WINNIPEG SAFE CITY

Partner in UN Women Safe Cities and Safe Public Spaces Global Programme

ADDRESSING SEXUAL VIOLENCE AGAINST WOMEN AND GIRLS IN PUBLIC SPACES

SCOPING STUDY

WINNIPEG SAFE CITY STEERING COMMITTEE

2016
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“Violence against women and girls is one of the most systematic and widespread human rights violations. It is rooted in gendered social structures rather than individual and random acts; it cuts across age, socio-economic, educational and geographic boundaries; affects all societies; and is a major obstacle to ending gender inequality and discrimination globally” (UN General Assembly, 2006).

Trigger warning: This report, or pages it links to, contains information about sexual assault and/or violence which may be triggering to survivors.
ACKNOWLEDGEMENTS

The undertaking of this scoping study would not have been possible without the acceptance from United Nations (UN) Safe Cities and Safe Public Space Global Programme for Winnipeg to join this important and timely initiative.

The City of Winnipeg and the Manitoba Status of Women prepared this document on behalf of the Winnipeg Safe City steering committee. We are grateful to the steering committee members, past and present, whose thoughtful contributions, expertise and time guided the preparation of this document.

We appreciate the many meetings, focus groups, research and data discussions that steering committee members contributed to. While not always publicly disclosed, we acknowledge the experience of steering committee members who are, or may be survivors of sexual violence. This scoping study represents one segment of work completed by the Winnipeg Safe City initiative. The process of writing this report began in 2013, when Winnipeg joined the initiative, and has a completion timeline of 2016. The objective of writing the scoping study is to guide the ongoing and evolving work of the steering committee.

Most importantly, to the women and girls who so bravely shared their stories and experiences of sexual violence, trauma and discrimination – your strength and courage is recognized and deeply appreciated. And to the countless women and girls who already have or will experience sexual violence and who have not yet known justice, this report is for you.

Steering committee members acknowledge that the Winnipeg Safe City work is undertaken on Treaty 1 Territory and the homeland of the Métis nation.

Past and present steering committee members:

- City of Winnipeg (Councillor Gilroy, Winnipeg Committee for Safety)
- Government of Manitoba (Manitoba Status of Women, Children & Youth Opportunities, Manitoba Justice, Special Advisor on Aboriginal Women and Girls)
- Hollaback!
- Institute for International Women’s Rights (Manitoba Chapter)
- Ka Ni Kanichihk
- Klinic Community Health Centre
- Representatives from the newcomer community
- Sexual Assault Nurse Examiner Program (Health Sciences Centre)
- Southern Chiefs’ Organization
- University of Winnipeg (including University of Winnipeg Students’ Association)
- Winnipeg Police Service
- Winnipeg Transit

Copies of this report are available at: http://www.winnipeg.ca/UNWpgSafeCity
# TABLE OF ACRONYMS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>CC:</td>
<td>Criminal Code of Canada</td>
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<tr>
<td>CMA:</td>
<td>Census Metropolitan Area</td>
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<tr>
<td>CNAC:</td>
<td>Community Notification Advisory Committee</td>
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<tr>
<td>CSC:</td>
<td>Charged/Suspect-Chargeable</td>
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<tr>
<td>CSO:</td>
<td>Community Safety Order</td>
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<tr>
<td>ECO:</td>
<td>Emergency Closure Order</td>
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<tr>
<td>GSS:</td>
<td>General Social Survey (Statistics Canada)</td>
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<tr>
<td>HSC:</td>
<td>Health Sciences Centre</td>
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<tr>
<td>MMIWG:</td>
<td>Missing and Murdered Indigenous Women and Girls</td>
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<tr>
<td>NHS:</td>
<td>National Household Survey</td>
</tr>
<tr>
<td>PTSD:</td>
<td>Post Traumatic Stress Disorder</td>
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<tr>
<td>RCMP:</td>
<td>Royal Canadian Mounted Police</td>
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<tr>
<td>SANE:</td>
<td>Sexual Assault Nurse Examiner</td>
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<tr>
<td>U of W:</td>
<td>University of Winnipeg</td>
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<tr>
<td>UCR:</td>
<td>Uniform Crime Reporting</td>
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<tr>
<td>UN:</td>
<td>United Nations</td>
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<tr>
<td>WPS:</td>
<td>Winnipeg Police Service</td>
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<tr>
<td>WCFS:</td>
<td>Winnipeg Committee for Safety</td>
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## DEFINITIONS AND TERMINOLOGY

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Ableism:</td>
<td>Prejudice and discrimination against people with disabilities, including the expression of hate for people with disabilities, denial of accessibility, rejection of disabled applicants for housing and jobs, institutionalized discrimination in the form of benefits systems designed to keep people with disabilities in poverty, etc.</td>
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<tr>
<td>Cisgender:</td>
<td>A person whose self-identity conforms with the gender that corresponds to their biological sex.</td>
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<tr>
<td>Clearance rate:</td>
<td>The proportion of reported criminal incidents that are solved by the police. For an incident to be cleared, an accused person must be identified and there must be sufficient evidence for the police to lay or recommend a charge.</td>
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<tr>
<td>Consent:</td>
<td>The voluntary and continuous agreement of the complainant to engage in the sexual activity in question.</td>
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<tr>
<td>Disability:</td>
<td>Disability “is a complex phenomenon, reflecting an interaction between features of a person’s body and mind and features of the society in which they live. A disability can occur at any time in a person’s life; some people are born with a disability, while others develop a disability later in life. It can be permanent, temporary or episodic. Disability can steadily worsen, remain the same, or improve. It can be very mild to very severe. It can be the cause, as well as the result, of disease, illness, injury, or substance abuse.”</td>
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<tr>
<td></td>
<td>People with disabilities may have either physical, cognitive or mental limitations or a combination thereof. Some examples include (but are not limited to) complete or partial paralysis, visual/hearing impairment, cognitive delays, Attention Deficit Hyper-Activity Disorder (ADHD), Social Anxiety Disorder, Chronic Depression and/or Schizophrenia. It is important to note that socially constructed attitudes and barriers greatly contribute to societal acceptance and inclusion of people with disabilities.</td>
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<tr>
<td>Ethnocultural:</td>
<td>An ethnocultural community or group is defined by the shared characteristics unique to, and recognized by, that group. This includes characteristics such as cultural traditions, ancestry, language, national identity, country of origin and/or physical traits.</td>
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<tr>
<td></td>
<td>To the extent that religion is inextricably linked to the group’s racial or cultural identity, it can also be recognized as a defining characteristic. In some cases, a group may view its common origin as pan-national, or it may be based on geographic region of origin. These characteristics are the basis on which, generally speaking, one group culturally distinguishes itself from another.</td>
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<tr>
<td></td>
<td>Sometimes encompassed by the term ethnocultural are groups that identify as ethnoracial or racialized. Some use these terms instead of ethnocultural, to make it clear that groups distinguishable by a visible characteristic (often skin colour, but also other shared physical traits) are more vulnerable to discrimination and disadvantage.</td>
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</table>
**Note: Aboriginal peoples** - The case law recognizes Aboriginal peoples as having a distinct status (based on their unique historical, legal and constitutional position in Canada). We do not include this group in our definition of ethnocultural.

**Note: Disadvantage** - This is reflected in the barriers some groups face to full and equal participation in Canadian society. They may be disadvantaged socially, politically, educationally, as well as economically. For example, members of some ethnocultural and ethnoracial communities experience discrimination, unequal access to services (for example, due to language or cultural barriers), high levels of poverty and greater vulnerability to violence (for example, the target of hate crimes). This disadvantage sometimes results in substandard living conditions in neighbourhoods that have inadequate housing, high crime rates, low educational achievement and public health problems. Not all ethnocultural communities in Canada will face disadvantage, nor will ethnocultural communities experience exclusion in the same way.

**Experiential (person):** This report uses the term experiential people to refer to individuals who have been or are currently being sexually exploited or trafficked.

**Femicide:** The intentional murder of women because they are women.

**Homophobia:** The irrational fear of, aversion to, or discrimination against homosexuality or those who identify and/or are perceived to have a homosexual sexual orientation.

**Indigenous:** This report uses the term Indigenous to include First Nations, Métis, Inuit and Non-status Indians as defined in the Canadian Constitution and may use the term “Aboriginal” (which Statistics Canada defines as including First Nations, Métis and Inuit) where we are quoting or referring to statistics.

In their paper *First Peoples, Second Class Treatment*, the Wellesley Institute provides a helpful explanation of terms used to describe Indigenous peoples in Canada:

> Globally, no universal definition of Indigenous peoples has been accepted (Bartlett et al., 2007). Being able to define one’s community on one’s own terms is a central part of self-determination. Definitions of Indigenous also change over time and are not static. Most definitions will include reference to the relationships of Indigenous peoples to a collective kin group and a current or historic land base (Pinto and Smylie, 2012). A commonly employed definition of Indigenous emerging from the United Nations commissioned study by Martinez Cobo (1987) defines Indigenous as: “communities, peoples and nations...which, having a historical continuity with pre-invasion and pre-colonial societies that developed on their territories, consider themselves distinct from other sectors of the societies now prevailing on those territories, or part of them. They form, at present, non-dominant sectors of society and are determined to preserve, develop and transmit to future generations their ancestral territories, and their ethnic identity, as a basis of their continued existence as peoples, in accordance with their own cultural patterns, social institutions and legal system” (p. 17).
Aboriginal is a government imposed, legally defined term collectively referring to all of the Indigenous peoples of Canada and their descendants. The Canadian Constitution Act of 1982 specifies that the Aboriginal Peoples in Canada consist of three groups: Indians, Inuit and Métis.

The term First Nations came into common use in the 1970s to replace Indian, which some people found offensive. Despite its widespread use, there is no legal definition for this term in Canada.

The Canadian government classifies First Nations/Indian people according to whether or not they are registered under the federal Indian Act. Status Indians are registered under the Act. First Nations/Indian people who are not registered under the Act are referred to as non-status Indians.

The Inuit traditionally lived above the tree line of what is now Canada, and are part of a larger circumpolar Inuit population that includes Greenland, Alaska, and Russia. Inuk refers to an individual Inuit person.

The Métis are a group of Aboriginal peoples whose ancestry can be traced to the intermarriage of European men and First Nations/Indian women in Canada during the 17th century. Individuals of mixed Indigenous and non-Indigenous ancestry who are not directly connected to the Métis of the historic northwest may also identify themselves as Métis.

Indigenous peoples in Canada also refer to themselves by their specific tribal affiliation (such as Mi’kmaq, Cree, Innu, Ojibwa) or First Nations, Native, Indian, Inuit or Métis.

LGBT2SQ+: The LGBT2SQ+ community includes people who identify as lesbian, gay, bisexual, transgender, Two-Spirit, queer, questioning, intersex, asexual, pansexual and/or gender fluid. This community values and celebrates a diversity of sexual orientation(s), gender identities and expressions. This community also embodies a strong resolve to dismantle the various intersecting systems of oppression, prejudice and discrimination that individuals face through advocating for human rights and freedoms and by fostering inclusion and acceptance.

Newcomer: This report uses the term newcomer as a general term referring to anyone who was born outside of Canada. It includes immigrants and refugees, citizens and non-citizens.

Racism: The irrational fear of, aversion to or discrimination against people based on their actual or perceived race/ethnicity.

Sexism: The irrational fear of, aversion to, or discrimination against people based on their actual or perceived sex/gender.

Sexual Assault: Sexual assault is defined in the Criminal Code of Canada into three separate offences: S 271: Sexual assault (level 1); S 272 Sexual assault committed either with a weapon or with threats to a third party, or causing bodily harm (level 2); and, S 273 Aggravated sexual assault (level 3).
Sexual exploitation: (1) Child sexual exploitation:

This report uses the Government of Manitoba’s definition of child sexual exploitation (under their provincial strategy), which is: the act of coercing, luring or engaging a child, under the age of 18, into a sexual act, and involvement in the sex trade or pornography, with or without the child’s consent, in exchange for money, drugs, shelter, food, protection or other necessities.

(2) Sexual exploitation (general): This report uses the term sexual exploitation to refer to “any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another.”

Sexual harassment: Sexual harassment includes offensive or humiliating behaviour that is related to a person’s sex, as well as behaviour of a sexual nature that creates an intimidating, hostile or poisoned environment.

Sexual violence: A broad concept that includes a range of acts in which people can be sexually violated. Examples include all forms of sexual harassment, forced, actual or attempted sexual intercourse, unwanted sexual contact, sexual assault, unwanted sexual comments, sexual molestation, sexual abuse of children, genital mutilation, forced sexual initiation, and sexual exploitation and trafficking with sexual purpose, among others.

Trafficking: This report uses the following UN definition of trafficking:

(a) The recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, abduction, or fraud, or deception, of the abuse of power or a position of vulnerability or the giving or receiving of payments or benefits to achieve the consent of a person having control over another person for the purpose of exploitation.

(b) Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery, servitude or the removal of organs.

(c) The consent of a victim in trafficking in persons to the intended exploitation set forth in subparagraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used.

(d) The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered “trafficking in persons,” even if this does not involve any of the means set forth in subparagraph (a) of this article.

(e) “Child” shall mean any person under the age of 18.

(f) All signatories to the Protocol are required to establish comprehensive policies and programs to protect victims and to prevent and combat human trafficking.
**Traffickers:** A term used to describe any individual, gang or organized crime group involved in any of the activities set out in the UN definition of trafficking.

**Transphobia:** The irrational fear of, aversion to, or discrimination based on a person’s actual or perceived transgender status/identity.

**UN “Safe City”** A safe city is one in which both the government and civil society guarantee women’s rights in all spheres (including but not limited to, social, economic, cultural and political life). It promotes the elimination of gender-based violence, where women and girls can enjoy public life without fear of being harassed, assaulted and discriminated against. Additionally, a safe city is one in which the state and local government(s) take actions to provide attention, prevention and punishment for violence against women and girls and guarantees them access to justice.¹⁰

**Victim/Survivor:** Where we are referencing quantitative data (ex: from Statistics Canada or Winnipeg Police Service) we use the term victim to be consistent with the terminology used by those sources. Elsewhere in the document, we use the term survivor to be consistent with common usage by those in women’s communities. While we are using the terms victim and survivor synonymously throughout this document, it is important to note that these are terms that some may feel do not reflect their own lived experiences. The legal system refers to those who have been victimized as victims, and others refer to themselves as survivors, recognizing that they have survived sexual violence. Others may not identify with either of these terms. The choice belongs to the person who has experienced sexual violence to determine what language they identify with and helpers should honour that choice. Just as the effects and reactions to any crime vary from person to person, the impacts of and responses to sexual violence can be as individual as the people who experience it. It is important to note that not all victims of crime including sexual violence identify with the label victim. Some individuals simply choose not to label themselves or their experience. Some people who initially label themselves as victims may transition to identifying as a survivor and some individuals may adopt that label from the outset. In this document, the term victim is used to signify the violation(s) that these individuals have endured. In doing so, we do not wish to negate the resiliency that is necessary for one to survive sexual violence both during and after it has taken place.

**Xenophobia:** The irrational fear of, aversion to, or discrimination of foreigners.
SECTION 1: BACKGROUND

WINNIPEG SAFE CITY

Winnipeg became the first North American city to sign onto the UN Women Safe Cities and Safe Public Spaces Initiative (Safe Cities) in 2013. UN Women launched the program in 2010 as a global response to sexual violence against women and girls.

As a partner in the global initiative, Winnipeg Safe City will respond to and prevent sexual violence in Winnipeg public spaces by engaging local women’s and community organizations, service providers, justice officials and the municipal and provincial government.

The Safe Cities program model is unique in its emphasis on both local strategies for preventing and responding to sexual violence against women and girls, while also placing that violence in an international context (by drawing on international conventions and treaties). The Safe Cities program recognizes sexual violence against women and girls in public spaces is a universal issue and is intimately connected to systemic forms of inequality, social exclusion and marginalization, institutional disadvantage, urban safety and sexual and reproductive health.

Winnipeg Safe City is co-led by the City of Winnipeg and Government of Manitoba (Manitoba Status of Women). Key partners include the University of Winnipeg, Winnipeg Police Service, Ka Ni Kanichihk, Klinic Community Health Centre, the Sexual Assault Nurse Examiner Program at the Health Sciences Centre, Winnipeg Transit and the Institute for International Women’s Rights (Manitoba Chapter). These partnerships demonstrate leadership and a strong commitment to improving women’s safety in Winnipeg.

The Winnipeg Safe City program involves four areas of work:

1. Data collection and analysis (national and local statistics; focus groups with local women).
2. Developing partnerships with local people who bring knowledge, experience and expertise in public safety, urban planning, gender equality and violence against women and girls.
3. Designing and sharing public awareness materials to improve understanding and awareness of the causes and consequences of sexual violence.
4. Building organizational and institutional capacity to better understand, prevent and respond to gender-based issues, including violence and safety in public spaces.

STEERING COMMITTEE

One of the first steps following the launch of Winnipeg Safe City was establishing a steering committee to oversee and advise the roll out of the initiative. The steering committee includes representatives with local knowledge of the intersections of age, gender, race and ethnicity, and experiences of violence against women and girls. Committee membership includes representatives from the provincial and municipal government, health and law enforcement, and organizations and institutions committed to women’s rights, public safety and security and women’s health.
Committee members were selected given their community experience, ability to adopt measures which will have short, medium and long-term impacts upon citizens’ everyday lives, and for their experience in building consensus and working across political affiliations.

Steering committee membership is fluid and evolving; some members have participated since the initiative began, some have and will contribute temporarily and others have recently joined.¹

Since June 2014, the steering committee has been meeting to build relationships with others working on this important and sensitive issue. It is important to note that while not always disclosed publicly, membership includes those with personal experiences of sexual violence.

Some of the first things the committee discussed were definitions, guiding principles and overall directives for the work.

**DEFINITIONS**

*Sexual Violence*

UN Women define sexual violence as including a range of behaviours and attitudes, from verbal harassment to sexual assault, rape, sexual exploitation and homicide. One of the goals of the Safe Cities initiative is to generate more awareness of other forms of sexual violence, in addition to sexual assault.

As a partner in the global initiative, the Winnipeg Safe City program uses a similar definition of violence. Steering committee members have defined sexual violence for the purposes of this scoping study as: a range of harmful attitudes and behaviours (which includes gendered and racialized stereotypes), street and other forms of sexual harassment, sexual assault, stalking, rape, sexual exploitation, human trafficking and homicide. Sexual violence can also manifest itself as Missing and Murdered Indigenous Women and Girls (MMIWG).

It is important to recognize that while sexual violence is a form of gender-based violence and women and girls are often victims, cisgender men, transgender individuals and boys experience sexual violence as well. Our focus remains on women and girls for the purposes of this study.

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¹ Initial membership included representatives from: Ká Ni Kiichik, Winnipeg Police Service, Winnipeg Police Board, Institute for International Women’s Rights (Manitoba Chapter), Hollaback!, Klinic Community Health Centre, City of Winnipeg, University of Winnipeg, Government of Manitoba (Manitoba Status of Women, Children & Youth Opportunities, Victim Services, Special Advisor on Aboriginal Women and Girls) and representatives from the newcomer community.
**Environmental Enabling; Rape Culture**

This kind of broader interpretation of sexual violence against women and girls takes into account environmental factors that enable sexual violence. In their 2002 journal article on rape prevention programs for college fraternity men, Tracy Davis and Deborah Liddell describe sexual violence as “a series of learned behaviour(s) acquired through routine social and environmental interaction.” The concept of sexual violence as learned behaviour has been alternatively referred to as ‘rape culture,’ and ‘environmental enabling:’ a culture of intimidation which keeps survivors (especially women) confined to a specific range of behaviour in order to avoid sexual violence.  

Enabling environments function by perpetuating and condoning sexual violence, while simultaneously blaming survivors for the violence committed against them. Through socialization, enabling environments not only excuse sexual violence, but also encourage it to continue. From seemingly innocuous examples such as rape jokes that demonstrate male sexual entitlement to women’s bodies, to the pervasive sexual objectification of the female body to sell products, women’s bodies are consistently trivialized, reduced and dehumanized in everyday ways. 

Incidents of sexual violence that conform most closely with deep rooted beliefs about perpetrators and survivors, shape and contribute to rape myth acceptance. Narratives about ‘victims’ (survivors) and perpetrators often result in soft convictions and reporting rates. Sympathy for convicted perpetrators, particularly those with social power and privilege (ex: athletes and celebrities), trivialize perpetrators’ responsibility. Additionally, culturally-accepted assumptions based on the intersection of gender, race and class are embedded in the binary of ‘good’ versus ‘bad’ victims (survivors), and often dictate which types of survivors garner sympathy and support.  

Increasing attention has been drawn towards incidences of sexual violence that involve the use of alcohol and/or drugs, particularly on post-secondary campuses. Enabling environments work by blurring the lines between persistence and coercion. These environments treat a diminished capacity to consent (such as via alcohol or drug use) as a legitimate path to securing sexual access and ignore non-physical sexual violence as unrelated to sexual assault. In other words, an enabling environment is one which encourages victim blaming and places the responsibility on women to avoid being sexual assaulted. This works to encourage offenders by suggesting their behaviour will be, if not accepted, at least not blamed on them. It also suggests to survivors that they bear the responsibility for their own assault. In such an environment, the likelihood of confiding in others, seeking medical or other professional services, or formally reporting sexual assault is greatly diminished. These examples illustrate a widespread cultural phenomenon in which sexual violence is encouraged and reinforced. In order for prevention and intervention strategies to be successful, they must involve changing the cultural mindset that condones sexual violence and allows it to prevail. 

**“Safe City”**

UN Women defines a ‘safe city’ as: (1) one in which both the government and civil society guarantee women’s rights in all spheres; and, (2) a city that promotes the elimination of gender-based violence, while at the same time promoting equal opportunities for men and women in all spheres of social,
economic, cultural and political life (ex: access to employment, education, political participation, resources, leisure). 21

GUIDING PRINCIPLES

Steering committee meetings highlighted a number of overall directives. Fostering a culture of prevention requires organized efforts and shared commitments, clearly defined goals, and most importantly, a collective willingness to address complex and challenging realities through a lens of equality, participation and ownership.

