The Pandemic's Influence on Gender-Based Violence Among Arab-Speaking Women in the Halton Region:

Impact, Challenges, and Responses
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ACKNOWLEDGEMENT

We recognize and respect the historic lands of the Mississauga’s of the Credit First Nation under treaty, and the ancestral territories of the Haudenosaunee, Huron-Wendat, and Anishinabek nations where we assemble today. Today, this gathering place continues to be home to numerous Indigenous people from all over Turtle Island. We express our deep gratitude for the privilege to work and learn on this cherished land.

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EXECUTIVE SUMMARY

This comprehensive research assessment probes into the complex lived experiences of Arab-speaking women in the Halton region, employing an intersectional lens that considers their gender, ethnic, linguistic, social class, and religious diversity. These women, we've found, confront a variety of gender-based violence in public spaces, with verbal and physical violence being the most predominant. Domestic violence extends beyond intimate-partner incidents, infiltrating familial relationships with fathers, brothers, and mothers-in-law.

When attempting to access services, Arab-speaking women face a myriad of intersectional challenges - language inaccessibility, a dearth of cultural sensitivity, harmful stereotypes, discrimination, and islamophobia. Alarmingly, the pandemic period has witnessed a surge in the occurrence and intensity of domestic violence incidents, largely propelled by escalating financial stressors, mental health issues, and heightened uncertainties.

However, the Covid-19 pandemic has also seen resilient survivors harness online support networks, helplines, and technology-based solutions to access assistance and information.

In light of these findings, our recommendations underscore the importance of dual-layered education. Service providers require enhanced knowledge about the diverse cultures and experiences of Arab-speaking communities, enabling them to deliver culturally sensitive, trauma-informed care. Additionally, it's crucial to establish mandatory training for newcomers and recent immigrants, covering an understanding of the Canadian context, language nuances, available services, legal frameworks, and public safety measures.

In-depth exploration of this issue further revealed:

- Arab-speaking women are victims of gender-based violence across a multitude of settings, including academic institutions, workplaces, hospitals, streets, and public transportation. These experiences are influenced by their intersecting identities and roles.
- Despite the diversity among Arab-speaking women, they are often erroneously homogenized, neglecting their unique intersections of ethnicity, language, and religion.
- Prevalent stereotypes portray Arab-speaking women as uneducated or ignorant, leading to subpar treatment from service providers.
- The accumulation of negative stereotypes and experiences, compounded by their intersectional identities, hinders Arab-speaking women's sense of belonging, safety, and their capacity to contribute constructively to their communities and society.
- Services for survivors of gender-based violence often lack culturally sensitive and trauma-informed approaches, even when they do exist.
INTRODUCTION

Gender-based violence (GBV) often emerges as a predictable and consistent result of economic, epidemiological, and environmental crises like the COVID-19 pandemic. While evidence of increased (GBV) may not be immediately apparent, the stressors of social and physical isolation, interruptions to employment, and financial pressures can create conflict in households and increase the risk factors associated with intimate partner and sexual violence, such as alcohol use (Government of Canada, 2012). Changes in the utilization of (GBV)-related services, such as shelters, hotlines, and emergency rooms, have varied across different regions in Canada since physical distancing policies were implemented. Some organizations have reported spikes in service usage, while others have seen decreases. These trends will need to be monitored over time and require comprehensive funding to ensure adequate support for survivors of GBV before, during, and after the pandemic. Despite some identified barriers to accessing services, the full extent of (GBV) during the pandemic may not be fully understood until after the shutdown, as past crises have demonstrated (Western University, 2021).

People who are marginalized are at a greater risk of violence due to fear, stigma, and xenophobia. Misinformation and fear can lead to harmful outcomes for women and children, especially those who are already marginalized. In some cases, the pandemic has been used to intensify abusive control over partners by exploiting fear of infection to isolate them or prevent them from seeking help.

Xenophobia related to COVID-19 has led to discrimination and harassment against East Asian individuals, including hate crimes and assaults (Kestler-D'Amours, 2020). In summer of 2021, during the pandemic, a white male from London, Ontario, intentionally struck five members of
immigrant family while they were taking a walk, just like many Canadians families do during the pandemic. The 21-year-old man targeted the Afzaal family because they were Muslim. He killed four family members, three women and one man, who were simply taking a walk. He did not know the victims before, but he recognized them because the mother and grandmother wore hijabs. New court documents revealed to the media that the murderer had hate related material on a device and may have consumed white supremacist content on the dark web (CP24, 2022).

Being socially and physically isolated leads to violence and makes it harder for people to escape abusive situations. Physical distancing measures bring families closer together and separate them from their informal support systems like friends, coworkers, and extended family. These factors make it more challenging for women to leave abusive situations due to emotional attachment, psychological distress, financial dependence, and fear of escalated violence. Quarantines can also exacerbate stress and mental health issues for all partners, which can increase the risk of violence and make it difficult to plan for safety (Bielski, 2020). Isolation also leads to neglect for women and children with physical disabilities who rely on others for mobility, groceries, and communication. While virtual connections and online support are crucial, they may not be as accessible for low-income individuals, people with disabilities, and older adults.

Women in healthcare, particularly those in lower-class positions, are more vulnerable to harm related to COVID-19, both directly (such as illness) and indirectly (including trauma, violence, and stress). In Canada, more than half of all female workers are employed in roles related to caring, clerical work, catering, cashiering, and cleaning (Moyser, 2017). Over 90% of nurses, 75% of respiratory therapists, and 90% of personal support workers are women (Scott, 2020). This puts them at a higher risk of exposure to COVID-19. Violence and sexual harassment from colleagues, patients, and the public are common issues in the healthcare sector, particularly during emergencies, which can also lead to isolation, burnout, and secondary trauma that negatively impact the long-term well-being of healthcare workers (Peterman et al., 2020).

A survey by Women’s Shelters Canada found that 52% of Canadian shelters reported an increase in demand for their services during the pandemic, with 63% of shelters noting an increase in requests for emergency shelter (Women’s Shelters Canada, 2020). Moreover, a study by the Canadian Women’s Foundation found that 1 in 10 women in Canada reported experiencing violence in the past year, with rates even higher for women from marginalized communities (Canadian Women's Foundation, 2020).

**Immigrant and refugee communities**

The World Health Organization and other international organizations acknowledge that immigrant and refugee women, as well as those with precarious migration status, displaced, migrants and refugees, and individuals living in conflict-affected areas, older women, and women with disabilities, are at greater risk of violence during the COVID-19 pandemic (WHO, 2020). Intimate partner violence in these communities may be triggered by pre-migration trauma and stress associated with settlement and integration (CREVAWC, 2020). There are specific barriers to reporting GBV and seeking help for immigrant and refugee women, including fear of
deportation, limited knowledge of available services, discrimination, and language barriers (Rezaee, 2020). Social isolation, lack of social networks, and cultural norms related to disclosure of domestic violence also contribute to underreporting. Precarious work is highly gendered and racialized, making immigrant and refugee women with precarious status and undocumented women more vulnerable to violence and abuse. The COVID-19 pandemic has increased the marginalization of migrant women, with exclusion from government relief and assistance programs and intensified pre-pandemic issues such as poor working conditions and lack of benefits. Immigrant women's burden of caregiving has also increased, especially with online schooling for children. (CREVAWC, 2020).

Despite these alarming trends, there is a lack of research on the specific impact of the pandemic on Arab-speaking women in Canada, particularly those residing in the Halton Region. This assessment report seeks to fill this gap by documenting the narratives and stories of Arab-speaking women in the region, examining the impact of the pandemic on gender-based violence, and assessing the accessibility of legal, social, and mental health services. By doing so, this report will contribute to a deeper understanding of the issue and inform evidence-based responses to support survivors and prevent gender-based violence.

**PROJECT OVERVIEW**

The assessment research titled "The Pandemic's Influence on Gender-Based Violence Among Arab-Speaking Women in the Halton Region" is a meticulous endeavor aimed at documenting and analyzing the repercussions of the global pandemic on gender-based violence (GBV) affecting Arab-speaking women in the Halton Region.

1.1 Purpose

This assessment has been meticulously designed to scrutinize the intensified issue of GBV among Arab-speaking women in the Halton region amidst the pandemic. It seeks to narrate the poignant tales of these women, assess the pandemic's impact, and gauge the accessibility of vital services such as legal aid, social support, and mental health services.

1.2 Scope

The project specifically targets Arab-speaking women, aged between 18 and 65, residing in the Halton region. Hailing from diverse ethnic and religious backgrounds, these women's stories will shed light on the prevalence of GBV, including intimate-partner violence and public sphere GBV. Additionally, it explores the key obstacles that these women face in accessing mental health, social, and legal services.
1.3 Objective

This assessment strives to unearth the seldom discussed issue of GBV among Arab-speaking women, particularly in the Halton Region, a subset of the Canadian populace that often goes understudied. The project's primary aim is to illuminate the exacerbated impact of the pandemic on GBV and catalogue the challenges Arab-speaking women face when trying to access essential services. Ultimately, the project's intention is to foster a more comprehensive discussion on GBV within the Arab-speaking community, raise awareness, engineer preventive measures, and streamline access to essential services.

1.4 Audience

This assessment report is intended for an audience that includes government representatives, community organizations, service providers, researchers, and subject-matter experts. The research findings will be published in academic journals and will be made available to organizations and the public via a dedicated project website. Policy recommendations highlighting gaps in service provision and participant-identified challenges will be published. In addition, focus group discussions will foster a network among regional service providers and create a comprehensive Ontario-wide database, listing mental health, social, and legal services referrals suitable for Arab-speaking women.
The Arab population in Canada is rapidly expanding due to immigration, with approximately 70% of the 1 million Arab-Canadians being first-generation immigrants. This community is predicted to increase by 200% within the next decade (Arab Canadian Institute, 2023). The Canadian Encyclopedia indicates that the Arab ethnic group comprises individuals predominantly of Lebanese, Egyptian, and Maghrebi origin among others, with around 40% identifying as Muslims, 29% as Catholics, and 20% as Eastern Orthodox (The Canadian Encyclopedia, n.d.). Significant challenges such as gender-based violence and religious and ethnic discrimination confront Arabs migrating to Canada. According to the National Action Plan (2019), about 32% of women have reported feeling uncomfortable or unsafe in public due to unwelcome abusive behavior (Canada’s National Action Plan to end Gender-Based Violence, 2019). Post-September 2001, an increase in hostility towards Canadian Muslims has been noted, with the recorded attacks surging from 84 in 2020 to 144 in 2021 (Helly, 2004; Mitrovica, 2023). Systemic discrimination, including workplace bias, has been highlighted as a primary reason for the wage disparity among immigrants despite equal or higher education levels (Mercier-Dalphond & Helly, 2021).

A comprehensive study on anti-Muslim violence explored hate crimes and the factors preventing reporting, such as socioeconomic barriers and fears relating to employment and immigration status (Mercier-Dalphond & Helly, 2021). Globally, domestic violence (DV) impacts an estimated 30% of women and is becoming recognized as a clinical and public health issue (Devries et al., 2013). The perception of DV as a private matter often silences the victims, exacerbated by immigration-induced family tensions and altered gender roles (Hawcroft et al., 2019; Hosseini-Sedehi, 2016). However, majority of the victims favor involving the healthcare system in managing domestic abuse (Usta et al., 2012). Discrimination faced by victims seeking help and ineffective laws highlight the need for culturally competent supports and services (Douki et al., 2003; Okeke-Ihejirika et al., 2020).

Furthermore, studies emphasize the need for healthcare providers to consider cultural factors when evaluating victims’ situations and attitudes towards solutions such as divorce (Gharaibeh & Oweis, 2009). The lack of culturally and linguistically appropriate care, financial limitations, and fear of accessing care form significant barriers to seeking help (Shalabi, Mitchell, & Andersson, 2015; Smith et al., 2021). Expanding social networks and continuing education on cultural diversity for service providers have been proposed as possible solutions (Holtmann, 2016).

During the COVID-19 pandemic, Arab immigrants faced additional challenges, with Statistics Canada noting higher concerns regarding social bonds and domestic abuse among immigrants (LaRochelle-Côté & Uppal, 2020). Barriers to healthcare access include language obstacles, significant service wait times, and transportation issues, necessitating social policies to improve healthcare accessibility (Etowa et al., 2021). The pandemic experience of Syrian refugees in
Canada provided insights into the broader challenges of social isolation, financial challenges, and housing instability faced by immigrants (Rabiah-Mohammed et al., 2022)

**APPROACH AND METHODOLOGY**

Collaboratively, WJF, QED, and HMC Connections worked to engage 200 participants in a range of research activities. We aimed to distribute between 80-100 surveys, facilitate 3-5 focus groups, and conduct 20-25 interviews, all centered around two pivotal research questions: "How has the pandemic influenced gender-based violence against Arab-speaking women in the Halton region?" and "What effect has COVID-19 had on the availability of legal, social, and mental health services?". The steps involved in developing and implementing this research approach are detailed as follows:

**3.1 Literature Review:**

The QED research team conducted an exhaustive literature review, compiling a deep understanding of the current state of knowledge on the subject, which established a solid foundation for the research project. This background knowledge contributed significantly to crafting the questions for focus groups, interviews, and surveys. Academics and subject matter experts vetted these questions for feedback.

**3.2 Certification:**

All researchers on the QED team are certified through the "Course on Research Ethics," aligned with the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS 2: CORE 2022).

**3.3 Surveys and Interviews:**

Focus Group Interviews, moderated by QED and attended by representatives from HMC and WJF, marked the beginning of the research activities. QED efficiently coordinated four focus group interviews, involving diverse professionals from settlement agencies, Halton police, crisis workers, and experts in Gender-Based Violence and Women's Studies.

HMC Connections capitalized on their extensive network in the Halton region for survey participant recruitment, arranging social events for Arabic-speaking women. The QED research team introduced the research program at these events, explaining the survey purpose and assisting with completion as required. In addition to the in-person survey, an online version was
also circulated. Consequently, a total of 118 surveys were completed - 106 in Arabic and 12 in English.

Survey responses or recommendations from HMC Connections crisis managers influenced the selection of interviewees, leading to a total of 20 in-depth interviews conducted via in-person meetings or online Zoom sessions.

