Adam Arreak Lightstone



Written Question

Written Questions 21-5(2) Feh Zo/(9

Asked by: Adam Arreak Lightstone

Asked of: Hon. George Hickes

Minister responsible for the Department of Health

Number:

Date: February 20, 2019

Subject: Recommendations of Domestic Violence Death Review Committee

Purpose: As the Office of the Chief Coroner of Nunavut has indicated, domestic violence is a continuing problem in Nunavut that leads to preventable loss of life. The office of the Coroner of Nunavut in collaboration with the Domestic Violence Review Committee of Ontario reviewed the case of my sister Sula Enuaraq and made recommendations to enhance risk assessment, safety planning and prevention of future deaths related to domestic violence through appropriate interventions by Criminal Justice System, and Healthcare partners. I would like to seek information on how these recommendations have been carried out since the completion of the report in 2016.

The Office of the Chief Coroner and the Domestic Violence Death Review Committee has made the following recommendations in relation to Department of Health's health care professionals, in which I would like to seek in detail what initiatives or outcomes of the recommendations.

1. <u>Public education on safe separation:</u>

E. We also recommend that cross-cultural and cultural competency training should be a mandatory component of all training programs for frontline workers, such as police, healthcare workers, family violence specialists/assistant and social workers.

Please specify in detail what initiatives the Department of Health has implemented since 2016 to provide cross-cultural and cultural competency training opportunities to all health care professionals. Please include a timeline of events.

F. It is recommended to provide training opportunities to all health care professionals to ensure that domestic violence risk assessment, safety planning and risk management are mandated part of their training programs and certification process. Safety is a top priority; therefor, it must be ensured that training at all levels obtained competency in risk assessment and risk management techniques.

Please specify in detail what initiatives the Department of Health has implemented since 2016 to provide training opportunities to all health care professionals to ensure that domestic violence risk assessment, safety planning and risk management are mandated part of their training programs and certification process. Please include a timeline of events.

G. It is recommended that continuing education of all medical professional, include an emphasis on the importance of understanding the dynamics of domestic violence and the risk factors of lethality, so that they can adequately assess and support clients with relationship problems.

Please specify in detail what initiatives the Department of Health has implemented since 2016 to provide continuing education to all medical professionals on the dynamics of domestic violence and the risk factors of lethality, so that they can adequately assess and support clients with relationship problems. Please include a timeline of events. H. Training for all mental health professionals should include assessment and intervention strategies dealing with male depression and the link between depression, suicidal ideation, drugs and alcohol abuse and domestic violence.

Please specify in detail what initiatives the Department of Health has implemented since 2016 to provide training to all mental health professionals on the assessment and intervention strategies dealing with male depression and the link between depression, suicidal ideation, drugs and alcohol abuse and domestic violence. Please include a timeline of events.

I. Healthcare providers should be taught to be aware of the dynamics of domestic violence and the potential lethality, especially when working with patients who have a history of drug and alcohol abuse, depression, anxiety and suicidal ideation, particularly when there is high conflict in their marriage and a history of separation.

Please specify in detail what initiatives the Department of Health has implemented since 2016 to provide training to all healthcare providers to be aware of the dynamics of domestic violence and the potential lethality, especially when working with patients who have a history of drug and alcohol abuse, depression, anxiety and suicidal ideation, particularly when there is high conflict in their marriage and a history of separation. Please include a timeline of events.

J. We recommend and support to continue to offer grief counselling services to individuals who are directly or indirectly witness suicides in their families, intergenerational trauma on families with the consequence of high rates of mental health issues, childhood trauma, drugs and alcohol addiction.

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Please specify in detail what initiatives the Department of Health has implemented since 2016 to offer grief counselling services to individuals who are directly or indirectly witness suicides in their families, intergenerational trauma on families with the consequence of high rates of mental health issues, childhood trauma, drugs and alcohol addiction. Please include a timeline of events.

- 2. I would like to request what resources and supports are offered to individuals in cases where they have concerns about a family member's safety.
- 3. Additionally I would like to request what resources and supports are available to victims of domestic violence who may not recognize the dangers posed by the ex-partners to themselves and their children.



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Media release- Recommendations to prevent the domestic violence related deaths

The Office of the Chief Coroner would like to inform the public that domestic violence is a continuing problem in Nunavut that has resulted in, or contributed to, several cases of homocide and suicide.

