





Today's Agenda

- 1. Welcome & Introductions
- 2. Land Acknowledgement
- 3. Lessons learned from Circle of Women
- 4. Insights From Research and Lived Experiences
- 5. Rural Women's Center Experience
- 6. Wrap up





Land Acknowledgement

We respectfully acknowledge the traditional lands on which we live and work. Two of us join from Mi'kma'ki, the ancestral territory of the Mi'kmaq People. One of us joins from Calgary, Alberta, situated on the traditional territories of the Treaty 7 Nations and the Métis Nation of Alberta, Region 3.

We are settlers and guests on Turtle Island, and we honor the enduring presence and contributions of Indigenous Peoples across these lands. We are grateful for the opportunity to gather, learn, and share our perspectives here at the Pathways to Prosperity Conference 2025, in a spirit of respect, reciprocity, and reconciliation.





Aliyyah Fazil

Program Coordinator Second Story Women's Centre

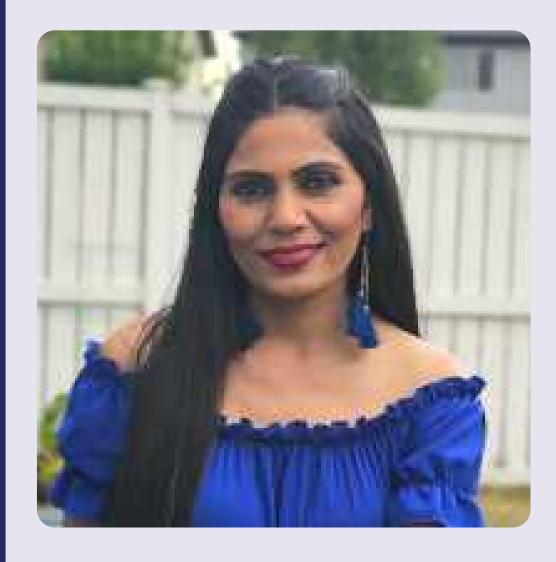




Olya Stepanenko

Project Coordinator
Immigrant Migrant Women's
Association of Halifax (IMWAH)





Sharmila Ranabhat

Recent MSW Graduate Wilfrid Laurier University















- Community-based, multi-year initiative
- Funded by WAGE (Women and Gender Equality Canada)
- Focused on GBV prevention and newcomer empowerment







The Stigma Around GBV



Gender-based violence carries stigma, shame, and silence.



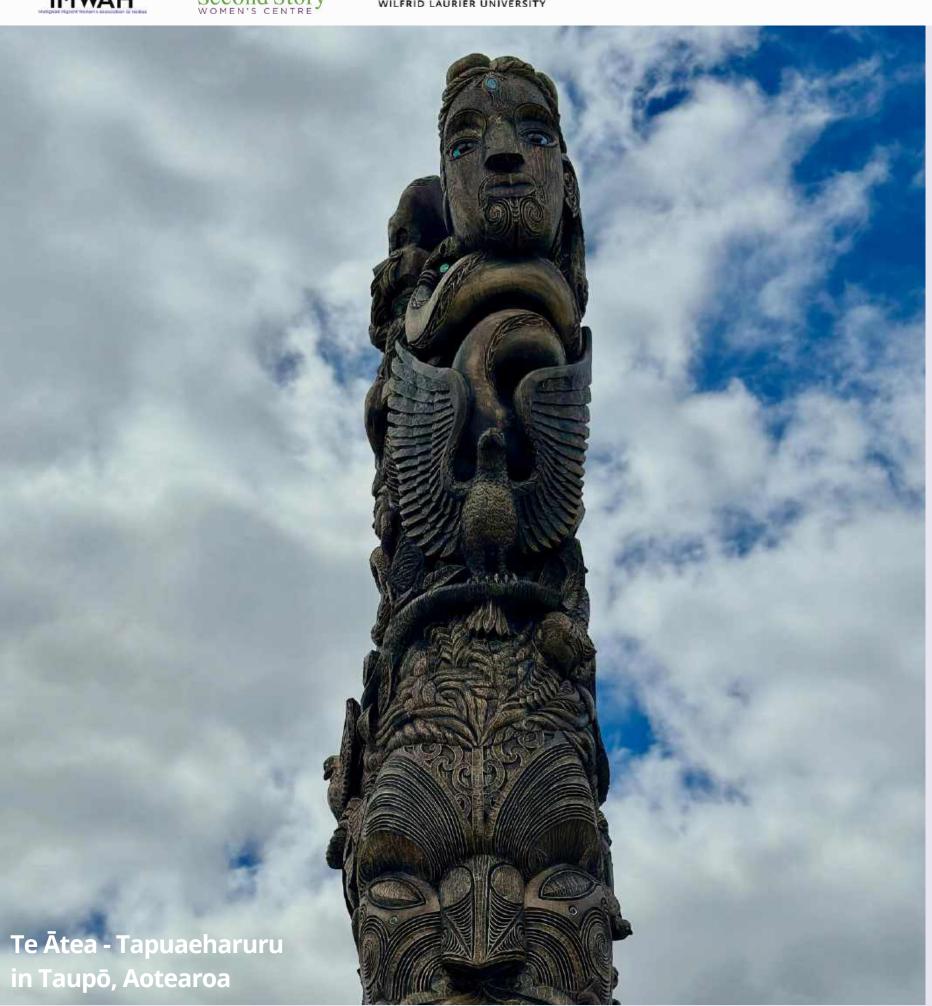
Many women fear being judged, blamed, or misunderstood by service systems, community networks, and even other women.