3.4 Research Findings Analysis:

The QED research team, along with the WJF team, began the analysis phase with preliminary findings, review sessions from the focus groups, interviews, and surveys.

Each interview and survey data was then structured into maps, highlighting the participant's background, experienced violence types, and their suggestions.

Regular meetings facilitated a comprehensive understanding of the information derived from these maps, enabling us to develop the research synthesis.

3.5 Conclusions and Recommendations:

By correlating data collected from surveys and interviews with our understanding of the research background and the literature review findings, we derived the research conclusions. Group discussions among the QED research team and consultations with the WJF team facilitated this process.

The recommendations phase integrated suggestions from the survey and interview participants and focus group discussions, focusing on handling gender-based violence in private and public spheres. The focus group also explored methods for increasing awareness about gender-based violence and identifying gaps in current policies and services.

3.6 Communication and Outreach:

The dissemination of our research findings is designed to be robust and varied in its approach. Central to our strategy is the establishment of the www.noonstories.ca website. This devoted online space seeks to spotlight the personal narratives and experiences of Arab-speaking women who have immigrated to Canada, featuring videos, text, and infographics. Serving dual roles, it acts as an informative resource and a consciousness-raising platform, bringing to light the direct and collateral impacts of the COVID-19 pandemic on gender-based violence within this community. The website is committed to amplifying the voices and stories of marginalized women, providing a personal and in-depth look into their experiences.

Beyond our online presence, we have been active contributors in academic circles, showcasing our findings at relevant conferences. On March 23, 2023, we took part in the "Transforming our Social World: Radical Practices of World Building & Destruction" conference, organized by the
Feminist Institute for Social Transformation at Carleton University. This presented a valuable forum for interacting with fellow researchers and activists, exchanging knowledge and gaining insights from their research and experiences.

Additionally, on June 16, 2023, we participated in the "Identity, Home, and Belonging" conference, hosted by the Centre for Feminist Research at York University. This event facilitated the exploration of themes deeply connected to our research and allowed for the wider dissemination of our findings in an academic setting.

Through our digital platform and active participation in academic conferences, we strive to broaden the reach of our research, thereby fostering informed conversations on the urgent issue of gender-based violence amongst Arab-speaking women in Canada.
Gender-Based Violence (GBV): refers to acts of violence that are perpetrated against individuals based on their gender identity, perceived gender, or gender expression (Status of Women Canada, 2020, para 1). Such acts of violence encompass a broad spectrum of human rights violations, including sexual assault, rape, domestic violence, sexual harassment, sexual abuse of children, and trafficking of women and girls. Because GBV is shaped by a variety of intersecting factors, such as geopolitical and environmental conditions, citizenship status, socioeconomic and relationship/family status, access to resources and support systems, health, mental health, and [dis]ability, among others, it is difficult to define in a universally applicable way (Hynes & Lopes, 2004).

Intersectionality: is a perspective used to examine and comprehend how gender interacts with other characteristics of identity, such as socioeconomic status, race, ethnicity, migration status, sexual orientation, and ability, to produce distinct experiences of privilege or oppression (Crenshaw, 1994). This approach recognizes that individuals have multiple identities that are shaped by societal interactions, past events, and power structures. As a result, it can be used in the context of development and human rights initiatives to advance social justice efforts.

Gendered Islamophobia: refers to a distinct type of discrimination faced by Muslim women that arises from entrenched negative stereotypes based on their ethnic, religious, and racial identities. This discrimination is not only individual but also systemic, with various forms of oppression such as racism, sexism, and classism rooted in specific ideological and discursive processes. These oppressive practices are perpetuated through both individual actions and systemic structures (Zine, 2006).

Xenophobia: is defined as the irrational fear, dislike, or hatred of people from other countries or cultures. This can manifest in a range of discriminatory behaviors, including prejudice, exclusion, and violence. Xenophobia is often based on a fear of the unknown, a belief in cultural superiority, or a desire to maintain one's own cultural identity (UNHCR. (2020).

Microaggressions: are subtle forms of discrimination that individuals, especially those from marginalized or stigmatized groups, often encounter in their everyday lives. These subtle insults and dismissals, frequently based on gender, race, or sexual orientation, can have significant impacts on an individual's mental and emotional well-being (Sue et al., 2007). Microaggressions contribute to the perpetuation of stereotypes, inequality, and gender-based discrimination, leading to unique experiences of oppression (Crenshaw, 1989).
Focus Group Findings

The focus group discussions component of this research included conducting four virtual focus group meetings discussing issues related to gender-based violence in the Arab community, the impact of the pandemic and insights into the survey in a semi-structured interview form. The first focus group was held on the 29th Sep 2022, participants included service providers and representatives from Home Suite Hope, Halton’s Women’s Place, Halton Police Service, Halton’s Multicultural Council and Sexual Assault and Violence Intervention Services (SAVIS). Second focus group discussion was held on the 6th October 2022, it included participants from Halton’s Women’s Place, Sakeenah Homes, Halton’s Multicultural Council and an independent community activist and consultant. Our third focus group discussion was held on the 9th October 2022, it included participants from social work and shelters background who have worked previously with NISA Homes and Naseeha Helpline. Fourth and final focus group discussion was held on the 17th December 2022 over Zoom, and included community specialists, settlement specialists and crisis intervention specialists from Halton’s Multicultural Council.

Violence

1-Domestic Violence

According to women’s shelters, women seek their services when facing any and all forms of violence, including emotional, verbal, psychological, physical and sexual violence. In one shelter’s case, the prime cause for women seeking shelters is due to emotional and verbal violence before it escalates to physical abuse. In another, almost 80% of women came due to physical and sexual violence, in many cases these two were combined and if there is a physical violence it is usually accompanied by sexual violence as well. Settlement agencies report that in domestic violence the most common form of violence reported is physical violence, followed by sexual, emotional and financial. Verbal violence is another form that often occurs in intimate-partner relationships but is rarely validated. A caseworker reports that an Arab-speaking person seeking assistance from Ontario Works was denied certain benefits because the service provider did not perceive emotional violence as carrying the same trauma as physical violence. This issue was brought up in another case where a client was facing verbal violence and police services did not consider this a case that required safety intervention.

It is important to highlight that cases of domestic violence are not limited to intimate-partner violence but encompasses violence that takes place between any relationship within the household. Gender-based violence against women in the domestic sphere in the nuclear family can occur between spouses, father-daughter and brother-sister relationships. In one case
brought to a shelter, a woman was severely physically abused by her father because she refused to get married.

In many cases of violence, police recognize the gap of underreporting due to fear of consequences. Victims of domestic violence contact the police when they’ve reached the utmost peak of their crisis, at which point the police remove the abuser and restrain them from returning to their families. For families with limited income, this harms the spouse as well as the children in the long run, and many victims return to the police to downplay the incident or drop the charges. There is, therefore, a critical need for building an infrastructure of support so that victims of abuse in domestic violence are not financially dependent on their abuser.

2-GBV in the Public Sphere

A. Academic Spaces
In public spaces, gender-based violence against Arab-speaking women was reported to have taken various forms in academic spaces. A professor in our focus group discussion shared that Arab-speaking female students on campus face various forms of violence such as physical violence of their hijabs being pulled off, verbal abuse of slurs thrown at them at bus stops and students making sexual comments to make them feel uncomfortable.

B. Hospitals
Community settlement specialists reported cases of verbal violence occurring in hospitals by staff against Arab-speaking women. Such cases included one’s personal experience as a visible Muslim woman as she faced verbal abuse from hospital staff while attending to her mother in palliative care. It is critical to note that violence against Arab-speaking women occurs in public spaces as well as domestically.
Overview

I. Violence

Women shelters reported an increase in the cases of physical violence in intimate partner relationships during the pandemic. In most cases women seek shelters when harm has been escalating in the household before it reaches the tip of physical violence. Shelter service providers report incidents of verbal, emotional and psychological violence as the reasons for seeking out shelters. During the pandemic, however, women shelters’ report seeing more intensified violence in victims of domestic violence. This may be due to lack of opportunity of escaping the households during lockdown and reaching support, or fear of going to a shelter during Covid-19 breakouts. Women facing intimate partner violence during the pandemic lacked privacy at home to call or reach out for help when the abusive partner is at home. The pandemic, as one shelter service provider remarks, unfortunately facilitated an expansion of control by abusive spouses. A case that was brought to the shelter was of a woman who was not able to escape her household during the pandemic as the spouse tracked her phone and installed cameras and microphones across the house tracking her every move.

Moreover, cases of violence became more complex during the pandemic due to other difficulties occurring simultaneously. As shelter service providers report, crisis calls tended to be on finding a safe shelter from the abuse, but during the pandemic clients were struggling with finding a shelter, food insecurity, mental health crisis as well as unemployment. The pandemic witnessed various forms of loss, the loss of loved ones, of financial security, children accessing in-person schooling and others, and such losses compounded domestic violence. Mental health crises were also on the rise, with many reported cases of anxiety and depression, which was a contributor to increased cases of domestic and gender-based violence.

II. Capacity Building

As the volume of domestic violence cases increased during the pandemic; shelters struggled to accommodate incoming cases. Shelters report having to decrease their capacity by 50% during the pandemic due to space limitations. Some clients were referred to hotels, a governmental grant supported the transition to hotels for survivors of abuse seeking shelters, others were referred to another shelter. One shelter reported an increase as high as 700% of people requesting support, and having to expand from one shelter to five in the duration of 2 years and currently opening their 6th and 7th.

With increased capacity came increased needs, the pandemic witnessed an increase in families struggling with unemployment and food insecurity, and many depended on shelters for provision. Community support played a vital role in supporting each other, and families came together to support shelters in creating food packages for struggling families.
III. Accessibility

Although the pandemic brought additional pressures to victims of abuse, it also facilitated accessibility to services through virtual access. Women facing intimate-partner abuse were able to join virtual programs and educational sessions that they might not have been able to join in-person beforehand. The availability of online programs and events allowed them to join from the privacy of their phones and receive the necessary information and assistance.

Overview

The community plays a vital role in the narratives and cases of gender-based violence, either as means of support of further alienation. An executive director of a women’s shelter reported that during her five years of work, she has seen that when the community shuts down a woman for leaving the abuser, it creates another level of oppression and isolation for the survivor of violence as she loses her entire network of support. A crisis intervention specialist reports that is a critical issue for the newcomer Arab-speaking community where many women fear that they will be blamed for the abuse if they come out to their communities or reach to police services.

However, community plays an important role in ensuring the presence of a safety net that women can depend upon. Community-based organizations and organizations that offer culturally-inclusive services to newcomers are vital for establishing the safety net and being resourceful in connecting women with the necessary services. Investing in grassroot initiatives and the infrastructures of communities acts as a preventative measure for violence, as well as a safety net for victims of violence. Communal support can serve as an ad hoc alternative to seeking services.

I. Stigma

Women in the Arab speaking community fear reporting cases of abuse or seeking mental health services due to taboos and stigmas surrounding mental health, and instead seek comfort in their friends and community. Women fear that their families and communities will shun them if they leave their marriages or report the abuse from their intimate partner. In close knit communities, such as the Arab-speaking community in the Halton region, community members are fairly acquainted with each other, and individuals are aware of their social image. When incidents of violence, abuse or mental health crises occur; victims are hesitant to reach out to services because of that social image and status. This creates a barrier within the community for recognizing and reporting incidents of violence. Organizations that offer therapy and shelter services that are culturally-sensitive to Arab-speaking women report that women are hesitant to seek such services due to fear that the community or the family will find out. Therapists, shelter providers and case workers need to build trust and safety for women and assure their privacy and confidentiality.
II. Religion

In the context of the Arab-speaking community in the Halton Region, religious leaders in mosques and churches play a role in mediating marital conflict and resolving cases of violence. Despite the fact that such mosques and churches are dominantly Arab-speaking, and therefore language is not a barrier; they carry cultural understandings and interpretation of the text that does not fit the Canadian context. Religious leaders mediating conflict resolution and mental health crises are also problematic as they lack the necessary training and qualifications.

Overview

I. Gender Roles

An aspect highlighted by focus group participants who work in women shelters and support women after the abuse, is the cultural gap in Arab-speaking women when it comes to employment. When a survivor of domestic abuse is admitted to a women’s shelter, and applies for welfare and Ontario Works; there is an expectation that she must seek employment. Shelter workers argue that Arab-speaking women perceive employment as a male dominated occupation while women are expected to tend to house affairs. This gendered view of work complicates the issue, as survivors are in need of financial resources and the means to achieve them is through employment but they are unwilling to work.

This issue gets tangled with other critical issues that the victim is facing simultaneously such as leaving her household, adjusting to the new shelter environment, healing from the abuse, worries about the future, financial stability, caring for her children and others while being in a state of trauma. The added pressure of seeking employment, especially to women who have never worked, adds another level of anxiety and stress to the existing trauma.

On gender roles, an expert participant who has worked with the Arab community for a long time, cites it as a main factor of conflict for newcomers and Arab immigrants in Canada. The culture in countries of origin is for the man to be the financial caretaker and provider for the family, and many men refuse that the woman has to work as well. Despite the economic need for two-income households to ensure a relatively stable financial state for the family; many men in the Arab-speaking community regard this as a failure on their end and a source of shame if they cannot singlehandedly provide for the family. A representative of a women’s shelter that caters mostly to women in marginalized communities also raises the issue of gender roles as a barrier for women. In certain cases, the spouse does not want his wife to seek employment as he fears she will be exposed to certain ideas that threaten the family’s culture. In others, it is a matter of ego where the man can only feel in control if he denies the woman from having financial independence. Emotional abuse also plays a role, as one of our participants reported Arab-speaking women are made to feel guilty if they seek employment. They are accused of falling short on their parenting obligations and household chores.
a. Power Dynamics

Another issue that arises for Arab-speaking women when accessing shelter services is that of power dynamics. On one hand, shelter service providers recognize the racial tensions that arise, especially in areas of cultural difference, where a White care provider has to educate the racialized community on the expectations of the Canadian culture in areas such as employment.