Committee members have stressed the importance of prioritizing Indigenous-led research, programming and services as an integral part of the anti-violence initiative. This underscores the importance of engaging Indigenous women in all phases of Winnipeg Safe City work, including research, program design, implementation and evaluation.

The committee members also acknowledge sexual violence impacts women and girls across a multitude of backgrounds. Simply by being female, or by being perceived as female, women and girls are at increased risk of experiencing various forms of sexual violence.

One key goal within the Safe Cities program is to reach out to, and remain inclusive of, those most affected by sexual violence as well as those who remain disadvantaged and marginalized in the intervention areas. Critical to the success of any Safe Cities program is developing context-specific solutions that address and respond to local experiences. For Winnipeg Safe City to be successful, it must include and address experiences of individuals from different sub-sections of the population, including young women, women with disabilities, women from ethnocultural communities, newcomer and immigrant women, and individuals from the Lesbian, Gay, Bisexual, Transgender, Two-Sprit, Queer, Intersex and Asexual (LGBT2SQ+) community, who are at increased risk of sexual violence.

The steering committee outlined the following four guiding principles for Winnipeg Safe City:

1. Recognize a continuum of sexual violence against women and girls, ranging from gendered stereotypes to harassment, sexual assault, sexual exploitation and homicide.
2. Acknowledge the impact of historical and ongoing colonization for Indigenous women and girls and their experiences of sexual violence by prioritizing Indigenous-led reclamation, reconciliation and resource allocation within interventions and outcomes.
3. Ensure the inclusion of diverse and marginalized women within the area, including women with physical and/or cognitive disabilities, women from ethnocultural communities, newcomer women, women who are homeless, and women who have been or are being sexually exploited.
4. Identify some of the underlying reasons for non-reporting by analyzing statistical data alongside the experiences and perspectives of affected women and girls.

Once the committee had determined basic guiding principles, they then considered where (geographically) to focus the initiative.
SITE SELECTION

Safe Cities is rooted in the understanding that the most promising initiatives are tailored to meet the unique needs of local women and girls by building on local strengths and local initiatives. The steering committee was tasked to identify specific locations in Winnipeg to focus its efforts. Two Safe City Sites were selected:

- Site 1: five neighbourhoods in downtown Winnipeg (South Portage, Spence, Portage-Ellice, Central Park and West Alexander)
- Site 2: the University of Winnipeg campus

The two sites are described in detail in section 3.

SCOPING STUDY

To inform the development of Winnipeg’s Safe City program, the Government of Manitoba (Manitoba Status of Women), and the City of Winnipeg committed to complete a scoping study with women’s organizations, the Winnipeg Police Service and other community partners. Each city participating in the global program undertakes this first step to gain a deeper understanding of the nature and extent of sexual harassment and other forms of sexual violence against women and girls in public spaces, and the context in which it occurs.

The scoping study is intended to:

- Describe the prevalence of national, provincial and localized experiences of sexual violence.
- Provide a frame of reference and strategy for preventing and reducing sexual violence against women and girls in Winnipeg.
- Demonstrate the prevalence of sexual violence against women in public spaces.
- Share in greater detail with the public the work that has been undertaken by the Winnipeg Safe City program stakeholders thus far.

The scoping study is designed to shed light upon the following areas of inquiry:

1. What are the key issues to be examined regarding sexual harassment and other forms of sexual violence in the intervention area?
2. Who is being affected by sexual violence and how? Who are the perpetrators of sexual violence?
3. What strategies to reduce and prevent sexual violence are currently underway?
4. What gaps in knowledge can be used to improve current and future intervention strategies?
5. What are the overall directives and desired outcomes of the initiative?
6. In what ways can we ensure that intervention strategies will utilize community input and feedback and result in measurable and achievable goals?

The information collected on these areas of inquiry will then inform the development of local programs and initiatives.
**Methodology**

This document was prepared in consultation with key stakeholders and draws on qualitative and quantitative research from community, academic and government sources. It includes data produced by Statistics Canada, such as their 2009 and 2014 General Social Survey on Victimization, 2011 National Household Survey, 2011 Census, and Uniform Crime Reports from various years. Other statistical data from the Winnipeg Police Service’s CrimeStat and their annual reports were also used. The scoping work also draws upon smaller data sets that focus on specific populations and upon qualitative data collected from community organizations. Most importantly, the study includes data from community conversations with Indigenous women facilitated by Ka Ni Kanichihk, conversations with newcomer women, and interviews with other key informants, including police and health providers. Hearing from those directly affected by sexual violence in Winnipeg’s public spaces is critical for filling existing knowledge gaps and for facilitating proactive steps towards preventing and eliminating sexual violence against women and girls in Winnipeg.

In developing the scoping study methodology, the steering committee relied on *UN Women’s Guidance for Scoping Studies*, a document prepared to assist participating cities in the Safe Cities program.

**Limitations**

This scoping study is not intended to represent a full review of all existing literature on the subject of sexual violence against women and girls (because of a lack of good quality studies, resource limitations and narrow purpose of the study). For our purposes, a preliminary scan of experiences of sexual violence amongst women and girls in Winnipeg suffice. It is worth noting, however, some of the challenges with accurately determining the scope of the problem of sexual violence in Winnipeg (or anywhere).

Limitations of the current body of literature on the subject of violence against women are well documented and underscore the need for using a variety of sources of data to obtain a more complete picture of this complex issue.

In Canada, there are the two primary sources of data on prevalence rates of sexual violence: the General Social Survey (GSS) and the Uniform Crime Reporting survey (UCR). The GSS is a self-reported survey on violent victimization conducted every five years (most recently in 2014). The data collected through the UCR is updated regularly and analyzed and published annually. Both of these surveys are limited in their ability to accurately reflect the prevalence of sexual violence in Canada.

One of the reasons why data on sexual violence in Canada significantly understates its prevalence is because these sources only capture violent acts that meet the criminal threshold, as outlined in the Criminal Code of Canada, the primary indicator of sexual violence being sexual assault. The Criminal Code identifies three types of sexual assault offence: general sexual assault (sexual assault 1), sexual assault committed either with a weapon or with threats to a third party, or causing bodily harm.

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b Note: The initial focus of the scoping study was on the data from 2011-2013, but as the writing has taken us into 2016 we have updated the study to include more recent data, where available.
(sexual assault 2); and aggravated sexual assault (sexual assault 3) [s.271, 272 and 273, of the Criminal Code, respectively].

One of the obvious challenges with relying on this data for describing sexual violence prevalency is that sexual assault is only one act along a continuum of sexual violence. Even for the statistics we do have on police-reported (or self-reported) sexual violence, there is often little information collected or reported on regarding specifics of the incident, other than gender and sometimes race of the victim. Certain populations (individuals who are homeless, transient populations or recent newcomers to Canada) are unlikely to be reflected adequately, or at all, in the data.

One other major issue with relying on this data is that reporting rates for sexual assault, and all forms of sexual violence, is very low. Most recent estimates from Statistics Canada are that 95% of sexual assaults go unreported to police.\textsuperscript{25}

Where possible, we have supplemented quantitative data with some qualitative data and smaller studies focused on particular populations; however, we recognize there are still many gaps in the information presented here. These gaps will help inform the priority areas for the steering committee going forward.

The focus here has been on sexual violence against women and girls. We recognize sexual violence can affect everyone, regardless of gender or identity.

Sexual violence against any person is a crime and should not be tolerated, condoned or encouraged. While the purpose of this study is to examine the complexity of sexual violence against women and girls, victims of sexual violence may not identify (and/or be perceived) as women or female. A much broader and comprehensive examination is necessary to capture the full spectrum of all victims of sexual violence.
SECTION 2: TRENDS IN SEXUAL VIOLENCE

NATIONAL TRENDS IN SEXUAL VIOLENCE IN CANADA: WHAT WE KNOW

WHAT: SEXUAL VIOLENCE

As mentioned in Section 1, the steering committee has adopted a definition of sexual violence to guide the Winnipeg Safe City work. This definition encompasses a range of harmful attitudes and behaviours, including gendered and racialized stereotypes, street and other forms of sexual harassment, sexual assault, stalking, rape, sexual exploitation, human trafficking and homicide. The steering committee recognizes that sexual violence can also manifest itself as MMIWG.

IMPACTS AND RESPONSES TO SEXUAL VIOLENCE

Although the physical effects of sexual violence depend on the severity of the assault, the accompanying physiological and psychological impacts are often adverse and ongoing. The wide range in survivors’ reactions is shaped by several individual factors including (but not limited to) age, personality characteristics (ex: sense of resiliency/self-esteem/self-worth), learned coping strategies and past experience with depression, anxiety and trauma/sexual violence (including childhood sexual abuse).26

The impacts of sexual violence can have short and long term effects.27 Physiological effects can include nausea, headaches, difficulty concentrating, difficulty falling or staying asleep and muscle tension. Survivors may experience flashbacks, memory impairment, poor concentration, startle responses and living in a state of constant alertness.28 Emotional responses may include anger, irritability, sadness, guilt, shame, fear, humiliation and feelings of helplessness. Survivors may numb themselves emotionally and withdraw socially. Some survivors may engage in risky sexual behaviour in an attempt to cope. For others, post-assault sexual stimuli may produce anxiety and invoke intrusive memories. These reminders may have a retraumatizing effect and result in sexual dysfunction and avoidance.29

In instances where alcohol and/or drugs were consumed prior to the sexual assault, coming to terms with sexual violence may be especially complicated. Survivors may cast blame on themselves and this can result in intense and persistent feelings of shame, guilt and regret.30 Interestingly, survivors’ perceptions of personal responsibility and guilt are often prevalent in cases where intoxication was not a factor. This demonstrates that many women shift the responsibility of the violence from the perpetrator to themselves regardless of the circumstances surrounding the assault.

In terms of relationships, survivors “may find it difficult to trust others...to interact with people who remind them of the perpetrator...to tolerate intimacy emotionally or sexually [and] have difficulty setting boundaries, asserting themselves or being alone.”31 For the reasons listed above, survivors may have difficulty with everyday tasks such as childrearing, working or studying and may require
extra support from family and friends in these areas. Undoubtedly, the trauma of sexual violence can have a ripple effect not only the survivor but also on the people in her life.

**Post-traumatic stress disorder (PTSD)**

As previously mentioned, survivors of sexual violence react and cope in a variety of ways. As such, not all survivors meet the criteria for Post-Traumatic Stress Disorder (PTSD) due to the severity of the sexual violence, personality factors, and the availability of support systems and healthy coping mechanisms. Others may not seek professional support, so will not be clinically characterized as developing PTSD. Although all survivors of trauma are at risk of developing PTSD, being the survivor of a sexual assault is associated with higher rates of PTSD than many other traumas. To meet the criteria for PTSD, response to the traumatic event must include a combination of factors such as extreme fear, re-experiencing the trauma, a sense of helplessness, avoidance of stimuli associated with the traumatic event, persistent symptoms of increased arousal and anxiety, and a numbing in responsiveness. These symptoms must last longer than one month and can be specified as acute (symptom duration is less than three months) or chronic (symptom duration is three months or longer). It might be more difficult to experience positive life changes following a sexual assault because of the interpersonal harm and stigma of the experience.

**Healing**

Processing, coping and healing from sexual violence do not occur in a straightforward and continuous fashion. The myriad of survivors’ responses clearly demonstrates that there is no right or wrong way to respond to these experiences. While some survivors seek and receive support from their natural support system (ex: family and friends) others may wish to seek professional services such as counseling. Some prefer the combination of both. Unsurprisingly, a survivor’s social support system is a strong factor in mediating the effects of the assault. That is, the degree to which the survivor is believed and supported by the people in her life affects her healing process. A study of survivors’ experiences with service providers found that negative experiences with the criminal justice and medical systems did increase post-traumatic stress symptoms. When those in supportive roles offer compassion and understanding, the survivor is more likely to regain her sense of safety and the likelihood of developing more trauma symptoms is reduced.

Healing can occur both inside and outside of a Westernized, psychotherapeutic context. Many Indigenous women find healing through traditional approaches and participation in culturally-based healing strategies could include, but are not limited to, sharing or talking circles, sweats, fasts, feasts, celebrations, vision quests, traditional medicines and other spiritual exercises and ceremonies. The cedar bath ceremony in particular is a ceremony that is used to facilitate healing from sexual violence and trauma. Some women find healing through art, practicing meditation and yoga, attending religious activities and through prayer. Others may connect with feminist ideologies that evaluate imbalances of gender and sexuality and promote gender equality. Participation in feminist events such as *Take Back the Night* marches may serve to empower survivors to reclaim their right to safely occupy public space. Common throughout the various ways in which survivors experience healing is
the process of making sense and meaning of their experiences, receiving support and validation from others and reclaiming their sexuality and what it means to feel safe.

LOW REPORTING RATES

Several important and concurrent factors contribute to why crimes on the sexual violence continuum are so vastly underreported. It is crucial to examine these factors if we are to reconcile the disparity between the occurrence and reporting of sexual violence. Although it is not within the scope of this study to examine all of the factors that inhibit women and girls from reporting sexual violence, highlighting some of the ways in which they negotiate their experiences is key to determining what influences low reporting rates. Understanding these factors will contribute to the development of appropriate intervention strategies both in the Winnipeg context and globally as well.

Street harassment is a form of sexual harassment that takes place in public spaces, at its core is a power dynamic that reminds historically subordinated groups (ex: women and individuals in the LGBT2SQ+ community) of their vulnerability in public spaces. Despite growing evidence that a large proportion of women and girls experience some type of sexual harassment in public spaces, most of those affected will not formally report their experiences. In fact, evidence suggests that being sexually harassed in public is so commonplace for women and girls that they not only come to expect it, but also develop a myriad of behaviours in an attempt to avoid it. Women and girls are socialized from young ages through cautionary tales that instruct them on how to avoid sexual violence in public spaces. These strategies involve avoidance of certain neighbourhoods, enclosed spaces (ex: parking garages), walking alone, not wearing sexually suggestive clothing, carrying self-protection and taking self-defence classes. It is important to note that these and other limiting behaviours do not temper the likelihood of victimization. Rather, they are part of an enabling environment that places responsibility on survivors rather than perpetrators. Because the threat, fear and experience of sexual harassment is so normalized and seen as a fact of female existence, many women and girls do not recognize it as a violation of their right to safely inhabit public spaces.

Incidences of sexual harassment that occur in the very short term pose significant challenges for reporting. For example, driving by a woman and yelling derogatory comments or groping her body in a crowded space makes it difficult for her to identify her harasser(s). This then affects the potential for her to confront them and/or to report the experience to authorities. For women whose work in public spaces involves varying degrees of sexualization (ex: restaurants and bars) and whose bodies are already treated as commodities (ex: sexual exploitation), sexual harassment can be understood as a sort of occupational hazard in which it is expected to take place. Furthermore, sexual harassment experienced by women who are exploited is complicated by the heightened risk of violence that they face. Exploited women and girls may choose not to respond to and/or report sexual harassment or violence. For some, forms of sexual violence become normalized. There may be a fear of police, making it less likely for survivors to confront the perpetrators let alone report it to the authorities.
**Sexual Assault**

According to the most recent self-reported General Social Survey (GSS) on Victimization conducted in 2014, only 5% of sexual assaults experienced by Canadians over the age of 15 are reported to police. This is down from the previous GSS that estimated the per cent of sexual assaults was 12%.46

Survivors who participated in different cycles of the GSS have identified several contributing factors to why they did not report sexual violence. These included not feeling it was important enough; the incident was dealt with in another way; they felt it was a personal matter; or they did not want the police involved.

Although many women and girls do not formally report sexual assault, they cope by using other avenues of support. For example, after Canadian celebrity radio host was accused of sexually assaulting several women, the hashtag #beenrapedneverreported47 generated more than seven million ‘tweets’ on social media outlet Twitter in just a few days.48 This demonstrates the universality of sexual violence, the grave reality that survivors do not formally report and the need for an outlet for survivors to discuss their experiences. Note: the radio host was found not guilty.

Formally reporting sexual assault is further complicated for marginalized women due to the perception that police have antagonistic attitudes towards their communities. Marginalized women may assume they will not be believed on account of their social class, neighbourhood, employment status, sexual orientation, gender identification, disability, age, race and/or ethnicity. As was noted in the Report on the Special Committee on Violence Against Indigenous Women,49 underreporting by Indigenous women and girls can partly be explained by the historically strained relationship between the police and Indigenous communities and the difficulty that members of these communities have trusting police and believing the police will protect them.50 If the perpetrator is believed to be a member of the same marginalized group as the survivor, she may not want to come forward as a way of protecting the reputation of the group. Newcomer women may be accustomed to hostile relationships between police and their communities, so do not seek their help as a result.51 Cultural norms, language and communication differences may be additional barriers to reporting. Accessing an interpreter is not always a simple option, and often, women who need an interpreter may rely on family or community members to provide that service. This requires women to divulge information of the assault to additional people. While for some survivors this may be a supportive experience, for others, the thought of disclosing such intimate information to a family or community member may be enough to prevent them from formally reporting.

**Retraumatization**

Another important factor to consider in formally reporting is the risk of retraumatization. As with other criminal cases, the scene of the crime needs to be analyzed. Sexual violence is unique in that (part of) the scene of the crime is the survivor’s body. Survivors always have the choice of whether or not to seek medical attention, be assessed by a Sexual Assault Nurse Examiner and/or file a police report.52 For some survivors, the act of being physically examined and assessed by a nurse directly after a sexual assault can be too overwhelming. Although such an examination is not essential for
proceeding with a formal report, this may prevent authorities from collecting potentially valuable evidence for a criminal charge. 

**Seeking Justice**

The process of proceeding with a criminal case can be a prolonged and exhausting experience, regardless of the nature of the crime. Thus, the risk of retraumatization continues if survivors of sexual violence choose to formally report. This process may include disclosure(s) to police and testifying at various stages throughout a trial. In a comprehensive 2008 study of survivors’ experiences in Canadian criminal courts, researchers found that while in principle the rights articulated in Canadian legislation represent admirable goals, considerable gaps exist between survivor expectations and their actual power within the courts. Entering a world of unfamiliar rules and procedures filled with inaccessible language, survivors’ emotional stamina is continuously tested.

This study found that many survivors felt that police were supportive throughout the investigation. In fact, fewer than 25% of the survivors in the study reported that the police were insensitive to their needs and situation. For those whose experiences differed from the majority, some reported that they felt like they were treated as suspects and not survivors. Another survivor claimed that a defence attorney attacked her character and used her sexual history as evidence that the defendant was innocent. In two cases, negative experiences were attributed to the intoxication of the survivor. Another survivor felt cheated out of her day in court when the defendant plead guilty and as a result, she was not allowed to read her own victim impact statement.

In 53.6% of the cases that went to trial, the offender was found guilty of the charges. In about one-third of the cases (36%), the offender was sentenced to jail. The majority of survivors felt dissatisfied with the outcomes. Sentences perceived by the survivor to be unjust appear to be the critical factor in shaping survivors’ experiences.

Survivors seek justice in order to have their personal experience validated, and may feel retraumatized when the system they believe is designed to protect them, does not. In effect, low conviction rates send messages to the broader culture: that survivors are unlikely to receive justice and perpetrators’ actions will likely go unpunished, thus increasing the likelihood that sexual violence will remain a vastly underreported crime.

**WHO: RISK FACTORS FOR SEXUAL VIOLENCE**

**Gender**

In Canada, women are at a greater risk than men of all violent crimes, including sexual assault and other forms of sexual violence. According to the 2014 GSS, 87.4% of the sexual assaults were committed against women (37 per 1,000 population). Statistics Canada reports sexual assault rates have remained stable over the past 25 years (in contrast with some other forms of gender-based violence, which have declined slightly over the same period). Significant gender differences in rates

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\(^c\) It is important to note that victims’ consent to participate in a physical examination may be withdrawn at any point. Her consent to the examination does not imply consent to formally reporting the assault.
of sexual offences (both police-reported and self-reported) exist in every province and territory in Canada, and are particularly high in western Canada, including Manitoba.

**Age**

Youth is consistently identified as a risk factor for violence against women, including sexual violence, in both police-reported and self-reported victimization data.

Gender differences in violence continue into adulthood, with females aged 15-24 having the highest rates of sexual violence of any age group. According to the 2014 GSS, rates of sexual assault for women between 15 and 24 years of age were over twice that of any other age group.

Over the past number of years, there has been growing media attention to the issue of sexual violence on college and university campuses in Canada. Surveys of college and university students in North America indicate that approximately one-quarter of female post-secondary students have experienced sexual assault or had someone attempt to sexually assault them, and 90% of those instances involved an offender who was known to the woman.

**VULNERABLE POPULATIONS**

While sexual violence affects women from a range of socioeconomic backgrounds, a multitude of sources - including government reports and academic students - confirm that a number of subpopulations of women experience more sexual violence than others. In many cases, while there is preliminary evidence available to support increased vulnerability of certain populations of women, there are also significant knowledge gaps.

**Indigenous women**

Indigenous women face severe marginalization in Canadian society and have a greater likelihood of being victims of violent crime, including sexual violence, than non-Indigenous women in Canada. Thirty per cent of Indigenous people reported that their household had been the victim of at least one of the violent crimes measured by the 2014 GSS, compared to fewer than one in five (19%) of non-Indigenous individuals/households. The 2014 violent victimization rate (which covers sexual assault, robbery and physical assault) was significantly higher among Indigenous females than non-Indigenous females. This was true for all types of violent crimes measured by the index. In terms of sexual assault, the rate for Indigenous females was 115 per 1,000 population, compared to 35 per 1,000 for non-Indigenous females. Actual rates are estimated to be higher, given the barriers Indigenous women experience in reporting.

Even when the risk factors measured by the GSS were controlled, Aboriginal identity itself remained a key risk factor for victimization among women (but not men), meaning for Indigenous women, other factors than those measured in the GSS may have been at play.

