional circumstances. H&C are only open to those applicants who cannot apply for PR within Canada under any other stream. Individual cases are judged by the immigration officer and decisions are discretionary, and the application fee is non-refundable upon refusal (Immigration Refugees and Citizenship Canada, 2022). Since INSDV often lose sponsorship or support of their spouse, they can meet the exemption requirement under H&C. H&C application processes are online, unless one asks for special accommodation on account of disability like large prints, braille, or paper copy. The process includes filling up the application forms, gathering multiple documents like birth certificates, proof of relationship such as marriage, divorce, adoption, children, police records, bank records, medical records, criminal records, additional supporting document explaining
hardship or the best interest of child in relevant cases. The application package requires a letter from employers or someone in Canada who knows the applicant, along with the other relevant documents and proof.

The alternate option for INSDV is to apply for a Temporary Resident Permit (TRP) under Family Violence. TRP under Family Violence was introduced in Canada to address the unique and urgent needs of foreign nationals who are experiencing or are at risk of family violence while in the country. This stream, an expedited discretionary process to grant a temporary status to remain in the country was launched in 2019 to support victims of domestic violence who are in exceptional circumstances. By implementing the TRP under Family Violence, the Canadian government aimed to provide a pathway for victims of family violence to access safety, support services, and resources without the fear of deportation or removal. The TRP allows victims to remain in Canada temporarily, granting them legal status, and access to certain benefits and services, including healthcare and social support. It offers a fee exemption and coverage under the Interim Federal Health Care\(^1\). This stream is mainly designed for those who have lost their sponsorship, cannot apply for PR because of a breakdown of the relationship with a sponsor because of abuse, have been misled by their abusers regarding their immigration status and status of application, or are intending to apply for PR under H&C or other eligible streams but does not yet have the application ready.

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\(^1\) The Canada Interim Federal Health Care Program (IFHP) is a government initiative that provides temporary health care coverage to vulnerable groups of individuals who are in Canada and are not eligible for provincial or territorial health insurance plans. IFHP ensures they have access to essential health services and emergency care while seeking asylum or permanent residency in Canada. The program covers a range of health care services, including essential medical care, prescription drugs, and emergency medical services. It also includes coverage for certain vaccinations, prenatal care, and mental health services. The specific coverage provided under the IFHP may vary depending on the category of the individual and their immigration status.
Refugees and Citizenship Canada, 2021). TRP applications must include supporting evidence to demonstrate that family violence has occurred. This can include a letter from a medical professional, a police report, or similar documents. Alaggia and colleagues (2009) has argued that immigration laws and policies maintain a high burden of proof, asking for multiple documents and paperwork which is often unrealistic for someone experiencing violence to acquire, this can push INSDV to remain in abusive relationships impeding their capacity to seek safety.

Survivors of GBV are supported by a range of non-profit service providers in Canada, as discussed in the introductory chapter. Emergency shelter and safe houses provide safe and secure temporary accommodation for survivors and their children who are fleeing abusive situations. They also provide emotional support, counseling, legal advocacy, and referrals to other support services. Violence against Women (VAW) shelters developed in Canada during the 1970s under the sporadic leadership of a few women in Ontario, BC, and Alberta. They put together a safe refuge for women suffering from violence at home seeking to escape abusive homes and rebuild their lives (Goodhand, 2017). With sheer compassion and dedication, these women set up these safe homes, arranged for furniture, and gathered support, and donations to support these establishments. They advocated for recognizing domestic violence as a social crisis rather than an individual problem. They also criticized the feminist movement at the time for not standing for violence against women as a legitimate feminist issue (Goodhand, 2017). Since the 1970s, VAW shelters in Canada have grown considerably. The shelter sector serves a critical function for families fleeing violence. Apart from emergency shelters, there are crisis lines that offer confidential and anonymous support, safety planning, and
connect to resources in multiple languages. There are counselling centers that offer trauma-informed care to address the emotional toll of violence on survivors. Legal advocacy organizations support survivors to navigate the legal system and obtain protection orders, restraining orders, or other necessary legal remedies. There are support groups for survivors to offer a safe space to share experiences, provide mutual support, and learn coping strategies. Transition houses offer longer-term housing options and support for survivors who have left shelters or abusive situations. There are prevention, education, and awareness initiatives as well. GBV service providers serve a crucial role to support survivors overcome trauma and rebuild their lives. These service providers are responsible for crisis intervention, safety planning, referral, counselling, legal advocacy, awareness, and education. However, all these services vary in availability and scope across different provinces and territories in Canada. Canada's GBV shelter sector is also underfunded and faces various challenges in supporting women to come out of violence. A lack of transitional housing, affordable housing solutions, and a general funding crisis often leads shelters to be overwhelmed requiring them to refuse support to women in need (Dale et al., 2021; Maki, 2019; Vecchio, 2019).

Despite this climate of crisis, like underfunding and staff capacity, they continue to offer specific and unique support to INSDV, including specialised culturally sensitive, trauma-informed care. They also navigate the immigration systems as a major part of services for their INSDV clients. They support their clients with the various systems of administration, prepare and gather evidence and documents to complete the immigration application, support with submission and entire application process.
In this thesis, I will explore their experiences of working with the immigration systems, especially H&C and TRP under Family Violence application and other service providers in the complex web of support for INSDV clients. The study participants offer engaging and practical insights into the landscape of service experiences, as well as structural and institutional capacity of GBV services to meet the needs of INSDV.
Chapter 3: Unveiling the Margins: A Transnational Feminist Analysis of Gender-Based Violence Services and Experiences of Immigrant Non-status Survivors.

There are various research studies about the prevalence of IPV, its gendered nature, its impact on families, its repercussions on legal and economic systems, and how it shapes survivors’ experiences (Ansara & Hindin, 2011; Archer, 2006; Dixon & Graham-Kevan, 2011; Follingstad & Rogers, 2013; McHugh et al., 2005; Stark, 2009). Despite these studies, there is no universal understanding of IPV, its reasons, and its impact across the globe. Advocates and researchers, learning from experiences in domestic violence shelters, build an image of a controlling, jealous male partner stripping away their female partner’s self-esteem, independence, resources, sense of safety, and health. Though they recognize the existence of violence in same-sex relationships, as well as male victims, and appreciate the difference in women’s individual experiences, the primary understanding is that IPV is a crime committed by men towards their female partners (Nicolaidis & Paranjape, 2009).

Studies relying on a specific gendered conceptualization of IPV have been criticized for only asking women about their victimization and for not recognizing the potential of women’s violence against men, and the impact of violence on families, especially children, which can limit understandings and recommendations for better support for IPV (Archer, 2006). The idea of IPV being men or women’s issue fails to recognize the multiple factors and complex nature of Family Violence. It is important to accept that IPV can arise from a complex interaction of many factors, and can be used by men and women with significant spillovers into the parent-child relationship (Dixon & Graham-Kevan, 2011). Understanding IPV demands a detailed review of the context and
interpersonal relationships of violence, the ideological framework of the researcher, and methods used to understand it (McHugh et al., 2005).

Efforts to measure and understand IPV is also a complex process. Accounting for different forms of abuse like psychological, sexual, financial, severity of violence, and meaning or impact of violence across gender, needs careful considerations when measuring IPV (Follingstad & Rogers, 2013). Using the same IPV measures for men and women may not necessarily lead to constructive ideas about the gendered nature of IPV. More research on men’s IPV reporting and conditions of reporting are needed to assess the gendered implications in IPV.

DV/IPV is a complex subject, that is evolving gradually. Scholars have been criticized for their inability to encompass the “common knowledge rooted to the core of experiences” of survivors leading to inconclusive and unsatisfactory understanding IPV (Stark, 2009). There is wealth of research that found evidence of a complex etiology of IPV and its harmful effect on families. It is imperative to recognise perpetrators or victims of IPV as a heterogenous and evolving group, and the complex interplay of various other risk factors, forms of violence, and context to understand the etiology of IPV. It calls for grounded policy, un-biased professional services, and collective understanding to end it (Dixon & Graham-Kevan, 2011).

Addressing IPV requires coordinated action in engaging diverse communities and multiple sectors, such as health, education, and justice, to challenge prevailing inequities and social norms. (World Health Organization, 2020 p). For example, refocusing research, advocacy, law, and policy on coercive control could support efforts to ending IPV (Stark, 2009). Understanding how IPV impacts and interacts with gender can be an
independent variable in studies of IPV. Also, the “technical discussion of whether women and men can engage in the same abusive behaviors does not address the larger question of whether women’s experience of IPV is comparable to men’s experience.” (Follingstad & Rogers, 2013). For example, the nature or severity of violence or abuse experienced, including psychosocial outcomes, can be more severe for women than of men (Ansara & Hindin, 2011). These studies forecast that research studies around IPV do not share any common understanding about what, who, or how the phenomenon of IPV manifest and impact families.

Immigrant women, women of colour, poor women, and others who are at the margins often experience GBV that are worsened by poor medical condition, lack of legislative support, and cultural invisibility. It is important to redefine, broaden, and develop a more comprehensive concept of violence against women of colour to combat minimalizing their experiences (Carraway, 1990). However, a study that examined the capacity of GBV services found that shelters primarily cater to White, middle-class, English-speaking clientele, often overlooking needs of women of colour, immigrant women, or Indigenous women. This study on White privilege and GBV service indicates that service providers often assume a stance of ‘colour blindness’ that minimizes the significance of socio-cultural differences and the specific needs of their clients of colour. The study also indicates how clients from non-White communities were assumed to have different needs and support mechanisms thereby rendering mainstream GBV services unnecessary. There was a reluctance to appreciate and accept the need for changing practices (Donnelly et al., 2005). The reasons could be the history of the GBV shelter movement being rooted in White experiences lacked transnational intersectional
awareness. Despite being well intentioned, the movement led by a group of White women assumed their needs as the norm without accounting for specific experiences rooted in social, cultural, and historical experiences of women of colour (Donnelly et al., 2005). Studies on GBV services, while highlighting its efficacy, also point to the need for a better connection between advocate and survivor, and survivor led services, along with a need for more research on cultural respect and inclusivity on GBV program outcomes (Wood et al., 2022).

I will draw on Transnational Feminism to frame my analysis. Transnational Feminism offers insights into the importance of difference and the specificities of immigrant women and non-status women, whose specific needs are made invisible in larger systems, processes, and services available when seeking safety in Canada. Audre Lorde in her seminal essay on feminism and race pointed out how the “master’s tool will never dismantle the master’s house” (Lorde, 1984). Implying the need to find alternate systems, structures, and rules for those left in the margins of society like women of colour, poor women, disabled women, older women, and in this case INSDV. It is important to develop a community for liberation that accepts, appreciates and acknowledges differences and specificities instead of understanding difference with suspicion and separation or completely disregarding that differences exist (Lorde, 1984).

Transnational Feminism as a theoretical frame emerged from post-colonial thought and women of colour feminism that critiqued the idea of "global sisterhood" for ignoring women of the Global South, Black, Indigenous women, and women of colour. Transnational Feminism highlights the diverse experiences of women across the globe without being bound to any specific nation. It aims to build a solidarity transcending
borders and is concerned with the influence of geo-politics on gender relationships and experiences (Zerbe Enns et al., 2021), as well as revealing and addressing asymmetries of globalization (Swarr & Nagar, 2010). Overall, Transnational Feminism critically scrutinizes asymmetric and multidirectional power across national borders (Tambe & Thayer, 2021).

Transnational Feminism criticized “global sisterhood” for being Euro-centric, White, and middle-class, thereby neglecting the significance of multiple cultural differences and their specificities. They exposed the power imbalance in feminist knowledge production and feminist political practice for creating a false universalization and failing “to understand the material conditions that structure women's lives in diverse locations.” (Grewal & Kaplan, 1994, p. 17). Global Feminism, borrowing from the call of ‘global sisterhood’ shaped global gender discourses in the United Nations, international and regional non-profit organizations, and various human right platforms. Transnational Feminist criticized 'global sisterhood' for universal understanding of patriarchy, pioneered by Euro-centric visions that strives to rescue the women of the Global South (Mohanty et al., 1991).

Transnational feminism accounted for the multiple struggles that women across the globe experienced owing to their intersecting identities of country, race, ethnicity, religion, class, caste, and sexuality (McCann & Kim, 2016). Transnational Feminism is an intersectional, global, and transnational scope, a ‘creative braiding’ of transnational intersectional analysis capable of articulating alternate forms of feminisms that acknowledge the complexity and multiplicity of feminist agendas (Chowdhury, 2009). For example, critically examining the White feminist movements in the West that has
rarely engaged with questions of immigration, nationality which are fundamental to identifying foreignness and creating boundaries like insiders and outsiders (Mohanty et al., 1991). Grewal and Kaplan add that “There is an imperative need to address the concerns of women around the world in the historicized particularity of their relationship to multiple patriarchies as well as to international economic hegemonies” (Grewal & Kaplan, 1994 p 17). Transnational feminist scholars included engaging with historical particularities that account for socio-structural factors that create power dynamics, including colonialism, neo-colonialism, global capitalism, and economic realities (Grewal & Kaplan, 1994). Transnational feminists ask foundational questions like “what kinds of feminist practices engender theories that resist or question modernity? And, how do we understand the production and reception of diverse feminisms within a framework of transnational social cultural economic movements?” (Grewal & Kaplan, 1994 p 3).

The central idea of Transnational Feminism is to create a movement that recognizes the differences inevitable to global power dynamics and seek to stand in solidarity beyond nation states. For example, Transnational studies have suggested that colonization as a process interacts with GBV, where marginalised communities internalize racist ideologies, men transfer rage over women, and often where Indigenous men experience compounding challenges when labelled as perpetrators (Rajan, 2018). Transnational Feminist studies also recognize the problems of using a universal definition of patriarchy within the rhetoric of GBV. A unidimensional understanding of patriarchy and gender relations between men and women provides a limited scope that cannot account for the complexities of race, sexuality, class, and disability that can operate across culturally specific realities (Patil, 2013).
It is important to recognize the role of colonization and forces of contemporary globalization that shape power relations informing culturally specific practices of patriarchy in different countries, especially countries with ongoing legacies of colonialism. For example, the idea that a husband has the absolute power and authority over family and children became a metaphor that was used to legitimize European colonizer’s absolute power over their dependent, often creating and introducing gendered power relations even in locations that did not originally have them (Patil, 2013). A universal monolithic understanding of patriarchy cannot account for distinct gender relations within historical and cultural specificities.

