Aboriginal women in Canada are at significantly higher risk for spousal violence and spousal homicide than non-Indigenous women. Although the majority of Aboriginal people in Canada live in urban settings, there is a dearth of literature focusing on the experiences and violence prevention efforts of urban Aboriginal peoples. In order to understand issues relevant to the prevention of domestic violence among this population, we employed Aboriginal community development principles to conduct a scoping review of the relevant literature to explore the meanings and definitions, risk and protective factors, and prevention/intervention strategies within urban Aboriginal communities. Our study underscores that a number of domestic violence risk and protective factors are present in both Aboriginal and non-Aboriginal communities. However, the multifaceted impacts of colonization, including residential school trauma, is a key factor in understanding domestic violence in urban Aboriginal contexts. The limited available research on this topic highlights the need for Aboriginal-led research directed towards eliminating the legacy of violence for Aboriginal peoples in Canada.

**Keywords**: Aboriginal people, women, domestic violence, urban, risk, protective.

Aboriginal women in Canada are at significantly higher risk than non-Aboriginal women for all forms of violence, including stranger-violence, spousal violence and spousal homicide (Brownridge, 2008; Statistics Canada, 2006, 2011). In 2009, approximately 13% of Aboriginal women stated that they experienced a violent crime within the preceding 12 months, which is three times higher than non-Aboriginal women (Statistics Canada, 2011). Approximately 80% of these incidents were committed by
males. This extreme level of violence against Aboriginal women is further underscored by over 1181\(^1\) missing, murdered and stolen Aboriginal women in Canada over the past 35 years (Amnesty International, 2004; Native Women’s Association of Canada [NWAC], 2013; RCMP, 2014).

Aboriginal women have elevated rates of spousal violence from either a current or previous marital or common-law partner compared to non-Aboriginal women (15% vs. 6%) (Statistics Canada, 2011). They are also much more likely than non-Aboriginal women to have been sexually assaulted, to sustain injuries as a result of domestic violence, or to live in fear of their partners (Statistics Canada, 2011). These findings correspond with other regional contexts; for example, Aboriginal and Torres Strait Islander peoples are two to five times more likely to experience violence than their non-Aboriginal counterparts (Willis, 2011). The severity of violence against Aboriginal women around the globe has been described as far outweighing that of non-Aboriginal women (Deardren & Jones, 2008; Virueda & Payne, 2010).

Effective preventative measures are necessary to address the prevalence and severity of domestic violence against Aboriginal women. Yet, there is paucity of research that focuses on Aboriginal domestic violence from a primary prevention perspective. A systematic review of 506 articles on domestic violence in Aboriginal communities published before 2009, yielded very few with a focus on primary prevention, leading the authors to conclude that they “could not identify quantitative evidence of primary prevention” (Shea, Nahwegahbow, & Andersson, 2010, p. 53).

In Canada, Aboriginal peoples comprise a significant population. According to the Constitution Act, 1982 S.35(2), Aboriginal peoples include “the Indian, Inuit and Métis peoples of Canada.” Of the three Aboriginal groups, North American Indians (698,025) comprise the largest population, followed by Métis (389,780), and Inuit (50,480) (Statistics Canada, 2008). According to the 2006 Canadian census, nearly 1.2 million people reported Aboriginal ancestry, which represents an increase in growth of over 46% from the 1996 Census data (Statistics Canada, 2006). Despite a common misconception that Aboriginal peoples in Canada live primarily on reserves, they increasingly reside in urban areas. While comparisons between on-reserve and urban Aboriginal populations are hampered by inaccurate population statistics (Place, 2012), data from 2006 indicates that 54% of Aboriginal peoples live in urban environments, including large cities and smaller urban centers (Statistics Canada, 2006); this represents a 75% increase from 1996. Further, urban Aboriginal peoples in Canada are “geographically distributed, culturally and linguistically diverse in which many members retain strong links to rural and reserve communities” (Newhouse & Peters, 2001, p. 12). However, the Canadian Federal Government’s focus on reserve issues and problems has left urban Aboriginal concerns on the margins of funding and public policy (Environics Institute, 2010).