Additionally, in order to assist survivors in returning back to a rhythm or a new norm, shelters have programs established for admitted women that includes a process for seeking education and finding a job while the shelter takes care of covering the essentials needs throughout this period. Due to survivors being on the receiving end of having to achieve certain milestones or given a list of tasks to complete, this triggers the trauma of control and abuse, and the case manager’s efforts are perceived as means of exerting power similar to those of previous abusers.
Survey and Interviews Findings

Overview
This research consisted of three main parts; conducting 100 surveys, 20 interviews and 4 focus group discussions. 118 women participated in the survey titled 'The Impact of the Pandemic on Gender-based Violence against Arab-Speaking Women in the Halton Region'. The survey included questions regarding women’s experiences in Canada from assessing violence in the private and the public sphere, incidents of discrimination and othering, access to services, and the impact of the pandemic.

Demographics
All survey participants identified as Arab-speaking women, with an overwhelming majority from Arab racial background including Syria, Palestine, Lebanon, Egypt, Jordan and Iraq, with a few from Kurdish and Armenian roots. Majority identified as Sunni Muslims, a few as Shia Muslims and some were Christians. More than 80% of participants were Canadian citizens or permanent residents, and others on asylum status or asylum seekers. All were Ontario residents, majority in the Halton region and a few across the greater Toronto area. Half the participants aged between 36-50, 15% were above the age of 50 and 18% were below the age of 36. Majority of the participants were married, with a little over 10% who were divorced. More than half of the participants held university degrees and 20% were high school graduates, many received their education in Arab-speaking countries of origin while 35% received foreign education.

Semi structured interviews were conducted with twenty participants, nineteen of whom were recruited from the survey participants and one expert interview. The interviews were conducted between Nov 24th 2022 to Feb 6th 2023. It included two in-person interviews, two interviews over zoom and sixteen interviews over phone calls.

Findings
“...I literally grew up here. My parents brought me here so we can have dreams and grow and live in peace. I grew up here feeling that girls like me can't have dreams. Girls like me can't dream big. And girls like me are just meant to stay home.” [Interview Participant]
I. Violence

The core issue of this research is to assess the forms and severity of gender-based violence that Arab-speaking women face in the Halton region. An important aspect that was highlighted in many of our interviews is the intersectionalities of the multiple identities that our participants held simultaneously. As one of our interviewees said,

“People treat us differently when they find out that we’re immigrants, or that we speak Arabic or we’re Muslims.”

There are layers of discrimination and being a ‘visible minority’ carries different aspects such as one’s ethnic heritage, native language and religious belief. Throughout the interviews and the surveys, Arab-speaking women reported facing various forms of violence, racism and discrimination that either targeted their racial background, religious background or language ability. According to survey responses, more than 60% of participants faced gender-based violence in the public sphere: 84% faced verbal violence, 52% faced emotional violence, 8% reported physical violence, 4% reported sexual violence while 4% reported other forms of violence.
1. Domestic Violence

Throughout the interviews and surveys, it is evident that domestic violence is not limited to intimate-partner violence. Participants reported being victims of abuse by their mothers-in-law, fathers, mothers, children and in-laws. A survey participant reported facing abuse from her children, while two were victims of physical violence by their parents. Over 30% of survey participants reported that their relationship with their intimate partner was negatively impacted in moving to Canada. The rising cost of living expenses, along with challenges in accessing employment, and stresses of making ends meet added tension to the relationships and increased spousal dissatisfaction and contempt. Some reported experiencing verbal and emotional violence and in a few cases, it escalated to physical abuse. It is important to note that over 35% of survey participants skipped questions related to violence.

In the interviews, a participant elaborated at length her story of facing abuse in her marriage of thirteen-years. It began with physical violence from her in-laws, beatings and bruises caused by her mother-in-law, verbal abuse by her brother-in-law and emotional abuse by her spouse. Emotional abuse manifested itself through measures of control, denying her to host friends at home or join gatherings, and obsessive behavior over her calls and outings. Despite their need for financial resources, her spouse denies her the right to work or even seek any form of temporary employment. This is compounded with emotional violence, tracking her every move and outings, checking her cell phone, recording her messages and phone calls. Work, as she reports, would offer her some space and distance from his obsessive behavior. She states that the only reason for her continuation in marriage is for the protection of the children. She fears that divorce will have an emotional impact on their children and awaits till they reach an age of maturity and then she will pursue divorce. These various forms of violence occurring over a vast duration of time took a toll on her health, beginning in bruises and general overall unwellness to escalating to internalized trauma in the form of inner organ inflammation developing into cancer. At the age of 28, she developed an inflamed spleen and upon further examination it was determined that she has chronic myeloid leukemia (CML).

A second interviewee faced severe forms of violence from her father and brother. Her and her younger sister were victims of continuous physical violence, compounded with verbal and physical violence from their mother-in-law. She reports an incident where her brother saw her having a conversation with a male classmate in school, he took her home and beaten her till her eyes were bruised. The physical violence continued to escalate, and the participant sought any means to be distanced from the house. Her father restricted them from any social gatherings and when she was caught with friends, he brought her home and beat her down till she was bruised and bleeding. Her brother continued the beatings, got a knife and threatened to kill her. She was left with no food for two days, locked in her room. On the third day, she managed to leave the house while everyone was asleep. She escaped along with her sister, and walked to the neighbour’s house who called the police once they saw her bruised face and body. They were both placed in a women’s shelter for two years after which they moved to a rental apartment.
2. GBV In the Public Sphere

According to survey participants, 42 identified themselves as religious or racial minorities, 44% identified as racial minorities while 86% saw themselves as a visible religious minority. Majority of survey participants reported facing various forms of gender-based violence, racism and discrimination in the public sphere in academic spaces, hospitals, employment, public transport, in sports and politics. In 20% of the cases, discrimination took the form of violence such as verbal, physical or emotional violence. Being a visible religious minority was reported as a critical factor in incidents of discrimination and violence that manifested in acts of threat, ridicule and in one case escalating to physical violence.

A survey participant reported an incident of physical attack when a person on the street began to curse her faith and hijab and crossed the road to physically beat her when others intervened and prevented his abuse. Another wrote of an incident of verbal violence when she went shopping with her young children and was attacked by a man who continued to curse her faith and hijab while she stood paralyzed trying to protect her children. Many reported incidents of attack and being told

“you don’t belong here’, ‘go back to your country’, ‘we don’t want you here’, and ‘go back to where you came from’

Experiences of islamophobia and stereotyping were often reported by survey participants. Many shared experiences of being called a ‘terrorist, treated with fear and distrust, and being looked at as a threat. More than 30% of survey participants stated that if they were able to hide their identity as an Arab-speaking woman or visibly-Muslim woman they will receive better opportunities and treatment.

Many stated language as a barrier for facing abuse and gender-based violence in the public sphere. Those who were capable of speaking English were able to understand the verbal curses, respond back, seek assistance and defend themselves. Survey participants also reported facing incidents of discrimination while accessing governmental services, employment, hospitals, educational spaces and public transport.
A. Academic Spaces and Schooling

A couple of our interviews were mothers who faced various forms of discrimination, racism and stereotyping while accessing schooling for their children. One participant remarked that teachers in public schools tend to have a stereotype that Arab-speaking women and visibly Muslim women are lacking in education and general understanding of the Canadian schooling system.

In universities, one interviewee recalls an incident on her first day on campus which coincides to be her first day wearing the hijab. She attended an orientation event at then Ryerson University and outside the building she put down her backpack on the ground to sort some documents when she heard someone shouting, “she has a bomb! Run away!”. She says:

“I felt like the whole world paused and I just wanted the ground to swallow me at that moment. People were just staring in mistrust as I quietly picked up my backpack and walked away.”

That experience, she continues, shaped the next ten years of her life. As a visibly-Muslim woman, she also faced harassment from fellow students at university who continuously questioned her
choice of wearing the hijab and if it was really her choice or a form of brainwashing or coercion from her family. Such questions, she says

‘Really shake your self-esteem and affect your mental health.’

Another interviewee reported an incident in high school in 2016 when a classmate handed her a paper and said, ‘here you go bomb’; targeting her Arab background and religious identity. She says:

“At that moment, it was so hard for me to process it. I felt unsafe and I was trying not to believe what I heard.”

The issue was reported to the school administration who dismissed it and stated that it was a simple issue of miscommunication even though she made it clear that she was certain of what she heard. The interviewee noted that her feelings of unsafety at school after this incident was amplified, especially as the only girl from an Arab background, accompanied with the disappointment that the school’s administration showed no interest in supporting her or believing her claims. A few students and teachers showed their support and were empathetic to her cause. She also reports another incident of Islamophobia at school when her and her friends were called ‘ISIS’ by a fellow classmate who saw them praying in the hallway.

B. Hospitals

Accessing health services came with various barriers and challenges for Arab-speaking women. Many reported facing difficulties communicating with the healthcare staff without interpreters, others stated facing acts of microaggression and racism from health professionals and an interviewee went through a traumatic experience in the hospital while attending to her son’s critical state. A participant reported that a nurse used certain medical terminology that she did not understand. When she asked to clarify the terms, she responded in a condescending manner, “Do you speak English?” The participant, a bilingual speaker of English and French, was offended, knowing that this comment is rooted in the nurse’s perception of her racial and religious background; and simply responded, “Yes, I do”. Another wrote “[people] in the Western World and the Canadian world see the Arab woman as uneducated and ignorant of her rights.” Such stereotypes manifest itself in the consistent asking of “Do you understand me?”

by those she interacts with, as if the presumption is her general ignorance and lack of language.

An interviewee, who went through a recent traumatic experience in the healthcare sector, is still in disbelief that such physical violence can occur from hospital staff. It began when her 16-years old son had a seizure episode at home, she immediately called emergency services who gave her instructions for CPR over the phone till they arrived. Once at the hospital, they were transferred to an ER room, and a weighted blanket was placed over her son to calm the aftermath of the seizure. A nurse walked into the room and aggressively removed the blanket away. When the
mother gently asked her to provide a blanket for her son as he was shivering, she rudely responded, ‘No, we don’t have any’.

The participant kept quiet and asked another nurse for a blanket and was provided with two blankets.

A few minutes later, her son was showing symptoms of another seizure, she called on the nurse and as they walked in the room, they found her son in a violent episode of seizure and foaming around the mouth. She held her son’s legs, while the nurse held the tube to remove liquids and the father held the oxygen mask. No other assistance was provided, and the mother left the room and called the hallway for other nurses to assist as her son was struggling to breath. In the midst of this, she saw five to six security guards entering the room. One approached her and asked that she apologize to the nurse she offended. She was confused and told the security that this is not the right time for an apology, the nurse should be here assisting in resolving her son’s seizure. A security guard attacked her husband, who was still holding the oxygen mask for her son, and physically assaulted him while another was telling her to exit the room. When she exited the room, she found police members waiting for her, one pushed her against the wall while another asked her, ‘Do you have any weapons on you?’ as another patted her down. She was arrested, removed from the hospital, and accused of assaulting the hospital’s security guard. She was given a restraining order and prohibited from entering or being near the vicinity of the hospital. She had no contact with her son or an update on his state.

The participant has pursued legal action for racism and physical assault by hospital staff and is awaiting court proceedings. The National Council of Canadian Muslims (NCCM) has been made aware of this case through the participant and is actively involved in supporting the family as victims of violence. The interviewee emphasized that she is determined that those who have assaulted her and her husband must be brought to justice and held accountable for their transgressions.

C. Employment

In the workplace, Arab-speaking women have reported facing discrimination from managers, colleagues, clients and customers. Half of the survey participants stated that they don’t feel included in the workplace, while 5% reported feelings of alienation and exclusion. Discrimination took the form of denying accommodation for religious requirements such as the times of prayer or fasting the month of Ramadan. In one case, a participant shared that her manager threw a work party midday in the month of Ramadan, despite knowing that it’s the month of fasting and having few Muslim employees at work. Furthermore, participants reported discrimination in accessing employment where many were rejected because of their religious background, their immigration status or their racial background. A survey participant shared facing acts of

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1 The incident took place on the 14th September 2022.
microaggression as the only hijabi in the workplace and intentional side comments by a manager who eventually fired her.

A 21-year-old participant recalled a customer refusing that she takes his order,

“He didn’t want me to take his order, he wanted somebody else, somebody White.”

She found herself facing stereotypes as she was an Arabic-speaking woman who is also a newcomer; it was assumed that she can’t speak English or find work. Another participant reported that when she started her job she was told she’ll not be getting a full-time position because she is a recent immigrant, and she must struggle to land a full-time position. Another participant reported facing severe verbal violence in the workplace from colleagues that it took a toll on her health and she had to take a stress sick leave.

D. Streets and Public Transport

An interviewee participant reported facing an incident of islamophobia when a fellow driver pointed at her hijab and made hand gestures implying that Muslim women are ‘insane’. The interviewee was offended by the driver’s gestures, especially that is was not a personal attack on her driving but an act of ridicule towards her faith. In another incident, a driver pulled down her window and said to her, ‘Arabs are stupid’. Another participant reported a similar incident, while she was driving in Oakville with her two kids in the car, a car pulled right next to her with two young men and one of them pulled down the window and raised the middle finger. She ignored them and continued driving, and they followed her till she reached her daughter’s school. Fear paralyzed her, as she had her 4-year old son in the car and middle school daughter, she took the kids inside the school and waited till the car left. Such incidents threaten women’s personal safety and jeopardizes Arab-speaking women’s sense of belonging and inclusion in Canadian society.

