

# Rural and Northern Perspectives: The View from Here

Fall, 2016: Volume 11, Issue 2

## Message From the Chair Submitted by Dr. Shelley Goodwin



Victoria harbour provided a stunning backdrop for the CPA convention. Our Sections' agenda provided ample opportunity to connect with colleagues while partaking in the sections program. Dr. Bob McIlwraith was our guest speaker and he provided an engaging and well attended presentation on the

"Twenty Years of the Rural & Northern Psychology Program in Manitoba: What we have learned". There was ample food for thought presented on the opportunities and challenges of this program's development.

We had a broad range of topics presented in our rural and northern research symposium and again this year it was deemed a success. After our AGM, section members headed to a local restaurant to continue the dialogue. For me it is what makes our section such an essential part of the convention experience. I enjoy the camaraderie and friendships. With the new submission policy that the CPA is announcing for convention, we will not be having a research symposium. We will be looking at ways we can collaborate with other sections to provide convention activities that cut across several areas of interest so that multiple sections will be attending. This will allow for less concurrent sessions during convention, which is a frequent complaint, and, potentially, a better quality session as a result of the potential competition. Your executive are beginning to collaborate with several sections around future opportunities for convention content. We will keep you posted!

I am very excited to announce we have a new chair for 2017. AnnaMarie Carlson will be assuming the Chair role in June 2017. We will be looking for a new secretary/treasurer

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## Message from the Chair, continued...

as well so please consider submitting your name for this position.

The CPA is looking for people to submit fact sheets and if anyone has ideas it is a great opportunity to contribute to this knowledge base that can inform practice across Canada. If you have an idea please contact Lisa Votta-Bleeker at head office at [LVottaBleeker@cpa.ca](mailto:LVottaBleeker@cpa.ca)

In my last message I spoke about interprofessional collaborative care. I hope you have taken the past few months to learn more about this innovative practice model. It is definitely coming your way. Maybe you have begun to look at ways you can implement it into your practice. Here are two articles that may stimulate your thinking. Judi Malone, who was our Section Chair several years ago, and her colleague published an article that detailed a creative way to work from a collaborative approach (see reference below). Another option to stimulate your thinking is a recent article written by an interprofessional research team of which I am a member (see references below). Innovation in rural and northern practice and research is possible and happening around us. I invite you to consider how you can join in.

Today I walked into my kitchen and found a basket of freshly picked apples, as well as tomatoes, zucchini, green onions, red peppers, and Aunt Molly's ground cherries. The cleaning out of the garden to prepare for winter has begun. Salsa, salads, pickles, pies, or . . . , so many options. It is this sense of variety and unlimited options that I feel when I reflect on my rural practice. I am writing this during the Thanksgiving period and as I look around me it is easy to give thanks for the abundance of treasures that surrounds me. May you also feel the possibilities that surround you and embrace those loved ones around you that nurture your soul.

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## North Star Award Winning Submission by Melissa Wuerch, M.A.

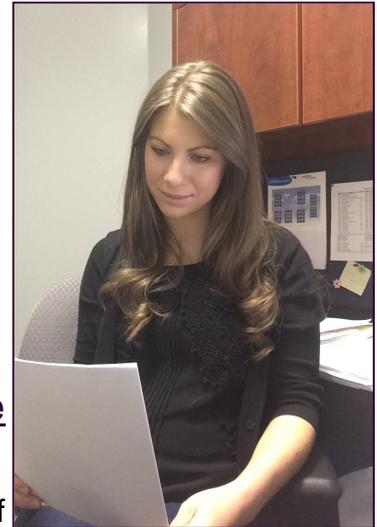
Doctoral Student in Clinical Psychology  
University of Regina &  
Student Representative for CPA Rural and  
Northern Section

