Breaking the Cycle of Abuse and Closing the Housing Gap: A Mixed Methods Community-Based Study on Second-Stage Shelters

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ABSTRACT
This Canadian study investigates second-stage shelters, a type of transitional housing for survivors of intimate partner violence. Data collection included an online survey and semi-structured interviews. The survey was completed with 97 responses by executive directors of second-stage shelters from every province and territory. Seventeen semi-structured interviews were conducted with executive directors and current and former residents of second-stage shelters in five provinces and territories across Canada. The results indicate that these shelters provide many benefits to survivors, but operate in a challenging context of chronic underfunding, which affects their capacity to maintain their programming and staffing. This study contributes to the small body of research on transitional supportive housing, providing new insights into how second-stage shelters help survivors meet their individual goals and into the role played by these shelters in the continuum of supports for women and children fleeing violence.

RÉSUMÉ
Cette étude canadienne se concentre sur les refuges de deuxième étape, un type de logement de transition pour les survivants de violence dans le couple. Elle se fonde sur une collecte de données comprenant un sondage en ligne, des entrevues semi-structurées et des groupes de discussion. Le sondage a reçu 97 réponses de la part de directeurs généraux de refuges de deuxième étape situés dans toutes les provinces et tous les territoires. Dix-sept entrevues semi-structurées ont été menées auprès de directeurs généraux et de résidentes actuelles et anciennes de refuges de deuxième étape dans cinq des provinces et territoires du Canada. La recherche s'est terminée par deux groupes de discussion nationaux avec des travailleurs et des gestionnaires de refuges. Les résultats indiquent que ces refuges offrent de nombreux avantages aux survivantes, mais qu'ils fonctionnent dans un environnement difficile de sous-financement chronique qui affecte leur capacité à maintenir une programmation et une dotation en personnel adéquates. Cette étude contribue au petit corpus de recherches sur les logements de transition avec services de soutien en offrant de nouvelles perspectives sur la façon dont les refuges de deuxième étape aident les survivantes à atteindre leurs objectifs individuels et sur le rôle joué par ces refuges parmi les divers soutiens aux femmes et aux enfants fuyant la violence.
INTIMATE PARTNER VIOLENCE AND WOMEN’S HOMELESSNESS

Intimate Partner Violence (IPV) is a serious social problem in Canada, representing 30 percent of all police-reported crime (Burczycka, Conroy, & Savage, 2018). According to the World Health Organization, IPV is the most common form of violence against women (VAW) and can include “physical aggression, sexual coercion, psychological abuse and controlling behaviours” (World Health Organization, 2021). National data indicate that 44 percent of women who have been in an intimate relationship have experienced some form of violence by an intimate partner over their lifetime (Statistics Canada, 2021). However, this is an underestimation as many victims do not report IPV to the police (Perreault, 2015), especially Indigenous and Black women because they face disproportionate levels of police violence and criminalization (Canadian Women’s Foundation, Women’s Shelters Canada, Pauktuutit Inuit Women of Canada, Anita Olsen Harper, & Jihan Abbas, 2020).

Survivors of IPV face housing precarity and potential homelessness when they flee abuse, which is a growing concern in North America and internationally (Canada Mortgage and Housing Corporation, 2018; Mekolichick, Davis, & Choulard, 2008; Melbin, Sullivan, & Cain, 2003; Wendt & Baker, 2013). Research has shown that IPV is also a leading cause of women’s homelessness in Canada and the United States (Burnett, Ford-Gilboe, Berman, Wathen, & Ward-Griffin, 2016; Kirkby & Mettler, 2016; Mosher & Homes for Women, 2013; Van BerKum & Oudshoorn, 2015). The lack of safe and affordable housing is a potentially lethal barrier for women who plan to leave an abuser (Burnett, Ford-Gilboe, Berman, Ward-Griffin & Wathen, 2015; Burnett et al., 2016; Mosher & Homes for Women, 2013; Noble, 2015; Tutty, Ogden, Giurgiu & Weaver-Dunlop, 2014). Several studies have demonstrated that women fleeing violence are most at risk for lethality when they leave their abusive partner (Dawson, Sutton, Carrigan, & Grand’Maison, 2018; Office of the Chief Coroner, 2019).

A patchwork of housing policies has failed to meet the housing needs of IPV survivors. Some progress includes amendments to the Residential Tenancy Acts (RTAs), the Special Priority Status, and the Canada Housing Benefit. Residential Tenancy Act amendments allow survivors to end tenancy agreements early and without financial penalty if documentation is provided to the landlord. The Special Priority Status ranks survivors higher in need on the social housing system to be housed quickly. In partnership with the federal government, Ontario implemented the Canada Housing Benefit to prioritize those with the most financial need on the social housing wait list in combination with a portable housing benefit (Ontario, 2019). Finally, some VAW organizations are exploring Housing First, a federally funded rapid rehousing program that moves homeless individuals into stable long-term housing with support for up to one year.

While these policy changes are welcomed, there are some considerable drawbacks as they are not available in all regions and they are reliant on available affordable housing stock, which is limited, particularly in the North (Government of Canada, 2019). Moreover, these policies are not accessible to everyone as the eligibility criteria require survivors provide “proof” of the abuse. This type of documentation does not always exist as many survivors do not make official reports of their abuse (Perreault, 2015). Women residing in VAW shelters may also be excluded from these housing pro-
grams as they are often unable to prove that they are co-habitating with their abuser (Mendoza, Samsa, McCalla, Sarangi, Françoise Mouè, & Valentim, 2017). Indeed, women’s homelessness is often invisible and “hidden” as many turn to informal support networks and stay with friends and family to avoid street homelessness (Auffrey, Tutty, & Wright, 2017; Bernas, Dunsmore, English, Friesen, MacDonald, MacKinnon, Spring, & Wilson 2019; Fotheringham, Walsh, & Burrowes, 2014). As such, IPV survivors are often not counted in definitions of “chronic homelessness,” the key demographic for homelessness policies (Maki, 2017; Bernas et al., 2019; Schwan, Versteegh, Perri, Caplan, Baig, Dej, Jenkinson, Brais, Eiboff, & Pahlevan Chaleshtari, 2020; Yakubovich & Maki, 2022).