Other forms of severe and extreme violence and apathy also disproportionately affect indigenous women and girls, including homicide. Indigenous women represent 4.3% of the Canadian population, but according to the RCMP, represent 16% of female homicides in Canada. The 2014
RCMP report *Missing and Murdered Aboriginal Women: A National Operational Review* documented 1,181 homicides and unresolved missing Indigenous women in Canada, dating back to 1952. This number includes 1,017 murdered Indigenous females from 1980-2012 and 169 missing Indigenous females. Sixty-one of the 169 missing incidents are believed to be accidental and the remaining 108 are suspicious. These numbers are higher than earlier estimates from previous reports from Amnesty International, the Native Women’s Association of Canada and other sources. The same report found that homicide rates for Indigenous women and girls were remaining stable while the rates for non-Indigenous women and girls were declining.

A 2015 report from the United Nations found that young Indigenous women were “five times more likely than other Canadian women of the same age to die as a result of violence; and ... [that] Indigenous] women and girls experience high levels of sexual abuse and violence in their families and communities and in society at large.”

Violence against Indigenous women cannot be mentioned without acknowledging the intersection of Canada’s history of colonization, racism, and sexism and how both historic and ongoing colonial policies and practices work to shape a culture that allows sexual violence against Indigenous women and girls to continue. In 2015, the report from the Truth and Reconciliation Commission of Canada was released, titled *Honouring the Truth, Reconciling for the Future.* This report best explains Canada’s historical relationship with Indigenous people. The report can be found at [www.trc.ca](http://www.trc.ca).

**Sexually exploited women and girls**

In Canada (and globally) the vast majority of sex-trafficked and sexually exploited persons are girls and young women, and most people who benefit from their exploitation are men. A 2013 RCMP study reported that all survivors of domestic sex trafficking cases prosecuted in Canada between 2007 and 2013 were female and the overwhelming majority of traffickers were male.

Indigenous women and girls are especially vulnerable to sexual exploitation. The National Task Force on Sex Trafficking of Women and Girls in Canada identified several risk factors that increase vulnerability to sexual exploitation. In their research conducted on behalf of the Task Force, the Native Women’s Association of Canada identified several themes in literature and studies of Indigenous women and youth in the sex industry that “closely match the risk factors for sex trafficking [and exploitation]: the impact of colonialism on societies, the legacies of the residential schools and their inter-generational effects, family violence, childhood abuse, poverty, homelessness, lack of basic survival necessities, race and gender-based discrimination, lack of education, migration, and substance addictions. ... In some Indigenous communities, these root causes are coupled with rural/remote living conditions. The result is a complex environment that contributes to an increased risk among Indigenous women and girls in being sexually exploited and trafficked.”

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\[d\] Individuals targeted for sexual exploitation also include transgender individuals, and people/youth of any race/gender.
Trafficking and sexual exploitation is an extreme form of sexual violence and is a growing problem in Canada. The final report from the National Task Force on Sex Trafficking of Women and Girls in Canada (2014) provides a comprehensive analysis and findings from a pan-Canadian study of sex trafficking of women and girls. The report highlights the changing trends in sexual exploitation and trafficking: girls are trafficked at younger and younger ages (some experts say the average age of girls being trafficked is between seven and 12), traffickers are becoming more subtle and trafficking is becoming less visible and more profitable.

During the course of consultations conducted by the National Task Force on Sex Trafficking of Women and Girls, the following methods of control by traffickers were identified: preying upon the need for approval, seizing official documents, isolation, denial of basic necessities (food, money, clothing), debt bondage, humiliation, branding with tattoos, cultivating a dependency on drugs or alcohol, technological control, psychological manipulation, threatening, drawing victims into other criminal acts, threats of violence (ex: threats against women and their families, brandishing knives or guns, threatening to kill pets or set fire to family home) and actual violence. Actual violence included, but was not limited to: cigarette burns, beatings, being forced into ice water, rape with curling irons or bottles, rape and often multiple rapes. The RCMP report that in 75% of cases, traffickers were charged with sexual-assault related offences.

**Newcomer women and women from ethnocultural communities**

The data that exists on victimization rates and experiences of sexual violence for women from newcomer and ethnocultural communities is limited. This is partially explained by the under-representation in national studies, including the Statistics Canada Census. Current data on sexual violence which is self-reported (GSS) or collected by the police does not include the ethnic, religious or racial identities of victims. Because surveys like the GSS use weighting techniques to account for low numbers from certain populations, it is difficult to draw accurate conclusions based on these sources. These limitations in data collection and analysis highlight the need for better quality research that takes into account newcomer experiences of sexual violence.

Academic studies have pointed to factors such as language barriers, isolation, inappropriate employment (jobs that do not reflect skill set), and uncertain legal status that may make newcomer women more vulnerable to gender-based violence. Canadian research on newcomer women and women from ethnocultural communities and their experiences with gender-based violence have focused more on intimate partner violence rather than sexual violence.

Knowledge of Canadian laws, support systems and comfort reporting violence to authorities are additional challenges facing many newcomer women. Some newcomer women, especially those with precarious citizenship status (ex: without legal status, or those living in Canada on temporary work permits)....

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6 According to the RCMP, a trafficker in Canada can receive an average annual financial gain of $280,000 for every woman or girl trafficked. Women and girls who are trafficked/exploited are often required to perform sex acts 365 days a year and hand over all or most of the money to their traffickers.
visas), may not report sexual violence out of fear of drawing attention to themselves, potentially risking deportation or jeopardizing their ability to stay in the country.\(^{81}\)

**Women living with physical and/or cognitive disabilities and Deaf women**

Women living with physical and/or cognitive disabilities and Deaf women are at increased risk of violence in many forms, including sexual abuse and violence.\(^{82}\) According to information compiled by the Disabled Women’s Network of Canada – Reseau d’Action des Femmes Handicapées Canada (DAWN-RAFH), disabled women and girls are at “high risk of experiencing gender-based and other forms of violence due to social stereotypes that often serve to reduce their agency by infantilizing, dehumanizing, and isolating them, making them vulnerable to various forms of violence.”\(^{83}\)

There literature on the prevalence of sexual violence against women with disabilities and Deaf women is scarce. The 2004 GSS found violent victimization including sexual assault was two times higher for persons with physical activity limitations.\(^{84}\) Other studies suggest the rate of physical and sexual violence for women with disabilities are three to four times the rate of women who do not report disabilities.\(^{85}\) One 2006 study comparing rates of sexual and physical assault among women with and without disabilities found women with disabilities were four times more likely to have experienced sexual assault than those without.\(^{86}\) The 2014 GSS found the victimization rate for people living with disabilities was 123 per 1,000 population (for people with all types of disabilities); the rate was higher among people living with a mental or learning disability.\(^{87}\) The data reported did not breakdown the results by gender. According to research compiled by Vecova Centre for Disability Services and Research, “the rates of violence against women with disabilities have not decreased in the last 25 years.”\(^{88}\)

Women with disabilities and Deaf women are more likely to experience multiple forms and instances of violence. Women living with disabilities are disproportionately affected by intimate partner violence.\(^{89}\) Women living with disabilities may face increased difficulty leaving an abuser due to mobility or communication issues, experience higher rates of emotional and physical abuse and abuse by institutional caregivers and/or other residents.\(^{90}\) Women with disabilities experience sexual violence in various forms, ex: violations of privacy, strip searches, solitary confinement that replicate the trauma of rape, rape by staff and other inmates and residents of institutions, forced abortion and forced sterilization.\(^{91}\)

Women with cognitive and/or physical disabilities and Deaf women face complex barriers in accessing support, “due to preconceived notions and misinformation on the part of police, dependency on inadequate social supports to access services and, for women with cognitive and intellectual disabilities, profound doubt of being seen as credible.”\(^{92}\) A 2011 report by Vecova Centre for Disability Services and Research described a number of key barriers in addressing the needs of women with disabilities who experience violence in Canada. These include:

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\(^{81}\) The 2004 GSS also reported 65% of violent crimes committed against persons with physical limitations were perpetrated by someone known to the victim and 51% of women with activity limitations experienced more than one violent crime in the year leading up to the 2004 survey (Vecova, 2011, at 6).
- Disclosure of abuse: fewer cases of violence are reported by women who experience activity limitations than men with physical limitations.
- Difficulties accessing the justice system: women with activity limitations face significant challenges in accessing the justice system, including “physical, financial, informational, cultural and behavioural barriers,” and tend to be less satisfied with police responses than women without activity limitations.
- The absence of supports for forming and maintaining strong networks, which “safeguard individuals with disabilities from violence.”
- The absence of health care intervention: as health care workers can help identify signs of abuse, “[t]here is the need for effective health and social care interventions for women with disabilities, for example, routine medical screening to uncover abuse.”
- The lack of sensitivity training for professionals: there is a need for greater sensitivity training for professionals involved in violence intervention, “so they are sensitive not only to the women’s experiences of abuse, but also understand the complexities of having a disability and the interplay with culture, religion, age, class and sexuality.”
- The lack of violence prevention training for women with disabilities: “A deep-rooted assumption is that persons with disabilities are asexual and the people in their lives are there to protect them. Consequently, women with disabilities are denied or lack information and training about healthy relationships, sexuality and abuse prevention.”
- The lack of funding and resources to enhance the accessibility of intervention services.  

In 2015, the Federal-Provincial-Territorial Senior Officials for the Status of Women commissioned a report (Issue Brief: Sexual Violence Against Women in Canada). The report notes that women living with disabilities face additional challenges because of the perception of broader society in Canada:

An additional factor influencing the experiences of women with disabilities is the way their voices are devalued and desexualized. It is common for people to believe that women with disabilities are asexual and this feeds into notions that they could not possibly be real targets of sexual violence. On the other hand, narratives that suggest women with disabilities lack agency and therefore crimes against them are particularly contemptible, can be overly disempowering.

Women with disabilities and Deaf women represent a diverse population – diverse in experiences, abilities, living conditions, ethnicity and culture and socioeconomic status. In addition, women with disabilities disproportionately experience poverty. These intersections can exacerbate experiences of discrimination and marginalization.

As with newcomer women, to better understand the experiences and prevalence of sexual violence against women with disabilities and Deaf women, there is a need for more research.
Individuals in the LGBT2SQ+ community

There is considerable variability in the available academic studies on the subject of sexual violence in the LGBT2SQ+ community. For example, the 2013 study, *Measuring violence against women: Statistical trends* (Statistics Canada) focused primarily on lesbian and bisexual women because of the limited empirical research on experiences of gender fluid or intersex individuals. While there is some empirical data on bisexual and lesbian women, it does not paint an accurate picture of prevalence and experiences of sexual violence amongst the population. The 2009 GSS, for example, did not have a large enough data set from lesbian and bisexual women to report on the level of sexual victimization within this population. The 2014 GSS, however, did have a large enough sample size. The 2014 GSS found that “[a]mong the minority groups covered by article 718.2 of the *Criminal Code*, people identifying as homosexual or bisexual recorded the highest violent victimization rate of 207 incidents per 1,000 population, compared to 69 per 1,000 for heterosexuals.” The 2014 GSS data on minority groups is not broken down by gender.

In Canada between 2007 and 2008, hate crimes motivated by the perceived sexual orientation of the victim rose by 127%. A 2015 study about transgender people living in Ontario found that 57% had avoided public washrooms due to safety concerns and that of those who had experienced physical and/or sexual violence due to being transgender, 97% reported avoiding at least one type of public space.

There is a need for more research into the experiences, prevalence and factors associated with the rates of sexual violence in this community.

Intersectionality

People face additional prejudices and discrimination based on intersecting social factors, including individual circumstances such as income, disability, race and gender; social dimensions such as racism, classism and ableism; and, marginalization, reinforced through systems including the education system, health system and legal system. It is important to understand and recognize that these various social dimensions contribute to the marginalization experienced by individuals. Marginalization and inequities are not the result of single, distinct factors, but are the outcome of the intersections of different social locations, power relations, and experiences. It is impossible to reduce people into a single social location or category, such as gender, race, or class. These social categories interact and operate in ways that collectively shape lived realities. The interrelatedness of various social categories is key to a holistic understanding of marginalization. As an example, an Indigenous woman who lives with a disability in a low-income neighbourhood may experience prejudice and discrimination on account of her race/ethnicity, disability status and socioeconomic status. All of these social categories continually interact and intersect with one another.

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6 Information collected from Statistics Canada did not specify the sexual orientation or gender identification of hate crime victims and thus, it is difficult to determine the percentage of men, women or transgender individuals who were targeted.
WHO: PERPETRATORS

Due to the wide range of sexually aggressive behaviours and the many different underlying motivations, it is impossible to establish a typical profile of a perpetrator of sexual assault. However, evidence demonstrates that adult male perpetrators of sexual assault against females tend to have a common set of characteristics. This may include a combination of the following: conflicts with women and authority figures, low self esteem, the use of aggressive behaviour to offset fears about their masculinity and being motivated by immediate sexual gratification and a desire to humiliate the victim. Certainly, derogatory attitudes and beliefs about women and girls are inextricably linked to sexual violence.

Gender

In Canada, the overwhelming majority of perpetrators of violence against women and girls are men. The percentage is higher for sexual crimes. For example, in 2013, men accounted for 82% of all adult perpetrators of police-reported violent crime, and in 2011, the rate of victimization for sexual offence against women was 99 per 100,000, compared to nine per 100,000 for male victimization.

This is consistent with self-reported data. For example, in the 2014 GSS, 86% of violent incidents and 94% of sexual assaults were committed by males.

Age

The GSS and police-reported data consistently find perpetrators, or accused perpetrators of sexual violence against women and girls are older than their victims. According to the 2014 GSS, the average age of people who committed crimes was (or was perceived to be by the victims) 34. In cases where the victim was younger, the average age of the perpetrator was also younger (ex: the perceived average age of the offender for crimes committed against victims between 15 and 24 years of age was 24).

Relationship

Police-reported and self-reported data indicate most sexual assaults are perpetrated by someone who is known to the victim. According to police-reported data from 2011, 75% of sexual assaults were perpetrated by someone who had a relationship with the victim (45% by casual acquaintance or friend, 17% by an intimate partner, 13% by a non-spousal family member). Twenty-five per cent of sexual assaults reported to police were perpetrated by a stranger.

According to self-reported data from 2014, 66% of self-reported sexual assaults were perpetrated by someone known to the victim and 44% were perpetrated by a stranger.
WHERE: MOST COMMON LOCATIONS FOR SEXUAL VIOLENCE

General statistics

The most common locations for general sexual assault (both police-reported and self-reported) are commercial settings, followed by private residences.¹⁰⁸ Sexual assault level 2 and 3 are more likely to occur in residences.

In the 2014 GSS, 44% of sexual assaults took place in commercial or institutional establishments, 23% in a residence other than the victim’s, 14% in the street or other public space and 7% in the victim’s residence.
Sexual Violence on Canadian Campuses

Surveys of college and university students in North America estimate that between 15 and 25% of female post-secondary students experience sexual assault or attempted sexual assault during the course of their educational career, and that in 90% of those instances, the offender is known to the woman. Experts say the number of sexual assaults reported to Canadian universities and colleges is “surprisingly low” and consider it an “indication that [post secondary institutions] are doing a poor job of encouraging students to come forward.” According to research conducted by the Canadian Federation of Students – Manitoba, nine out of 10 cases of sexual assault on campuses in Manitoba go unreported.

The Canadian Federation of Students has been advocating for consent culture on Canadian campuses for a number of years and has compiled research about sexual violence on Canadian campuses. According to that research, sexual assaults peak during the first two months of classes, and at least 80% of rapes on campus are perpetrated by someone known to the victim (50% of which occur on dates). An issue brief that the Canadian Federation of Students released about sexual violence on campus (released in the fall of 2015), quoted a national study which found 80% of female undergraduate students experienced violence in a dating relationship; 29% of whom had experienced sexual assault.

Recent high-profile events that have highlighted sexual violence on post-secondary campuses have included those at Saint Mary’s University in Halifax, the University of Alberta, the University of Saskatchewan, and the University of Ottawa. The student leaders at Saint Mary’s were recently rebuked for their rape chant about non-consenting under-aged students. In commentary reflective of the pervasive nature of rape culture, several students (including women) argued that the chant ‘wasn’t a big deal’ because they weren’t “feminist kind of person[s].” Similar backlash has been seen in Edmonton, Alberta where vandalism to Don’t be THAT Guy posters were covered or replaced with Don’t be THAT Girl posters, implying that when women come forward and report sexual violence, that the accusations are inadvertently false. These mainstream attitudes communicate, in numerous ways, the university atmosphere is one that “indicates [to a potential offender as well as to those who would otherwise challenge these contentions] that his distorted views of women and sexuality are within the norm” and are largely accepted.
SECTION 3: LOCAL CONTEXT

Winnipeg is the capital city of the province of Manitoba in Canada.

Canada

Canada has been a member of the G7 since 1976. The country is composed of 10 provinces and three territories, and is situated on the world’s second-largest land mass. The first people of this land were Indigenous people.

Demographics

In 2015, the population in Canada was 35,851,774. As of 2014, Statistics Canada reported the median age for females was 41.2 and 39.5 for males.

Overall, the population in Canada is aging, evidenced by the higher number of people living in Canada in older age brackets than younger. However, the population age and sex structure varies across the provinces and territories (due to fertility rates, immigration rates and interprovincial migration).

Table 1: Estimated 2015 Female Population in Canada (by age)

<table>
<thead>
<tr>
<th>Age</th>
<th>0-14</th>
<th>15-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of Female population</td>
<td>15%</td>
<td>12%</td>
<td>14%</td>
<td>13%</td>
<td>14%</td>
<td>13%</td>
<td>20%</td>
</tr>
</tbody>
</table>

Canada is a multi-ethnic, multi-linguistic country. In 2011, 19.8% of the population (and 20.2% of the female population) identified a language other than English or French as their mother tongue, of which, the three most common single selections were Punjabi (6.6%), Chinese (6.5%) and Spanish (6.3%).

Indigenous women

The 2011 National Household Survey (NHS) reported 718,500 women and girls (4.3% of the total female population) reported an Aboriginal Identity – First Nations, Métis, or Inuit [note: this study uses the term Aboriginal when directly quoting a statistic, but otherwise uses the term Indigenous]. Population projections estimate there could be 1.1 million Indigenous females in Canada by 2031.

In 2011, the Indigenous female population was younger and grew more rapidly than the non-Indigenous female population. The median age for Indigenous females was 29.1 (compared to 41.5
for the non-Indigenous female population). Twenty-seven per cent of Indigenous females were aged 14 and younger (compared to 16% of non-Indigenous females).\textsuperscript{125}

Between 2006 and 2011, the Indigenous female population grew by 20% (compared with 5% for the non-Indigenous female population),\textsuperscript{126} largely due to higher fertility rates (average number of births) and migration.\textsuperscript{127}

The population of Indigenous women and girls is proportionally higher in some areas than others. The largest shares of Indigenous females are in the three territories. Manitoba (17% of the female population in 2011) and Saskatchewan (16%) have the largest shares of Indigenous females among the provinces.\textsuperscript{128}

**Newcomer women and women from ethnocultural communities**

The female population in Canada is multicultural and multiethnic and becoming increasingly so. The 2011 NHS reported 3.5 million females were immigrants (21% of the female population). According to population projections, the share of immigrant women and girls could reach 27% of the female population in 2031.

In 2011, 17% of female immigrants had arrived within the previous five years, and another 15% during the years 2001-2005. Sixty-eight per cent of immigrant females had arrived before 2001.

The population share of females who belong to a visible minority group is also increasing over time. In 2011, the NHS reported 3.2 million women and girls in Canada who belonged to a visible minority group (19% of the total female population in Canada). Population projections estimate by 2031, 6.6 million females or 31% of the female population in Canada could belong to a visible minority group (if the current level of immigration and composition of immigrants continues).\textsuperscript{129}

The three largest visible minority groups reported by females in 2011 were South Asian (24% of females who reported belonging to a visible minority group), Chinese (21%) and Black (15%).\textsuperscript{130}

In 2011, 67% of those females who selected belonging to a visible minority group were immigrants.\textsuperscript{131}

**Women living with physical and/or cognitive disabilities and Deaf women**

According to Statistics Canada, in 2012 there were approximately 3.8 million adults who reported being limited in their daily activities due to a disability (13.7% of the adult population in Canada).\textsuperscript{132} In the same study, women comprised a greater proportion of those reporting a disability in almost every age group (all except the 15-24 age group where the proportion was similar for each gender: 4.5% of men and 4.3% of women).\textsuperscript{133} The majority of respondents who reported being limited in their daily activities due to a disability (81.3%) reported using an aid or assistive device.\textsuperscript{134}
SEXUAL VIOLENCE IN CANADA

SEXUAL ASSAULT

Police-reported sexual assault in Canada:

In Canada, police-reported violent crime\(^{\text{h}}\) in general has decreased over time; however, in 2015 there was a 2% increase in the police-reported violent crime rate.\(^{135}\) In 2015, the rate was 17.54% less than in 2010. Police-reported sexual assaults have also decreased but the rate of decline has been less significant than for all other violent crimes (9.4% over the same period).\(^{136}\)

In 2015, there were 21,362 incidents of sexual assaults (1, 2, and 3) reported to police in Canada. The majority (98%) were classified as sexual assault 1.\(^{137}\) The police-reported sexual assault rate in Canada in 2015 was 58.24 per 100,000 people\(^{138}\) (this means that for every 100,000 people in Canada, there is an average of 58 police-reported sexual assaults; not necessarily 58 victims of sexual assault). In 2015, the rate of sexual assaults increased by 2.6% from the previous year. Over the past five years, the rate of sexual assault decreased slightly, from 62.05 (per 100,000 population) in 2011, to 58.24 in 2015.\(^{1}\)

Self-reported sexual assault in Canada:

The 2014 GSS reported 633,000 incidents of sexual assault occurred in 2014 and a national sexual assault rate of 22 incidents per 1,000 population. Sexual assault was the only crime for which the victimization rate remained relatively stable over the past decade and the only violent crime type for which the victimization rate remained relatively stable since 1999 (in 1999 the sexual assault victimization rate was 21 and the violent victimization rate was 111; in 2014 the rates were 22 and 76 respectively).\(^{139}\)

The 2014 GSS included a question that had not been asked on previous cycles, “to take into account sexual assaults in which the victim was not able to consent to sexual activity because, for example, he or she was drugged, intoxicated, manipulated or forced in ways other than physically.”\(^{140}\) Nine per cent of sexual assaults fell into this category. Twenty per cent of sexual assaults were classified as forced sexual activity and 71% of sexual assaults involved unwanted sexual touching.\(^{141}\)

Consistent with earlier cycles of the GSS and with police-reported data, the majority of sexual assault offenders were male (94%)\(^{142}\) and majority of victims of sexual assault were female (86%).\(^{143}\)

OTHER FORMS OF SEXUAL VIOLENCE IN CANADA

Sexual exploitation/trafficking in Canada

It is difficult to track and provide information about the incidence of sexual exploitation and human trafficking because these crimes are often not reported to police. Difficulty in tracking these crimes

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\(^{h}\) Violent crime refers to violations in the Criminal Code of Canada that are identified as crimes against a person, as opposed to property crime or violations ex. Offences against the administration of justice.

