

## **Public Hearing**

## **Audience publique**

### **Commissioners / Commissaires**

The Honourable / L'honorable J. Michael MacDonald,  
Chair / Président

Leanne J. Fitch (Ret. Police Chief, M.O.M)

Dr. Kim Stanton

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## II Appearances / Comparutions

Ms. Emily Hill	Commission Counsel / Conseillère de la commission
Ms. Laura Snowdon	Commission Counsel / Conseillère de la commission
Ms. Gillian Hnatiw	Commission Counsel / Conseillère de la commission
Ms. Megan Stephens	Counsel / Conseillère
Ms. Erin Breen	Counsel / Conseillère
Ms. Anastacia Merrigan	Counsel / Conseillère

**III**  
**Table of Content / Table des matières**

	<b>PAGE</b>
<b>DR. TARA LEIGH TOBER, Affirmed</b>	3
<b>DR. TRISTAN BRIDGES, Affirmed</b>	3
Examination on qualifications by Ms. Emily Hill	3
Examination in-Chief by Ms. Emily Hill	8
Cross-Examination by Ms. Megan Stephens	40
<b>INTRODUCTION OF FOUNDATIONAL DOCUMENTS – VIOLENCE IN THE PERPRETRATOR’S FAMILY OF ORIGIN</b>	51
Presentation by Ms. Laura Snowdon	51
<b>DR. DEBORAH DOHERTY, Affirmed</b>	72
Examination on qualifications by Ms. Gillian Hnatiw	72
Examination in-Chief by Ms. Gillian Hnatiw	89
Cross-Examination by Ms. Erin Breen	104
Cross-Examination by Ms. Anastacia Merrigan	113

**IV**  
**Exhibit List / Liste des pièces**

<b>No</b>	<b>DESCRIPTION</b>	<b>PAGE</b>
3332	(COMM059737) Curriculum vitae of Dr. Tristan Bridges	4
3333	(COMM059738) Curriculum vitae of Dr. Tara Leigh Tober	4
3334	(COMM0059379) Foundational Document entitled "Violence in the Perpetrator's Family of Origin" plus related source materials	51
3335 to 3357	Commissioned report and additional exhibits related to previous Foundational Documents	72
3358	(COMM59736) Curriculum Vitae of Dr. Deborah Doherty	73

Halifax, Nova Scotia

--- Upon commencing on Monday, July 11th, 2022, at 9:34 a.m.

**REGISTRAR DARLENE SUTHERLAND:** Good morning, the proceedings of the Mass Casualty Commission are now in session, with Commissioner Michael MacDonald, Commissioner Leanne Fitch, and Commissioner Kim Stanton presiding.

**COMMISSIONER FITCH:** Bonjour et bienvenue. Hello and welcome. We join you from Mi'kma'ki, the ancestral and unceded territory of the Mi'kmaq.

Prior to proceedings today, we were grateful to welcome Elder Marlene Companion of the Qalipu Mi'kmaq First Nation, who came into this space to cleanse it through smudging and to say a prayer that proceedings will continue with positive energy and open hearts.

As we do every day, please join us in remembering those whose lives were taken, those who were harmed, their families, and all those affected by the April 2020 mass casualty in Nova Scotia.

This week, as directed in our mandate, we will examine the role of gender-based and intimate partner violence in the mass casualty. We will learn more about the violence of the perpetrator directed towards many people prior to the mass casualty, including his common-law spouse, Lisa Banfield, who will -- we will hear from later this week.

Since March, Ms. Banfield has participated in five lengthy interviews with the Commission and voluntarily shared evidence key to the Commission's independent investigation. The interviews provide a large amount of information and detail on a variety of subjects, including the violence, coercion and control she experienced during her long relationship with the perpetrator, and her experiences as the first target of his violence in April -- on April 18th, 2020.

As per our practice during proceedings, Commission Counsel will

1 highlight the related information prior to the Foundational Documents being presented  
2 this week and next, including one about the perpetrator's violence towards Ms. Banfield  
3 that will be shared on Wednesday. Additionally, given Ms. Banfield's unique situation as  
4 both a factual witness to the events, and as one of the most affected, we are of the view  
5 that it is necessary to hear from her directly in person, and we will do so in Friday's  
6 proceedings.

7                   Throughout this week, we hope to gain further insights into how and  
8 why the mass casualty happened, including risk factors, warning signs, and potential  
9 interventions that may inform recommendations to help make our communities safer in  
10 the future. While we hope to continue gathering information and answers this week, we  
11 must also recognise that there are some things about what, why, and how things  
12 happened that we will never fully know. We recognise that despite our rigorous  
13 approach to seek answers and the important information people continue to share, the  
14 fact remains that the perpetrator is not here to account for his actions.

15                   Again this week, we know that the information revealed will be  
16 especially difficult for people to hear, including those affected by violence or abuse, both  
17 directly and indirectly affected by the mass casualty. With that in mind, we encourage  
18 everyone in the room and watching from home to continue engaging with proceedings  
19 in ways that are compassionate and helpful for our work.

20                   As we have said, the Commission is not a criminal or civil court, it is  
21 our responsibility to ensure proceedings remain respectful, constructive, humane, and --  
22 in order to get the best information to inform change to help keep people safer in the  
23 future. Please remember if the subject matter is too difficult in the moment, you can  
24 always take a break if needed.

25                   The documents being shared the discussions occurring at our  
26 roundtables and with witnesses will be available on our website at a later date at your  
27 convenience. If you are here in person, please reach out to our dedicated mental health  
28 team who are available here onsite as always if you or someone near you require help.

1 Additionally, a reminder for our online viewers, as always everyone is welcome to  
2 contact the support services listed on our website.

3 Today, we'll begin by hearing from two expert witnesses,  
4 Drs. Tristan Bridges and Tara Leigh Tober, who will discuss this Commissioned reports  
5 on the Mass Shootings and Masculinity. Commission Counsel will then share a  
6 Foundational Document focussed on violence within the perpetrator's family. After that,  
7 Dr. Deborah Doherty will join us as an expert witness to discuss family violence and  
8 gender-based violence, with a particular focus on rural communities in Atlantic Canada.

9 I will now ask Senior Commission Counsel, Emily Hill, to introduce  
10 today's first witness -- witnesses. Thank you, Ms. Hill.

11 **MS. EMILY HILL:** Thank you. As Commissioner Fitch has said,  
12 my name is Emily Hill, I'm a member of the Commission Counsel team. We will begin  
13 this morning with a witness panel, and we're joined remotely by Dr. Tristan Bridges and  
14 Dr. Tara Leigh Tober.

15 Good morning. Thank you for joining us. I know that you're in  
16 California and it's very early there, so thank you for making yourselves available.

17 Madam Registrar, could I ask that you affirm the witnesses?

18 **--- DR. TARA LEIGH TOBER, Affirmed:**

19 **--- DR. TRISTAN BRIDGES, Affirmed:**

20 **--- EXAMINATION ON QUALIFICATIONS BY MS. EMILY HILL:**

21 **MS. EMILY HILL:** We are starting this week with a discussion  
22 about this report because it provides a helpful overview about the phenomenon of mass  
23 casualty events, how they are studied and understood. The report also explores links  
24 between mass casualties, guns, and masculinity.

25 This morning, we will be dealing with three documents: The  
26 Commissioned report, Mass Shootings and Masculinity, which has already been made  
27 an exhibit, Exhibit P-001103, and is available on our website. I'd also like to have two  
28 exhibits marked now.

1 First, the curriculum vitae of Tristan Bridges, which is  
2 COMM0059737. Madam Registrar?

3 **REGISTRAR DARLENE SUTHERLAND:** And that's Exhibit 3332.

4 **MS. EMILY HILL:** Thank you.

5 **--- EXHIBIT NO. 3332:**

6 (COMM059737) Curriculum vitae of Dr. Tristan Bridges

7 **MS. EMILY HILL:** And the CV of Tara Leigh Tober,

8 COMM0059738.

9 **REGISTRAR DARLENE SUTHERLAND:** Three-three-three-three  
10 (3333).

11 **MS. EMILY HILL:** Thank you.

12 **--- EXHIBIT NO. 3333:**

13 (COMM059738) Curriculum vitae of Dr. Tara Leigh Tober

14 **MS. EMILY HILL:** Commissioners, I will just briefly review the CVs  
15 of Dr. Tober and Dr. Bridges. I have provided the Participants with the qualification  
16 terms, and I haven't heard that there's any objection. We will be asking that you qualify  
17 them as experts basically with regard to the content of their report: what constitutes a  
18 mass casualty event, the published research about other mass casualty events,  
19 including identifying gaps within the scholarly and policy literature, their work to  
20 establish a registrar of mass shootings in the United States, and the relationship  
21 between masculinity and mass violence.

22 So I would ask now, Madam Registrar, if you could bring up the CV  
23 of Dr. Bridges. Thank you.

24 Dr. Bridges, I'm just going to ask you a few questions about your  
25 CV. First of all, I see that you are currently the -- an associate professor in sociology at  
26 the University of California, Santa Barbara. Is that correct?

27 **DR. TRISTAN BRIDGES:** Yes.

28 **MS. EMILY HILL:** I see that you have an appointment to be the



1 Vice-Chair of the department from 2022 to 2025; is that correct?

2 **DR. TRISTAN BRIDGES:** Yes.

3 **MS. EMILY HILL:** I see that you obtained a PhD. Can you explain  
4 where and when you received that PhD?

5 **DR. TRISTAN BRIDGES:** Yeah, at the University of Virginia in the  
6 United States, also, in 2011 in sociology.

7 **MS. EMILY HILL:** And you have co-authored three books,  
8 according to your CV; is that correct?

9 **DR. TRISTAN BRIDGES:** Yes.

10 **MS. EMILY HILL:** I see that there are -- you have authored and  
11 co-authored many papers in peer-reviewed journals and book chapters. I won't take  
12 you through them all, but just to highlight a few that are particularly relevant to our  
13 discussion this morning.

14 The first article listed, so I presume that is perhaps one of your  
15 most recent articles, is entitled To Provide or Protect? Masculinity, Economic  
16 Insecurity, and Protective Gun Ownership in the United States. Can you just describe  
17 very briefly that publication?

18 **DR. TRISTAN BRIDGES:** Sure. That's a -- that's based on field  
19 experiment data. So people were asked a variety of questions, both gunowners and a  
20 group we identify as prospective gun owners. And in that paper, we were asking the  
21 extent to which men experiencing economic struggles might be more likely, more  
22 supportive of gun ownership, or might be more willing to say that they'd be interested in  
23 purchasing guns if they didn't own one. And we did find that. And why we were able to  
24 publish it is that we also found that it wasn't just people who were parents and partners,  
25 but it was men more generally who experienced economic downturn were more  
26 supportive of gun ownership, regardless of whether or not they were married or had  
27 children.

28 **MS. EMILY HILL:** Thank you. If we could turn to page 3 now?

1                   **COMMISSIONER STANTON:** Sorry, I'm just going to ask if the  
2 tech folks could raise the volume on the monitors for us up front? It's a little bit difficult  
3 to hear. Thank you.

4                   **MS. EMILY HILL:** The first book chapter listed is a chapter entitled  
5 "Mass Shootings and American Masculinity", and it looks like that was published in a  
6 book called *Mass Shootings Research*. Have I got that correct?