CONTINUUM OF SUPPORTS FOR IPV SURVIVORS
Nonprofit organizations working within the broader social economy provide an integral response to the safety and housing challenges facing IPV survivors by providing affordable housing and social supports. Many survivors fleeing violence need more than a roof over their heads; support, services, and safety planning are necessary to assist them with their transition. Over the past five decades, the VAW shelter sector in Canada has developed a series of programs and interventions to support survivors of domestic violence with their safety and housing needs (Maki, 2019; Augusta-Scott, Scott, & Tutty, 2017; Burnett et al., 2015, 2016; Fotheringham & Turner, 2018; Noble, 2015; Tutty, 2015). Often referred to as “stages,” the housing options include short-term first stage emergency shelter (1–3 months), longer-term second stage shelter (transitional housing) (6 months–2 years), and long-term third stage shelter (varies, often until children age out).

While much is known about first stage emergency shelters, little national research has explored second stage shelters. Emergency shelters are an important and life-saving aspect of the continuum of supports; however, the supports that follow crisis intervention, such as second stage shelters, are a necessary next step (Tutty, 2015). Unfortunately, there is a significant shortage of second stage shelters across Canada (149 compared with 415 emergency shelters) (Women’s Shelters Canada, 2023). Northern communities are underserved, with only three second stage shelters across all three territories (Maki, 2019). There are only three known second stage shelters on First Nations reserves and there is only one Inuit second stage shelter.

Operating as nonprofit organizations, second stage shelters are transitional housing programs that provide safe affordable housing (apartment style residences), support, and services to IPV survivors and their children who are at high risk of danger post-separation and who need additional support to transition to independent living (Maki, 2019; Hoffart, 2015; Tanguy, Cousineau, & Fedida, 2017). These shelters are a critical component of the continuum of supports for IPV survivors and combating gender-based violence (BC Housing, 2019; Hoffart, 2015; Melbin et al., 2003; Canada Mortgage and Housing Corporation, 2018; Mekolichick et al., 2008; Correia & Melbin, 2005; SPR Associates, 1997; Webster, 2013). As well there is compelling evidence that suggests that second stage shelters are an important factor in preventing women’s homelessness (Hoffart, 2015; Mekolichick et al., 2008; Tutty et al., 2014).

Among the few evaluative studies conducted on these programs, researchers have found that these shelters provide numerous benefits to IPV survivors including increased safety, additional time to heal, independence, and helping residents secure permanent housing (Baker, Niolon, & Oliphant,
2009; British Columbia Society of Transition Houses, 2019; Correia & Melbin, 2005; Hoffart, 2015; Mekolichick et al., 2008; Melbin et al., 2003; SPR Associates, 1997; Tanguy et al., 2017). While programming and service delivery differ, the literature notes the overarching goal of second stage shelters “is to ensure that women are provided with housing stability and are able to live successfully in the community without returning to either homelessness or abuse” (Tutty et al., 2008, p. 44). Studies found second stage shelters act as a “bridge to self-sufficiency and permanent housing” (Correia & Melbin 2005, p. 3) and that longer lengths of stay results in better housing and healing outcomes for survivors (Mekolichick et al., 2008).

Given the paucity of published studies on second stage shelters, additional research on transitional housing for IPV survivors is warranted. The research was led by a nonprofit national network of VAW shelters. The goal of the research was to build on the existing literature and develop a deeper understanding of second stage shelters in Canada. To gain comprehensive knowledge of the work of second stage shelters, the research questions were broad and exploratory: 1) what are the goals and purpose of second stage shelters; 2) what is the scope of programs and supports; and 3) what are the differing organizational structures and practices? Additionally, there were evaluative components focused on what is working well, what needs improvement, and forward-looking visions of what could be possible for new builds and the sector as a whole. This study is unique in several ways. First, it is the first study of its kind to map out the second stage shelter landscape nationally to understand the differing organizational structures and programs, as well as gaps and challenges. Second, the study is community-based and participatory with an overarching goal of creating impactful social change. This article reports on the overarching themes related to the goals of second stage programs from the combined data sources and provides new national-level insights into these programs for IPV survivors.

**METHOD**

This study was designed using feminist participatory action research (FPAR), which combines a participatory design with action-oriented research methods (Maguire, 2001, 2004; Ponic, Reid, & Frisby, 2010; Paradis & Mosher, 2012). It is a type of community-based research that emphasizes collaboration and active involvement with community members throughout all stages of the research process. Feminist participatory action research differs from other research methods in how it is explicitly grounded in feminist theory and focuses on gender inequality, often from an intersectional framework that recognizes power dynamics and how social locations and identities intersect to shape people's experiences (Ponic, Reid, & Frisby, 2010). This research approach provides researchers with a framework for ethical, collaborative, and empowering research that is with and alongside rather than “on” VAW organizations. It challenges traditional ways of knowing and knowledge creation by situating community organizations as experts to drive research linked to social change (Maguire, 2004; Paradis & Mosher, 2012; Reid & Gillberg, 2014). Feminist participatory action research was selected as it aligned best with the research objectives and the needs and goals of the second stage shelter representatives who participated on the advisory committee that guided the project.

The project built on previous feminist community-led research by L’Alliance (Tanguy et al., 2017), the Alberta Council of Women’s Shelters (Hoffart, 2015), and Women’s Shelters Canada (Maki, 2023).
As well, a literature review of 13 evaluative studies on transitional housing for IPV survivors was completed (Clark, Wood, & Sullivan, 2019; Correia & Melbin, 2005; Dessie, Wood, & Sullivan, 2018; Hoffart, 2015; Mekolichick et al., 2008; Melbin et al., 2003; Novac, Brown, & Bourbonnais, 2009; SPR Associates, 1997; Strategic Prevention Solutions, 2011; Tanguy et al., 2017; Washington State Coalition Against Domestic Violence, 2015; Webster, 2013; Wendt & Baker, 2013). The findings and learnings from these studies and literature review provided a foundation to shape the interview and survey questions to address knowledge gaps and capture key insights. Specifically, five key themes emerged from the literature review including the benefits of safety, longer length of stay, programs, community, and defining success for survivors (for a detailed analysis see Maki, 2020).