A survey participant reported facing unkind treatment from a bus driver as an Arab-speaking visibly-Muslim woman. Another interview participant reported an incident where she took the bus with her son in Burlington. A woman unprovokedly approached her and started attacking her hijab and her faith. She struggled to understand this woman’s attacks but her son translated for her. The son began to respond back and it soon aggravated and the woman physically assaulted the participant. The bus came to a stop, police were called, and when they arrived the woman ran away. A police report was written, no further steps were taken as the participant feared for her kid’s safety if she encountered this woman again. Such incidents of unprovoked verbal and physical assault on public transport form a type of gender-based violence against women, and in this particular case a woman of visible minority. This threatens Arab-women’s sense of safety when taking public transportation, as another participant reported that she feels unsafe every time she takes public transport while a third interviewee reported her feelings of unsafety on the subway causes her to speed walk every time she gets on and off the train.
E. Sports
During the interviews, one of the participants spoke at length on the discrimination she faces as an Arab-speaking visibly-Muslim mother in the hockey world. Her son, a nine-year old player, is part of a professional hockey team. In one incident during covid-19, she went to drop her son to a AAA tournament, the highest level of competition in the hockey world. As she approached registration, she was told that the skating programming for immigrant families is closed. She clarified that she came for the AAA tournament, but the staff was confused and told her that this is an exclusive tournament for high-skilled hockey players. When she explained that her son is one of the players, they still were unable to fathom that a visibly-Muslim woman from an Arab-speaking background has a son who is playing in this majority-white game. She says,

‘The hockey world is white dominated, it's very rare to find any visible minority players, and I’m yet to meet anyone from a Muslim or Arab background.’

She faced various forms of discrimination while trying to land a team for her son to join, even though her son’s skills are of the highest caliber; coaches track back their offers once they meet her. ‘I used to be the contact person for coaches,’ she says,

‘But I’m ending this. I don’t want to jeopardize my son’s future because of my hijab.’

F. Politics
An interviewee had a unique experience of working in the political realm, both as an employee and a candidate, while being a visibly-Muslim woman from an Arab background. She faced discrimination, aggression and pressure to adjust to an expected ‘form’ of what a politician should look like. The political environment is one that is heavily based on decisions made in spaces where alcohol is highly consumed. Being a visible Muslim, she felt uncomfortable in those spaces and avoided them which came at the cost of losing important updates and job promotions. She reports continuous harassment around her hijab, being asked to remove it, that her clothing was ‘unfitting’ to the political sphere. A manager made comments around her hijab, claiming that she ‘hides things under there’. Refusing to eat certain foods that were not halal was questioned by other colleagues and she slowly withdrew from social gatherings. A colleague came to her and said, ‘I don’t want to work with you’. The forms of violence that the participant faced was not limited to verbal violence, but included acts of threats where someone places a knife on her desk. After staying in Ottawa for three years and facing daily forms of discrimination, harassment and islamophobia she decided to leave.

"It was too hard. Navigating this world while sticking to your identity. I just couldn't do it. The pressure was too much, the Hijab was too hard, what you wore was questioned, what you ate was questioned. So, I ended up just leaving Ottawa.”
Overview

The pandemic had an impact on Arab-speaking women’s access to services as well as increased cases of violence. Participants pointed out that the pandemic caused many to stay in the households for longer duration, and increased violence domestically. Gender-based violence in the public sphere also increased and 12% of the survey participants stated that they faced some form of violence in public spaces during the pandemic. Access to services was highly impacted, and many emphasized the struggle of unemployment during the pandemic as well as access to housing and educational services. Settlement agencies played a critical role of creating virtual spaces for community gathering and hosted various educational sessions, skills-training workshops and social wellbeing and women wellness events.
Community
Community and communal ties played different roles for different individuals, throughout our questionnaires and interviews it became clear that communities can either be a means of support or additional means of alienation. One participant reported the backlash she faced from the community when seeking her divorce. She was married to a man who was respected and a well-known figure in the community for his religious status and academic achievements. Throughout her marriage, she faced emotional abuse that continued to aggravate till he physically assaulted her. She sought support from the community, and was faced with distrust, exclusion and victim-blaming. This added to her existing alienation of being away from family and friends, and having faced emotional abuse from her intimate partner; the questioning and distrust from the community only added to her trauma.

Another interviewee who faced physical violence from her brother and father also reported that the Arab-speaking community often blames the victim for the violence at home, especially the women. When she sought community support for the physical violence she and her sister faced at home, she was asked what she did to cause their anger. Members of the community are very concerned about their image; their social image amongst their peers and in the community. Even her brother, who claimed to be protecting her, was only preserving the image of the family or his sister, he was more concerned about what people would say.
On the other hand, community was often cited as a source of reconciliation for intimate partner conflict. Almost all survey participants stated that community organizations and settlement agencies play an important role in providing help and support to Arab-speaking women and newcomers. They highlighted that there is a shortage of such organizations across the Halton region and the need to invest in creating and expanding those services. In the case of the interviewee who faced physical violence from hospital staff and was denied access to see her son, the community came to rescue and many visited her son and updated her on his status.

In terms of employment, settlement agencies and community organizations were the overwhelming source of information and assistance for newcomers and Arab-speaking women. 10% of survey participants noted that they will seek support from community members in cases of domestic violence. An interviewee reported that community spaces were means of healing and solace. When she faced incidents of islamophobia, xenophobia and racism throughout her university life and in the workplace; she would seek community spaces for a feeling of belonging and inclusion.

**Police**

The relationship between Arab-speaking women and correctional officers is quite complex. In some cases police intervention is a protective measure and resolves the conflict, in others the woman’s fears are ignored and devalued. Language was also highlighted as a barrier when seeking police services, and a few noted that they hesitate to contact the police in cases of violence due to inability to elaborate extensively in English. An interview participant, who experienced acts of verbal aggression and islamophobia on the road, reported the incident to the police with a picture of the aggressor’s license plate. It has been five years since the report, and no action was taken from the police’s end in seeking reparation. It must be noted that Arab-speaking women relate differently to police services and authorities based on their experiences in countries of origin.
Managing the Aftermath

When it comes to intimate partner violence, over half of the survey participants chose to discuss the issue with their intimate partners or accept the violence. Children were often stated as reasons for continuation in abusive marriages. Others suggest seeking support but limiting it to family members and close friends, and not seek police intervention or legal measures. In the cases of intimate partner violence, less than half of the survey participants reported seeking police services in cases of violence. In other cases of discrimination, racism or gender-based violence in the public sphere, the majority reported seeking police services as the first step before reaching out to community services, legal services, families and friends. In several cases, participants stated that police services are enforcers of protection and source of rescue. In the case of the participant who faced verbal and physical violence on the bus, the arrival of the police pushed her transgressor away, and assured her safety and took full report of the incident.

A participant who faced various incidents of racism, xenophobia and discrimination reported that her way of dealing with such incidents is not to give into them, to seek the higher moral ground and find ways of calming the mind after such as reading or sketching. Others reported negotiating with the transgressor, walking away, having meaningful conversations, or ignoring comments as various ways of dealing with gender-based violence in the public sphere. A participant who faced
a traumatic experience while working in the political realm took a year off to heal from those incidents and sought therapy and exercise as means of reconciliation and rejuvenation.

RECOMMENDATIONS

A. Services
   I. Access to Counseling Services
   A need that was highlighted by focus groups experts as well as interview and survey participants is the need for counseling that is financially language accessible and culturally sensitive. Mental health services are in many cases contributing rather than resolving the issue because they lack expertise in the cultural background of Arab-speaking women. Another critical barrier is that of the language barrier, many service providers report that when they connect survivors of gender-based violence to counseling services they’re unable to benefit because of the language barrier. Participants in the survey also highlighted the issue of language as a main barrier to accessing services, 34% of participants feel that they can't reach services due to language inaccessibility and 27% stated that language may act as a barrier when seeking assistance. There is a lack of language diversity in the counseling sector, which prevents survivors from working through their trauma and meeting their need for accessing therapy that can allow them to fully express themselves and be understood.

   Additionally, as a focus group participant remarked, there has been a rise in recent years for services for the Arab-speaking community and the Muslim community in the field of mental health and counseling services in the past years. However such services, although of great benefit to the community, are highly priced and inaccessible financially for many in the Arab-speaking community. This acts as a barrier, particularly in the case where a woman is financially dependent on the spouse and has no control over pursuing such services.
II. Access to Legal Services

Accessing and understanding the Canadian legal system is a critical gap for Arab-speaking women. Majority of survey respondents stated that they have little to no knowledge of the Canadian legal system. In cases of gender-based violence, many lack knowledge of their rights and responsibilities, the governing bodies and what constitutes intimate-partner violence. The complexity of the legal wording is a barrier for individual understanding, and there is a lack of Arabic material on the issue. Cultural and religious sensitivity was highlighted as a gap for those who sought legal services, and there is a need for representation and understanding of the participant’s background, religious beliefs and values. A pivotal need for women survivors of gender-based violence, and domestic violence in particular, is access to legal representation by women who speak their language. On one side, women’s representation offers solidarity and understanding that is not necessarily provided by male representation. As one of our experts shared a case where a woman had a legal representation by a man who coerced her into going back to an abusive relationship.
III. Access to Employment
Requiring ‘Canadian experience’ acted as the greatest barrier for Arab-speaking women seeking employment. Foreign accreditation was often unacceptable, and many reported challenges in working in their field of study or experience. Language was also emphasized as a barrier in seeking employment, 40% of survey participants reported facing difficulties due to language when seeking job opportunities.

An interviewee, of a Lebanese background, spoke at length on the barriers faced by her husband in accessing employment post their immigration to Canada. Her spouse, who came through the skilled workers stream, holds a PhD from a university in France and years of experience at senior level management. He was declined from every job either because he was ‘overqualified’, lacks ‘Canadian experience’ or told ‘no one knows you in the businesses. As she says,

“It's very hard to access employment in Canada, especially if you’re educated and seeking senior positions. Why did we struggle to get our degrees and immigrate here if we aren't going to be allowed to work?”

The lack of affordable childcare acts as a barrier for Arab-speaking women seeking employment. Skilled immigrants also reported facing underemployment, where they are forced to accept work that is below their skills and educational level just to feed their families. Participants also highlighted the impact of underemployment on general well being and one’s sense of achievement. Those who are unable to find a job that fits their skills and knowledge are frustrated and in many cases portray that stress and frustration towards their family members.

IV. Access to Affordable Housing
Survivors of intimate partner violence, in the aftermath of escaping their houses and seeking temporary shelters, face various challenges in securing long term housing. One layer of the challenge is providing the necessary documentation. Women who have escaped a controlling spouse are in many cases denied access to their documents such as SIN numbers, tax fillings and notices of assessment, PR card and passport, all necessary documents for rental applications. Another layer is the financial challenge of finding affordable housing as single mothers navigate the continuously increasing housing market while surviving on limited means and a single income.

V. Police Services
A huge gap in the police services is the lack of cultural education, in particular in the cases of domestic violence, there needs to be training in understanding the various cultural backgrounds represented in the population of the Halton region. In our focus group discussions, the police departments recognized the cultural gap when it comes to providing services to the Arab community, especially in cases of domestic violence. Language rises as a constant challenge, Arab speaking women struggle to secure interpreters when accessing police services. There is a need
to educate and train police personnel on the cultural nuances in the Arab-speaking community, as well the variation within. An important aspect that was recognized by the police was that not everyone sees police personnel as sources of support. They recognize that for some communities, in their countries of birth the police are perhaps the last resort sought after for assistance. Therefore there needs to be a discussion on how to best serve such communities with this understanding in mind.

In our focus group discussion, we had representatives from Halton Police’s Victim Services Unit, who share that a big gap in the policing services is in dealing with non-criminal cases of gender-based violence. There are two types of reports of violence: criminal and non-criminal. Criminal cases are ones in which criminal offenses have been committed such as assault, threats, harassment, fraud and sexual violence. Non-criminal matters are ones such as power abuse, financial abuse, verbal and emotional abuse. In 25% of the cases the police arrest and press charges, while 75% fall under the non-criminal umbrella. This is a critical issue where 75% of victims of abuse and violence are not receiving the necessary assistance. From a crime prevention lens, stronger measurements need to be taken to prevent the 75% of abuse cases from escalating to the 25% of criminal cases of violence.

B. Knowledge Mobilization

I. Education and Training

A underestimated barrier for seeking services, especially for new immigrant communities, is the lack of knowledge of the Canadian system as a whole. According to our focus group discussions, many victims stay in abusive relationships because they are unaware of the existence of shelters, temporary or second stage housing, welfare and Ontario Works. Newcomers, therefore, need to be provided with the suitable awareness and knowledge of the Canadian system and services provided in a format that is clear, accessible, and available in multiple languages. Cultural training for the newcomer Arab-speaking community was highlighted as a critical gap, many lack understanding of their rights and responsibilities in the Canadian context. Therefore, newcomers are in need of information sessions on spousal rights and responsibilities, cultural differences and diversity in Canada, parenting and childcare regulations. Such training, settlement specialists suggest, should be made mandatory for newcomers and a component of their immigration and settlement process.

This was also echoed by survey and interview participants who highlighted the need for educating the Arab-speaking community, and women specifically, on their rights and responsibilities in the work field as well as in marriage. Women lack knowledge of the Canadian laws when it comes to marriage and divorce and are unable to find the right source of information. In the area of employment, Arab speaking women need to be empowered with the necessary knowledge of the laws of employment and dealing with harassment, discrimination, and racism in the workplace.
For gender-based violence specifically, there is a general lack of knowledge of the laws surrounding intimate partner violence including Ontario’s Mandatory Charge Policy. The policy states that if a criminal offense is reported to the police, and there is enough evidence to support that claim then a charge is laid. In the case of intimate-partner violence, the police are legally bound to arrest the offender committing the abuse, remove them from the immediate environment and put conditions on contact with the victim. According to police services, many people calling the police to report violence have no knowledge of this legal process, and the shock of the removal of the spouse can itself be as traumatic for the victim as well. Additionally, service providers at shelters reported that in many cases newcomer women are not familiar with child custody laws in the Canadian legal context, and face barriers in understanding the legal process and court proceedings.

Educating the Arab-speaking community, especially newcomers, on the cultural aspects of the English language is vital. It was noted that due to an expression or a word that was mistranslated, an Arab-speaking woman had her children removed by Child Services. Language is not limited to recognizing the terminology or the technical language, but also the social aspect and expressions.

It is critical to note that education and training must be provided for the Arab-speaking community as a whole. There tends to be a focus on providing services to victims, or education to women on what constitutes gender-based violence; but equal work needs to be done on reforming offenders as well as providing education for men. While gaps in services for victims of gender-based violence is recognized and highlighted in this research; it is important to note that there are gaps in preventative measures for stopping gender-based violence such as the reformation and education of men on the scope and diversity of forms of violence that are recognized as gender-based violence, the cultural nuances and the laws surrounding intimate-partner violence in specific.