7                   **DR. TRISTAN BRIDGES:** Yes. I think that book is not published  
8 yet, but it's coming out.

9                   **MS. EMILY HILL:** And at the bottom of the page, there's another  
10 chapter called "Mass Shootings and Masculinity and Gun Violence as Feminist Issues".  
11 That was a chapter that you published in a book?

12                   **DR. TRISTAN BRIDGES:** Yes.

13                   **MS. EMILY HILL:** Okay. And on the next page, in the middle of  
14 the page, an article -- I apologize, a book chapter entitled "Mass Shootings and  
15 Masculinity" in a book called "Focus on Social Problems: A Contemporary Reader".  
16 That's -- I've got that correct?

17                   **DR. TRISTAN BRIDGES:** Okay. Yes.

18                   **MS. EMILY HILL:** And finally, turning to page 7, there is a list of  
19 work that's under in review and in preparation, and I see that the second article is a  
20 document -- is an article called, "Database Discrepancies and Understanding the  
21 Burden of Mass Shootings in the United States 2013 and 2020", which is under review  
22 at The Lancet Regional Health.

23                   Can you just speak very briefly about that piece of research?

24                   **DR. TRISTAN BRIDGES:** Sure. Dr. Tober and I, and our research  
25 assistant, Melanie Brazzell took the five most commonly relied upon data sets to make  
26 claims about how prevalent mass shootings are in the United States and we took all of  
27 the incidents and all five of those and we asked how much overlap there was between  
28 the different data sets to see the extent to which research relying on different data sets

1 and policy recommendations relying on different data sets might be using different  
2 samples. I think there were a total of something like 3,500 incidents that were in at least  
3 one of the five databases and the paper reports a finding that in only 25 incidents were  
4 in all five of the databases. So there are large discrepancies between what's included  
5 in the different databases.

6 **MS. EMILY HILL:** Thank you. So we may talk a little bit more  
7 about that later in our conversation.

8 I'll turn now to the CV of Dr. Tober, Madam Registrar.

9 Dr. Tober, you are currently a lecturer in the Department of  
10 Sociology at the University of California, Santa Barbara?

11 **DR. TARA LEIGH TOBER:** Yes.

12 **MS. EMILY HILL:** And you've held that position since 2017?

13 **DR. TARA LEIGH TOBER:** Yes.

14 **MS. EMILY HILL:** You have also, I understand, obtained a PhD.  
15 Where and when did you obtain that PhD?

16 **DR. TARA LEIGH TOBER:** I received my PhD in Sociology from  
17 the University of Virginia in 2013.

18 **MS. EMILY HILL:** And in a review of the publications related to the  
19 topic that we're discussing this morning, is it fair to say that you are an author or co-  
20 author, generally speaking, with Dr. Bridges, and sometimes others?

21 **DR. TARA LEIGH TOBER:** Yes.

22 **MS. EMILY HILL:** Okay. So rather than review all of the articles  
23 that we've just gone through, but you've contributed significantly to that work and were a  
24 co-author on the papers that I previously took Dr. Bridges through?

25 **DR. TARA LEIGH TOBER:** Yes.

26 **MS. EMILY HILL:** Okay. And that includes the article that's  
27 currently under review about database discrepancies regarding mass shootings?

28 **DR. TARA LEIGH TOBER:** Yes.

1                   **MS. EMILY HILL:** Thank you.

2                   So, Commissioners, I would ask that Drs. Tober and Bridges be  
3 qualified as experts, as I have previously set out.

4                   **COMMISSIONER MacDONALD:** Yes. Thank you so much, Ms.  
5 Hill. And they are so qualified. Thank you.

6                   **--- EXAMINATION IN-CHIEF BY MS. EMILY HILL:**

7                   **MS. EMILY HILL:** I would now like to turn to your report.

8                   Commissioner Stanton, are you able to hear all right now? Has  
9 that been corrected?

10                  **COMMISSIONER STANTON:** Yes, thank you. It's better. Thank  
11 you.

12                  **MS. EMILY HILL:** So I'm just going to ask you to take us through  
13 some of the findings of your report and some of the research that you've conducted or  
14 reviewed. I'll just start by asking if there is a common definition of mass shooting  
15 incidents in the fields that study these events?

16                  **DR. TRISTAN BRIDGES:** Do you want me to start with that?  
17 Sure.

18                  So there sort of is. There's been an attempt to make a common  
19 definition, but as we write in our report, it's sort of unevenly applied. So if there were a  
20 common definition to defining mass shootings in the literature, most of the scholarship  
21 uses some sort of what Dr. Tober and I call a fatality threshold to identify incidents. And  
22 that means that a certain number of people have to have been killed in an incident for it  
23 to qualify. Most of the existing research says that that number should be four. Most  
24 research suggests that mass shooting incidents are only those that include a single  
25 shooter. And lots of research suggests that the incident has to take place in a single  
26 location.

27                  Those facts though get a little sticky when you try to apply them to  
28 large groups of incidents, which is why we see a lot of discrepancies between

1 databases.

2 But then it's also true that not all databases use all of those criteria  
3 to define incidents. Some databases suggest that rather than fatalities, we should use  
4 injuries. So regardless of how many people were killed, if a significant number of  
5 people were shot and injured, that's sufficient to include them.

6 Lots of databases include incidents with more than one individual,  
7 even when they suggest that only a single individual should be included. So there are a  
8 few incidents, for instance, in the United States that got a lot of media attention that  
9 involved more than one shooter, and some databases have a little clause in defining  
10 incidents where they'll say, "We only include incidents with a single individual, except in  
11 cases X, Y, and Z." And so there kind of is a common definition, but it's very poorly  
12 applied, and as a result, the claims that are being made just use radically -- end up  
13 using radically different samples of incidents to make those claims.

14 **MS. EMILY HILL:** You identified number of fatalities and whether  
15 it's fatalities or injuries, and whether there is more than one shooter as some of the  
16 variables that you see in different definitions.

17 Do I understand that some of that -- some of those aspects  
18 originate from an FBI definition that sort of started the -- have I understood that  
19 correctly?

20 **DR. TARA LEIGH TOBER:** Yes. So the FBI sort of started -- they  
21 have -- the FBI has different categories of killings. So there are active shooter  
22 incidents, there are spree killings, there are serial killings. And so all of these have sort  
23 of different aspects that, you know, makes one serial versus spree, and it all has to do  
24 with the number of shooters, how many locations the incident happens, whether it  
25 happens over a period of time or there's, you know, a so-called cooling off period.

26 And so that sort of has become the default that sort of FBI spree,  
27 you know, with the four -- the fatality threshold, the four fatalities, has -- that's sort of  
28 became the official -- the definition that lots of media and lots of research has used.

1                   It's interesting though because it also often excludes any domestic  
2 violence incidents, and that's sort of an issue with the definition. So if a person comes  
3 home and attacks every member of their family, and it is more than four fatalities, that  
4 still doesn't count in -- as a mass shooting incident. Similarly, gang violence is also not  
5 included, so if, you know, in a city situation, right, where you have a shooter and it's  
6 considered gang violence, that is also not included as a mass shooting in many of the  
7 databases.

8                   **MS. EMILY HILL:** Two incidents of violence that happened in the  
9 United States with a very high profile so we're aware of them in Canada, one would be  
10 Columbine and one would be the shooting in a school in Sandy Hook. Can you talk  
11 about how those incidences do or don't fit within definitions that are commonly used?

12                   **DR. TARA LEIGH TOBER:** Sure. So the Columbine shooting  
13 doesn't fit because there were two shooters, so most of the time, according to the  
14 definition, they're looking for cases with a single shooter.

15                   Now, sometimes -- so an example that we point to in the report is  
16 the database that was put together in the media outlet Mother Jones. They make an  
17 exception for Columbine because you had two shooters entering a school and shooting,  
18 but many databases wouldn't include that one because there were two shooters.

19                   In the Sandy Hook example, that one is interesting because there's  
20 a couple reasons why that one might not be included. It happens at multiple locations  
21 and it also started with domestic violence because he shot and killed his mother and  
22 then went to the school. And so in -- you know, so according to the commonly used  
23 definitions, Sandy Hook would not even qualify as a mass shooting.

24                   **MS. EMILY HILL:** At a very high level, why does it matter how we  
25 define this sort of phenomena? Why is it important for you in your research to explore  
26 this idea of definitions?

27                   **DR. TARA LEIGH TOBER:** I would say it's very important because  
28 we need to be able to just the basic -- we need to be able to count them, right. So

1 before we can study them, understand them, figure out the patterns, we need to know  
2 how many there are, like when and where this is occurring, how often it's occurring.  
3 And without a clear definition, that's just not possible.

4 Tristan, do you want to add to that?

5 **DR. TRISTAN BRIDGES:** Yeah, I completely agree with Dr. Tober.  
6 I think it's a -- it seems like a silly issue. Counting the number of mass shootings  
7 sounds like it should be something relatively straightforward, but unless we're all using  
8 the same definition, we'll end up with different numbers. And we're talking about events  
9 that are relatively rare, and so almost no matter how you define it, the sample that  
10 you're going to get is only so large. But if we're using different definitions, then we're  
11 going to find different pools of events that we look to to search for patterns to ask why is  
12 this happening, to search for answers. And if we're not using the same definitions, then  
13 we're going to come up with different patterns because we're -- we're not being socially  
14 scientific about it.

15 **MS. EMILY HILL:** And I think you say in your report that most data  
16 sets, the majority of data sets, are under inclusive. Is that correct?

17 **DR. TRISTAN BRIDGES:** Yeah. We feel that it would be better to  
18 define incidents in ways that don't arbitrarily exclude incidents for failing to meet criteria  
19 that may have been defined initially for different purposes, so if we're borrowing a  
20 definition from the FBI, the FBI might have really good reason for segregating events  
21 with a certain number of victims that happen in public that cannot be associated with  
22 family or domestic violence or gang violence. But whether or not those reasons are  
23 good for scholars studying these things and making policy recommendations, that's  
24 something else.

25 So we advocate for a wider definition that will allow us to include all  
26 of the incidents that are like these things and then we can apply that more conservative  
27 definition if we want to say is that group of these incidents actually meaningfully different  
28 from this larger population?

1 We don't know the answer to that question because scholars have  
2 sort of failed to examine the larger population.

3 **MS. EMILY HILL:** For those of us in Canada, I guess based on  
4 what you've just said, could you answer today or could a researcher answer today the  
5 question how many mass shootings occurred in Canada in the last year or five years or  
6 10 years? Is that a question that could be answered easily?

7 **DR. TRISTAN BRIDGES:** I bet you can find someone who could --  
8 who will answer it. One thing that we've learned is that if you get 10 scholars of mass  
9 shootings in a room and ask them all how many mass shootings happened last year in  
10 a society, you're most likely to get 10 different answers.

11 So it's not an unanswerable question, but whenever someone  
12 answers that question, how common are these things, are they becoming more  
13 frequent, et cetera, we should be paying careful attention to the definitions that they're  
14 using and the data that's actually available.