\(^{1}\) In 2011 there were 21,311 sexual assaults (1, 2 and 3) reported to police; in 2015 there were 20,881.
increases when victims are transient and do not have a permanent home address and/or a lawful mode of employment that enables their whereabouts to be traced. Due to the sexualized nature inherent in sexual exploitation and human trafficking, sexual violence is normalized, which may make victims less likely to report.

In 2013, as part of the National Task Force on Sex Trafficking of Women and Girls in Canada, the Canadian Women’s Foundation commissioned a report to look at information on the nature and prevalence of human trafficking in Canada. The report describes “seven impediments to accurately estimating the incidence of human trafficking:” (1) varying definitions of sex trafficking; (2) varying definitions of ‘trafficked person;’ (3) trafficking prosecuted as related crime; (4) fragmented data; (5) trafficked individuals treated as criminals; (6) trafficked individuals rarely come forward; and (7) reactive police investigations. These impediments cause problems in ascertaining an accurate picture of human trafficking in Canada. Perhaps in response to these challenges, “Canadian studies and efforts have been focused on preventing human trafficking,” rather than determining its prevalence. The RCMP “no longer estimates the scope of the crime as they did in 2004, when it estimated that Canada had 800-1,200 trafficking victims a year. In 2010, the RCMP withdrew this approximation given the inherent difficulties of estimating. It now focuses not on counting victims but on collecting information pertaining to the trends and methods of the crimes and the profiles of those involved.”

MANITOBA

Manitoba is a centrally-located province in Canada with an estimated population in 2015 of 1,293,378, 50.3% of whom are female.

DEMOGRAPHICS

The population in the Prairie Provinces (including Manitoba) tends to be younger than elsewhere in Canada. Unlike the rest of Canada, there are more women in the 15-39 range in the Prairie Provinces than those aged 40-64. The breakdown of the female population in Manitoba, by age is as follows (based on Statistics Canada 2015 population estimates):

<table>
<thead>
<tr>
<th>Age</th>
<th>0-14</th>
<th>15-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of Female population</td>
<td>18%</td>
<td>13%</td>
<td>14%</td>
<td>13%</td>
<td>13%</td>
<td>12%</td>
<td>15%</td>
</tr>
</tbody>
</table>

Manitoba is a linguistically and ethnically diverse province. In 2011, 21.5% of the population identified a language other than English or French as their mother tongue (compared with the
Canadian average of 19.8%). The three most common single responses were German (42.9%), Tagalog (21.9%), and Cree (12.1%).

**Indigenous women**

Manitoba is home to a large Indigenous population (the largest per capita among the provinces), which has increased steadily over the past two decades. The 2011 NHS reported 100,290 Aboriginal females were living in the province (16.9% of the total female population). Slightly less than 60% of Aboriginal females who selected a single identity identified as First Nations and 39% identified as Métis.

**Newcomer women and women from ethnocultural communities**

Immigration in Manitoba has increased steadily over the past two decades. In 2011, slightly less than 16% of the population in Manitoba were immigrants, half of whom were women. Approximately 5% of the population were recent immigrants, having landed between 2006 and 2011. Of these, half were female. The most common countries of origin for male and female new immigrants were: the Philippines (40%), India (10.7%) and China (5.9%). The most common countries of origin for recent immigrants were: the Philippines, India, and China. This was the case for both women and men.

The 2011 NHS reported 153,625 people living in Manitoba (13% of the population) identified as belonging to a visible minority group. The proportion of men and women who identified as belonging to a minority group was approximately even. Of these, 39% identified as Filipino, 16% as South Asian, and 13% as Black.

**Women living with physical and/or cognitive disabilities and Deaf women**

According to the 2012 Canadian Survey on Disability (Statistics Canada), 15.6% of people aged 15 and over in Manitoba reported being limited in their daily activities due to a disability (17.1% of total population of women and 14.2 of men).

The following table provides a breakdown of select types of disabilities by age groups:

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1 Aboriginal identity included persons who reported being an Aboriginal person [First Nations, Métis, or Inuit] and those who reported Registered or Treaty Indian Status [registered under the Indian Act of Canada] and/or those who reported membership in a First Nation or Indian band) were living in the province (16.9% of the total female population

2 A person who is or has ever been a landed immigrant/permanent resident who has been granted the right to live in Canada permanently by immigration authorities. In the 2011 NHS, immigrant refers to anyone who landed in Canada prior to May 10, 2011.
Table 3: Female Adults with Select Disabilities by Type, Sex (Manitoba)

<table>
<thead>
<tr>
<th>Type/Age</th>
<th>Seeing</th>
<th>Hearing</th>
<th>Mobility</th>
<th>Learning</th>
<th>Developmental</th>
<th>Mental/psychological</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total (15-64 years)</td>
<td>57%</td>
<td>40.9%</td>
<td>40.8%</td>
<td>40.9%</td>
<td>28.6% E</td>
<td>61.5%</td>
</tr>
<tr>
<td>15-24</td>
<td>43.6%</td>
<td>49.5% E</td>
<td>55%</td>
<td>30.3% E</td>
<td>17.2% E</td>
<td>43.1%</td>
</tr>
<tr>
<td>25-44</td>
<td>61.8%</td>
<td>54.1% E</td>
<td>53.7%</td>
<td>45% E</td>
<td>30.5% E</td>
<td>65.2%</td>
</tr>
<tr>
<td>45-64</td>
<td>56.5%</td>
<td>31.19%</td>
<td>60.8%</td>
<td>86.1% E</td>
<td>Too unreliable to publish</td>
<td>24%</td>
</tr>
</tbody>
</table>

E = Use with caution

SEXUAL VIOLENCE IN MANITOBA

Manitoba and Saskatchewan consistently record the highest rates of violence against women in Canada. In 2011, Manitoba recorded the second highest provincial rate of violence against women, and the highest rate of sexual assaults (almost twice as high as the national rate).  

SEXUAL ASSAULT

Police-reported sexual assault in Manitoba

There were 1,356 incidents of sexual assault (sexual assault 1, 2, 3) reported to police in 2015 (6.3% of total number of sexual assaults reported to police in Canada that year). Thirty of the 1,356 incidents were classified as sexual assault with a weapon (level 2), eight were classified as aggravated sexual assault (level 3) and 1,318 were common sexual assault (level 1).

Manitoba continues to have the highest provincial rate of police-reported sexual assault (104.84 per 100,000 population), almost twice the national rate of 59.58.

Self-reported sexual assault in Manitoba

The most recent cycle of the GSS (2014) reported 25,000 sexual assaults occurred in Manitoba in 2014 and there was a corresponding rate of 24 incidents per 1,000 population. In 2014, Manitoba reported the highest number of sexual assaults. Manitoba and Alberta share the highest rate of self-reported sexual assault among the provinces.

1 Use with caution
OTHER FORMS OF SEXUAL VIOLENCE IN MANITOBA

**Sexual exploitation in Manitoba**

The 2013 report commissioned by the Canadian Women’s Foundation as part of the National Task Force on Sex Trafficking of Women and Girls in Canada (“An Assessment of Sex Trafficking”) included the following information about sexual exploitation and trafficking in Manitoba:

In Manitoba potential human trafficking cases are most commonly identified and referred to as sexual exploitation and/or prostitution-related crimes, so the precise number of human trafficking cases is difficult to identify. In Winnipeg approximately 400 children and youth are sexually exploited on the streets each year, 70-80% of which are Aboriginal. This number includes only visible sex industry exploitation that could be documented by provincial employees, so the number of those exploited is likely higher. A specialized team in Winnipeg called “StreetReach,” composed of law enforcement, child welfare social workers and community outreach workers had contact with 213 youth in 2012 who were either currently being exploited (118) or were at extreme risk of becoming exploited (95).

The same report quoted statistical information from one of the community programs that support sexually exploited youth. A representative from the organization reported that “of their 135 clients (as of June 2011):

- Age 13 was the average age at first exploitation.
- 74% had been in care of Child and Family Services.
- 88% has run away on average, 16.19 times, with the initial runaway at 11.19 (mean).
- 81% had family in residential schools.
- 48.9% had been homeless.
- 62.7% had been physically and sexually abused.
- Grade 7 was the average grade level completed.
- 19.3% had been in a gang, 65.1% had family members involved in a gang and 56% were associated in some way with a gang.
- 83% received drugs or alcohol from their exploiter as a method of control.”

**Sexual violence directed at particular populations in Manitoba**

*Increased rates of (all forms of) violence among Indigenous women and girls*

According to 2014 data released by the RCMP, Indigenous women and girls in Manitoba comprise one half of the provinces female homicide victims. Indigenous women also experience higher rates of non-spousal violence than non-Indigenous women.

As mentioned above, Indigenous women and girls are significantly over-represented among those in Winnipeg (and other major cities in Canada) who have been or are being sexually exploited.
Sexual violence directed at individuals in the LGBTQ2S+ community

One 2006 study funded by the Crime Prevention Branch of Public Safety and Emergency Preparedness Canada looked at the health needs of transgender and Two-Spirit individuals living in Manitoba and Northwestern Ontario. The majority of participants were Caucasian, and just over one-quarter (27%) identified as Indigenous; some also identified as Two-Spirit. Half of the participants were under the age of 40. More than half of respondents had only completed a high school education, and one quarter (25%) lived in extreme poverty, earning less than $10,000 per year. Most of those surveyed had experienced depression, loneliness, guilt and an overwhelming sense of injustice; two-thirds reported that they had felt compelled to self-harm. Nearly half of the participants had planned suicide and more than one-quarter had made at least one attempt. Half of those surveyed reported feeling unsafe on public transportation and over one-third reported feeling very unsafe in public spaces generally. More than nine in ten (91%) experienced harassment in public washrooms.

WINNIPEG

Winnipeg is the largest city in Manitoba, with a 2015 population of 721,819. Of this, 50.8% are women.

DEMOGRAPHICS

The population in Winnipeg is younger than the national average, but slightly older than the province as a whole.

Table 4: Estimated 2015 Female Population in Winnipeg (by age)

<table>
<thead>
<tr>
<th>Age</th>
<th>0-14</th>
<th>15-24</th>
<th>25-34</th>
<th>35-44</th>
<th>45-54</th>
<th>55-64</th>
<th>65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of Female population</td>
<td>16%</td>
<td>13%</td>
<td>15%</td>
<td>14%</td>
<td>13%</td>
<td>12%</td>
<td>17%</td>
</tr>
</tbody>
</table>

According to the 2011 NHS, 21.4% of the population in Winnipeg identified a language other than English or French as their mother tongue. The three most common single responses were Tagalog (21.2%), German (13.2%) and Ukrainian (6.7%).

Indigenous women

There is a significant Indigenous population in Winnipeg. In 2011, the number of people who self-identified as being of Aboriginal identity (First Nations, Métis, or Inuit), those who reported Registered or Treaty Indian Status [registered under the Indian Act of Canada] and/or those who reported membership in a First Nation or Indian band, reached 72,335 (or 11.1%) of the population in Winnipeg. Approximately 5.8% of the total population in Winnipeg identified as being an Aboriginal female (11.4% of the total female population). More than half of the respondents who
only selected one “Aboriginal” identity (Métis, First Nations, and Inuit) identified as Métis (true for both female and male respondents).

Newcomer women and women from ethnocultural communities

Winnipeg is home to a large ethnocultural population. The 2011 NHS reported 23.1% of the population was first generation. The most common countries of origin for recent immigrants were: the Philippines, India and China; this was the case for both women and men.

In Winnipeg Centre (a large electoral district that encompasses Site One and Two\(^m\)), 33.9% of the population identified as first generation in the 2011 NHS (34% of women in the area identified as being first generation). The area was home to 10,290 recent immigrants (13% of the population), slightly less than half of whom were female (49%). The three most common countries of origin for recent immigrants (male and female) to the area were: the Philippines, Ethiopia and China.

Approximately one-fifth (21.4%) of the population in Winnipeg identified as visible minority; 50.6% of whom were female.

In Winnipeg Centre, 28,105 (35.8%) of the population identified as belonging to a visible minority group. Of these, 14,000 were female (36% of the female population). The most common visible minority groups for males and females were Filipino (60% of the visible minority population), Black (14.6%), and Chinese (7.4%).

Women living with physical and/or cognitive disabilities and Deaf women

According to Canadian Survey on Disability, 2012 (Statistics Canada), women living with disabilities accounted for 17% of all women in Manitoba in 2012, two-thirds of whom were under the age of 65. Sixty-nine per cent of women who identified as living with a disability experienced moderate to very severe disabilities, including learning and developmental disabilities, blindness, deafness, mobility issues and chronic pain.

SEXUAL VIOLENCE IN WINNIPEG

SEXUAL ASSAULT

Police-reported sexual assault in Winnipeg

Of the 1,356 sexual assault cases in Manitoba reported to police in 2015, 50% or 680 cases occurred in Winnipeg. This is consistent with previous years. The police-reported sexual assault rate in Winnipeg decreased by 7.7% between 2015 and 2014 (from 91.19 per 100,000 to 84.15) but is still above the national average of 59.6. In 2015, 666 of the 680 sexual assault incidents reported to police were classified as sexual assault level 1; nine were sexual assault level 2; and, five were sexual assault level 3.\(^{184}\)

\(^m\) See map of region in Appendix C
Over the past number of years, Winnipeg has reported one of the top three sexual assault rates amongst CMAs in Canada:

- 2010 Winnipeg reported the highest sexual assault rate of 95.5 per 100,000 (compared to a national rate of 65.8);
- 2011 Winnipeg reported the highest rate of 96.3 (compared to a national rate of 63.6);
- 2012 Winnipeg reported the third highest rate of 92.8 (compared to national rate of 62.9);
- 2013 Winnipeg reported the second highest with a rate of 88.9 (compared to 60.3 nationally);
- 2014 Winnipeg reported the highest rate again with 91.2 (compared to 58.0 nationally); and,
- 2015 Winnipeg reported the third highest rate of 84.15 (compared to 59.6 nationally).  

**Self-reported sexual assault in Winnipeg**

In the 2014 cycle of the GSS, Winnipeg reported the third highest rate of sexual assault (118 per 1,000 population) among all Census Metropolitan Areas (after Saskatoon with a rate of 142 and Halifax with 129).  

**OTHER FORMS OF SEXUAL VIOLENCE IN WINNIPEG**

**Sexual exploitation in Winnipeg**

Individuals in Winnipeg who are sexually exploited, and who have experienced sexual violence, are overwhelmingly female. A 2010 report that analyzed six years of information distributed by inner-city agencies that work with street-involved women in Winnipeg identified 222 incidents involving violence (verbal, physical, sexual and economic), 96% of these incidents were perpetrated by Caucasian men, against women.  

According to a 2006 Government of Manitoba report (*Neighbourhood Solutions: Working together to address sexual exploitation on our streets*), 86% of sexually exploited people reported that they had experienced violence on public streets, 54% reported experiencing violence from clients and 70% reported violence from “pimps/partners” (exploiters). The prevalence of violence is likely significantly higher, as sexually exploited individuals rarely report sexual violence.  

The majority of sexually exploited women and girls are Indigenous. According to a 2010 report compiled for Office of the Federal Interlocutor for Métis and Non-Status Indians, 70-80% of sexually exploited youth in Winnipeg were of Aboriginal descent. That same report estimated there are approximately 400 sexually exploited children and youth in Winnipeg each year. In Winnipeg, considerable evidence demonstrates that social and economic inequalities, rather than individual choice, largely determine who is exploited.  

The same 2010 report found that in 51% of violent incidents committed by clients (‘bad dates’), the sexually exploited person was picked up in the North End and 38% from Winnipeg’s West End. The violence was often committed in a location outside of these neighbourhoods (17% of violent incidents occurred in industrial areas, 14% outside city limits). The report delineated different forms of violence committed against sexually exploited individuals by johns: 58% of ‘bad dates’
included sexual violence, 74% involved physical violence, 33% economic violence and 42% verbal violence.\(^{194}\) In 25% of ‘bad date’ events there were weapons present.\(^ {195}\) Half of all street harassment also involved physical violence.\(^ {196}\)

**Street harassment in Winnipeg**

In addition to physical sexual assault, street harassment is another aspect of the spectrum of sexual violence facing Winnipeg women.

Hollaback! is an international non-profit movement across 79 cities in 26 countries, designed to combat street harassment through developing improved public dialogue around women’s experiences of sexual violence in public spaces. A 2013 survey included women in Winnipeg who shared their experiences of sexual violence in the city.\(^ {197}\) While the number of respondents was comparatively small,\(^ n\) the findings remain valuable given that data collection on this topic remains in its infancy.

According to research conducted by Hollaback!, street harassment is a common challenge that women face in downtown Winnipeg. More than two-thirds of respondents experienced street harassment at least once a month, while more than one-third experienced it at least once a week. The most commonly cited forms of harassment were: honking; leering; whistling; comments on a woman’s body; and sexist comments; all of which were experienced by more than half of the women surveyed. About one-third of women had experienced the following: aggressive advances; being followed; having their path blocked by their harassers; and vulgar gestures. Almost one-half of the respondents had been the target of sexually explicit comments. One per cent of respondents indicated that their harassers were exclusively women; more than nine in ten (93%) stated that their harassers were either exclusively men or mostly men.\(^ o\)

More than nine in ten women (96%) had been harassed on public streets, 62.6% at a bus stop, 39.2% on public transportation, 30% at a shopping mall, and 10.5% in a downtown Winnipeg skywalk. The majority (82.2%) had never formally reported their harassment.

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\(^{n}\) For example, there is neither methodological information, nor any context as to number of participants.

\(^{o}\) The remaining 6% were ‘other’ responses.
Indigenous women and girls increased vulnerability to sexual exploitation

Indigenous women and girls are significantly over-represented among those in Winnipeg (and other major cities in Canada) who have been or are being sexually exploited. Due to the legacy of colonization, persistent and insidious perceptions of Indigenous women and girls as sexually available underlie the myriad of factors that contribute to their vulnerability, regardless of their socioeconomic status, education level, sexual orientation, disability or birth place.

For Indigenous women and girls who move to Winnipeg from their home communities, a number of factors may increase their risk of vulnerability, such as: living in poverty, separation from their support systems and a lack of quality education which may limit access to employment. Being unfamiliar with how to safely navigate the city (ex: taking a taxicab or bus) may also put them at increased risk of being exploited.
**INTERVENTION SITES**

**SITE ONE** is an approximately 3 km² area comprised of five inner city and downtown neighbourhoods in Winnipeg (shaded in blue):

1. West Alexander
2. Spence
3. Central Park
4. Portage-Ellice
5. South Portage

The five neighbourhoods were selected because of the high number of unknown offender sexual assaults frequently reported in the area (according to Winnipeg Police data).

**SITE TWO** is the University of Winnipeg campus (shaded in red).

This site was chosen as it presented an opportunity to focus on the experience of individuals who attend the institution as well and are regular users of downtown public spaces, including public transportation, parking lots, bars and restaurants, and other surrounding facilities and services. Understanding the relationships between university members, institutional spaces and the broader downtown communal landscape were important elements of site selection.

**DEMOGRAPHICS**

**Neighbourhood demographics**

The neighbourhoods in the intervention area are some of the most linguistically and ethnically diverse regions in Winnipeg and Manitoba.

Statistics Canada 2012 Census Profile data provides the best available statistics on demographics for the area. Unfortunately, the Census Tract boundaries do not align perfectly with the CrimeStat neighbourhood boundaries for the intervention area. The following statistics are for Site One, plus an area to the north of West Alexander, slightly west of Portage South and the University of Winnipeg (Site Two). The total area of this area is 5.88 km² (or 0.11% of the total area of Winnipeg). Please see Appendix B for a more detailed summary of neighbourhood demographics, and a map of the expanded area and Appendix C for a map of the area.

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p The neighbourhood boundaries are defined by the Winnipeg Police Service.
In 2011, the region was home to 24,270 residents, just slightly less than half of whom are women (48%). Compared to Winnipeg as a whole, this area is home to a higher percentage of residents whose mother tongue is not English or French, and a higher percentage of residents who regularly speak a language other than English and French at home. The most common Aboriginal languages spoken are Ojibway, Cree and Oji-Cree, and most common non-Aboriginal language spoken is Tagalog.

The area is also home to a higher number of single parent families, where women overwhelmingly are the single parent. Of all census families, 32.5% are headed by lone-parents, 83% of which are lone female parent, in comparison to the rest of Winnipeg at 18.0% and 79% respectively. In total, 27% of families living in the area are female-headed single parent families (compared to 14% in the city overall). The area is also significantly higher in density than the rest of Winnipeg (2,731.99 km² compared to 137.7 km²), particularly in Central Park, the neighbourhood with the highest density in Winnipeg.

Statistics Canada does not report on statistics such as income and educational attainment at the census tract level. However, from the 2011 NHS we know that Winnipeg Centre (a large electoral district that includes Site One and Two) is home to a younger population than the city average, where the overall educational attainment and median family income is lower. The percentage of people who rely on public transit or walking as their primary means of transportation is higher than the city average.

