

What We Heard

Results of Engagement on
Expanding Sexualized Assault
Response Team (SART) Services
to Rural Yukon Communities

**Prepared by Rumsey Consulting
on behalf of the Government of Yukon**

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RUMSEY CONSULTING



Acknowledgements

We would like to thank victims and their family members, Yukon First Nations, community service providers, Knowledge Keepers, and Elders from Yukon communities, who provided valuable insights by participating in the engagement. Your contributions have been instrumental in shaping this project and future pathways. Your voices have not only enriched our understanding but have also highlighted the significance and importance of addressing sexualized violence in Yukon communities. We are deeply grateful for the trust and openness you have shown us.

Content warning

This report contains information that may be emotionally distressing or triggering for some readers. Content includes discussions of sexualized assault, residential schools, and historic and intergenerational trauma.

For immediate and confidential assistance please contact:

Sexualized Assault Support (SAS) Line

1-844-967-7275

The SAS Line is a Yukon-based line available 24 hours a day, 7 days a week.
sartyukon.ca/en/

Hope for Wellness Help Line

1-855-242-3310 or hopeforwellness.ca

For immediate mental health counselling and crisis intervention for Indigenous Peoples.
Available 24 hours a day, 7 days a week.

Canada Suicide Prevention Helpline

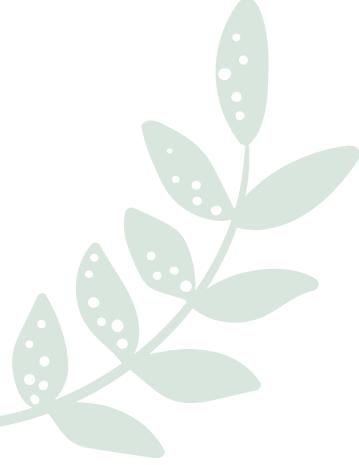
Call or text 988 if you or someone you know is in immediate crisis or has suicide-related concerns.
Available 24 hours a day, 7 days a week.

Kids Help Phone

Call 1-800-668-6868 or text the word “CONNECT” to 686868

Free, confidential support to young people kidshelpphone.ca

Available 24 hours a day, 7 days a week.



Contents

Executive Summary	5
Introduction	10
Background	10
SART overview	10
Disclaimer	11
Methodology	12
Rumsey Consulting & New Territory Consulting	13
Approach	13
Engagement and outreach	13
Trauma-informed	13
Participants	14
Interviews	14
Focus groups	14
Community participation	14
Thematic coding of results	15
Limitations	15
Disclaimer	16
IPSOS & SISCO	16
Synopsis of engagement	16
Fieldwork	17
Engagement outreach	17
Approach	18
Online engagement hub	18
In-person engagements	20
Honoraria	20
Engagement with children and youth	20
Limitations	21
What We Asked	22
What We Heard: Summary of Themed Feedback	23
Level of awareness of services available	23

Limited knowledge of how to access services in communities	23
Limited awareness of sexualized assault	24
Available resources	24
Limited supports and resources available for child and youth victims	24
RCMP, Community Nursing, and the First Nation are the core community supports	24
What is working well	25
Trusted and familiar staff	25
Community cohesion and collaboration	25
Therapeutic supports and resources	26
Increasing awareness, interest, and engagement	26
Improved service availability	26
Initiatives aimed at prevention	26
Barriers and challenges to accessing supports	27
Fear	27
Stigma and shame	27
Lack of confidentiality in communities	28
Lasting impacts of colonialism and residential schools negatively influence how sexualized violence is addressed	28
Mistrust and systemic racism within institutions	29
Justice system failures	29
Victims will self-medicate with alcohol and drugs	30
Lack of mental health supports and resources	30
Inadequate victim supports for Indigenous victims	31
High vacancies and turnover among essential staff positions in communities	31
Limited transportation options	32
No safe spaces for victims and inadequate infrastructure	32
Lack of trauma-informed and cultural safety training among professionals	33
Sexual Assault Evidence Kits are typically only offered in Yukon hospitals	33
Options to better support victims	33
Increased awareness of resources and services for victims of sexualized violence	34
Prevention strategies	34

Cultural supports and land-based healing	34
Trauma-informed training for service providers and volunteers	35
More service delivery options to meet the individual needs of victims	35
Familiar and trusted staff	36
Collaboration to expand service coverage	36
Improved transportation options to and from communities	36
More safe spaces and options	37
Training and policy guidance on performing Sexual Assault Evidence Kits	37
Conclusion	38
Appendix	
Final metrics for the SART expansion engagement social media campaign	39



Executive Summary

The Government of Yukon, Department of Justice, Department of Health and Social Services and the Women and Gender Equity Directorate are actively working with partner agencies to expand Sexualized Assault Response Team (SART) services beyond Whitehorse into Yukon communities. To facilitate this expansion, Rumsey Consulting, in partnership with New Territory Consulting, were contracted to conduct engagement with Yukon First Nations governments and organizations, and service providers. IPSOS and SISCO & Associates Consulting Services Inc. (SISCO) were also contracted to conduct engagement with victims of sexualized violence under the campaign titled Your Voice Matters. This report combines the results from both engagement initiatives.

Engagement purpose

The purpose of both engagement initiatives was to:

1. Understand the awareness and knowledge regarding available services for sexualized assault victims.
2. Identify the most effective elements of existing resources and supports and understand the barriers to access.
3. Learn why some victims may choose to not seek services and support.
4. Understand the constraints and regional factors impacting the design and delivery of SART services in rural Yukon communities.
5. Gather input from victims, Yukon First Nations governments and organizations, and service providers on how services can be improved to better meet the needs of victims of sexualized violence in Yukon communities.

Methodology

In total, 244 individuals from 14 Yukon communities participated in the engagement. Participants included victims of sexualized violence and their families, representatives from diverse service sectors such as first responders, Indigenous service providers, non-profit service operators, women's transition homes, Yukon First Nations governments, federal agencies, and several territorial government departments.

Researchers from each firm conducted a series of in-person, online, telephone, and virtual engagement sessions with participants from the following communities:

- Beaver Creek – White River First Nation
- Burwash Landing – Kluane First Nation
- Carcross – Carcross/Tagish First Nation
- Carmacks – Little Salmon/Carmacks First Nation
- Dawson City – Tr'ondëk Hwëch'in

- Faro – Ross River Dena Council
- Haines Junction – Champagne and Aishihik First Nations
- Mayo – First Nation of Na-Cho Nyak Dun
- Old Crow – Vuntut Gwitchin First Nation
- Pelly Crossing – Selkirk First Nation
- Ross River – Ross River Dena Council
- Teslin – Teslin Tlingit Council
- Watson Lake – Liard First Nation
- Whitehorse – Kwanlin Dün First Nation and Ta'an Kwäch'än Council

Rumsey Consulting & New Territory Consulting: **Engagement of Yukon First Nations Governments and Organizations, and Service Providers**

Over a six-week period in May and June of 2023, 51 engagement sessions were conducted with 121 participants across the Yukon representing diverse service sectors such as first responders, Indigenous service providers, non-profit service operators, women's transition homes, Yukon First Nations governments, federal agencies, and several territorial government departments. Participants engaged were from 13 rural Yukon communities. Whitehorse-based organizations that represented or provided services to rural communities were also invited to participate.

A total of 38 interviews (two participants or less) and 13 focus groups (three or more participants) were conducted to gather feedback and insights on how to best support victims of sexualized violence through the expansion of SART into communities.

Ipsos and Cisco: **Engagement of Victims of Sexualized Violence**

Throughout the month of August 2023, a total of 123 people from 13 Yukon communities participated in the Your Voice Matters initiative. Forty-two victims of sexualized assault, and in some cases, family members participated in sharing circles within their communities. An additional 11 persons participated in phone interviews and in-person interviews. Eighty participants logged into the online hub and 69 completed the questionnaire, with one individual only completing half of the survey.

Limitations

It is important to acknowledge that while overall engagement levels between both engagement projects were strong, there were factors that may have influenced the generalizability and depth of the findings. These limitations included: small participant sample sizes in some communities; a narrow consultation timeframe; limited participation in crisis-affected communities; community priorities during the summer months; staff vacancies in key positions; and informed consent for youth under the age of 19 to participate without parental consent.

Key findings

The findings presented are the results of the engagement with all participants.

Level of awareness

- Most victims, First Nations government staff and community service providers have very little familiarity with SART or other resources available to victims, how to access these resources, or how to support someone to access them.
- Participants highlighted a critical gap in awareness and understanding of sexualized assault in their community. There is an urgent need for comprehensive awareness and heightened outreach efforts to ensure clarity on sexualized assault signs, implications, and available support.

Available resources

- There are a lack of dedicated positions and trained staff to support child and youth victims, due to high vacancies in roles such as school counsellors, regional social workers, and child and youth mental wellness workers.
- In smaller communities, the RCMP, Community Nursing, and the First Nation were identified as the core resources available to victims of sexualized violence. Limited resources and inconsistent availability of Victim Services workers, Indigenous supports, counsellors, and regional social workers pose challenges for victims to access comprehensive support.

What is working well

- Trusted and familiar staff in communities can create a comfortable and safe environment for victims to disclose their experiences and seek assistance. The presence of staff members who have lived and/or worked in the community for extended periods fosters trust and reassurance, increasing the likelihood of victims accessing help.
- Communities unite during times of crisis, showcasing strength and resilience. In some communities, there are collaborative working relationships between many community members, service providers, RCMP, and First Nations creating opportunities to build strong circles of care for victims.
- Therapeutic supports provided by counselling staff in communities are highly valued. Counselling and support services offered through Mental Wellness and Substance Use Services and those contracted by the First Nations were seen as invaluable resources supporting victims with long-term recovery after experiencing sexualized violence. However, there are not enough of these resources available.
- Some communities are actively engaged in prevention initiatives, with a focus on awareness, cultivating a shift in attitudes towards sexualized violence.
- Resources and comprehensive care are more readily available in larger centres like Dawson and Watson Lake, including hospitals, in-community Victim Services staff, Mental Wellness and Substance Use Services staff, and women's shelters.
- Service providers, First Nations, and victims are eager to address the issue of sexualized violence and all participants praise efforts to expand SART into communities.

- There have been service delivery improvements such as trained physicians for Sexual Assault Evidence Collection Kits (Kits), Mental Wellness and Substance Use Services hubs, and the 24/7 Sexualized Assault Support Line (SAS) line available in communities.