15 **MS. EMILY HILL:** To understand a little bit more about what  
16 different people might mean when they say these -- how frequently mass shootings  
17 occur or whether they are or not becoming more frequent, I wonder if I could ask,  
18 Madam Registrar, for you to bring up Figure 1 on page 9.

19 This figure shows two graphs. The one on the left is entitled  
20 "Frequencies of Mass Shootings, 1983-2013" and on the -- on the left-hand side we see  
21 a number of mass shootings listed and, on the bottom, a number of lists of countries.  
22 And on the right "Rates of Mass Shootings" with the same -- the same countries listed.

23 I'm wondering if you can talk about what we mean by "frequencies"  
24 and "rates", and what -- what this data shows us.

25 **DR. TRISTAN BRIDGES:** Sure. I can speak a little about that.

26 So here, Dr. Tober and I graphed the same data. These are  
27 numbers of incidents that were collected by the scholar who's cited in the source here,  
28 Frederic Lemieux. And he was looking to obtain cross-cultural comparisons, so he



1 wanted to compare numbers of shootings in different societies around the world and his  
2 sample encompasses the years 1983 to, I think it said, 2013 on the figure.

3 And we presented the data in two ways. The figure on the left  
4 that's entitled "Frequencies" is just giving a raw count of the number of incidents, and  
5 there you can see the United States looks like this extreme outlier with almost 80  
6 incidents according to the count by Frederic Lemieux in the time period compared with  
7 all the others. So that's just showing the actual numbers of incidents.

8 Lots of scholarship on things like this, so for instance, on violent  
9 crime when comparing societies won't use the actual numbers of incidents but they'll  
10 use the rate of incident, that is, how common is this incident compared with how many  
11 people there are in the population.

12 And so we've taken the same list of societies and used populations  
13 for 2013 to give you a rate of mass shootings according to Frederic Lemieux's data, and  
14 there the data look really different. So here, it's common in demographic research to  
15 present rates per 100,000 in a population. If something's really rare, we might display it  
16 as we have here per one million people in a population.

17 So the figure on the right is showing, you know, how many mass  
18 shootings have happened per one million population -- people in that population for the  
19 time period. And what you can see there is the United States is a much larger society  
20 than the rest of these nations and, as a result, it starts to look more average.

21 So the logical question to ask here, we think, is which one of these  
22 figures is more correct or which one of these figures is a better representation, and we  
23 argue that frequency is often, with mass shootings, the better figure to use. We rely on  
24 medical research on a -- something common in medical research to make that claim.

25 When a certain disease lacks a high enough prevalence in a  
26 society, then medical scholarship disregards rates as meaningful because they say if it's  
27 not common enough in a society then we can't really say that the rate is meaningful.  
28 We're better off talking about individual cases, frequencies. With mass shootings,

1 regardless of how they're defined, frequency might be a better way of asking how  
2 common is this in our society just given a raw count of numbers.

3 **MS. EMILY HILL:** So I just want to make sure I've understood you.  
4 So you're saying that in the same way that understanding a very rare disease might be  
5 better understood by looking at frequency rather than rate because it's an unusual thing,  
6 that is the same with mass shootings because they are a relatively rare event; have I  
7 understood you correctly?

8 **DR. TRISTAN BRIDGES:** Correct. Yeah, that's exactly right.

9 **MS. EMILY HILL:** And I'm wondering if you can just -- you've  
10 spoken about where the United States lands on these two charts, if you could also just  
11 highlight where Canada is on this?

12 **DR. TRISTAN BRIDGES:** Sure. Canada's an interesting case. I  
13 mean, it's sort of in the middle on the figure on the right. On the left, I mean, most  
14 nations, given a really strict definition of mass shootings, just don't experience very  
15 many. So in Frederic Lemieux's sample, for instance, Canada had less than 10  
16 incidents between the years 1983 and 2013. On the right, Canada looks a little bit more  
17 prevalent, but if we just compare it to the United States, right, they'd look about half as  
18 common in Canada as they are in the United States on the figure on the right when we  
19 talk about rates. When we're looking at raw -- the actual numbers here, the United  
20 States in Lemieux's sample had more than twice as many incidents as all of the other  
21 nations in his sample combined. So just comparing Canada and the United States is  
22 instructive, I think, because I think most people would agree that the figure on the left  
23 better represents the difference in numbers of mass shootings between the United  
24 States and Canada than the figure on the right.

25 **MS. EMILY HILL:** Thank you. Can you explain what your research  
26 shows about whether mass casualties or mass shootings are increasing in frequency?

27 **DR. TARA LEIGH TOBER:** So that's actually a difficult question to  
28 answer because we have this problem with definitions. So I think sometimes scholars

1 in our field, rather than discussing, you know, the events and maybe the patterns, we're  
2 often sort of squabbling over this exact question. Like, are they increasing with some  
3 people saying no, you know, when we define them this way as one shooter in a, you  
4 know, one location, with four more fatalities, they're actually somewhat stable, and, you  
5 know, or they're not necessarily increasing, but then if you use a definition like ours that  
6 we're using in our dataset, you can -- that tells a very different story. So if you're looking  
7 at cases where four or more people are just shot and not necessarily killed, you know,  
8 that data tell a very different story. Where, you know, we have cases -- so very telling  
9 that there was a case in a shopping mall where 16 people were shot and no one died,  
10 which was great, but again, that's another example where it does not count as a mass  
11 shooting, even though 16 people were shot in a public place by a single individual. And  
12 so when you're looking at -- so basically, the -- to answer the question whether or not  
13 they are increasing, it just depends on how you define them.

14 **MS. EMILY HILL:** In terms of one definition, Madam Registrar, if  
15 you could bring up on page 12, Figure 2, which is titled "Frequency of" -- and it's in  
16 quotes -- "Active Shooter Incidents in the United States 2000 to 2020." And so I'm  
17 wondering if you can talk about, referencing your earlier comments, that this data will  
18 depend on what definition you're using, what definition is used with regard to this figure  
19 and what can you say about that?

20 **DR. TRISTAN BRIDGES:** I can talk a little bit about this figure. So  
21 the FBI in the United States started classifying active shooters, I think, in -- during  
22 President Obama's presidency, and so this didn't actually begin in 2000, but they  
23 combed through cases and went back to 2000. Active shooter incidents are interesting  
24 because they're not defined by injuries or fatalities actually. The FBI designates active  
25 shooter incidents as public incidents where someone shows up with the intent to kill, to  
26 shoot and kill large numbers of people. Whether or not that actually gets carried out is  
27 another question. So these are incidents that might be mass shootings. If they're not,  
28 they're like mass shootings or could have become mass shootings, and they wanted to

1 know how frequently are these things happening, and has that been changing over  
2 time. We present this figure in the report as one way of answering the question are  
3 mass shootings becoming more frequent, suggesting that most of the evidence that we  
4 have suggests that they are becoming more frequent, or things like them are becoming  
5 more frequent. In fact, since this report was published, the 2021 data came out and the  
6 FBI counted 61 incidents in 2021. So the number of active shooter incidents has sort of  
7 been steadily rising since they've been reporting it.

8 **MS. EMILY HILL:** And can you extrapolate or draw any  
9 conclusions from this data about what we might see in Canada or what we might  
10 understand about what's happening in Canada?

11 **DR. TRISTAN BRIDGES:** It's hard to do. Most scholars of mass  
12 shootings suggest that what's going on in the United States is just sort of an  
13 exaggeration of what's going on in the rest of the world. And so if I had to guess, based  
14 on the data that I know about Canada, I would say that it's likely that incidents like mass  
15 shootings are becoming more common in Canada as well, but I bet that the curve isn't  
16 quite as steep.

17 **MS. EMILY HILL:** I'd like to move now to the part of your report  
18 where you talk about the importance of understanding gun culture in your research.  
19 And I'm just wondering if you can talk a little bit about what do you mean by the term  
20 gun culture?

21 **DR. TARA LEIGH TOBER:** All right. Yeah, so we -- as we started  
22 doing this research, we connected -- you know, one of our first questions was why are --  
23 or, you know, we noticed immediately that mass shootings were disproportionately  
24 committed by men. And then we sort of started getting into the debate over guns and  
25 gun control and gun violence. But what we started to sort of realize was that there is --  
26 that maybe a better -- you know, a potential explanation for -- because it's happening in  
27 the United States, right, so it's not just necessarily about men or guns, but we -- you sort  
28 of started making the argument that the United States has a particular gun culture, so

1 that guns have -- you know, are -- have a certain meaning here that, you know, maybe  
2 doesn't exist quite in the same way in other places. So we sort of make the argument  
3 about this gun culture and different gun cultures in different societies.

4 **MS. EMILY HILL:** Thank you. So trying to understand, I guess, a  
5 first building block of what you've just told us. Is there a correlation or can you comment  
6 on whether you've seen in the data a correlation between gun ownership at a population  
7 level and mass shootings?

8 **DR. TRISTAN BRIDGES:** Not really. Not as much as we would  
9 have suspected. And I'm going to sort of -- I guess a caveat is that that's difficult in the  
10 United States because there's so much gun ownership that it becomes a little bit more  
11 of a difficult question to answer here maybe than in some other nations. But there was  
12 less correlation than we expected. And I guess it's important I think for people to hear  
13 when they hear that fact that we're not saying that, oh, this is not actually about guns.  
14 Obviously, you can't commit a mass shooting without a gun. But the meanings that  
15 people attach to guns and whether or not people own guns are actually separate things.  
16 And so we think it's really important to sort of -- to better understand how people make  
17 meaning out of guns, what people think guns are used for, how they understand them  
18 as valuable, and that that may be a better predictor of where mass shootings occur than  
19 guns alone.

20 **MS. EMILY HILL:** Just to understand a little bit more about what  
21 you say is perhaps not as much as a correlation as you would expect, I wonder if we  
22 could bring up Figure 3 on page 16.

23 And so this figure is International Civilian-Owned Firearms Rates.  
24 So on the left side it says, "Number of Civilian-Owned Firearms (per 100 people)", and  
25 then again, a number of countries on the bottom.

26 Can you just talk a little about this figure, and then I will ask to be  
27 brought up Figure 4, which I think is related.

28 **DR. TRISTAN BRIDGES:** Sure. So this figure shows, and this is

1 going to -- this is like slightly in contrast to what I've just said, but this figure is just  
2 looking at the numbers or the rates I should say of civilian-owned firearms in different  
3 nations around the world. This figure is one that we show in our classes, I think  
4 because it's important for American students I think to see this figure.

5           The United States stands out internationally on rates of civilian-  
6 owned firearms in a couple of ways: One, is that we have more than twice the rate of  
7 civilian-owned firearms than any other nation in the world, and the other is that we're the  
8 only nation in the world that has more guns than people. So when you see that red bar  
9 rise above 100, that means -- this is showing rates per 100 people. So the best data  
10 that we have, as of 2017, suggests that the United States has about 120 firearms --  
11 civilian-owned firearms per 100 people in the population.

12           And we do I know that nations with more guns tend to have more  
13 mass shootings. It's not entirely predictive, though, because -- so Canada is the sixth  
14 most fire armed nation, according to these data, and yet the rates of mass shootings  
15 that have been experienced by Canada, as compared with some of these other nations,  
16 are not that much more than some that have far fewer or lower rates of gun ownership.  
17 So gun ownership absolutely is related to this, but part of what we wanted to get at in  
18 the report, with bringing up gun culture, is that it's just not the only factor.