**Campus demographics**

As of November 2014, the University of Winnipeg had 9,094 full or part-time undergraduate students, 265 graduate students and 556 international students, for a total enrolment of 9,359. There were approximately 351 faculty, 34 collegiate faculty, 454 support and administration staff, and 542 temporary or casual staff. The University of Winnipeg frequently reports a higher enrolment of female students than male. Surveys conducted in 2005, 2008, and 2011 indicated an average enrolment of 70% women and 30% men. In 2011, student age tended to decrease to between 18 and 25 years, and only 20% of students were aged 26 or older.

Approximately one in four students at the University of Winnipeg identify as belonging to a visible minority group. Between 2008 and 2014, the greatest increases in visible minority populations on campus included individuals who identified as: Black, Chinese/Taiwanese, Filipino and South Asian persons, numbers that remain in line with broader provincial immigration trends. Approximately 9% of the population identified as Indigenous, slightly lower than the overall percentage found in Winnipeg (11%).
PUBLIC SPACES AND SOCIAL HUBS

Public Spaces and Social Hubs: Site One Examples


Business: ex: Canada Post (main office), Manitoba Hydro, Winnipeg Police headquarters

Health services: Boyd Medical Centre, Children’s Hospital, Health Sciences Centre, Klinic Community Health Centre, Manitoba Clinic, Medical Arts, walk-in clinics, Winnipeg Clinic, Women’s Health Clinic, Women’s Hospital.

Indigenous organizations: Ka Ni Kanichihk, Ma Mawi Wi Chi Itata Centre, Native Women’s Transition Centre, Eagle Urban Transition Centre, Eyaa-Keen Centre.

Indigenous political organizations: Assembly of Manitoba Chiefs, First Nations Health and Social Secretariat of Manitoba, Manitoba Manitoba Métis Federation (walking distance).

Legal and government services: John Howard Society, Law Courts, Legal Help Centre, Public Interest Law Centre, Remand Centre, Service Canada, Community Unemployed Help Centre (walking distance), Legal Aid (walking distance), Provincial Legislative Building (walking distance).

Mental health supports: Artbeat Studio (Studio Central), Canadian Mental Health Association.

Newcomer serving organizations: Manitoba Start, Needs Centre, Welcome Place, Immigrant Centre (walking distance), Immigrant Women’s Association of Manitoba (walking distance), Immigrant and Refugee Community Organization of Manitoba (walking distance).

Other features of the area: Skywalks, surface parking lots, underground walkways.

Parks and green space: Air Canada Window Park, Central Park, community gardens, Furby and Maryland Tot Lots, Memorial Park, Millennium Library Park, Pinkham Park, Old Market Square (walking distance).

Recreation centres: Downtown YMCA, Magnus Eliason Recreation Centre, Sherbrook Pool.

Religious and cultural institutions: Calvary Temple, Elim Chapel, Canadian Muslim Women’s Institute, Kateri Tekakwitha Parish, Knox United Church, McDermot Avenue Baptist Church, Winnipeg Central Mosque (walking distance).

Resource centres, neighbourhood associations: Central Park Development Corporation, Millennium Library, West Broadway Development Corporation, Blake Gardens Resource Centre (walking distance), Daniel McIntyre/St. Matthews Community Association (walking distance).

Note: this is intended to provide a snapshot of the range of activities within site one; it is not intended to be comprehensive list.
**Restaurants, bars, hotels:** Many restaurants, hotels, pubs and beer vendors.

**Schools and educational institutes:** Several public schools, two university campuses (University of Winnipeg; University of Manitoba Bannatyne campus), Winnipeg Adult Education Centre, Booth College, Red River College (walking distance).

**Services (miscellaneous):** Job-readiness programs, debt-counselling, financial institutes, insurance providers, a number of predatory lending institutions.

**Services for older adults:** Age and Opportunity, Lions Manor, Lions Club.

**Services for people with disabilities:** Society for Manitobans with Disabilities, Independent Living Resource Centre, Canadian Institute for the Blind (walking distance).

**Shopping:** A few medium/large stores and shopping centres – Portage Place, Hudson’s Bay, City Place, Forks Market (walking distance); a number of smaller shops and grocery stores, including several ethnic grocery stores and convenience stores, and several pawn shops.

**Transportation:** Over 60 regular and rapid transit bus routes; Balmoral Transit Station servicing 14 bus routes; Graham Transit Mall servicing 27 bus routes; and, numerous large bus shelters.

**Victim services:** A range of government and community-based organizations provide victim services in the area, ex: Klinic Community Health Centre and the Health Sciences Centre Sexual Assault Program provide services for victims of sexual assault.

**Women’s Resource Centres:** West Central Women’s Resource Centre, Winnipeg Central Park Women’s Resource Centre.

**Youth services:** Resource assistance for Youth, Youth Employment Services, Rossbrook House (walking distance).

**Public Spaces and Social Hubs: Site Two Examples**

**Campus buildings:** Axworthy Health & Recplex, main campus, Buhler Centre, Duckworth, UWSA daycare, Helen Betty Osborne (Global Welcome Centre, Wii Chiiwaakanak Learning Centre), Asper Centre for Theatre & Film, McFeetors Hall (student residence, within walking distance), Menno Simons College, Richardson College for the Environment & Science Complex (within walking distance).

**Hotels, restaurants, bars:** Holiday Inn, a campus pub, restaurants close to a number of pubs and the beer vendor on Balmoral Street.

**Parks and open spaces:** campus green space, walk-through from residence to main campus building.

**Shopping, business, restaurants:** Canadian Broadcasting Corporation, restaurants inside and around campus building, close to nearby shopping centres (listed in Site One), campus bookstore.

**Transportation:** Three busy bus stops around the circumference of campus.
SEXUAL ASSAULT AND OTHER FORMS OF SEXUAL VIOLENCE IN THE INTERVENTION AREAS

Our research revealed there is very little public data on prevalence and experiences of sexual violence in the intervention areas. The following information summarizes what was publically available at the time of writing this report.

Site One

The Winnipeg Police Services publishes annual reports that include police-reported crime statistics for different regions in the city of Winnipeg. District 1 (or Central) is a large area that encompasses Site One. The statistics provided are for an area that extends beyond the Site One boundaries. These statistics reflect what were publically available at the time of writing this report. Over the past four years, the number of sexual assaults reported to the police in the area has remained relatively stable, as has the proportion of sexual assaults in the district compared to the city as a whole:

Table 5: Sexual Assault Data in Winnipeg Centre (District 1) – 2011-2014

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>City</td>
<td>District 1</td>
<td>City</td>
<td>District 1</td>
</tr>
<tr>
<td>Sexual Assault with a Weapon (3)</td>
<td>5</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Aggravated Sexual Assault (2)</td>
<td>10</td>
<td>3</td>
<td>9</td>
<td>3</td>
</tr>
<tr>
<td>Sexual Assault (1)</td>
<td>678</td>
<td>205 (30.2%)</td>
<td>657</td>
<td>189 (28.7%)</td>
</tr>
<tr>
<td>Other Sexual Offences</td>
<td>34</td>
<td>7</td>
<td>36</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>727</td>
<td>215 (29.6%)</td>
<td>704</td>
<td>193 (27.4%)</td>
</tr>
</tbody>
</table>

One of the goals of the scoping study was to determine the prevalence of sexual violence within the Site One intervention area. The Winnipeg Police Service provided neighbourhood-specific statistics for the Intervention area as part of their commitment to the Winnipeg Safe City initiative. Please see sections 4 and 5 for an analysis of this data.

Site Two

Data on sexual violence on campus at the University of Winnipeg was not available at the time of drafting this report. While there is little to no information regarding rates of sexual violence at the University of Winnipeg, research has revealed some general information regarding campus sexual violence in Canada (as described on page 34).

LOCAL LAWS, PROGRAMS

Please see Appendix A for a list of local laws, programs and policies relating to sexual violence.
SECTION 4: SCOPING STUDY FINDINGS

This section provides a summary of findings from data provided by steering committee members and through focus groups with newcomer and Indigenous women.

LOCAL TRENDS IN SEXUAL VIOLENCE: WHAT WE LEARNED

WINNIPEG POLICE SERVICE: 2011-2015 SEXUAL ASSAULT STATISTICS (INTERVENTION SITE)

The following information was collected by the Winnipeg Police Service (WPS) over the years 2011-2015 (inclusive) in five Winnipeg neighbourhoods: South Portage, Spence, West Alexander, Portage-Ellice and Central Park. Please note that these statistics are for reported sexual assaults only. Sexual assault is a crime that is significantly under reported (latest estimates from Statistics Canada: 95% of sexual assaults are unreported).

Sexual Assault (1, 2, 3): Number of Victims

In 2011, 100 individuals reported being the victim of a sexual assault in the intervention area. Since then, the number of victims (aged 13 and older) who reported a sexual assault has decreased steadily: 2012: 75; 2013: 58; 2014: 66; 2015: 51. In total, over the five years, 350 individuals reported being victims of a sexual assault.

By neighbourhood, the number of victims who reported sexual assault is as follows:

<table>
<thead>
<tr>
<th>Year</th>
<th>South Portage</th>
<th>Spence</th>
<th>West Alexander</th>
<th>Portage-Ellice</th>
<th>Central Park</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>30</td>
<td>22</td>
<td>30</td>
<td>7</td>
<td>11</td>
<td>100</td>
</tr>
<tr>
<td>2012</td>
<td>20</td>
<td>18</td>
<td>22</td>
<td>7</td>
<td>8</td>
<td>75</td>
</tr>
<tr>
<td>2013</td>
<td>6</td>
<td>12</td>
<td>24</td>
<td>9</td>
<td>7</td>
<td>58</td>
</tr>
<tr>
<td>2014</td>
<td>11</td>
<td>15</td>
<td>23</td>
<td>4</td>
<td>13</td>
<td>66</td>
</tr>
<tr>
<td>2015</td>
<td>13</td>
<td>10</td>
<td>13</td>
<td>8</td>
<td>7</td>
<td>51</td>
</tr>
<tr>
<td>Total</td>
<td>80 (22.9%)</td>
<td>77 (22%)</td>
<td>112 (32%)</td>
<td>35 (10%)</td>
<td>46 (13.1%)</td>
<td>350</td>
</tr>
</tbody>
</table>
Over the five years, sexual assault victims in South Portage comprised 22.9% of total sexual assault victims in the intervention area, sexual assault victims in Spence comprised 22%, sexual assault victims in West Alexander comprised 32% of the total, victims in Portage-Ellice comprised 10% and Central Park victims comprised the remaining 13.1%.

**Sexual Assault (1, 2, 3): Age of Victims**

Between 2011 and 2015, the majority of victims of sexual assault in the intervention areas were between 18 and 30 years old (42%). Twenty-eight per cent of victims were youth (aged 13-17).
**Sexual Assault (1, 2, 3): Age of Accused**

Between 2011 and 2015, accused sexual assault offenders tended to be older than the age of the victims. The majority of offenders were between 18 and 30 years old (43%). The second highest age group were individuals between the 41 and 50 years of age.

![Sexual Assaults by Age of Accused 2011-2015 Winnipeg Intervention Area](image)

**Sexual Assault (1, 2, 3): Known/Unknown Accused**

Contrary to national trends, the majority of sexual assaults that were reported in the intervention area between 2011 and 2015 were allegedly perpetrated by someone who was unknown to the victim (65%).

The unknown category includes offences where: the identity of the charged/suspect-chargeable (CSC) is not known; where the relationship to the victim cannot be established; or, the CSC is not known to the victim in any way but has been observed. Known includes offences where there is an established relationship (blood, legal, known in nature) between CSC and victim.

![Sexual Assaults by Unknown & Known Offenders 2011-2015 Winnipeg Intervention Area](image)
Sexual Assault (1, 2, 3): Location of Assault

Almost half of all reported sexual assaults took place in a dwelling of some kind (including single home or house, private property structure, commercial dwelling and other dwelling units). Twenty-three per cent of assaults took place in public, or outside (ex: parking lot, transit bus shelter, street, road, highway or other open area).

Types of Sexual Assaults

Almost all of the sexual assaults reported in the intervention area between 2011 and 2015 were classified as sexual assault 1 (374 out of 382). There were seven charges of sexual assault with a weapon (sexual assault 2) and one aggravated sexual assault (sexual assault 3) charged over the five-year period.
Clearance Rates

Sixty-five per cent of the reported sexual assaults in the intervention area between 2011 and 2015 were not cleared. Thirty-five per cent were cleared by charge or by other means. Other means includes: death of CSC, CSC is less than 12 years old, diversionary program, complainant declines to lay charges, etc.

KLINIC COMMUNITY HEALTH CENTRE

Klinic Community Health Centre is a community health clinic with locations across Winnipeg. Klinic operates a toll-free 1-800 sexual assault crisis line, and offers counselling and trained volunteers to attend the hospital with sexual assault victims. Klinic shared some information and statistics with Manitoba Status of Women from their sexual assault program. The information provided did not contain names or identifiable information.
Klinic received approximately 2,500 phone calls' to their sexual assault crisis line each year over the years 2011-2016 and made approximately 300 medical/legal contacts with sexual assault victims/survivor each year [it is likely that the number of clients seen at Health Sciences for sexual assault services are higher as not all clients consent to Klinic’s involvement].

Between 2005 and 2014, nearly 50% of all sexual assaults that were reported to Klinic occurred in public. Assaults occurred during the day and night, and tended to be committed by offenders who were older than the victims. None of these assaults were ever reported to the police.

**HEALTH SCIENCES CENTRE – SEXUAL ASSAULT NURSE EXAMINER PROGRAM**

The following figures demonstrate the number of patients who sought care from the Sexual Assault Nurse Examiner (SANE) program at the Health Sciences Centre between April 2012 and October 2015:

- April 2012 - March 2013: 341
- April 2013 - March 2014: 351
- April 2014 - March 2015: 378
- April 2015 - October 2015: 215

**STREETREACH**

StreetReach is a program within Tracia’s Trust, Manitoba’s strategy to prevent sexual exploitation of children and youth. StreetReach teams work with children and youth who are at high risk of being violently victimized through the sex trade.

StreetReach provided the following information from 2011-2015:

- 2011-2012: 683 total encounters - returned children 253 times to safety; located children that were arrested 36 times; made contact with children 394 times to prevent them from becoming victims (for example: through relationship building, role modelling and recreational activities).
- 2012-2013: 1,996 total encounters - returned 213 different children to safety 655 times; located children that were arrested 49 times; made contact with children 1,292 times to prevent them from becoming victims (for example: through relationship building, role modelling and recreational activities).
- 2013-2014: 1,992 total encounters - returned 242 different youth to safety 405 times; located children that were arrested 39 times; made contact with children 1,478 times to prevent them from becoming victims (for example: through relationship building, role modelling and recreational activities).

These numbers are the number of calls to the sexual assault crisis line. They do not represent the number of individual callers. Included are information calls and requests from the hospital for sexual assault counselling program workers to attend as well as sexual assault crisis counselling calls.
2014-2015: 1,675 total encounters; returned 287 different youth to safety 504 times; located children that were arrested 59 times; made contact with children 1,112 times to prevent them from becoming victims (for example: through relationship building, role modelling and recreational activities).

STAKEHOLDER INFORMATION

Manitoba Justice

Manitoba Justice (Prosecution Service and Victim Services) shared some qualitative insights on victim/survivor profiles with Manitoba Status of Women. These insights indicate that a large proportion of those who report to police are often vulnerable and marginalized, often experiencing multiple concerns and challenges in their lives. Justice officials also reported the majority of incidents involved alcohol, the victims range from 17-40 and that the severity of sexual assault is not a predictor of the impact that the incident will have on the victim.

Representatives from Victim Services observed that offenders often use predatory behaviours such as ‘plying victims with alcohol and drugs.’ This is consistent with academic research that finds instrumental violence, psychological weapons and alcohol are deliberately used to render victims more vulnerable to attack. 207

Representatives from Victim Services also noted that numerous incidents involving sexual violence against women in Winnipeg have taken place within various types of public transportation, including taxicabs, buses, limousines and driver education vehicles.

FOCUS GROUP FINDINGS

This section is organized into two subsections: experiences of Indigenous women based on a series of community conversations facilitated by Ka Ni Kanichihk, and experiences of newcomer women, based on community conversations held with members of the Nigerian, Afghani, Filipino and Congolese communities.

We recognize this work is evolving and will continue to seek opportunities to engage women from different communities as the project progresses.

CONVERSATIONS WITH INDIGENOUS WOMEN

Three community conversations were facilitated by Ka Ni Kanichihk between September and October 2014. More than 75 participants who identified as Indigenous women participated. Those who facilitated these sessions shared that the majority of participants were under 40 years of age. All respondents remained anonymous, and shared their experiences both verbally and in writing.

Women within all three groups were asked the following four questions, in the same order:

1. What would you like to share about your experience(s) of sexual violence (harassment or assault) in public spaces?
2. What would have helped you in your experience?
3. What supports or resources did you receive?
4. What services did you need?

The findings reveal that the Indigenous women in this study have experienced sexual violence in a variety of public spaces in Winnipeg, including in shopping malls, on public transportation and on public streets. Experiences of sexual violence ranged from verbal harassment to physical forms of sexual violence (including rape), and were facilitated through: the use of drugs and alcohol, brute force, problematic relations with law enforcement, and what has been termed the ‘bystander effect.’ Moreover, whether or not participants reported these experiences formally, informally or not at all, they have often felt unsupported and isolated in their experiences of sexual violence.

The participants offered numerous recommendations for improving safety, security and support services within Winnipeg’s public spaces, including awareness-raising and public engagement resources, improved support services, and enhanced community-based and institutional safety programs, including from all levels of government.

PERCEPTIONS AND EXPERIENCES OF SEXUAL VIOLENCE AGAINST WOMEN IN PUBLIC SPACES IN WINNIPEG

The qualitative evidence indicates that when Indigenous women in Winnipeg experience sexual violence, they often do so from a very young age, and that these experiences multiply over time, findings that remain consistent with other local, provincial and national statistics.

Social Hubs

Social hubs are public spaces that draw individuals to an area or neighbourhood other than the one in which they live, and can include (but are not limited to) shopping malls, schools, hotels, bars, parking lots, parks, hospitals and restaurants. Participants highlighted these spaces as a significant area of concern for all women in downtown Winnipeg.

Participants identified downtown shopping malls as dangerous places for Indigenous women and girls. They described unwanted touching, being followed, cat-calling, visual harassment, including staring and ‘creepy looks,’ and feeling unsafe both indoors and outdoors. In one case, a woman described witnessing a child being sexually assaulted in a hospital.

Public Transportation

A second area of concern for Indigenous women in Winnipeg, which echoes international literature on women’s experiences of sexual violence in public spaces, is public transit – buses, bus stops, and taxicabs. Participants described incidents that ranged in severity from sexualized racial comments to sexual assault, with the alleged perpetrators including other passengers, those waiting at the bus stop, and bus and taxicab drivers.

Participants described incidents that took place over lengthy periods of time, involving repeat offenders, including one man who would regularly ‘flirt’ with one young woman at the bus stop before and after school. The women also described incidents where the alleged perpetrators were not known to the victims; men approaching girls as young as 14 years of age who were riding the
bus, and engaging in unwanted touching. In both cases, participants described feelings of fear and a reluctance to speak out about the behaviour, often choosing to remove themselves from the situation as this was perceived to be the only solution.

While both buses and taxis involve a ‘captive audience’ in a sense, the stories women shared of their experiences in cabs involved more planning and persistence on the part of the alleged offender. The common thread among all of these narratives was that women were followed by the driver, usually late at night, and offered a ride. Once inside the vehicle, women described being ‘hit on’ (sometimes with the use of real or threatened physical force), unwanted touching, being followed to their homes, and in some cases, forced into unwanted sexual acts. These women were often very young, with one participant only 13 years of age.

More than one woman shared experiences of being forced to perform sex acts with the driver, usually at the end of a night out with friends, when the women were in a particularly vulnerable state. Often women found themselves in remote locations, sometimes bruised and unable to determine where they had been left by the driver. Respondents shared that these experiences caused ongoing feelings of shame and confusion. Verbal harassment, and other seemingly less serious experiences, including cat calling can also have devastating, long-term effects. As one participant shared, memories of childhood sexual trauma (and other experiences of sexual violence) can be triggered by harassment in public spaces.

**Sexual Violence on Streets**

The most common site these participants experienced sexual violence was on public streets in Winnipeg. This included racialized comments and cat-calling, being followed, having men expose themselves, and other forms of sexual violence, including rape.

The majority of women described being followed and sexually harassed by men in cars while walking on public streets. This harassment almost always included accusations that they were involved in sex work, and included derogatory or crude questions directed at women of all ages. One respondent described being approached by a driver looking for directions, only to have him continue to follow her after she responded. When she turned to confront the man, she found him touching himself. Another participant related an incident of being followed while walking in public with her young child, where the driver of the vehicle asked her ‘how much?’ for her daughter. These acts of violence, which very often occur during daylight hours, highlight mainstream attitudes that involve racism, sexism, and specifically, a racialized association between Indigenous women and prostitution. As one woman participant expressed, “[they think] because I’m Aboriginal, they could look at me like I’m a piece of meat.”

Several participants described sexual violence experienced on public streets, either personally or involving someone they knew, including their daughters. These acts often involved extensive physical force, including being grabbed and forcefully attacked, and were committed by both strangers and those who were known to the survivor. One woman recounted her experience of being raped while in public, noting “sexual predators are around you for the rest of your life.”
Many of the respondents described being publically sexualized from a very young age. One participant described men as being “brutally raised to be racists,” while another explained that “men feel they can touch us simply because we are Aboriginal women.”

A trend common within many of these experiences was a tension between the women who participated and the law enforcement officials. Many women felt under-served by police, with some participants stating that they had a feeling of cops “not giving a shit.” Others stated explicitly that police, for example, as one participant stated: “[police] are known for not helping Indigenous people, especially single women.”