The nonprofit VAW shelter network led the research study with the input of an advisory committee made up of nine second stage shelter experts from across Canada. The involvement of the committee ensured that the research was designed from the onset in a way that could capture the realities of second stage shelters and that the results and knowledge mobilization were communicated in a way that was driven by the shelters we collaborated with. This in turn informed the recommendations that would be pivotal for advocacy resulting from the research.

MIXED METHODS
The study took place over a nine-month period between 2019 and 2020. Methods included an online survey and semi-structured interviews. There are many advantages to mixed methods studies. The survey allowed the researchers to gather a wide scope of data on second stage shelters across different regions, while interviews allowed for deeper insights into the goals and outcomes of second stage shelters and grounded the findings in participants’ experiences. Combining these methods enables a more sophisticated understanding of second stage shelters where different aspects of the data provide different insights (Williams & Moser, 2019).

The study integrated feminist evaluation to enable a process of learning to facilitate space for participants to share their differing perspectives, knowledge, and experience to inform how the findings can support social change (Hay, 2012). This study did not go through a formal ethics review process as it was primarily evaluative, focusing on the benefits, drawbacks, strengths, and weaknesses of second stage shelters (see Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council, 2018). However, the advisory committee and individual second stage shelters had their own feminist ethical standards, which were adhered to for site visits and interviews.1

SURVEY
A national survey was developed in consultation with the advisory committee to address the gaps in the literature (as discussed above) and a previous survey conducted by Women’s Shelters Canada (Maki, 2019). From this foundational work, the researcher learned how different these organizations were from emergency shelters. As such, the survey design included questions that specifically addressed the housing support aspects of second stage shelters, the longer-term stay of these organizations (including follow-up support), and evaluative components regarding how organizational leaders perceived their strengths and weaknesses in providing residents housing, supports, and serv-
ices. We wanted to learn what makes these shelters different and to gather national data on the different types of models, programming, services, admission practices, house policies, number of units, funding, staffing, and goals of these organizations. The survey was designed to be completed by a manager who understood the daily operations of the shelter, often an executive director (ED). It contained a combination of 48 close-ended quantitative multiple choice and matrix questions as well as 13 open-ended questions for a total of 61 questions. Due to the unique organizational structure of second stage shelters, multiple choice check boxes could not fully capture the distinct activities, location, and mandates of the organizations. To address this limitation, ample comment boxes were provided to ensure that respondents were given the opportunity to elaborate on their unique approaches to service delivery. The online survey was open from October to December 2019 and was available in English and French. A total of 97 second stage shelter managers responded representing a 72 percent (N = 135) response rate. Survey responses were received from every province and territory; rural, remote, and northern shelters; Indigenous shelters; metropolitan centres, and small cities and towns. The sample is representative of the diversity of second stage shelters in Canada. Analysis was conducted using SPSS-26, running primarily descriptive statistics. Frequencies were computed alongside open coding of survey comments in NVivo.

QUALITATIVE SEMI-STRUCTURED INTERVIEWS
Interview questions were developed by examining gaps in the literature and the preliminary results from the survey. The questions were reviewed by the advisory committee and participating shelter directors. Interviews allowed us to go deeper into questions related to the complexity of how these shelters operate in relation to staffing, funding, and localized housing contexts. As well, it provided managers an opportunity to elaborate and reflect on the organizational goals and how effectively they felt that they were meeting these goals. A total of 18 interview questions were designed for managers around four key themes: goals and purpose; programs and services; staffing; and strengths and areas for improvement. For current residents, 10 interview questions were designed that built on previous literature gaps to include four key areas: experience living in the second stage shelter; programs and services; staff support; and strengths and areas of improvement for these organizations. For the former residents, three additional questions were added to the 10 questions asked of the current residents regarding their individual goals and if they were able to meet them, follow-up services after they moved, and what ways the shelter helped them. The themes overlapped with the questions asked of managers intentionally, to be able to compare the answers among residents (current and former) and those delivering services.

Between August 2019 and February 2020, 17 semi-structured interviews were conducted at five second stage shelters located in Vancouver, British Columbia, Whitehorse, Yukon Territory, Mississauga, Ontario, Montréal, Québec, and Gander, Newfoundland and Labrador, with six current residents, six former residents, and five executive directors. Sampling methods were purposeful; shelters were nominated and then selected by the advisory committee. The interviewer also had the opportunity to conduct an on-site visit during data collection. Each partnering shelter provided a tour of the facilities including community spaces and an empty unit. This provided important context to how the spaces feel and are organized. With the consent of participants, interviews were audio-recorded and then transcribed verbatim. Transcribed interviews were uploaded to NVivo for coding.
Since few studies have examined the experiences of women residing in shelters generally (Tutty, 2015), residents were included in the sample. As the interviewer did not work in a shelter, participants were able to share candidly. Detailed demographic information was not collected on the survivors as the sample size was small and anonymity was strictly maintained. Among the current and former residents, six identified as Caucasian and six identified as women of colour, three of whom had precarious immigration status. All had children in or out of their care. All were survivors of domestic violence and shared that their cases were high risk. Although the focus of the interviews was on the shelter services not their abuse, extra care was taken to ensure that survivors felt safe and comfortable participating. The interviewer approached the interviews from a feminist trauma-informed lens to promote the safety and resilience of the interview participants (Alessi & Kahn, 2022). All questions that were asked to residents were reviewed and approved by the advisory committee and the partnering shelter EDs. Participants could have a support person present of their choosing and also chose the location of the interview (common area, own apartment, board room, etc.). Interviews were voluntary and they could also end the interview at any time without any negative consequences. Counselling supports were offered onsite if they felt distressed following the interview. None of the participants requested counselling or a support person. They were offered a $50 honorarium for their time.