In spite of increasing urbanization, there is a dearth of literature that centers on domestic violence among Aboriginal people living in urban centers, with two notable exceptions. A review of four community-based surveys with urban American Aboriginal women by Oetzel and Duran (2004), uncovered victimization rates ranging from 46% to 91%, compared to 7% to 51% for non-Aboriginal women. A second urban study with American Indian women (N=112) living in New York City found that

\(^{1}\) The number of missing and murdered women is considered much higher by a number of human rights advocates.
65% had experienced some form of domestic violence, with 40% reporting multiple victimizations (Evans-Campbell, Lindhorst, Huang, & Walters, 2006). Diverse approaches to defining domestic violence in these studies, however, create barriers to comparative analyses. This obstacle can be generalized to other domestic violence literature, limiting the ability to obtain a comprehensive understanding of domestic violence within this population; thus compromising the knowledge from which to develop effective preventative strategies.

Understanding domestic violence from an Aboriginal perspective is imperative. Further, prevention approaches to domestic violence must account for Aboriginal people living in urban centers. Aboriginal-focused research recognizes the multidimensional and complex nature of domestic violence in Aboriginal communities (Brownridge, 2008; Proulx & Perrault, 2000) and can contribute to our understanding of urban Aboriginal women in particular (Evans-Campbell et al., 2006). The prevalence and severity of domestic violence within Aboriginal communities and against Aboriginal women in particular, and the increasing numbers of Aboriginal peoples living in urban centers created the impetus for this research. The study seeks to address the following research question: How does the current literature inform meanings and definitions, risk and protective factors, and prevention intervention strategies for domestic violence in urban Aboriginal communities? Given that urban Aboriginal concerns have been on the margins of funding and public policy, this study has implications for academics, policy makers and practitioners interested in domestic violence prevention within urban Aboriginal communities.

Methodology

Approach

As this research was exploratory in nature, we conducted a scoping literature review (Arksey & O’Malley, 2005) to “rapidly map the key concepts underpinning [our] research area and the main sources and types of evidence available” (Mays, Roberts, & Popay, 2001, p. 194). Canadian, American and Australian literature were included to determine Aboriginal-specific domestic violence definitions, risk and protective factors, and approaches to primary prevention and healing. We adopted Morrissette, McKenzie and Morrissette’s (1993) Aboriginal community development principals as a theoretical framework for our study: 1) recognition of a distinct Aboriginal worldview; 2) recognition of the impacts of colonialism on Aboriginal communities; 3) the use of cultural knowledge and traditions as an active component to retain an Aboriginal perspective in the community development process, and; 4) the use of community empowerment as a method of practice.

We identified peer-reviewed literature through academic database searches, and grey literature was accessed through Internet searches. Search terms included: those specific to setting- urban; population- Aboriginal, Métis, First Nations, and Indigenous; violence- trauma, and historical trauma, and risk and protective factors- risk factors, root causes, protective factors, residential schools, historical impacts, intergenerational, oppression, racism, discrimination, and violence. A total of 89 articles related to the research topic were identified, retrieved and reviewed, leading to the selection of 23 articles for this study. The selected articles were then sorted into three main categories based on the research question (i.e., definitions, root causes and risk factors, and protective factors). Within each category, open
coding, axial coding, and selective coding of articles were utilized to develop the themes discussed in the presentation of results (Corbin & Strauss, 1990).

Results

Meanings and Definitions of Domestic Violence: Role of Colonization and Residential School Experience

Under the category of definitions, colonization and residential schools were two primary themes found in the literature (see Table 1). The fundamental role of colonization and in particular, residential school experience, which was the systematic and legislated removal of children from their families to be placed in residential schools (Hawkeye Robertson, 2006), was consistently identified in the literature on Aboriginal domestic violence. Colonizing policies and practices had numerous detrimental effects on Aboriginal peoples and caused a complex array of intergenerational trauma symptoms (Assembly of First Nations, 1994). This context is foundational in contributing to the current experiences of Aboriginal peoples and communities. Consequently, domestic violence cannot be understood unless contextualized within the historical experiences of Aboriginal peoples. Historical knowledge is critical in order to understand definitions, risk and protective factors, and develop effective strategies for intervention and prevention of domestic violence within Aboriginal communities (Bopp, Bopp & Lane, 2003; New Brunswick Advisory Committee on Violence Against Aboriginal Women, 2008; VicHealth, 2007).