19           **MS. EMILY HILL:** Can you bring up Figure 4, which is called Gun-  
20 Related Killings as a Proportion of All Homicides in the USA and Canada, 2020.

21           So this -- can you just talk a little bit about the comparison that this  
22 figure is showing?

23           **DR. TRISTAN BRIDGES:** I can speak about this one too, if that's  
24 okay. Yeah.

25           So this figure is just looking at all homicides in both the United  
26 States and Canada based on the best data we have, and asking what share of those  
27 incidents involved firearms. In the United States, it's almost 80-percent, which means  
28 that almost 8 in 10 homicides in the United States included a firearm. In Canada, it's

1 much lower; it's about a third of incidents.

2 Now, the best data that we have from Canada suggests that rates  
3 of homicide have been increasing or the -- I think these data are something like a  
4 15-year high or something, as we explain in the report, but the numbers of homicides in  
5 Canada are much lower. So it could be, there's sort of two things that could be going on  
6 here: One is that there may be a really different gun culture in Canada, and the reason  
7 that they have far fewer homicides is that you all have far fewer gun-related homicides,  
8 and that it's actually the gun-related homicides that you're missing. But it is -- we use  
9 that as an indication that it's like clearly -- something different is going on. When people  
10 commit violent crimes in the United States, they're much more likely to use a firearm  
11 than they are in Canada.

12 **MS. EMILY HILL:** And so if I understand what you're saying  
13 correctly, your enquiries into the gun culture and the meaning of gun culture is partly  
14 prompted by the fact that you're not seeing a sort of perfect correlation between gun  
15 ownership at a population level and number of mass shootings and number of  
16 homicides, you're not seeing a perfect correlation. So if I have understood you  
17 correctly, that means there must be some other variable or some other factor involved,  
18 not just number of guns. Have I got that right?

19 **DR. TRISTAN BRIDGES:** That's right.

20 **MS. EMILY HILL:** And so that's true for Canada as well. I think  
21 you say in your report that Canada has experienced a similar number of mass shootings  
22 to countries that have a much lower levels of gun ownership.

23 **DR. TRISTAN BRIDGES:** Correct.

24 **MS. EMILY HILL:** And so moving now to the discussion about gun  
25 culture, I think you said earlier that this is about understanding what guns mean or what  
26 guns are understood to mean. You talk in your report about an instrumental approach  
27 to understanding guns. Can you talk about what that -- what that means?

28 **DR. TRISTAN BRIDGES:** Do you want to take this one,

1 Dr. Tober?

2 **DR. TARA LEIGH TOBER:** Sure, I can take... So when we talked  
3 about an instrumental approach, so we're -- you know, we started thinking about what  
4 guns mean. So historically, what do -- what -- you know, the United States has a  
5 particular history and a particular -- guns have a particular meaning here, and -- so...  
6 Excuse. I'm sorry, one second.

7 **MS. EMILY HILL:** Take a moment, no problem.

8 **DR. TARA LEIGH TOBER:** Dr. Bridges, can you...

9 **DR. TRISTAN BRIDGES:** So the -- so the meanings -- so -- I think  
10 you asked... Can you repeat the question? Is it what is the instrumental perspective,  
11 instrumental approach?

12 **MS. EMILY HILL:** Yeah.

13 **DR. TRISTAN BRIDGES:** The instrumental approach, so in the --  
14 in the report we summarise this sort of very popular refrain that was made popular by  
15 the National Rifle Association in the United States that "Guns don't kill people, people  
16 kill people." And that refrain treats guns and problematic things done by guns as sort of  
17 separable, that we can say "Well, a gun is just a tool, and so if anything wrong is done  
18 with it, then we shouldn't look at the gun, we should look at the person holding the gun."  
19 And that's a sort of instrumental approach to looking at what guns are, what they mean.

20 We date it back to -- this instrumental approach was actually first  
21 popularised by the psychologists, by Psychologist Maslow, who you probably have  
22 heard the phrase, you know, "If you're carrying a hammer the entire world looks like  
23 nails.", and this comes from Maslow, that when holding a hammer, nails and nail-like  
24 things start to kind of come into sharp relief. All of a sudden you see the world  
25 differently when you're holding a hammer.

26 And we make a similar argument with guns, that treating guns as  
27 though they're just instruments is a -- is misguided. That guns have a similar  
28 transformative effect. That when someone's holding a gun it changes the way they look



1 at the world and it changes the way that the world looks at them. So they're not just  
2 instruments, they're something more.

3 **MS. EMILY HILL:** In your paper, you say that firearms do not  
4 mean the same thing everywhere. And I'm wondering what you mean by that?

5 **DR. TARA LEIGH TOBER:** Yeah. So you know, there's -- some  
6 scholars will point to -- they'll look at gun ownership and they'll look at the difference  
7 between the ownership of handguns versus long guns, for example, and sort of this idea  
8 that long guns might be -- and you know, certain types of shotguns are more used for  
9 hunting; right? So you can think about rural areas with strong hunting cultures, and that  
10 guns and gun safety -- guns just mean something very different versus, you know, the  
11 ownership of many handguns, or even what have come to be called assault rifles, and  
12 sort of the meanings attached to those types of guns and what they're used for being  
13 really different from sort of the long gun.

14 **DR. TRISTAN BRIDGES:** And just to build on that a little bit. So  
15 they -- so to suggest that guns means different things in different locations, that's like a -  
16 - one way that scholars have suggested, for instance, that the gun culture of Canada as  
17 a nation might differ from the gun culture in the United States. The average gunowner in  
18 the United States is much more likely to own a handgun, where the average gunowner  
19 in Canada is much more likely to own a long gun. And that alone doesn't tell us about,  
20 you know, what guns mean to those people, but those guns have really different uses,  
21 and they suggest that there might be different average meanings of guns in different  
22 societies.

23 **MS. EMILY HILL:** And do those meanings shift over time?

24 **DR. TRISTAN BRIDGES:** They do, and -- well, they have in the  
25 United States. Gun culture is a sort of young term in sociology, and the scholar, David  
26 Yamane, who we cite in the report, who sort of first introduced this concept in sociology,  
27 suggested that gun culture in the United States had shifted radically over time, and that  
28 something, a really important shift took place in the 1970s, where guns shifted from

1 something understood as associated with sports and recreation to something being  
2 understood as much more about armed self-protection. And the meaning shifted; right?  
3 They weren't about -- they weren't about playing anymore. They weren't quite  
4 understood as tools of quite the same sort. All of a sudden, a shift happened that David  
5 Yamane traces, where he argues that guns are being understood as used for defensive  
6 self-protective purposes.

7                   We do -- and maybe you're going to ask about this shortly, but the  
8 other thing is that so far most scholarship that looks at gun cultures in different nations  
9 has sort of suggested that gun cultures kind of evenly blanket all of the people in a  
10 nation. And I think that's actually -- Dr. Tober and I think that that's probably because  
11 it's just a young concept that when we get down into a population, it's probably a lot  
12 messier than that, which suggests that there are probably different gun cultures in  
13 different nations and that there are probably different meanings attached to guns in  
14 different parts of different nations as well.

15                   **MS. EMILY HILL:** Building on that, I think I'd like to move now to  
16 the part of your report that talks a little bit about research that you've done on datasets  
17 in the United States. And so I'm just wondering if you can explain, because we've had  
18 this conversation about problems with definitions, if you can explain what definition you  
19 used in your research to think a little bit more about gun cultures in the United States?

20                   **DR. TARA LEIGH TOBER:** Yeah, so are you asking what  
21 definition we used to categorize -- to identify mass shootings?

22                   **MS. EMILY HILL:** Yes. Yeah.

23                   **DR. TARA LEIGH TOBER:** Yeah.

24                   **MS. EMILY HILL:** Thanks.

25                   **DR. TARA LEIGH TOBER:** So we look at cases where four or  
26 more people are shot. And so that -- instead -- so we did not make a fatality threshold.  
27 Instead, we had -- we include cases where, you know, we just had, I guess, a number of  
28 people shot is the -- and we limit it to at least four people shot in a certain situation.

1                   We also include cases of domestic violence, which is something  
2 that happens, I think, more -- you know, it doesn't get nearly -- like, gang violence, does  
3 not get as much media attention. Again, I mentioned earlier, these are cases where a  
4 person may come home and -- or might kill all the members of their family. So we  
5 include those cases of domestic violence.

6                   And we also include gang violence in our dataset.

7                   And what we're able to do with the way we've built our data is if  
8 we're interested in pulling out a specific type, like maybe what you might think of as  
9 public, you know, shootings that happen in a grocery store, or a school, or something  
10 like that, versus gang violence, versus domestic violence, we can sort of isolate those  
11 cases. But we thought that it was really important to sort of get a sense of how often  
12 these mass types of violence are occurring just in general, and then even though the  
13 different types may sort of have different causes, potentially different, you know,  
14 solutions, they may point to very different types of social problems in our society, but we  
15 were sort of just trying to get a general overview of just a general count, right, which has  
16 been such a challenge.

17                   **DR. TRISTAN BRIDGES:** And I'll also add to that. We also  
18 include incidents including one to two shooters, and we allow there to be a cooling off  
19 period. So we allow -- if -- some of the incidents in our database, for instance, someone  
20 was shot one day, not caught, and then the shooter inflicted more violence on the next  
21 day. That's something that would not be included in lots of databases because there's  
22 this cooling off period. It might be classified, for instance, by the FBI, as a spree killing.  
23 And we include incidents like that as well.

24                   **MS. EMILY HILL:** And so have I got it right that the consequence  
25 of using a broader definition in terms of allowing for more than one shooter, allowing for  
26 that time period to pass, and allowing the inclusion of individuals who perhaps were  
27 shot but were not killed gives you a bigger dataset to work with? Have I understood that  
28 correctly?

1                   **DR. TRISTAN BRIDGES:** Yeah, if you -- you know, if you want to  
2 find out what the -- the way I explain it to my students in class sometimes is if I want to  
3 know the average height of the student population at my university, if I have 25 students  
4 that are randomly selected and I say, "What's the average height of this student," you  
5 know, do you think I have the average height of the average university student based on  
6 those 25? I'm much more likely to get a number -- to be able to sort of figure out a  
7 number that's closer to reality if I have a bigger sample. And the same is true here, that  
8 if we have a larger sample of incidents, then those that are really weird and outliers,  
9 won't sort of count as much when we're looking at different sorts of patterns. So a  
10 larger population of incidents is really important when looking for patterns.

11                   **MS. EMILY HILL:** And I understand that in your research, one of  
12 the patterns that you were looking to see if you could learn more about within this  
13 dataset was about whether there were different gun cultures in different parts of the  
14 United States? Is that right?

15                   **DR. TRISTAN BRIDGES:** That's correct.

16                   **MS. EMILY HILL:** Maybe we could bring up Figure 5 on page 23.  
17 And this is called "Frequency of Mass Shootings by State Compared to Rates of Gun  
18 Ownership". And I think this is building on your observation earlier that there's not a  
19 perfect correlation between gun ownership and rates of mass shootings. And I'm  
20 wondering if you could just talk a little bit about what this data shows? And you might  
21 need to explain some of the state initials, because we may not be as familiar with those  
22 in Canada.