The data were analyzed using a “pluralistic and flexible approach to data coding” that categorizes qualitative data to generate meaning (Williams & Moser, 2019, p. 46). Interview coding for EDs and current and former residents were done separately, as some of the interview questions differed. The emerging themes were then individually and collectively analyzed to see where participant’s views digressed or overlapped. This strategy was useful for the evaluative questions, whereby the ED and service users’ perspectives could be compared. In line with the study’s feminist methods, the researcher also integrated a reflexive analysis, which allowed for an inductive approach whereby codes and themes were conceptualized from the qualitative data: “Reflexive iteration is at the heart of visiting and revisiting the data and connecting them with emerging insights, progressively leading to refined focus and understandings” (Srivastava & Hopwood, 2009, p. 77). This allowed the researcher to better analyze second stage shelters as a whole rather than uniquely separate and disconnected organizations. This was an ongoing process whereby reflection on what the data was showing, and the research questions (e.g., what do second stage shelters do, how are they structured, how do they help) helped focus the analysis on the key patterns in the data. The key themes were conceptualized based on a reflexive analysis of the data with the understanding of the researcher’s positionality as a researcher at a national network of VAW shelters.

A limitation of the mixed methods model is that it often requires more capacity (staffing, resources, and time) to analyze the multiple layers of data. Additionally, interviews and site visits in each province and territory would have provided a more comprehensive sample. However due to resources and capacity, the advisory committee selected five diverse regions.

RESULTS
The results of this study demonstrate that the primary goals of second stage shelters are to provide space, tools, and supports to assist residents in becoming independent, establishing safety, breaking
the cycle of abuse, and preparing for long-term housing. The following section reflects on five central themes that emerged from the survey and interview data related to the goals of second stage, including: safety; independence and goals; additional time; programs, services, and community; and long-term housing (see Table 1).

Table 1: Central themes of service providers and users (N = 97)

<table>
<thead>
<tr>
<th>Theme</th>
<th>Service providers</th>
<th>Service users</th>
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<tbody>
<tr>
<td><strong>Safety</strong></td>
<td>• Create physical and psychological safety</td>
<td>• Safety plan is survivor-driven</td>
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<td></td>
<td>• Variety of security features and practices</td>
<td>• Privacy, own unit, safe and secure</td>
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<td></td>
<td>• 94% provided safety planning</td>
<td>• Community: staff and other residents meant they were never alone</td>
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<td></td>
<td>• Feminist trauma-informed, harm reduction models</td>
<td>• &quot;Life saving&quot;</td>
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<td><strong>Independence and goals</strong></td>
<td>• Goal: to provide space for autonomy and independence alongside tools, resources and support</td>
<td>• Goal: develop self-sufficiency and confidence; safety; health and wellbeing; economic independence; understanding abuse</td>
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<td></td>
<td>• Survivor-centred, women-centred, choice-based</td>
<td>• Agency and choice</td>
</tr>
<tr>
<td></td>
<td>• Programming to structure healing and goals</td>
<td>• Empowering</td>
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<td></td>
<td>• Transformative</td>
<td>• Flexible programming</td>
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<td><strong>Additional time</strong></td>
<td>• 6-2-year stay is flexible</td>
<td>• Build a network of support</td>
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<td></td>
<td>• Make a plan to address housing issues, stabilize, and start healing journey</td>
<td>• Time to plan next steps had positive impact on achieving their goals</td>
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<td></td>
<td>• “Choice and time” to move from crisis and plan next steps</td>
<td>• Out of crisis, catch breath, relax and plan next steps</td>
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<td></td>
<td></td>
<td>• Heal from trauma</td>
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<tr>
<td><strong>Programs, services, and community</strong></td>
<td>• Counselling, groups, programs for kids, legal, education, wellness etc.</td>
<td>• Programs based on interest and needs chosen by the residents at house meetings</td>
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<td></td>
<td>• Partnerships and referrals</td>
<td>• Mandatory programs were helpful and flexible</td>
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<td>• Some programs are mandatory</td>
<td>• Former residents saw the value of programs</td>
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<td></td>
<td>• Engagement challenges</td>
<td>• Created community, connecting with other survivors, breaking the silence around abuse</td>
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<td></td>
<td>• Value of programs for gaining confidence and healing</td>
<td>• Importance of friendships</td>
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<td></td>
<td>• 94% shelters included dedicated community space</td>
<td>• Help with systems navigation, especially legal</td>
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<td></td>
<td>• Services for current and former residents</td>
<td></td>
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<tr>
<td></td>
<td>• Programming not funded</td>
<td></td>
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<tr>
<td><strong>Long-term housing</strong></td>
<td>• 78% of shelters said affordable housing was always hard to find</td>
<td>• Need for safe, affordable, and appropriate housing</td>
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<td></td>
<td>• Drew on wide network to help find housing for residents</td>
<td>• Women are at greatest risk when they can’t leave</td>
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<td>• 70% provide housing supports</td>
<td>• Determine success on their own terms</td>
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<td>• 26% employed a staff housing coordinator</td>
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<td>• 85% continued to support survivors after they moved</td>
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<td></td>
<td>• Hard to define “success”</td>
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SAFETY

Safety and security are essential aspects of second stage housing and a primary mandate of these organizations, which distinguish second stage from other types of transitional housing. As one ED interviewed commented, “What sets us apart is the security we offer and the way we address violence post-separation.” Study participants explained how safety is more than just physical security in the building and that the emotional and psychological safety of residents are also paramount. Figure 1 shows the different types of security features commonly found in second stage shelters. The most frequently reported safety features and practices included meetings with residents to explain safety rules (84%), video cameras (78%), and security protocols (67%). Most respondents had several or all of these security features at their shelter.

Figure 1: Security features in second stage shelters (N = 97)

Because safety is so critical, many shelters prioritized safety planning with residents, with 94 percent providing this service on site. Managers interviewed stressed that safety extended beyond the walls and time survivors spent in the second stage shelter. Safety planning was an ongoing aspect of programming at all stages for all members of the family unit. One ED interviewed spoke about how safety plans need to be collaborative and driven by survivors’ needs:

A safety plan is only as good as whether women are making a plan that actually works for them ... If the plan doesn’t reflect the needs and wants of the person using it, it isn’t an effective safety plan. A safety plan is hearing their concerns ... At the end of the day, it’s her plan ... we need to have a model where we respect women’s choices 100%.