Table 1. Definitions and meanings

<table>
<thead>
<tr>
<th>Definitions</th>
<th>Key themes</th>
<th>Implication</th>
</tr>
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<tbody>
<tr>
<td>“A social syndrome based on and comprised of multiple facets, and not simply an undesirable behaviour, that resides within Aboriginal communities, families and individuals as well as within social and political dynamics” (Bopp et al., 2003, p. ix). Emphasis is that this syndrome is maintained through a constellation of social problems that operate together. Historical, social and economic conditions are intertwined.</td>
<td>Colonization</td>
<td>Domestic violence cannot be understood unless contextualized within the historical experiences of Aboriginal peoples,</td>
</tr>
<tr>
<td>“A serious abuse of power within the family, trust or dependency relationships” (Royal Commission on Aboriginal Peoples, 1996, p. 54). The report goes on to identify the distinction to Aboriginal family violence, in that: 1) it has invaded whole communities, cannot be considered a problem of a particular couple or an individual household; 2) can be traced in many cases to interventions of the state deliberately introduced to disrupt or displace the Aboriginal family, and; 3) is fostered and sustained by a racist social environment that promulgates demeaning stereotypes of Aboriginal women</td>
<td>Residential School Experience</td>
<td></td>
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The Royal Commission on Aboriginal Peoples (RCAP, 1996) defined domestic or family violence as “a serious abuse of power within the family, trust or dependency relationships” (p. 54). RCAP further noted the systemic nature of domestic violence:

The pattern of family violence experienced by Aboriginal people shares many features with violence in mainstream society, [however] it also has a distinctive face that is important to recognize as we search for understanding of causes and identify solutions. First, Aboriginal family violence is distinct in that it has invaded whole communities and cannot be considered a problem of a particular couple or an individual household. Second, the failure in family functioning can be traced in many cases to interventions of the state deliberately introduced to disrupt or displace the Aboriginal family. Third, violence within Aboriginal communities is fostered and sustained by a racist social environment that promulgates demeaning stereotypes of Aboriginal women and men and seeks to diminish their value as human beings and their right to be treated with dignity. (pp. 54-56)

The Aboriginal Healing Foundation contextualized Aboriginal family violence as “a social syndrome based on and comprised of multiple facets, and not simply an undesirable behaviour, that resides within Aboriginal communities, families and individuals as well as within social and political dynamics” (Bopp et al., 2003, p. ix). They emphasized that this syndrome is maintained through a constellation of social problems that operate together, and at higher frequencies than demographics would dictate, such as higher than expected levels of poverty, substance misuse and child welfare involvement. These social problems, they further suggest, work together to create an environment that produces the necessary conditions to maintain and elevate abuse at the individual, family and community level.

While many factors that exacerbate domestic violence exist in non-Aboriginal communities, the scope and nature of domestic violence within Aboriginal communities is critical. Domestic violence is an issue of entire communities and Nations of people; it exists within and between generations, and is intertwined with a myriad of historical, social and economic conditions (New Brunswick Advisory Committee on Violence Against Aboriginal Women, 2008; Proulx & Perrault, 2000).

**Risk Factors for Aboriginal Domestic Violence**

The following seven risk factors were associated most directly as precursors to domestic violence in Aboriginal communities within the reviewed literature: gender, socio-economic status, age, diminished cultural identity, residential school experience, racism and discrimination, and substance abuse (see Table 2). These risk factors can be placed within four levels of influence, as suggested by the World Health Organization (WHO and London School of Hygiene and Tropical Medicine, 2010). These four levels are:

1. Individual (biological and personal history factors that increase someone’s risk of being a victim or perpetrator of domestic violence); 2. Interpersonal or relational (factors that increase risk as a result of relationships with peers, intimate partners and family members); 3. Community (contexts in which individuals and relationships are embedded, such as schools, workplaces and neighborhoods); and; 4
societal/policy (societal norms, attitudes and policies that create gaps and tensions between groups of people).