II. Educational Reforms

Throughout the surveys and interviews, participants highlighted the necessity for educational reforms. There needs to be reform in the educational curriculums in such a manner that various cultures and religions are taught in a truthful representation. A participant reports that what is being taught in public schools about Islam or other faiths tends to overly simplify religious beliefs and decontextualize the rituals. A holistic approach to the diversity of religious beliefs needs to be adopted in the educational curriculums in a way that fairly represents the various cultures and faiths. Moreover, representation for communities as guest speakers plays a critical role in answering questions and showing a truthful demonstration of the faith. Workshops and educational seminars bringing representatives and chaplains to schools will assist in demystifying religious beliefs and dismantle stereotypes.

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2 While we recognize that gender-based violence is a broad term, and the victims of such violence are not necessarily women; due to the scope of this study we’ve limited our discussion here on gender-based violence against women.
III. Trauma-informed training

Cultural sensitivity and language accessibility are aspects that have been echoed as a barrier across all our focus group discussions from experts working in various backgrounds such as police, shelters, helplines, immigration offices and legal clinics. Another aspect to consider is that of trauma-informed training for providers of services. For example, many newcomer and immigrant women come with their own trauma from dealing with the police in countries of origin. Police services in the Canadian context must recognize the diversity of personal experiences of those reaching for assistance and receive training in trauma-informed approaches. Similarly, shelter service providers and newcomer service providers must recognize the traumatic experiences of clients seeking their services and receive training in offering assistance through trauma-informed approaches.

IV. Breaking the Cycle

Focus group experts, interviewees and survey participants were asked on what measures should be taken to break the cycle of violence, to combat gender-based violence against women domestically and in the public sphere. Experts focused on resolutions on domestic violence predominately such as education, cultural training, tackling the roots of gender-based violence, premarital education and childhood learning on healthy relationships. While participants recommendations were tailored mainly towards combating gender-based violence in the public sphere through fair media representation, parental role and representation in public safety services.

According to focus group experts, breaking the cycle of violence requires education on the individual and communal level, tackling the roots of the issue and educating the young generation on boundaries and healthy relationships. Gender-based violence, as seen by our focus group participants working on the ground with survivors of abuse, is a result of misogyny, sexism, and patriarchy. Reform begins by tackling these issues from the roots, whether on the level of policies and organization or the level of the community. Additionally, educating men and women on boundaries and the building blocks of establishing healthy marriages and healthy relationships. Hosting sessions of premarital or marital training on healthy and unhealthy forms of attachment in relationships and recognizing forms of abuse. Such education can begin from as early as childhood, through teaching children on healthy forms of expression and relating to others as well as setting boundaries and recognizing the spectrum of violence and abuse.

Those who faced incidents of violence on the public sphere highlight the need for fair media representation and raising awareness. Media outlets have the responsibility to represent minorities and immigrants in a positive light and help to dismantle the stereotypes rather than feed into them. Raising awareness that xenophobia and islamophobia are real, and does occur in the Canadian context and has an effect on people at all levels. Additionally, parents have a role in educating their children on the diversity and respect for others' culture and religious beliefs.
Participants who have faced discrimination or incidents of islamophobia in school report that children often quote their parents to justify their acts of aggression and bullying.

Others want to break the cycle of violence through representation in public safety services.

A 21-year-old participant, who faces discrimination and verbal violence from clients at work, reports that her dream is to become a cop. Being a cop would allow her to fight for her community’s rights and offer a sense of safety and protection. She says,

“I feel like there should be more diversity [in the police services] and especially that I'm a Muslim, I'm a woman and I'm an Arab. People would feel safe knowing there is someone who thinks like them or feels the same way.”.
## SUMMARY OF RECOMMENDATIONS

<table>
<thead>
<tr>
<th>Area</th>
<th>Recommendations</th>
</tr>
</thead>
</table>
| Approaches and Framework    | • Apply critical race, intersectional, community-based and participatory approaches to gender-based violence responses for Arab-speaking women.  
• Prioritize women’s safety domestically as well as in the public sphere: in public transport, academic spaces, at work and in hospitals.  
• Recognize the diversity of Arab-speaking women, not to be treated as a homogenized group, as they vary in background, religion, and ethnic origin. |
| Decision Making             | • Ensure meaningful participation of Arab-speaking women, and that of grassroots and community-based organisations, in decision-making processes including planning of policies, implementation and long-term solutions to address gender-based violence.  
• Promote Arab-speaking women leadership and representation in national, provincial and local/community level policy spaces addressing gender-based violence. |
| Funding                     | • Increase dedicated funding for specialized services and support, including essential social determinants of health such as income support, housing, child-care and food security.  
• Affordable housing for survivors of domestic violence, single mothers and victims of abuse.  
• Financial support for victims of domestic violence, to limit reliance on the abuser for financial stability.  
• Provide additional funding for organisations already serving Arab-speaking women experiencing GBV, and focused funding for initiatives addressing GBV among agencies serving newcomers. |
| Policies                    | • The need for hiring high skilled immigrants in jobs that fit their skills and knowledge.  
• Creating accommodating and inclusive work spaces for employees from various religious backgrounds, and accommodation of religious obligations such as prayer and fasting. |
| Mental Health                                      | • Surivors of gender-based violence need access to long-term counseling that is culturally sensitive.  
|                                                  | • There is a lack of counselors who are able to provide psychotherapy in multiple languages. There is a need for survivors of GBV violence to access counseling in their language. |
| Education                                        | • Educating the Arab speaking community, and newcomers in general, on the laws surrounding intimate-partner violence, including Ontario’s Mandatory Charge Policy, as well as laws surrounding marriage, divorce and child custody.  
|                                                  | • Mandatory training for newcomers in spousal rights and responsibilities, cultural differences and cultural diversity in Canada.  
|                                                  | • The need to educate the Arab-speaking community, and Arab-speaking women especially, on their legal rights and responsibilities when it comes to employment and marriage. |
| Community                                        | • Investing in grassroots initiatives and communities’ infrastructure to create a safety net for victims of violence.  
|                                                  | • Breaking the stigma on reporting violence and seeking assistance in the Arab-speaking community. |
| Service Provision                                | • Ensure that services are open, accessible in multiple languages and inclusive.  
|                                                  | • Apply holistic survivor-centred principles and trauma- and violence-informed supports to service provision.  
|                                                  | • Apply Anti-Racism, Anti-Oppression policy to service provision.  
|                                                  | • Adapt and strengthen online supports, helplines, online counselling and technology-based solutions.  
|                                                  | • Promote cultural safety models to service provision.  
|                                                  | • Legal representation by women who share the language of the survivor has a huge impact on the survivor’s access to equity as well as receiving the necessary support in the legal process.  
|                                                  | • There is a gap in legal services when it comes to representation, culturally-informed approaches and religious sensitivity.  
<p>|                                                  | • Language accessibility as a main barrier for Arab-speaking women to seek services and assistance. Accommodations should be provided in the form of interpreters or bilingual speakers at governmental services catering to newcomers. |</p>
<table>
<thead>
<tr>
<th>Media and Advocacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Recognize the responsibility of media outlets for showcasing the diversity of the Arab-speaking community, dismantle stereotypes and report incidents of GBV against Arab-speaking women in the public sphere.</td>
</tr>
<tr>
<td>• Enhance campaigns to raise awareness among service providers and the general population, integrating race, intersectionality, immigration status and socioeconomic status.</td>
</tr>
<tr>
<td>• Support and fund advocacy efforts from Arab-speaking women, grassroots organisations and initiatives, cross-sectoral collaborations in advocacy and campaigns.</td>
</tr>
</tbody>
</table>
Throughout the research we found out that there is a considerable number of Arab-speaking women in the Halton region who reported facing one form or another of violence in the domestic sphere. Domestic violence was not limited to intimate-partner violence, but included abuse faced by fathers, brothers, in-laws and in some cases even children. More prominently, though, are the reports of gender-based violence in the public sphere. It included verbal violence, threats, emotional abuse and physical violence. Violence in the public sphere was multilayered, it attacked the women's identities as women, as immigrants, as Arab-speakers and in some cases as visible religious minorities. Arab-speaking women reported facing violence in academic spaces, in schools, hospitals, workplaces, in the streets, in public transport, in the field of sports and politics.

In cases of domestic violence, there is a tendency to avoid seeking legal or police intervention due to ignorance of the process and the consequences. Women seek community spaces and community services first, although the relationship between women and their community is complicated. For some, the community is a safe space to seek refuge, others fear shaming and victim-blaming culture. Community-based organizations can and have established a safety net for many victims and offer culturally sensitive and language-accessible services. In cases of violence in the public sphere, however, women are not hesitant to contact police services and report acts of violence, racism, or discrimination.

Religious visible minorities, in the case of this research Hijabi women/or visibly Muslim women, have reported facing various forms of discrimination and exclusion. They are perceived as being ignorant and uneducated and are treated accordingly when seeking services or accessing spaces such as sports or politics. Experiences of islamophobia and stereotyping were often reported by survey participants. Many shared experiences of being called a ‘terrorist, treated with fear and distrust, and being looked at as a threat. More than 30% of survey participants stated that if they were able to hide their identity as an Arab-speaking woman or visibly Muslim woman they will receive better opportunities and treatment.

The pandemic brought a toll on women’s wellbeing and witnessed an increase in cases of violence domestically. Shelters received intensified cases of violence, this may be due to lack of opportunity of escaping the households during lockdown and reaching support, or fear of going to a shelter during Covid-19 breakouts. Moreover, cases of violence became more complex during the pandemic due to other difficulties occurring simultaneously. As shelter service providers report, crisis calls tended to be on finding a safe shelter from the abuse, but during the pandemic clients were struggling with finding a shelter, food insecurity, mental health crisis as well as unemployment. Mental health crises were also on the rise, and many reported cases of anxiety and depression, which was a contributor to increased cases of domestic and gender-based violence.
Although the pandemic brought additional pressures to victims of abuse, it also facilitated accessibility to services through virtual access. Women facing intimate-partner abuse were able to join virtual programs and educational sessions that they might not have been able to join in-person beforehand. The availability of online programs and events allowed them to join from the privacy of their phones and receive the necessary information and assistance.

Finally, a key theme that emerges from this research is safety. Women are looking for safety, whether in their homes, from their spouses, their fathers, their families; or in the public space: to be safe in the streets, on public transport, in schools, universities, workplaces and hospitals. They seek safe spaces for therapy and counselling, safety in the community and in close friendships. They share the need to be safe from abuse, from violence, from discrimination and from racism.

DISCUSSION

Throughout the surveys and interviews, participants shared the various sides of their experiences as Arab-speaking women in Halton, and we found that there are many areas of overlap between participants’ experiences and the findings in recent published reports. This included the systemic barriers faced by high skilled immigrants in finding jobs fitting their skills and experience, discrimination as a barrier for racialized newcomers accessing housing, and discriminatory barriers facing Arab-speaking women accessing employment.

In a community-engaged research report published on January 24th 2023 titled “The Myth of Canada”, Grez, Gamboa and Purwal argue that internationally-trained skilled workers report that inclusion and equal opportunity is a Canadian myth. Stating further that there is a disconnect between Canada’s immigration policy favouring high skilled workers and their experiences facing discrimination and systemic barrier accessing employment once they’re in Canada. They are subject to underemployment in work that doesn’t fully acknowledge and remunerate their skills, and many struggle to provide for their families. Such sentiments were echoed by our research participants who reported the lack of sufficient medical staff due to Canada’s under recognition of foreign accreditation, and their personal struggle to find employment that fully recognizes their educational background and professional experience. An interviewee reported that her spouse struggled for a year to find a job despite having a postgraduate degree and many years of experience. Employers hesitate to hire new immigrants under claims such as, ‘overqualified’, ‘lack Canadian experience’ or ‘no one knows you in the trade’. Another participant highlighted the difficulty she faced in finding a job in her area of expertise due to the ‘Canadian experience’ barrier despite
her qualification and had to settle for a minimum-wage job.

A 2022 report by The Canadian Centre for Housing Rights (CCHR) titled “Sorry, it's rented”, found that racialized newcomers face discrimination in accessing rental housing in Toronto.

Discrimination was higher for those who had a racialized income, who disclosed their newcomer status and women who cared for children. The research also demonstrated that even where housing might be available, heightened barriers were being created by discriminatory treatment towards racialized newcomers in Toronto. Similarly, respondents to our survey reported that they faced struggles in securing housing despite having the appropriate papers. Many were accepted through emails but denied once they were met in person or had a phone call revealing their racialized accent. Arab speaking women fleeing domestic violence were particularly vulnerable to such discriminatory treatment especially when the housing providers have anti-Arab sentiments or stereotypes of the Arab woman as accepting of violence.

Finally, a 2022 report by The Canadian Arab Institute titled “Employment Barriers Facing Arab Women in Canada” found that the most frequent barriers facing Arab women accessing the labour market are inadequate employment services, identity, foreign credentials, Canadian experience and language barrier. While they report that the barriers faced by Arab women are not unique to them and are faced by other non-Arab women; but the degree and intensity to which Arab women are facing specific barriers are significantly higher to their non-Arab counterparts. This resonates deeply with the findings of our research as respondents highlighted foreign accreditation, Canadian experience and language barrier as the biggest obstacles in accessing employment.