Current and former residents also spoke at length about the importance of safety. They disclosed the many ways that their safety was compromised and that they were at high risk for lethality, went into hiding, and obtained restraining orders. Most believed that they would not be alive if it was not for the safety and support they received at the second stage shelter. For some, it was the first time in their lives that they had ever felt safe. A former resident shared:

Safety was massive for me personally because my former partner ... will hunt me down ... Hence the fact that he found us at the first place. I think that really caused my PTSD [post-
traumatic stress disorder]. I had massive anxiety and worried about him following us and that he could just turn up anytime ... And I’ve had threats, so I was really nervous about that. I had a protection order ... So feeling like there’s security in your area, that’s massive.

Another former resident shared that “the space made me feel safe. I could sleep; I could feel safe here.” A current resident from that same shelter explained the ways that she felt safe:

The units are private and we have our own keys ... The front doors remain locked and closed all the time. Front door windows are bulletproof. That was huge for me because I went through a scenario where a fully loaded gun was put to my head ... Staff are on site Monday to Friday, 9-5, Wednesdays, 12-8. The house has an alarm system. We can page the staff at any point in the day or night in case of an emergency ... and they’ve been available.

Clearly, second stage shelters are an essential, life-saving resource for IPV survivors.

Some shelter policies regarding substance use and serving women with complex mental health concerns were often discussed in relation to safety. Harm reduction is a non-judgemental and holistic approach to substance use that includes strategies and practices to promote safer consumption and reduce the negative impacts of substance-using behaviours (Hovey & Scott, 2019). Harm reduction is often complementary to the feminist trauma-informed approaches that many second stage shelters operate from. More than half (69%) of survey respondents reported using harm reduction approaches in their shelters. Several EDs interviewed shared that they were revising the rules on substance use to meet survivors where they are at. They shared a range of modifications from the softening or reduction of house rules around substance use to more comprehensive harm reduction practices. Regardless of the approach, safety was always a concern and reflected upon. While this is an ideal that many shelters are moving towards, the implementation and evaluation of these new models warrant further study.

INDEPENDENCE AND GOALS
Creating a safe space and time to cultivate independence and healing so that residents could achieve their personal goals was a common theme expressed by the EDs interviewed. In their words:

Our goal is to support the women and children who have left an abusive environment. To give them the tools and resources to break that cycle and to help them move forward for an independent life.

When it comes down to it, our mission is to provide specialized IPV support. Our goal is to help women recover their self-esteem and regain power over their own life, and all of our services revolve around this ideal.

The one-on-one connection with the women and engaging in the journey of supporting them in the goals and objectives that they need for their own safety, dignity, and self-sufficiency.

Developing self-sufficiency and confidence was also a common goal expressed by the survivors interviewed. Safety, overall health and wellbeing, economic independence, and developing an understanding of abuse were long-term goals for survivors. This was expressed differently among the women interviewed. For instance, a current resident found that learning about mental health and how
to take care of herself was liberating and an important part of healing for her to become more independent and self-reliant: “They’ve already helped me identify triggers. They taught me what trauma bonding is … How to cope with my anxiety, how to do self-care, how to practice relaxation, how to take responsibility for my actions … Learning this has helped me.” Other women identified career aspirations and education to achieve independence, a sense of purpose, and economic stability.

Several current and former residents felt that they were given options and choices in how to approach their healing journey and gain self-confidence to take the next steps. This was crucial to women whose agency was denied by their abusers. Service providers sought balance between support and space for residents to develop autonomy. Managers described their approach as “survivor-centered,” “women-centred,” and “choice-based.” While this is the ideal, it was not always achievable and EDs pointed out the difficult “balancing act” of providing space as well as some structure to support healing and help women to move forward in their goals. Likewise, residents emphasized the need for choice-based options:

[The staff] will help you. They will give you choices, which is very important. They don’t force you; they give you the options. (Current resident)

They [staff] didn’t ever try to take the reins in your healing process, which was very empowering and helpful. (Former resident)

While developing autonomy was encouraged, the programming aspect of second stage also provided some structure for reflection so that residents could measure their own successes and adjust their goals accordingly. For example, a former resident shared:

You’re re-evaluated and asked, have you made efforts to find a job or get welfare? Are you attending your meetings? And what about your journey? Are you opening up? Are you doing enough for the children? … It doesn’t feel like a test … you have this opportunity to be here, to evolve … It has allowed me to accomplish what I set my sight on and to prepare the foundation for the future.

The transformative aspects of the program were emphasized by EDs, as well as former and current residents as one of the most significant and positive outcomes of second stage shelters.

ADDITIONAL TIME

The study results demonstrate that longer length of stay at second stage shelters of six months to two years compared with short-term stays at an emergency shelter (one–three months) was beneficial for survivors, specifically to address housing issues and foster healing and stabilization. As well, more time gave them the opportunity to develop trust with staff, participate in programs, and take advantage of cultivating a network of support and sense of community. In interviews, residents and service providers conveyed that additional time helped women achieve independence and plan their next steps and had positive impacts on their long-term success in achieving their goals.

A specific question about time was not asked in the survey. However, in a previous study, the average length of stay for those staying in second stage shelters was 10.5 months, with an average maximum stay of 15.2 months (Maki, 2019). However, interviews with service providers indicated that the
length of stay is often flexible based on each woman’s circumstances; extensions are sometimes granted because residents progress towards their goals at different rates, court dates draw out, and other crises emerge. Length of stay is also dependent on the availability of affordable housing in the community, which is often lacking, making it challenging for survivors to find housing. Despite these barriers, it was a rare and extreme case if a resident left without having secured housing.