Women living under patriarchal systems negotiate, strategize, and change relationships and patriarchal power structures. Often some women, depending on their status and position within patriarchal systems, can benefit from unequal systems, thereby incentivising a bargain. They can become devout guardians and/or active collaborators with patriarchal values and customs. It does not necessarily mean a lack of resistance, but an avoidance of conflict, opportunistic partnerships with the patriarchal power: a ‘patriarchal bargain’ (Kandiyoti, 1988). A nuanced and transnational understanding of ‘patriarchy’ as a concept can create a critical juncture through which GBV and IPV can be analysed and understood. For example, IPV can be acute with more severe consequences in South Asian countries like India, Pakistan, and Sri Lanka because of higher rates of violence against women, which is tied to a loss of local cultural and political system, economic subjugation, structural hierarchies imposed by colonization (Ahmad et al., 2009).
‘Intersectionality’ has been widely used in women studies, sociology, gender studies, cultural studies, media studies, and other interdisciplinary fields. Intersectionality can be explained “as an overarching knowledge project whose changing contours grow from and respond to social formations of complex social inequalities; within this overarching umbrella, intersectionality can also be profitably conceptualized as a constellation of knowledge projects that change in relation to one another in tandem with changes in the interpretive communities that advance them” (Collins, 2015 p 5). Use of intersectionality within feminist movements included addressing the social problem of violence against women of color, and the call for an identity politics of race, class to empower women of colour. Despite intersectionality’s potential to address large systemic issues, intersectionality has been largely focused on domestic analysis, as opposed to cross-border transnational dynamics, with a higher focus on local, community, neighbourhood than regional, global, international (Patil, 2013).

‘Domestic intersectionality’ leaves behind the voices of ‘transnational lives’ across borders. Intersectionality, while offering a meaningful engagement with identities of race, gender, and sex, is heavily contextualized in the Global North and has become co-opted by governments and academia. It does not account fully for the legacy of colonization and fluidity of identities that are determined by the power structures between Global North and South (Dhawan, 2016). Transnational Feminism allows for a better engagement with intersectional identities, bio-politics, the messiness of multiplicity, and accounts for constant transformation across time and space (Dhawan, 2016). As a conceptual framework, it expands the intersectional feminist approach by “emphasizing global structural and historical factors such as economic exploitation and oppressive
forces associated with colonialism, imperialism, extreme forms of capitalism, structural racism, and gendered racism, as well as other forms of globalization that reinforce the dominance of Northern world regions” (Zerbe Enns et al., 2021 p 14). Transnational Feminism offer the critical insight to understand the category ‘immigrant, non-status women’ beyond what an intersectional framework can offer.

Beyond Transnational Feminism, ‘Third World Feminism’ can be useful to understand the specific conditions, circumstances, and needs of INSDV explored in this study. Third World Feminism and Transnational feminism are distinct; while the former aims to understand the third world women’s activism, the latter aims to understand feminist organizations across networks at transnational levels beyond nation states (Herr, 2014). Third World Women can be understood as victims who commonly belong to ‘underdevelopment, oppressive traditions, high illiteracy, rural and urban poor, religious groups from overpopulated Asia, Africa, middle east, and Latin America’ often in need of the benevolence of the West (Mohanty et al., 1991). Instead “Third World Woman” can be an analytical and political category who share histories and "common context of struggle" with racism, sexism, colonialism, imperialism, and monopoly capital (Mohanty et al., 1991). It emerged as a response to White Eurocentric feminism that assumed that women are tied to a ‘universal sisterhood’ by the virtue of sex or gender without accounting for multiple complex oppressions that are compounded by race, class, imperialism, and colonization (Herr, 2014). This analytical category does not aim to club all experiences of women of colour into a single category; instead, it offers a framework to understand experiences of women who are at the margins that are rooted in their specific historical and cultural realities. This emerged as a critical response to Western
Feminist thinking that consider Western women as educated and modern, and women in the Global South to be oppressed and lacking agency. The category Third World Woman allows for a critical examination of how women have been portrayed as perpetual victims of male violence under patriarchy, which reduces women to being perpetually powerless and dependent, without concrete historical and political practice and analysis (Mohanty et al., 1991).

Immigrant women in Canada, like the Third World Women are a diverse group rooted in multiple cultural historical realities shaped by different historical, imperial, colonial, nationalistic processes that shapes their experiences, gender relations, and their lives. (Mohanty et al., 1991) stresses the importance of shifting “epistemic privilege” towards Third World Women to ensure that calls for feminist solidarity are just and can transcend borders and nations.

Transnational feminists are self-critical and self-reflexive of their own practices. They call for critical interrogation to be relevant and useful, and generate new debates, connections, beyond geography, borders, academia, and activism (Swarr & Nagar, 2010). They offer a critical examination of globalization and colonial process through an intersectional understanding of race, class, masculinity, and heteronormativity and how that shapes individual and collective agency. Transnational Feminism can also be a key element to foster collaboration between grassroot activism and academic scholarships (Swarr & Nagar, 2010). Transnational Feminism has been criticized however for being a concept of the West and having inaccessible language, yet it has forged connections across the academic world and activists across Global South and North (Tambe & Thayer, 2021).
Transnational Feminism has been utilized in academic research to delve into the impact of transnational forces on domestic GBV policies and advocacy, as well as how the experiences of immigrant women influence national policies. Transnational Feminism provides valuable insights into shaping domestic feminist movements and understanding the complexities of cross-border negotiations concerning immigration, GBV, and GBV services. For example, Domestic Violence Network (DNV), a prominent anti-violence non-profit organization in China, is heavily influenced by transnational feminist understandings of anti-violence as a human rights rhetoric. This understanding has been a key factor to mobilize collaboration and advocacy with the government (Zhang, 2009).

In India, a Transnational Feminist framework is useful to decode how the Hindu Nationalist political parties can project women as empowered yet vulnerable and susceptible to GBV caused by men from minority religious groups like Muslim men. Hindu Nationalist political parties support this simplistic and discriminatory identity politics to create community cohesiveness and comfort. But as Indian feminists movement point, this is rife with class and caste politics and can alienate women and groups on such grounds (Nayak, 2003).

Transnational forces play an important role in Finland's DV policies as well. The Feminist Movement in the 1980s shifted perception, treating DV as a public human rights issue rather than a private matter, however, it was the persistent pressure of transnational influences, facilitated through treaties and agreements, which ultimately compelled Finland to adapt and improve its domestic violence policies. Finland holds the second rank in women's access to education, health, politics, and employment, as reported by the World Economic Forum. Transnational Feminisms have played a pivotal role in
achieving the recognition of DV as a critical gender equality issue within both national and transnational dialogues, policies, advocacies, and movements (Virkki, 2017). It has influenced domestic policies in the US and Ghana as well, forging pathbreaking collaboration, laws, policies in regards of IPV (Bowman, 2019).

Transnational Feminism also influence how specific cases of GBV can be understood when it comes to immigrant communities. In this particular case of Uganda, Kamala, an Indian woman was murdered by her husband in late 1990, and that became a visible urban event and engaged public discussions around nation, migration, race, citizenship, and the national women's movement. Transnational feminist theory offered the critical insight to recognize a ‘moment’ of cross racial feminist interaction with this specific case (Hundle, 2019). The history of Indian diaspora, including their expulsion in the 1970s, was important to locate Uganda as a transnational site, the Indian community’s affluent status, domestic patriarchal systems, Ugandan and Indian feminist movements, and Indian community’s interaction with the Ugandan society, informed this particular act of GBV. Moving away from GBV, Transnational Feminism can also offer insight on women’s, especially immigrant women or diasporic women’s political, social, and economic participation in nation building. For example, diasporic women play a key role in the South Sudan Women’s Empowerment Network’s (SSWN) nation building activities. This brings new opportunities, challenges, and differences, weaving together diversity and unity, sustainable and transformative gender-equitable developments, goals, and activities in Sudan (Erickson & Faria, 2011).

Overall, Transnational Feminism has proven to be a powerful tool in understanding and addressing diverse gender-related challenges and shaping social and
political progress on a global scale. These studies provide valuable insights into the relevance and influence of the Transnational Feminist framework and its ideologies. These studies also demonstrate how immigrant communities and diasporic women can influence and shape domestic policies related to GBV. By adapting a Transnational Feminist framework in this thesis, I will examine Canadian GBV services, policies, and their effectiveness in supporting immigrant non-status women with intersectional identities. The framework will allow me to meaningfully engage with the identity ‘INSDV’ by accounting for the role of state, nations, and global capitalist forces that are enmeshed within their identity of being ‘immigrants’ and ‘non-status’ while recognizing them as women, women or colour, women with children, elderly women, and more. It can also offer a deeper understanding and a critical examination of the development of various GBV support services, policies in Canada. I will critically examine the global-transnational political and capitalistic forces to better understand how immigration policies operate in the context of GBV in Canada, including their values and necessity. For instance, transnational feminist framework can support exploration of the H&C and TRP immigration application processes, as well as the broader infrastructure needed to ensure these processes support survivors. Transnational Feminism is also useful to understand the expectations and experiences of GBV service providers in the context of larger systemic concerns related to immigration, funding, housing, social aid, and Canada's goals to combat GBV. Transnational Feminism is that radical alternative that can dismantle the ‘master’s tool’ to question, re-frame, and challenge the existing systems. It can help shape the alternative sources of systems and structures that can effectively address the needs of INSDV.
Chapter 4: Positionality, Reflexivity, and Conducting Feminist Research:

Feminist researchers have invested considerable energy into positionality and reflexivity to produce authentic and critical knowledge. This chapter will focus on my reasons for selecting this topic, positioning me as a learner and researcher, and outline the methods I have used to investigate and write this thesis. Positionality and reflexivity are important tools that have allowed me to understand my situated knowledge, multiple shifting identities, and politics, in conducting this research.

Feminist researchers have been at the forefront of arguing about and challenging the notions of objectivity, neutrality, and universality in social science knowledge creation (Moser, 2008). The concept of positionality, reflexivity, and identity have become key concepts of feminist research methods. Reflexivity can be understood as a way to understand how the researcher’s social, gender, racial, class, and other intersecting identities of positions shape knowledge production (Nagar, 2002).

My multiple intersecting identities that position me as a researcher require reflecting on my background and privileges that adds to why I have chosen this topic, and framed my research questions, and methods. I am able-bodied, I belong to a privileged caste, I am cis-gendered female, I am comfortable with English, and had the opportunity to do my higher studies and work in India before I moved to Canada. I am not a survivor of GBV, and do not offer direct services to survivors of violence. I grew up in India with parents, who arrived as refugees from Bangladesh when they were young. The challenges of immigration and trauma of being a refugee has been an intrinsic part of my grandparents’ and parents’ lives and has shaped my upbringing. It was only after I moved to Canada, that I was able to witness a part of my family’s experiences of immigration.
that I’ve heard them share all my life. Although my immigration journey was less traumatic, it was still fraught with numerous challenges and roadblocks. Each step, from getting admission into university and every job application required an enormous amount of proof and third-party validation by relevant Canadian agencies. Despite being eligible to work in Canada, the realities of landing a stable job as a new immigrant under temporary status were also limited. My Indian degrees needed equivalency and my Indian work experience held little value. I was only eligible for entry level positions, which meant starting from scratch and leaving behind all my education, skills, and experiences. The stress of relocation and adjusting to my new environment, the various application processes and gathering documents demanded tremendous energy, time, patience that my peers did not have to deal with. Yet, I felt that I could not ask for any accommodations and continue my academic journey that treats the domestic student as the norm. For example, I was submitting the same assignments on time, securing financial stability in the same competitive economy, looking after my health, while navigating the immigration systems. I was also deeply disturbed by the lack of respect for my educational qualifications, language skills, and life skills and for them being reduced to a score\(^\text{2}\) that would determine the success of my immigration application. I was astonished to meet people who had immigrated before and have come to accept the tensions of immigration systems, rules, and processes without questions. The long-drawn, unnecessary, bureaucratic, and exhausting application process for work permit, study permit, permanent residency with Immigration Refugee Citizenship Canada (IRCC) left

\(^2\) The Comprehensive Ranking System (CRS) is a points-based system used by Immigration, Refugees and Citizenship Canada (IRCC) to assess and rank candidates in the Express Entry system for economic immigration to Canada. The CRS assigns points to candidates based on age, education and work experience, language skills, spouse-partner factor, skill transferability, etc.
me with more questions about how these processes were devised and who they were
serving. I wanted to learn more about the challenges associated with Canadian
immigration and immigrant lives. This thesis was an opportunity for me to learn about
immigrant vulnerabilities and critically view specific IRCC policies. My professional
engagement with a nonprofit organization allowed me the opportunity to learn about the
fascinating and inspiring work of the anti-violence professionals, especially services
supporting immigrant, non-status, refugee survivors of GBV. I was privy to the
innovative approaches to finding solutions, resourcefulness, tensions, and crisis within
the GBV shelter community for immigrant survivors. This thesis is a way for me to find
connections with my personal experiences and challenges of immigrating to Canada, shed
light on how violence impacts immigrant survivors, and capacity of service providers to
offer meaningful services to them.