Therefore, the findings of this report resonate with other findings simultaneously carried in Canada during a similar time period and highlight to address the issues of discrimination and gender-based violence across all sectors of employment, housing and accreditation for all racialized newcomers. Similar forms of gender-based violence have been reported by other ethnic and racial minorities with the Canadian context; but the magnitude of violence and intersectionality of race, gender, language and religion is specifically intensified for Arab-speaking women
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ANNEXES

List Of Participants
Focus Group Participants

1st Focus Group: Zoom Meeting on 29th Sep 2022
- Laurie Hepburn: Executive Director at Halton Women’s Place
- Kim Jenkinson: Executive Director at Halton’s Multicultural Council
- Suzan Manaa: Crisis Intervention Specialist at Halton’s Multicultural Council
- Sylvia Samsa: Executive Director at SAVIS
- Sara Cumming: Executive Director at Home Suite Hope
- Jeff Hill: Deputy Chief of Regional Services
- Tom Hockney: Detective Sergeant at Halton Regional Police Services
- Angela Chaves: Program Manager at Halton’s Multicultural Council
- Kawther Alkholy: Executive Director at Women for Justice Foundation
- Noheir Elgendy: Executive Director at Al-Qazzaz for Education and Development
- Ola Hassan: Project Coordinator at Al-Qazzaz for Education and Development
- Mariam Elzeiny: Researcher at Al-Qazzaz for Education and Development

2nd Focus Group: Zoom meeting on 6th Oct 2022
- Rania Younes: Independent Consultant, Co-Founder of Professional Canadian Arab Institute
- Mariyam Zaidi: Director of Services at Sakeenah Homes
- Andrea Cormier: Supervisor of Outreach at Halton’s Women’s Place
- Elizabeth: Housing Liaison at Halton’s Women’s Place
- Susan Gribbon: Manager of Programs and Services at Halton’s Women’s Place
- Lindsay Kromans: Housing Liaison at Halton’s Women’s Place
- Thea Goodings: Safe Shelters Supervisor at Halton’s Women’s Place
- Suzan Manaa: Crisis Intervention Specialist at Halton’s Multicultural Council
- Kawther Alkholy: Executive Director at Women for Justice Foundation
- Noheir Elgendy: Executive Director at Al-Qazzaz for Education and Development
- Ola Hassan: Project Coordinator at Al-Qazzaz for Education and Development
- Mariam Elzeiny: Researcher at Al-Qazzaz for Education and Development

3rd Focus Group: Zoom meeting on 9th October 2022
- Rufaida Mohammed: Social Worker and Non-Profit Organizational Strategist
- Alia Al-Qazzaz: Case/Frontline Worker
- Kawther Alkholy: Executive Director at Women for Justice Foundation
- Noheir Elgendy: Executive Director at Al-Qazzaz for Education and Development
- Mariam Elzeiny: Researcher at Al-Qazzaz for Education and Development
4th Focus Group: Zoom meeting on 17th December 2022

- Hala Halim: Community Settlement Specialist at Halton’s Multicultural Council
- Ingy Bebawy: Community Settlement Specialist at Halton’s Multicultural Council
- Sultana Chehaib: Community Settlement Specialist at Halton’s Multicultural Council
- Suzan Manaa: Crisis Intervention Specialist at Halton’s Multicultural Council
- Narmin Endrawes: Youth Settlement Specialist at Halton’s Multicultural Council
- Kawther Alkholy: Executive Director at Women for Justice Foundation
- Noheir Elgendy: Executive Director at Al-Qazzaz for Education and Development
- Ola Hassan: Project Coordinator at Al-Qazzaz for Education and Development
- Mariam Elzeiny: Researcher at Al-Qazzaz for Education and Development
التركيبة السكانية:

- هل تعتبرين نفسك إمرأة ناطقة بالعربية؟
  - نعم  □
  - لا □

- هل تقيمين في منطقة هالتون؟
  - نعم □
  - لا □

  مطلوب □
  ميلتون □
  برلينغتون □
  هالتون هيلز □

ما عمرك؟

  25-18 □
  20-26 □
  30-36 □
  35-41 □
  40-46 □
  45-51 □
  50-56 □
  فوق الخمسين □

بلد النشأة؟

  مصر □
  سوريا □
  فلسطين □
  لبنان □
  الأردن □
  آخر: □

بلد الإقامة قبل الاقتراد إلى كندا: 

  مصر □
  الأردن □
  سوريا □
  تركيا □
  العراق □
  لبنان □
  الإمارات □
  آخر: □

العرق:

  عربية □
  كردية □
  أمازيغية □
  أخرى: □
الانتقاء الديني:
- مسلمة: سنوية
- مسلمة: شرعية
- مسيحية: قبطية
- مسيحية: أورثودكس
- مسيحية: كاثوليك
- مسيحية: بروتستانت
- يهودية
- محددة
- لا أنتبه ديني/ غير دينية
- أخرى:

حالة الهجرة:
- مواطنة كندية
- مقيمة دائمة
- وضع اللجوء
- طالب اللجوء
- تصريح العمل
- تصريح العمل بعد التخرج
- تصريح الدراسة
- أخرى:

كم عدد سنوات الإقامة في كندا؟
- أقل من سنة
- 1 - 2 سنة
- 3 - 5 سنوات
- 6 - 10 سنوات
- أكثر من 10 سنوات

ما هي لغتك الأم؟
- العربية:
- الفرنسية
- الإنجليزية
- أخرى:

ما مدى إجادةك اللغات الأخرى؟
- العربية:
- اللغة الأم/ ثانية اللغة
- مبتدئ
- متوسط
- متقدم
- لا ينطبق
الانجليزية:

اللغة الأم/ ثانوي اللغة
- متقدم
- متوسط
- ابتدائي
- مبتدئ
- لا ينطبق

الفرنسية:

اللغة الأم/ ثانوي اللغة
- متقدم
- متوسط
- ابتدائي
- مبتدئ
- لا ينطبق

المستوى التعليمي (اختر الأعلى)
- المرحلة الابتدائية
- المرحلة الثانوية
- كلية/دبلوم
- بكالوريوس
- ماجستير/دراسات عليا
- دكتوراة
- مرحلة ما بعد الدكتوراة

أين أكملت أعلى مستوى تعليمي؟
- سوريا
- مصر
- تركيا
- كندا
- أخرين :

بأي لغة أكملت أعلى مستوى تعليمي؟
- العربية
- الإنجليزية
- الفرنسية
- ثانية اللغة
- أخرين :
الحالة الوظيفية:
أعمل □

إذا كنت تعملين، ما هي مدة عملك الحالي؟
□ أقل من سنة
□ 2-3 سنة
□ 5 سنوات
□ يزيد عن خمس سنوات
لا أعمل □

بحث عن عمل □

في إجازة (إجازة أمومة، إجازة مرضية، تفرغ) □

آخر: □

الحالة الاجتماعية:
□ عزباء
□ خطبة
□ في علاقة
□ متزوجة
□ منفصلة
□ مطلقة
□ أرملة

هل تعيلين أحدًا؟ كم عدد من تعولهم؟

إيضاح: الإعاقة هي التكلّف بالاحتياجات المادية مثل البيت، الطعام، الملابس، الحاجات الأساسية وغيرها.

هل أنت من ذوي الاحتياجات الخاصة (حسب تعريف لجنة حقوق الإنسان في أوتايو)؟

تعريف: أي درجة من درجات الإعاقة الجسدية أو العجز أو التشوه بسبب الإصابة الجسدية أو العيب الخلقی أو العجز.

مرضا/مريض، مرضي، الصمم وإعاقات الكلام. كذلك أي شكل من أشكال الإعاقة الذهنية أو صعوبات التعلم.

نعم □
لا □

أي من هذه الأحوال يصف وضع معيشتك الحالية (يرجى تحديد كل ما ينطبق)

□ أقيم وحيدًا
□ أقيم مع زوجي
□ أقيم مع زوجي وأولادي
□ أقيم مع عائلتي المتعددة
□ أقيم مع أخواتي
□ أقيم مع زميلة في السكن
□ سكن جامعي

آخر: □

هل تدفعين الإيجار أو تساهمين في دفع الإيجار؟

نعم □
لا □
1. القسم الأول: الهجرة والانتماء

ما هي أسباب و دوافع هجرتك إلى كندا؟ (يرجى تحديد كل ما ينطبق)

- البحث عن حياة أفضل لنفسي وعائلتي
- البحث عن عمل
- متابعة دراسي
- البحث عن الأمان
- الحرب أو النزاعات في بلد الوطن
- هروبًا من الاضطهاد والتمييز
- أسباب أخرى:

هل كنت تعمل قبل المحمية إلى كندا؟

- لا
- نعم:
  - دوام كامل
  - دوام جزئي
  - عمل مقطع
  - تدريب أو تدريب
  - أخر:

هل كان للعمل تأثير على حياتك العائلية؟

- لا
- نعم: لأي شكل؟

ما هي التحديات التي واجحتها في التأقلم مع البيئة الكندية؟ (يرجى تحديد كل ما ينطبق)

- التأقلم مع الطقس البارد
- الثقافة الجديدة/الاختلاف الثقافي
- النظام القانوني
- اختلاف اللغة
- تكلفة المعيشة
- تحديات أخرى:

ما هي العوامل المساعدة التي ساهمت في تسهيل هذا الانتقال؟

- صداقات
- الجالية
- العائلة
- المجتمع الديني: المسجد/الكنيسة/الخ
- مراكز تقديم الخدمات للمهاجرين والقادمين الجدد
- عوامل أخرى:
ما هي التغييرات، إن كانت هناك تغيرات، التي شعرت بأن عليك القيام بها منذ قدومك إلى كندا؟

2. القسم الثاني: التمييز

هل أنت أقلية عرقية أو دينية ظاهرة؟ (يرجى تحديد كل ما ينطبق)
- نعم: أقلية عرقية ظاهرة
- لا: أقلية دينية ظاهرة

هل تشعر، أو كانت هناك موقف، واجهت فيها تمييزاً بسبب كونك أقلية ظاهرة؟

إيضاح: التمييز هو أي شكل من أشكال المعاملة غير العادلة أو غير المنصفة القائمة على خصائص مثل الدين أو العرق أو الجنس.

- نعم: مثال:
- لا: 

هل تشعر، أو كانت هناك موقف، واجهت فيها تمييزاً بسبب هيكلك الديني؟

إيضاح: التمييز هو أي شكل من أشكال المعاملة غير العادلة أو غير المنصفة القائمة على خصائص مثل الدين أو العرق أو الجنس.

- نعم: مثال:
- لا: 

هل أتخذ هذا التمييز شكلاً من أشكال العنف؟

إيضاح: العنف هو أي شكل من أشكال الضرر التي تستهدف الفرد أو المجموعة، ويشمل ذلك العنف اللفظي، النفسي، الجسدي، الاعتداء أو التحرش الجنسي.

- نعم: أي شكل من أشكال العنف?
  - جسدي
  - نفسي
  - لفظي
  - جنسي
  - آخر:

هل واجهت أي صعوبات أخرى نتجت عن تعرضك للتمييز (مشاعل صحية، مشاكل في العمل، الخ)؟
ما هي مصادر الدعم التي تتجهين لها عادة بعد تعرضك للتمييز في المعاملة؟ (يرجى تحديد كل ما ينطبق)
- العائلة
- الأصدقاء
- الزوج
- الإخوة
- مجتمع الجالية
- آخر:

هل واجهت أي معوقات عند البحث عن عمل أو استكمال الدراسة بعد قدومك إلى كندا؟
- لا
- نعم، ما هي المعوقات؟

ما هي المصادر التي وجدتها مفيدة في مساعدتك في العثور على عمل؟
- مراكز تدريب الخدمات للمهاجرين والقادمين الجدد
- وسائل التواصل الاجتماعي: الفيسبوك، الواتساب
- مواقع البحث عن العمل: لينكدن، انديد، بيت
- الأصدقاء
- العلاقات المجتمعية
- مصادر أخرى:

هل أنت مكلف/مسؤولًا مادياً بأحتياجات أفراد خارج عائلتك المباشرة؟ (مثال: الوالدين، الأصدقاء، الأسرة خارج الدولة)
- نعم
- لا

هل أصبحت أكثر أو أقل مشاركة من الناحية المالية في أسرتك بعد الهجرة إلى كندا؟
أكثر مشاركة
 أقل مشاركة
 مساواة في المشاركة قبل وبعد الهجرة

في مجال العمل: هل تشعرين بأنك تتعاملين بشكل مختلف كونك امرأة؟

لا
 لا ينبغي

نعم: كيف تتعاملين بشكل مختلف؟

● هل تشعرين بأنه يتم دمجك في بيئة العمل؟

دائماً
 أحياناً
 يتغير من فترة لأخرى
 نادراً
 أبداً

ماذا يعني التضمين أو الشمول أو الإمداد؟ كيف يبدو ذلك على أرض الواقع؟

أيضًا: يقصد بالإمداد أو التضمين أو الشمول ممارسات أو سياسات تتوفر فرص متساوية للوصول إلى الفرص والموارد للأشخاص الذين قد يتم استبعادهم أو تهميشهم بطريقة أو لآخرى، مثل أولئك الذين يعانون من إعاقة جسدية أو عقلية أو أفراد الأقليات.

● إذا كان بإمكاني إخفاء هوائي كأمرأة تتحدث اللغة العربية، فأننا أعلم أنني سأتعامل بشكل مختلف من قبل أشخاص معينين،

أوافق بشدة
 أوافق
 لا أوافق ولا أعراض
 أعراض
 أعراض بشدة

"كوني امرأة تتحدث العربية بشكل ظاهر يجعلني أكثر عرضة للصور النمطية السلبية"

أوافق بشدة
 أوافق
 لا أوافق ولا أعراض
 أعراض
 أعراض بشدة

إذا كان بإمكاني إخفاء هوائي كأمرأة تتحدث العربية، فأننا أعلم بأنني سأحصل على المزيد من الفرص في حيائي المهنية

أوافق بشدة
"إذا كان بإمكاني إخفاء هويتي كامرأة تتحدث العربية سيكون أكثر أماناً" أوافق بشدة
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لا أوافق ولا أعراض
أعراض
أوافق بشدة

4. القسم الرابع: الخدمات

تقييم الخدمات الآتية من حيث سهولة إيجادها، الحصول على خدماتها والتعامل معها.