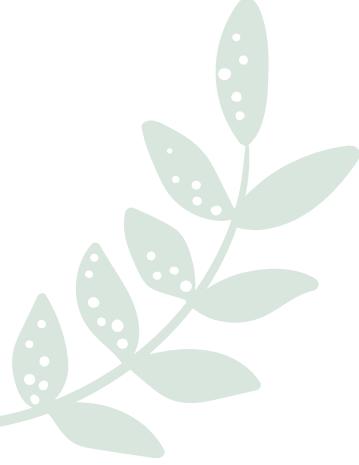
Barriers and challenges to accessing services

- Fear and stigma are prevalent barriers that prevent victims from accessing services or support. There are very tangible concerns surrounding repercussions, reputational damage, or not being believed within small communities. Individuals are often well-known to one another, and situations arise where the perpetrator may be a respected community member or family member.
- A lack of confidentiality is a crucial barrier for victims seeking assistance in small communities, where familiarity among service providers or community members exacerbates fears of exposure, judgment, or retaliation. This concern is heightened by the potential for victims and perpetrators to access the same resources, leading to possible conflicts of interest and further discouraging victims from seeking vital support and services.
- The enduring impacts of colonization and historical trauma including from residential schools continues to negatively influence how sexualized violence is addressed within Indigenous communities. Many Indigenous victims struggle to obtain adequate psychological and emotional support to address the harm.
- Racial bias and discrimination, especially in health care, amplify victims' vulnerability, often acting as a deterrent. The lack of Indigenous representation within these systems also exacerbates feelings of alienation. Persistent mistrust, notably towards the Yukon government and RCMP, underscores the urgent need for genuine, culturally sensitive changes to support Indigenous communities effectively.
- Victims are reluctant to engage with the justice system due to potential re-traumatization, poor treatment, and a significant lack of confidence that the system will yield fair and just outcomes.
- Victims may turn to substances as a means to cope with the trauma of experiencing sexualized violence.
- There is a lack of consistent therapeutic supports available for victims in communities and victims feel the lack of mental health resources places an emotional burden on victims and their families.
- There are inadequate supports for Indigenous victims and survivors, especially for those who endured sexual abuse during residential schools.
- There is inadequate trauma-informed, and culturally safe training among various professionals including community health care providers, RCMP members, lawyers, and volunteers in remote communities. This gap in specialized training, coupled with limited experience in engaging with Indigenous communities, magnifies the risk of re-traumatization for victims seeking support.
- Limited transportation options to larger centres poses significant challenges for victims. Victims are hesitant to seek services if it involves coordinating and enduring a long journey from their home community and/or financial barriers for accommodations and return transportation.
- There are no safe spaces, emergency shelters, or safe houses for victims in most communities, heightening the sense of fear and vulnerability for victims. The shortage of safe shelter options in communities forces individuals into precarious situations where personal safety may be compromised.

- High staff vacancies among essential positions, such as social workers, nurses, and mental health supports, result in diminished or completely unavailable support for victims in certain communities. Participants expressed concern about the scarcity of resources severely hindering their ability to deliver proper care.
- Sexual Assault Evidence Collection Kits (Kits) are only consistently offered in Yukon hospitals, presenting a significant barrier for victims unable, or who do not wish, to travel to larger centres. Health care staff expressed challenges in performing Kits in community health centres and there is significant need for proper training and policy direction to ensure the procedure is completed correctly.

Options for improvement

- Increased awareness of resources and services for victims of sexualized violence, utilizing specific sexualized assault online portals, social media and word-of-mouth networks for effective communication in communities.
- Holistic prevention strategies against sexualized violence, underscoring the urgency of community awareness of how to identify sexualized assault, and reinforce positive sexual relationships, and create a cultural shift to counter victim-blaming beliefs.
- Robust cultural and land-based healing supports, focusing on addressing intergenerational trauma by integrating comprehensive, culturally relevant mental health services, and advocating for the advancement of inclusive, specialized community programs and retreats rooted in Indigenous healing practices.
- Extensive trauma, violence-informed and cultural safety training among service providers and volunteers to effectively and empathetically respond to victims. Including emphasizing the importance of respectful language, understanding trauma impacts, and Indigenous culture.
- More diverse service options offered from a range of service providers, including NGOs and First Nations organizations and governments to meet the diverse needs of victims.
- Familiar and trusted community-based supports for victims of sexualized violence, emphasizing the role of support staff who can establish trust and understand the local context, while balancing concerns of confidentiality and safety.
- More safe houses, shelters, service hubs, and improved infrastructure for victims. As well, viable safe housing options for victims outside of the community if necessary, ensuring their safety and access to confidential resources.
- Develop a comprehensive and collaborative network of services and supports within the community, including partnerships with local organizations, health care providers, the First Nation, and community groups to be able to offer coordinated services beyond weekdays and office hours.
- Reliable transportation services to ensure timely access to support services, court proceedings, and medical care, and access to safe housing particularly in more remote communities.
- Clear policy guidance and comprehensive training to ensure standardized protocols and procedures for Evidence Collection Kits, enabling nurses to administer Kits effectively and safely within the community.



Introduction

Background

The Government of Yukon, Department of Justice, Department of Health and Social Services and the Women and Gender Equity Directorate are actively working with partner agencies to expand Sexualized Assault Response Team (SART) services beyond Whitehorse into Yukon communities. The SART partner agencies include RCMP, the Public Prosecution Service of Canada, the Yukon Hospital Corporation, and the Council of Yukon First Nations.

To effectively extend SART services to communities, the Government of Yukon contracted Rumsey Consulting, in partnership with New Territory Consulting, to conduct engagement with Yukon First Nations governments and organizations, community service providers, and other stakeholders. IPSOS and Sisco & Associates Consulting Services (SISCO) were contracted to engage with victims of sexualized violence in 13 Yukon rural communities and in Whitehorse.

The collective purpose of the engagement was to hear from victims, service providers, and Yukon First Nations to gauge the level of knowledge of SART services in communities and to better understand the resources available to victims of sexualized violence outside of Whitehorse. This included identifying the most effective elements of existing resources and supports, as well as identifying any gaps or barriers that may exist and how services can be improved to better serve victims.

The primary objectives of the engagement were to:

1. Understand the awareness and knowledge regarding available services for sexualized assault victims.
2. Identify the most effective elements of existing resources and supports, and understand the barriers to access.
3. Learn why some victims may choose to not seek services and support.
4. Understand the constraints and regional factors impacting the design and delivery of SART services in rural Yukon communities.
5. Gather input from victims, Yukon First Nations governments and organizations, and service providers on how services can be improved to better meet the needs of victims of sexualized violence in Yukon communities.

SART overview

SART is a network of service providers that offers a coordinated and collaborative response to support all people – including children, youth, and adults, and persons of all genders – who have experienced sexualized violence. SART is guided by a protocol that enables a coordinated response and greater coordination and collaboration between agencies and other partners. Sexualized violence refers to any sexual contact without consent; it includes mouth-to-mouth contact, grabbing, touching, and penetration.

The primary objective of SART is to enhance collaboration among service providers and deliver an integrated, victim-centered, and trauma-informed approach to supporting individuals affected by sexualized violence. This comprehensive approach encompasses three key pillars of service: legal, medical, and social, which includes cultural supports.

SART currently offers the following services to individuals impacted by sexualized violence:

- The Sexualized Assault Support (SAS) Line, which is Yukon-based, is available Yukon-wide 24 hours a day, seven days a week, and provides assistance to victims, support persons, and professionals seeking information.
- Support and accompaniment to hospital and RCMP, crisis counselling, justice system navigation, and other services.
- The Women's Transition Home, located in Whitehorse, serves as an emergency shelter for women, gender diverse people, and their children experiencing violence.
- Medical care, including the provision of Sexual Assault Examination Kits (Kits) and Kits on Ice by specialized SART examiners at the Whitehorse General Hospital, available on a 24/7 on-call basis.
- The RCMP's Specialized Response Unit (SRU), a dedicated unit of police officers available on-call 24/7.
- Mental Wellness and Substance Use (MWSU) services, which prioritizes access to counselling and mental health supports for victims.

SART services are available to anyone, regardless of residency. Anyone can contact the SAS line, be referred to Victim Services, or receive MWSU counselling. Kits are available at the three Yukon hospitals. In Dawson and Watson Lake, Kits are conducted by the emergency room doctor and in Whitehorse the Kits are conducted by SART physicians. However, certain services such as accompaniment to hospitals, the RCMP's SRU, and the Women's Transition Home, are only available in Whitehorse.

Disclaimer

Throughout this report, the term "victim" is used to refer to individuals who have experienced sexualized violence. The choice to use this terminology is based on specific contextual considerations. The term "victim" is commonly used in discussions related to sexualized assault, particularly in legal contexts where it is often used to describe individuals who have been subjected to a crime. While acknowledging the importance of survivor-centric language that emphasizes resilience and strength, the decision to use "victim" in this report aligns with established terminology commonly used within the legal field. It is important to note that usage of the word "victim" does not undermine or dismiss the strength, agency, or resilience of those survivors who have experienced sexualized violence, but rather reflects the specific language conventions within the current contexts.



Methodology

In total, 244 individuals from 14 Yukon communities participated in the engagement. Participants included victims of sexualized violence and their families, first responders, Indigenous service providers, non-profit service providers, women's transition homes, Yukon First Nations governments, federal agencies, and several territorial government departments.

Researchers from each firm conducted a series of in-person, online, telephone, and virtual engagement sessions with participants from the following communities:

- Beaver Creek – White River First Nation
- Burwash Landing – Kluane First Nation
- Carcross – Carcross/Tagish First Nation
- Carmacks – Little Salmon/Carmacks First Nation
- Dawson City – Tr'ondëk Hwéch'in
- Faro – Ross River Dena Council
- Haines Junction – Champagne and Aishihik First Nations
- Mayo – First Nation of Na-Cho Nyak Dun
- Old Crow – Vuntut Gwitchin First Nation
- Pelly Crossing – Selkirk First Nation
- Ross River – Ross River Dena Council
- Teslin – Teslin Tlingit Council
- Watson Lake – Liard First Nation
- Whitehorse – Kwanlin Dün First Nation and Ta'an Kwäch'än Council

Each firm employed a unique approach to engaging participants, grounded in trauma-informed and Community-Based Participatory Research (CBRP) principles which involves active participation of those whose lives are affected by the issues being studied. CBRP considers cultural safety, reflexivity, the rurality of the Yukon, and the sensitivity of the topics being explored, including: sexualized assault and gender-based violence, lived experiences with intergenerational trauma, and the impacts of colonization and residential schools.