Positionality can be understood as a deeper engagement with the researcher’s
multiple intersecting identities, and how that reflects in the ways they make meaning and
situate themselves as knowledge producers and interact with the subjects studied.
Positionality also accounts for the researcher’s ‘personality’ that influence how they may
respond to different situations, thereby increasing one’s awareness about the self (Moser,
2008). This allows the creation of knowledge that doesn’t strive for objectivity but is
situated and rational, and a “critical interpretation among fields of interpreters and
decoders” (Haraway, 1988). For example, positionality allows me to position my self as
a learner and knowledge maker using my immigration experiences, professional
connections, privileges, and limitations. Positionality demands that I remain aware of
privileges despite navigating the multiple challenges I listed above. For example, as a
new immigrant navigating the challenges, I was financially secure, had a supportive partner, and was not responsible for anyone else’s wellbeing. I had friends in Canada who were willing to mentor, advise, and offer a shoulder to cry on, as I eased into this new world. My professional engagement allowed me a window into the operations and challenges faced by GBV service providers which was an asset. Even though my professional engagements and educational engagements had clear separation, it was a privilege to have access to the network and information. This thesis was also a way for me to expand my knowledge and become a more informed professional. The use of reflexivity and positionality in feminist research has been criticized for ‘naval gazing’, and wearing ‘badges’ thereby reaching an impasse that pushed feminist researchers away from conducting fieldwork and focusing more on analytical work (Nagar, 2002). However, positionality and reflexivity have remained crucial to ‘understanding power relations that are inherent in research processes’ (Sultana, 2007).

As a researcher, my personal experience with immigration and navigating life under temporary status offered me compassion and connectedness, but it also offered me a degree of separation from this topic. My personal experiences of immigration and realities of INSDV’s experiences of immigration are vastly different. As a student and learner, I was not prepared to meet INSDV directly and knew my personal limitations and emotional capacity to inform this thesis from a survivors’ perspective. Instead, I interviewed professional GBV service providers who are directly involved in offering services to INSDV to inform this study. I ensured that there was no conflict of interest as my research topic did not overlap my employer organization’s mission and my job description, it merely coincided with the larger topic of GBV and GBV shelter services.
My professional engagement also offered me knowledge, insight, and contacts that supported me to reach organizations who helped me find my research participants.

Moving beyond my immigration journey that demonstrates my direct professional and institutional ties to Canada, I wish to also recognize my deep personal ties to the Global South. My connections to Global South, make me an outsider to the institutions I am studying - the Canadian GBV service community, systems and processes related to immigration in Canada. Throughout the process of conducting this thesis, I navigated and oscillated between these identities. My personal experience of immigration and professional engagements offers me powerful connections making me an insider, privy to experiences, knowledge, and connections. My connections with the Global South and journey from the South to the Global North make me an outsider, offering a dual perspective. This includes specific socio-cultural-economic and political knowledges rooted in India, for example the role of family, patriarchal values, and gendered social expectations that are fundamentally different from Canada. I was acutely aware of these differences, politics, and wanted to account for them when I was positioning myself as a knowledge producer and framing my research questions. They have influenced my decision to frame my thesis around Transnational Feminism, the research questions, how I conducted my interviews, and later analysed and wrote this thesis. The snapshot (Appendix 3) serves as a vital bridge between academic knowledge creation and dissemination, aligning with the principles of Transnational feminism. Its purpose is to share the key highlights and findings of this research with service providers, research participants, and other collaborators to advocate for and promote the implementation of the valuable recommendations.
Interview and Sampling:

This thesis was informed by GBV professional service providers. GBV services include a range of non-profit services like the sexual assault help line, emergency shelters, and transition houses designed to assist survivors. These service providers aim to address the immediate and long-term needs of survivors while promoting their safety, well-being, and empowerment. Service providers in these organizations support survivors navigate the multiple systems like the judiciary, police, child services, employment, immigration, etc. that are necessary for them to leave violent and abusive relationships. They are deeply invested in their clients lives and wellbeing and acutely aware of their client’s challenges. They also support them in navigating the immigration process and systems, thereby making them an important stakeholder in the entire process. I interviewed service providers from non-profit organizations like re-settlement agencies, emergency shelters, transition houses, and legal aid organizations to inform this thesis.

My research participants were service providers located in Ontario and British Columbia, which include urban cities like Toronto and Vancouver that receive a large number of immigrants in Canada (Tina Chui, 2011). These provinces also have provincial shelter associations like BC Society of Transition Houses (BCSTH) and Ontario Association of Interval & Transition Houses (OAITH) whom I had the opportunity to work with. I used purposive sampling to select my participants. I sent out emails with recruitment posters (Appendix 2) to associations, shelters, and other GBV service organizations to invite participants for my research. BCSTH and OAITH shared my invitation to participate with their network to help me reach some of my participants. My research questions did not need any sensitive discussions or disclosure of confidential information, allowing me
to seek a low-risk ethics approval. My invitation email mentioned my research objectives and sampling criteria. I offered a gift voucher of $20 as appreciation of their time. Each interview was 40-60 minutes and was conducted online on Zoom. I was fortunate to receive very positive and quick responses; many shared their interest and appreciated my research objectives highlighting its significance and need. I was able to complete my data collection process in two months and interviewed nine service providers. All my participants consented to having the interviews recorded. I was able to create transcripts quickly and easily. I used NVivo to transcribe and anonymize the collected data. I proceeded to code the data and re-read the transcripts to notice elements I may have missed the first time.

All participants had professional ties with organizations that supported women who have experienced IPV and have supported at least one INSDV and their family in the recent past. I interviewed people who were familiar with needs of INSDV and interacted with the larger systems and processes as part of their varied job responsibilities. Participants included front-line support workers and managers in domestic violence emergency shelters, transition houses, as well as legal advocates, community legal workers, and resettlement workers from Legal Aid organizations and settlement organizations. All are currently professionally engaged with these non-profit organizations and have worked directly with INSDV and their families. Work experience ranges from 2-30 years in their professional fields. Eight participants identified as female and one as male. Some of my participants shared their own experiences as survivors of domestic violence while some arrived as immigrants and shared their personal experiences with Canadian immigration systems. Their lived experience came up during our conversations when participants sought to explain their passion, engagement, and
knowledge about this field of work. All participants spoke candidly offering deep introspection, experiential knowledge, and recommendations, making my research process an engaging learning experience. Table 1 below provides relevant information on all participants, including their professional roles and the type of organization they are associated with.

<table>
<thead>
<tr>
<th>Pseudonym</th>
<th>Designation</th>
<th>Type of Organization</th>
<th>Years in Service</th>
<th>Province</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Fathima</td>
<td>Multicultural Community</td>
<td>Transition</td>
<td>10</td>
</tr>
<tr>
<td></td>
<td>Engagement Coordinator/Transitional Support Worker</td>
<td>Shelter/House</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Gloria</td>
<td>Transitional and Housing</td>
<td>Transition</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>Support Worker</td>
<td>Shelter/House</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Joyce</td>
<td>Client Support Worker</td>
<td>Shelter</td>
<td>20</td>
</tr>
<tr>
<td>4</td>
<td>Juhi</td>
<td>Manager</td>
<td>Newcomer</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Settlement Organization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Zafar</td>
<td>Legal advisor</td>
<td>Shelter</td>
<td>23</td>
</tr>
</tbody>
</table>
I acquired a signed consent form with permission to record the online meetings from all my participants before the interviews. All my interviews were enriching and insightful. Interviews offered me the opportunity to expand, examine, and engage with multiple factors, challenges, and issues related to my research questions. I engaged deeply with my participants, and was able to listen and ask further questions, clarify doubts, and check feelings. I used a semi-structured interview schedule (Appendix 1) and asked additional or different questions depending on the flow of the conversation. Many of my participants shared their personal experiences with immigration and GBV and client stories without disclosing their identity. My personal experience with immigration often came up and helped to create rapport.

Each interview followed a similar pattern. I began by asking about their everyday work and the capacity in which they support INSDV. This allowed me to learn about the range of services offered and the various systems serving INSDV. Front line support workers, community support workers, re-settlement workers support their clients and their families to resettle in their new lives. While each day looks different, their services include, finding a secure and safe space to stay and providing things they need during their stay, finding and referring translation, counselling, vocational or language courses, legal
services, court appointments, school and childcare services, healthcare, as well as supporting them with immigration related documentation. Legal advocates would support clients’ intake, documentation for immigration applications and legal appointments to facilitate the application processes.

With a better understanding of their work, I asked them to share if they have observed any unique challenges or needs when supporting INSDV clients in comparison to other survivors of domestic violence. All my research participants shared that INSDV clients face compounding challenges and barriers to seeking safety and support services highlighted above. They critically examined their own capacity before offering recommendations on how the whole sector can grow, improve, and support INSDV in Ontario and British Columbia. My participants offered a wealth of information and some excellent recommendations that are deeply rooted in their lived and professional experiences. The next set of chapters draws on nine interviews with service providers and present the findings, highlighting their observations of and experiences with INSDV clients, including the challenges of navigating the immigration system when applying for permanent residency on behalf of their clients. A key motivation of this study is to improve the multiple systems that INSDV interact with; the final task for participants was to offer recommendations or suggestions. It would be important to note here, that most of the stories shared by participants describe encounters prior to the COVID-19 pandemic. Due to pandemic-related travel restrictions, new arrivals of immigrants, non-status and refugees was limited, and participants were recalling older experiences during interviews. The findings do not reflect the compounding challenges associated with the pandemic, which would be an important extension of the study.
I employed thematic analysis as the primary method to examine and make sense of the extensive data I had gathered (Gioia et al., 2013). This systematic approach allowed me to identify patterns and themes within the data. I began by familiarizing myself with the data through repeated readings and noting initial observations in my notebook. Subsequently, I was able to generate initial codes, categorizing relevant segments of data. These codes were then systematically organized into potential themes, which were reviewed and refined using an iterative process. I eventually wrote down the following chapters according to these emerging themes to form a narrative about my findings.
Chapter 5: Notes on Experiences of Immigrant Non-Status Survivors of Domestic Violence.

This chapter delves into service providers observation of experiences of immigrant women under temporary immigration status who have faced gender-based violence. The participants in this study have highlighted that there are multiple compounding challenges experienced by INSDV that impede their capacity to seek safety. The temporariness of immigration status presents significant challenges for INSDV when accessing opportunities, assistance, and healing resources. They also highlight how the immigration process becomes a tool of control and further harm for INSDV. Cultural and language barriers and fear and lack towards the systems further isolate INSDV, leaving them with limited social networks or support systems. Service providers strive to bridge these gaps but face challenges in reaching INSDV effectively. This chapter explores the complexities of INSDV's experiences and touches on the transformative potential of transnational feminism in understanding the nuanced experiences of INSDV.

Temporary Immigration Status

Participants highlight that the temporariness of their immigration status is one the greatest challenge for INSDV. Temporary immigration status comes with multiple challenges that impede INDVS’s access to various opportunities, assistance, and their capacity to heal. Temporary immigration status creates precarious and unstable living situations and has immense health and mental health repercussions.

Minji, a Legal Advisor, provides essential support to INSDV by assisting them with immigration documentation and securing legal representation. She emphasizes the profound impact of the immigration process on her clients' mental health. As they prepare
various documents, submit applications, and endure the lengthy application process to attain stable immigration status, Minji remains deeply aware and concerned about their well-being, especially after overcoming other traumatic experiences. For some clients, post-traumatic stress poses an additional challenge, as they may lack coping strategies to navigate the application process successfully. Nevertheless, obtaining stable immigration status is crucial for their recovery, security, and ability to rebuild their lives. This is even more daunting for INSDV with children.

*How are you supposed to heal when you’re worried if you’re going to be able to stay? Minji, Legal advisor at a Legal Clinic*

INSDV may desire to stay in Canada, particularly those who fear facing more abuse if they return to their home country or those with children who hold Canadian citizenship, as it risks family separation. Minji’s quote highlights how temporary immigration status exacerbates the challenges faced by INSDV, hindering their healing process. The uncertainty surrounding their immigration status adds an extra layer of stress and anxiety for them. Additionally, the application process to obtain stable status can be manipulated by abusers to perpetuate further harm, compounding the difficulties faced by INSDV in their journey towards safety and security. Most survivors of domestic violence must navigate the multiple and complex legal processes like family law, child custody, employment services, housing services while dealing with their own trauma. This can be an overwhelming experience. But INSDV clients must also deal with the complicated and bureaucratic immigration process to seek residency status to remain in the country while navigating family law, coming out of a violent relationship, and overcoming trauma. Other research participants have also shared their experiences of
navigating and supporting INSDV clients who are seeking permanent status in the
country, which is mentioned later in this chapter. Minji stresses this point when
discussing how living with temporary status and uncertainty, navigating the complex
immigration system adds to stress and anxiety.

*Dealing with family law in itself is extremely stressful...It's a very complicated
system for people who don't understand it and then have that additional stress to
worry constantly on the back of their mind, about their status, the threat of being
removed from the country or even just the possibility that their ex could
potentially report them, that element of threat, even if we've explained to them,
there's nothing they can do to be removed from the country, it’s still often quite
debilitating for people. Minji, Legal advisor at a Legal Clinic*

Melody, who has been working as a shelter manager for almost three decades,
serves INSDV by offering emergency shelter, food, clothing, and various other services
to support their resettlement. Melody reiterated the fear of reporting and deportation as a
unique challenge for temporary status holders. Many of her clients often worry about
departation because their abusers use threats of reporting to immigration authorities to
spread misinformation related to immigration status, deportation rules, and the
application process and to perpetuate further abuse and control. The fear of deportation is
heightened for those with children who fear being separated from them if they try to
leave or report the abuse. In the following quote, she explains how the immigration status
of the abusive partner, if they happen to hold residency or citizenship status in the
country, can be used to control and threaten immigrant women.
If the partner has status, it is definitely a control piece. It can cause victims to stay in abusive situations’ I've had some clients who want to return to their homes, but they can’t leave their kids. It's a challenge if you want to go back...It's something they (abusers) use to control you, especially if they are a sponsor or if they have permanent status. Melody, Housing Manager at a shelter.