Service providers emphasized the importance of time for residents to plan their next steps and was tied into the overarching goals of second stage:

Women are often in crisis when they move in. Slowly the time is taken to put together a plan and ensure that the pieces are in place to begin healing. When they finally depart, the personal growth that has happened can be amazing. (Survey respondent)

Second stage shelters offer us the opportunity to apply a gendered lens and a trauma-informed approach to long-term affordable housing. It gives women a chance to pause for a moment in her own space and decide what is right for her and her children . . . I think the most helpful aspect of second stage shelters is the return of “choice and time” to women who have had both of those things taken from them. (Interview, ED participant)

Second stage shelters provided “choice and time,” which facilitated the connection, support, and resources and tools for survivors to empower themselves.

For a current resident with precarious immigration status, the time afforded at the second stage shelter allowed her to relax and move past her fear. This helped her find her strength to plan for the future, “This place gave me an opportunity to relax ... I feel much more stable.” A former resident also felt that she was given time to figure things out to focus on improving her mental health:

The goals that I had were very encircled around my children. It was about parenting. They helped me get a childcare subsidy so I could put my kids in daycare for a couple of months, while I was able to process my own emotional trauma, away from them ... I knew that they were well cared for.

Time was essential for healing and current and former residents provided numerous examples of how it helped them in their individual journeys. While this was greatly needed, the costs associated with allowing women to stay for a longer duration meant that those who were ready for transitional housing in emergency shelters could not rent a unit. This resulted in both emergency and second stage shelters unable to admit new residents, creating a backlog in the system.

PROGRAMS, SERVICES, AND COMMUNITY
Second stage shelters provide a safe and affordable place to live, which is vital to support women in rebuilding their lives. However, housing is just one component of second stage shelters; at their core they are programs for IPV survivors that provides support, safety, and community. Figure 2 shows that second stage shelters provide a wide range of programming that varies across Canada. Individual counselling (86%), group counselling (70%), and programs for children (68%) were the most frequently reported programs available on site. Partnerships and referrals are used when the
shelter is unable to provide a program on site or are lacking specific expertise. Often partnerships are more collaborative than a referral and can occur on or off site depending on the arrangement.

Figure 2: Programs offered at second stage shelters and partnering organizations (N=97)

<table>
<thead>
<tr>
<th>Program Type</th>
<th>In-house</th>
<th>Partnering Organization</th>
<th>Referral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual counselling</td>
<td>86%</td>
<td>8%</td>
<td>5%</td>
</tr>
<tr>
<td>Group counselling</td>
<td>70%</td>
<td>9%</td>
<td>20%</td>
</tr>
<tr>
<td>Programs for children</td>
<td>68%</td>
<td>7%</td>
<td>19%</td>
</tr>
<tr>
<td>Life skills programs</td>
<td>61%</td>
<td>13%</td>
<td>25%</td>
</tr>
<tr>
<td>Indigenous programming</td>
<td>14%</td>
<td>35%</td>
<td>42%</td>
</tr>
<tr>
<td>Employment programs</td>
<td>7%</td>
<td>35%</td>
<td>42%</td>
</tr>
<tr>
<td>Adult education programs</td>
<td>6%</td>
<td>32%</td>
<td>58%</td>
</tr>
</tbody>
</table>

Some managers described programming as the “heart” of what second stage shelters do. Groups, counselling, programs for children, legal education, and wellness activities offer a foundation for survivors to create safety within themselves and their homes. As one ED interviewed described,

“It is the programs and services that help them gain the confidence and skills that will empower them to succeed independently. The house and the apartments are the backbone of the organization and the work we do. The programs and support are the heart and soul.”

Some tensions emerged surrounding choice and mandatory programming. While choice and autonomy were encouraged for residents, the majority (64%) of survey respondents indicated that participation in programming was mandatory as a condition of their stay. Intimate partner violence-specific programs are in place to support survivors in creating safety, healing, and developing long-term goals. There are a variety of approaches to programming. Some service providers felt it was challenging to keep women engaged in programming even when the residents had chosen the types of programs they wanted. One interviewee advocated for programming that is “holistic, organic, and flexible,” as each survivor has their own needs and goals. A survey respondent commented,

“It is a balancing act between women being autonomous and being able to live independently, the safety concerns, and the well being of other women and children in the program. We are a limited resource, so the engagement in services sets us apart from being a landlord and helps women move forward, which is why [programming] is a necessary component of the second stage program.”

The results indicate that programs were a major component and benefit of second stage shelters. Mandatory programming had mixed reviews in the literature and some studies found that it reduced women’s autonomy (Clark et al., 2019; Mekolichick et al., 2008; Melbin et al., 2003; Webster, 2013). The sample did not respond as critically to the mandatory programming with current residents reflecting positively on it. For example, a current resident shared,
They’re reasonable … When I was working, it was hard for me to make it on time on Wednesday nights for mandatory group … I didn’t want to know anybody. I didn’t want to tell my story … I wasn’t prepared to be around people. But now that I slowly started coming, slowly started talking to the other mums … We all share the same kind of pain. It’s different for all of us, but it’s the same pain, the same trauma.

Former residents were more open about their reservations about the mandatory programming. They shared that at the time they did not want to participate in it but understand the value and were glad that they participated. The main issue raised with programming was negotiating scheduling if they worked or were in school.

Programs have a positive impact on residents and promote a sense of community. Residents said that connecting with other survivors was a significant component of their healing. Knowing they were not alone and breaking the silence around abuse expanded their inner strength to continue working towards their goals. Several interviewees shared that they supported each other and developed life-long friendships. A current resident commented on the importance of friendship: “I like meeting the families. I’ve made some really good friends over the years.” A former resident said that she appreciated the “community, support, and other kids … caring for each other and supporting each other … I became a different person when I lived in this place.” As well, 94 percent of shelters surveyed incorporated communal space to encourage connection such as shared backyards, children’s play areas, and a community suite for events.

Many second stage shelters also had a variety of services that were offered to current and former residents. Safety planning (94%), applying for housing (70%), and court support (70%) were the most frequently reported services with many providing multiple services. Some services were less frequently reported, but greatly needed. For example, legal supports were available on site at 32 percent of the shelters surveyed. However, interviews revealed that most women accessing second stage shelters are at high risk for lethality or escalated violence, which has often prompted involvement of the criminal justice system, indicating a real need for legal support.