As a result, many women were reluctant to share their concerns and experiences with law enforcement. In one case, a participant’s daughter was raped in a stairwell. When her mother encouraged her to go to the police, the daughter replied, “Why would I go to the police, mom? They would blame me.” Another woman argued that the police are “not really there for us,” explaining that she felt like the police humiliate and re-victimize Aboriginal women who come to them, often asking why they hadn’t come forward sooner. This respondent explained that this was why women do not report sexual violence, because the police “stereotype our women.”

When the women reported going to the police, they felt the results were not always favourable. In one case, a participant described waking up in a hotel hallway, half-dressed, after having been drugged. She approached the hotel security, who contacted police. While the police did locate her clothing, they forced her to dress in the hallway (an experience she found humiliating), and then took her home. Another woman recounted being forced to explain her rape “right there at the counter [of the police station], where there were at least two other constables and other citizens. There was no privacy; anyone could hear what [she] was saying.” She noted that, had she not had the support of traditional healing ceremonies, the experience would have been re-traumatizing.

One young woman waited a full year to approach the police out of fear that she would not be taken seriously. When she and her mother finally did approach them, they “shrugged it off,” and the two left feeling unaided. Others simply felt that the police had not helped them, with one woman saying “Nothing was ever done, they never caught the guy that did this.”

By contrast, some participants did find police presence and involvement to provide much needed support. Some women described using the threat of contacting police to scare away harassers, while others reported that the police themselves rescued them from similar situations, with one participant noting that it was the “first time I felt like police were actually doing what they should for me.” In addition, some women suggested that an increased police presence would help them to feel safe.

**Public Complicity**

Many participants described being looked at or being watched while they were harassed, only to have members of the general public do nothing to support them. One respondent, who described being harassed while walking with her daughter, explained that people sat on their front steps, looked and then looked away, or even blamed them for being out walking during that time of night.
Multiple women identified bystander support as something that would have helped them, with one woman stating that she wished “someone would have said something, because people noticed [what was happening].”

The positive effects from bystander support should not be underestimated. Within the experiences shared in these conversations, two best represent the effect public support can have for women experiencing sexual violence, including harassment. In two similar stories, both of which took place on a bus in Winnipeg, other passengers approached these women. In the first case, a man moved from the back of the bus to sit next to a young woman, and then began touching her. While she believed other people were aware of what was happening, she was too uncomfortable to draw further attention to her situation, and ended up fleeing the bus in fear.

In the second case, however, the result was significantly different. Again, a woman was approached by a man. He pretended to drop something on the floor, and then began touching her without her consent. However, in this case, another passenger pointed out the man’s behaviour and openly called him ‘a pervert.’ The offender quickly left the bus. The distinction between being forced away yourself, and having your attacker forced away, cannot be overemphasized with respect to survivor well-being. In one situation the woman was forced to withdraw and left feeling ashamed and frightened, while in the other the woman was supported and defended by those around her, and her attacker was censured.

Given the racialized atmosphere the Indigenous women in this study expressed living in, where merely relaxing on a park bench in public often invites sexual harassment, public support is vital. Participants noted that Aboriginal women are ‘seen in a certain way,’ which often includes assumptions of alcoholism and prostitution, and are verbally abused further when they defend themselves. These gendered and racialized assumptions both reflect and contribute to a broader culture where survivors of sexual violence are effectively blamed for these experiences. Moreover, it highlights a cultural assumption that Indigenous women are safe targets for sexual violence, which encourages attackers to believe their behaviour is above reproach.

**RECOMMENDATIONS**

The women who participated offered numerous recommendations, including improved education, support services, and policing and safety programs. In addition, some believed that Indigenous-led services (including taxis, and policing) would improve sexual violence rates.

**Education-Based Prevention Programs**

Overall, the participants felt that the need for improved public education on sexual violence against women and girls, both for prevention and treatment, was immense. This included a desire to see more educational opportunities for Indigenous women on a variety of subjects related to sexual violence, including: traditional teachings on healing and history, education regarding the legal process and police system, education on the dangers associated with public transportation, the relationships between the community and law enforcement, and alcoholism and mental illness. Participants also expressed a desire for more generalized education, starting with school-aged
children, about respect for women (particularly for Indigenous women), the dangers of victim blaming and assertiveness training for young girls. They also suggested training for mothers and caregivers on how to speak with their children about sexual violence.

Support Services

Among the support services identified in Winnipeg, participants identified the West Central Women’s Resource Centre, Ka Ni Kanichihk, and Klinic Community Health Centre as valuable community spaces. However, there was also a strong desire for the development of more community-based services, including: 24 hour drop-ins and safe houses (with counsellors, elders and the ability to report incidents), more access to counselling and therapy, better access to elders and traditional sources of support (such as sweat lodges and sharing circles). Support groups around alcohol, mental health and abuse were also noted, along with shorter wait times in hospital (with one woman citing a four-hour wait time post-assault). Finally, there was a general desire to be able to talk to people without judgement, with an emphasis on access to those who would listen to and acknowledge their experiences. One woman stated that what survivors needed was “people with experience, not ...degrees.”

Law Enforcement and Safety

Some women believed that improved safety features such as the Block Parent program, improved lighting on some downtown streets and other public spaces, and a greater police presence in public spaces would improve Indigenous women’s perceptions of safety and would reduce their experiences of sexual violence.

Participants suggested improved police training, including training in sensitivity to the issue of sexual harassment and other forms of sexual violence against women and girls, how to effectively respond, and how to show empathy, compassion and support. Others identified a need for Indigenous-led policing programs.

Other suggestions included more working payphones, Safe-Walk programs, and more cooperation between the community and local business (ex: allowing women in need to access telephones). Certain suggestions were specific to sites of sexual violence. With respect to public transit, for example, a public safety system that included panic buttons in different modes of public transport. Feedback mechanisms, such as confidential complaint procedures for taxis, buses and police services, were also mentioned. Participants again stressed the need for trust and compassion within various systems of complaint or law enforcement. Self-defence classes were mentioned often. Finally, improved police training with regard to sexual violence (and Indigenous women’s experiences of) was mentioned very frequently.

CONVERSATIONS WITH NEWCOMER WOMEN

The second set of findings summarizes the perceptions on women’s safety in public spaces shared during three community conversations with newcomer women facilitated by community and steering committee partners.
The conversations took place between October 2014 and February 2015, and included more than 80 participants who identified as women from numerous visible minority backgrounds, with many arriving in Winnipeg from their countries of origin (including Afghanistan, Democratic Republic of Congo, Philippines and Nigeria) within the last ten years. All respondents remained anonymous, sharing their perceptions and experiences of public spaces in Winnipeg verbally. The information they shared was documented by steering committee members.

Women within all four groups were asked the following questions, in the same order:

1. Since coming to Winnipeg, what kinds of experiences and feelings have you had?
2. How do you think women are treated in Winnipeg?
3. Do you think Winnipeg is a respectful place for women in public?
4. Do you think Winnipeg is a safe and comfortable place for women?
5. Are some public places in Winnipeg that seem less safe or comfortable for women?

The participants offered numerous recommendations for improving safety, security and support services within Winnipeg’s public spaces, including awareness-raising and public engagement resources, improved support services, and enhanced community-based and institutional safety programs from all levels of government.

**PERCEPTIONS AND EXPERIENCES OF WOMEN’S SAFETY IN PUBLIC SPACES IN WINNIPEG**

Overall, the majority of participants in the focus groups felt positive about their experiences and feelings since coming to Winnipeg. A number of women talked about how women have greater equality with men in Canada than the countries they previously were living in. In general, participants perceived safety for women in Winnipeg as being dependent on time of day and neighbourhood.

**Social hubs: downtown and transportation**

When the participants were asked questions about women’s safety in Winnipeg, many women talked about safety concerns around transportation (on the bus and while waiting for the bus), safety in different areas of the city and at night. The vast majority of women identified the downtown, and social hubs such as Portage Place mall as being ‘uncomfortable, ‘dangerous,’ or ‘scary.’ As stated by one participant, “[Winnipeg] is respectful, but it depend[s] on the area that you go. For example, Transcona is different compare[d] to being on Portage Avenue by the mall. In Transcona, no one bothers you, everyone is so friendly and you walk down the street in Transcona and everyone say ‘good morning,’ and ‘how are you?’ But when you come downtown it is different and you are lucky if you do not get a kick. Everyone’s head is down and walks with their domain; no friendliness at all.”

Women talked about avoiding the places they do not feel comfortable or safe. A few Filipino women shared stories they had heard about violence being committed against Filipino people downtown, and stated they felt scared to go downtown alone after hearing those stories.

Women in all of the focus groups expressed concern over the safety of bus routes. As many of the participants used the bus as a primary means of transportation, they were well positioned to point out numerous concerns with the system. One member of the Congolese women’s group recounted
stories of young women in their communities who were verbally harassed on the bus, including being accused of bringing disease (Ebola) into the country. Afghani women focused mostly on the environment surrounding the bus stops, particularly the isolation they felt when waiting for a bus after dark. A participant mentioned that, at a busy downtown bus stop, she had observed a violent fight, and had reported it to the bus driver, who (in her estimation) had done nothing. Buses were identified not only as key sites of harassment, but also key sites of apathy. The Congolese women, in particular, questioned why no one intervened when they faced verbal harassment on buses or at bus stops.

A number of women expressed concerns about safety after dark. As one participant from the Filipino women’s group said: “safety downtown at night is an issue for us. We are afraid of going downtown by ourselves. We know someone from [a] different community that suffered violence and [was] assaulted so downtown areas are a danger at night.”

**Creating awareness**

A common theme that emerged through the focus groups was the sense that newcomer women (and men) were unprepared for cultural, legal and social differences in Canada. Women identified specific challenges adjusting to Canadian laws around parenting and disciplining children, and many shared stories of interactions with men in public that were unfamiliar, uncomfortable and frightening.

A number of Filipino women who participated talked about Winnipeg as being a generally safe place, but ‘not completely safe.’ Many spoke of needing, information and awareness on how to protect themselves in public areas. Challenges adjusting to Canadian social norms and legal systems were mentioned among women in all the focus groups. Statements such as the following by a Filipino participant were common: “When we were new to Winnipeg, due to lack of sufficient knowledge on Canadian culture, I was not sure about my rights, [and] did not know to ask or not ask for help.”

Education and awareness were seen as important for all newcomer women. For example, as one Filipino participant stated: “All immigrant women need awareness on [the] legal system, bridge the gaps so women fully understand their rights and responsibilities … [so they are] not afraid to report it to the police.”

Despite facing unique settlement challenges in Winnipeg, many participants felt their issues (ex: safety concerns for women) were the same as those facing all women. For example, as one Filipino participant said: “We believe regardless of any culture, we women are the same and our issues are the same. We need help and protection and assurance from our system so we feel safe, secure and comfortable in our home.”

“Yes, Winnipeg is a safe place, but we hear growing number of [stories] of violence against women in ...Winnipeg. It is not completely safe. We, as women, need knowledge, information and awareness on how to protect ourselves in public areas.”

- Focus group participant
Racism

Some of the participants said that they, as immigrant or newcomer women, experience the same kind of safety-related fears and experiences as all women in Winnipeg. Other participants, particularly women from the Nigerian and Congolese community, talked about feeling unsafe because they were black. These participants stressed that their experiences of public harassment were racialized, sexualized and based on cultural differences. By and large the Congolese women felt that their concerns about sexualized racism were often downplayed. There was a sense that many Winnipeggers didn’t believe that racism existed in Winnipeg, often implying that the women were either ‘too sensitive’ or had ‘misunderstood,’ or even that they should appreciate (or were intentionally inciting) sexualized harassment. Despite the fact that many of the participants experienced verbal and public sexist and racist incidents on a regular basis, it was agreed by most in attendance that these concerns were rarely taken seriously.

Congolese women also identified ethnicity as playing a role – many of the women were Francophone, who spoke very little English. Their accents and language issues were identified as forming part of the basis for their harassment, with some women feeling that they were targeted because they couldn’t express themselves well. However, even among the wider Francophone community in Winnipeg, Congolese women expressed a feeling of isolation. In particular, it was suggested that the French-Canadian community in Winnipeg was at best apathetic, and at worst hostile towards Congolese Canadians. In an informal discussion after the focus group, one woman described an incident where a Francophone Canadian repeatedly insisted he couldn’t understand her French when she attempted to complain about sexualized abuse from a fellow student. Many of the Congolese women gathered stressed that their sex, skin colour and ethnicity combined to produce a Congolese experience and that each element necessarily shaped the others. Participants stressed that being black, immigrant, Francophone women meant that they would not be believed or trusted by white Canadians, particularly when they were facing harassment from white men. White men were identified as the primary source of public harassment, both in public and in the workplace.

A number of participants talked about stereotypes – towards black or African women, newcomer women and Indigenous women.

In response to the question: what do you think causes street harassment and public sexual violence against women, one participant from the Nigerian women’s group said “I think, stereotyping is for sure, seeing women [as] good for sex. Or if you are Aboriginal, people think that you have run away and/or must be a prostitute. It is about your race.”

Public apathy

A number of participants from the Afghani and Congolese focus groups talked about public apathy in Winnipeg. Women felt that Winnipeg was somewhat apathetic towards the suffering of those less fortunate, and towards Indigenous peoples. This apathy was identified as a source of crime in general, as it leads to poor living conditions and desperate behaviour.
Some participants talked about apathy as a contributing factor to their lack of safety. For example, as stated by a Nigerian participant: “Sometimes I tell my husband, ‘what would happen if I get a flat tire on the way or highway, nobody will help me.’ Am I going to do it myself? Someone may stop, but [there’s] no expectation.”

**Police**

Other themes from the focus groups were concerns relating to reporting to police and the responses received when reports to police were given.

None of the Afghani women in attendance reported any experiences of street harassment, verbal or otherwise. One woman who did experience a frightening incident reported it to police, though the incident in question was unrelated to her personally. Generally, the Afghani women expressed satisfaction with their interactions with police.

By contrast, the Congolese women identified multiple instances of sexualized racism in public. One participant reported being followed and proposed to repeatedly by a man on the street, while another recounted a story of having been relentlessly hit on by a stranger on the bus. In most cases these women felt like the harassment was not ‘bad enough’ to merit reporting. There was alas a palpable sense that it was so common, nothing could be done. Another participant worried that white Winnipeggers felt that black women desired public sexual attention. Some of the women were very vocal in expressing their belief that they would not be believed, either because white Winnipeggers do not see racism as a real issue, or because white Winnipeggers do not consider Congolese women to be worthy of concern. This was so even in professional environments. These feelings of alienation lead to the belief that there was nobody outside of their own community to turn to for help. The sense that they would never be believed over a white harasser also strongly dissuaded women from reporting incidents.

Many women in the Nigerian group shared concerns with police. One woman noted, “We think the major problem is the police. You encounter a problem, you call them, and the response is very slow and by the time they are here, the person runs away or at the end, nothing happens.” This sentiment was shared by the participants. Another participant from the Nigerian focus group noted, “three girls beat one of the women from our community and took her purse and her books, but there was not a response [from police].”

Participants in the Nigerian women’s group talked about cultural differences that contribute to Nigerian (and African) women not feeling comfortable reporting safety issues. One participant stated, “most of Nigerian or African women do not know how to voice their experiences. Tell[ing] someone what has happened is [a] hard thing to do. It takes lots of courage to go to the authority and trust [a] particular agency and tell them what has happened to us. Generally speaking, it is hard for immigrant women to all police.” This sentiment was echoed by many participants:

- “It is hard for immigrant or African women to call the police and say that guy is harassing me or report sexual harassment.”
- “Forgiveness is part of our culture. To forgive and forget is the African way.”
“African women and girls in Winnipeg do not speak up – this is part of our culture. Police should do more to protect everyone. Police should tell our young generation to speak up and it is okay to do so. Education is necessary. [The] city belongs to everyone. . . . We should trust the police and they should listen to listen. Africans do not trust police at all.”

Women in the Filipino group did not express the same kind of concerns as in the Nigerian group. Some participants talked about the fear of losing their permanent residency discouraging some immigrant women from reporting anything to the police.

RECOMMENDATIONS

Security measures

Participants shared different suggestions for bolstering security measures in Winnipeg. Women expressed somewhat differing opinions of the police. Many women noted they were doing an important job and are doing as much as they can be, but others questioned their effectiveness. One of the participants in the Nigerian women’s group talked about a strategy using youth to identify crime that could be replicated here: “When I lived in Montreal, what they did, there were inner city youth helping and when they saw crimes and problem[s], they would report it to police … so it is like having a private eye in the form of teenagers. They would … give you a card with your ID number so you can go to police, it was not your name under it, it was under this number soon one can trace it back to you.”

One of the suggestions from the Filipino women’s group was having an escort for women, particularly those who work late. Other participants in the Filipino women’s group talked about their interest in having self-defence classes for immigrant women.

Education about Canadian culture, rights, information

Congolese participants suggested increasing public programming for immigrant women. While the educational components would aid all women of colour, they argued that many immigrants do not know what rights they have in Canada or how to assert them. This created greater vulnerability for immigrant women of colour. The Afghani women had expressed their appreciation for the language instruction available to them through public institutions, but the Congolese participants suggested that in addition to language instruction, courses on Canadian society, government systems (municipal, provincial and federal) and the resources available to them would be beneficial.

Filipino and Nigerian women who gathered also emphasized the need for stronger education and awareness about rights and Canadian culture.

Cultural and consent-based education

Many Congolese participants focused on education as a key component for increasing their safety in public spaces. Racism, ethnocentrism, and sexism were perceived to be learned behaviour. They stressed that their experiences of public harassment were racialized, sexualized and based on
cultural differences. The elements were described as indivisible. As one woman put it, they were not harassed because they were women; they were harassed because they were Congolese women. Most asserted that increased cultural education, starting as young as with kids in elementary school, would help foster better relationships. Consent-based education was also suggested. Given that Congolese women identified white men as their primary harassers, they suggested that education should be focused on addressing this group.

Other:

Other suggestions included:

- Increasing diversity of Winnipeg’s public figures and police officers was also suggested, and stronger anti-discrimination legislation (with visible enforcement) [Congolese women’s group]
- A number of women in the Nigerian women’s group talked about women being sexualized based on their clothing, and that one way of preventing inappropriate touching or sexual violence was by putting in place a dress code.

Public programming

Afghani participants recommended an increase public spending on programming to benefit individuals who are experiencing homelessness, mental illness, addiction or other challenges that render them more vulnerable. They also suggested increased government spending on programming for Indigenous people living in Winnipeg. There was a strong belief among the women gathered that by increasing supports offered to at-risk groups, there would be a resulting increase in safety.

City design/planning

Many participants in the Afghani women’s group shared pragmatic ideas for improving women’s safety. Colour coding of city regions was a key recommendation. The participants explained that new Canadians who are unfamiliar with the language and the city have difficulty seeking assistance. They described a system seen in other cities where in areas of the city are identified on transit maps, at information centres, on street signs, and at public phones by colour. They suggested that such a system would allow women to better situate themselves within the city. Some Afghani participants also expressed dissatisfaction with the ease of contacting authorities when in need, and suggested that publically available and visible contact points would help. They felt that incorporating colour coding into a free public phone system designed for contacting emergency resources would make it easier to report incidents and seek help when in distress.

Transportation

Participants made suggestions for increasing safety measures around bus stops. Many of the participants felt isolated and vulnerable when waiting for the bus. Some women suggested that encouraging more people to remain at the bus stop itself, rather than waiting in nearby buildings would increase a sense of safety at the stops. Participants felt this could be achieved by enlarging the size of key bus stops, increasing the lighting and marking around all bus stops, and by integrating the
bus stops into the neighbourhoods (such as by creating bus depots of sorts, similar to the major transit hubs in other cities where buses arrive indoors, and there are usually open shops with shop attendants available in the immediate vicinity).
SUMMARY OF SCOPING STUDY FINDINGS

We would like to express our gratitude again to those who have contributed to our understanding of sexual violence in Winnipeg. The following presents a summary of what we learned from the various data sets.

1. Consistent with national and provincial trends, sexual assault and other forms of sexual violence are significantly underreported in Winnipeg. We see this in the decreasing number of sexual assaults being reported to police and the increasing number of phone calls to the sexual assault crisis line, visits to the Sexual Assault Nurse Examiner Program, from self-reported data collected by Statistics Canada, and from conversations with Victim Services and the focus group participants.

2. In contrast with national trends, the majority of police-reported sexual assaults in Winnipeg Site One are perpetrated by a stranger. Winnipeg Police Service data from the intervention site tells us that 65% of sexual assaults were perpetrated by a stranger to the victim, compared to 25% of police-reported sexual assaults and 34% of self-reported sexual assaults nationally.

3. Consistent with national data, police-reported sexual assaults occur both in public and private dwellings in Winnipeg. According to Winnipeg Police Service data, 50% of sexual assaults in the intervention site occurred in dwellings; 50% in public. This is consistent with Klinic findings and national self-reported data (ex. 44% of self-reported sexual assaults occurred in a commercial or institutional setting according to the GSS). Participants in the focus groups talked about sexual harassment and sexual violence as occurring much more frequently in public than in a private dwelling.

4. We know that victims of sexual assault and other forms of sexual violence tend to be younger than the age of the offenders. According to Winnipeg Police Service data from the intervention site, 42% of victims were 18-30, 28% were 13-17 and 19% 31-40 years of age compared to 43% of offenders being between 18 and 30, 19% between 31 and 40 and 21% being between 41 and 50 years of age. The general trend of victims being younger and offenders older is consistent with Statistics Canada data and from the experiences of Indigenous women in Winnipeg.

5. Focus group experiences were consistent with Statistics Canada findings that certain groups are more vulnerable for sexual violence, including Indigenous women and newcomer women, and that sexual violence is significantly underreported.

6. Indigenous women focus group experiences were consistent with Statistics Canada findings that Indigenous women and girls are disproportionately affected by all forms of violence, including sexual violence.