Fathima works in an emergency shelter as a client support worker for INSDV. Like Melody, she reports that one of the main reasons why abusive partners can use immigration process as a threat is because there is a gap in information and a lack of knowledge about rights among immigrant and non-status women, which can exacerbate their vulnerability, which I discuss in detail later. Overall, Fathima in her decade long experience with INSDV, has found that precarious or uncertainty about their status in the country adds to the sense of fear and anxiety, which can be made worse since they lack strong social networks. Both circumstances leave room for further abuse by informing their decision to stay in abusive and unsafe relationships. Below, Fathima highlights how these factors lead INSDV into isolation.

They (INSDV) won't be just put in a plane right then and there. That's not how it (immigration systems) works, but they don't know that. Whoever is abusing might be threatening them and telling them, if you speak up, I'm going to get you.

Fathima, Support worker at a shelter.

Gloria is a shelter worker with over thirteen years of experience in supporting clients including INSDV. She adds to this discussion about the impact of temporary status and links it to the lack of community. Gloria also brings up the issue of INSDV’s ineligibility to invite family members, as temporary status holders to Canada. Temporary
status holders like work permit or study permit holders, refugee claimants, undocumented survivors, cannot invite their family members to visit Canada and support them until they have stable immigration status in the country. They remain isolated and alone when dealing with crises and trauma, particularly support with childcare.

There's a lot of anxiety that goes with this because they (INSDV) don't know whether they're going to be requested to leave the country. In one situation, one client’s child didn't have a passport yet, so it’s been another issue trying to obtain a passport for that child, fear of having to leave the country without their child.

They also can't have family come here. So, they're feeling very isolated and alone.

Gloria, Support worker at a shelter.

Gloria, in the quote above, shares one story of an INSDV client who had young children who did not have their passports yet. This client struggled to gather all the documents required to apply for their child’s passport while being on temporary status and attempting to leave an abusive partner. Passport controls can be an additional barrier and risk factor for family separation. Other participants also highlighted that INSDV with young children face similar and other compounding challenges that I will discuss later.

All participants quoted in this section describe the emotional and direct consequences of holding temporary immigration status and its interplay with various factors that shape the immigration journey of INSDV, including access to support, misinformation, and a general lack of family members and community, which is harder for INSDV with children.
Community, family, and feeling of isolation: cultural and language barriers.

Later in my conversation with Gloria, she discussed the stigma around domestic violence as being another factor that shapes the experiences and challenges of INSDV.

_Sometimes they're shunned by their community for having lost a partner. She (INSDV client) was being judged for having lost the partner and not tolerating and enduring abuse...There's a lot of stigma; just being from another country...they (INSDV) don't know who to take seriously, who to believe and who to trust. It's been almost three years that I've been working with her (INSDV client) she's only just now becoming brave enough to stand up for herself. Gloria, Support worker at a shelter._

Stigma about domestic violence in society at large and within immigrant communities can seriously hinder their willingness and ability to seek support. The quote highlights INSDV’s shared sense of anxiety and isolation, as well as fear of being new, alone, and temporarily in a new country.

Juhi previously works at a re-settlement organization that often serves INSDV looking for housing, educational opportunities, and employment assistance. She stressed how the lack of community because of temporary status can limit how INSDV seek safety.

_One of the main challenges is the lack of support networks, they may not have any family at all, they may have very small circles of friends. There is a lack of proper information around the systems here, like the family law, criminal law, the shelter system, child safety...Juhi, Manager at a newcomer serving organization._
Fathima indicates that sometimes INSDV may face barriers to connect with family members who are at home because of the costs of information and communication technologies, as well as lack of phones or long-distance plans. This further alienates them from the limited family support and hinders their attempts to rebuild their lives.

*When they (INSDV) are in crisis they want to speak with their family. But they don't have the money on the phone, and they cannot afford a phone. How are they going to contact them and talk to them? But when we talk about phone and internet it is not a necessity, rather considered a luxury.* Fathima, Support worker at a shelter.

Apart from the financial or connectivity barrier, Fathima also brings up the role of various community members across multiple cultures. She highlights the multiple meanings and role of community or families that inform INSDV’s experience of abuse, seeking support, and coming out of abuse.

*There are cultural barriers, because in many cultures’ situations are handled in a different way. In some culture other members like religion, friends, family, neighbors, everybody gets involved and it can get messy sometimes, but it is also a support system because when other people get involved, there is an accountability and people would be like, why did you (abuser) do that, you cannot behave that way. Or the dad or brothers might get involved and say, you better not treat my daughter or my sister that way.* Fathima, Support worker at a shelter.

In the quote above, Fathima speaks about the multiple roles community members might have in supporting INDSV that is informed by cultural expectations and practices. She
points out that communities can get ‘messy’ added to the stigma of violence as Gloria pointed out. Yet, they might also provide solidarity and collective support in other instances. Their presence alone and show of support might apply social pressure on the perpetrator and benefit INSDV.

Joyce, a support worker at an emergency shelter and transition house, has two decades of experience of supporting INSDV. She pointed out how the lack of community support often creates more reliance on the shelter or agency serving them and the service providers. She also talks about cultural barriers experienced by INSDV in working with service providers.

*They (INSDV) have more needs for support, because many don't have support networks like family, so there is more reliance on the agency (shelter). If there is the language barrier, they require more assistance...Financially, we (in Canada) may do things differently. I was talking with a client about taxes, and they did not understand what I'm talking about... Things like banking, driving school, cooking, and paying rent. I had clients who didn’t understand what a furnace was and how it worked. Joyce, Support worker in a shelter.*

Joyce talks about the over-reliance and need for formal services for INSDV owing to the lack of other options. At the same time, she highlights the cultural differences and barriers that INSDV may face. The cultural knowledge of how the community operates on an everyday basis, like the heating system, banking system, that others may take for granted, can be a learning curve for INSDV.
Fathima adds that language can also be a significant barrier to access information, seek safety, build trusting relationships, and resettle into their new lives.

*Abusers are creating all kinds of credit cards and accounts under the spouse’s name without their knowledge because of the huge language barrier. The spouse might be very new and manipulated... without knowing the language, they (INSDV) might not even know if they can escape. They might not know what to say and how to say and they might be afraid that we (service providers) are not going to understand them. Fathima, Support worker at a shelter.*

Fathima refers to the potential for economic abuse and INSDV’s owing to the gaps in cultural knowledge and language barriers. Often service providers use interpreters or translation services to effectively communicate with clients. Zafar, who works as a legal advisor in a shelter and has decades of experience, has found that using interpretation services has its own set of challenges.

*Communities are small, and some clients are even fearful to use professional interpreter agencies...what if it is someone in their community, they don't trust...and that they not going to violate their professional ethics and report back to their abuser. Some clients will refuse interpreters, which is a challenge... They may speak a fair amount of English... but the legal pieces can be complicated. I might not say things as clearly as I should or make them understand. Then I don't really know if the person is getting all the information. When you have the culture and language barriers, it can be much scarier for the client and harder to reach out... Zafar, legal advisor at a shelter.*
Zafar reference to the fear of being reported back to the abuser and the community learning about the ongoing abuse reiterates what Gloria and Fathima previously pointed out about stigma and the messiness within communities when dealing with domestic violence. However, Zafar briefly speaks about their feelings or tensions about the inability to clearly communicate with INSDV. Later, I will focus the discussion on the experiences of service providers’ when supporting INSDV. Zafar’s quote helps us shed light on another aspect of language barriers and its impact on INSDVs. He also touches upon INSDV’s interactions with the service providers and formal systems and their inability to trust the systems.

Fear and lack of trust in the system

Like Zafar, other participants also discussed INSDV’s inability to trust the systems that are meant to protect and support survivors like the police system, shelter services, etc. Zara, who works as a shelter manager but and has decades of experience as a support worker, found that INSDV are hesitant to access emergency shelters because of the lack of trust.

*I find that some of them are hesitant in accessing shelters because they don't trust the system and they don't know that they can access shelters. My client needed shelter, but she just couldn't believe that we were offering services to her. She felt we were going to call her abuser...we even got another resident to try to talk to her, because the peer support can be helpful, but she still decided to go back.*

Zara, Manager at a shelter.

Zara shared that the client refused to believe the services available at the shelter were authentic and not a trap. Despite communicating the various services and asking another
survivor to convince this client about their authenticity, the distrust towards the systems and lack of knowledge about the services stopped this client from accessing the shelter services.

Melody points out that, even when INSDV are convinced about the authenticity and confidentiality of the services, they may remain hesitant to report abuse because they may wish to protect their partners from getting into trouble with immigration.

*My client was worried about her husband not being part of their son's life. And did not want to get him in trouble with his immigration and get him involved in other criminal things, and so just decided to stay in that relationship. There was nothing else we could really do.* Melody, Manager at a shelter.

Melody reiterates the threat of deportation can also apply to the person perpetuating the harm, which would leave the family at risk of separation. Zafar’s quote below helps explain this phenomenon. Zafar shares the story of a client who remained in an abusive relationship and refused to report the crime. Coupled with lack of knowledge, lack of trust in the system, Zafar’s quote helps us understand how the immigration process remains a tool to perpetuate further harm and control survivors.

*She just went back to him for years and years and she would get seriously assaulted. And every time she went back because she wanted that sponsorship to go through, she wouldn't report to the police because she didn't want him charged because then the sponsorship could be impacted, and she went back four years and then eventually she did get the sponsorship completed and now has her status.* Zafar, Legal advisor at a shelter.
Successful spousal sponsorship is an essential pathway for temporary status holders to apply for permanent residency status in the country. This can push INSDV to remain in abusive relationships longer, making the immigration process a tool that affects INSDV’s ability to seek safety. This fear extends to other state services. Fathima has also found that INSDV are often scared to call the police when they experience abuse.

*Non-status folks might be scared to even call for support like needing medical assistance or ambulance. What if someone comes to their house and they find out that they don't have a status? They may get deported and then the police might get involved.* Fathima, Support worker at a shelter.

Zafar helps this explain further.

*Especially if their partner has status, it's a real control piece and makes it very difficult for a client to leave. They're too fearful to call the police if there's an issue. Even though about 70 percent of women in general in domestic violence situations don't call the police. But I think, it's even fewer in immigrant population or a precarious status because they are afraid that if the police find out their status, they'll be deported. I have seen cases where the guy has made a false allegation against my client and immigration has put a hold on their application and removed them from the country. It's a legitimate fear.* Zafar, Legal advisor at a shelter.

Zafar explains how abusers misuse the immigration process to control their victims and use their immigration status as a power that holds more control, which others have already discussed. Zafar shares an example of false allegation and its severe repercussion.
on a family. Overall, the fear of immigration authorities and deportation, misinformation, and lack of trust in the systems push INSDV into more vulnerable and precarious situations. Later, I will discuss the complex needs of INSDV and draw parallels to how INSDVs’ distrust towards such systems stem from their experiences.

Overall, my participants have shared that INSDV’s lack of a social network or support system, cultural and language barriers, and well-founded distrust towards the system, in addition to their temporary status creates compounding complexities to seek safety and rebuild their lives. Service providers must navigate these complexities to offer meaningful services. While some of these challenges can be interpersonal in nature, many of them are perpetuated by larger systemic issues. In the following sections, I will discuss service providers’ experiences of navigating the above-mentioned challenges and barriers with their INSDV clients and their families.

Academic scholarship in this area has confirmed that immigrant women who experience domestic violence face numerous challenges and barriers to accessing services owing to their immigration status, language, culture, and lack of accessible information, which is also supported by the participant discussions above (Jayasuriya-Illesinghe, 2018a). Studies show inconclusive evidence of there being a higher degree of abuse among immigrant women, but they confirm that INSDV’s experience of domestic violence is compounded because of their immigration experiences and the challenges associated with it. For example, their challenges are exacerbated because of limited host country language skills, isolation from community, family, and friends, lack of job opportunities, and uncertain status (Menjivar & Salcido, 2002). Another scoping review of IPV in immigrant communities in Canada report that often service providers offer
different coping mechanisms for INSDV clients, but there is a tendency to blame the violence on cultural differences in immigrant communities (Okeke-Ihejirika et al., 2020b). Ahmad et al. (2009) tried to understand help-seeking behavior among South Asian immigrant survivors in Toronto and found similar themes reported by the participants in the study. They found that INSDV tend to delay seeking help until the last desperate moment because of social stigma, rigid gender roles, marriage obligations, expected silence, loss of social support after migration, limited knowledge about available resources, and myths about partner abuse (Ahmad et al., 2009).

Academic research and firsthand accounts of survivors indicate that INSDV encounter numerous unique challenges because of their immigration experiences. Immigration status can severely limit their opportunities to rebuild their lives, a topic that will be explored further in the subsequent chapter. Additionally, a lack of trust in the system delayed help-seeking behavior, contributed to more difficulties. This can lead INSDV to be manipulated by their abusers. These consequences are exacerbated by limited resources and struggles to utilize the available support to their advantage.

Service providers emphasize that INSDV are hesitant to place their trust in institutions such as the judiciary, police, and shelters, despite numerous attempts to explain their situations. They portray INSDV as vulnerable and plagued by misinformation, manipulation, loneliness, and resistance to accepting help. While participants are informed by their interaction and experiences with INSDV, Transnational Feminism can offer alternative perspectives to view and understand INSDV and their challenges. For instance, the concept of Third World Women (Mohanty et al., 1991) can help dismantle images of INSDV as oppressed victims and recognize the impact of their
shared histories of struggle against racism, sexism, colonialism, imperialism, and monopoly capital, to explain their reluctance to trust the system, as a form of resistance. It can also challenge categorizing INSDV under a single unified label of victims in crisis. Considering the diverse backgrounds of immigrant women from different races, cultures, ethnicities, and religions, it becomes essential to acknowledge the cultural and historically specific experiences. Overall, transnational feminism highlights that INSDV embody multiple intersecting identities and needs that are shaped by their cross-border experiences. Policymakers and service providers must consider these transnational negotiations to develop effective support systems for INSDV. This shift in perspective also encourages us to consider the limitations of existing systems in accommodating the diverse needs of INSDV, rather than solely focusing on the survivors' capacity to cope. In the subsequent chapters, I explore how transnational feminism can inform the development of systems and policies tailored to the unique circumstances of INSDV.
Chapter 6: Service Providers’ Experience of Serving Immigrant Non-Status Survivors of Domestic Violence.