23                   **DR. TRISTAN BRIDGES:** Good for you. So each of the dots here  
24 is an individual state in the U.S. So we haven't labeled all of them. We just sort of  
25 labeled a collection that are interesting.

26                   The data are a little messy. What it means when you have -- when  
27 you're looking at a dot at the far left of this figure, the farther left you move, the less  
28 mass shootings they had, and we're looking at our data and definition here between the

1 years 2013 and '19. So you can see already when we compare this with Frederic  
2 Lemieux's data that we reported on earlier, we have a lot more cases than Lemieux  
3 does.

4 So if you go the farthest to the right and you see the initials "CA",  
5 that's California. California, in our dataset, had just a little bit more than 250 incidents  
6 between the years 2013 and '19. And if you look along the left side of the figure, that's  
7 saying "What percent of California's population are gun owners?"

8 So if gun ownership were really the primary or the only explanation  
9 for mass shootings, then we would expect this figure to sort of slope in an opposite  
10 direction than it does. We would expect that as we -- as more mass shootings were  
11 present in a society, or as the rate of gun ownership went up, the number of mass  
12 shootings would also go up. But that's not actually what we see here. In fact, the states  
13 with the highest level of gun ownership in the United States are those in the top left  
14 corner of this figure. That's Alaska, Montana, and Wyoming. And all of them had  
15 virtually no mass shootings.

16 Now, all three of those states have smaller populations. And here  
17 we're looking at frequency. So actual numbers of mass shootings.

18 But Dr. Tober and I found this really interesting. Those are also  
19 states that -- the states that kind of hover in the top left of the graph, they all have some  
20 of the largest rural populations of states in the United States. This is a figure that we  
21 use to suggest that -- not to suggest that guns have nothing to do with mass shootings,  
22 but gun ownership alone is an insufficient explanation for this type of gun violence.

23 **MS. EMILY HILL:** And there's another figure, Figure 6 on the next  
24 page. And if I understand correctly, the difference between this and the figure before,  
25 Figure 5 is about gun ownership, and Figure 6 is about guns per capita? Do I have that  
26 right?

27 **DR. TRISTAN BRIDGES:** Yeah. This is hard. It's hard to count  
28 guns in societies. The United States is an outlier here as well. But this is looking at the

1 number of guns per 1,000 people in states. And so here again, we would expect if the -  
2 - so the last figure was looking at sort of, like, what percentage of people own guns.  
3 This figure is asking, "How many guns per 1,000 people are just present in a state, from  
4 the data that we have?" And this figure too doesn't sort of -- the shape of the data is not  
5 the one that you would expect, I think.

6 So if it were only guns -- more guns meaning more mass shootings;  
7 if that alone were a sufficient explanation then we would expect that as the number of  
8 guns per thousand people rises, we would expect the number of mass shootings to also  
9 rise, but the data have a sort of different shape than that as well.

10 **MS. EMILY HILL:** So again, just making sure that I understand  
11 correctly, for example, Wyoming on the top left of that shows very high number of guns  
12 per 1,000 people but a very few number of mass shootings, in contrast to California and  
13 Illinois -- have I got that right -- on the bottom of the chart showing quite a high  
14 frequency of mass shootings and a lower number of guns per 1,000 people.

15 **DR. TRISTAN BRIDGES:** That's correct.

16 **MS. EMILY HILL:** And so now having sort of explained your  
17 dataset and the -- I think the reason why you might be looking to understand some other  
18 explanations for the data that you're seeing, I'd like to now turn to the part of your report  
19 that focuses on mass shootings and gender.

20 In your report you say that gun ownership, gun-related fatalities,  
21 and gun violence are all gendered phenomena. And I wonder if you could just explain  
22 why you make that statement.

23 **DR. TRISTAN BRIDGES:** I can start with this part, and you can do  
24 the second part after, if that's okay? Yeah.

25 So to suggest that something's a gendered phenomenon in this  
26 case means that we see a disproportionate number of people engaging in a behaviour  
27 that belong to a specific gender.

28 So when gender criminologists, for instance, suggest that certain

1 crimes are “gendered” and gendered masculine or gendered feminine, what they’re  
2 seeking to explain is why there’s a disproportionate number of men or women who  
3 commit such a crime. When we say that mass shootings are gendered masculine, you  
4 know, when mass shootings happen, we’re often contacted by media professionals to  
5 say, “What’s going on? There’s no pattern. Like, how can you make sense of this?”

6                   One of the things we do know is it’s basically half the population  
7 that’s committing all of the mass shooting incidents, no matter how they’re defined. I  
8 think in our database we have about 4,000 incidents now, and it’s a handful that are not  
9 committed by men; I think there are 11 of them. And so there are sort of two ways that  
10 that can be explained. I think some times people will lean on biologically deterministic  
11 explanations and say maybe men are just more prone naturally to this sort of violence.

12                   We actually don’t have any evidence to suggest that that’s true.  
13 And if that were true, then we would expect men to lean on this sort of violence in  
14 societies all around the world in similar rates. But that’s not the case. So to say that  
15 they’re gendered masculine or that they’re gendered crimes means that we have to take  
16 gender seriously.

17                   We don’t know as much as we should about incidents like this but  
18 one of the things that we do know is that virtually all of them have been inflicted by men,  
19 and so then we should ask; what is it about masculinity that is related to these crimes?  
20 And that’s what we mean by gendered.

21                   **MS. EMILY HILL:** Dr. Tober, did you also want to comment on  
22 that? I wasn’t sure.

23                   **DR. TARA LEIGH TOBER:** Oh, no, I think if -- we were waiting for  
24 me to ask more about the American men gun culture -- and gun culture, I think I’ll take  
25 that.

26                   **MS. EMILY HILL:** Okay. If you want to talk about that now, that’s  
27 fine.

28                   **DR. TARA LEIGH TOBER:** Sure. So scholars who look at sort of

1 American gun culture over time talk about it starting as sort of a tool used on the frontier  
2 for protection. And certainly our, you know, Revolutionary War started with, you know,  
3 people who owned guns and rose up against, you know, the British. And then that this  
4 gun culture sort of changed, evolved to one of more sport and recreation, and then they  
5 sort of point to a later shift somewhat in the 1970s, 1980s here to sort of owning --  
6 people owning guns for self-defence.

7                   And now that is -- when we ask -- when survey research and we  
8 ask gun owners, "Why do you own a gun?" they say, you know, some people will say --  
9 you know, smaller percentages will say for sport, you know, for recreation, for hunting  
10 but the vast majority, about two-thirds, right, will say that they own a gun for protection.  
11 And, of course, this is something that is happening as -- since -- well, in the past couple  
12 of years we have seen a rise in violent crime, but we've sort of seen a steady decline in  
13 violent crime and violence in the United States since the 1990s, but yet this is, you  
14 know, consistently why people say that they want a gun, they would like to own a gun,  
15 right, and sort of it's this right that's sort of defined in our Constitution and that they need  
16 a gun for protection.

17                   **MS. EMILY HILL:** And I think in your paper you talk about that, the  
18 phenomena you just described, as a cultural explanation; explaining the cultural  
19 connection between masculinity and mass shootings. And if I've got it right -- and you  
20 tell me if I don't -- that that's one part of sort of how you connect masculinity and guns.  
21 The other part being social-psychological explanations. I'm out of my depth here in  
22 terms of my scholarly knowledge, so tell me if I have that wrong, but if I do have it right,  
23 that you've explained sort of a cultural meaning that's ascribed to guns ---

24                   **DR. TARA LEIGH TOBER:** Yes.

25                   **MS. EMILY HILL:** --- in your past comments. I'm wondering now  
26 if you can talk about the other aspect, which is this social-psychological explanation.

27                   **DR. TARA LEIGH TOBER:** Yeah. So the social-psychological  
28 explanation has to deal a little bit more with masculinity threat, and Dr. Bridges, you



1 want to take that?

2 **DR. TRISTAN BRIDGES:** Sure. So we have this two-part  
3 explanation of why mass shootings happen so much more commonly in the United  
4 States, and Dr. Tober has just explained part two, which is the cultural explanation. And  
5 basically, we break a question that's commonly asked; why are there -- why are  
6 American men committing mass shootings so much, into two questions. One question  
7 is, why are men doing this at such higher rates than others, and the second question is  
8 why American men. Dr. Tober explained why American men. We have a gun culture  
9 that's internationally unique, I think, in a way that is not something to be celebrated.

10 The first question is sort of why men in the first place, and to  
11 provide an explanation for that we rely on this body of scholarship that's come to be  
12 known as masculinity threat research. And basically what that body of scholarship  
13 shows us is masculinity is a slippery term; it hasn't always been used. It's a relatively  
14 modern phenomenon. And when I teach my Sociology of Masculinity class, I ask  
15 students on the first day to define it; it's hard. It's hard to define. And so something, as  
16 we've talked about with mass shootings that's hard to define, is really hard to study.

17 One way that we've learned we can define slippery concepts like  
18 this is with a social identity threat research. And to give you an idea of what this body of  
19 research shows, social identity threat research has argued, and found in lots of different  
20 cases, that if people have an identity that they care about, one that they feel passionate  
21 about, whether that's your gender identity or your racial identity or your class identity or  
22 your sexual identity, and if we find a way to make that identity threatened and make you  
23 feel like your hold on that identity is a little bit more tenuous, there's a patterned  
24 reaction; people tend to respond by over-demonstrating that identity; over-  
25 demonstrating that they do in fact belong.

26 And so masculinity threat research has done this by, in  
27 experiments, people are brought in, men are brought in to labs and they're given a  
28 gender identity test, and some of them are given gender-confirming feedback, some of

1 them are told, "You tested in the masculine range." And others are given gender-  
2 disconfirming feedback; they're told, "You didn't, you tested slightly in the feminine  
3 range." And then they're given a variety of different sorts of tasks to respond to. And  
4 that helps us understand what masculinity is when we sort of experimentally take it  
5 away from groups of people and we look at what they reach for when we take it away.  
6 And that research is one of the ways that we've been able to connect masculinity and  
7 violence experimentally because we've been able to show that men reach for violence  
8 when we take masculinity away from them.

9                   No-one's ever done this related to mass shootings, but people have  
10 -- scholarship has shown, for instance, that men are more supportive of male  
11 supremacist statements after they've had their masculinity threatened. So men are  
12 more likely to support statements where they'll say, "I believe that males are inherently  
13 superior to females", for instance, after their masculinity has been threatened. We  
14 found men are less likely to be able to identify sexually violent behaviour as sexual  
15 violence if their masculinity has been threatened, and if they do identify it as sexual  
16 violence they're more likely to blame victims.

17                   And we use that body of scholarship to instruct our understanding  
18 of why men might commit these crimes more. That they're actually gendered  
19 enactments. That the reason that we're seeing more men commit mass shootings is  
20 that mass shootings are understood as masculine in our culture.

21                   **MS. EMILY HILL:** And so in terms of the experiments that you've  
22 just described, where individuals -- men are given a test and told "you're either -- you  
23 know, you range -- you're in the range of normal for masculine or you're falling below",  
24 just to make sure I understand, there's no actual correlation between their answers to  
25 the questions. That's something that's done within the -- is designed within the  
26 experiment to pull out what kind of responses they will have to that -- to being given that  
27 challenge. Have I got that right?