7. Other findings:
   a. One area of the Winnipeg intervention area has recorded more sexual assaults to police than the other neighbourhoods (West Alexander).
   b. The clearance rate for sexual assault is low (in Winnipeg and across Canada).
SECTION 5: STEERING COMMITTEE ACTIONS

Preliminary findings from the research process revealed some important gaps and themes, such as:

- The need for better data: in general, and also as it relates to certain populations.
- The need for Indigenous-led programming: it became very apparent that there were no existing Indigenous-led programs for victims of sexual violence in Winnipeg, or across Manitoba.
- Safety on buses and taxis was an important theme locally and globally.
- The need for engaging men and boys.
- The need for greater awareness of information and services for newcomer women.
- The recognition of the great work being done at the University of Winnipeg.

The steering committee initiated the following actions to respond to these themes:

1. BETTER RESEARCH/DATA: After looking at the existing data on sexual violence, the steering committee identified a series of next steps for filling in some of the knowledge gaps:

   a. Information gathering:

      i. Connect with key informants and stakeholders: Ka Ni Kanichihk, Klinic, Victim Services, Sexual Assault Nurse Examiners (in the Sexual Assault Program at the Health Sciences Centre), Justice officials, Winnipeg Police Service, and Tracia’s Trust.

         ▪ Klinic provided statistics from their sexual assault counselling program (including their sexual assault crisis line).
         ▪ SANE program provided statistics from their program.
         ▪ Tracia’s Trust (StreetReach) provided program statistics.
         ▪ Representatives from Manitoba Justice (Victims Services and Prosecution Service) provided insight on trends of sexual violence in Winnipeg.

      ii. Learn from Indigenous women and girls, newcomer and minority women about their experiences of sexual violence in Winnipeg by hosting community conversations (focus groups).

         ▪ Between September 2014 and March 2015, Winnipeg Safe City stakeholders facilitated focus groups with women from diverse backgrounds, who shared their experiences and perceptions of safety, public spaces and sexual violence against women.

            o Discussions with Indigenous women and girls (led by Leslie Spillett, Ka Ni Kanichihk).
            o Discussions with newcomer women (led by Ariana Yaftali).
b. Information sharing:
   i. Locally
      ▪ 2015: the steering committee released the Safe City brief, highlighting the purpose of the initiative, partners involved, and early achievements and supported interventions.
      ▪ 2016: Government of Manitoba released a new website on sexual violence, “You Are Not Alone” (http://www.gov.mb.ca/msw/you_are_not_alone.html) containing information and resources, including links to available services and supports for survivors of sexual violence.
      ▪ 2016: Plans for fall release of Scoping Study and short research briefs (summarizing the findings) at community event and online.
   ii. Internationally
      ▪ June 2015: As a member of UN Women Safe Cities Global Initiative, Winnipeg Safe City was invited by UN Women to send a delegation to participate in a three-day forum in New Delhi, India in June 2015. Delegates attended the UN Women Safe Cities Global Stakeholders’ Planning Forum in New Delhi India to learn about promising practices from each city, exchange program updates and results, and discuss priority areas for Safe Cities policies and programs. Representatives from Manitoba Status of Women and the Winnipeg Police Service attended on behalf of the steering committee.

2. INDIGENOUS-LED PROGRAMMING:
   i. Environmental scan of existing programs revealed there were no Indigenous-led programs and services for women who had experienced sexual violence in Winnipeg/Manitoba.
   ii. December 2014: The Government of Manitoba partnered with Ka Ni Kanichihk to develop Heart Medicine Lodge, the first Indigenous-led program for victims of sexual assault (program delivery commenced spring 2016).
   iii. January 2016: Ka Ni Kanichihk hosted an Ending Violence Core Training session for individuals and organizations to learn about gender-based violence, colonialism and the importance of culturally-appropriate services for survivors of sexual violence.

3. TRANSPORTATION
   The committee identified safety on public transportation as an issue requiring attention
   i. Transportation sub-committee formed in October 2014. Topics discussed include:
      ▪ Distributing passenger safety tips for women in buses and taxicabs, the importance of messaging for bystanders and potential perpetrators of sexual violence.
- Transportation surveys to gain a better understanding of the frequency of sexual violence in buses and taxicabs.

ii. April 2015: preliminary arrangements were made to deliver training on gender and public safety to City of Winnipeg transit officials.

iii. 2016: Connected with Southern Chiefs’ Organization about sharing information and partnering on transportation safety initiatives.

4. UNIVERSITY OF WINNIPEG CONTINUED WITH INITIATIVES AIMED AT REDUCING SEXUAL HARASSMENT AND SEXUAL VIOLENCE ON CAMPUS

i. February 2015: University of Winnipeg Students’ Association hosted a Forum on Sexual Violence where students shared their experiences and perceptions of safety and gender-based violence, and the importance of developing a culture of consent on campus.

ii. December 2015: Manitoba Status of Women partnered with young women to host a panel discussion at the provincial Legislative building about sexual violence on post-secondary campuses.

iii. Orientation Week events, including screening of a documentary on campus sexual events.

iv. 2015: Launch of the Sexual Misconduct Policy.

5. CITY OF WINNIPEG ROLE

i. Partnered with the City of Winnipeg and appointed Councillor Cindy Gilroy as co-chair of the steering committee.

ii. 2016: Partnered with the Winnipeg Committee for Safety, an advisory committee for City Council and included their coordinator to support Winnipeg Safe City program design, research, promotion and intervention development.

6. OTHER

i. December 2015: the Winnipeg Police Service 2016 Business Plan: A Culture of Safety for All included the Winnipeg Safe City program under the second of four strategic goals. Actions to support the program include data collection and the development of new strategies for reducing and preventing sexual violence against women and girls in public spaces.
SECTION 6: NEXT STEPS

Through the scoping study process, a number of important themes and questions have emerged. The steering committee is committed to:

- Examine what other research needs to be commissioned (ex: sexual violence and women with physical and/or cognitive disabilities and Deaf women; and sexual violence and individuals in the LGBT2SQ+ community, and sexual violence and young people).
- Focus future safety and intervention initiatives in West Alexander.
- Continue to prioritize Indigenous women and their experiences with sexual violence.
- Work with newcomer and ethnocultural communities to respond to their concerns and consider safety and intervention strategies.
- Focus on youth prevention, bystander strategies and offender intervention; implement bystander strategies with a focus on transportation and engaging men and boys.
- Develop strategies to address street harassment and transportation safety; work with the Taxicab Board to discuss driver behaviour; distribute the Winnipeg Taxicab passenger safety brochure.
- Challenge victim-blaming; share recommended media guidelines.
- Encourage the use of trauma-informed practices by service providers across all sectors, ex: law enforcement, justice, service providers; meet with the Manitoba Police Commission to discuss trauma-informed practices.
- Share the findings of this study with stakeholders.
- Continue to look at how best to evaluate progress.

Some of the questions that have emerged and will guide the work of the committee include:

- Who can we learn from? Who can we partner with? How can we work with other agencies and groups to share information, collaborate and work to remove silos?
- How can we collaborate with other partners to challenge cultural norms and victim-blaming?
- How can we collaborate with other partners to engage men and boys (not from the perspective of perpetrators)?
- What are the experiences of women leaving incarceration?
- How best can we evaluate progress? (ex: socio-ecological model; collective impact model)
- How can we learn from effective strategies and approaches elsewhere?
- How can we best try to engage with different populations?
- What are some of the safety concerns of individuals traveling to Winnipeg from First Nations?
- How does Winnipeg’s built environment contribute to feelings of safety or fear?
- What additional concrete steps can we take?
CONCLUSION

The scoping study is an important component of the Winnipeg Safe City initiative. Information contained in the report will guide the continuing work of the Winnipeg Safe City initiative. Updates on the work will continue to be posted at the Winnipeg Safe City website: http://www.winnipeg.ca/UNWpgSafeCity.
APPENDIX A: LEGISLATION, PROGRAMS, INITIATIVES

CANADIAN LEGISLATION

Criminal Code of Canada (RSC, 1985, C C-46)

Some of the offences codified in the Criminal Code of Canada related to sexual violence include:

- Sexual assault S 271: Sexual assault (sexual assault 1); S 272 Sexual assault committed either with a weapon or with threats to a third party, or causing bodily harm (sexual assault 2); S 273 Aggravated sexual assault (sexual assault 3)
- Sexual abuse (children): S 151 Sexual Interference; S 152 Invitation to Sexual Touching; S 153(1) Sexual Exploitation; S 151(1) Incest; S 170, 171, 172 & 172.1 to corrupting morals; S 212 & 213 to procuring and child abuse by sex trafficking; S 279.1 & 280 to kidnapping and abduction, S 279.01 to 279.04 human trafficking (some of which have specific provisions for offences against children).
- Human trafficking: S 279.01 Trafficking in Persons; S 279.011 Trafficking a person under the age of 18 years; S 279.02(1) Receiving a Financial or Other Material Benefit for the purpose of committing or facilitating trafficking in persons – Adult Victim; S 279.02(2) Receiving a Financial or Other Material Benefit for the purpose of committing or facilitating trafficking in persons – Child Victim; S 279.03(1) Withholding or Destroying a Person’s Identity Documents (for example, a passport) for the purpose of committing or facilitating trafficking of that person – Adult Victim; S 279.03(2) Withholding or Destroying a Person’s Identity Documents (for example, a passport) for the purpose of committing or facilitating trafficking of that person – Child Victim

A note about consent:

The definition of consent outlined in the Criminal Code of Canada, emphasizes circumstances in which consent to sexual activity does not exist and is vague in specifying the affirmative conditions in which it does exist (simply stating that there must be ‘voluntary agreement’).

Section 273.1 provides a definition of consent for the purposes of the sexual assault offences and for greater certainty, sets out specific situations that do not constitute consent at law.

- Subsection 273.1(1) defines consent as the voluntary agreement of the complainant to engage in the sexual activity in question. Conduct short of a voluntary agreement to engage in sexual activity does not constitute consent as a matter of law.

For greater certainty, subsection 273.1(2) sets out specific situations where there is no consent in law; no consent is obtained:

- where the agreement is expressed by the words or conduct of a person other than the complainant
where the complainant is incapable of consenting to the activity
where the accused induces the complainant to engage in the activity by abusing a position of trust, power or authority
where the complainant expresses, by words or conduct, a lack of agreement to engage in the activity, or
where the complainant, having consented to engage in sexual activity, expresses, by words or conduct, a lack of agreement to continue to engage in the activity.\textsuperscript{212}

**Age of consent:** In 2008, the Canadian government passed the *Tackling Violent Crime Act*, which included an increase in the age of consent from 14 to 16.

**Close in age exceptions:**

- 12 and 13 year olds can consent to sexual activity with peers who are not more than two years older than themselves.
- 14 and 15 year olds can consent to sex with partners who are not more than five years older than themselves.

The age of consent is 18 for individuals to engage in sexual activity with a person who is in a position of trust or authority.\textsuperscript{213}

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### Manitoba Legislation

**Child and Family Services Act (CCSM, C C-80)**

The *Child and Family Services Act* has a number of provisions that relate to child and youth sexual exploitation. It is the first provincial legislation of this type to implement mandatory reporting requirements for child pornography (sexual abuse images) [S.1.1]. Relevant offence provisions of the act include: S 18.3 (applies to s 17, 18, 18.1) causing a child to be in need of protection, failing to report a child in need of protection or interfering with or harassing an informant; S 20(7) pertains to violating an order not to contact a child; S 38(6) pertains to obstructing a representative of a child and family services agency from entering a home to supervise a child under a court order; S 52 pertains to interference with children in care; and S 84 applies to the sale of children.\textsuperscript{214}

The act states that sexual exploitation of a child with or without consent is child abuse and that victims are in need of protection.

**Child Exploitation and Human Trafficking Act (CCSM C C-94)**

The *Child Sexual Exploitation and Human Trafficking Act* became legislation in 2012. “The law creates a protection order for victims of human trafficking. This means the perpetrator cannot have any contact with the victim. The act also provides for the victim to sue their perpetrator in civil law over the harm caused by their abuser’s actions.”\textsuperscript{215}

**Worker Recruitment and Protection Act (CCSM c 197)**

Manitoba’s *Worker Recruitment and Protection Act* was the first of its kind and has since been used as a model for other jurisdictions in Canada for its proactive approach to protecting vulnerable
workers. Mandatory licensing and permit requirements help prevent the sexual exploitation of child performers in the modeling and acting industry who are lured with promises of glamorous lifestyles, travel and money, and wage abuses and other exploitative practices of foreign workers by unscrupulous recruiters and employers.

The legislation ensures that individuals and agencies employing these vulnerable workers are regulated and monitored by the provincial government, and gives parents, employers, concerned citizens and workers access to information to ensure businesses are legitimate and reputable.

**Victim’s Bill of Rights**

Although most provinces and the federal government have passed legislation that protects the rights of victims to varying degrees, Manitoba is the only province with legislation that is sufficient to make victim’s rights enforceable. Intended to re-balance the justice system and “begin the process of ending the neglect of Manitoba victims by the justice system,” the Victims’ Bill of Rights establishes rights for victims of crime, including the right to be kept informed and consulted by justice officials, the right to compensation under certain circumstances, and the right to a complaints process in response to a breach.

This legislation is especially pertinent for victims of sexual assault, as it provides options in the event of a perceived issue with police, prosecutors, the courts and corrections officials. It also allows victims of sexual violence to be kept apprised of their case, and to be consulted on issues including bail, decisions on prosecution, and plea agreements, giving victims in the criminal justice system more input than any other jurisdiction in Canada.

**The Safer Communities and Neighbourhoods Act CCSM c S5**

The *Safer Communities and Neighbourhoods Act* is another Canadian first – legislation that holds property owners accountable for habitual activities that negatively affect the safety or security of one or more persons in the community, or that interfere with the peaceful enjoyment of one or more public or private properties in the community. Included herein are acts of sexual abuse and the sexual exploitation of women and youth. Property is defined within the act as a building and the land on which it is located, or land without a building.

To begin the process, one or more community members may file a confidential complaint with Manitoba’s director of law enforcement. The director has the discretion to launch an investigation, and if evidence of a violation is found, they may take one of several actions, including: delivering a warning letter to the property owner, resolving the problem through an out-of-court settlement, or applying for a Community Safety Order (CSO) or an Emergency Closure Order (ECO).

CSOs may involve specific instruction to prohibit tenants or property owners from engaging in specific activities, including terminating lease or rental agreements and closing the property for up to 90 days. Tenants who ignore such orders may incur a fine of up to $500. Anyone who defaces an order may face a fine of up to $2,500 in addition to a prison sentence of up to three months. Anyone who enters a building closed by either a CSO or ECO may face a fine of up to $5,000 in addition to a prison sentence of up to six months.
The Criminal Property Forfeiture Act CCSM c C306

The *Criminal Property Forfeiture Act* enables the Government of Manitoba to take ownership of property that was used to commit an unlawful activity, or obtained through an unlawful activity. This property includes buildings, land, and personal property such as automobiles and cash. These are civil proceedings and do not require criminal prosecutions. They are directed at property, not people, and do not create criminal records. Unlawful activity means any activity that is an offence under any Canadian or provincial law, or under a law in another jurisdiction (such as the United States) that would also be unlawful under Canadian or Manitoban law if the activity had occurred in Manitoba. This may include acts of sexual exploitation, sexual assault or criminal harassment.

Funds recovered from successful forfeitures are then used to compensate victims and promote safer communities, among other things.

MANITOBA POLICIES, PROGRAMS AND INITIATIVES

Tracia’s Trust: Manitoba's Sexual Exploitation Strategy

The Manitoba Strategy Responding to Children and Youth at Risk of, or Survivors of, Sexual Exploitation is a comprehensive counter sexual exploitation strategy launched by the Manitoba government in December 2002.

Phase three of the strategy, Tracia’s Trust, was launched in May, 2011. The third phase builds on the first two phases that implemented prevention initiatives, increased public awareness and developed a more comprehensive continuum for victims. The third phase involves the coordination of services for all ages, a focus on human trafficking, on offender accountability and on the creation of a code of conduct for businesses. For more information, please see the website: [http://www.gov.mb.ca/fs/traciastrust/](http://www.gov.mb.ca/fs/traciastrust/)

Community Notification Advisory Committee

The Community Notification Advisory Committee (CNAC) was the first program of its kind in Canada. CNAC reviews the cases of convicted sexual offenders who have been deemed at high risk of re-offending, and then informs the police whether a community warning is advisable.

The committee may choose to recommend a full provincial or a limited regional public notification, a targeted notification that is community-specific and does not involve the media, or to recommend that no notifications be given. The committee may also suggest that police take other steps, which include but are not limited to, police surveillance or applying for a court order to keep the offender from children. After this point, the police make the final decision about whether or not to implement CNAC’s decision.

CNAC is composed of individuals from both the justice and mental health systems who have expertise in the area, and includes representatives from the RCMP and local police services, justice officials and Manitoba Health.
CITY OF WINNIPEG POLICIES, PROGRAMS AND INITIATIVES

Block by Block: Community Safety Initiative

Launched in November 2013, Block By Block is an intensive and community-based initiative, coordinated across government and non-government service providers. It is intended to prevent individuals and families from falling into crises and conflicts with the law, including those involving domestic violence and sexual assault. The provincial government committed $600,000 for a three-year pilot project, within a 21-block neighbourhood in the William Whyte area. In addition to offering coordinated supports from existing agencies, ‘Block By Block’ will also identify where policies and programs need to change in order to reduce service barriers. The goal is not to create a new body, but to increase collaboration between government, community organizations, health services, police and schools. This approach is based on a successful model used in Prince Albert, Saskatchewan. Once evaluated at the close of the three-year term, the province will determine if the approach should be applied to other areas of Manitoba.

Winnipeg Police Service

The Winnipeg Police Service (WPS) aims to build safe and healthy communities across Winnipeg through excellence in law enforcement and leadership in crime prevention through social development. The WPS is a central figure in creating safe communities through crime prevention and through responding effectively to social disorder and criminal activity. The WPS works in concert with the Winnipeg Police Board (founded June 2013), a civilian oversight body designed to ensure that police services are delivered effectively, efficiently and in a manner consistent with community needs, values and expectations.

SEX CRIMES & COUNTER EXPLOITATION UNITS

The WPS Sex Crimes Unit is responsible for investigating sexual assaults involving victims aged 14 years and older, in certain specialised circumstances, including:

- cases where penetrative intercourse has occurred
- cases involving assault that is predatory, sadistic or serial in nature
- cases involving a weapon, threatened or implied
- cases involving sexual assault committed during the commission of another violent offence
- cases requiring Sex Crimes Unit expertise

Other sexual assaults are handled by general investigators in the divisions where the incident took place.

The Counter Exploitation Team is responsible for investigations that include cases involving human trafficking, street prostitution, escorts and massage parlours.

One key priority of the Counter Exploitation Unit is to ensure the safety of those who are involuntarily – directly or indirectly – impacted by sexual exploitation.
**Winnipeg Committee for Safety, City of Winnipeg**

The Winnipeg Committee for Safety (WCFS) is an advisory committee for Winnipeg City Council whose mandate is to support, assist, stimulate and mobilize the community. It is comprised of volunteer citizens who offer diverse and passionate perspectives on issues relating to the safety of Winnipeg citizens. The WCFS is mandated to advise the Mayor of Winnipeg and City Council on safety issues as they impact Winnipeg’s policies, procedures and services. The WCFS’ ongoing role is to provide information, formulate recommendations and monitor progress regarding safety issues within our communities. The Committee meets monthly and reports to the Executive Policy Committee.

**COMMUNITY PROGRAMS AND INITIATIVES**

**Sexual Assault Program (Health Sciences Centre)**

The Sexual Assault Nurse Examiner program (SANE) is housed at the Health Sciences Centre in downtown Winnipeg, and was developed exclusively for victims/survivors of sexual violence. As one of the first programs of its kind in Canada, their mandate is to offer treatment and services to survivors of sexual violence within the first 120 hours following an incident.

In advance of practicing in the SANE program, SANE nurses receive both theoretical and clinical training. Treatment and services are offered within the privacy of a self-contained suite, where nurses work in collaboration with volunteer advocates from Klinic Community Health Centre, who provide support. Following a visit, access to ongoing counselling for survivors is available through Klinic, and does not come with any monetary cost.

**Klinic Community Health Centre**

Klinic Community Health is an organization that offers medical care, counselling and community health and education services, serving its geographic community, Winnipeg and Manitoba residents. Klinic operates the Sexual Assault Crisis Program which provides sexual-violence related services, including counselling, and accompanying survivors of sexual violence to the hospital. Klinic also provides public education and training services on sexual assault, sexual harassment and dating violence to community groups and service providers. Klinic operates several crisis phone line related services including the 24-hour Sexual Assault Crisis Line and the 24-hour Trafficked Persons Response Line. The Sexual Assault Crisis Program serves more than 2,000 women each year. Representatives from Klinic are community stakeholders within Sites One and Two of the Winnipeg Safe City Program.

In addition, Klinic offers the Teen Talk Program, which provides health education to youth throughout Manitoba. Services are provided from a harm reduction, prevention education perspective. The program focuses on sexuality, reproductive health, body image, substance use awareness, mental health, issues of diversity and anti-violence issues (healthy relationships, dating violence, consent). Klinic adheres to the belief that by providing youth with accurate, non-judgmental information they can make healthier decisions and choices for themselves.
Ka Ni Kanichihk

Ka Ni Kanichihk is a registered non-profit organization that provides Indigenous-led programs, which are designed with a foundational principle of strengthening the local community. Program designs integrate spirituality and Indigenous identity, and are targeted mainly for Indigenous women, children and youth. Initiatives include culturally-appropriate continuing education, safer sex workshops, peer mentorship, vocational training and work experience courses, childcare and counselling services. Ka Ni Kanichihk works closely with Manitoba Status of Women and other government agencies to deliver these much needed Indigenous-led services to the community. The organization is one community stakeholder within the Winnipeg Safe City Program, and members sit on the steering committee.

Hollaback!