Participants were encouraged to comment on their experiences of working with and supporting INSDV clients and families. One of the biggest barriers mentioned repeatedly was the systemic challenge - their ineligibility for social assistance - associated with INSDV’s temporary immigration status. This includes provincial or federal governments like childcare benefits, health insurance, employment insurance, housing assistance, etc. For example, Ontario Works and Ontario Disability Support Program are two relevant social safety nets that support applicants with financial support for food, rent, employment support, and health benefits. However, visitors or tourists are unable to apply for both these benefits, leaving INSDV vulnerable. Zara, an emergency shelter manager, explains how this puts a strain on the emergency shelter system.

A lot of times we've had women with no status who stay in the shelter for the absolute maximum. We would go in one year and that is stretching it for us. We've had situations where they've been at the shelter for a year and then have to be moved to a homeless shelter. And that's unfortunate because homeless shelter doesn't have the same level of wraparound services as the violence against women shelter. Zara, Manager at a shelter.

Clients are expected to find transitional housing or other more stable permanent housing before the maximum number of days is exhausted at emergency shelters to make space for others in need. Since INSDV fall out of the general safety net, they tend to stay for the ‘absolute maximum’ stretching the limited resources in the emergency shelter system.
The need to transition to a homeless shelter indicates a systemic failure to support INSDV.

Below, Fathima explains how the pathways to gaining permanent status to secure essential services cannot meet the needs of INSDV in a timely way.

*Immigrant and refugee communities have additional unique barriers and immigration status itself is one. It takes about three months before they can get a health card. So, during those three months, they don't have access to health cards. If they need to go to get a medical assessment done, they will have to pay out of their pocket. Often if they have submitted humanitarian and compassionate applications or submitted their refugee claim application they are waiting for a long time with very limited access to resources. They might not be able to access social assistance, get financial support, apply for subsidized housing, and access medical help.* Fathima, Support worker at a shelter.

Because of the in-determinate wait period between applying and receiving the outcome, INSDV are often without any intermediate support options. They must pay out of pocket for necessary services.

Zara and Fathima highlight the service limitations of shelters and other non-profit organizations that rely on subsidies and aids offered through provincial or federal social assistance, which cannot be used towards serving INSDV since they are not eligible. The service provider must deal with the bulk of the responsibility of supporting their clients with their limited resources from donations, charities, and other ad-hoc funding sources. While I did not ask about the operational and funding structures of GBV shelters and
other services, participants have brought up the need for more robust and sustainable funding that I will discuss later.

**Access to affordable housing:**

Zafar also points out how the lack of affordable housing and other essential services impacts INSDV. In most cases, INSDV are not eligible for much needed housing subsidies to move out of emergency shelter services.

> Whether it's a refugee claim, a humanitarian claim, or a sponsorship situation, you don't qualify to apply for subsidized housing. It can be a major issue because we all know how unaffordable housing is. Normally if you leave an abusive situation, you've lost your housing due to abuse. And if you are low income, you may qualify for subsidized housing with a special priority. So instead of waiting years, you might just wait a few months. But if you don't have an application for permanent status, then that does not apply to you. Zafar, Legal advisor at a shelter.

Zafar sheds light on the current housing crisis across Canada. Multiple non-profit organizations have reported that housing is one of the biggest barriers for someone fleeing violence. There are housing benefits that survivors can use to find affordable housing like the Housing Stabilization fund, municipal housing allowance, provincial housing benefits, rent bank, Social Assistance Shelter allowance, among others. (Toronto, 2021). INSDV are ineligible to apply for such programs.

Joyce shares her struggle to offer affordable and supportive housing options to her INSDV clients, also indicating the long waitlist. She further indicates how regional or
provincial involvement in finding housing option further diminishes INSDV’s chances of receiving any housing support.

_They (INSDV) don't qualify to apply for subsidized housing programs. Housing that's affordable and supportive, because a lot of our supportive housing goes through regional or government housing. That is a struggle. I had clients who didn't qualify for any of those things (housing benefits). And a lot of housing already has a lengthy wait list._ Joyce, Support worker at a shelter.

Zafar and Joyce highlighted INSDV’s ineligibility and the state’s lack of alternative forms of support for INSDV. Gloria highlights how this creates a significant roadblock for INSDV to come out of abusive relationships and has serious economic implications in their lives.

_A huge issue is that she (INSDV client) doesn't qualify for housing, because she doesn't have status. So, she's paying market rent for a unit, which is thousand dollars a month. It is a lot of money for a single person. She's in a small one-bedroom apartment in the basement of a complex where she has stairs that are so steep to get out with the baby. She is missing six hundred dollars a month, a significant part of her budget by not receiving any support._ Gloria, Support Worker at a shelter.

Gloria highlights the compounding challenges of INSDV who leave an abusive relationship only to navigate multiple complex systems that are not designed to support them while also having young children. The impact of lack of affordable and accessible
housing options for INSDV has severe economic consequences, negatively impacts their overall wellbeing, and affects service providers capacity to meaningfully support INSDV.

**Access to child-care:**

As has been discussed previously, challenges facing INSDV are exacerbated for those with young children. INSDV receive little to no child-care support. Melody also uses the word challenge to describe the process of securing any assistance for her INSDV clients with young children.

> Securing any kind of housing and social assistance, (is a challenge) because they (INSDV) don't have access to any kind of social assistance, including child benefits, which is afforded to pretty much every parent in Canada, they don't get any of that. Melody, Manager at a shelter.

Zafar shares that dealing with family court and child custody is complex for INSDV because of their temporary status. This can be even more complicated with their children’s status is different from theirs (e.g., temporary resident v. citizen) and if their abusive partners have permanent status. The fear of deportation explained previously is heightened in such circumstances.

> There's family law issues and it's a real fear that if ‘I'm deported, what happens to the children?’ If you have children that are Canadian born or children have some sort of status, especially if dad has his status here, that can cause significant concerns... often INSDV don’t qualify for child benefit, for example, when you're here on a work permit, you don't qualify for any of that. That’s a significant financial barrier. Zafar, Legal advisor at a shelter.
Once again, Zafar describes the complexities and vulnerabilities presented by immigration status when navigating different legal systems such as family law. These complexities require targeted services to serve INSDV and their children. Zara shared that INSDV often must rely on precarious jobs with odd hours; however, the lack of social networks and support makes it difficult and nearly impossible to secure childcare that would allow them to work. This pushes INSDV further into poverty and hinders their chances of re-establishing their lives.

*Daycare is always limited to nine to five. There are precarious status women (INSDV) doing jobs that require them to be very early or come home very late. The daycare times are just not conducive for them being able to work. Even in a situation where they start an agency process and they can get a work permit, this still ends up being a barrier. ‘Now I can work, but I don't have anybody to care for my children’. Zara, Manager at a shelter.*

Zara’s client’s story offers insight into the challenges faced by INSDV and vital gaps in services to meet their needs.

**Access to Legal aid:**

Minji shares that one of the first things she supports her INSDV clients is with legal support; however, this presents several barriers. Qualified legal representation means legal support that can deal with family law, immigration law, criminal law, and their intersections and interaction in INSDV’s lives.

*The first is helping them get legal representation. That's a really difficult thing to do because there's so few resources and they are underfunded. If they (INSDV)*
have any significant assets at all, they won't be able to get legal aid. But then it can be an issue of balancing, if they can afford a lawyer or if they can pay for housing, that can be a struggle for people who have children. Because accessing affordable or temporary housing or transition houses can also be a challenge.

Minji, Legal advisor at a Legal clinic.

Often qualified legal support who is aware of immigration law has not dealt with the other systems impacting INSDV lives. Legal aid is limited and inadequate to meet the needs of family law, let alone immigration processes. She also highlights various loopholes and bureaucratic issues like owning assets that creates more barriers to access the available limited legal counsel.

The challenges highlighted by my participants are in line with previous studies. (Holtmann & Rickards, 2018) in their study in New Brunswick found that there is lack of understanding and collaboration between service providers of how immigration experiences and policy intersect with DV or IPV. They found that there are financial issues like lack of funding and resources within the service sector and urged better structural and systemic support. The influence of neoliberalism on immigration policies in Canada have directly and indirectly increased the vulnerabilities of immigrant and newcomer women to IPV. Another study criticizes narrow immigration policies for being exclusionary and not meeting Canada’s ideals of multiculturalism (Jayasuriya-Ilesinghe, 2018b).

Transnational Feminism offers a pivotal perspective in redefining the narrative surrounding the challenges and exclusion faced by INSDV by accounting for the overlapping aspects of race, class, caste, religion, and other identities when informing
policy and action (Collins, 2015). Transnational Feminism incorporates and considers the influence of larger global systemic issues such as colonialism, imperialism, extreme forms of capitalism, structural racism, and gendered racism (Zerbe Enns et al., 2021). By adopting a Transnational Feminist lens, we consider the impact of the global, capitalistic economy on shaping and understanding GBV services. This perspective questions the lack of fundamental support systems, like legal aid, childcare, and housing assistance for INSDV, framing these issues as essential needs concerning rights and dignity. It also helps recognize the system's failure to provide adequate, meaningful, and inclusive support rather than focusing on INSDV's ineligibility to access services. Additionally, Transnational Feminism encourages us to critically examine how GBV services operate within the context of globalized capitalistic market forces. It examines housing aid and child tax benefits not merely as humanitarian necessities. It puts it in context of Canada's market, political climate, humanitarian obligations, and transnational relationships. Through such examinations, guided by the lens of Transnational Feminism, advocates can develop strategies to convince policymakers to account for the specific needs of INSDV and work towards developing more equitable services. By considering the broader structural and global factors that contribute to the challenges faced by INSDV, Transnational Feminism offers valuable insights for shaping inclusive policies and support systems.
Chapter 7: Service Providers’ Experience of Navigating the Immigration Process:

An immediate response to reduce some of the above-mentioned structural barriers that prevent service providers from offering meaningful and important services to INSDV is to ease the process for seeking permanent resident status. Usually, who wish to immigrate to Canada aim to obtain a Permanent Resident (PR) status before arrival. In most cases, INSDV are relying on their spouses for sponsorship or arrived through other temporary streams such as work and study permits. INSDV often lose sponsorship or immigration support from their spouse and therefore seek exemptions to apply for PR. As a result, INSDV need to apply for PR under Humanitarian and Compassionate considerations (H&C). H&C is a special stream that allows the applicant to apply under exceptional circumstances and is only open to those applicants who cannot apply for PR within Canada under any other stream. The other option for INSDV is to apply for a Temporary Resident Permit under Family Violence. Service providers would often support INSDV who wish to remain in the country to navigate the application process and connect them to social assistance, stability, and support. Both application processes demand excessive documentation and evidence gathering of the abusive situation. Service providers would help INSDV to acquire legal support, build the application package, gather supporting documents and letters, accompany them to legal meetings, among other services.

Most of my participants did not use or know enough to comment on the newer Temporary Resident Permit under the Family Violence. However, a significant number of my participants have directly worked with clients to submit PR under H&C. Everyone discussed how H&C applications are cumbersome, long, and expensive for INSDV. The application process is bureaucratic, with multiple challenges for INSDV who have
children, or who have disabilities. I highlight some of the main concerns and challenges shared by my participants about assisting INSDV clients with H&C and Temporary Resident Permit applications.

Zara shared a positive and successful story of helping a family seek safety and remain in Canada using the H&C application process. The successful H&C application allowed INSDV to stay and resettle in this country and over time secure social support and protection. Zara mentions one of biggest strength of the H&C application in the following quote.

*The lawyer compiles all the documents together and submits it to the IRCC, once we get a confirmation that it's been received and then processed, there's usually a confirmation or receipt number. We can use that to start applying for housing. That's probably the only positive thing that I could say about it.* Zara, Manager at a shelter.

Once an application is submitted INSDV do not have to wait to become eligible for housing support, health care, and other necessary services. However, Zara also mentions that this feature is possibly the ‘only positive’ about the H&C application process.

**Uncertainty and burden of proof:**

Building on Zara’s criticism of the H&C application process, Melody shares the experience of a client with a learning disability who was rejected. She struggled during the immigration interview and could not provide adequate documentation. When she appealed on the grounds her of client’s disability, they faced an even higher burden of proof.
We were working with this lawyer to help her to understand why. They (IRCC) want something from back home showing her medical condition. But back home she wasn't going to school, or she wasn't passing the class...(yet) the system here wants to know, if she was diagnosed, they need to see the paperwork. Melody, Manager at a shelter.

Melody explains how she needed the assistance of a lawyer to understand the grounds for rejection. Other participants also shared that while they were successful in processing some applications the chance of getting accepted is “50-50”.

Joyce shares how the uncertainty of the outcome can become a nerve wracking and challenging experience for service providers and INSDV and their families.

They were (INSDV family) making this plan for deportation, book tickets and everything. She had to plan that she was getting deported back if it (H&C) wasn't approved. I never went through that experience before, and it was so hard for the family...And it came right down to the last, can they stay or are they getting on a plane? Joyce, Support Worker at a shelter.

This family submitted all documents, including support letters and was able to successfully demonstrate how well they integrated into the Canadian system, like enrolling her children in school, getting Canadian work experience, and demonstrating that they were under threat from abuser if they were deported. Despite all this documentation, Joyce was still uncertain of the outcome. This family was successful, but Joyce stressed the heightened anxiety and fears for her as a service provider and the family.
The uncertainty of the outcome is heightened in cases of H&C applications since the burden of proof is very high and the documentation can be difficult to gather. For example, in the case of Melody’s client, proof of a diagnosed disability might not translate over borders. Melody notes the state system’s inability to trust service providers despite being qualified professionals when they support an immigration application.

_We don't want people to abuse the system, but you can't just get some documents... it gets really hard. As far as being a worker, we trust them because we are with them day to day, we see it. But to provide that information is tough._

_Melody, Manager at a shelter._

Zara further highlights how the proof of documentation is a challenge and sometimes an impossible task.