The following section outlines each firm's methodology to conducting engagement with their respective participants.

Rumsey Consulting & New Territory Consulting

Engagement of Yukon First Nations governments and organizations, service providers, and other stakeholders

Approach

Our approach to gathering input from Yukon First Nations governments and organizations, and community service providers was highly qualitative in nature, tailored specifically to the unique context of the communities we engaged. Recognizing the importance of capturing the richness and depth of these conversations, and the need to adapt our approach to the preferences of participants, we conducted both one-on-one interviews and focus groups. This allowed us to create a safe space for open dialogue which enabled participants to share their thoughts, ideas, and experiences in a meaningful way. We also offered both in-person and virtual meeting options to be flexible and respond to the availability and wishes of participants.

Engagement and outreach

A list of recommended key contacts was provided by the Government of Yukon and served as a guide during the initial phases of our engagement process. We started our outreach by proactively reaching out to First Nation Health and Social Services Department directors, emphasizing the importance of their input and inviting their participation, consistent with best practices for engaging Yukon First Nations governments. This approach aimed to establish a connection and build trust, recognizing the directors' central role in advocating for the well-being of their citizens and communities.

In addition to contacting the organizations and individuals suggested by the Government of Yukon, we also leveraged the dynamics of 'word-of-mouth' communication to expand this circle of key contacts. Understanding the close-knit nature of the communities, we actively encouraged participants who had already expressed interest or were engaged in the project to share information among their colleagues or suggest other individuals that we should connect with. This considerably expanded our network of participants and ensured that we were connecting with individuals and organizations that were best positioned to speak to this issue in their community.

Trauma-informed

Throughout our engagement, we recognized the sensitive and challenging nature of discussing sexualized violence, particularly within small communities where individuals are not only service providers, but also active community members who may have been affected by sexualized violence. We established a trauma-informed approach, acknowledging the potential impact that discussing experiences related to sexualized violence could have on all participants.

To address any concerns, we provided clear information about the research process, including that participation was voluntary and confidential, and that participants could stop the discussion at any time. We also prioritized the well-being and emotional safety of participants by offering information on additional supports that were available should they need to discuss anything further after the interview or focus group.

Participants

Over a six-week period in May and June of 2023, our team conducted 51 in-person and virtual engagement sessions to gather feedback and insights on services and supports for victims of sexualized violence in communities outside of Whitehorse. We engaged 121 participants from 13 rural Yukon communities, including Beaver Creek, Burwash Landing, Carcross, Carmacks, Dawson, Faro, Haines Junction, Mayo, Old Crow, Pelly Crossing, Ross River, Teslin, Watson Lake, as well as Whitehorse-based organizations that represent or provide services to communities.

To ensure participants represented a variety of roles and services working in communities and with victims of sexualized violence, we engaged participants from the following sectors:

- First responders (e.g., RCMP and EMS, including volunteers)
- Indigenous service providers and organizations
- Non-profit service providers
- Relevant federal agencies (e.g., Public Prosecution Service Canada)
- Women's transition homes
- Yukon First Nations governments
- Yukon Government, Department of Education
- Yukon Government, Department of Health and Social Services
- Yukon Government, Department of Justice
- Yukon Hospital Corporation

Interviews

A total of 38 interviews were conducted during the engagement. We consider an interview to have two participants or less. Interviews took place directly in the community, virtually, or on the phone. During these interviews, we asked participants ten unique questions which focused on eliciting each interviewee's perspectives and experiences, and their knowledge of their communities. Interviews were approximately 45-60 minutes in duration.

Focus groups

Thirteen focus groups were hosted directly in the community or virtually during the engagement. Focus groups consisted of at least three or more participants. Depending on the preferences of the community, focus groups were either sector-specific and included more than three staff members, or they were made up of different sectors all serving the same community (e.g., RCMP, EMS, Yukon First Nation's government staff, Community Nursing, etc.). Focus groups were typically 60 minutes in duration.

Community participation

During our engagement, we made a concerted effort to include participants from all communities, while also recognizing that the availability of participants may differ depending on the size of the population and the number of services offered in each community. Therefore, larger communities may have more participants available for engagement, while smaller communities may have limited representation. Additionally, we engaged with individuals from Whitehorse who either

represented or provided service to the communities as part of their work. Table 1 outlines the total number of individuals who participated from each community.

Table 1: Community participation

Community	Participants	Community	Participants
Carcross	12	Mayo	8
Carmacks	9	Old Crow	2
Beaver Creek	4	Pelly Crossing	2
Burwash Landing	2	Ross River	2
Dawson City	13	Teslin	4
Faro	2	Watson Lake	13
Haines Junction	6	Whitehorse ¹	42

¹ Several service providers and organizations we engaged were based out of Whitehorse, but had mandates to deliver itinerant services to communities.

Thematic coding of results

To fully represent the breadth of input received and to ensure we captured common themes within and across communities, we used an inductive coding method. Inductive coding is a data analysis process that involves reading and interpreting raw contextual data to develop themes or concepts using interpretation based on data. We did not begin with pre-determined codes but allowed the narrative and themed results to emerge from a thorough review of the interview and focus group data. This was an iterative process that included reviewing data, coding, and refining the coding multiple times.

This report summarizes the key themes heard in and across different communities; it does not necessarily represent each individual piece of feedback received.

Limitations

To provide a balanced and transparent assessment of our engagement project and related results, it is essential to acknowledge the limitations that may have influenced the breadth and generalizability of the findings. The limitations included the following:

- 1. Small sample size:** One of the limitations of this project was the small sample size in some communities. Due to small populations and few service providers, the number of participants in some communities was limited. This could potentially affect the generalizability of the findings to the entire population within those communities.
- 2. Narrow consultation timeframe:** In order to meet key project timelines, engagement was conducted over an approximately six-week period in May and June 2023. Although we extended the consultation window to maximize engagement, there were some First Nations governments, individuals, and organizations who were unable to participate during the designated timeframe. A longer consultation window may have increased the number of participants who were able to engage in the project.
- 3. Limited participation in crisis-affected communities:** Some communities were experiencing crises during the engagement period. Combined with a narrow consultation

timeframe, this resulted in limited participation among interested parties, primarily among Yukon First Nation governments and community service providers, due to prioritization of immediate needs and responsibilities.

4. **Staff vacancies in key positions:** Several communities were experiencing challenges related to vacancies or extended absences in critical positions, such as Community Nursing, RCMP, social service workers, and First Nations health and wellness staff. The absence of key personnel may have impacted the breadth of input from staff with certain perspectives and expertise.
5. **Short-term residents:** In some cases, participants we engaged had not resided in the community for an extended period of time, a symptom of frequent staff turnover in some communities. Having limited time in the community may have influenced their understanding of the issues and challenges related to sexualized violence. Efforts were made to ensure the perspectives of long-term community members, current or previous, were captured.

Disclaimer

Due to the sensitive nature of sexualized violence and the small number of service and support providers in the communities, we made a deliberate decision not to identify the specific organizations or First Nations involved in this portion of the engagement project. This choice is rooted in our commitment to ensuring the utmost confidentiality and privacy for all participants.

The absence of specific organizational or First Nations' names does not diminish the significance or credibility of the information presented in this report. The findings are based on the collective feedback and perspectives received from participants representing a diverse range of communities.

IPSOS & SISCO

Engagement of victims of sexualized violence

Synopsis of engagement

Ipsos and SISCO, in collaboration with the Yukon Project Team and SART partner agencies, completed the following activities:

- Planned engagement activities with Yukon survivors of sexualized assault with a particular focus on victims in 13 Yukon rural communities as well as Whitehorse, including the development of a detailed engagement plan and schedule;
- Coordinated with the Yukon project manager and prepared engagement materials for implementing the engagement plan;
- Developed a data retention and destruction plan for all identifiable personal information about engagement participants;
- Developed a list of supports and resources, including community, territory, and national resources which was shared with participants to access if they needed support following the engagements. Efforts were also made to identify a community Elder or Knowledge Keeper to attend each sharing circle and offer participants in-person support if needed. This was

not achieved in all communities, including those hosting on the land cultural and harvesting camps, as Elders and Knowledge Keepers were attending those;

- Coordinated and conducted engagements with Yukon victims of sexualized assault, of various demographic groups and identities, as well as parents/caregivers who provided support to child/youth victims;
- Provided resources for participants to engage in a culturally appropriate activity during the engagements. Various beads, thread, and needles were provided, in addition to markers and paper for colouring, so that participants could engage in an activity during the sharing circles. These resources were provided noting the sensitive nature of discussions and to make the sharing circles as informal and comfortable for participants as possible;
- Documented all information obtained through the engagement process; and
- Communicated to participants how to access the results of the engagement.

Throughout the duration of the engagement, our approach was underpinned by Community Based Partnership Research and trauma-informed approaches, ethical considerations, mitigating needs/issues, and data retention and destruction protocols.

Fieldwork

The online HUB was active for the month of August and in-person engagements and interviews were conducted between August 14-27, 2023.

The team was anticipating a maximum of 70-75 participants; however, 123 people participated in total.

Participation by region is outlined below.

1. **Whitehorse (n=50)**
2. **North** (Dawson, Mayo, Old Crow) (**n=16**)
3. **West** (Haines Junction, Burwash Landing, Beaver Creek) (**n=11**)
4. **South** (Watson Lake, Teslin, Carcross, Ross River) (**n=33**)
5. **Central** (Pelly Crossing, Carmacks, Faro) (**less than 10¹**)
6. **Other** (BC border, live elsewhere but assaulted in the Yukon, preferred not to answer) (**less than 10¹⁻²**)

Engagement outreach

The success of the engagement partly hinged on the effectiveness of informing victims and survivors of sexualized assault and their loved ones about the opportunity to share their experiences and perspectives. As such, the engagement team developed a set of outreach materials in multiple formats, including posters, QR codes, social media posts, and (subtle) business cards which were shared with SART partners to distribute, as well as the Ipsos and SISCO posting on social media. A radio spot was also developed and played on local radio channels.

¹ There were less than 10 participants and is therefore considered personal information under HIPMA.