Among the five shelters visited, only one of the shelters had a family lawyer on staff. The ED explained the role of the family lawyer:

We have a family law lawyer on staff and they continue to do legal education and workshops … The lawyer also provides full representation to women who have experienced violence, who have a family law case and who don’t qualify for legal aid … we self-fund this position … I can see the positive difference it makes when a woman is represented by somebody with unlimited hours.

To compensate for the lack of on-site lawyers, close to a third (32%) of those surveyed relied on community partnerships and some provided their own court support programs, which many residents said were helpful. Court support programs were offered by shelter staff who accompany the resident to court proceedings, assist with safety planning, and provide emotional support. Although they are not legally trained, they are familiar with the general family court proceedings and can help a resident prepare. Among the residents with precarious immigration status, they were particularly thankful for the legal support they received:
Because you know that you will be in front of your abuser. But then, you have someone who is saying “don’t worry, I’m here. He won’t approach you” ... it’s someone you can trust. (Former resident)

My goal is to finish my court case. This is my dream ... I have four different court cases ... they [staff] always tell me ... we’re not going to leave you alone until this ends. (Current resident)

Especially because I am an immigrant and I left my partner, who was my spousal sponsor, I had no status ... It was such a relief that I was in a place that specifically had supports for immigration ... I’d been trying to process my immigration for so long by myself. I got denied. I tried to reapply ... I was discouraged ... But when I talked to the support workers ... they were very reassuring. (Former resident)

The programs created a space for connection among the residents and practical supports to help them find housing and navigate the legal system.

Clearly, programs were a central benefit of second stage shelters. However, the programming available is often contingent on available resources. Indeed, programming was often at risk due to inconsistent and project-based funding including the lack of core funding for staff salaries:

- We need funding that is consistent and guaranteed. I’m not interested in program funding that I have to apply for every year, because who has time to do that? (Interview, ED participant)
- We do not have core operational funding. As such, our staff salaries are paid for by grants and donations. This is not a secure form of funding and the potential for staffing cuts at any time is a risk. (Survey respondent)

Current residents were also aware of funding challenges and when asked what needed to be improved about second stage shelters, answers were consistent with “funding to be able to obtain more programming staff support.”

**LONG-TERM HOUSING**

Finding safe, affordable, and appropriate housing was a goal expressed by all residents. However, with the acute lack of affordable housing in Canada, it is challenging to find permanent housing. Indeed, among the survey respondents, 78 percent indicated that affordable housing was “always” hard to find in their community. The residents interviewed were acutely aware of how the housing gap could be lethal. A current resident commented,

- From working in housing, I know that there isn’t enough housing. That’s why women ... are dying from trying to escape, but not knowing where to go and possibly having to go back [to the abuser]. And then that one last time, they’re dead. It’s just not fair.

The majority (93%) of survey respondents shared that they drew on a wide network within their communities to find and secure affordable housing for residents; 60 percent with nonprofit housing organizations, 35 percent with homelessness-serving organizations, 32 percent with co-operative housing, and 27 percent with private landlords (Figure 3).
Many second stage shelters prioritized helping residents secure permanent housing with the majority (70%) of survey respondents providing housing supports. Specifically, this included helping residents look for affordable housing (91%), tenancy education (72%), advocacy with landlords (63%), financial assistance (31%), and rental assistance (16%). Dedicated staff to provide housing specific supports were limited. Just over a quarter (26%) had a designated housing co-ordinator or advocate for these tasks. Many surveyed and interviewed emphasized the importance of this position as this position acts as a housing activist to negotiate with landlords and make sure tenants’ rights are being adhered to.

Second stage shelters continue to support survivors even after they have moved into permanent housing to ensure that women can maintain their housing. The majority (85%) of survey respondents indicated that former residents could continue to access various supports after they move out. Their work does not end when the family moves out. Ongoing safety planning is a key component of establishing independence and long-term housing: “[We are] trying to create safety for them when they are out there.” Specific housing supports offered for former residents involved discussions about tenant rights and responsibilities (51%) and helping women identify tenancy issues that may lead to an eviction (47%) among others.

Service providers cautioned against defining “success” for residents because it is subjective. One of the goals identified by service providers was securing permanent housing. In the last year, survey respondents indicated that, on average, 76 percent of women leaving their shelter had successfully secured permanent housing. However, the affordable housing crisis coupled with a lack of funding for housing-specific resources, including staff, made it difficult to meet this goal. Given these restrictions, funders must recognize that success cannot simply be defined by this measure; rather, a more holistic understanding of success is needed.

**DISCUSSION**

As identified in past research, safety, time, and space for residents to develop independence, and long-term housing were overarching goals of second stage shelters, but our participants also emphasized the importance as well as the benefits of programs and community, which is a unique contribution to the literature. The findings from this study demonstrate that these organizational goals
combined had positive results on residents’ capacity to heal and rebuild their lives. While these organizations are clearly providing an essential and life-saving resource for those fleeing violence, the context in which they do this work is challenging with significant funding gaps (with some regions receiving no government funding), which impacts the quality and consistency of programming and maintaining qualified staff to deliver them.

Second stage shelters centre survivor’s safety, which was the key need and benefit for residents. Safety allowed women the space to confront the abuse they had endured and plan for their next steps with the support of IPV experts. Harm reduction practices, while intended to create a more inclusive, safe, and supportive environment for survivors living with substance or mental health concerns, were a common concern regarding safety among staff. Specifically, some service providers felt that they were not fully equipped or trained in harm reduction practices that continue to evolve in the sector, and raised concerns for residents who were not using or in recovery. These are not new concerns in the VAW shelter sector (Ontario Association of Interval and Transition Houses, 2013). Moving forward, experts stressed the need for more training and safety measures that can ensure that the safety of the residents and staff are integrated into service delivery, a key recommendation from previous studies concerned with reducing barriers in VAW shelters (Hovey & Scott, 2019; Ontario Association of Interval and Transition Houses, 2013). This includes first and foremost funding to implement training and practices, renewed training for front-line workers, support in implementing trauma-informed practices in shelters, access to policies and practices, and circulating current resources and promising practices.