28                   **DR. TRISTAN BRIDGES:** Yeah. This is the sort of research that

1 involves tricking participants. And so participants take a test that they think is  
2 meaningful, but they're just given feedback randomly. So some of them are told, "you're  
3 masculine", and some of them are told "you aren't", but it's not based on what they  
4 actually answered.

5 **MS. EMILY HILL:** And you've talked a little bit about what  
6 responses you see, and I'm wondering if you can just say a little bit more about those  
7 responses when that challenge occurs, specifically with regard to guns.

8 **DR. TRISTAN BRIDGES:** Yeah. So there's less research on  
9 masculinity threat and guns than we would like. In the -- in the article that you asked  
10 me about initially when you were going over Dr. Tober and my CVs, the recent article  
11 that we published with Tara Warner and David Warner, we provide maybe one of the  
12 early bits of scholarship that suggests that guns might be used as a response to  
13 masculinity threat.

14 Most masculinity threat research has taken place at the individual  
15 level. So we bring individual men into labs, threaten some of their masculinity, and then  
16 compared the behaviour of those men to other men who we bring in who didn't -- whose  
17 masculinities were not threatened.

18 And one of the things that we suggest in the article is that if we  
19 know there are things that are connected with masculinity, so for instance, we know that  
20 work and career in many cultures are connected with masculinity and ability to sort of  
21 provide for oneself economically or for a family, if we know that those things are tied  
22 with understandings of masculinity and all of a sudden circumstances are such that it  
23 makes it harder to accomplish that, makes it harder to provide, then it might be the case  
24 that the groups of people disproportionately affected by that who are men might seek to  
25 enact masculinity in other ways. If they feel like their ability to provide has been -- is no  
26 longer available, they might seek other ways of demonstrating masculinity.

27 And the scholarship on guns has suggested that a shift like this has  
28 taken place in the United States That as provision has just become a little bit more

1 difficult to enact for men, dual earner couples are more common, economic recessions  
2 are happening, and as these things make it less likely that men are able to provide or  
3 able to provide more than a partner, research has suggested that men are not leaning  
4 on provision as much as they used to in the United States, and that they're starting to  
5 lean on ideologies of protection in the same way. And guns are -- guns are a piece of  
6 this.

7 **MS. EMILY HILL:** And zooming in a little I guess away from guns  
8 but just toward violence, I think what you've said is that violence, in your report:

9 "...is a masculine resource on which men are more  
10 likely to rely when their masculinities have been  
11 challenged."

12 Is that -- can you just talk a little bit more about that conclusion from  
13 the research that you've looked at?

14 **DR. TRISTAN BRIDGES:** Yeah. This is a conclusion that's been  
15 drawn in a bunch of different types of studies using different sorts of methods. When  
16 boy's and men's masculinity is challenged, one response that's patterned is leaning to  
17 violence.

18 And so in the report, we cite some qualitative scholarship on  
19 adolescent boys by James Messerschmidt, who is a scholar who coined the term  
20 "masculinity challenges", and that basically means, like it's the same as masculinity  
21 threat. It's this idea that when someone feels that their claim to masculinity has been  
22 challenged in one way or another, what do they do? And James Messerschmidt also  
23 coined this concept in the same paper that he refers to as "masculinity resources", and  
24 he argues that when a masculinity challenge occurs masculinity resources are reached  
25 to for someone to sort of figure out what to do about that.

26 And so we can learn a lot about what masculinity is when we look  
27 at how it behaves when it's being threatened. And all of the scholarship has sort of  
28 come to the same conclusion, that there are different ingredients in what qualify as

1 masculinity resources in different societies. Violence seems to be a key one that  
2 connects lots of societies right now.

3 **MS. EMILY HILL:** We have talked about these two aspects of your  
4 answer to the question about why do -- why do we see the -- so many mass shootings  
5 committed by American men. This -- that one aspect of it is a cultural explanation, one  
6 aspect of it is a social-psychological explanation.

7 Is there anything else you want to say or explain about those two  
8 ideas or the connection between them that perhaps I haven't asked about?

9 **DR. TARA LEIGH TOBER:** Sure. So I think if you put these two  
10 pieces together, Dr. Bridges talked about sort of individual research, like how does --  
11 you know, how do these individual men respond to masculinity threats, and then gun  
12 cultures, you know, in discussing sort of changing gun cultures is very broad.

13 But if you take those two things and put them together, you can  
14 think about sort of the -- you know, the struggles that especially white men sort of  
15 perceive to be having or are having, right, in particular in the United States. So you can  
16 think about the loss of manufacturing in many of these areas, economic decline, you  
17 know, just in general, so, you know, the great recession, you know, in 2008  
18 disproportionately impacted sort of the jobs, and this idea that men are unable to sort of  
19 have that provider and protector role that they perceived that they had, you know, sort  
20 of back, you know, whenever, sort of this Mayberry 1950s sort of idea. Right?

21 So the scholar, Jennifer Carlson, talks about this nostalgia for, and I  
22 think some scholars might argue, for a time that never actually existed, but the  
23 perception that there was this time where men could provide for and protect their  
24 families. And -- and we do know that, you know, there's a decline wage, you know, in  
25 real wages and the loss of manufacturing, so there's this sort of, you know, masculinity  
26 threat that is happening sort of on a cultural level. And so part of the explanation I think  
27 is, or we argue I should say, is that this is part of the reason why -- or this is our  
28 explanation for why it is American men.

1                   **MS. EMILY HILL:** So I think that you're saying that answering this  
2 question about why American men are committing mass shootings at such a high rate is  
3 about, not simply about guns and not simply about masculinity, not simply about gun  
4 culture in the United States, but an intersection amongst them all. Have I got that right?

5                   **DR. TRISTAN BRIDGES:** That's correct.

6                   **MS. EMILY HILL:** In terms of any other conclusions that you would  
7 have us draw from the research that you've done, is there anything else that you could -  
8 - you'd like us to understand or you could point to -- point us to in terms of conclusions  
9 based on what you've read in the literature and in your own -- in your own direct  
10 research?

11                   **DR. TRISTAN BRIDGES:** You know, we were talking about this  
12 just the other day, and I think one -- I think culture can feel like a really fuzzy term that  
13 feels like something you can't use, but we've used this in the past to solve other types of  
14 dilemmas. So for instance, when it was widely agreed upon that the research showed  
15 that smoking was toxic for people, we didn't have to just change how cigarettes were  
16 sold, we needed to change the culture of smoking. And that was something I think that  
17 was accomplished, that around the world we had to change the meaning of cigarettes;  
18 right? They had -- like the meaning of smoking had to shift, the culture of smoking.

19                   And so this is something that I think there is precedent for sort of  
20 looking at things like this. Culture is something that is changeable, but not until you  
21 agree -- not until you agree that a certain cultural understanding of something might be  
22 problematic in the first place.

23                   **MS. EMILY HILL:** And just -- I wonder if you can comment at all  
24 and, if you can't, that's all right, about what we might think about as, you know, we in a  
25 different country, in a different setting and looking at a particular mass shooting might  
26 be thinking about or what you might point to us in your research as important,  
27 particularly, as you know, our work is forward-looking. It's about making  
28 recommendations.

1 And I wonder if you have any thoughts about that for our context.

2 **DR. TARA LEIGH TOBER:** So I think one thing that we think is  
3 really important is sort of coming up with a clearly-defined definition of what this mass  
4 violence is, right, coming up with a clear definition of what a mass shooting is and  
5 keeping track of them.

6 So we argue for the United States and we would argue, I think, for  
7 any country that just knowing, right, how often and when these things are occurring is  
8 sort of a really important first step to addressing them as a social problem.

9 **DR. TRISTAN BRIDGES:** You're hearing -- I'm sure you're hearing  
10 from lots of experts as a part of this who are -- who will -- who are telling me that we  
11 really don't know how many of these things are happening. We don't know how many  
12 are happening in the United States. We don't know how many are happening in  
13 Canada, either.

14 And a first step is coming up with a shared definition and then  
15 Canada is in a position, I think, where they could set an international precedent by  
16 saying let's -- let's collect data on these systematically and make those data publicly  
17 available and transparent so that we can actually look at how common these things  
18 actually are.

19 The first step is agreeing on a definition and agreeing to collect  
20 data in a meaningful way.

21 **MS. EMILY HILL:** And is it fair to say that if that recommendation  
22 was taken up and we had a data set that we could agree on and look at that your  
23 research would suggest that understanding cultural meanings around masculinity and  
24 around guns might be important to be examining and understanding those  
25 psychological aspects that you've also raised, that looking at those questions with  
26 regard to the data available in terms of what is happening in Canada would be important  
27 fields of inquiry?

28 **DR. TRISTAN BRIDGES:** Yeah, I think you should collect as much

1 data as you can on incidents like this. I think you should collect data on what guns were  
2 used, how the guns were acquired. You should collect data on whether or not there -- if  
3 there's a manifesto or if the shooter has tried to explain the event in some way. You  
4 should collect data on whether or not those explanations lean on gender in important  
5 ways.

6 I think there should just be massive bodies of data that -- it's one of  
7 those questions that just seems silly that we don't have better data on.

8 In the report we sort of write about how, you know, on almost a  
9 day-by-day basis we knew how many people were dying of COVID-19, which is  
10 incredible and involved international collaboration, but if you get 20 mass shooting  
11 scholars together and ask them how many people have died of a mass shooting in the  
12 last year, we don't know the answer to that. And that's -- it's a knowable number. We  
13 just have to agree on how to define them in the first place before we can know it.

14 **MS. EMILY HILL:** Thank you.

15 You've answered all the questions that I have. If there's anything --  
16 unless there's anything else that you particularly want to say that you haven't had a  
17 chance to say, what we'll do now is take a break and it may be that some of the other  
18 counsel in the room have questions for you or the Commissioners may have questions  
19 for you.

20 **COMMISSIONER MacDONALD:** Yes. It's Commissioner  
21 MacDonald here. I don't know if you have a vantage point to see the panel.

22 But thank you so much, Dr. Tober and Dr. Bridges. We -- as Ms.  
23 Hill said, we will now take a break for 20 minutes and our counsel will meet with counsel  
24 for the various Participants and to see if there are any more questions for you.

25 So we thank you so much for your very important contributions so  
26 far, and if you can hang in for another 20 minutes or so, then we will likely have some  
27 more questions for you.

28 So we'll break now for 20 minutes. Thank you.



1 If you need more time, Ms. Hill, just let us know.

2 **REGISTRAR DARLENE SUTHERLAND:** Thank you.

3 The proceedings are now on break and will resume in 20 minutes.

4 --- Upon breaking at 10:58 a.m.

5 --- Upon resuming at 11:33 a.m.

6 **REGISTRAR DARLENE SUTHERLAND:** The proceedings are  
7 now in session.

8 **COMMISSIONER MacDONALD:** Thank you.

9 Ms. Hill?

10 **MS. EMILY HILL:** Thank you, Commissioners.

11 There were just two questions that arose over the break that I'll ask  
12 our witnesses and then I think Ms. Stephens will ask some questions.