_Proving cohabitation is something we have to do for all the women, regardless of status, and that's always an issue. So, imagine, if your name is not on any bill...how do you prove that you guys were living together. When you have no state, it is can be very difficult. You (State) are funding violence against women shelter to do this work, I would hope that you could take our word for it._

_Zara, Manager at a shelter._

Documentation requirements are a major challenge for service providers. They are often responsible for supporting their clients gather these documents, which are impossible to acquire, can hinder service providers’ ability to negotiate and advocate for their INSDV clients.
Zafar recognizes another challenge that impedes his capacity to support INSDV. He points out that the outcome of the application process is often left to the discretion of one IRCC officer who is handling that specific case. This could mean that the representative’s lack of intersectional understanding or general awareness about domestic violence can negatively influence their decision making. This can be especially challenging when the focus is on proof and documentation of obscure and hard to gather evidence.

*We've had cases where it's one person making that decision, and that's the danger with the application. The lawyers will say, ‘I just found out we have that officer. The chances of being successful are not good’. Some of them are difficult to deal with...The strength of these applications is for black and white domestic violence cases, where an officer can see an ongoing pattern of abuse... But cases where maybe charges haven't been laid, which are most cases are because of power and control, in that case the officer may not fully understand, why there haven't been calls to the police, there haven't been injuries. Those are a bit more precarious when you're dealing with one officer who doesn't get the dynamics of domestic violence.* Zafar, Legal advisor at a shelter.

Zafar shares how discretionary power of the representative can influence the outcome. The uncertainty of outcome, burden of proof, and lack of trust towards service providers makes immigration application a challenging experience. Coupled with the experience of domestic violence and trauma, INSDV may often lack the patience to deal with this cumbersome process which has the "sad uncertainty".
Structural gaps and barriers:

Participants highlighted that there are other structural barriers that can impede INSDV’s immigration process, including legal fees.

*The bigger issue is availability of lawyers. They're just overworked, and the process takes forever. With regards to the application process, the fees are also pretty high. Sometimes the women go through the work of collecting all this information, proving that they should be in the country, getting all of these support letters, and then there's a fee they have to pay. Where is the money going to come from for them to pay the fee and submit the application? That's also a huge barrier.*” Zara, Manager at a shelter.

In addition to finding qualified legal assistance, Zara hints at systemic challenges, such as funding structures, delayed processing time, and an overall sense of frustration. Despite the enormous efforts required to support INSDV clients, there are very few resources that they can tap into for help. Zafar further shares how that affects him as a service provider.

*It's so imperative that you get things right. It's challenging to fill out that application on your own but finding legal services is very hard from an immigration law perspective.* Zafar, Legal advisor at a shelter.

Zafar’s touches on the pressure felt by service providers trying to fill out the complicated application on behalf of their clients to try to fill in the service gap. Service providers feel overwhelmed by this immense responsibility that could impact the outcome. The stress and anxiety of service providers will be discussed later.
Gloria shares that she has found navigating the immigration system and specifically the requirements for documentation to be a challenging experience.

*Even when you go on the immigration website to submit documents and forms or questions or the web forms the categories, they are not a very clear process. It's very difficult to follow when somebody has a language barrier or who doesn't understand English as well. The stress that she's enduring is huge... we submitted web forms, and she doesn't always get validation that the forms been accepted. We're going by ‘hopeful that it's been accepted’. Gloria, Support Worker at a shelter.*

Gloria shares that the language barrier, while challenging for her as a service provider, is heightened for INSDV. Joyce agrees and shares her experience.

*It's hard to understand or to find information. English is my first language, yet when I'm looking at stuff, I'm having a hard time understanding this or how to fill in this form or what are we doing first? Joyce, Support Worker at a shelter.*

Such attempts to navigate the complex and difficult systems can make service providers feel even more discouraged about the limited resources. Zara explains that accepting social assistance while on temporary status can have negative implications on getting status in the country. Integration within Canadian society and self-sufficiency often make immigration applications stronger, and acceptance of social assistance on the file may make the applicant appear to be a burden.

*But that (accepting social assistance) also looks bad on them, that they're not able to provide for themselves if they were to get status in the country. A lot of women*
deal with this barrier of, why should I get social assistance if that's going to look negative on my immigration application? And if they don't, they don't have access to any support. So, a lot of times they're just in huge limbo, just waiting for something good to happen. Zara, Manager at a shelter.

Zara’s quote implicates bureaucratic systems as playing a direct role in pushing INSDV into further vulnerability. Zara’s mention of limbo indicates the frustration of working in a system that is strained and too rigid to suit the needs of INSDV clients.

Most of the study participants did not have any experience with the more recent stream: Temporary Resident Permit under Family Violence (TRP). This trend could be related to the public health measures taken during the pandemic. Travel restrictions meant that only few immigrants were allowed to enter the country in the last few years. Participants also noted a drop in the number of INSDV clients in the last few years. The few who have used the stream said it was a welcome change for INSDV. It reduces the application processing time and clients can simultaneously apply on the grounds of H&C. Pooja has supported a few clients in this way.

*They must label it family violence and the aim are to try to get that process faster. If you're already doing H&C, it's not that hard to attach an additional temporary residence permit it's a copy and paste in some other forms.* Pooja, Legal worker at a Legal clinic.

Zafar also shares that the TRP has been a helpful addition to the immigration system when applied along with the H&C.
It was very helpful for her (INSDV client) because one of the things she wanted to do been able to get work and be able to support herself and also potentially then look at other means to stay if necessary...like on a humanitarian application, you have to be working. Zafar, Legal advisor at a shelter.

Pooja also noted some of the challenges associated with TRP. One is the logistical challenge of finding sufficient legal support for two applications due to legal costs.

*If you have a good lawyer who cares about their clients and maybe is willing to work for free...but how do you ask them, ‘can you also do this other application for free?’ even though it's not that much more work it’s that much more hours to ask, especially when we’re making tons of these referrals to the agency. Pooja, Legal worker at a Legal clinic.*

Pooja once again hints at the challenge of limited services. Another challenge is that if the TRP application is accepted, it grants the applicants six months, which is a very narrow window for INSDV to navigate multiple systems, establish themselves, and find sustainable solutions.

*TRP under family violence normally grants you six months. I think the government sees these applications as something that will be resolved in six months and that's it. And if it takes longer to resolve, that's a big challenge. They expect someone to get right back on their feet in six months... The fact that this exists now, having some kind of access to status is a strength, but the problem is how narrow it is and how limited six months is, it’s nothing. Pooja, Legal worker at a Legal clinic.*
Minji comments on how the challenges with application go beyond language barriers and include issues with access or using technologies. Computers and specific software are required to access the immigration forms and many INSDV might not have access to a secure device and know how to use them.

*Are they intentionally making it difficult for people to fill out these forms? Is it intentionally challenging? Is it intentionally inaccessible? And whether that's because people are sitting here thinking, in the grand scheme of things, we don't want, immigrants to come to Canada or other racist ideologies could be involved in that. Or to reduce the workload of people who are reviewing the forms?* Minji,

*Legal advisor at a Legal clinic.*

Overall, this chapter shared service providers’ experiences of navigating the immigration system on behalf of their INSDV clients. The systems that are built to support service providers and offer meaningful services to INSDV are failing both in many ways. The immigration system which opens up limited resources and allows INSDV to gain stability does not interact with other services. For example, demanding proof of documentation can be read as lack of trust towards other service providers. The participant narratives support previous research on the unrealistic expectations from survivors and professionals helping them (Alaggia et al., 2009). In the next chapter, I will discuss service providers’ experiences of working with other stakeholders within the service sector and how they navigate the multiple and complex systems to support INSDV.

As highlighted in Chapter 3, Transnational Feminist theories offered insight on how multiple forms of patriarchy and histories of colonization shape definitions of and
responses to GBV in countries like Ghana, India, and China (Bowman, 2019; Nayak, 2003; Zhang, 2009). This involves transnational forces, like Western feminist movements and national politics. GBV can be better understood when the hierarchies and divisive ideologies of colonization, globalization, and capitalistic market economy are accounted for. Extending this framework to examine and understand the Canadian immigration systems and their specific policies concerning INSDV would be an intriguing endeavor. Immigration systems are inherently divisive tools that create boundaries between borders, people, and communities. These policies are built on colonial racist ideologies.

Participants also reiterate feeling similarly in their experiences, sharing the incapacity of the immigration systems to comprehend the needs of INSDV. A broader question still remains: can these immigration policies and systems effectively support INSDV when they are fundamentally rooted in anti-feminist principles that create divisions between insiders and outsiders?
Chapter 8: Service Providers’ Capacity and Ability to Serve Immigrant Non-Status Survivors of Domestic Violence.

This chapter focuses on the service providers’ capacity and ability to navigate the multiple and complex systems hinted at in the previous chapters. Despite the complexity and lack of social and systemic support, service providers continue to offer this critical support to INSDV. Participants were asked to reflect on their everyday practices and provide insight into their preparedness and strategies to support INSDV. All participants mentioned an urgent need to improve and change existing systems, including addressing the lack of trust and confidence, a need for more training, resources, and need to better prepare to deal with the complexities associated with INSDV.

Joyce felt a disconnect due to gaps in the services and communication across the services.

*Sometimes it feels the systems don't work together. It seems like we were doing it in silos, but they are all connected...Sometimes we are doing things that are not what our agency does, it’s outside of our scope. But they are no other support that would have been able to do all that. There's a gap in who supports these clients.*

*Joyce, Support worker in a shelter.*

This gap also means most service providers are pushing beyond their capacity and ability to help as many and as much as possible. Zara feels that this does INSDV a disservice.

*Because right now I feel like we're doing them (INSDV) a disservice by just playing a waiting game... And it's unfortunate because in all my experience,*
immigrant women are always very eager to start getting their life on track, and they're just constantly being blocked by things. Zara, Manager in a shelter.

Zara feels that meeting her client’s needs is beyond her control, and it impedes her ability to help her client heal. Juhi shares feeling similar, that despite deeply caring about her client’s well-being, her inability to truly help leaves her feeling frustrated and dissatisfied.

*When we are working with clients going through these things, it can be traumatic for the staff person too. So, there are a lot of burnouts, people are super sympathetic and very invested, but it can be too much. Self-care is important.*

*Juhi, Manager at a newcomer serving organization.*

Juhi notes the individual impact on her, but also shows that there is high burnout and stress among service providers in general because of complexity of clients’ needs. Joyce shares similar feelings and struggles of working with limited resources and how that impacts high turn-over in these positions.

*There’s only so much knowledge... they move on, it can become very overwhelming because of the work. You got to be careful. You don't want to burn out either. It takes a team to embrace it. I know we love our work. We know we have a passion for the work we do. But it is hard. I think staff always struggle with that burnout because we do not have enough resources. But is our shelter at full capacity? It is.* Joyce, Support worker in a shelter.

Participants were asked to share their experiences of working with other stakeholders and service providers, especially those where INSDV clients are referred to. Participants
highlight need for more training to develop a better understanding of domestic violence and the unique needs of INSDV clients. For example, the intersection of immigration status, employment opportunities, and experience of violence creates a complex interplay of needs that require thoughtful interventions and support systems that are often unavailable. Service providers who work in the judiciary, and immigration department lack the necessary understanding of the compounding challenges in INSDV’s lives. One of the main reasons for this gap as highlighted by Minji is a lack of training and knowledge.

* A lot of people still lack an intersectional approach to issues that people face, for a woman with children who can't get a job either because she's caring for the children, or because her education isn't considered valid in Canada...or someone who has precarious status and trying to get a divorce while dealing with an ex, ...training is still something that's lacking...there are a lot of judges who will come from a criminal law background and they're making decisions about family law with no training in family law, having never worked in a family law file in their life. Without an understanding of the intersection of race, socioeconomic status, and immigration status it's going to be more likely to have an unfair outcome. Minji, Legal advisor at a legal clinic.

Melody agrees with Minji about the need for better services but also highlights how services within the emergency shelter services and other non-profit also need revision.

* We have training on empathy and listening, but when it comes to resources or how we can navigate the system, we still need more training. Even when we refer a client to someone or some other agency, a lot of advocacy is needed, a staff has
to go with them because that takes away the pressure from the client...but we can only do so much. Melody, Manager at a shelter.

While service providers are skilled at being empathetic, they feel unequipped to handle the multiple systems and processes to support INSDV clients. Melody also adds that there are limitations to revising training without systemic improvement and more resources.

Participants shared the important role of interpreters since interpretation or translation services are sometimes the only medium of communication with a client. However, it can be challenging when looking for an interpreter for a specific dialect of different languages. Confidentiality is another issue if local communities get involved, which was discussed previously in relation to stigma around domestic violence.

Sometimes, service providers cannot guarantee the quality of interpreter services when assigned centrally. One participant shared an instance where a lawyer removed a restraining order because of inaccurate translation services and consequent miscommunication. Even though instances like these are rare, it highlights the significance of proper translation services for INSDV service delivery.

Participants admit that there is a systemic gap to support service providers. Pooja highlighted that shelter staff often lack the training or understanding to complete immigration applications, which has a significant impact on judicial decision-making. For example, Pooja recalled her interactions with a client who was denied permanent residency status because the abuse she endured was capture as ‘severe verbal abuse’ without sufficient detail. They did appeal and succeed eventually after a lot of lobbying. The lack of training is made worse since many shelters or transition houses operate with
limited resources, are often short-staffed, and lack reliable and consistent funding to improve their services.

There are lawyers who are really good at the legal side, but not necessarily the client care side and vice versa, it's rare to have someone who is good at both... anyone can supposedly apply for immigration if you put things together.

But that is not enough... I get a lot of calls from transition houses where they don't understand the immigration system or what someone's immigration status is. You can tell our systems are super complicated. People supporting these women are not trained and they often have almost no experience with immigrants... There's this huge gap and no one really being available to do this... Organizations are doing their best within the system. Everyone's over overwhelmed and overworked.