Hollaback! is a global movement dedicated to ending women’s experiences of street harassment. The movement began as a blog in 2005, and the Winnipeg chapter was founded by Jodie Layne in 2012. The global movement provides a vehicle through which women can choose to confront their harassers safely by anonymously sharing experiences online, simultaneously increasing the visibility of street harassment to the general public. Hollaback! partners with various organizations and associations to produce research into street harassment across a variety of platforms. Recent work includes a viral video with over 35,000,000 views (as of November 2014) that exposed the extent to which women in New York City experience street harassment, as well as a more formal publication outlining the legality of street harassment within multiple jurisdictions, including Manitoba. Winnipeg-specific initiatives included their locally-produced research on women’s experiences of street harassment provided to Manitoba Status of Women, and included in this scoping report.

The Peg

The Peg (mypeg.ca) is a community indicators system, designed to track numerous quality of life indicators in Winnipeg, including: basic needs, health, education, built and human environments, and the economy. Personal safety is included under the social vitality indicator. Using interconnected maps of various issues, it creates visual connections between personal safety and poverty, perceptions of safety, neighbourliness and personal belonging. It lacks gendered, racialized or other diversity lenses. Jointly funded by the City of Winnipeg, the Province of Manitoba, the Winnipeg Regional Health Authority and the United Way of Winnipeg, the Peg is designed to provide citizens with a central source for tracking information and municipal health.

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5 Hollaback! Winnipeg chapter was operational from 2012-2015.
APPENDIX B: INTERVENTION SITE DEMOGRAPHICS

2011 Statistics Canada Census Profiles for the neighbourhoods that include the intervention site. Please note: the intervention area described here is a larger area than the Winnipeg Safe City area – please see Appendix C for a map comparing the two regions.

<table>
<thead>
<tr>
<th></th>
<th>West Alexander(^1)</th>
<th>Spence(^2)</th>
<th>Central Park &amp; Portage Ellice(^3)</th>
<th>South Portage(^4)</th>
<th>Intervention Area (Total)</th>
<th>Winnipeg CMA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population (f)</td>
<td>7,845</td>
<td>4,515</td>
<td>5,235</td>
<td>7,035</td>
<td>24,270</td>
<td>730,020</td>
</tr>
<tr>
<td></td>
<td>3,700 (49%)</td>
<td>2,130 (47%)</td>
<td>2,595 (50%)</td>
<td>3,335 (47%)</td>
<td>11,760 (48%)</td>
<td>374,065 (51%)</td>
</tr>
<tr>
<td>Land area ((\text{km}^2))</td>
<td>6.2 (\text{km}^2)</td>
<td>0.6 (\text{km}^2)</td>
<td>0.4 (\text{km}^2)</td>
<td>1.7 (\text{km}^2)</td>
<td>8.9 (\text{km}^2)</td>
<td>5,303.1 (\text{km}^2)</td>
</tr>
<tr>
<td>Population density ((\text{per km}^2))</td>
<td>1,208.86 (\text{pop/ km}^2)</td>
<td>7,957.7 (\text{pop/ km}^2)</td>
<td>12,003.2 (\text{pop/ km}^2)</td>
<td>4,186.9 (\text{pop/ km}^2)</td>
<td>2,731.99 (\text{pop/ km}^2)</td>
<td>137.7 (\text{pop/ km}^2)</td>
</tr>
</tbody>
</table>

**Population & Geography:** 3.3% of the population of Winnipeg lives in the area; less than 1% of the total land area; significantly higher density.

**Age Characteristics:** younger population, particularly young female population (median age almost 7 years younger than for the city).

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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>% of population 14 and under</td>
<td>22.91%</td>
<td>20.2%</td>
<td>16.9%</td>
<td>4.8%</td>
<td>15.8%</td>
<td>17.1%</td>
</tr>
<tr>
<td>% of population 15-24</td>
<td>14.9%</td>
<td>16.3%</td>
<td>11.9%</td>
<td>12.2%</td>
<td>13.7%</td>
<td>14.0%</td>
</tr>
<tr>
<td>% of population 25-34</td>
<td>14.5%</td>
<td>17.6%</td>
<td>18.2%</td>
<td>27.7%</td>
<td>19.7%</td>
<td>13.5%</td>
</tr>
<tr>
<td>% of population 35-44</td>
<td>13.6%</td>
<td>14.6%</td>
<td>14.9%</td>
<td>14.1%</td>
<td>14.2%</td>
<td>7.2%</td>
</tr>
<tr>
<td>% of population 45-54</td>
<td>14.4%</td>
<td>14.3%</td>
<td>12.3%</td>
<td>14.4%</td>
<td>13.9%</td>
<td>15.5%</td>
</tr>
</tbody>
</table>

\(^1\) Census tracts: 6020025.00, 6020026.00, 6020027.00 and 6020033.00 (extends beyond the boundaries of West Alexander)

\(^2\) Census tract 6020022.00 (includes Colony, the area around University of Winnipeg)

\(^3\) Census tract 6020023.00 (includes both Central Park and Portage Ellice)

\(^4\) Census tract 6020013.00 and 6020014.00 (includes a small area near Memorial park and extends further west, including the Forks and some of Waterfront Drive)
<table>
<thead>
<tr>
<th>% of population 55-64</th>
<th>10.0%</th>
<th>10.2%</th>
<th>9.3%</th>
<th>12.4%</th>
<th>10.6%</th>
<th>12.6%</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of population 65 and older</td>
<td>10.0%</td>
<td>6.8%</td>
<td>16.8%</td>
<td>14.8%</td>
<td>12.2%</td>
<td>14.1%</td>
</tr>
<tr>
<td>Median age</td>
<td>33.6</td>
<td>32.4</td>
<td>36.7</td>
<td>48.3</td>
<td>35.2</td>
<td>39.2</td>
</tr>
<tr>
<td>Median age (f)</td>
<td>31.55</td>
<td>31.4</td>
<td>37.3</td>
<td>36.3</td>
<td>33.9</td>
<td>40.3</td>
</tr>
</tbody>
</table>

**Marital Status:** greater percentage of the population is not married or living with a common law partner

<table>
<thead>
<tr>
<th>% of population married or living with common law partner</th>
<th>39.6%</th>
<th>34.6%</th>
<th>37.1%</th>
<th>29.6%</th>
<th>34.9%</th>
<th>55.0%</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of population married or living with common law partner (female)</td>
<td>40.0%</td>
<td>35.4%</td>
<td>36.1%</td>
<td>30.4%</td>
<td>35.3%</td>
<td>53.1%</td>
</tr>
</tbody>
</table>

**Family Characteristics:** Greater percentage of census families are lone-parent families, of those a greater percentage are headed by a female

<table>
<thead>
<tr>
<th>% of census families that are couple families</th>
<th>61.6%</th>
<th>58.7%</th>
<th>66.4%</th>
<th>82.4%</th>
<th>66.9%</th>
<th>82.0%</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of census families that are lone-parent families</td>
<td>36.3%</td>
<td>41.4%</td>
<td>33.7%</td>
<td>18.0%</td>
<td>32.5%</td>
<td>18.0%</td>
</tr>
<tr>
<td>% of lone-parent families headed by a female</td>
<td>82.4%</td>
<td>83.5%</td>
<td>87.1%</td>
<td>77.5%</td>
<td>83.1%</td>
<td>79.4%</td>
</tr>
<tr>
<td>% of census families that are female lone-parent families</td>
<td>48.5%</td>
<td>34.6%</td>
<td>29.3%</td>
<td>14.0%</td>
<td>27.0%</td>
<td>14.3%</td>
</tr>
</tbody>
</table>
**Detailed Mother Tongue (single responses):** A greater percentage of people living in the area identified a language other than English or French as their mother tongue (40.7% to 22.0%), this is true for women as well as men (for women the breakdown is 42.3% of those living in the intervention area and 22.5% in Winnipeg).

<table>
<thead>
<tr>
<th>Language Type</th>
<th>% English</th>
<th>% English (f)</th>
<th>% French</th>
<th>% French (f)</th>
<th>% Non-official language</th>
<th>% Non-official language (f)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>52.3%</td>
<td>55.1%</td>
<td>48.1%</td>
<td>68.7%</td>
<td>58.9%</td>
<td>74.1%</td>
</tr>
<tr>
<td></td>
<td>52.1%</td>
<td>54.9%</td>
<td>46.9%</td>
<td>66.3%</td>
<td>55.3%</td>
<td>73.4%</td>
</tr>
<tr>
<td></td>
<td>1.6%</td>
<td>1.7%</td>
<td>2.3%</td>
<td>4.1%</td>
<td>2.5%</td>
<td>3.9%</td>
</tr>
<tr>
<td></td>
<td>1.0%</td>
<td>1.3%</td>
<td>2.0%</td>
<td>4.2%</td>
<td>2.2%</td>
<td>4.1%</td>
</tr>
<tr>
<td></td>
<td>46.2%</td>
<td>43.6%</td>
<td>49.4%</td>
<td>27.1%</td>
<td>40.7%</td>
<td>22.0%</td>
</tr>
<tr>
<td></td>
<td>47.5%</td>
<td>43.9%</td>
<td>50.8%</td>
<td>29.2%</td>
<td>42.3%</td>
<td>22.5%</td>
</tr>
</tbody>
</table>

**Mother Tongue - Select Aboriginal Languages:** A greater percentage of people living in the intervention identified an Aboriginal language as their mother tongue than the population in Winnipeg (2.5% compared to 0.5%) for women the breakdown was 2.9% of women living in the area and 0.6% of those living in Winnipeg.

<table>
<thead>
<tr>
<th>Language Type</th>
<th>% Select Aboriginal language</th>
<th>% Aboriginal language (f)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3.2%</td>
<td>3.6%</td>
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<tr>
<td></td>
<td>4.4%</td>
<td>5.0%</td>
</tr>
<tr>
<td></td>
<td>1.3%</td>
<td>1.8%</td>
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<tr>
<td></td>
<td>1.4%</td>
<td>1.6%</td>
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<tr>
<td></td>
<td>2.5%</td>
<td>2.9%</td>
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<tr>
<td></td>
<td>0.5%</td>
<td>0.6%</td>
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</tbody>
</table>

**Mother Tongue - Most common Aboriginal languages selected:** Most common 3 Aboriginal languages spoken most often at home are the same in the intervention area as Winnipeg CMA (Ojibway, Cree and Oji-Cree).

<table>
<thead>
<tr>
<th>Language Type</th>
<th>% of Aboriginal languages selected: Ojibway (selected by females)</th>
<th>% of Aboriginal languages selected: Cree (selected by females)</th>
<th>% of Aboriginal languages selected: Oji-Cree (selected by females)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>57.8% 40.5% 33.3%</td>
<td>31.6% 24.4% 35.1%</td>
<td>15.6% 21.6% 8.3%</td>
</tr>
<tr>
<td></td>
<td>56.0% 35.0% 37.5%</td>
<td>32.3% 24.0% 45.0%</td>
<td>16.0% 20.0% 0.0%</td>
</tr>
<tr>
<td></td>
<td>27.8% 20.0% 50.0%</td>
<td>58.3% 50.0% 32.3%</td>
<td>22.2% 20.0% 15.9%</td>
</tr>
<tr>
<td></td>
<td>44.6% 41.3% 45.6%</td>
<td>55.6% 50.0% 32.3%</td>
<td>17.9% 15.9% 19.1%</td>
</tr>
<tr>
<td>Mother Tongue - Select Non-Aboriginal Languages</td>
<td></td>
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<td>-----------------------------------------------</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>% Select non-Aboriginal language</td>
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<td></td>
</tr>
<tr>
<td>% Select non-Aboriginal language (f)</td>
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<tr>
<td>42.5%</td>
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<td></td>
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<tr>
<td>43.2%</td>
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<td>38.1%</td>
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<td>37.3%</td>
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<td>38.6%</td>
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<tr>
<td>21.6%</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Mother Tongue - Most common non-Aboriginal languages selected (most common in the intervention area)</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of non-Aboriginal languages selected: Tagalog (% selected by females)</td>
</tr>
<tr>
<td>30.1%</td>
</tr>
<tr>
<td>32.5%</td>
</tr>
<tr>
<td>24.9%</td>
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<tr>
<td>30.2%</td>
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<tr>
<td>32.9%</td>
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<tr>
<td>35.5%</td>
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<tr>
<td>11.9%</td>
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<tr>
<td>13.2%</td>
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<tr>
<td>26.4%</td>
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<tr>
<td>29.0%</td>
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<tr>
<td>22.0%</td>
</tr>
<tr>
<td>22.5%</td>
</tr>
<tr>
<td>% of non-Aboriginal languages selected: Chinese (% selected by females)</td>
</tr>
<tr>
<td>11.9%</td>
</tr>
<tr>
<td>11.9%</td>
</tr>
<tr>
<td>6.2%</td>
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<tr>
<td>6.0%</td>
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<tr>
<td>5.0%</td>
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<tr>
<td>4.2%</td>
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<tr>
<td>6.3%</td>
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<td>6.6%</td>
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<tr>
<td>7.9%</td>
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<tr>
<td>7.7%</td>
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<tr>
<td>4.3%</td>
</tr>
<tr>
<td>4.1%</td>
</tr>
<tr>
<td>% of non-Aboriginal languages selected: Amharic (% selected by females)</td>
</tr>
<tr>
<td>1.2%</td>
</tr>
<tr>
<td>3.0%</td>
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<tr>
<td>4.0%</td>
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<tr>
<td>4.0%</td>
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<tr>
<td>7.6%</td>
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<tr>
<td>7.9%</td>
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<tr>
<td>9.9%</td>
</tr>
<tr>
<td>9.0%</td>
</tr>
<tr>
<td>5.1%</td>
</tr>
<tr>
<td>5.0%</td>
</tr>
<tr>
<td>0.8%</td>
</tr>
<tr>
<td>0.1%</td>
</tr>
<tr>
<td>% of non-Aboriginal languages selected: Portuguese (% selected by females)</td>
</tr>
<tr>
<td>10.0%</td>
</tr>
<tr>
<td>9.6%</td>
</tr>
<tr>
<td>4.4%</td>
</tr>
<tr>
<td>3.4%</td>
</tr>
<tr>
<td>0.7%</td>
</tr>
<tr>
<td>0.9%</td>
</tr>
<tr>
<td>2.1%</td>
</tr>
<tr>
<td>1.8%</td>
</tr>
<tr>
<td>5.0%</td>
</tr>
<tr>
<td>4.7%</td>
</tr>
<tr>
<td>3.9%</td>
</tr>
<tr>
<td>3.8%</td>
</tr>
</tbody>
</table>

* The most common language (mother tongue) in Winnipeg: Tagalog (22.0% of non-Aboriginal languages selected; 22.5% of non-Aboriginal languages selected by females), German (13.7% and 7.0% respectively), followed by Ukrainian (7.0% and 7.8%) and Panjabi (6.3% and 5.9%).
Details Language Spoken Most Often at Home (single responses): A greater percentage of people living in the intervention area speak an unofficial language most often at home (a language other than French or English): 27.6% compared to 10.5% (and 28.9% of women living in the area compared to 10.7% of women living in Winnipeg).

<table>
<thead>
<tr>
<th>Language Spoken Most Often at Home</th>
<th>Winnipeg</th>
<th>Intervention Area</th>
<th>Women in Intervention Area</th>
<th>Women in Winnipeg</th>
</tr>
</thead>
<tbody>
<tr>
<td>% English</td>
<td>65.9%</td>
<td>62.9%</td>
<td>84.3%</td>
<td>71.4%</td>
</tr>
<tr>
<td>% English (f)</td>
<td>63.4%</td>
<td>62.1%</td>
<td>82.5%</td>
<td>69.7%</td>
</tr>
<tr>
<td>% French</td>
<td>0.5%</td>
<td>1.3%</td>
<td>1.7%</td>
<td>1.1%</td>
</tr>
<tr>
<td>% French (f)</td>
<td>0.5%</td>
<td>1.4%</td>
<td>1.8%</td>
<td>1.1%</td>
</tr>
<tr>
<td>% Non-official language</td>
<td>33.7%</td>
<td>35.9%</td>
<td>14.0%</td>
<td>27.6%</td>
</tr>
<tr>
<td>% Non-official language (f)</td>
<td>35.9%</td>
<td>36.4%</td>
<td>15.3%</td>
<td>28.9%</td>
</tr>
</tbody>
</table>

Language Spoken Most Often At Home - Select Aboriginal Languages: A greater percentage of people living in the intervention area speak a select Aboriginal language most often at home than in the city population.

<table>
<thead>
<tr>
<th>Select Aboriginal language</th>
<th>Winnipeg</th>
<th>Intervention Area</th>
<th>Women in Intervention Area</th>
<th>Women in Winnipeg</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Select Aboriginal language</td>
<td>0.9%</td>
<td>0.6%</td>
<td>0.4%</td>
<td>0.8%</td>
</tr>
<tr>
<td>% Select Aboriginal language (f)</td>
<td>0.9%</td>
<td>0.7%</td>
<td>0.7%</td>
<td>0.9%</td>
</tr>
</tbody>
</table>

Language Spoken Most Often At Home - Most common Aboriginal languages: Most common 3 Aboriginal languages spoken most often at home are the same in the intervention area as Winnipeg CMA (Ojibway, Cree, Oji-Cree).

<table>
<thead>
<tr>
<th>Most common Aboriginal languages</th>
<th>Winnipeg</th>
<th>Intervention Area</th>
<th>Women in Intervention Area</th>
<th>Women in Winnipeg</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of Aboriginal languages selected: Ojibway (% selected by females)</td>
<td>41.7%</td>
<td>50.0%</td>
<td>0.0%</td>
<td>36.8%</td>
</tr>
<tr>
<td>% of Aboriginal languages selected: Cree (% selected by females)</td>
<td>25.0%</td>
<td>16.7%</td>
<td>50.0%</td>
<td>36.8%</td>
</tr>
<tr>
<td>% of Aboriginal languages selected: Oji-Cree (% selected by females)</td>
<td>25%</td>
<td>16.7%</td>
<td>0.0%</td>
<td>26.5%</td>
</tr>
</tbody>
</table>

*The other 50% Is not identified in Census Profile*
The most common language (language spoken most often at home) in Winnipeg: Tagalog (25.3% of non-Aboriginal languages selected; 25.9% of non-Aboriginal languages selected by females), Panjabi (10.0% and 9.5% respectively), Chinese (6.5% and 6.3%) followed by German (5.6% and 5.8%).
APPENDIX C: MAPS

INTERVENTION AREAS

Figure 6: Intervention Area: Sites 1 and 2 – CrimeStat boundaries (Winnipeg Police Service)

WINNIPEG CENTRE (FEDERAL ELECTORAL DISTRICT)

Figure 7: Intervention Area (comparison with Winnipeg Centre/District 1)

Figure 8: Winnipeg Centre or District 1
CENSUS PROFILE NEIGHBOURHOODS

Figure 9: Map of Statistics Canada Census Tracts (encompass intervention area)

Notes:

West Alexander (blue): The Winnipeg Safe City boundaries (from Winnipeg Police Service, CrimeStat) are shaded in light blue. Statistics Canada Census profiles for the area encompasses three Census Tract areas, and extends further North (shaded in dark blue).

Spence (red): The Winnipeg Safe City boundaries (from Winnipeg Police Service, CrimeStat) are shaded in light red. Statistics Canada Census profiles for the area encompasses one Census Tract area, and includes an additional pocket on the south east corner (the University of Winnipeg)

South Portage (brown): The Winnipeg Safe City boundaries (from Winnipeg Police Service, CrimeStat) are shaded in light brown. Statistics Canada Census profiles for the area encompasses two Census Tract areas, and includes a small area to the south west (near Memorial Park) and to the East and South East (some of Waterfront Drive, the Canadian Museum for Human Rights and the Forks). These areas are not heavily residential areas, and the difference in boundaries likely has little effect on the population demographics.
NOTES


3 Definition provided by Province of Manitoba Multiculturalism Secretariat (July, 2016).


27 Ibid.


*Ibid* at 9


*Ibid* at 108.

*Ibid* at 111.


*Ibid*.


*Ibid*.


*Ibid* at 1.


Benoit, C et al. (2015), *supra* note 27.

DAWN Canada. (n.d.) *supra* note 84.


Ibid.


Ibid.


Perreault, S. (2015), *supra* note 27 at 18


Statistics Canada. Table 051-0001 - Estimates of population, by age group and sex for July 1, Canada, provinces and territories, annual (persons unless otherwise noted), CANSIM (database). (accessed: July 6, 2016)


Ibid.

Ibid.


Ibid.

Ibid.


Ibid at 52-54.


Statistics Canada. Table 252-0051, supra note 138.

Ibid.


Ibid.

Ibid at 18


Ibid.


Ibid.

Statistics Canada. Table 051-0059, supra note 152.

Ibid.


Ibid.


Ibid.

Ibid.

Ibid.


Ibid.


Ibid.


Ibid.

Statistics Canada. Table 115-0001 - Prevalence of disability for adults, by sex and age group, Canada, provinces and territories, occasional (number unless otherwise noted), CANSIM (database). (accessed: 2014-06-30)
184 Statistics Canada. Table 252-0051, supra note 138.
185 Ibid.
186 Perreault, S. (2015), supra note 27 at 32.
190 Ibid.
191 Ibid.
192 See for example: Canadian Women’s Foundation Task Force on Trafficking of Women and Girls in Canada. (2014), supra note 74; Government of Manitoba. (2006), supra note 188.
194 Ibid at 209.
195 Ibid at 208.
198 Statistics Canada. 2012. 6020027.00, Manitoba (Code 6020027.00; 6020026.00; 6020025.00; 6020023.00; 6020023.00; 6020013.00; 6020014.00) and Winnipeg, Manitoba (Code 602) (table). Census.
200 Ibid at 4.


211 Ibid.

212 Ibid.

213 Sex Information and Education Council of Canada. (2015, February), supra note 211.


218 The Safer Communities and Neighbourhoods Act. CCSM c S5. At S1(2).

219 Ibid at S 1(1).

220 The Criminal Property Forfeiture Act, CCSM c C306 at s 1.

221 The Criminal Property Forfeiture Act, CCSM c C306.