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إيجابية □
ليس بالإيجابية ولا بالسلبية □
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لمذا؟ □

في رأيك، ما الذي يمكن القيام به لتحسين تجربتك مع الخدمات؟ ما هي الحواجز أو الثغرات في الخدمات المقدمة؟

هل تشعر أن مقدمي الخدمات قادرون على فهم وجهة نظرك ثقافياً؟
نعم: اعطِ مثالاً □
لا: كيف يمكن التحسين؟ □

هل تواجهين صعوبة في الوصول إلى الخدمات بسبب حاجز اللغة؟ هل تشعرين بأنه لا يمكنك التعبير عن احتياجاتك بشكل
مفصل بلغة أخرى غير لغتك الأم؟
نعم □
لا □
ربما □

من أين تلتقيين المعلومات عن الخدمات؟ (يرجى تحديد كل ما ينطبق)
والكالس الهجرة □
البحث عبر الإنترنت □
وسائل التواصل الاجتماعي □
الأخبار □
البريد □
مصادر أخرى: □
ما مدى عملك وفهمك للنظام القانوني الكندي؟
جيد جداً □
إذا كنت أنت أو أي شخص تعريفي بحاجة إلى مساعدة قانونية، فهل تعرفين من أين يمكنك الحصول عليها؟
- أسأل صديق أو أحد أفراد الأسرة
- اتصل بأحد المنظمات، اسمها:
- أبحث على الإنترنت
- استمتع
- مصادر أخرى:

القسم الخامس: المجتمع والأسرة

هل أنت فرد نشط في المجتمع؟
- لا

نعم، في أي جزء من المجتمع:
- هل لديك مجتمع أو مجموعة يمكنك اللجوء إليها وقت الحاجة؟
- نعم
- لا

ما هي العوائق التي وجدتها عند البحث عن مجتمع أو مجموعة تنتمين لها؟

هل تشعرين أن بإمكانك مشاركة همومك، مخاوفك واحتياجاتك مع مجتمعك؟

هل تشعرين بأن ديناميكيات عائلتك قد تغيرت منذ الاستقرار هنا؟ وكيف؟

هل تشعرين بأن علاقاتك مع زوجك قد تغيرت منذ وصولك إلى كندا؟ وكيف؟
٦. القسم السادس: الوصول إلى الخدمات

ما هي المصادر التي تنصين بها إذا واجه شخص تعريفه شكلاً من أشكال العنف أو التحرش أو الإساءة؟

كيف ستتصرفين أو ما ستكون ردة فعلك إذا تعرضت أو تعرض شخص تعريفه للعنف؟ (يرجى تحديد كل ما ينطبق)

إيضاح: العنف هو أي شكل من أشكال الضرر التي تستهدف الفرد أو المجموعة، ويشمل ذلك العنف البدني، النفسي، الجسدي، الاعتداء أو التحرش الجنسي.

- الدفاع عن نفسك جسدياً
- محاولة التخليق مع المعتمد
- طلب المساعدة من العائلة أو الأصدقاء
- طلب المساعدة من قيادات في المجتمع
- طلب المساعدة من الشرطة
- طلب المساعدة من النظام القانوني
- طلب المساعدة من منظمات المجتمع المدني
- طلب المساعدة من خدمات الرعاية الصحية (طبيب أو معالج نفسي)
- أخرى:

في المواقف التالية، أخبرينا ماذا ستفعلين وما هي الخدمات التي ستوصين بها، لماذا؟

أ. صديقة تخبرك بأنها تتفاوض أجل أقل في وظيفتها لأن تعمل في مجال يغلب عليه الرجال.

ماذا ستفعلين؟

ب. تخبرك أختك بأن رجلاً تحرش بها في المواصلات العامة.

ماذا ستفعلين؟ ما الخدمات التي ستوصين بها؟

١٢
ج. تخبر صديقة بأنها تعرضت للعنف من قبل أحد أفراد العائلة في البيت.
ما الذي ستفعلين؟ ما الخدمات التي ستوصين بها؟

د. تخبر صديقة مقربة بأنها تعرضت للعنف من زوجها.
ما الذي ستفعلين؟ ما الخدمات التي ستوصين بها؟

هل شهدت أو سمعت عن تجربة مماثلة للتجارب السابقة؟ كيف تعاملت أنت والمجتمع معها؟

هل يجري متابعة بعض المواضيع يتم تجنب الحديث عنها في المجتمع؟
لا
نعم، ما هي؟

هل يتم مناقشة موضوع العنف الموجه ضد المرأة، في مجتمعك؟
المرأة

العذاب، العنف الجنسي، العنف النفسي و الابتزاز العاطفي، الاعتداء، المطاردة والتحرش الجنسي.

هل تعتقد أن بعضاء مجتمعك فعال في مواجهة ومنع العنف ضد المرأة؟
- لا □
- نعم، كيف؟ □

إذا مررت بتجربة ألمية، في أي مجال من مجالات حياتك، إلى أي تتجهين للراحة في علاقاتك الشخصية؟ رتبي العلاقات التالية من 1 - 10، على أن يكون 1 هو أول شخص تستعين إليه تدريجيًا إلى 10. أولئك الذين لن تسعى للحصول على الراحة والطمأنينة منهم، يمكن تركهم فارغين.
- الأم □
- الأب □
- الأخ □
- الخت □
- الصديق(ة) □
- الزميل(ة) □
- معلم، شيخ، قسيس، مرشد ديني □
- زوج □
- عضو في المجتمع □
- مستشار نفسي، معالج، مرشد نفسي □

7. القسم السابع: جائحة كورونا
هل كنت تدرس أو تعمل أثناء فترة جائحة كورونا؟
- لا □
- نعم، كيف كانت تجربتك؟ □

هل تشعرين بأن الجائحة قد أفادتك من حيث التوصول إلى بعض البرامج أو الخدمات التي لم يمكنك الوصول إليها من قبل؟
- لا □
- نعم □
 NPCs، إنفاذ الطفل، تأمين العمل)؟
• لا □  نعم □

ما الذي ساعدك في التأقلم ضمن فترة الجائحة؟
- وكالات الهجرة □
- الفعاليات المجتمعية □
- تنمية الهياكل □
- جلسات مشاركة بين النساء □
  أخري: □

ما هي المصادر التي استعتمت بها ضمن فترة الجائحة عند شعورك بالخوف أو التهديد؟
- خدمات طبية □
- مساعدي الخط الساخن □
- الخدمات العامة خدمات الشرطة □
- دعم الأسرة □
  أخري: □
  لا □

هل تعرضت للعنف في المساحات العامة أثناء الوباء؟
- إيضاح: العنف هو أي شكل من أشكال الضرر الذي تستهدف الفرد أو المجموعة، ويشمل ذلك العنف اللفظي، النفسي، الجسدي، الاعتداء، أو التحرش الجنسي.
• لا □
• نعم، يرجى الإيضاح: □

هل تعرضت للعنف في المنزل أثناء الوباء؟
• لا □
• نعم □
إيضاح: العنف هو أي شكل من أشكال الضرر التي تستهدف الفرد أو المجموعة، ويشمل ذلك العنف اللفظي، النفسي، الجسدي، الاعتداء أو التحرش الجنسي.
لا □
نعم، يرجى الإيضاح:

هل واجهت أي معوقات في محاولة إيجاد منزل/تعليم/وظيفة أثناء الجائحة؟
لا □
نعم، يرجى الإيضاح:

شكراً لك على مشاركتك في هذا البحث وعلى مساهمتك القيمة.
Demographics

Do you consider yourself an Arab-speaking woman?
- Yes
- No

Are you a resident of the Halton Region?
- No
- Yes:
  - Oakville
  - Milton
  - Burlington
  - Halton Hills

Age
- 18-25
- 26-30
- 31-35
- 36-40
- 41-45
- 45-50
- 50+

Country of Origin:
- Egypt
- Syria
- Palestine
- Lebanon
- Jordan
- Other:

Country of Residence prior to Canada:
- Egypt
- Jordan
- Syria
- Turkey
- Iraq
- Lebanon
- United Arab Emirates
- Other:
Ethnicity:
☐ Arab
☐ Kurdish
☐ Amazeigh
☐ Other:

Religious affiliation
☐ Sunni Muslim
☐ Shi’ite Muslim
☐ Coptic Christian
☐ Orthodox Christian
☐ Catholic Christian
☐ Protestant Christian
☐ Jewish
☐ Atheist
☐ Non-religious
☐ Other:

Immigration Status:
☐ Canadian Citizen
☐ Permanent Resident
☐ Refugee status
☐ Refugee claimant
☐ Work Permit
☐ Post Graduate Work Permit (PGWP)
☐ Study Permit (International Student)
☐ Other:

How many years have you been in Canada?
☐ Less than a year
☐ 1-2 years
☐ 3-5 years
☐ 5-10 years
☐ 10yrs+
What is your mother tongue?

Definition: Mother tongue refers to the first language learned at home in childhood and still understood by the person. If the person no longer understands the first language learned, the mother tongue is the second language learned. [Statistics Canada].

☐ Arabic
☐ French
☐ English
☐ Other:

Proficiency in other languages

Arabic:
☐ Native/bilingual
☐ Advanced
☐ Intermediate
☐ Elementary
☐ Beginner
☐ NA

English:
☐ Native/bilingual
☐ Advanced
☐ Intermediate
☐ Elementary
☐ Beginner
☐ NA

French:
☐ Native/bilingual
☐ Advanced
☐ Intermediate
☐ Elementary
☐ Beginner
☐ NA

Education Level (Select highest)

☐ Primary Education
☐ Highschool/General Education
☐ College/Diploma
☐ Bachelors
☐ Masters/Post-Graduate
☐ PhD
☐ Post-doctorate
Where did you complete your highest level of education?

- Syria
- Egypt
- Turkey
- Canada
- Other:

In what language did you complete your highest level of education?

- Arabic
- English
- French
- Hybrid, bilingual
- Other:

Employment Status

- Employed
  
  i. If employed, what is the length of your current employment?
    - Less than a year
    - 1-2 years
    - 3-5 years
    - 5+ years
  
- Unemployed
- Seeking employment
- On leave (maternity leave, sick leave, sabbatical)
- Other:

Marital Status

- Single
- Engaged
- In a relationship
- Married
- Separated
- Divorced
- Widowed

- Number of dependents:
Do you have a disability as defined under the Ontario Human Rights Commission?
Definition: Any degree of physical disability, infirmity, malformation by bodily injury, birth defect or illness. This includes diabetes, epilepsy, blindness, deafness or speech impediment. Any form of mental impairment or learning disability. [Ontario Human Rights Commission]

☐ Yes
☐ No

What is your living arrangement? [Check all that applies]
☐ I Live alone.
☐ I Live with my spouse.
☐ I Live with my spouse and kids.
☐ I live with my extended family.
☐ I live with my siblings.
☐ I live with a roommate.
☐ University dorms.
☐ Other:

Do you pay rent or contribute to the payment of rent?
☐ Yes
☐ No
SECTION I: Immigration and Belonging

- What were the reasons for your immigration to Canada? [Check all that apply]
  - □ Looking for a better life for myself and my family.
  - □ Seeking employment.
  - □ To pursue my studies.
  - □ Personal Safety.
  - □ Conflict or war in the home country.
  - □ Fleeting discrimination.
  - □ Other:

- Did you work before coming to Canada?
  - □ No
  - □ Yes:
    - □ Full-time
    - □ Part-time
    - □ Casual
    - □ Volunteer/Training
    - □ Other:

- Did work affect your family dynamic in your home country?
  - □ No
  - □ Yes: in what way?

- What challenges did you face in adapting to this new environment [immigrating to Canada]: [Check all that apply]
  - □ Weather
  - □ Culture
  - □ Legal System
  - □ Language Barrier
  - □ Cost of living
  - □ Other:

- What were the factors of support that eased your transition? [Check all that apply]
  - □ Friends
  - □ Community Members
  - □ Family
  - □ Religious Community
  - □ Settlement Agency
  - □ Other:
What changes, if any, did you think you need to make since coming to Canada?

SECTION II: Discrimination

- Do you feel, or were there situations where you faced discrimination due to being a visible minority?
  
  Definition: Discrimination is any form of unjust or unfair treatment based on characteristics such as religion, race or sex.

  - No
  - Yes, such as:

- Do you feel, or were there situations where you faced discrimination due to your religious identity?
  
  Definition: Discrimination: an unjust or unfair treatment based on characteristics such as religion, race or sex.

  - No
  - Yes, such as:

- Has this discrimination ever take the form of violence?
  
  Violence: any form of harmful acts directed at the individual or group, this could include physical, psychological, verbal, or sexual harassment.

  - No
  - Yes: what form of violence?
    - Physical
    - Psychological
    - Verbal
    - Sexual
    - Other:
• Have you faced any other difficulties that resulted from facing discrimination? (Health problems, work issues, etc.)

• What supports do you usually turn to after you feel you have been discriminated against? [check all that apply]
  □ Family
  □ Friends
  □ Spouse
  □ Sibling
  □ Community
  □ Other:

SECTION III: Employment
• Have you faced any barriers when seeking employment/education after coming to Canada?
  □ No
  □ Yes, what were the barriers?

• What sources did you find helpful in assisting you in finding employment?
  □ Settlement Agency
  □ Social Media
  □ LinkedIn/Indeed
  □ Friends
  □ Community Relations
  □ Other:

• Are you financially responsible for anyone outside of your immediate family? (Parents, in-laws, family out of country, etc.)
  □ Yes
  □ No

• Are you more or less financially involved in the family after immigrating to Canada?
  □ More financially involved
  □ Less involved
  □ Equally involved
Do you feel like you’re treated differently in your workplace because you are a woman?

☐ No
☐ Not Applicable
☐ Yes: how are you treated differently?

How often do you feel included at your workplace?

☐ Always
☐ Sometimes
☐ Varied
☐ Rarely
☐ Never

What does inclusion mean or look like to you?

“If I could hide my identity as an Arabic-speaking woman, I know I’ll be treated differently by certain people.”

☐ Strongly Agree
☐ Agree
☐ Neither Agree nor disagree
☐ Disagree
☐ Strongly disagree

“Being a visibly Arabic-speaking woman makes me more susceptible to negative stereotypes.”

☐ Strongly Agree
☐ Agree
☐ Neither Agree nor disagree
☐ Disagree
☐ Strongly disagree
“If I could hide my identity as an Arabic-speaking woman, I know I’ll be given more opportunities in my career.”

☐ Strongly Agree
☐ Agree
☐ Neither Agree nor disagree
☐ Disagree
☐ Strongly disagree

“If I could hide my identity as an Arabic-speaking woman, I’ll feel safer.”