**Table 2. Individual, community and interpersonal and societal/policy risk factors**

<table>
<thead>
<tr>
<th>Level</th>
<th>Risk Factor</th>
<th>General or Aboriginal Specific</th>
<th>Defining Feature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>Gender</td>
<td>General</td>
<td>Aboriginal women more likely to experience domestic violence than men.</td>
</tr>
<tr>
<td></td>
<td>Socio-economic status</td>
<td>General</td>
<td>Aboriginal women may be more vulnerable to economic dependency on an abusive partner.</td>
</tr>
<tr>
<td>Age</td>
<td>General</td>
<td></td>
<td>More young Aboriginal women may be at risk for domestic violence victimization in urban Aboriginal populations than non-Aboriginal populations.</td>
</tr>
<tr>
<td>Substance misuse</td>
<td>General</td>
<td></td>
<td>Research on substance misuse in Aboriginal communities must consider historical trauma and the impact of residential schools; to negate these issues heights the risk of perpetuating stigma and discrimination.</td>
</tr>
<tr>
<td>Community and Interpersonal</td>
<td>Residential school experience</td>
<td>Aboriginal Specific</td>
<td>Forced participation of Aboriginal children and youth in residential schools over multiple generations was noted as a risk factor for domestic violence that is unique to Aboriginal communities.</td>
</tr>
<tr>
<td>Societal/Policy</td>
<td>Discrimination and racism</td>
<td>Aboriginal Specific</td>
<td>Aboriginal women in Canada encounter unique obstacles and complexities as compared to non-Aboriginal women including racial discrimination, profiling and marginalization, which further contribute to the risk of domestic violence victimization.</td>
</tr>
<tr>
<td></td>
<td>Diminished cultural identity</td>
<td>Aboriginal Specific</td>
<td>Urban Aboriginal women specifically struggle to maintain an Aboriginal identity while attempting to live in a non-Aboriginal society.</td>
</tr>
</tbody>
</table>

**Individual level risk factors**

Gender, socio-economic status, age and substance abuse were identified as individual level risk factors for domestic violence within both Aboriginal and non-Aboriginal communities (Mann, 2005; Rennison, 2001; Statistics Canada, 2011). Gender is a primary risk factor; although Aboriginal and non-
Aboriginal men experience domestic violence, women are a primary target for domestic violence and are more likely to suffer from serious injury or death as a result (Statistics Canada, 2011; Ursel, Tutty, & LeMaistre, 2008). Oetzel and Duran (2004) suggest that Aboriginal women are five to eight times more likely to experience domestic violence than Aboriginal men.

Another risk factor for Aboriginal and non-Aboriginal women is socio-economic status (under-employment, lower income levels and minimal formal education). While both Aboriginal and non-Aboriginal women can experience financial constraints that impact their ability to leave an abusive relationship, higher rates of unemployment and underemployment are more common for Aboriginal women than other women in Canada, leaving them more frequently vulnerable to economic dependency on an abusive partner (Brownridge, 2008). Socio-economic status is a profound risk factor for urban Aboriginal women, given that rates of lone-parent families are higher than in non-Aboriginal populations, and most Aboriginal single parents are women (Place, 2012).

Age is also a risk factor for domestic violence, with younger women (ages 20-24) being more likely to experience domestic and sexual violence (Catalano, 2007; Statistics Canada, 2013). This is an important consideration, considering that the urban Aboriginal population, compared to the non-Aboriginal population, is much younger (Hanselman, 2001; Hull, 2006). Given that there are higher numbers of urban Aboriginal women, and that the urban Aboriginal population is generally younger, more young Aboriginal women may be at risk for domestic violence victimization in urban Aboriginal populations than non-Aboriginal populations.

Substance misuse is an additional risk factor for domestic violence in Aboriginal and non-Aboriginal intimate relationships. Abused Aboriginal women, however, are more likely to report that their partner had been drinking prior to an assault compared to non-Aboriginal women (Brownridge, 2008). Unfortunately, there are no data available for urban Aboriginal substance use rates, making it difficult to understand how this risk factor for domestic violence interacts with urban status (Place, 2012). It is important to note that research on substance misuse in Aboriginal communities must consider historical trauma and the impact of residential schools; to negate these issues heightens the risk of perpetuating stigma and discrimination.

Interpersonal, community and societal/policy level risk factors

In addition to the individual level risk factors identified in the literature, residential school experience, diminished cultural identity, and discrimination and racism were three additional risk factors for domestic violence uniquely relevant to Aboriginal populations. Due to the intersecting nature of these risk factors, they are cross-categorized within interpersonal, community and policy levels of influence.

Residential school experience was identified in the literature as both a risk factor and a defining feature or root cause of domestic violence within Aboriginal communities. Importantly, the forced participation of Aboriginal children and youth in residential schools over multiple generations was noted as a risk factor for domestic violence unique to Aboriginal communities.