13 **--- DR. TRISTAN BRIDGES, Resumed:**

14 **--- DR. TARA LEIGH TOBER, Resumed:**

15 **--- EXAMINATION IN-CHIEF BY MS. EMILY HILL, (cont'd):**

16 **MS. EMILY HILL:** Thank you for coming back, Dr. Tober and Dr.  
17 Bridges.

18 I just had a couple of follow-up questions from our conversation  
19 earlier.

20 First, in your discussion, I believe, around gun culture, I think you  
21 drew a distinction between the significance or meaning that might be ascribed to long  
22 guns versus handguns, and I'm wondering if -- so I guess, first of all, have I got that  
23 right?

24 Okay. Is there any research or can you comment on whether  
25 there's been research into looking at the significance or the impact of assault weapons  
26 as a type of weapon or a type of gun in terms of the cultural significance that it might --  
27 might attribute to it or in the context of the masculinity challenges?

28 **DR. TARA LEIGH TOBER:** Yeah. So it is interesting.

1 I know at least in our country, people argue over that -- even that  
2 label, right, of what an assault rifle is. And so in the case of Sandy Hook, you know, the  
3 victims' families were actually able to successfully sue the gun manufacturer of the rifle  
4 that was used in that case. And part of the reason why they were able to successfully  
5 sue the company was they didn't really quite call it gun culture, but it was over the  
6 advertising because around the same time that the Sandy Hook mass shooting took  
7 place, they had advertised their -- that rifle, the AR-15 type rifle, with a picture of the gun  
8 and all the ad said was, "Consider your man card reissued".

9 And so the argument there, right, was that they were sort of, you  
10 know, encouraging -- you know, that it was sort of perpetuating a particular type of  
11 culture surrounding this gun, right. Not sort of at -- you know, sort of advocating that  
12 this gun is this weapon that can be used to reinforce your masculinity.

13 So I'm not quite sure about research in particular about, you know,  
14 meanings of rifles or assault rifles versus handguns. It is interesting, we have a lot  
15 more restriction -- at least in some of our states here, we have a lot more restrictions on  
16 handgun purchases versus the so-called assault rifle because handguns are used in --  
17 you know, when you're looking at not mass killings but just typical homicides, you know,  
18 handguns are commonly used.

19 I don't know, Dr. Bridges, is there anything you want to add to that?

20 **DR. TRISTAN BRIDGES:** I guess what I would add to that is that  
21 it's hard to do it on an individual level. So when we -- when we spoke about it earlier,  
22 we talked about it at the cultural level and say, well, gun scholars had sort of said  
23 there's a -- you know, a larger share of gun owners own long guns, for instance, in  
24 Canada than when compared with the United States. And people are arguing that that  
25 might be suggestive of different meanings.

26 I think there is evidence to suggest that assault rifles do have  
27 different meanings.

28 So Dr. Tober brought up the advertising for assault rifles like that,

1 but AR-15 style weapons in particular were actually made because of an interest in a --  
2 in not just assault rifles, but a really particular one and interest in then consumers in the  
3 AK47, which is a fully automatic.

4 And AR-15 style weapons were actually made because of  
5 consumer interest in that really deadly weapon. And that consumer interest probably  
6 stems from movies like Rambo and things like that. We're used to seeing big guys  
7 carrying that gun and so that gun in particular, I do think, has a meaning that is  
8 particularly -- is just extremely gendered, has a very -- has super masculine, macho  
9 connotations.

10 **MS. EMILY HILL:** Thank you.

11 My second question is for you, Dr. Bridges. It just builds on  
12 something you suggested that when we're trying to look at data collection from a  
13 particular mass casualty incident that we should gather as much different types of data  
14 as we can. And you gave some examples of the kind of things we might be wanting to  
15 count.

16 And I wondered if you would include in that data set information  
17 about the amount of ammunition that a particular perpetrator had access to or had  
18 stockpiled.

19 **DR. TRISTAN BRIDGES:** Absolutely.

20 I mean, we should collect as much information, I think, as we can  
21 on access to weapons and ammo that are possible.

22 You know, the previous Prime Minister of Japan was recently  
23 assassinated, really unfortunately. Interestingly, in Japan, one of the questions was,  
24 "How did the person acquire a gun to do this?" And that's just such an interesting  
25 question from an American perspective, because, of course, that's never where we  
26 start. So I think asking questions about where ammo -- where the ammo and the  
27 weapon are coming from are really important. I mean, I -- it might take us another hour  
28 if we go into all the variables that I think could be collected.

1 I think the ones to think about collecting are those that we can  
2 collect really reliably for all incidents.

3 **MS. EMILY HILL:** Thank you. Those are my questions. I think  
4 Ms. Stephens had some questions.

5 And I think, Ms. Stephens, just so you know, we usually ask  
6 counsel to introduce themselves and advise who they represent.

7 **COMMISSIONER STANTON:** Good morning, Ms. Stephens.  
8 Whenever you're ready.

9 **--- CROSS-EXAMINATION BY MS. MEGAN STEPHENS:**

10 **MS. MEGAN STEPHENS:** Good morning. Thank you,  
11 Commissioners.

12 My name is Megan Stephens and I am counsel for a coalition of  
13 organizations participating in this inquiry, including Women's Shelters Canada, the  
14 Transition Houses Association of Nova Scotia, and Be the Peace Institute.

15 So I've got a number of questions arising from both your paper that  
16 I read, as well as the questions that were asked this morning by Commission Counsel.

17 The first one, I thought it was really interesting how you talk about  
18 the importance of how we define mass shootings. And in your paper, as well as in your  
19 evidence this morning, you talked about the fact that domestic violence or intimate  
20 partner violence is often excluded from those definitions.

21 I'm wondering if you could tell me why you think that is and what  
22 barriers there have been to including domestic violence and intimate partner violence  
23 from that definition?

24 **DR. TRISTAN BRIDGES:** Sure. Thanks very much for that  
25 question. Thanks for your work and participation in this.

26 Most of -- in the United States, that actually stems -- there's a  
27 report that was released that we cite in a footnote in our report by the New York City  
28 Police Department, where they make this recommendation that family violence,

1 domestic violence, intimate partner violence should all be not included, in addition to  
2 gang violence.

3 And that's usually cited as sort of the reason for discluding [sic]  
4 things.

5 Dr. Tober and I sort of suspect that one of the reasons is that  
6 there's a suspicion that the sort of public events feel very different. And so part of our  
7 argument to include family violence in our definition of mass shootings is that we don't  
8 know how these things actually differ, because we've never really asked that question.

9 I think also, part of this has to do with the media playing a really big  
10 role in the definition of mass shootings. I think mass shootings may have been a term  
11 that was first created by the media, and then scholars were like, "Well what could it  
12 mean if we studied it?" And I think, yeah.

13 So I think it's unfortunate.

14 And I guess the other thing that I'll say, sorry, I lost track of myself  
15 for a second, is that I think one reason for discluding [sic] them is that I think there's an  
16 assumption that what a mass shooting is looks like what sometimes gets called a  
17 random mass shooting. And those are events that are really hard to define once you  
18 get down to the nitty gritty. Like, what qualifies as random? And I think one of the ways  
19 that people have sought to do that is say, "Well, if the people who are harmed have no  
20 relationship with the perpetrator, then that's one way that we could say that's a little bit  
21 more random than if they do," or "If the incident occurs in a location that the perpetrator  
22 doesn't appear to have a particularly strong connection with, then that's another  
23 indicator that maybe it's a little bit more random."

24 So I think that's another reason that perhaps family violence has  
25 sort of been left out of the definition.

26 **MS. MEGAN STEPHENS:** Okay.

27 **DR. TARA LEIGH TOBER:** Yes, I agree. I think, you know, it  
28 seems like we treat domestic violence and gang violence as sort of something that

1 happens over there and is not -- and that is not affecting, you know, maybe me, or, you  
2 know, people, which, of course, isn't true. And we see these cases, in this case in  
3 particular, and in many of our cases, where that's not true; right? We're seeing sort of  
4 this very blurred boundary between these different types.

5 **MS. MEGAN STEPHENS:** Okay. And so can I just confirm, you  
6 also talked about one of your recommendations would be thinking about adopting a  
7 shared definition of mass shootings or mass casualties. And can I confirm that you  
8 would agree that it would make sense to adopt a comprehensive and broad-based  
9 definition that would include domestic violence, family violence, more broadly as part of  
10 that?

11 **DR. TRISTAN BRIDGES:** That's correct.

12 **MS. MEGAN STEPHENS:** Okay. And I also wondered, on that  
13 same note, just to unpack a little bit of your data, one of the figures that Ms. Hill brought  
14 you to earlier in your testimony was Figure 5, which is on page 12 of your report, the  
15 frequency of active shooter incidents in the United States in the past 20 years.

16 And that chart certainly shows a pretty steady increase in the past  
17 20 years.

18 Can you tell me whether that -- as I understood it, you said that  
19 included -- it was defined by the FBI and included public incidents where someone  
20 shows up with the intent to kill large numbers of people.

21 Would that include incidents in families? Say if someone had gone  
22 somewhere to kill everyone in their family or something like that? Or is that just public  
23 incidents?

24 **DR. TRISTAN BRIDGES:** These are just public incidents. So that  
25 may -- what is related to family violence in this figure is that those incidents could have  
26 been precipitated by family violence, but they wouldn't have been classified as active  
27 shooter incidents unless the shooter was going to an area classified as public with the  
28 intent to kill more.

1                   **MS. MEGAN STEPHENS:** Okay. So that would be obscured here  
2 though? There would be no way to know whether those had started with an incident of  
3 family violence or domestic violence?

4                   **DR. TRISTAN BRIDGES:** There is a way to know, but that's not  
5 shown in the figure, yes.

6                   **MS. EMILY HILL:** Okay. Okay. Have you done research on that?  
7 Would you have any -- could you tell us anything about how many of those active  
8 shooter incidents were precipitated by an act of family violence?

9                   **DR. TRISTAN BRIDGES:** We haven't done research on that, but I  
10 can tell you the -- sort of related to your question, we got a lot of questions from  
11 journalists during Covid-19, where people started asking, "Everyone is locking down.  
12 Are mass shootings going away?" And one of the things that we found in our dataset is  
13 that it might have been more accurate to say that mass shootings in the United States  
14 during the pandemic migrated, that we actually saw a larger share of shooting incidents  
15 that involved family violence. And so those are incidents that depending on how you  
16 define it, would have -- it may have looked like, depending on how you define it, that  
17 mass shootings declined during the pandemic, but if we include family violence, we  
18 would be able to show that, in fact, that was not the case.

19                   **MS. MEGAN STEPHENS:** Okay. Interesting. That actually leads  
20 me to the next question I had for both of you. I wanted to ask you a little bit about your  
21 research on masculinity challenges or masculinity threats. And I was wondering  
22 whether there had been any research looking at the relationship between the last two  
23 plus years of pandemic living and whether that has been experienced as a masculinity  
24 threat or challenge?

25                   **DR. TRISTAN BRIDGES:** That's a tough one. I'm sorry, I keep  
26 jumping in.

27                   I edit a journal on masculinity, and so this one might be a little bit  
28 more in my wheelhouse also, but interrupt me if you want to say something different, Dr.