² Please note that numbers for Central Yukon and Other are not reported.

The campaign title, “Your Voice Matters”, was developed by the Government of Yukon team. The communications content was a collaboration between the Government of Yukon, Ipsos and SISCO, and The Studio (Ipsos) then designed the materials.

The materials highlighted different ways to participate, a QR code and URL link to get more information – who we want to hear from, the multiple ways of being able to share feedback (see ‘Engagements’ for more information), the impact their stories will have, and the honorarium offered as a ‘thank you.’ A phone number was also provided to schedule an interview.

Final metrics from the SART social media campaign can be found in the Appendix section.

Approach

Our engagement approach is deeply rooted in Community-Based Partnership Research (CBPR), a tailored form of Participatory Action Research specifically aligned with First Nations communities. Prioritizing cultural safety, reflexivity, and the unique rural context of the Yukon, our focus spans from sexualized assault to the lingering impact of colonization and residential schools. With utmost respect for Indigenous wisdom and community relevance, our CBPR strategy ensures reciprocal information sharing, bringing tangible benefits to the community. This foundation underpins the various avenues for participant involvement, ensuring comfort and safety, from anonymous online surveys to in-person or telephone interviews facilitated by Ipsos moderators. Leveraging established safe spaces like recreation centres and First Nations cultural centres, we’re devoted to building trust, addressing access barriers, and empowering participants by providing a safe, non-judgmental space for sharing their experiences and insights on service improvement.

Our engagement tools are meticulously designed to prioritize participants’ emotional safety, focusing on open-ended questions that avoid shifting blame or responsibility to victims, survivors, and their loved ones. These questions, structured to enhance awareness and improvement of support services, are adaptable to the flow and energy of each engagement session. Additionally, a trauma-informed approach steers our engagement plan, intertwined with the “4 Rs protocol” (recognition, realization, response, resist re-activation), ensuring a trauma-aware environment throughout all engagement activities. Ensuring the right to refuse and withdraw, our engagement approach aligns with the “do no harm” principle, promoting participant comfort, informed decision-making, and utmost safety in various feedback mediums, from online hubs to community-held sharing circles.

In the spirit of “do no harm,” we navigate the delicate Yukon community landscape, offering diverse feedback options, ensuring anonymity, and reinforcing the participants’ control over their involvement level. Despite the variations in participation, the gathered insights stand robust and invaluable, echoing the voices of those who bravely chose to share their journey with us.

Online engagement hub

An online site (hosted on Recollective’s platform) was created specifically for this engagement to gather perspectives and feedback from victims and survivors of sexualized assault. The design and content considered literacy, educational level, and user-friendliness and appropriateness. As such, all text and content were geared towards a grade 5/6 reading level. The Ipsos and SISCO team contact information was provided with a prompt to get in-touch if guidance with navigation and understanding was required. As well, the site was accessible via desktop, mobile, tablet, iPad, and smartphone.

The online hub required an email address to join. Those who were interested in sharing their thoughts on the hub were first directed to a pre-screening survey to confirm that:

- They were either a victim, survivor or were a close contact of someone who was a victim or survivor of a sexualized assault incident that took place in the Yukon.
- They were over the age of 19 or if under 19, they had obtained parental consent for participation (this requirement was added from a research ethics standpoint).

A welcome page provided all the key information for victims and survivors to provide their informed consent for taking part in the engagement.

For privacy, security, safety, and protection, the hub was a closed site, meaning that only persons registered could access it and take part in the survey. Participants could not see each other's answers – only Ipsos moderators could interact with participants. The Government of Yukon team tested the site prior to launch but did not have access to the participants or data collected.

The hub was live between August 4-31, 2023. Participants were given the freedom to complete the activities at a time that was most convenient to them, and they were able to answer the questions in multiple sittings. They were also encouraged to share as much as they felt comfortable to and the option to skip a question was offered. The hub was moderated by Ipsos researchers but a ‘light-touch’ approach to probing was used. Options to type answers, submit audio and/or short videos were provided to address preferences in ways to communicate.

Four areas were explored:

- Your Journey of Accessing Services (including awareness)
- Barriers to Accessing Services
- Experience with Services
- Final thoughts

Participants were also asked if anything was missing from the survey and if they had any advice or suggestions for SART and the Government of Yukon for how victims could be better supported in future.

Some demographic information was collected (age, gender, location) and some personal details, i.e., email addresses to verify that submissions are from individuals and to communicate regarding technical issues; and, to receive their honorarium. Participants were given the option to select their preferred username. Submissions remained confidential at all times and were only visible to the engagement team.

A support document listing all available resources for emotional support available for victims, survivors and their loved ones (e.g., Canadian Mental Health Association Yukon Division, Yukon Aboriginal Women’s Council, Victoria Faulkner Women’s Centre, National Sexual Assault Hotline, Sexual Assault Canada, etc.) was provided. This was accessible to all participants at any point throughout their engagement in the hub, as it was accessible on every page.

In-person engagements

The on the ground engagement team, inclusive of one researcher from each firm, spent a total of two weeks visiting Whitehorse and all other communities by car. The team had booked flights to Old Crow, but the engagement was cancelled owing to a forest fire evacuation.

While in each community, engagement sessions were co-facilitated by Ipsos and SISCO moderators, and in some cases, Elders and Knowledge Keepers and community partners provided support. Sessions were held in locations identified by the partner as being accessible, safe, and private. Beading supplies (cultural activity) and drawing materials were provided to use as a vehicle to process during the sessions and promote healing. In one community, a participant brought scented candles as gifts for all attendees to promote healing and positivity.

Honoraria

To show respect and appreciation for participant contributions, we offered an honorarium of \$75 for each participant (in any engagement method). This was provided as cash and/or Visa gift cards or Walmart gift cards (in Whitehorse) for in-person engagements. In addition, a \$500 cash honorarium was provided for Elders and Knowledge Keepers who co-facilitated and/or provided support for the in-person sessions (one Elder/Knowledge Keeper per session).

As incentives were handled in person, a form was signed by participants for internal accounting/audit purposes. However, names and signatures were redacted (only first letter of names remained) before submitting the forms to the Ipsos accounting team to ensure confidentiality.

For those who engaged via the online hub, a \$75 virtual VISA gift card was provided to participants via email.

Engagement with children and youth

We had some parameters in place for including children and youth in the engagements, as well as extending our approach to include considerations of age, consent, and parent/guardian involvement, while keeping the above-mentioned considerations in mind.

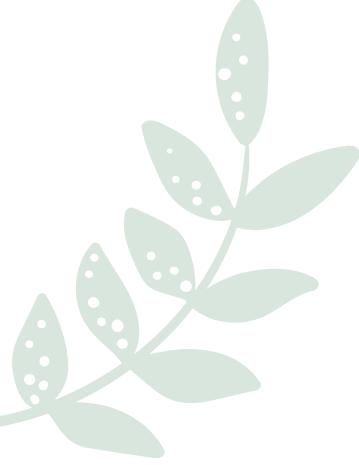
We had one person under the age of 18 participate on the online hub. All other participants (across engagements) were adults, with some parents sharing their children's experiences of sexualized assault.

A couple of people voiced that they had an issue with the survey requiring parental consent, as some youth may not want to request it.

Limitations

The key findings and recommendations are based on narratives drawn from the in-person sharing circles, interviews, and online Hub. Participant voices are foundational to the development of the report findings and recommendations. It is important to note that while overall engagement levels were strong, they were impacted by some limitations including:

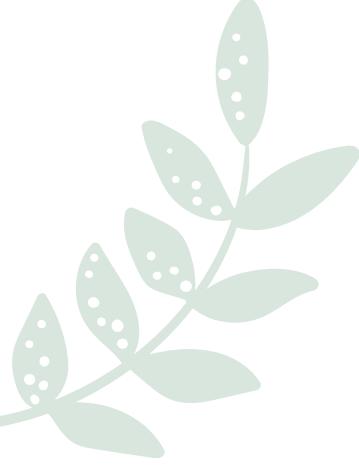
- 1. Small sample size:** We recognized that there may be some issues with recruitment and engagement given the rurality of the Yukon territory, the multiple communities we were including, and the topic we were exploring. Additionally, in our experience, northern and First Nations communities are often more apprehensive to engage in research due to a long history of exploitative research relationships that have harmed their communities, and because of accessibility barriers that make it difficult.
- 2. Timeframe:** Relationship building is critical when partnering with communities, particularly First Nations communities, and takes a great deal of time and care. Outreach efforts were designed to connect with community councils and identify community contacts to assist with planning in advance of the in-person trip. In order to meet key project timelines, in-person engagements were conducted over a two-week period in August. Although this timeframe was extended, as this was set to occur in July, it was still difficult to conduct outreach and identify community contacts in this short time.
- 3. Crisis affected communities:** Ipsos and SISCO were unable to conduct in-person engagements in Old Crow and Mayo due to wildfires. Just prior to the scheduled engagements, communities were evacuated due to wildfires. As such, the research teams did not proceed with hosting in-person engagements, as we felt it would be insensitive to engage with members already in a crisis situation.
- 4. Informed consent:** It was a requirement for youth under 19 to obtain parental consent to participate in this project. While we recognize this as a barrier which may have impacted levels of engagement, we included the requirement of parental consent in line with standard research ethics processes regarding participant consent. Given the sensitive nature of the project, our priority was ensuring and maintaining participant safety. As such, we wanted to ensure any youth that engaged would have adequate support from their guardian or caregiver in the event they required it.



What We Asked

Researchers asked participants a series of questions during both engagement initiatives and grouped their replies into five categories where applicable:

- 1. Level of community knowledge:** Researchers sought to gauge participants' level of familiarity with SART services and other resources, assessing their awareness and understanding of how service providers and victims of sexualized violence could access SART or other supports in their community or in Whitehorse.
- 2. Experiences engaging with available resources:** Researchers asked about the resources available for victims in each community, including both formal services and informal supports, and the experiences victims had when engaging with services.
- 3. What is working well:** To better understand the strengths of the existing services and community dynamics, researchers asked participants what was working well among the services and supports currently available.
- 4. Barriers and challenges to accessing supports:** Researchers asked participants about the unique challenges and barriers victims experience in rural Yukon communities, including reasons why victims may not access services.
- 5. Options for improvement:** Most importantly, participants were asked for ideas and recommendations to improve community supports and outcomes for victims.