Diminished cultural identity, which includes a lack of self-identification as an Aboriginal person or a negative perception of Aboriginal culture, was underscored as a second distinctive risk factor for domestic violence in Aboriginal communities (Puchala et al., 2010). The literature further highlights that
urban Aboriginal women specifically struggle to maintain an Aboriginal identity while attempting to live in non-Aboriginal society (Brownridge, 2008; Puchala et al., 2010).

Aboriginal people in Canada have been subjected to long-standing, historical negative stereotypes, discrimination and racism; these experiences create a third unique vulnerability for domestic violence in Aboriginal communities. A survey of urban Aboriginal peoples (N=2,614), for instance, found that 18% of individuals have negative experiences such “as exposure to racism and discrimination, shame, lower self-confidence and self-esteem, and hiding their identity as an Aboriginal person” (Environics Institute, 2010, p. 80). Puchala et al. (2010) emphasize that Aboriginal women in Canada encounter unique obstacles and complexities as compared to non-Aboriginal women including racial discrimination, profiling and marginalization, which further contribute to the risk of domestic violence victimization. This assertion is confirmed by studies that examine racism and discrimination and its impacts on Aboriginal women, men and children (Brownridge, 2008; Homel, Lincoln, & Herd, 1999; New Brunswick Advisory Committee on Violence Against Aboriginal Women, 2008).

According to the literature, risk factors for domestic violence within Aboriginal communities are situated within and between interpersonal, community and policy levels. Bopp et al. (2003) defined the interpersonal determinant level as “interactions between couples, families or groups of affiliation” (p. 63). Community experiences of domestic violence implicate gender constructs and perceptions of Aboriginal women’s roles and status, and rights between couples and within families. For instance, while gendered roles that value male dominance have been adopted through decades of assimilationist policies, this was not the nature of Aboriginal communities prior to European contact (Lucashenko & Best, 1995; Puchala et al., 2010). In a study of urban Aboriginal Australians, Lucashenko and Best (1995) argue that the violation of Aboriginal women has become a norm, which they suggest, can be traced back to the breakdown of traditional Aboriginal law which was then replaced by, “white norms of sexist behaviour in communities already made dysfunctional by colonization” (p. 20).

Children are both highly vulnerable to violence victimization and to adopting and carrying abusive behaviours into the next generation (Bopp et al., 2003). Within closed systems, such as nuclear or extended families that are socially isolated or erect dysfunctional coping strategies to avoid outside attention or influence, cycles of violence are intergenerational-- repeated from grandparent to parent to child, as a response to multiple historical and present day experiences of violence (Lederman, 1999; New Brunswick Advisory Committee on Violence Against Aboriginal Women, 2008). Adults, who were raised as children with violence in residential schools, often have no other framework to support positive parenting, and consequently may respond to children with violence. The devaluation of Aboriginal parents is further reinforced in daily experiences of stereotyping, racism and discrimination by the mainstream, which makes any change in parental approaches difficult to institute (Lederman, 1999).

The community determinant level as articulated by Bopp et al. (2003) “focuses on the current or historical relationships of members of a cultural or affinity group” (p. 51). According to the literature, colonization, and its lasting effects is a risk factor that operates in the community or societal level. Prior to European contact, there was little documented domestic violence in Aboriginal communities, and what existed was severely sanctioned (Bohn, 2003). Rapid colonization which imposed patriarchy, individual versus communal worldviews, the banning of Aboriginal spiritual and religious practices, cultural imperialism and the removal of massive numbers of children to boarding or residential schools, produced
cataclysmic impacts on entire Nations (Assembly of First Nations, 1994; Hawkeye Robertson, 2006). These factors both introduced and normalized abusive behaviours, with impacts that include a lasting, multi-generational, historical and unresolved trauma at a communal level, as well as post-traumatic stress that is both individual and multi-generational (Bombay, Matheson, & Anisman, 2014; Hawkeye Robertson, 2006; Whitbeck, Adams, Hoyt, & Chen, 2004). Current social environments within Aboriginal communities have been implicated in the violence perpetrated against Aboriginal women. Systemic oppression occurring over several generations has been internalized, creating a vicious cycle of behaviours, feelings and internalized oppression at the community level (Bopp et al., 2003).