### Responding to Intimate Partner Violence: Experiences of Service Providers in Rural and Northern Communities

Intimate partner violence (IPV) is one of the most pervasive forms of gender-based violence (Heise, Ellsberg, & Gottmoeller, 2002). When compared to the other provinces and the national average, Saskatchewan has one of the highest rates of IPV (Statistics Canada, 2013). Saskatchewan is geographically diverse, with approximately 67% and 33% of its population living in urban centres and rural areas, respectively (Statistics Canada, 2011). The limited research that exists to describe the unique experiences of women living in rural and northern areas suggests that there are higher rates of IPV within these regions when compared to urban areas (e.g., Peek-Asa et al., 2011). Women living in rural and northern communities are exposed to significantly higher rates of psychological abuse, more severe physical violence, which may include the use of a weapon, and are at increased risk for intimate partner homicide (e.g., Jennings & Piquero, 2008; Peek-Asa et al., 2011; Shannon et al., 2006). Of further concern is there are significant barriers that exist in relation to accessing services, such as distance to the nearest formal service, geographic isolation, issues regarding confidentiality and anonymity, dual relationships (e.g., local police officer being friends with perpetrator), limited culturally sensitive services, as well as a lack of knowledge regarding available resources and services, which may all lead to hesitation when deciding whether or not to seek refuge (e.g., Averill et al., 2007; McGillivray & Comaskey, 1999; Peek-Asa et al., 2011; Riddell et al., 2009).

Due to the difficulties associated with conducting research within rural and northern regions, few studies to date have attempted to describe the unique needs of women living in these communities across Canada. Research examining the multiple ways in which contextual factors impact access to resources and services is well warranted. This research will better inform the effectiveness of national services and the allocation of funding to better support survivors of IPV. The project entitled "Rural and Northern Community Response to Intimate Partner Violence," funded by the Social Sciences and Humanities Research Council/Community University Research Alliance (SSHRC-CURA), sought to enhance the understanding of community response to IPV in rural and northern areas across Saskatchewan, Manitoba, Alberta, and the Northwest Territories. The remaining portion of this article will focus on the information gathered from a focus group conducted within one profiled rural community in Saskatchewan.

A focus group was chosen as an appropriate interview tool, as it encourages an active and organic





Dr. Shelley Goodwin presents the North Star Award to recipient, Melissa Wuerch.

## North Star Award Winning Submission continued...

engagement of opinions among participants. The discussion was guided by the question of “What do you see as the needs of women coming through your services with regard to IPV?” Seven individuals participated in the focus group, including two members of the RCMP and five members from community agencies (e.g., victim services, shelters). The focus group consisted of seven females and one male. Six participants identified as Caucasian and one as Aboriginal.

In the context of the results presented below, of importance to remember is that service providers in rural and northern regions are often providing the best service possible while faced with increasing demands and budget cuts. Further, it is acknowledged that the findings presented are not verified as accurate or valid; however, as years of career involvement varied among participants, it is thought that the emerging themes are an accurate reflection of the challenges experienced, and as such, will be important to consider moving forward. A selection of quotations is also included below to better illustrate the emerging themes.

Throughout the focus group, it became apparent that the profiled rural region faced unique challenges in relation to providing support to survivors of IPV. The lack of transportation and communication devices seemed to directly affect the safety of women survivors. Several participants stated that although services are available, the isolated nature of rural communities (e.g., significant distance from nearest shelter), in combination with limited transportation and not all residents having a valid driver’s license, impacted the ability to access timely and vital support services. In addition, participants mentioned that difficulties with communication have occurred due to individuals not having landlines and/or cell phones, as well as limited communication capacity (e.g., cell phone used for only texting purposes, bad reception).

The lack of safe houses and shelters within rural areas may force survivors of IPV to leave their community. When discussing the issues associated with building a safe shelter within a rural area, problems with funding, confidentiality, and ensuring the shelter is safe and secure were noted. In terms of leaving a rural community, participants stated that women may return back to their abusive partner after leaving, often times due to feeling isolated from their home community and/or not having meaningful social support. One participant described that “it’s a very lonely life” after leaving, attributing this to the notion that most women have lived in the same rural community their whole life. Participants noted that another factor affecting whether or not uprooting their life is necessary in order to seek refuge is that most services are used to tackle a variety of concerns (e.g., domestic violence, mental health, addiction), which creates issues with services being stretched too thin and potentially not being as effective for some cases.

Frustration with the court system was communicated within the focus group, centering on the

## North Star Award Winning Submission continued...

unfortunate reality that domestic violence cases are often “thrown in” with all other cases. This may lead to survivors being re-victimized, first by having to retell their traumatic abuse story in open court, where anyone can watch and listen, and second, because often times, there is a lack of support within the court room. The lack of social support within the court room was attributed to possible generational violence. Several service providers described that individuals tend to not realize the severity of the abuse they are experiencing. It was apparent that these longstanding issues need to be addressed, as they contribute to the cycle of violence.