What We Heard: Summary of Themed Feedback

Throughout the engagement with victims of sexualized violence, Yukon First Nations governments and organizations, service providers, and other stakeholders, several key themes emerged that highlighted the barriers and challenges surrounding the disclosure of sexualized violence and accessing victim support services in rural Yukon communities.

Remote and tightly-knit Yukon communities face unique challenges that deter victims from coming forward. Cultural, historical, and geographical factors all contribute to an environment of silence, where fear, stigma, and lack of trust of formal institutions impede victims from seeking justice and support. However, communities are eager to address sexualized violence, and there are several positive shifts happening, paving the way for the expansion of SART services.

The findings presented in the following section are a synthesis of the engagement results with all participants engaged.

Level of awareness of services available

"One thing I noticed was if you Google 'sexual assault Whitehorse' you just get news, and one Yukon Government link to SART. Although the SART page is helpful, it has too much information on the landing page. You're scared, hurting, traumatized, crying, and processing that much information in paragraph form is just not possible. You skim, you miss information, you're unable to focus. That landing page needs to be more concise, and to the point. All that other information can be elsewhere on the site for when you're ready to consume that much information."

– Anonymous participant

Limited knowledge of how to access services in communities

The majority of Yukon First Nation government staff, community service providers, and victims engaged had limited familiarity of available resources and services for victims within their communities. Any familiarity often came from public posters or radio ads, but details on the services and how to access or refer to them were limited. A significant segment, especially among First Nations organizations, had no knowledge of SART as most services are not provided in rural communities.

For victims, a common channel for learning about services was through referrals from organizations, including health centres, RCMP, and women's shelters. Some were informed by family or friends with similar experiences, while others discovered services through online searches and social media ads.

For victims, the stigma of being a victim or being "judged" fuelled privacy concerns around searching for information. Victims disclosed fears surrounding being targeted with advertisements based on search history or having to disclose personal information once connected to services. Negative past experiences with formal services contributed to a lack of trust in the Government of Yukon and caused some victims to forgo trying to learn about what options were available.

A small number of victims reported that their Google searches yielded little on what is available in the Yukon or that they were able to find the Yukon SART website but were overwhelmed with the amount of information. In a couple of cases, participants mentioned their lack of reliable access to the internet as a barrier to finding out about services available.

Limited awareness of sexualized assault

Participants from both engagement initiatives described a lack of awareness on sexualized violence and there being a need for greater knowledge to ensure all community members are aware of what sexualized assault means, what it can look like, signs to look for (i.e., body language, lack of self-confidence, bruises, being disengaged, etc.), and how to seek help. Some victims noted that many people may not realize they have committed sexualized assault or have been the victim of an assault, as there has been a lack of appropriate social responses to address sexualized violence through multiple generations.

Participants emphasized a lack of sexualized assault awareness in communities including how it is defined, what to do if it happens and how to prevent it as a community. Victims reported rarely accessing community health care services to access a Sexual Assault Evidence Collection Kits (Kits) following an assault, and a few mentioned that they were unaware how they could access one.

A number of service providers also noted that victims may not be aware of, or understand, the legal and court processes, or resources available and may choose not to come forward as a result. These participants highlighted that some individuals may not have the necessary information or knowledge about their rights, the reporting process, or the support services that can assist them in navigating the legal or care systems. This underscores the need for increased awareness and outreach efforts to ensure that victims are aware of their options and the available resources.

Available resources

Limited supports and resources available for child and youth victims

Community service providers and First Nation government staff discussed a significant concern with the lack of services for children and youth victims in communities. These participants stressed that many positions dedicated to supporting child and youth victims, such as school counsellors, RCMP with training on how to work with youth and children, regional social workers, or child and youth mental wellness workers, were vacant. The absence of resources and staff trained specifically to address child sexualized assault and abuse significantly increases a child's vulnerability. This not only leaves children without the necessary support systems but also makes them susceptible to prolonged harm and re-victimization. A few of these participants even noted that they would not know what steps to take or who to contact locally if they suspected a child or youth was a victim of sexualized abuse.

RCMP, Community Nursing, and the First Nation are the core community supports

It was widely acknowledged by many participants from both engagement initiatives that there are limited resources and supports available for victims of sexualized violence outside of Whitehorse, Dawson, and Watson Lake. In smaller communities, the RCMP, Community Nursing, and the First Nation were identified as being the only immediate resources available to victims.

Recognizing the long-lasting impacts of sexualized violence, participants expressed how the provision of counselling and therapy is instrumental in helping victims recover, including persons who have experienced both recent and historical sexualized assault. Due to limited resources and staffing constraints, mental health services may not be consistently available or culturally safe, requiring victims to rely on itinerant providers who visit periodically. This can create challenges and gaps in support, as victims may face difficulties building trust with an external counsellor or accessing timely and ongoing services.

Most participants also discussed how Victim Services workers were regarded as valued supports. They are only resident in Dawson and Watson Lake and itinerantly available elsewhere, with workers generally only travelling to the communities during circuit court. Some victims stated that there was a high rate of staff turnover which can be difficult to navigate.

What is working well

Trusted and familiar staff

In some communities, certain staff had been working and/or living in their communities for extended periods of time, and participants discussed how staff were able to develop familiarity and trust with community members. Victims stated that high levels of trust in staff can create a more comfortable and safer environment for victims to disclose their experiences, seek assistance, and engage with services. All participants felt the presence of familiar faces within the community can contribute to a sense of reassurance and increase the likelihood of victims seeking help. Staff members with longer tenures and active participation in the community also have a deeper understanding of the local context, cultural nuances, and community dynamics.

Community cohesion and collaboration

First Nations staff and community service providers highlighted how communities unite during times of crisis, showcasing strength and resilience. They shared examples of how community members, along with service providers, RCMP, and the First Nation, have fostered strong and collaborative working relationships over the years and these partnerships have resulted in good communication and coordination of supports, and the establishment of robust circles of care. They noted that staff often shared their knowledge and supported others, and that this had fostered strong trust across individuals and organizations.

It is important to note that although community cohesion was typically viewed as a strength by these participants, when it comes to incidents of sexualized violence, many illustrated both positive and negative outcomes. In cases where the perpetrator is not known within the community, some participants described how the community comes together to offer support to the victim. However, the response can be starkly different when the perpetrator is a well-known community member. Participants noted that these instances can be very divisive, leading to silence, denial, or victim-blaming. This is particularly pronounced when family connections or relationships are involved for both the victim and the perpetrator.

Therapeutic supports and resources

Participants engaged throughout both initiatives consistently expressed appreciation for the invaluable support provided by counselling and therapeutic staff in the communities. First Nations government staff and service providers described how Mental Wellness and Substance Use Services staff and dedicated counsellors contracted by the First Nations, play a vital role in offering healing support to victims across Yukon communities. Depending on the community, Mental Wellness and Substance Use Services staff and/or contracted counsellors were either present in or travelled to communities. First Nations government staff and service providers felt these staff worked hard to establish meaningful connections and fostered a sense of safety and comfort for individuals seeking support.

Victims also described these therapeutic supports as being supportive and attentive, and they were relieved to have someone to talk to.

Increasing awareness, interest, and engagement

Community service providers noted that some agencies were highly engaged in addressing the issue of sexualized violence and that there was a strong desire to help. In some communities, participants commented that First Nations governments were keen to provide more service and support options, and that work is underway to implement new programs that could enhance and be complementary to the expansion of SART. In general, these participants noted that communities wanted to be involved and that this desire to be engaged was a critical starting point for SART expansion.

Participants from both initiatives praised the Government of Yukon for taking the issue of sexualized violence seriously by creating the SART team and making efforts to expand into rural communities.

Improved service availability

Although most participants noted there was a general lack of comprehensive services for victims of sexualized assault in rural communities, First Nations governments and service providers did identify several positive aspects of the existing services available. These participants described how more services are available now than in previous years, including a pediatrician team, medivac teams trained to work with children, physicians trained in how to complete Kits, Mental Wellness and Substance Use hubs, the 24/7 SAS line, and the Whitehorse-based SART team. Although there are still several challenges, including staffing issues, these participants commented that in general, things are much better than they once were.

In Dawson and Watson Lake, victims of sexualized violence have access to a broader range of essential resources and more comprehensive care such as hospitals, resident Victim Services staff, and women's shelters. Some of these services are available 24/7, ensuring immediate assistance for victims in crisis situations. The presence of women's shelters in these communities also increases advocacy and prevention efforts as they are key partners in addressing sexualized violence.

Initiatives aimed at prevention

During the engagement with service providers and First Nation government staff, researchers learned that some communities have taken the lead in implementing awareness initiatives focused on promoting awareness and preventing sexualized violence. Participants in these

communities discussed how awareness plays a critical role in creating a culture of respect and understanding, and they have spearheaded various programs and campaigns aimed at equipping youth and adults with the knowledge, skills, and tools necessary to foster healthy relationships and to better identify the root causes of sexualized and gender-based violence.

In some communities, it was noted that bars are more aware of and involved in issues related to sexualized violence due to volunteer outreach and awareness offered by key service providers. Bar staff were noted to watch patrons and to intervene in some situations before they escalate.

Barriers and challenges to accessing supports

Fear

The majority of participants engaged acknowledged that fear predominantly influences victims' hesitancy to engage with services and supports. This multifaceted fear is rooted in concerns for personal safety, the potential for re-assault, not being believed, and the trauma of repeatedly recounting their experiences. The very act of disclosing can sometimes lead to reputational damage, especially in tight-knit communities. This damage may extend to job loss, social ostracization, threats, and persecution. Historical traumas experienced during residential schools and the enduring legacy of colonization in First Nation communities, amplify these fears, and victims discussed the profound fear surrounding child apprehension and the consequential damages this can cause through seeking formal supports or justice following an assault.

Many victims discussed fearing they will create familial rifts, jeopardize community harmony, and negatively affecting the perpetrator. The daunting nature of institutional processes, facing one's assailant in court, the possibility of the perpetrator not facing consequences, and threats against victims and their families further intensify this fear. In some cases, this fear is so overpowering that some victims described overwhelming feelings of isolation and not being able to venture out into their own communities without being accompanied.