Mixed-gender environments can make it harder to explore these topics safely.







- Recognizing that we are all shaped by culture, and that our perspectives influence how we work.
- Examining and challenging power imbalances within systems and relationships.
- Measuring success through the community's perception of whether an interaction feels safe.
- Avoiding stereotypes and labels that reduce or oversimplify people's experiences.
- Acting in ways that do not diminish, demean, or disempower someone's cultural identity or well-being.







Cultural Awareness

- Acknowledgement of differences
- Focus on "other" & "other culture"

Cultural Competence

- Skills & behaviours that help a practitioner provide "quality care to diverse populations"
- Can build upon self-awareness
- Limited by reducing culture into a set of skills that practitioners can master and overemphasizing cultural difference

Cultural Sensitivity

- Recognize the need to respect cultural differences
- Focus on "other" & "other culture"

Cultural Safety

- Determined from the patient/community's perspective
- Considers the social, political & historical contexts
- Requires practitioners to be self-reflective

Anti-Racism

Reducing power differences between minority and dominant groups

Cultural Humility

Process of selfreflection to understand personal & systemic biases & privilege

Trauma & Violence Informed Care

Recognize the impacts & root causes of historical intergenerational trauma

This graphic has been adapted from Baba, L. (2013). Cultural safety in First Nations, Inuit and Métis public health: Environmental scan of cultural competency and safety in education, training and health services. Prince George, British Columbia, Canada: National Collaborating Centre for Indigenous Health. BC First Nations Health Authority. "Cultural Humility." 2019.









Despite our efforts, event attendance remained inconsistent

This led us to ask:

- Are these workshops having the outcomes we hoped for?
- What are participants telling us through their feedback, and through their absence?

These questions guided us into the second phase of Circle of Women, where we focused more intentionally on understanding what truly makes a space feel:

- Safe
- Welcoming
- Worth showing up for







Circle of Women: Year 1

Findings:

- They wanted more opportunities to gather and practice English.
- They wanted more information about financial and legal rights.
- They wanted to learn together in supportive environments.
- They felt the spaces were safe
- They wanted consistency









Circle of Women: Year 2

In Year 2, we shifted our approach in response to what women told us they needed — more opportunities to connect, practice English, and learn together. We introduced Conversation Groups in both Halifax and Truro:

In Truro, participation was challenging due to limited childcare, employment schedules, and the lack of public transportation.

In Halifax, however, the program quickly flourished — within a few month, we received over 70 applications.

An average of 8-10 women now attend inperson sessions regularly.

6–8 women join each virtual session.







To complement the Conversation Groups, we continued offering workshops focused on:

- Health and wellness
- Consent and healthy relationships
- Recognizing gender-based violence (GBV)
- Navigating safety in community spaces

These workshops were better attended and more impactful when grounded in the trust and connection built through the conversation circles.