To assist it in its mandate to review of deaths involving domestic violence, the Chief Coroner requested the Domestic Violence Death Review Committee of the Office of the Chief Coroner for Ontario review a recent Nunavut domestic violence case in order to make recommendations to prevent similar deaths in the future. The Committee identified fifteen (15) risk factors for intimate partner homicide-suicide.

The Domestic Violence Death Review Committee has made the following suggestions and recommendations to enhance risk assessment, safety planning and possible prevention of future deaths related to domestic violence through appropriate interventions by Criminal Justice System and Healthcare partners, including high risk case identification and management.

Public Education

- A. There needs to be a broader public awareness, directed at potential victims, about the safe separation from an abusive partner, and the risks in maintaining ongoing relationships that can jeopardize the safety of women and children.
- B. Public awareness campaigns are needed that highlight how to recognize and respond appropriately, when a strained relationship is becoming a potentially lethal one. Important additional risk factors are high stress situations like extreme financial pressure, drugs and alcohol addictions and imminent family break up or separation.
- C. Community agencies in partnership with Government of Nunavut should explore the creation of an easily accessible, non-threatening mechanism for friends and family to get information and consult with a trained individual regarding situations, where they have concerns that a woman is at risk from her intimate partner. This resource could provide direction or assistance to protect the victim's safety.
- D. We recommend that Community Justice Workers and Victim Service Specialists should receive specialized training in the dynamics of domestic violence. This training should include recognizing the signs and symptoms of domestic violence and how to effectively respond in the event they suspect a client is being abused. It is important that the training focuses on all aspects of domestic violence including the psychological/emotional/verbal abuse that many victims experience; recognizing high risk cases such as when there is a

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recent or pending separation between couples and Mental Health illness, drugs and alcohol addictions on the part of the perpetrator.

E. We also recommend that cross -cultural and cultural competency training should be a mandatory component of all training programs for front line workers, such as police, Healthcare workers, Family Violence Specialists/Assistant and Social Workers.

Health Care

- F. It is recommended to provide training opportunities to all Health Care Professionals to ensure that domestic violence risk assessment, safety planning and risk management are mandated part of their training programs and certification process. Safety is a top priority; therefore, it must be ensured that trained at all levels obtained competency in risk assessment and risk management techniques.
- G. It is recommended that continuing education of all medical professionals, include an emphasis on the importance of understanding the dynamics of domestic violence and the risk factors of lethality, so that they can adequately assess and support clients with relationship problems.
- H. Training for all Mental Health Professionals should include assessment and intervention strategies dealing with male depression and the link between depression, suicidal ideation, drugs and alcohol abuse and domestic homicide-suicide.
- I. Healthcare providers should be taught to be aware of the dynamics of domestic violence and the potential for lethality, especially when working with patients who have a history of drug and alcohol abuse, depression, anxiety and suicidal ideation, particularly when there is high conflict in their marriage and a history of separation.
- J. We recommend and support to continue to offer grief counselling services to individuals who are directly or indirectly witness suicides in their families, intergenerational trauma on families with the consequence of high rates of mental health issues, childhood trauma, drugs and alcohol addictions.

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Law Enforcement Services

Comment: The committee noted in its review that, in the particular case reviewed, the police did not have the opportunity to intervene from the point of domestic violence. The committee offered the following general recommendations for police training.

- K. We recommend that Police Services should receive ongoing training for police on the most effective response to domestic violence cases especially where there is a history of homicidal and suicidal threats, separation, drugs and alcohol addictions and obsession with the victim.
- L. We continue to encourage that the Police Service should review various interactions with the victim and perpetrator with a view to ensure that all appropriate policies, procedures and directives were followed in order to learn and improve the systemic ways.

Education

M. It is recommended that the school professionals be given training on developing safety plans for students, once the student has been assessed as being at risk for suicide and that these students be given priority for support at the school. Guidelines should be developed to recognize the unique circumstances and risk of these students and the importance of connecting them to school based support or referring them to appropriate medical professionals.

Women's Shelters:

N. We encourage and recommend continuing the women's shelters in Nunavut to ensure that all of its employees are well trained and educated in recognizing complex situations of domestic violence and assisting their clients in obtaining the services they required to prevent violence against women and children.

Access to firearms:

A. The Government of Nunavut, with the assistance of the RCMP, should continue to provide education on firearm safety, licensing and assist with the issuance of trigger locks to firearm owners.

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B. The Government of Nunavut should continue to develop culturally-appropriate information; education and communication resources to aid the door-to-door trigger lock campaign.

Padma Suramala Chief Coroner of Nunavut

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