Stigma and shame

In addition to fear, many participants identified stigma and shame as profound barriers to accessing services and support. Throughout the engagement, the culture of victim-blaming emerged as a significant concern. Victims discussed being frequently interrogated about their actions, such as being under the influence of substances or the nature of their relationship with the perpetrator, thereby shifting the blame onto them. Participants noted there is a link between substance abuse and sexualized violence, emphasizing the additional challenges faced by victims who are grappling with addiction. This often pushes victims into a vicious cycle of feeling undeserving of support, furthering their isolation.

The nature of the relationship with the perpetrator, especially if they are close to the victim or hold a position of power within the community, adds additional complexity. Victims described often feeling trapped and unable to seek justice when the perpetrator is a respected individual or family member. For many victims, such experiences may have started at a young age, and victims stated they frequently encounter pressure to stay silent, with warnings about tearing families or communities apart. These negative social responses place an undue burden on victims, making them feel responsible for the harm done to them.

"Don't cause trouble. You're going to rip the family and community apart."

– Anonymous participant

"Everyone was calling me telling me I was ruining his life."

– Anonymous participant

In tight-knit communities, the ripple effects of an assault touch everyone. Many victims discussed having to suppress their traumatic experiences deep within, primarily due to threats of retribution received throughout their lives, thereby fostering a culture of silence. This leads to many incidents going unreported, and those that are voiced often represent just the tip of the iceberg.

Lack of confidentiality in communities

Many participants from both engagement initiatives highlighted that a lack of confidentiality is a significant reason why victims may be hesitant to access services and supports. In small communities, there is a much higher likelihood of knowing the perpetrator of the assault, which intensifies the fear of breaches in confidentiality. The close-knit nature of communities often means that information can spread quickly, potentially exposing victims to judgment, gossip, or even retribution.

Most participants discussed how victims may be uncomfortable speaking directly with local Government of Yukon service providers, community support workers, or their First Nation because of community dynamics, and the familiarity among residents makes it challenging for victims to trust that their information will remain confidential. Participants noted that the community generally knows “who owns which car”, making it very difficult to remain anonymous when accessing resources in the community. In addition, victims seeking assistance can be apprehensive about possible confidentiality breaches if the perpetrator has a family or personal connection to a support worker or staff member.

Another significant concern raised by several participants was the fear that both the victim and the perpetrator may seek services from the same resources, leading to potential conflicts of interest and compromised support. If the perpetrator is already accessing service or support staff, it creates an additional layer of apprehension and hinders victims from reaching out for assistance.

As described by a few participants, in some small communities it may not matter whether services were locally available, as the perception is that these confidentiality issues are insurmountable. Victims may not feel comfortable accessing any services, including shelters, as some victims felt they were not safe or confidential spaces.

Lasting impacts of colonialism and residential schools negatively influence how sexualized violence is addressed

Several participants emphasized how the deep and lasting effects of colonization and intergenerational trauma continue to reverberate in Indigenous communities who are struggling to address sexualized violence. Participants highlighted that being both Indigenous and a survivor of sexualized violence can intensify feelings of shame and isolation.

Some victims shared that their experiences enduring abuse as children at residential schools, or as children of those who were forced to go to the schools, have had lasting impacts. The victims discussed how the violence endured through residential schools has manifested itself in adverse behaviours. Some victims were exposed to or experienced sexualized violence at a young age, and many report not receiving any support to deal with the impacts of this victimization. Victims indicated they have come to expect a lack of positive social responses and a lack of accountability, fuelling a culture of silence and impunity.

“Confidentiality is a joke here.”

– Anonymous participant

Victims expressed that the repeated and ongoing victimization, fear of perpetrators and the lack of positive social response from service providers and the community affects victims' sense of safety and value as a community member. Victims stressed that the abuse endured through residential schools has left many victims, including Elders, in a state of mere survival rather than thriving, having not received the psychological and emotional support they need.

Mistrust and systemic racism within institutions

Throughout the engagements, a recurrent theme among participants that arose was systemic racism and a lack of trust within health, justice, and other government institutions among Indigenous victims. Participants discussed how racial bias significantly impacts the treatment of victims, particularly in First Nations communities. Such prejudices create unequal service access, favouritism, and a stark lack of cultural sensitivity, magnifying the adversities these victims already encounter.

Victims shared concerns about being mistreated in hospitals, health centres, and long-term care facilities. Many participants shared personal stories, as well as stories from family members who were discriminated against and treated poorly by health care providers. Victims shared that it is not uncommon for stereotypes to be perpetuated, including the belief that all First Nations peoples suffer with substance abuse issues and these stereotypes act as a deterrent to seeking assistance.

Professional staff who worked within health and justice systems acknowledged there are intrinsic challenges and biases with these systems and felt that substantial work needs to be done to eliminate systemic racism. The RCMP, despite undergoing reforms, remains a focal point of mistrust among victims due to its history of racially biased actions. Additionally, the overarching failure to offer culturally sensitive and suitable care in health, social services, and justice sectors further drives mistrust. Victims described feeling disregarded and susceptible to re-traumatization. A noticeable lack of Indigenous representation within these systems also exacerbates this gap, making it harder for victims to believe their unique experiences will be genuinely understood and addressed.

Some victims also felt previous attempts to engage with First Nations have been superficial and a "box-ticking" exercise versus having a genuine interest in helping people in communities. Some felt the Government of Yukon is "a lot of talk but no action" and that Indigenous populations must fight and advocate for themselves to get anything done. Participants stressed there needs to be an understanding of First Nations' cultural values and how they play an important role in shaping policies to promote healing.

Justice system failures

A common theme participants discussed during both engagement initiatives was how going through the court process was extremely traumatic. The justice system can be an overwhelming, long, and distressing process, and the prospect of reliving the trauma, facing cross-examination, and potentially being disbelieved or blamed can deter individuals from pursuing justice. Some participants also felt that the justice system is not rehabilitative so there is limited value in pursuing it, and that in some instances restorative justice approaches are also not beneficial because they focus more on supporting the accused than the victim.

"Six months is not enough."

– Anonymous participant

Most participants expressed deep concern regarding the alarmingly low conviction rates for sexualized assault cases, highlighting the significant challenges in proving such cases, often resulting in them being dismissed as "he-said-she-said" situations due to a lack of evidence. Victims also discussed not being offered any follow up or closure from RCMP when they did make a complaint, and participants felt that even when there was a conviction, the consequences are not proportional to the trauma experienced by the victim. Some participants noted in certain instances, the community rallies around the accused rather than supporting the victim. This lack of community support further exacerbates the already difficult journey victims face, leaving them feeling isolated and discouraged from seeking justice and support.

Some First Nation staff made reference to past well-known sexualized assault cases, highlighting how the extensive exposure of these trials within a close-knit community, coupled with a perceived lack of appropriate punishment for offenders, inadvertently leads to the suppression of victims' voices.

Victims will self-medicate with alcohol and drugs

Some victims shared that substance use, including alcohol and other substances, is sometimes used as a way of self-medicating to block memories, numb the pain, and disconnect from oneself and others. Some participants shared that substance misuse has reached epidemic levels in their communities, particularly among people in vulnerable situations.

It was also shared by victims that people in vulnerable situations, like in shelters, are often targeted and coerced into illicit substance use. Predators are intentional and opportunistic. It is not uncommon for individuals to exchange access to alcohol and drugs for sexual acts. These "lures" are sometimes used by those with the intention of grooming young people or to get people (mostly women) to pass out so they can sexually assault them.

Victims stated that substance use within their communities has negatively contributed to domestic violence, overdoses, and suicides, and there are limited community resources that address these concurrent challenges.

Lack of mental health supports and resources

Many participants stressed that the traumatic repercussions of sexualized violence require continuous and accessible therapeutic supports, which must also address underlying issues such as substance abuse.

Victims shared that there are very few targeted sexualized assault supports, programs and resources in Yukon communities to help victims and survivors rehabilitate and/or recover from trauma. As a result, victims stated that they feel the burden is on the victim themselves and their families. In smaller communities, vital services are often limited to the RCMP, Community Nursing, and the First Nation—creating a service vacuum, and in many communities these agencies are siloed or not confidential. Additionally, there is currently an unaddressed critical need for accessible 24/7 crisis management support in communities, as some supports are only available 9-5 Monday to Friday, despite many incidences taking place in the evenings and on weekends.

"It takes courage for a person to say they need help. Be there for them and help prevent a relapse."

– Anonymous participant

Participants also highlighted the significant gap in mental health services and supports available to male victims and those from 2SLGBTQIA+ communities, as well as other highly vulnerable populations. This gap is recognized as being Yukon-wide and is not necessarily unique to communities.

Inadequate victim supports for Indigenous victims

Most participants highlighted there are limited cultural supports available for Indigenous victims, especially for those who endured sexualized abuse during residential schools. Participants shared a desire for more Indigenous health care and counselling staff as some Indigenous victims may be more comfortable accessing services from Indigenous service providers and staff. In addition, some participants recommended more land-based supports to re-establish connections with culture and healing.

Yukon First Nations organizations and community service providers also noted a lack of service coordination between First Nations communities and external service providers, especially, between their community and Whitehorse or larger centres such as Dawson and Watson Lake. This lack of coordination can complicate after-care efforts for Indigenous victims who may have travelled outside of the community to receive care and are now recovering in their communities.

Participants also acknowledged that certain perpetrators have themselves been victims of sexualized assault, leading to a complex tension within communities that can blur the distinction between perpetrator and victim. It was acknowledged that effectively addressing these challenges, along with the profound historical trauma experienced in Indigenous communities, necessitates specialized knowledge, training, and a deep understanding of the ongoing impacts of residential schools and colonization.

"Support right now doesn't align mentally or spiritually for First Nations people."

– Anonymous participant

High vacancies and turnover among essential staff positions in communities

The majority of participants discussed how a lack of consistent staff in crucial roles such as social workers, nurses, counsellors, physicians, cultural wellness and support workers, and RCMP members presented a major obstacle to providing effective support to victims. Victims discussed how community doctors and nurses were often just temporary and do not build relationships with those presenting for service.

Many participants reported high vacancy rates among staff in essential services, leading to reduced or unavailable support in certain communities. It was not uncommon for participants to witness staff cycling in and out of the community, without any long-term stability or consistency; and some victims highlighted that staffing shortages in these positions often meant they did not have an option to engage with female staff.

"I think if people realize issues with our nursing station. Sometimes no nurse, sometimes not nice nurses or they don't care, and everyone knows everything."

