

La Salle - A Story of Survival

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If you had to completely uproot your life and start over from scratch, how long would it take? Even if you had resources to draw on – support from friends and family, some money saved up, stable employment – could you leave everything you know behind, begin again, and carry on living productively in as little as three weeks?

What if you also had children to care for? What if you had been systematically isolated from the support of family and friends over time? What if you had no money and no income? Could you rebuild your life in 21 days?

This is the scenario faced by women and their children who enter emergency shelters to escape domestic violence. These front-line, “first-stage” agencies serve a crucial purpose; they provide immediate safety, counselling, advocacy, and as much support as they can in the limited time frame they have to serve each client.

But an emergency shelter is a temporary solution. Many women leaving abusive situations have complex underlying issues that need to be addressed, or lack the financial means to establish themselves outside the framework of their relationship. When their time at the shelter is up, with few resources and nowhere else to go, they may face the prospect of returning to the violent situation they left.

This terrible possibility underscores the need for a program like La Salle. La Salle is a “second-stage” shelter; clients are referred there by front-line agencies, and women and their children can stay for up to a year. They get the time and safe environment they need to achieve healing and independence.

Outreach Workers like Michelle S. assist clients by facilitating discussion workshops, helping with goal-setting and life skills development, accompanying them to medical and legal appointments, and helping them find housing and income support as well as employment and educational opportunities.

It’s all-encompassing, demanding work. But sometimes a client’s situation presents challenges that require an even broader scope of thought and even greater demand of time and effort.

A woman we’ll call Salima was born in a North African nation. She was a highly educated, certified health-care professional. Her husband’s work took them all over the world, including an extended stay in Edmonton. The relationship had been marked by cycles of violence and reconciliation, and the constant relocation served to distance her from familial support. Eventually, Salima found herself living in a Middle Eastern country with two children, ages 3 and 1. And that’s when she

experienced her husband’s most violent assault. This was no uncontrolled outburst in a moment of rage; it was a calculated attempt on her life.

She survived the attack and spent a few days receiving treatment in hospital. Medical and social authorities were motivated to get Salima and her children out of harm’s way, and reached out to any agency they could, including an Edmonton-based community agency that specializes in sup-

porting people of Salima’s cultural background. That agency made a desperate plea to La Salle for an emergency intake, and as fortune would have it they were able to help. And so it was that, a week after her assault, Salima and her children arrived on the other side of the world and took up residence at La Salle in autumn of 2012.

The physical evidence of her ordeal was apparent. She had extensive bruising; she would wince with pain when her children would cling to her for comfort. She was quiet and withdrawn. Although her command of English was quite good, at this stage she was not comfortable with her surroundings and communicated through a translator. And she arrived “with a very bad impression of shelters,” as Michelle describes. To Salima’s way of thinking, shelters were for drug addicts and prostitutes, not families. Especially not a “normal” family like hers. She was distrustful and wanted to leave as soon as she could, despite looming safety concerns such as the possibility of her husband coming back to Canada to find her or having connections here seek her out and try to take the children away.

Salima’s love for her children is what started the process of bringing her around. She saw and appreciated the devotion and compassion La Salle’s child-care staff extended to her children, and watching them open up and grow more comfortable allowed her to do the same. Soon she began fully participating in community life at La Salle. Other women’s stories resonated with her own experiences, and she started to work through her process of healing, asking for and accepting support when she needed it.

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“Those barriers just started to disappear,” says Michelle. “She learned that whatever she came to us with, we would find some way to help.”

As her wounds healed and her confidence grew, Salima’s motivated, driven personality emerged. She discussed with Michelle her goals of furthering her education so she could get back into a medical practice here in Canada. Both she and her children were working through their trauma, dealing with the long-lingering effects of the mental anguish that accompanied the physical violence. The children, who had arrived afraid to even make eye contact with La Salle staff, were now smiling and laughing as they played with other kids.

This family had made so much progress in re-establishing their new lives, but was soon dealt another frightening setback.