Why It Worked:

The Power of Women-Only, Culturally Safe Spaces

By making space to address the needs of our community, we created room for:

More open and honest conversations about sensitive topics

Culturally responsive participation without fear of judgment

Relationship-building and peer connection

Increased confidence to speak, share, and learn















Who I am in Canada?
(Marginalized, Minority Identity)

Who I was in Nepal?
(Dominant, Privileged Identity)









- 31 collected stories
- 20 country of origin
- South Asian heritage followed by African & Caribbean and Arabic region
- 61% storytellers are adult
- Young adult 26%
- Seniors 13%
- 9 from refugee background, 8 from single mothers, 6, women with disabilities or children with special needs and 3 transgender women
- 8 stories related to gender-based violence







History & Evolution

Immigrant women (31.4%)

Single mothers (30.4%)

Racialized women (21%)

Employment Barriers

Unemployment rate:

Immigrant women **14.7**%

Canadian-born **5.2**%

Mental Health Decline Over Time

- Initially arrive healthy
 (those came through point base system)
- Decline within 5-10
 years due to isolation,
 discrimination &
 employment struggles

Domestic Violence & Barriers to Leaving

Legal fears, economic barriers, language barriers, lack of housing/support prevent leaving abusive relationships.

Citations

- Canadian Women's Foundation, 2018
- Statistics Canada, n.d.
- CIHI, 2009; Statistics Canada, 2019; Beiser, 2005
- Canadian Women's Foundation; OCASI







"Because I was divorced, we were no longer invited to social gatherings. I wasn't welcome anywhere, and neither were my children. It was the same community, the same family... I was dishonored and shamed by my own family... I wasn't treated with respect, and neither were my children"



Intersectionality of Storyteller

(Syria – Arab Heritage)





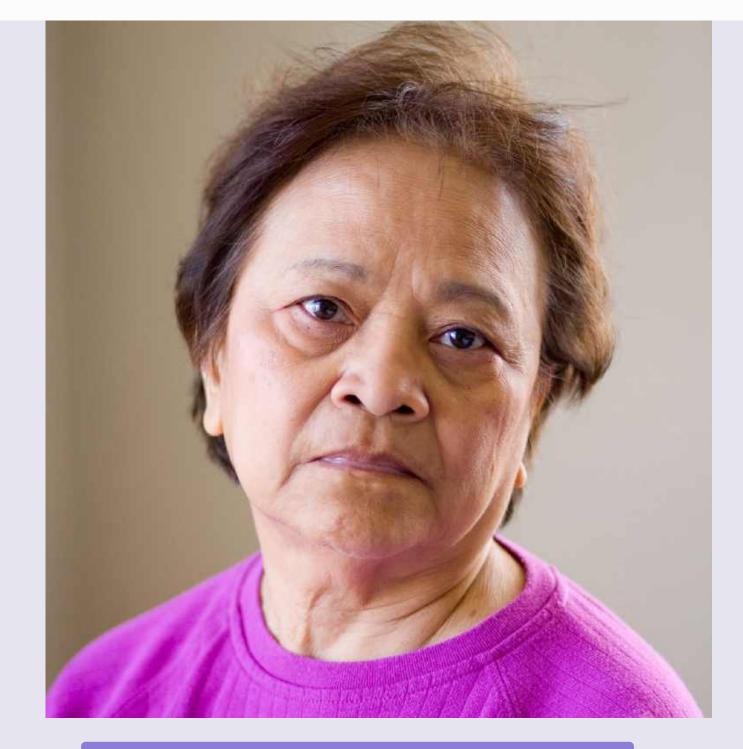


"I did not know how to access the government resources my daughter was entitled to."

My greatest hope now is for her to gain independence to one day be able to stand on her own, so that when I am no longer able to work, she can take care of herself.

Now, I rely on my single full-time job, along with the small government support my daughter receives... The weight of survival is still on my back.

In the 17 years I've been in Canada, I have only returned to Vietnam twice — once in 2017, after 15 years of separation, to finally see my relatives, and again in 2024 to mourn the loss of my brother."



Intersectionality of Storyteller (Southeast Asian Heritage)

A racialized immigrant, Buddhist single mother. As a sole provider, mother of daughter with disability, domestic violence survivor, she navigates language, disability, faith, race, gender, class, and age in Canada.