– Anonymous participant

First Nation staff and service providers expressed deep concern and acknowledged the scarcity of resources severely hindered their ability to deliver proper care that is sensitive to the needs of victims. This was particularly true for child and youth victims, as service providers described having no child protection workers present in most communities during the engagement. However, the majority of these participants did acknowledge the difficulties of hiring and retaining skilled staff in small communities.

Limited transportation options

Participants from both engagement initiatives expressed concerns about the limited transportation options available between communities and Whitehorse, where most specialized services are located. According to participants, there were significant challenges arranging transportation for victims immediately after an assault, due to a lack of public or private transportation, or access to a vehicle. This made it difficult to receive treatment for severe injuries resulting from an assault or to complete a Sexual Assault Evidence Collection Kit. It was noted that victims often hesitated to seek services if it meant undertaking a long journey to Whitehorse, and some victims described long wait-times to receive a medivac or proper medical attention for urgent care. Additionally, participants acknowledged there were financial barriers for victims once they arrived in Whitehorse as they were responsible for arranging their own accommodations and finding transportation back to the community, even if they arrived by medivac.

Additionally, participants highlighted transportation challenges and barriers within their own communities. In certain areas, essential 24/7 emergency services, including the RCMP or Community Nursing, are situated far from residential areas. This poses difficulties for victims without access to a vehicle, as they would have to travel long distances, sometimes spanning several kilometres, or rely on foot travel to reach these services. This challenge is further exacerbated during the winter months, when temperatures can get dangerously low.

No safe spaces for victims and inadequate infrastructure

A notable barrier most participants discussed was the scarcity of safe places such as shelters, housing, and safe houses for victims in communities outside of Dawson, Watson Lake, and Whitehorse, and in some circumstances, shelters in those locations were described by victims as not being safe or confidential. Some victims described shelter spaces being primarily occupied by those who are housing insecure, not escaping violence, and witnessed illicit drug use, violence, and theft, creating an unsafe environment.

Participants stressed that in small communities, perpetrators have easier access to victims, and there are limited places for victims to seek refuge, instilling a heightened sense of fear. Without accessible and confidential spaces, victims may be hesitant to come forward or disclose their experiences, exacerbating their vulnerability to further harm. In communities where there was a safe house, researchers learned it was not a typically staffed resource and not exclusively for victims of sexualized violence but made available to anyone in crisis in the community.

The majority of participants highlighted that, in many communities, there is a significant shortage of housing options. This forces individuals into precarious situations where survival and meeting basic needs take precedence over personal safety. In some instances, enduring violence may be the only means to secure shelter or basic necessities.

"That's where predators come in – offering a safe space. It's part of the grooming, the set-up."

– Anonymous participant

Some participants discussed that the lack of community infrastructure also impeded the delivery of services to victims. In some cases, interviews conducted after a sexualized assault or legal testimonies took place in non-purpose-built spaces that are neither suitable nor safe for victims, nor conducive to maintaining confidentiality.

Lack of trauma-informed and cultural safety training among professionals

Most participants discussed barriers related to a lack of appropriate training among community health care providers, RCMP members, lawyers, volunteers, and other front-line positions who may be engaging with victims, particularly surrounding trauma-informed training or sexualized assault response training. Due to the unique challenges of staffing in remote communities, it was observed by many participants that some professionals also have limited experience working directly with Indigenous people. This can increase the risk of re-traumatization and act as a deterrent during the crucial moments a victim decides to seek support. It was widely acknowledged by these participants that supporting victims of sexualized violence requires a special set of skills that includes trauma-informed approaches, active listening, empathy, understanding of the local First Nations cultures, cultural sensitivity, and understanding of the unique needs and experiences of victims.

Victims frequently discussed experiencing victim-blaming or not being believed when they did seek assistance from RCMP or health care professionals, instead of being met with empathy, understanding, and support. This was especially true for Indigenous victims who also described experiencing racism and discrimination. Victims expressed a desire to be treated with compassion and for professionals to approach them without preconceived judgments or biases. This means recognizing the trauma they have endured without making assumptions about their background, behaviour, or choices.

Sexual Assault Evidence Kits are typically only offered in Yukon hospitals

During the engagement with RCMP and health care staff, researchers heard about the challenges of completing Sexual Assault Evidence Kits directly in the community following an assault. A Sexual Assault Evidence Kit is used to collect and preserve physical evidence from a victim's body or clothing following a sexualized assault. Proper collection and documentation are crucial to support an investigation and prosecution. These participants shared that victims do not usually present for evidence collection in the health centres, and some participants felt community nurses may not have the necessary training to complete Kits. Some expressed discomfort or unease with the prospect of completing a Kit due to the sensitive and intrusive nature of the procedure, and the risk of having evidence dismissed if completed incorrectly. This creates a significant barrier for victims who do not want to travel to a larger centre like Whitehorse, Watson Lake, or Dawson to access a hospital for the procedure.

Options to better support victims

Throughout the engagement with victims, Yukon First Nations governments and organizations, service providers, and other stakeholders, researchers sought input from participants on their suggestions and recommendations for improving, enhancing, and expanding SART and other supports for victims into rural Yukon communities. The following suggestions are the combined responses from all participants.

"We need nurses who care. They have no compassion. I'm afraid to go to clinics."

– Anonymous participant

Increased awareness of resources and services for victims of sexualized violence

Participants emphasized the need for enhanced visibility and understanding of resources for victims of sexualized violence within Yukon communities. They expressed a desire for more comprehensive awareness about how to refer to and access SART and other services for victims, not just in remote areas but also in Whitehorse. The rapid dissemination of information in these communities, primarily through social media and word-of-mouth, suggests that an increased awareness of SART would effectively reach those in need. Face-to-face interactions with SART members would further solidify understanding and trust. There is a call among most participants for SART to roll out information campaigns and training, complemented by promotional materials offering clear guidelines for formal and informal supports on how to support victims of sexualized violence.

Victims requested more online resources, as it is easier to access and more confidential. Specifically, a Yukon-specific one-stop site, with an online chat feature was suggested.

Prevention strategies

Many participants emphasized the need for a comprehensive prevention and awareness strategy to address sexualized violence. Some participants highlighted the importance of increasing community members' knowledge about positive sexual relationships and available resources, as well as promoting a cultural shift in attitudes, and challenging harmful beliefs that involve victim-blaming.

To enhance prevention, participants stressed the need for consistent and comprehensive sexual health education in schools, focusing on topics like consent, healthy relationships, and addressing sexist comments and predatory actions. They also highlighted the importance of engaging men in conversations about sexualized violence and encouraging them to take a leadership role in promoting consent and mental health. Participants suggested implementing comprehensive awareness campaigns through various channels, including at schools, local bars, and community events.

Collaborations among schools, First Nations, community groups, RCMP, and health care providers were recommended by participants to foster a culture of awareness. By coming together, participants felt the community can work collectively to promote comprehensive awareness and engage in safe dialogues surrounding sexualized violence prevention. This collaborative approach could ensure that multiple sectors of the community are involved, enabling a wider reach and more effective dissemination of information and resources.

Cultural supports and land-based healing

All participants acknowledged that the availability of accessible, culturally relevant, and continuous mental health and addiction support within the community is paramount. Participants advocated for the integration of cultural supports within existing community organizations, involving Indigenous mental health practitioners and emphasizing traditional healing practices, knowledge, and cultural teachings.

*"We need trauma-informed counsellors in schools, full time.
We need sex education and access to support."*
– Anonymous participant

Victims suggested there be support for communities to develop land- and cultural-based sexualized assault supports for Indigenous victims and survivors, inclusive of people of all genders and ages. Suggestions include the enhancement of existing community-based programs and the development of specialized services, blending informal with formalized elements. Participants recommended organizing camps or retreats overseen by trusted community figures to maintain safety and healing continuity.

Trauma-informed training for service providers and volunteers

Participants from both engagement initiatives emphasized the need for more training, including trauma-informed training, for service providers, volunteers, and supporting family or community members, to effectively respond to victims. They recommend comprehensive training that encompasses various elements, such as respectful language, empathy, understanding the impact of trauma, avoiding triggers, impacts of residential schools, intergenerational trauma, and promoting empowerment and collaboration. Participants emphasised that service providers engaging with victims must communicate in a non-blaming and non-judgmental manner, be knowledgeable about the physical and emotional effects of trauma, create safe spaces, respect cultural diversity, and empower victims. By enhancing their knowledge and skills through trauma-informed training, professionals can provide compassionate and culturally relevant care, which may encourage victims to seek services and support.

It was also highlighted by some participants that any service provider or volunteer engaging with child or youth victims must have a comprehensive understanding of the specific dynamics of sexualized violence and its impact on children and youth.

More service delivery options to meet the individual needs of victims

Participants had varying perspectives on the accessibility and delivery of services for victims of sexualized assault within communities. Some participants favoured services being available within communities, while others preferred services to be accessible but located outside of communities, specifically in Whitehorse, to address concerns about confidentiality.

Some victims strongly advocated for service options to be provided by non-government organizations or First Nations organizations, highlighting systemic racism and historical mistrust issues towards government service providers, particularly among First Nations communities.

While some stressed the importance of having services within communities to ensure accessibility, others prioritized the confidentiality offered by services based outside communities. The consensus among most participants was that a range of service delivery options, tailored to both individual and community needs, would be most effective, encompassing both resident and itinerant services. Emphasizing historical trust issues and systemic racism, many participants recommended non-government organizations or First Nations governments take on the responsibility of providing these services. Regardless of the approach, all participants felt that adequate resources are required to implement more community-based approaches to supporting victims.

Additionally, victims identified a need to hire more Indigenous workers in health care and support services (including trauma and addictions), including full-time counsellors and support workers, and a crisis team that is available 24/7, all of whom must have the capacity to serve children and youth in each Yukon First Nation.

"Before the Europeans came, we felt safe, happy, and never hit each other. We were raised on the land as peaceful people. We have a lot of erasing to do. It knocked us off balance – off centre. It's hard to come back to peace."

– Anonymous participant

Familiar and trusted staff

Participants highlighted that victims of sexualized violence require community-based supports that are familiar and relevant. Participants stressed the importance of having support staff available that can establish trust and build relationships with the community. Participants recommended there be more community-based support worker positions, ensuring a victim-centred approach. Participants stated victims may be more likely to seek help from individuals who understand the local context and have earned the trust of community members and First Nations. It was suggested by service providers that in some communities employing individuals from outside the community would be more beneficial to ensure a sense of confidentiality and safety, and to ensure victims have multiple service options and access points.