Near the end of the year, Salima began experiencing troubling symptoms: fatigue, dizziness, headaches. A scan revealed a brain tumour that required surgery as soon as possible. She would be hospitalized for about a week.

This scenario presented stressful practical issues on top of the pressing health scare. Specifically, who would look after the children while Salima was in the hospital? The team at La Salle worked with her to come up with a number of possible solutions, applying real outside-the-box thinking to this unprecedented situation. The stability and safety La Salle had brought to Salima and her children’s lives was still so crucial to their well-being; how could they best continue to provide that support – especially for the kids, for whom La Salle had truly become a home – to help them through this crisis?

It was eventually determined that some of Salima’s family, her mother and brother, would be able to come and provide support. The grandmother, assuming the role of primary caregiver, would live at La Salle with the children while the uncle would visit to support her. This solution was most unconventional for La Salle, where even female relatives are not permitted overnight stays.

La Salle staff worked in concert with interfaith community personnel, who provided translation services (the uncle spoke little

English, the grandmother none), got the uncle set up in a hotel a block away from the shelter, and helped the family with daily activities like grocery shopping.

Salima’s surgery was successful, although complications resulted in her projected one-week recovery time turning into a three-week rehabilitative stay at the Glenrose Hospital. Michelle and her colleagues displayed tremendous dedication to Salima’s well-being, rearranging their schedules to accommodate hospital visits with her family and making time to support her through this experience. “We’re taking her in for all these procedures, these surgeries, these exams,” Michelle recalls. “We’re there holding her hand right before she goes into the appointment, she goes in, she’s under anesthetics, and we’re the first people she sees by her bedside when she opens her eyes... We just don’t want her waking up alone. We just don’t want her for one moment to think she’s alone... We’re like her family until her family can be there.”

Salima also had the support of a further extended family in the form of the other residents of La Salle. They visited her in the hospital, bringing flowers and well-wishes. They helped the elderly grandmother look after the kids. They were understanding and accommodating of the uncle’s presence in the shelter. As Michelle says, “It’s like their sister was in need and everybody just kind of rallied.”

Salima’s drive served her well in rehab, and she was soon living back at La Salle with her mother and children, recovering in an environment of support and love.

The doctors told Salima it would be quite some time before she could return to school or work. Faced with this future, she came to the decision that what she needed most at this point in her life was to be with her family. So in late spring of 2013, after a tearful goodbye with the La Salle staff, Salima and her family returned to her home country.


Michelle says that Salima, with whom she is still in regular e-mail contact, is “surrounded by her family and feeling really positive.” She is healthy and looking forward to the opportunities her education offers her in her homeland. Her family has secured a lawyer to keep her and her children together and safe.

“She just impacted our lives more than we could ever imagine, and vice versa,” says Michelle. “I wish I had a snapshot of the family that came in, and the family that left. You probably wouldn’t even recognize them. It’s just astonishing what this woman achieved here.”

When they arrived, Michelle would have described them as “broken... hopeless, deeply traumatized... frightened... powerless.”

But the family that left? “Confident... Motivated. Empowered... She had a renewed strength and a clear direction...”

“It was an amazing journey, and we were so touched as staff that we got to walk that journey with her.”

Through the dedication of its staff, La Salle provides a safe place for those who need it most. Staff and clients form a community of support, healing and hope – a family. 



WOMEN’S SHELTER ADMISSION IN ALBERTA

- In a one-year period from 2011 to 2012, 5846 women and 5676 dependent children were admitted to emergency shelters in Alberta; 4255 women and 3561 children were turned away due to capacity limits.
- Second-stage shelters across Alberta, such as La Salle, admitted 217 women and 467 dependents. 256 women and 115 children could not be admitted due to capacity limits. (Source: Alberta Council of Women’s Shelters Annual Statistics, Fiscal Year April 2011-March 2012)
- There are 38 emergency shelters in Alberta. There are just 10 second-stage shelters. La Salle is one of only two located in Edmonton. (Source: ACWS Second-Stage Shelters FAQ)
- La Salle relies on the Sign of Hope annual fundraising campaign for 90% of its operating budget. To donate, visit www.signofhope.ab.ca