To address the challenges discussed, suggestions for improvement were offered by all members of the focus group. Increasing educational opportunities for community members, especially youth, to encourage conversation about domestic violence and healthy relationships, offering culturally appropriate services, finding creative ways to increase safety for survivors of IPV (e.g., IPV educational seminars under a false name), developing peer-support programs, establishing consistency and collaboration between agencies providing programs and services, and ensuring that all service providers are aware of what is being offered at other agencies inside and outside of their community were described as important moving forward. Although it was clear that more programs and resources need to be made available, and it is important for different agencies to be aware of what is offered in their community, participants indicated that their current partnerships and collaboration with various agencies could be considered a success.

To conclude, the present study examined the challenges faced among service providers when providing support to IPV survivors in one profiled rural community. Although efforts were made to ensure confidentiality among the participants, it may be the case that participants feared disclosing certain information or reporting in an honest manner due to the challenges of maintaining full confidentiality. Despite this, all participants appeared forthcoming with information, as they were motivated and passionate about informing social issues and positively influencing change. Our hope is that through dissemination and discussion with community-based service agencies, these findings will aid in deciphering the effectiveness of support services and resources for women living in geographical diverse areas within Saskatchewan.

### **Challenges**

- **Lack of transportation:** “...most of our residents do not have a licence. So I mean, that is their barrier right there. They are completely isolated when they are on reserves or

*“...with services being stretched too thin and potentially not being as effective for some cases.”*

## North Star Award Winning Submission continued...

*“Change needs to happen. Change especially at the younger generations...”*

wherever they're coming from because they don't drive.”

- **Returning to abusive partner:** “That’s one of the reasons some of the women, after being apart for two or three months, end up going back. They don’t know anyone other than agency individuals. You know, there isn’t anyone close...”
- **Difficulties with communication devices:** “So, they’re still left in the dangerous situations because of no transportation. And many many times no way of communicating. Like a lot of women that come off the reserves too, they might have a cell phone but you can only text them. So, they’re going to the health clinic or wherever to use the phone.”
- **Issue with court system:** “Well, just they throw them in with every other case...there’s no privacy, no follow up. They just throw them in with the drunk drivers and the people who shoplift or this and that. I think that’s, the focus should be a separate court for domestic violence cases, for privacy, for follow-up.”
- **Generational violence:** “And it starts very young. A student was talking about how she already smacks around her boyfriend so that he knows he can’t control her. So she said, “I give him black eyes sometimes” because she felt that was the only way to... he hadn’t even done anything yet she said.”

### Suggestions

- **Education within the community:** “Change needs to happen. Change especially at the younger generations, typically dealing with kids at school to learn about healthy and unhealthy relationships. I think the earlier we plant the seed...you know we give lots of presentations to the parents but there are also children.”
- **Increasing safety for IPV survivors:** “They have [second stage housing] in the Kentucky university. The bottom floor is offices, the second floor is the shelter and crisis counselling, and the third floor is the second stage housing. And then from there then they go to their own apartments.”
- **Confidentiality at community events:** “How do they go to a domestic violence seminar without their husband being like, “oh, where are you going today.” Like how do we...do we call it cooking and hope the right people show up?”
- **Developing peer support programs:** “Bringing together a lot of the ex-residents and their children...so we’re trying to build more support for each other.”

### Successes

- **Networking:** “I think our partnerships are working fairly well. We know what resources are available to us. So from our standpoint, like if I have someone who comes in and is in need of help. I know what resources and supports I can reach out to and kind

## North Star Award Winning Submission continued...

of direct her in different ways.”

- **Networking (2):** “I guess I would say the networking is very good. We met once every three months. That’s police that sit on there, and us, and you know, the partnership is, is excellent. They really know what is going on in this area and we pass around information and stuff like that.”

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Melissa Wuerch presenting at CPA, 2016. Photo courtesy of Dr. Shelley Goodwin.