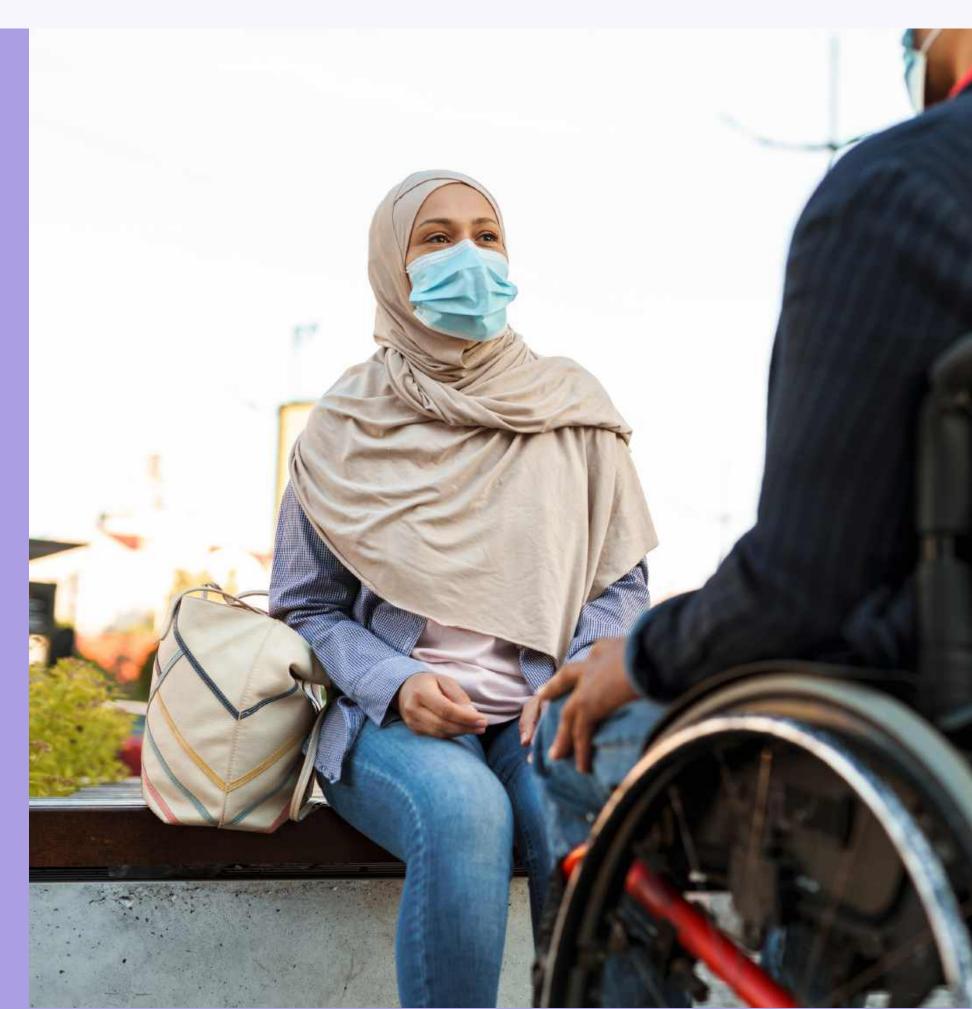




Intersectionality of Storyteller

(South Asian Heritage)

A racialized immigrant with disability, Muslim single mother for a long time, now remarried, As a sole provider, domestic violence survivor, she navigates language, disability, faith, race, gender, and class in Canada.









"I had three jobs just to cover the basic needs — one full-time minimum wage job, driving patients from the hospital in the evenings, and babysitting whenever I could. I lived in constant fear of eviction and losing custody of my child. I was young, trapped in an abusive relationship, and without the financial means to seek a divorce."

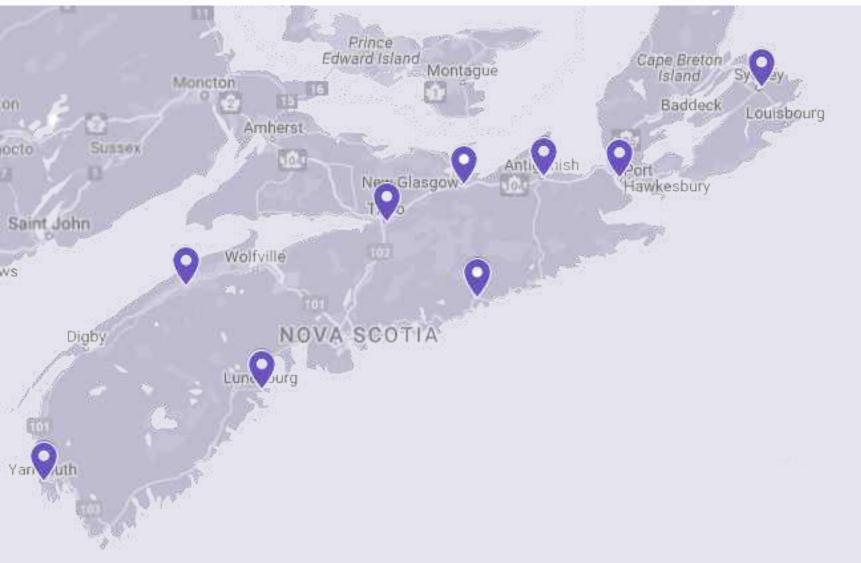
"I was working nonstop, so I never had time to look for support or other resources. Coming from a traditional Muslim family, separation and divorce were seen as a shameful thing. I was expected to silently endure my husband's abuse. All these pressures and abuse affected my mental and emotional health deeply. I felt trapped and alone, and I eventually reached a breaking point—I attempted suicide."