☐ Strongly Agree
☐ Agree
☐ Neither Agree nor disagree
☐ Disagree
☐ Strongly disagree

SECTION IV: SERVICES

- Rate the following services based on how accessible they are:

<table>
<thead>
<tr>
<th>Service</th>
<th>Extremely hard to access</th>
<th>Hard to access</th>
<th>Neither easy nor hard to access</th>
<th>Easy to access</th>
<th>Extremely easy to access</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical services</td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Immigration and settlement agencies</td>
<td></td>
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<td>Employment</td>
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<td>Mental health services</td>
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<td>Legal services</td>
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<td>Religious services</td>
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<tr>
<td>Banking</td>
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<tr>
<td>Community spaces</td>
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<td></td>
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<tr>
<td>Public Safety (such as police services)</td>
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<td></td>
</tr>
</tbody>
</table>
Based on your answers above, how do you rate your overall experience accessing various services? And why?

- Extremely positive
- Positive
- Neither positive or negative
- Negative
- Extremely negative

Why:

What do you think can be done to improve your experience accessing services? What do you think are barriers or gaps in the services being provided?

Do you feel that service providers are able to understand your point of view and your cultural background?

- If yes, elaborate.

If not, how can it be improved?
• Do you face language barriers when accessing services? Do you feel that you can’t fully express your needs in a language other than your native tongue?
  □ Yes
  □ No
  □ Maybe

• Where do you receive most of your information on services from?[check all that apply]
  □ Settlement Agency
  □ Internet: Searches
  □ Social Media
  □ Government News
  □ Mail
  □ Other:

• How well do you think you know the Canadian legal system?
  □ Very Well
  □ Well
  □ Adequate
  □ Inadequate
  □ Very little
  □ Nothing

• If you or someone you know needs legal assistance, do you know where you can get it?
  □ Ask a friend or family member
  □ Contact an organization, name:
  □ Search online
  □ Not sure
  □ Other:

SECTION VI: Accessing Resources
• What resources would you recommend if someone you know faces a form of abuse or harassment?
• What would be your response if you or someone you know faces violence (check all that apply).
  □ Physically defending yourself
  □ Try to reason with the abuser
  □ Seek help from your family or friends
  □ Seek help from community leaders
  □ Seek help from the police
  □ Seek help from the legal system
  □ Seek help from local civil society organizations.
  □ Seek help from a health care provider (physician or therapist).
  □ Other:

• For the following scenarios, tell us what will you do, what services will you recommend and why:

A. Your friend tells you that she is paid less at her job because it is a male-dominated field.
  ■ What would you do?

B. Your sister tells you that a man has sexually harassed her on the public transport.
  ■ What would you do/what services would you seek out?

C. Your friend tells you that she has experienced violence inside the home from a family member.
  ■ What would you do/what services would you seek out?
D. A close friend of yours tells you that she has been experiencing violence from her intimate partner.

- What would you do /what services would you seek out?

- Have you ever witnessed a similar incident? And how did you and the community deal with it?

- Do you feel that there are certain topics that are stigmatized to talk about in the community?
  
  □ No
  □ Yes: what are they

- Is the topic of gender based violence discussed in your community?

  *Definition: gender-based violence against women is any form of violence which includes name-calling, physical violence, assault, stalking, manipulation and sexual harassment.*
• Do you think that your community is proactive in addressing and preventing violence against women?
  □ No
  □ Yes, in what way?

• Following a painful experience, in any area of your life, who do you seek comfort from within your personal life? Rank the relationships you would go to for comfort, with 1 being those you’re most likely to seek comfort from. Counting down the relationships with each subsequent number. Those you will not seek comfort from can be left blank.
  □ Mother
  □ Father
  □ Sister
  □ Brother
  □ Friend
  □ Work Colleague
  □ Mentor/Religious leader/Elder in the community
  □ Spouse
  □ Community Member
  □ Counselor/therapist/mental health service.

**SECTION VII: Covid-19 and the context of the Pandemic**

• Did you work or study during the pandemic?
  □ No
  □ Yes: How was that experience?
• Do you feel that the pandemic has benefited you to access certain programs or services that were not feasible before?
  □ No
  □ Yes: elaborate:

• Have you received any benefits from the government? (CERB, EI, Child benefits, etc.)
  □ No
  □ Yes: specify:

• What helped you cope during the pandemic?
  □ Settlement Agency services
  □ Community activities and support
  □ Developing hobbies
  □ Wellbeing sessions
  □ Other:

• What resources did you seek during the pandemic when you felt vulnerable or threatened?
  □ Medical services
  □ Hotlines
  □ Public safety and police
  □ Family support
  □ Community support
  □ Other:
  □ Not Applicable

• Have you faced violence in public spaces during the pandemic?
  Definition: Gender-based violence includes any form of violence such verbal, psychological, physical and sexual harrassment.
  □ No
  □ Yes, elaborate:
Have you experienced violence at home during the pandemic?

*Definition: Domestic violence includes any form of violence such as emotional, financial, control and manipulation and physical violence.*

☐ No

☐ Yes, elaborate:

Is there anything you would like to add that hasn’t been covered in the questionnaire?

Thank you for participating in this research. Your contribution is highly valued.
Consent Forms
استمارة الموافقة في المشاركة في البحث

هذا دعوة للمشاركة في دراسة بحثية حول تجارب الهجرة والاستقرار عند النساء الناطقات باللغة العربية في منطقة هالتون. تم تمويل هذا البحث من قبل المؤسسة الكندية النسائية ومؤسسة تقديم المرأة والمساواة بين الجنسين. يجري هذا البحث تحت إشراف مؤسسة الفراغ للتعليم والتنمية بالتعاون مع مركز هالتون متعدد الثقافات ومؤسسة نسج نساء من أجل العدالة.

الباحثين والجهات الداعمة:
مريم الزيني: باحثة
mariam@q-ed.org
كوثر الخولي: نسج نساء من أجل العدالة
kawther.alkholy@women4justice.org
إشراف البحث:
نهير الجندي: مشرفة البحث
noheir@q-ed.org

الغرض البحثي: تهدف هذه الدراسة إلى توثيق قصص النساء الناطقات باللغة العربية المقيمات في منطقة هالتون وتجميع قصصهن حول الهجرة والاستقرار. سيتم طرح أسئلة على المشاركات حول تجاربهن في المنزل، الدراسة، العمل، في الأماكن العامة، وفي الوصول إلى الخدمات المختلفة. كذلك تسعى هذه الدراسة إلى تقديم تأثير جائحة كورونا على المشاركات وتجاربهم ضمن هذه الفترة في الوصول والتعامل مع الخدمات المختلفة.

المخاطر المحتملة: هناك حد أدنى من المخاطر في المشاركة في هذه الدراسة البحثية. قد تشعر المشاركة ببعض الراحة في بعض الأسئلة أو استكشاف تجارب معينة. نود التأكيد على جميع المشاركات بأن لديهم الحرية الكاملة في اختيار طريقة الإجابة على الأسئلة، والقرار الكامل في ترك بعض الأسئلة والإجابة على بعضها.

الإجراءات البحثية: سيتم إجراء هذه الدراسة من خلال استبيان بحثي موجه لنساء معتربن، ويستغرق حوالي 60 دقيقة كإجمال. سيتم أيضًا بضع الأسئلة الديمقراطية العامة لفهم خلفية المشاركات بشكل أفضل. مع الالتزام بأن هوية المشاركة مجهولة وسرية.

المخاطر المحتملة: معظم من نوعها في توثيق تجارب النساء الناطقات باللغة العربية في منطقة هالتون ضمن سياق جائحة كورونا. نسعى من خلال هذه الدراسة إلى التواصل لهم ودعم تجارب الفئة المستهدفة والتحديات التي يواجهها. ستستخدم نتائج هذه الدراسة بتوجيهات برامج جماعية، مبادرات وسياسات لدعم ومساعدة الوصول إلى الخدمات بشكل كبير. سيتم نشر نتائج هذا البحث أكاديميا وعرض في مؤتمرات واستخدامها لنشر الوعي لدى مقدمي الخدمات والباحثين وواضح سياسات.

تكريم المشاركة: نود أن نستشرد المشاركين في هذا المشروع البحثي، سيكون الفريق البحثي ينشر نتائج الدراسة ومشاركتها مع الجهات المختصة والمشاركين. لمعرفة المزيد حول المشروع، والوصول إلى الملخص برجي زيارة موقع البحث الخاص بنا: noonstory.ca

حظر هوية المشاركين: المشاركة في هذه الدراسة البحثية تخفي هوية المشاركة، ولن يتمكن أحد المشاركين بناءً على الإجابة، إلّا بناءً على المشاركين مشاركة أي معلومات شخصية أو بيانات تعريفية، وطلب من المشاركين عدم تضمين أي من هذه المعلومات في أجواء الأسئلة المفتوحة. إذا قمت بتضمين أي معلومات نشر بأنها قد تحدد هويتك (كاسم منطقة السكن التفصيلية أو مكان العمل)، فستقوم بإزالتها قبل نشر البيانات ومشاركتها لضمان عدم الكشف عن هويتك.

تخزين البيانات: سيتم تخزين البيانات بشكل آمن في مؤسسة الفراغ للتعليم والتنمية. ستتم حماية بيانات البحث أثناء جمع البيانات وتحليلها عبر السحابة الأمرافية الخاصة بالمؤسسة. سيتم تخزين البيانات بشكل آمن لمدة خمس سنوات بعد نشر ومشاركة النتائج وبعد ذلك يتم تدميرها.
الأسئلة والاستفسارات: لطرح أي سؤال يتعلق بالدراسة أو مشاركتك، يرجى التواصل مع أحد أعضاء الفريق البحثي من خلال المعلومات المذكورة أعلاه.

من خلال المشاركة في هذه البحث:

☐ أعلم أن هذا البحث يتضمن أسئلة ذات طبيعة شخصية وحساسة. قد يكون الأمر مثيراً لبعض الأفراد. إذا شعرت بالحاجة إلى أخذ قسط من الراحة أو تخيط سؤال أو الانسحاب تماماً، فسأبلغ القائمين على البحث وسيتم احترام قراري.

☐ أوافق على المشاركة في الأجوبة على الأسئلة البحثية والتفاعل مع الأجزاء المختلفة من الاستبيان.

☐ أعلم أنه يمكنني سحب مشاركتي في أي وقت دون إبداء أي سبب، ولن يؤثر ذلك بأي شكل من الأشكال على مشاركتي.
Participant Information and Consent Form

You're invited to participate in a research study on experiences of immigration and settlement of Arab-speaking women in the Halton Region. This research is funded by The Canadian Women’s Foundation and Development of Women and Gender Equality (WAGE). This research is conducted by Al-Qazzaz Foundation for Education and Development in collaboration with HMC Connections and Women for Justice Foundation.

Researchers and Collaborators:
Mariam Elzeiny: Lead Researcher: mariam@q-ed.org
Kawther Akholy: WFJ: kawther.alkholy@women4justice.org
Principal Investigator:
Noheir Elgendy: Research Supervisor: noheir@q-ed.org

Purpose and objective of the research: The purpose of this study is to document the stories of Arabic-speaking women in the Halton region, and their experiences of immigration and settlement. The participants will be asked questions on their experiences at home, in educational spaces, at work, in public spaces and accessing various services. Additionally, the research will assess the impact of COVID-19 on participants' experiences and access to services.

Procedures: This anonymous survey should take approximately 45-60 minutes to complete. We will also be asking some general demographic questions to better understand the participants' background. Rest assured that none of this information will allow anyone to identify you.

Potential Risks: There is minimal risk in participating in this research study. Participants may experience emotional discomfort when recalling certain experiences. Before participating we encourage participants to ensure that they are comfortable with answering questions regarding their experiences. You are also free to answer only those questions that you feel comfortable with and to leave others unanswered.

Potential Benefit: This study is the first to scan Arabic-speaking women experiences and challenges in the Halton Region within a COVID-19 context. The study shall help us understand those unique experiences and challenges. The findings of this research study can help guide the development of social programs, grassroot initiatives, policies and improve access to services. Findings may also be published in an academic journal and/or presented at academic conferences to further educate service providers, researchers and policy creators.
**Honoring Participation:** To acknowledge participants' investment in this project, the research team will be publishing the findings of this research along with infographics to communicate the project's findings to all interested parties. To learn more about this project, or to access the summary and findings please visit our research website: noonstory.ca

**Anonymity:** Participation in this research study is anonymous, no one will be able to discern the identity of the participants based on their data. We do not ask you to provide any personally identifying information, and we ask that you do not include any such information in any of your open-ended responses. If you do include any information that we feel may identify you (city names, workplaces, etc), we will remove it prior to analyzing and presenting the data to ensure your anonymity.

**Storage of data:** all data will be securely stored at Al-Qazzaz Foundation for Education and Development. Research data will be protected during data collection and analysis via the institution's virtual Google Drive. Data will be securely stored for five years following the publication and dissemination of findings after which it will be destroyed.

**Questions or Concerns:** To ask questions concerning the study or your participation, please contact any of the researcher(s) using the information at the top.

In participating in this research, I:

- Understand that this research involves questions of a personal and sensitive nature, this may be triggering for some individuals. If I feel the need to take a break, skip a question, or completely withdraw from the interview I’ll inform the interviewer and my choice will be respected.

- Consent to voluntarily participate in sharing, answering and actively interacting in the various parts of this research.

- Know that I can withdraw my participation at any time and without providing any reason, this will not in any way affect my participation.
Certificate of Completion

This document certifies that

Noheir Elgendy

successfully completed the Course on Research Ethics based on the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS 2: CORE 2022)

Certificate # 0000878463

14 November, 2022
Certificate of Completion

This document certifies that

Mariam Elzeiny

successfully completed the Course on Research Ethics based on the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS 2: CORE 2022)

Certificate # 0000834232

30 July, 2022
Certificate of Completion

This document certifies that

Romaisa Hameed

successfully completed the Course on Research Ethics based on the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS 2: CORE 2022)
Certificate of Completion

This document certifies that

hoda shaheen

successfully completed the Course on Research Ethics based on the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS 2: CORE 2022)
Certificate of Completion

This document certifies that

Kawther Ramadan

successfully completed the Course on Research Ethics based on the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS 2: CORE 2022)

Certificate # 0000819331

7 May, 2022
Voices of Arabic-Speaking Women: Migration Experiences & Stories