Autonomy and time helped residents establish independence and long-term goals. Many programs are structured in a way that meet survivors where they are at and provide options in how to achieve their goals. This differed for each resident, yet the transformative and life-changing aspects were evident. Service providers aspired for the program to be flexible to each resident’s needs. However, this is not always feasible, and challenges were common, particularly around safety concerns, house rules, and mandatory programming. Overall, service users were more positive in their reflections about mandatory programs and rules than stated in other studies, which noted the difficulties and resistance to mandatory programming and recommended that program policies should be flexible (Mekolichick et al., 2008; Melbin et al., 2003; Webster, 2013; Clark et al., 2019). The only challenge identified was trying to make it work with their schedules. Service providers were mindful of these barriers, and emphasized how flexibility was built into programs as they were decided by house residents including the topics, timing, and activities.

The longer time spent in second stage compared with first stage was an advantage for residents. It allowed for a pause and time to consider healing and growth that they were unable to do when they were still in crisis. Time allowed for residents to develop relationships with staff and other residents. For the former residents interviewed, the community they found at the shelter was something that stayed with them long after they had moved on. Many stayed in regular touch and visited often. However, the drawback to extended stays is that it reduced the capacity to take on new residents. For this reason, many had maximum length of stays, which, although flexible, were in place to ensure that space would become available for new residents. With the affordable housing crisis, this was a significant challenge and created a bottle-neck effect putting strain on shelter staff. As
well, many reported that funders will only cover the stay for residents for up to a certain point and then it is on the shelter to cover the outstanding costs. Expanding second stage shelters, especially in underserved areas, could help alleviate some of this pressure, as would increasing new affordable housing earmarked for survivors of IPV.

Programs were often described as the “heart” of what second stage shelters do. Survivors found value in participating in programs. They had the opportunity to learn from others and some opened up about the abuse they endured for the first time. Many described this as an “empowering” experience. As well, they learned practical skills and wellness strategies for managing stress. Another key finding was that the support provided at these shelters often continues after resident has moved into permanent housing. This is important for funders who often only focus on the “heads in beds” as the wrap around aspects of the services are far reaching.

Acquiring long-term housing was a major goal for residents. However, housing supports varied considerably. Few shelters were able to have a housing support worker on site (26%) and 29 percent were unable to provide follow-up housing supports, largely due to staffing and financial limitations. They stressed the need for these services but, as a survey respondent noted, “Unfortunately, we do not have the staff to continue working with residents after they leave.” These workers and housing supports had significant benefits for residents, yet staffing in general is often not covered by the funders.

We asked service providers to envision what second stage could look like if funding was not an issue. Many said they would do “so much more” if they had consistent and sustainable funding. This included expanding the child and youth program and including childcare on site; full free stays for women with precarious status; language interpretation; an on-site family lawyer; housing support workers; career programs; cultural programming; Indigenous land-based programs; trauma-informed feminist design; regional networks; and transportation in rural, remote, and northern regions, to name a few.

CONCLUSION
While second stage shelters were a contributing factor in preventing women’s homelessness, the results also indicate that they provide much more than shelter; they are thoughtfully designed feminist and trauma-informed programs that support the needs of IPV survivors as they transition to long-term housing and heal from abuse. Survivors emphasized that second stage shelters are an important and life-saving support: “I’m alive, my children are alive. I think I can attribute that directly to the second stage housing. So that’s huge.”

When current and former residents of second stage shelters were asked what could be improved, many said that there needed to be more second stage shelters and additional public awareness to promote these organizations. This was also stressed by service providers and as such one of the key recommendations from this study is to increase the number of second stage shelters across Canada, especially in rural, remote, northern, and First Nations communities.

The results of the study demonstrated the absence of adequate core and sustainable funding as a key issue that affected the quality of services as well as the capacity to support survivors. While
funding challenges are common among non-profit housing providers (Deng, Leviten-Reid, & Thériault, 2023), current government funding models for second stage shelters only support the operational aspects, not the programs, outreach, or many of the services. Funding gaps were directly linked to the number of staff on site and the amount of programming that could be delivered. Under these pressures, organizations are forced to fundraise to stay open placing significant strain on the shelter staff. These life-saving organizations require sustainable core funding that covers staffing and programs.

The theoretical and practical contributions of this research include the increased awareness about second stage shelters as well as an improved understanding of how they operate, their goals, and how effective they are in providing women a safe place to rebuild their lives. This was the primary goal of the research: to map the second stage shelter landscape in Canada. The research methodology included mixed methods, which is a strength of the study; the survey gathered extensive national data, which were then able to verify and elaborate on in interviews and focus groups with those who are delivering services as well as the current and former residents of second stage shelters. Given that one of the main recommendations from the study was to increase second stage shelters, future research is needed to explore how to expand these IPV housing supports and services, particularly in underserved areas such as rural, remote, northern, and Indigenous communities.

The yet-to-be-implemented National Action Plan on Gender Based Violence and the National Housing Strategy must work together to address service and support gaps for IPV survivors who are both experiencing homelessness and fleeing abuse. Addressing these sector and policy disconnects is an important first step to ensuring that women fleeing violence, regardless of their postal code, have access to safe and affordable housing, to break the cycle of abuse and close the housing gap.

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NOTES
1. The following strategies were used to ensure confidentiality and anonymity: the names of participants were not recorded on audio files or transcripts; consent forms were kept in a locked cabinet; the audio recordings were stored on a password protected USB; all written documentation were kept on a password-protected USB, accessible only to the researcher; and all identifying information was removed from the survey data that was used for analysis.
2. At the time of the study, the WSC database contained 135 second stage and mixed shelters.
3. The National Aboriginal Circle Against Family Violence was planning a study on Indigenous Services Canada-funded second stage shelters. For this reason, this study did not include an Indigenous shelter for interviews.

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