## Minutes of the Rural and Northern Psychology Section Annual Business Meeting

Location: Saanich 2, Victoria Conference Center Level 1

Date: June 9, 2016

Time: 17:00-18:00

Attendees: AnnaMarie Carlson (recording secretary), Karen Dyck, Shelley Goodwin (chair), Colton McDonald (student rep), Jolene Kinley

1. Approval of Minutes from 2015 meeting was deferred as we did not reach quorum for attendance.
2. The North Star Award had been presented earlier in the day to Melissa Wuerch for her presentation "Responding to Intimate Partner Violence: Experiences of Service Providers in Rural and Northern Communities"
3. Chair's Report: Dues had been increased last year to cover the cost of student members. This issue had been distributed via email to be voted on and had passed. Membership this year was 65 members and 103 student members. This is a decline from the year previous which was about 100 members. Two newsletters were produced by our fabulous editor Amanda Lints-Martindale. Each section had been advised to update language in the Terms of Reference, such that the word "by-law" would be replaced by the term "Term of Reference".
4. Secretary/Treasurer's Report: revenue for the year 2015 was \$646. Revenue thus far in 2016 was \$740. Expenses will be less in 2016 than 2015 as we only had one North Star Recipient and our sponsored speaker Dr. McIlwraith had some expenses covered by other means and had generously donated his time to speak.
5. Shelley proposed an award "Distinguished professional contributions to rural and northern practice" to recognize outstanding rural and northern practitioners in psychology. Nominations will be considered for service in any area of psychological practice. Preference will be given to individuals who serve diverse client groups. Nominations may be judged based on peer recognition, advancement of psychology as a profession to public, advancing rural/northern practice, professional association honours or meritorious accomplishments. Shelley offered to fund this award of \$200 value. Attendees were in support.
6. AnnaMarie proposed utilizing revenue to fund an award to fund/offset costs of a small research project

## AGM minutes continued...

in rural/northern area. Award recipients would be asked to present at CPA/contribute to newsletter. Discussion was raised regarding whether this might also be an incentive to attract new members. Action was to contact Cara Bernard to obtain data on how many of our members attend CPA. Overall, attendees decided to defer this project until we have more revenue.

7. Colton McDonald proposed a database to list rural resources. Attendees supported the usefulness of this idea; however, it was decided that ultimately the development and upkeep may be too resource intensive to pursue. An additional suggestion was made to have provincial reps provide links to services in their areas that we might allow access to on our website. Discussion followed regarding accessibility and purpose of the R&N webpage. Attendees in agreement to start a Facebook page which Colton offered to spearhead\*.
8. Discussion regarding planning for next year's convention in Toronto consisted of generating speaker ideas, and other sections we might collaborate with to nominate a speaker. It was suggested that our reception be held offsite to experience local fare.
9. Executive nominations: Chair AnnaMarie Carlson (no nominations had been received prior to conference); Student deferred for a call to be put out by Shelley over email. Note was made that next year the secretary-treasurer position will be available,
10. Review of provincial reps. SK and members of the executive are the only provinces to have volunteered provincial rep. Action to update and advertise list of representations and put out another call.
11. Reception with speaker to follow at Zambri's restaurant.

\*Addendum: Feedback was provided to section chair's regarding Facebook usage and this task was delegated to AnnaMarie.



**Editor's Feature: Rural Residency Program at the University of Manitoba**  
**Submitted by previous residents, Lauren Wysman and Jonathan Jetté**

*“...the psychological services in the rural region are offered from a community-based consultative service delivery*

The rural stream internship/residency at the University of Manitoba is designed to provide residents with diverse primary care experiences working with clients across the lifespan. Specifically, the psychological services in the rural region are offered from a community-based consultative service delivery model. Within this framework, we as residents provided consultative services to community mental health workers based in several rural communities. We also had the opportunity to complete psychological assessments and provide therapy services (both to individuals and in groups) to clients across diverse ages, backgrounds, and with a variety of presenting problems. When prospective residents meet with current residents in interview week, typically in January of each year, it is while the current residents are still completing urban rotations and have yet to begin working rurally. Thus, at those meetings, we are not able to comment yet on our experiences in rural practice. Now that we have both completed our residency and have moved on to different areas of practice, we thought it could be useful to provide our thoughts both on the broad residency program and on the rural portion of our residency training.