Women's Centres In Nova Scotia:

- Tri-County Women's Centre
- Second Story Women's Centre
- The Women's Place Resource Centre
- The Lotus Centre-A Resource for Women Society
- LEA Place Women's Resource and Sexual Assault Centre
- Pictou County Women's Centre and
- Antigonish Resource Centre and Sexual Assault Service Association
- Strait Area Women's Place
- Every Women's Centre

Women's Centres are community organizations

Nova Scotia's nine Women's Centres are in rural communities from Yarmouth to Sydney, Nova Scotia. They provide safer and accessible physical space, which is welcoming, non-judgmental, and open to all women;

- Offer resources, services, and programs;
- Initiate and carry out social change work, the focus of which is to increase the status of all women;















- Limited gathering spaces for newcomers
- Limited transportation options
- Small population
- Preserved community character offers charm but also imposes constraints on how the community is expected to look and evolve

































"I am new in Canada with this conversation session I could find new friends here who help me a lot and also I have learnt a lot about the culture." (Circle of Women Participant, Key-Informant Interviews 2025)

Programs grounded in care, humility, and real-world relevance go further.

Cultural safety means designing with — not just for — communities.

When we listen deeply and adapt intentionally, we build more than knowledge. We build trust, belonging, and collective resilience.







References

- Baba, L. (2013). Cultural safety in First Nations, Inuit and Métis public health: Environmental scan of cultural competency and safety in education, training and health services. Prince George, BC: National Collaborating Centre for Indigenous Health & BC First Nations Health Authority
- Beiser, M. (2005). The health of immigrants and refugees in Canada. Canadian Journal of Public Health, 96(Suppl 2), S30–S44. https://doi.org/10.1007/BF03403701
- Canadian Institute for Health Information. (2009). Improving the health of Canadians: Exploring positive mental health. https://secure.cihi.ca/free_products/PMH2009EN.pdf
- Canadian Women's Foundation. (n.d.). Fact sheet: Women and poverty in Canada. https://canadianwomen.org/wp-content/uploads/2018/09/Fact-Sheet-WOMEN-POVERTY-September-2018.pdf
- Public Health Agency of Canada. (2023, June 20). Common definitions on cultural safety: Chief Public Health Officer Health Professional Forum. Government of Canada. https://www.canada.ca/en/health-canada/services/publications/health-system-services/chief-public-health-officer-health-professional-forum-common-definitions-cultural-safety.html
- Raufi, S., Refol, J., Frost, A., & Card, K. (2023, March 20). How to promote inclusion for newcomers? Evidence brief. Social Connection Guidelines.
- Statistics Canada. (2019). The mental health of immigrants and refugees: Canadian Community Health Survey findings. https://www150.statcan.gc.ca/n1/pub/82-003-x/2019004/article/00001-eng.htm
- Statistics Canada. (n.d.). Labour force characteristics by immigrant status and period of immigration, annual. https://www.statcan.gc.ca/
- Statistics Canada. (n.d.). Immigrant women. https://www150.statcan.gc.ca/n1/pub/89-503-x/2015001/article/14217-eng.htm#a21
- Statistics Canada. (2019). The mental health of immigrants and refugees: Canadian Community Health Survey findings. https://www150.statcan.gc.ca/n1/pub/82-003-x/2019004/article/00001-eng.htm
- Statistics Canada. (n.d.). Immigrant women. https://www150.statcan.gc.ca/n1/pub/89-503-x/2015001/article/14217-eng.htm#a21