Oetzel and Duran (2004) identify the public policy determinant level as “federal, provincial and Nation-based law which impacts domestic violence” (p. 60). The recent release of Honouring the Truth, Reconciling for the Future (Truth and Reconciliation Commission of Canada [TRC], 2015), a five-hundred and twenty-seven page account of Canada’s cultural genocide, documents a long history of public policy misuse. The report demonstrates the extent to which public policy was used with the intent that Aboriginal peoples “cease to exist as distinct legal, social, cultural, religious, and racial entities in Canada” (TRC, 2015, p. 1). One recent example of public policy (2011) that continues to marginalize Aboriginal women in Canada is Bill C-3, Gender Equity in Indian Registration Act (New Brunswick Advisory Committee on Violence Against Aboriginal Women, 2008; NWAC, 1991). This bill amends provisions of the Indian Act that the Court of Appeal for British Columbia found to be unconstitutional in the case of McIvor v. Canada. The intention of the Bill was to ensure that eligible grand-children of women who lost status as a result of marrying non-Aboriginal men would become entitled to registration (Indian status); however the fix was incomplete.

Bill C-31 reinstated women and children who had lost status because of sex discrimination to a second-class status category, in section 6(1)(c). While the intent of Bill C-3 may have been to promote gender equity in Aboriginal registration, it does not ensure that women and their descendants will be treated the same as men and their descendants in determining Indian status. The implication of this reinstated status is in the future: Indians who never lost status still confer status to their children, grandchildren, and great-grandchildren, while reinstated Indians can only confer status to their children, but not to their grandchildren or great-grandchildren. Bill C-31, while intending to promote gender equity in Aboriginal registration, continues to deny women and their descendants equal treatment to men and their descendants in determining Indian status. Demonstrated by this example, present day policy and legislative changes continue to rob Aboriginal women of control over their own destinies and identity (Puchala et al., 2010). Given that loss of identity has been identified as a risk factor for domestic violence, the legislative implications of Bill C-31 perpetuates this risk factor.

**Protective Factors for Aboriginal Domestic Violence**

The literature suggests a holistic approach is required to assess resilience within an Aboriginal context, focusing on individuals, families and communities (see Table 3). Three resilience or protective factors were identified, traditional knowledge, family strength and support networks, and positive self-identity (Homel et al., 1999; Kirmayer, Simpson, & Cargo, 2003; Shea et al., 2010).
Table 3. Protective factors

<table>
<thead>
<tr>
<th>Level</th>
<th>Protective Factor</th>
<th>General or Aboriginal Specific</th>
<th>Defining Feature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual</td>
<td>Positive self-identity</td>
<td>General</td>
<td>Aboriginal people who have re-built or re-discovered their Aboriginal identity through a de-colonizing lens have greater resilience.</td>
</tr>
<tr>
<td>Interpersonal</td>
<td>Family connections and supports</td>
<td>General, but may be more important for Aboriginal populations</td>
<td>Aboriginal peoples continue to recognize that personhood is defined by a “web of relationships that include... the extended family, kin and clan” (Kirmayer, 2003, p. 18), which positions them as part of a larger network.</td>
</tr>
<tr>
<td>Community</td>
<td>Traditional knowledge and practices</td>
<td>Aboriginal Specific</td>
<td>Increased degree of knowledge and participation in ceremony and spirituality and the (re)learning of cultural practices, norms and worldviews, are powerful sources of strength and healing.</td>
</tr>
</tbody>
</table>

Traditional knowledge and practices, which includes spirituality, knowledge and use of Elders, and knowledge of oral traditions, are strongly cited as a protective factor against domestic violence. An increased degree of knowledge and participation in ceremony and spirituality and the (re)learning of cultural practices, norms and worldviews, were consistently identified as powerful sources of strength and healing (Homel et al., 1999; Kirmayer et al., 2003; Shea et al., 2010). Knowledge of and use of Elders as a form of traditional knowledge was also emphasized in the literature as a protective factor. As keepers of the culture, healthy Elders are viewed as those who can transmit messages both to individuals and through organized programs that allow participants to re-build a positive connection to traditional values and ways of life (Heavy Runner & Marshal, 2003). The passing down of oral traditions was cited as an additional protective element against violence. Oral traditions contain valuable lessons about sacred teachings as well as the lifestyles, values and roles of both men and women as equally contributing to the health of the community prior to contact (Heavy Runner & Marshal, 2003). Access to traditional healing practices, in particular, are perhaps more important than access to mainstream preventative health services for the majority of urban Aboriginal people (Place, 2012).