Pooja, Legal worker at a legal clinic.

Joyce agrees with Pooja on the capacity issues for front line shelter staff, especially when she has to take on multiple responsibilities, which she is not trained or qualified to handle. She feels scared and anxious about getting it wrong because her work impacts INSDV’s lives significantly.

That's the struggle, sometimes we have had to take things on, we're doing different forms, looking up information, and it's not my expertise. I don't want to get this wrong... It's unfortunate if some clients don't get the same opportunity as others because they haven't been able to access someone who knows the process or what they're doing. Joyce, Support worker at a shelter.
Participants who are professionals at the shelter and transition houses agree that they often lack the capacity, resources, and training to offer service to INSDV. In addition, they are juggling multiple responsibilities with very limited resources and funding. However, they also feel that legal advisors, lawyers, the immigration department, child services, and other stakeholders need a better understanding of the needs of INSDV. Participants from shelter and transition house point out that lawyers and judges do not take the time to communicate with clients, especially with clients who may need longer to articulate and express themselves. Owing to the time crunch and limited resources, lawyers would often rush without asking important questions that are critical to determine clients’ safety. Clients also end up feeling dismissed and unheard, leaving service providers from the shelters and transition houses with the responsibility to advocate on behalf of their clients.

*Sometimes lawyers wait, and they compile all the application, the supporting document to submit one application... We sometimes have to advocate for them to submit the application first for us to get a confirmation number and they could submit supporting documents later on. I've seen and heard so many situations where lawyers are very dismissive of clients, and I don't think it's their intention. But clients are going through stuff, and it's hard for them to articulate what they want to say... lawyers don't take into consideration their trauma... we'd like to work from a trauma-informed practice, and we want to teach women to advocate for themselves and to learn to communicate and stand up for themselves. And I feel it would be great if they have that opportunity to do that with lawyers. But I*
just find that lawyers don't give the space to allow that to happen... Zara,
Manager at a shelter.

Zafar adds that other stakeholders, like lawyers, police, child services do not necessarily respond from a trauma informed lens and lack the nuanced knowledge about domestic violence and various forms of it. He highlights how cultural biases or understanding might interfere with decision making, especially when someone holds positions of power. Zafar points to the need of education and awareness to improve services for INSDV.

People who have the best of intentions and work with newcomers, don't have an understanding of domestic violence. Sometimes they would say things like ‘we just need to help them get back together’...I find that that can be more challenging. Clients can sometimes turn against us when family services or children's aid become involved because sometimes, they don’t have that cultural understanding...there is a judge that's well known from a local perspective and has literally said in court, ‘all women lie’. How do you get away with that? Because the lawyers are afraid to complain. When I see the biases, I'm sure it's the same thing with immigrants. Zafar, Legal advisor as a shelter.

Zafar shared an incident about a police officer remarking “He has more marks (wounds) than her” and shares the possible harmful interpretations of such an observation without the required knowledge to understand varied instances of strangulation in domestic violence cases. Such encounters with police contribute to the lack of trust towards systems amongst INSDV that I discussed earlier.
He's got scratches on his chest. That's exactly where I expected them to be because he held her. But there is no knowledge of that, no thoughts. And that just is so troublesome…I really wish the people who have the power in the systems and are making decisions have accountability to try to make sure that they are up to date on the reality. Zafar, Legal advisor as a shelter.

Gloria also shares another example of an INSDV client who was dismissed by the police. As discussed earlier, INSDV often feels a general distrust towards systems and these instances demonstrate reasons of why the distrust are sometimes legitimate.

Misinformation about immigration system and authorities are often used as a weapon by perpetrators to further harm. And, owing to lack of community, friends, and support system they feel even more vulnerable. The police’s lack of knowledge about INSDV cultural needs and context, often makes their service inaccessible for INSDV.

When she called the police, all they had said was, ‘Oh, it's a marital dispute, you need to communicate better with your partner.’ They didn’t support her, didn't take her claims of abuse seriously, which made her feel like, they weren’t going to believe her. She’ll risk getting deported if she tries to make these claims and whatnot. Gloria, Support worker at a shelter.

Zafar highlights the informational gaps between service providers and other important stakeholders. There is an enormous burden on applicants to gather proof of abuse to support exemptions when applying for PR. Service providers are often responsible to find supporting documents, which can be difficult to find, such as proof of cohabitation or an official diagnosis of disability as mentioned before. The immigration department is often skeptical of paperwork collected by service providers and demand
further proof of abuse. On the other hand, the immigration department offers very little information, transparency, and accountability, made worse by the limited training undertaken by staff members. There is often little explanation provided for the final outcomes of the submitted applications.

*I would be curious about the types of training they (immigration agents) get. Who is doing the training? How often do they get the training? Is there any type of review of their work, for example, this officer approved 10 percent, this approves 30... Are there particular biases that are being missed by having one person look at it (applications) and not really talking to others about it?... There need to be some regulations... because these are their lives...there really needs to be more to protect and help clients get the assistance that they need, informed and qualified.*

Zafar, Legal advisor as a shelter.

Zafar recommends that all service providers and stakeholders be more accountable and improved regulations to offer better services to INSDV. Pooja agrees that the lack of communication about clients’ needs, or situation often leaves room for misrepresentation, which can lead to the incomplete or incorrect submission of documents to the judiciary or immigration department, leaving further room for rejection. Often the gap in knowledge, training, and understanding within the judiciary or immigration department leads to negative outcomes for residency applications.

*Decision makers who received applications don't really get it...When you receive a negative result, you read the reasons. And often that’s just completely because of not understanding...I've seen negative decisions from decision makers where they write it off as a ‘violent bad relationship’, or it's just a ‘relationship*
breakdown’ and sort of discount people's experiences. Pooja, Legal worker at a legal clinic.

Pooja also indicates the lack of nuanced knowledge about INSDV’s needs and gender-based violence among service providers but especially decision makers.

Fathima attributes some of these knowledge gaps to the fact that few service providers have intimate knowledge of different immigrant communities. There is a gap in cultural understanding about multiple cultures, races, communities, and their needs among service providers. This gap often creates assumptions, biases, and judgements in the way service providers approach INSDV clients. These biases can have a negative impact on INSDV’s well-being, and the overall outcome of the services. This also creates a poor foundation to build trusting relationships between service providers and INSDV clients. However, participants also caution against tokenistic representations of people of colour among staff but propose cohesive training on diversity, equity, and biases for all service providers to truly cater to the needs of INSDV.

Everybody talks about being inclusive, doing more anti-racism, anti-oppression work, but when it comes to action, there is very minimal. Cultural barriers, language, and racism come between us. Often where there is a client from a different community, service providers will be asking, ‘Is this because of your culture? This might be okay in your culture, and this might be because of your religion?’ But they will never ask that if their client were white...Automatically, we’re judging them, and we are judging and stereotyping the entire community. Fathima, Support worker at a shelter.
While discussing the capacity of service providers, and their confidence in offering services to INSDV, two of my participants who were also immigrants to Canada, shared their personal experiences of witnessing abuse and domestic violence. One of them had temporary resident status while managing abusive relationships and navigating the immigration system. The other participant accessed emergency shelter services to come out of abuse, find employment opportunities, and resettle in Canada. Eventually, their experiences and desire to help, led them into this profession.

Joyce shared that many service providers have a direct connection, a high degree of passion, and commitment toward this work. In most instances, they have invested time and energy to learn on the job and take up whatever available training opportunities to improve. Without the extra effort and training, new front-line staff lack the skills and knowledge to serve INSDV.

_Some of our newer staff probably wouldn't quite understand those processes._

_There are different barriers. Until maybe you actually provide service and go through the walk with the client, it would be hard to understand._ Joyce, Support worker at a shelter.

Juhi agrees with Joyce and shared that it was because she felt inspired by her personal experience of witnessing gender-based violence and felt motivated and encouraged to get into this profession. However, she has learnt quickly to establish herself successfully to serve INSDV.

_I was young and not super experienced, and my mentor happened to be with me._

_And he sorts of took over and helped me and mentored me in supporting this_
person... because I've been in this role now for quite a long time and I also have an interest in the topic, I was doing leadership training for young Latinos on violence prevention... Through my time at work, my own readings, and training that would become available for frontline workers, I would always take them. So, I did extra training, sessions, webinars, and homework. But that doesn't mean that all frontline workers have it. Juhi, Manager at newcomer organization.

Zafar shares Juhi’s experience of learning on the job by going for every available training, but also highlights the challenges of learning in a system reliant on a few motivated service providers. It also indicates a gap in qualified service providers who have the cultural understanding and knowledge to support INSDV.

Having done this a long time, I've had a lot of opportunities for various training. But for someone new, I could see it being a struggle. If you didn't have those skills or if you had a client who really doesn’t want to talk about their culture... Some clients are hesitant to share because of the safety level, the risks that they're taking within their culture to leave a situation or choose to stay. Zafar, Legal advisor at a shelter.

Gloria senses a lack of knowledge and know-how about navigating the multiple resources when serving INSDV. She feels helpless when she cannot figure out how to support her clients.

I want to help her the best that I can. I don't know how; I don't know how to. I don't know who else to reach out to. I reached out to different shelters in southern Ontario that may have more experience with immigration, but I have not really
gotten any response, or this doesn't meet their mandate, so they can't really give us information. So, I don't know, it's hard. How else do we get information if no one else shares that? Gloria, Support worker at a shelter.

Her comments are reminiscent of the silos and isolation of doing this work and tendency for burnout and stress while trying to offer services that fully meet client needs.

Overall, participants shared feelings of frustration and helplessness when it came to meeting the needs of INSDV clients and working with other service providers like police, judges, immigration officers, and other key decisionmakers. While they recognise the gaps in their own service delivery, and recommend training and education, many of the urgent needs demand a systematic overhaul of multiple interconnected systems. The lack of a nuanced understanding of gender-based violence, immigration processes, the needs of INSDV coupled with limited funding and resources has created a volatile and precarious support infrastructure for INSDV, discouraging them from seeking safety and pushing them into more vulnerable situations.

A general sentiment expressed by the service providers in the study was “there is only so much we can do.” This resonates with similar studies of IPV service providers, including a recent study in the US that found that there is a higher demand for services that organizations do not have the capacity to meet. Like the participants, the study described the rigidity of service delivery timeline for housing, employment, and other support services that service providers cannot meet. The study also advocated for a larger policy shift, improved funding, and inter-agency collaboration (Wachter et al., 2022).
The lack of cultural understanding that some service providers felt can be understood as a co-relation of ‘white privilege’ being intricately connected to ‘colour blindness’, which Donnelly et al. (2005) found in their US study of supporting racialized clients in GBV shelter services. Although the participants in this study did not discuss this explicitly, they did mention the lack of representation of diverse communities among service providers. Finally, this chapter captured some of the emotional stressors for service providers, but we need more research on the mental health impacts and wellbeing of service providers more generally but especially those catering to the complex needs of INSDV in Canada and elsewhere.

The insights provided by the participants underscore the pressing need to develop more robust support systems and infrastructure to support INSDV. These observations suggest that the widely adopted intersectional feminist approach within non-profit GBV services may have limitations in effectively meeting the diverse needs of INSDV. In this context, a Transnational Feminist approach emerges as a valuable paradigm that can bridge the gaps and advocate for a broader perspective that goes beyond domestic analyses to encompass transnational experiences and issues that transcend borders. Integrating the Transnational Feminist perspective into Canadian GBV services can lead to the creation of more equitable and responsive support systems for INSDV. For instance, it would entail moving beyond mere diversity in staffing to ensuring diversity in leadership and management roles, as well as designing policies informed by the lived experiences of INSDV and service users. Moreover, acknowledging Canada's history of colonization, realities faced by Indigenous communities and its impact on shaping Immigration and GBV related service policies and rules can be better understood with a
Transnational Feminist framework. Transnational Feminist theories can serve as a catalyst for developing an alternative GBV service model that incorporates trauma-informed, diverse, culturally sensitive, and linguistically aware GBV services and systems. Although this remains an ongoing process, the integration of these principles can significantly improve the support available to INSDV.

In the subsequent chapter, participants offer their recommendations on how the existing systems can better support them and INSDV. Interestingly, some of these recommendations align with the theoretical perspectives of Transnational Feminism, indicating that this framework can effectively engage and provide valuable insights for the creation of conducive and supportive service systems for INSDV in Canada. In conclusion, embracing the Transnational Feminist perspective can enhance the efficacy and inclusivity of GBV services, leading to more comprehensive and sensitive support for INSDV, fostering an empowering environment for immigrant survivors.
Chapter 9: Conclusion: Recommendations and Way Forward

The participants in this study provided valuable insights into the intricate landscape of services aimed at supporting INSDV in leaving abusive relationships and seeking safety. They shed light on the systemic barriers that discourage survivors from leaving and continuing to endure harm. The focus of their discussions extended to service providers' perceptions of their ability and capacity to aid INSDV. The participants candidly expressed feelings of inadequacy, frustration, confusion, and uncertainty, highlighting issues related to their preparedness, access to information and knowledge, and confidence in serving this specific group.

The challenges faced by service providers encompassed individual, organizational, and larger systemic issues, emphasizing the existence of a significant support gap for INSDV. This void includes funding constraints, insufficient services, and a shortage of qualified professionals capable of effectively supporting INSDV clients. Despite these daunting challenges, service providers demonstrated immense dedication by proactively educating themselves and learning on the job. They expressed a sense of urgency in assisting their clients, often at the expense of their own mental health and well-being. While their dedication is commendable, it also highlights the irregularity or sporadic nature of the quality of services offered to INSDV.

Moreover, participants revealed that other key stakeholders, such as police, judiciary, and immigration authorities, often lack a comprehensive understanding of the intricate and interconnected needs of INSDV, leading to inadequate support. Participants emphasized the growing immigrant population in Canada, highlighting the importance of addressing these challenges and providing more focused services for INSDV.
As the government has talked about bringing more and more workers. If they're not going to provide support, and safety, and ensure they can stay here it's going to be worse in terms of the number of clients that we run across. You have to get past these challenges and lack of support for them. Zafar, Legal advisor at a shelter.