**Why did you select this internship?**

**Jonathan:** I still remember that interview question. At that time my simple answer was, “Because it is the rural program.” Quite honestly, everything from this program was a perfect match for me and made it very attractive. Some of the aspects of this residency that appealed to me the most were as follows: 1) it is one of the only programs where one can gain experience working in a rural area; 2) working from a multidisciplinary consultation model was important to me; 3) it provided the opportunity to work with adult and adolescent populations; and, 4) many people spoke very highly of the program.

**Lauren:** The rural-generalist track of the University of Manitoba program is one of the few internship sites in Canada (to my knowledge) where training is evenly distributed between working with youth and adult populations. I left my interview day with a great impression of my prospective supervisors, both for my urban and rural

## U of M Rural Residency Program continued...

rotations. Further, as I still wanted to remain open to a variety of career paths after internship, I thought that the generalist nature of the training in this department would be to my benefit.

### What did you enjoy the most about your internship?

**Jonathan:** The people. I believe I developed connections for life through this journey. The supervisors with whom I was involved were very dedicated people who valued their roles as supervisors. They were knowledgeable, supportive, and challenging. They helped me to develop into a competent professional. Another aspect that I enjoyed on internship was my cohort of residents. Being part of such a genuine, fun group of open-minded people was a highlight of my residency. Finally, I also valued the connections I made with my clients and the mental health workers.

**Lauren:** This internship is incredibly well organized in order to provide residents with the best training possible throughout the year. I looked forward to seeing my cohort of residents at our academic half-day activities (almost every Thursday of the year), especially when I was working rurally and had less frequent contact with the other residents at work. I enjoyed the opportunity to be guided in my clinical work by several dedicated supervisors. Specifically, in my rural rotation, I enjoyed being able to work with clients with very diverse presenting problems, exploring new theoretical orientations to treatment, and being given increasing levels of independence related to clinical decision-making by my supervisor.

### What would you have liked to have known before the internship?

**Jonathan:** I am still trying to figure out what was the worst; the cold months of winter or the mosquitoes' reign of terror in the last month of summer. Seriously, it is very difficult to come up with an answer for that question. There was the travel time, but at the same time I was expecting to do quite a bit of driving. I think what I would have liked to have known is how amazing this experience would be, knowing that I would not have any doubt at all about having chosen this residency.



Left to Right: **Mr. Jonathan Jetté**, Resident, **Ms. Lauren Wysman**, Resident, Ms. Laura Scallion, Resident, Dr. Sandra Thompson, Rural Clinical Psychologist, Dr. Jolene Kinley, Rural Clinical Psychologist; Photo courtesy of Dr. Mike Teschuk, Training Director.

## U of M Rural Residency Program continued...

*“I knew that the rural rotation would be flexible, but I had not realized just how flexible it would be until it began.”*

**Lauren:** I think my final impression of the residency is consistent with my impression of the site at the time of my interview. I knew that the rural rotation would be flexible, but I had not realized just how flexible it would be until it began. For example, I had plenty of opportunities to select cases based on training gaps that I would like to fill and I was able to run a group therapy program that was based on my interest in adjustment to chronic pain. I also wish I would have known how much I was going to like working in the Department of Clinical Health Psychology and living in Winnipeg, given that I certainly did not do much exploring of the city when I was in town for just one day in the middle of winter for my interview.

**The “afterlife”:** How did completing the generalist rural residency benefit you in your career?

**Jonathan:** The generalist training has set me up to be competitive in the current market, as I believe that I can adapt to most clinical situations. Of course, I know that I still need to do reading and consultation if I pursue a job in a field in which I have less familiarity. The experience of working within a multidisciplinary team was also highly valuable, given that my current work involves consultation, teaching, and team treatment coordination.

**Lauren:** I think one of the major strengths of the generalist rural rotation is that it enabled me to continue building my competencies in working with clients across the lifespan with diverse presenting issues. Right now, I am working as a clinical psychologist in supervised practice in a small town in Ontario, in a private practice. Clients come from various referral sources from many of the surrounding communities, and arrive with a variety of presenting concerns. As I began working in this position, I reflected on how my residency training was really an asset to me. It was an asset not only with respect to my general growth as a clinician on residency, but also with respect to building my confidence in my abilities to adapt to different clinical situations and be helpful to clients across the lifespan.