Collaboration to expand service coverage

Most participants emphasized the critical need for community collaboration and the establishment of local options or hubs to better support victims. They recognized the challenges faced by victims who may be reluctant or unable to travel to larger centres like Whitehorse for services. Some participants also commented how services are not available 24/7 and that many sexual assaults actually occur during evenings and weekends, when services are often closed or unavailable.

To address this, participants stressed the importance of developing a comprehensive network of services and supports within their own community that are accessible and available to victims after-hours and during times of crisis. This includes establishing partnerships with local organizations, health care providers, the First Nation, and community groups to ensure victims have accessible and reliable information about available resources. Participants recommended creating a centralized and up-to-date database or directory that outlines the various support organizations, counselling services, legal assistance, and other relevant resources within the community, and to have someone available to assist with service navigation. Other participants felt that having a dedicated interagency committee might be effective in supporting organizations to work together more effectively.

Some service providers commented that in communities where there are already more comprehensive services available – including emergency shelters and transition homes and enhanced health and hospital services – that identifying a lead agency or creating a role to coordinate other providers might improve efficiency and service usage.

Improved transportation options to and from communities

Participants from both engagement initiatives emphasized the need for better transportation options for victims, both within communities and to and from communities such as Dawson, Watson Lake, and Whitehorse. They recommended exploring reliable, confidential, and affordable transportation services that can assist victims with accessing support services, attending court proceedings, or seeking medical care. This also includes transportation options to return to their communities. Participants suggested utilizing trusted volunteers, EMS personnel, establishing a “shuttle bus” run by staff or volunteers, and developing policies for paid public or private transportation services to ensure victims have timely access to necessary resources.

More safe spaces and options

Participants consistently emphasized the critical need for additional safe spaces, recognizing the challenges faced by victims in small communities and how escaping from abusers can be particularly difficult. They stressed the importance of establishing safe houses or shelters where victims and their children can find immediate refuge, and support, and be presented with options on how to move forward.

Participants also highlighted the significance of providing victims with viable options to leave the community if requested, ensuring their safety and better access to confidential resources. Participants stressed that it is crucial to explore the possibility of facilitating relocation for victims to other communities or cities where they can rebuild their lives without the fear of encountering the perpetrator.

Training and policy guidance on performing Sexual Assault Evidence Kits

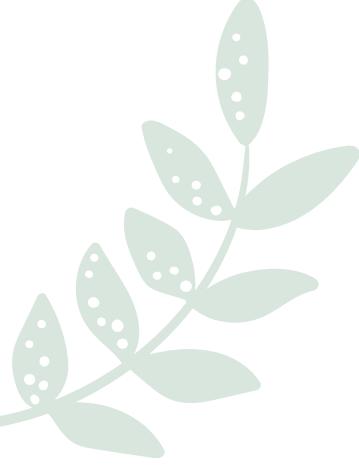
Health care staff emphasized the importance of establishing clear policy guidance that outlines expectations for completing Sexual Assault Evidence Kits in the community. This includes proper documentation, collection of physical evidence, and ensuring a proper chain of custody. This guidance should include standardized protocols, procedures, and best practices to ensure consistent and high-quality evidence collection. Adequate and consistent training for nurses is crucial if they are expected to perform Kits directly within the community as part of their scope of practice. Healthcare participants stressed that comprehensive training equips nurses with the necessary skills to administer Kits with compassion and effectiveness, ultimately enhancing care for victims and increasing the likelihood of admissible evidence in court. Additionally, some participants suggested that nurses in communities could offer Kits with real-time virtual clinical oversight and direction from SART physicians.

To ensure the integrity of evidence, these participants expressed a desire to better understand the forensic and legal requirements for the Kits. They sought clarity on the "minimum requirements" necessary for evidence integrity and whether there could be easier, lower-barrier methods for completing Kits or extending the admissibility of evidence beyond the standard allowable window of time¹. It was recommended that further exploration be conducted in collaboration with the SART partners to investigate options for making Kits more accessible in communities while confirming the evidence requirements for timely completion.

"To open someone up, you have to find a safe place to talk about it."

– Anonymous participant

¹ In the Yukon, there is a 7-day window to collect a Sexual Assault Evidence Kit.



Conclusion

The engagement among all participants provided valuable insights into the current state of services and supports for victims of sexualized violence in Yukon communities. What we heard is that victims of sexualized violence are hesitant and not accessing available resources due to a lack of awareness, feelings of shame and fear, systemic racism, and mistrust. Other key themes that emerged from the engagement include limited awareness of services among First Nations community service providers and victims, a lack of trauma-informed training among professionals, resource limitations, inconsistent service availability, unbalanced court processes, transportation barriers, limited cultural supports and Indigenous support staff.

To address these challenges, it is essential that the Government of Yukon and SART partners focus on targeted improvements. This includes: increasing the promotion and outreach of services and knowledge to enhance awareness among communities; expanding the pool of service providers by involving NGOs and First Nations organizations; improving court processes, investigations, and how victims engage with the justice system; addressing transportation barriers in remote areas; offering more culturally appropriate resources that address the ongoing impacts of colonialization; and strengthening staffing resources who understand the local context, are skilled in engaging with victims, and who can earn the trust of the community while maintaining confidentiality.

Moving forward, the next steps may involve collaboration between the Government of Yukon, partner agencies, and Yukon First Nations. This collaboration will be crucial in implementing the recommended improvements and addressing the identified challenges outlined in the report. By prioritizing the expansion of SART services into communities, the Government of Yukon can ensure that victims of sexualized violence receive comprehensive and culturally safe support and services, while also focusing on prevention and removing systemic barriers. This commitment to action will contribute to building a more inclusive and responsive support network, prioritizing the needs and well-being of victims, and ultimately create safer and healthier Yukon communities.

This report contains information that may be emotionally distressing or triggering for some readers. For immediate and confidential assistance please contact:

Sexualized Assault Support (SAS) Line

1-844-967-7275

The SAS Line is a Yukon-based line available 24 hours a day, 7 days a week.

sartyukon.ca

Canada Suicide Prevention Helpline

Call or text 988 if you or someone you know is in immediate crisis or has suicide-related concerns.

Available 24 hours a day, 7 days a week.

Hope for Wellness Help Line

1-855-242-3310 or hopeforwellness.ca

For immediate mental health counselling and crisis intervention for Indigenous Peoples.

Available 24 hours a day, 7 days a week.

Kids Help Phone

Call 1-800-668-6868 or text the word "CONNECT" to 686868

Free, confidential support to young people kidshelpphone.ca

Available 24 hours a day, 7 days a week.



Appendix

Final metrics for the SART expansion engagement social media campaign

The Ipsos Facebook campaign designed to engage victims of sexualized violence in the Yukon and their families generated more than 169k impressions (e.g., the content has appeared 169,804 times on screens) by 17,124 FB accounts. This has resulted in 586 engagements (e.g., likes, comments, shares, and reactions) and 726 clicks to the project landing page.

By gender, the campaign overall was seen by more women than men (55% vs. 43%). While this difference started off quite small in 18 to 24-year-olds (50% women, 47% men) it steadily increased with each age break, and by age 55-64, there was a 21 point (59% women, 38% men) in viewers by gender. Note: the splits don't add up to 100% due to an unknown category for gender.

For engagement, women of all ages (excluding those aged 18-24 where engagement was almost even) were disproportionately more likely than men to like, share or comment on our content.

When it came to visiting the project landing page, women overall were twice as likely to click on the ad than were men. A deeper dive by age revealed that women aged 25-34 visited the landing page most, followed by women aged 45-54, and women aged 35-44.

Ipsos does not (cannot) have an Instagram account. However, those involved in the project posted on personal Instagram and Facebook accounts and asked for the information to be spread by their followers / networks.

For the organic Twitter posts, Ipsos had 955 impressions with a 4% engagement rate.

SISCO reached 6,957 people on Meta Business, which included Facebook and Instagram.

What supports and services are needed and could be offered to survivors and victims of sexualized assault?

We want to talk to victims and survivors of sexualized assault about the expansion of SART services into your community.

Flip-over for more information.

If you have been affected by sexualized assault and would be interested in sharing your thoughts on how victims and survivors can be better supported, more information can be found at the link or QR code below.

Options to participate include a one-on-one interview, activities on our online hub, and/or sharing circle. Your identity will be kept confidential. You'll receive \$75 as a 'thank you' for your time.

<https://yourvoicematters.recollective.com/your-voice-matters/join?key=MVpN>



Ipsos

SART

Sexualized Assault Response Team



416.417.4068

Business card

Your Voice Matters



The Government of Yukon is working with SART partners, Ipsos, and SISCO to expand SART services in Yukon communities.

If you, or a family member, have experienced sexualized assault, we want to hear from you. Your input will help shape better support and services for victims and survivors in Yukon communities.

We offer several ways to contribute:

- Our online hub where you can provide input and remain private
- A one-on-one discussion via phone
- An in-person one-on-one discussion or sharing circle in your community (August)

To participate, scan the QR code or visit:

<https://yourvoicematters.recollective.com/your-voice-matters/join?key=MWpN>



Or call:
416.417.4068

Your identity will be kept confidential.

We deeply value your contribution. To show our appreciation for your courage and time, we'll offer \$75 as a thank you.

#Yukon, #SART, #SurvivorStories, #ShareYourStory, #YourVoiceMatters, #HealingTogether, #YukonCommunities, #YukonFirstNations



SART Sexualized Assault Response Team

8.5 x 11 in poster

Your Voice Matters



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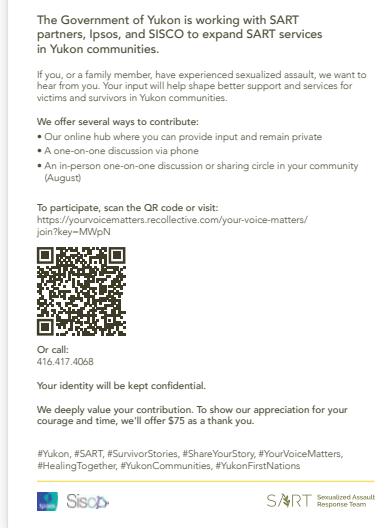
Sisco

SART Sexualized Assault Response Team

Facebook and Twitter post



Instagram and Twitter carousels



Facebook, Instagram and Snapchat story