In conclusion, the participants put forward recommendations to enhance the support systems for INSDV and better serve immigrant communities. They emphasize the potential for improvement and envision a just society devoid of violence, with effective and appropriate services for survivors. Their recommendations are driven by an overarching vision to not only provide intentional and meaningful services to this specific group but also to promote awareness and education to end GBV in Canada. Their suggestions account for the unique challenges faced by INSDV, including language barriers and lack of community support, while emphasizing the profound impact of temporary immigration status as one of the primary obstacles to be addressed. The recommendations offered by participants complements the National Action Plan (NAP), a report that was developed by anti-violence experts from across Canada and offers recommendations to create an enabling environment and social infrastructure towards prevention, promotion of responsive legal and justice systems, and support for survivors and their families to end GBV (Women’s Shelters Canada, 2021). The recommendations offered by participants draw attention to the specific needs of immigrant, non-status survivors and enhances the demands of the NAP.

Three participants recommend building more shelter and transition houses that can address the needs of INSDV. These transitional houses should offer in-house
counselling services that are trauma informed and understands the unique experiences of INSDVs. Additionally, these houses should be equipped to offer free child-care services that accommodate the needs of parents who need to work long and odd shifts to become financially independent. Two participants highlight that this can only become a reality if more funding is allocated to specific programs that support INSDV. These programs can include skills training and employment opportunities that support economic and social integration and accreditation of foreign credentials to reduce the vulnerabilities associated with temporary immigration status.

In addition to increased and targeted services, three participants recommend the need for better information about GBV, various available services, as well as the rights and responsibilities to families immigrating to Canada. These information package should be available in different languages and cover all the specific available services to address DV and should be provided to families at the border, port of entry, language training classes, childcare services, and other places accessed by migrants, to better inform persons of their options to seek safety if they experience abuse. This information should be shared with all crisis contacts and in immigration application portals to provide information on multiple platforms.

Since the biggest barrier is temporary status, one participant recommended a radical solution - residency status should be awarded to people who are already in Canada and that applications should be de-coupled from their partners application. The conditional temporary permit, which is dependent on sponsorship from a partner creates a power imbalance and often becomes a foundation of more abuse. Independent residency status will encourage people to leave abusive relationships and seek help without fear.
Moreover, two participants recommend that child tax benefits and housing support should be offered to all survivors irrespective of immigration or residency status. In a similar vein, two participants recommend increased access to free legal support, specifically by removing barriers like income eligibility requirements. There is also a need to improve the quality of services offered by lawyers and legal aid by increased training in immigration and family law.

While the above recommendations aim to improve the systems and access to services, participants also highlight the importance of investing time and attention to developing the capacity of service providers through training and education in the needs of INS DV. Four participants suggest the need to enhance service providers’ cultural understanding from an intersectional lens. Along with training, it’s important to increase diversity in hiring among lawyers and other service providers. One participant recommends that organizations have specialized workers who can handle the immigration application processes, which will improve case management to deal with the needs of INS DV.

Additionally, two participants recommend that resources should be used towards helping INS DV integrate into the Canadian workforce by offering them equipment to help with job searches, including cell phones and access to the internet. Finally, two participants suggest that service providers should host information sessions and webinars to bring awareness about the needs of INS DV, which can involve schools and universities to reach children and youth.

As I have established that a critical barrier is temporary status for service provision and therefore many participants offered recommendations on navigating the
immigration application process and related systems. While some are quick and easy
procedural steps that can be implemented, some demand a systemic overhaul and
reconsideration of existing policies. Four participants highlight the importance of a
separate immigration category or pathways for INSDV and an expedited and streamlined
process for those who live in emergency shelters. Immigration fees for H&C applications
should be removed.

Three participants recommend that immigration related, and other vital
information should be available in a more accessible format. For example, simpler easy-to-use online application systems that do not demand extensive technological skills or
software like Adobe that are not commonly available. Simpler language, colour coding
and better interface design of the application form will make the process more
approachable and less clinical. The government should offer translated versions of the
application forms. Information sharing should also be filtered through provinces, such as
provincial drop-down menu to direct INSDV to appropriate service providers in the
province. There needs to be more investment in interpreter or translator services for
different languages. Finally, participants also highlight the need to create transparent and
accountable systems to enhance INSDV’s trust of systems of support and government
trust of service providers. For example, service providers assisting with immigration
applications should have critical information readily available, including a stakeholder’s
knowledge of domestic violence, relevant training, rate of rejection applications, and the
time taken to process an application.

Seeking recommendations from service providers to inform and improve GBV
services in Canada is aligned with the principles of Transnational Feminism, which has
always fostered collaboration between the academic and non-profit advocacy sectors. These recommendations exemplify a grassroots approach that recognizes the personal experiences of service providers, deeply rooted in their unique realities, and contextualize them within the broader landscape of GBV services and policies in Canada. Their recommendations, including challenging borders and immigration systems, seeks to create a more equitable and compassionate world, as envisioned by Transnational Feminists.

The recommendations provided by participants from British Columbia and Ontario, representing various professions involved with INSDV, offer valuable guidelines for the development of policies and programs aimed at addressing the unique and intricate needs of this vulnerable population. Service providers face a multifaceted and challenging landscape while supporting INSDV, often grappling with limited resources and a scarcity of qualified and knowledgeable professionals. Despite their expertise and dedication to helping INSDV, many service providers express feelings of burnout, fear, exhaustion, and helplessness in their efforts to meet their clients' needs. These experiences underscore the existing gaps in service provision, particularly the dearth of resources available to adequately address the specific requirements of INSDV. While the recommendations strive to address and alleviate some of these gaps, the burden of finding solutions and coping with the challenges predominantly falls on service providers and INSDV themselves.

It would be also interesting to note that service providers who took part in this study belong to a mixed and heterogenous group of people who share intersecting and complex social realities. Recognizing the plurality of their background, the specific
context and policies in Ontario and British Columbia would be thought provoking and add a new layer to the findings. Future research endeavors should investigate strategies for enhancing information sharing and communication among service providers and stakeholders across Canada, with the goal of fostering improved collaboration.

Additionally, there is a pressing need to explore the mental health needs of frontline service providers who navigate the complexities of INSDV cases, often going beyond their job descriptions and stretching beyond their skillsets to bridge the gap between available services and the actual needs of INSDV. Furthermore, an in-depth examination of how different funding structures impact the capacity of service providers to offer support to INSDV is essential to inform and optimize the direction of these organizations.

Many feminist scholars argue that non-profit organizations, while well-intentioned, can inadvertently reinforce racial hierarchies and paternalistic attitudes. While recognizing the significant work undertaken by non-profit service sector, it would be remiss to not recognize that the sector exists within Canada's larger social, economic, and political nation building project. Canada's multicultural claims have been criticized for being a tool to navigate imperialist presence, colonial histories, and a 'convoluted liberal democracy' (Bannerji, 2000 p 5). The core Canadian culture remains distinct from Indigenous cultures, racialized immigrant culture, and Francophone culture, that make different claims of the state. To talk about diversity, plurality, community, at face value without critically examining the hegemonic relations of nation building would omit the larger discourse on how national and international political economic forces interfere with everyday life (Bannerji, 2000). For example, understanding and creating meaningful anti-racist social justice projects for immigrant, newcomers, non-status communities are
not oppositional to the dispossession of Indigenous peoples in Canada. Furthermore, 'No Border' politics can confront settler colonialism to explore the possibility of finding common ground between 'Indigenous rootedness' and 'diasporic placelessness' (Chatterjee, 2019).

The 'non-profit industrial complex' in Canada is embedded within the Canadian 'multiculturalism' that can perpetuate the marginalization of racialized and migrant women, particularly in the context of anti-violence work (Razack et al., 2010). Critiques point at the Canadian non-profit sector for its complicity in upholding colonial systems and its insufficient efforts to address issues related to racism and GBV (Razack et al., 2010). These arguments are important discussions about the limitations and shortcomings of the Canadian non-profit sector, particularly concerning its engagement with issues of gender, race, and colonialism. It highlights the need for critical reflection and transformation within this sector to better address systemic inequalities. Future research projects should focus on these issues.

In conclusion, urgent advocacy is necessary to support service providers who play a vital role in offering crucial services to INSDV in Canada. By recognizing and addressing the challenges they face, and ensuring their well-being, we can bolster their capacity to effectively assist and empower INSDV. There is a need for further exploration and collaboration between the academic and advocacy sectors that could yield new insights and strategies for advancing GBV services in Canada. This will continue to build bridges and foster mutual understanding, developing intersectional perspectives, inclusivity, and the recognition of the transnational dimensions of GBV and
immigration policies that will enrich the discourse and actions taken to create a more comprehensive and effective support system for those affected by domestic violence.
Appendix 1: Interview Questions:

Demographic details:

- Name:
- Name of organization:
- Designation:
- Years of experience:
- What does your regular workday look like?

Research question 1: Experiences of service providers when serving immigrant women under temporary status:

- What are the main implications of immigration status for a person coming out of intimate partner or domestic violence?
- Are there any specific needs of client with precarious/temporary status? If yes, what are they?
- Do you feel that you and the system are equipped to handle these needs?
- As a service provider do you experience any barrier to serving immigrant non status survivors?
- If yes, what are they?

Research question 2: Relationship of services/subsidies and temporary immigration status:

- What would be the major difference in service provision between a client with status and without status?
Research question 3: Permanent Residence (PR) under Humanitarian and Compassionate (H&C) and Temporary resident permit (TRP) challenges, usefulness, probable strategies, and recommendations:

- Share your experience of navigating PR under H&C and/or TRP for victims of Family Violence (FV) application.
- How is the TRP under FV different from the H&C?
- Did you experience any challenges? If yes, what are they?
- What are some of the strengths of TRP under FV?
- What would be your recommendations to improve/strengthen the new policy?
- If you had a magic wand and wish for three things to support Immigrant Women Survivors of intimate partner or domestic violence, what would they be?
Appendix 2: Recruitment Poster

PARTICIPANTS NEEDED

SUPPORTING IMMIGRANT NON-STATUS SURVIVORS OF INTIMATE PARTNER & DOMESTIC VIOLENCE: RECOMMENDATIONS FOR CANADIAN SERVICE PROVIDERS

This project is about understanding the experiences and challenges faced by intimate partner or domestic violence service providers who support survivors with temporary immigration status in Canada.

To participate in this study, you must be:
Professional service provider: front-line worker at shelter/family lawyer in Ontario/ BC.
Worked with survivors with temporary immigration status in Canada.
Have access to internet and comfortable in the English language
At least 18 years old

There will be a 60 minute interview on zoom. Participants will receive a $20 Amazon gift card.

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This study has been cleared by Carleton University Research Ethics Board A Clearance number 118236. For ethical concerns with the study, please contact the REB Chair, Carleton University Research Ethics Board A (by phone: 613-520-2600 ext 2917 or by email: ethics@carleton.ca)
Appendix 3: A Snapshot: Supporting Immigrant Non-Status Survivors of Intimate Partner & Domestic Violence: Recommendations for Canadian Service Providers

This thesis examines the experiences of Gender-Based Violence (GBV) service providers supporting Immigrant Non-Status Survivors of Domestic Violence (INSDV) in Canada. The thesis is based on the Transnational Feminist theory. Through qualitative research, including interviews with service providers in British Columbia and Ontario, the study explores their preparedness and experiences in serving INSDV.

What are some of the main challenges you as a service provider and INSDV have experienced?
- Systemic barriers discouraging INSDV from leaving abusive relationships.
- Access to social aid and services is tied to immigration status.
- Lack of community, friends, family, and trust in the system.
- Lack of housing support, legal aid, and childcare support.
- Extra pressure on GBV services and resources.

What was your experience navigating the immigration system for your clients?
- Complex process, inaccessible language and format.
- Unrealistic expectation and burden of proof on client and service providers.

How do you feel about the capacity of GBV services in meeting the needs of INSDV?
- Large systemic gap: Funding crisis, lack of services, and a shortage of qualified providers for INSDV.
- The burden of finding solutions and coping with challenges falls heavily on service providers and INSDV themselves.
- Feelings of inadequacy, frustration, and lack of confidence in serving INSDV due to limited knowledge and resources.
- Overwhelmed and demand on mental health, working in silos that are not communicating with each other.

Participants included front-line support workers and managers in domestic violence emergency shelters, transition houses, legal advocates, community legal workers, and resettlement workers from legal aid organizations and settlement organizations. All are currently professionally engaged with these non-profit organizations and have worked directly with INSDV and their families.

What if you had a magic wand and you could wish for three things to change for the better? Participants offer a list of recommendations that align with the principles of Transnational Feminism, emphasizing collaboration and solidarity to create more equitable services and policies.

- Award residency status to people already in Canada and decouple applications from partners’ status.
- Establish a separate immigration category or streamlined process for INSDV and emergency shelters.
- Simplify immigration application systems and offer translated versions.
- Increase investment in interpreter or translator services for different languages.
- Create transparent and accountable systems for INSDVs to trust the support systems and create the government’s trust in service providers.
- Implement quick procedural changes and systemic overhaul for better support for INSDV.
- Improve information about GBV and available services in different languages. Distribute information packages at various locations accessible to migrants. Share information through crisis contacts and immigration application portals.
- Allocate more funding to specific programs for INSDV, including skills training and accreditation of foreign credentials. Provide resources for INSDV to integrate into the Canadian workforce.
- Offer child tax benefits and housing support regardless of immigration status.
- Build more shelter and transition houses with trauma-informed services for INSDV.
- Provide free child-care services to enable parents’ financial independence.
- Increase access to free legal support by removing income eligibility requirements and enhancing legal aid training.
- Develop service providers’ cultural understanding through training and diversity hiring.
- Have specialized workers handle immigration applications to improve case management.
- Host information sessions and webinars to raise awareness about the needs of INSDV.

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