Family connections and supports were cited as a key domestic violence protective factor. Homel et al. (1999) note that support which emerges from within Aboriginal families, in times of crisis, often provides invisible resources to those in greatest need, due to the comfort of shared identity, history and coping strategies. Kirmayer et al. (2003) emphasize that “cultural continuity” and a common history are strengths for many Aboriginal families who are impacted by domestic violence. Specifically, they assert that Aboriginal peoples continue to recognize that personhood is defined by a “web of relationships that include... the extended family, kin and clan” (p. 18), which positions them as part of a larger network.
The final protective factor noted in the literature is positive self-identity. The development of a positive self-identity is linked to a greater sense of self-esteem and self-value (Shea et al., 2010). Place (2012) suggests an association between positive self-identity and the use of traditional healing practices. As strength of Aboriginal identity increases, so does the perceived importance of access to traditional healing (Place, 2012). For Aboriginal peoples, creating a positive self-identity may be a challenging task amidst negative and damaging social messages steeped in racism, and lack of understanding of colonial history. Other structural barriers, such as the unequal position of women, were noted (Shea et al., 2010). Individuals who are able to re-build or discover their Aboriginal identity through a de-colonizing lens have greater resilience in times of stress (Heavy Runner & Marshal, 2003).

Discussion

Despite the widely held view that Aboriginal peoples have been over-researched, literature that addresses the nature of urban Aboriginal domestic violence is extremely limited (National Association of Friendship Centres, 2013; Place, 2012). Given that violence intersects with so many other determinants of health and health outcomes, considering its impact in urban contexts is crucial. Further research is thus necessary, and should be driven by the needs of Aboriginal peoples. Both Aboriginal and non-Aboriginal researchers should collaborate directly and meaningfully with Aboriginal people impacted by domestic violence and those tasked with providing services and designing policies and programming to address this important issue.

This review suggests that domestic violence in urban Aboriginal communities is underpinned by many of the same definitional, risk and protective factors as non-Aboriginal society. The literature also underscores unique risk factors for Aboriginal people, and suggests that all risk factors may disproportionately target urban Aboriginal populations over non-Aboriginal populations living in urban contexts. Specifically, that National Association of Friendship Centres (2013) states that age, gender and socio-economic status are three risk factors, which collectively, may place urban Aboriginal communities at higher risk of domestic violence. Importantly, findings from this study highlight the legacy of the colonial system and over 150 years of residential school policies and practices as foundational in developing an understanding of domestic violence in Aboriginal communities. Resultantly, the profound and persistent damages of what has been labeled Canada’s ‘cultural genocide’ (TRC, 2015) impede ongoing and significant efforts of Aboriginal communities to heal, address systemic oppression, rebuild and regenerate entire Nations and communities.

However entrenched the social syndrome of domestic violence may be within Aboriginal communities, findings from our review also suggest that there are several protective factors which can interrupt and replace the current context. Specifically, traditional knowledge and community-centered practices have been cited and effective approaches. Building on the limited body of prevention-focused research, Brownridge (2008) emphasizes that further study is required to understand the relationship between colonization and domestic violence. Andersson & Nahwegahbow (2010) specifically call for research that reaches upstream into cultural origins, building upon the resilience found there to prevent domestic violence.

Access to appropriate and responsive primary prevention services has been identified as critical to improving health status among Aboriginal populations (Browne et al., 2009). Considering that domestic
violence is perhaps the most pressing health concern of Aboriginal women (Centre’s for Excellence Women’s Health, 2002), the need for accessible and appropriate domestic violence prevention strategies is critical (Browne et al., 2009). Studies on primary care and preventative care services have consistently shown that mainstream models have not been sufficient in serving urban Aboriginal populations (Browne et al., 2009; Place, 2012). As greater numbers of Aboriginal people move from reserves to urban centers, the need for quality prevention programming will increase. From a policy perspective, greater funding needs to be allocated towards evaluating and identifying evidence-based prevention programming in the area of domestic violence in order to ensure that violence prevention outcomes are being achieved.

Finally, findings from this review highlight the critical need for further research on Aboriginal domestic violence within the urban context, particularly from a primary prevention standpoint. Responding to a critique by the National Association of Friendship Centres (2013) that current research does not reflect urban Aboriginal women’s’ needs or priorities, future efforts should be intentionally community-led, beneficial to Aboriginal communities and directed towards eliminating the legacy of violence against Aboriginal peoples in Canada.

References