For more information on the Rural Residence program at the University of Manitoba's Department of Clinical Health Psychology please go to [http://umanitoba.ca/faculties/health\\_sciences/medicine/units/clinical\\_health\\_psych/education/internship/](http://umanitoba.ca/faculties/health_sciences/medicine/units/clinical_health_psych/education/internship/)

## Thank-you to our Reviewers!

The section would like to thank everyone who donated their time and expertise in order to review submissions for presentation at CPA. In particular, our gratitude is extended to:

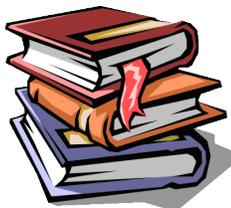
Ameeta Dudani

Emma Eaton

Natalie Frost

Sarah Elizabeth Ivens

Christopher Mushquash



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## New Newsletter Feature: What are you Reading?

The newsletter will be featuring a new “mini” column in each issue that will focus on the books that our members are reading. This will increase awareness of potential resources, stimulate conversations among colleagues and hopefully pique your general interest! This week our ever-energetic chair, Dr. Shelley Goodwin has submitted her “reading list” for your consideration:

- **Mindfulness for two: An acceptance and commitment therapy approach to mindfulness in psychotherapy** by Kelly Wilson and Troy Dufrene
- **Teamwork, Leadership and communication: Collaboration basics for health professionals.** By Deborah Lake, Krista Baerg & Teresa Paslawski

What are **YOU** reading? We would love to know!

## Call for Volunteers!

Would you like to be more involved in the Rural and Northern section of CPA? The Rural and Northern section of CPA is currently looking for provincial representatives from each province and territory across the country. We currently have representatives from Saskatchewan and Manitoba; all other provinces and territories do not yet have a designated representative. If you are interested in representing your province, please contact our chair, Dr. Shelley Goodwin at [slgoodwin@eastlink.ca](mailto:slgoodwin@eastlink.ca).



## Connect on Social Media!

The Rural and Northern Section will soon be on social media. Watch for developments and information on how to connect and become involved!

## Important Notice re: Student Fees

We have been advised by head office that in June 2016 the Board of Directors decided that all sections must charge their student members at least \$1. I know that two years ago Rural and Northern section members voted and the result was that we would not charge our student members. However with this new ruling it appears that we must charge students \$1. We are disappointed by this decision.

Effective this coming year you will see the \$1 fee for students while the regular membership fee remains the same. Unfortunately this is a Board of Directors requirement so there is no “wiggle room”. Membership has always expressed the desire to keep our student members happy and engaged and the executive will be working hard to achieve this goal.

- Dr. Shelley Goodwin, Chair.

## Editor's Comments

### Submitted by Dr. Amanda Lints-Martindale



Greetings! I hope that you have enjoyed this issue of *The View from Here*—our Rural and Northern Newsletter. As always, I would like to extend my appreciation to our contributors to this issue of the newsletter. If you would like to make a contribution to *The View From Here*, please contact me directly by email ([Amanda.Lints-Martindale@umanitoba.ca](mailto:Amanda.Lints-Martindale@umanitoba.ca)). Submissions can also be forwarded to our chair, Dr. Shelley Goodwin. Submissions can be made at any time, and can include:

- an article for our regular feature “a week/day in the life of a rural and/or northern psychologist
- research findings and summaries
- information on upcoming conferences and training opportunities
- articles on the experience, challenges, and benefits of practicing in rural and/or northern locations
- photos
- ethical dilemmas
- book review(s)
- any other topic related to rural and northern psychology in Canada!

The Newsletter is produced by the Rural and Northern Section of the Canadian Psychological Association (CPA) and is distributed to members of the Section. The purpose of the Rural and Northern Section is to support and enhance the practice of rural and northern psychology. The goals of the section are: 1) Establish a network of professionals interested in the areas of rural and northern psychology (this may include individuals currently practicing in rural/northern areas of those with an interest in this area), 2) Enhance professional connectedness by facilitating linkages between rural and northern practitioners, 3) Distribute information relevant to the practice of rural and northern psychology, 4) Provide a forum to discuss practice issues unique to this specialty, and 5) Introduce students and new or interested psychologists to rural and northern practice.

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