1 Tober.

2                   There's been a lot of research on masculinity during the pandemic.  
3 I don't know that anyone has done research yet -- you know, the difficult thing about  
4 doing research during the pandemic on people that involved asking people to do things  
5 is that people were pretty busy during the pandemic and asking additional things of  
6 them became a little bit more challenging. So it was easier to conduct research where  
7 people sort of left data for us to examine without having to ask something additional  
8 from them. Most masculinity threat research asks something additional of participants.  
9 So I don't know any research that asked whether or not men perceived the pandemic as  
10 a masculinity threat.

11                   There was a lot of research though on things like mask wearing, for  
12 instance, and the relationship between gender and mask wearing.

13                   There was a huge international dataset that was produced by some  
14 scholars at Johns Hopkins and scholars around the world that asked questions of  
15 people in a collection of I think 67 different nations around the world, where people were  
16 asked throughout the pandemic how scared are you of this thing and how in control of  
17 your fate do you feel right now. How often are you washing your hands? Do you feel  
18 like you're able to stay safe, et cetera?" And in most nations around the world, men  
19 expressed less fear than women. So this is sort of related. They said I'm not scared of  
20 this thing as much as women. They -- men also claim to feel more in control, and lots of  
21 data suggests that men, at least in the United States and the other nations with which  
22 I'm familiar, followed Public Health protocols a little bit less closely than did women as a  
23 group.

24                   **MS. MEGAN STEPHENS:** Okay. And you had briefly mentioned  
25 as well about how there might have been a shift in mass shootings during the  
26 pandemic, more happening perhaps in homes, in family settings. Can you shed any  
27 more light on that and what your research showed in relation to that?

28                   **DR. TRISTAN BRIDGES:** That we probably can't. So those data



1 are still data that we're cleaning right now. What we do know is we have a larger  
2 number of incidents during the pandemic that involve domestic or family violence of  
3 some sort. It'd be really hard using our data to say why that is, so I could make, you  
4 know, suggestions about why that might be, but it'd be really hard to say why  
5 conclusively that is, but we do know that there were more incidents related to domestic  
6 and family violence during the pandemic.

7 **MS. MEGAN STEPHENS:** I'm just pausing to see if Dr. Tober  
8 wanted to add anything.

9 **DR. TARA LEIGH TOBER:** Oh, thank you. Yeah, and it is  
10 interesting because I think initially, when the pandemic started, we thought we might be  
11 able to catch our breath with keeping up with incidents. We're a pretty -- it's just the two  
12 of us and, you know, sometimes we have a graduate student helping us, or some  
13 undergraduate students, and we thought we might see this decline, and that we could  
14 continue building the dataset and catch up, but increasingly, it's becoming more and  
15 more difficult just to keep up with just keeping track of the cases, inputting the data.  
16 And so we are just a little behind in the pandemic data.

17 **MS. MEGAN STEPHENS:** Okay. So just following up a little bit on  
18 this idea of the masculinity challenges and the connections between that and mass  
19 shootings, I'm wondering if you have done any research or you have any thoughts about  
20 why it would appear that most -- or many -- that there are fewer black men and boys  
21 involved as mass shooters than white men and boys, given that it would seem that they  
22 would be subjected to the same types of masculinity threats.

23 **DR. TARA LEIGH TOBER:** Yeah. We do point to the fact in the  
24 paper, this sort of perceived -- potentially this perceived loss of privilege, sort of the  
25 inability to -- or the perception or the inability to be able to provide for a family, you  
26 know, especially with a single income. You know, we sort of talk about the needing  
27 nostalgia for sort of times past where men felt like they could, you know, provide for and  
28 protect their families. And so we sort of talk about -- you know, use that masculinity

1 threat as this perceived loss of privilege and that maybe could be a potential  
2 explanation for why, you know, there -- it's a great high numbers of white men  
3 committing this crime.

4 Dr. Bridges, I don't know if you want to add to that.

5 **DR. TRISTAN BRIDGES:** We also -- so because we include gang  
6 violence, we actually -- in our data, we don't see the same disparity. Most of the  
7 incidents that we include are committed by white and black men, and they're committed  
8 in -- so if we just look at the population of American men, white and black men are  
9 committing them at about the proportions of white and black men that there are in the  
10 United States. That said, it does look like they're committing different types of these  
11 crimes. So, for instance, school shooters are much more likely to be white, so are  
12 workplace shooters. And the incidents involving the most victims are also very likely to  
13 have been committed by white men in our database. It's hard to say why that is, but  
14 that's -- but I agree with Dr. Tober that one of the ways that we've made an argument  
15 about this is to say that privilege is a funny thing. You know, 20 or 30 years ago, we  
16 used to write about privilege as invisible and that one of the ways that it worked so  
17 effectively is that it's least visible to those who have the most of it. So just to give you  
18 an example of that, in classrooms on race, there's an article that is entitled the "White  
19 Privilege Checklist", and it's just a list of things you get for being white that you might be  
20 unaware of. One of them is "Band-Aids match the colour of my skin". And 20 or 30  
21 years ago, that's how we wrote about privilege, that we said people who have this are  
22 unaware of it, and so they don't always know how they're participating in systems of  
23 inequality.

24 I think today, understandings of privilege have really shifted, and  
25 people are aware of privilege in ways that they might not have been a couple decades  
26 ago, and that doesn't shift the way inequality works but it dramatically shifts the way  
27 inequalities are experienced. And so one of the explanations that we provide for this is  
28 that there's been a really -- a huge shift in the experience of privilege for white men, and

1 that -- and this is probably one of the ways, one of the reactions to that shift is  
2 connected, we think, with mass shootings.

3 **MS. MEGAN STEPHENS:** Okay. Thank you.

4 So just a couple further questions, looking at your research that has  
5 drawn this connection between masculinity, gun violence and mass shootings, given  
6 that we know that the culture of masculinity can start at a really young age, have you  
7 done any research or looked at what might be done to counterinfluence those dynamics  
8 at those early stages?

9 **DR. TRISTAN BRIDGES:** We haven't done research on this. And  
10 I think socialization is one of those things that we think of as sort of simple, like, well, if  
11 we can just teach boys to do masculinity differently, then it'd be different, but  
12 socialization is something that it's just a little bit more complicated than that. It also  
13 happens all throughout the life course. One thing we don't know though is we don't  
14 know what it would look like if boy's socialization to things like guns were radically  
15 different. We don't know what it would look like. So that's -- I'm trying to come up with a  
16 way of thinking about how we could actually meaningfully study that to make a  
17 conclusion. I'm not aware of any research that I could draw on that says, well, this  
18 shows that this type of socialization causes very different outcomes. But it seems  
19 logical, based on what we know about gender socialization, that different gender  
20 socialization surrounding guns would lead to different outcomes.

21 **MS. MEGAN STEPHENS:** Okay. One quick follow up, and you  
22 may also not be aware of any research on this, but have you -- do you know if there's  
23 any research that has been done on countering the emergence of toxic masculinity,  
24 whether in schools or, you know, through exposure to social media, anything like that?

25 **DR. TRISTAN BRIDGES:** There's tons of programming like this  
26 available. And its effectiveness is something that, you know, I think we don't -- it's not  
27 the same programming that's given to boys all over the world, so we don't actually know  
28 what the sort of secret sauce is for this. But we do know that talking about gender is

1 something that's valuable for people of all genders, understanding that what gender is,  
2 is going to mean different things over your life course, getting boys from a young age  
3 comfortable talking about emotions we know is really valuable. One thing I advocate for  
4 in the United States, we have lots of conversations surrounding sexual violence and  
5 sexual consent at the sort of high school and college age levels, and one thing that I've  
6 advocated for in the U.S. is that we should start getting groups of boys together and  
7 also having meaningful conversations about what does it mean to be -- when someone  
8 says no to you and how do you deal with that emotionally. I think these are all tools that  
9 people of all genders can benefit from having, and I think most of the research shows  
10 that boys seem to lack them a little bit more than girls, and we don't think that's for  
11 biological reasons. It's probably just because they're given them a little bit less  
12 systematically.

13 **MS. MEGAN STEPHENS:** All right. Thank you. Those are all my  
14 questions. Thank you for taking the time.

15 **COMMISSIONER MacDONALD:** Thank you so much, Ms.  
16 Stephens.

17 Commissioner Fitch, did you have any ---

18 **COMMISSIONER FITCH:** No, thank you. My questions have been  
19 answered but thank you very much to our valued experts. Much appreciated.

20 **COMMISSIONER MacDONALD:** Commissioner Stanton?

21 **COMMISSIONER STANTON:** Thank you.

22 Just one question with respect to the Figure 2 frequency of active  
23 shooter incidents in the U.S. that you have on page 12 of your report.

24 I just wondered if research is done that looks at that data alongside  
25 things like democratic indicators, economic health indicators, legislative changes that  
26 might impact upon equality rights, that kind of -- what are sort of the parallel social  
27 conditions that are occurring parallel to the data that is captured here.

28 I just wondered if that's research that is occurring at all just

1 because your theory with respect to the cultural nexus or the meaning ascribed  
2 suggests that it isn't just the rate of gun ownership that is at play, so what are the other  
3 factors that impinge upon the data that you're showing us?

4 **DR. TRISTAN BRIDGES:** One thing I guess that we could say  
5 about that is that -- so that research is still in progress. We've become -- since we  
6 published this report with you, we've become very interested in state level variation.  
7 And because we have a larger sample, we can start asking questions about whether the  
8 frequencies of mass shootings have changed in similar directions over time in all these  
9 states. We can start to ask questions like, okay, you know, in the U.S. we have these  
10 weird -- states are kind of petri dishes for things. We got this idea from research on sex  
11 education.

12 Sex education is -- you know, young people are given different  
13 information about sex in different states in the U.S. and so we can use that and say  
14 what kind of outcomes do we see in Arkansas compared with Mississippi compared with  
15 Texas, et cetera. We can do similar things now with mass shootings research as well,  
16 so it may be the case -- and then we can look at that over time.

17 So it might be the case, for instance, that we can look at if guns  
18 become easier to access in states, do we see a rise in mass shootings. We're trying to  
19 come up with, right now, measures of gun culture at the state level so that we could ask  
20 whether the gun culture of Wyoming is, in fact, meaningfully different from the gun  
21 culture of California and, if it is, what indicators should we use to measure that.

22 It's still sort of -- it's still ongoing. We're still trying to figure that out.  
23 These are easier things to talk about than they are when we try to say, okay, but if you  
24 gave me a collection of 10 indicators of gun culture that you could reliably collect data  
25 on for all 50 states, what would they be. And so we're sort of -- that's in progress.

26 Dr. Tober?

27 **DR. TARA LEIGH TOBER:** Yeah. And as far as economic  
28 indicators, so there's a lot of research and there's some pretty clear relationships

1 between things such as poverty, unemployment and just homicide rates, you know, in  
2 the United States, but with -- with our data and when we're looking at these mass  
3 shootings, we sort of suspect that that relationship is going to look different with the --  
4 sort of the different types, right, gang violence versus domestic violence versus school,  
5 public, workplace. These other kinds are probably going to have different relationships  
6 to things such as inequality, poverty, unemployment, those sorts of demographics.

7 **COMMISSIONER STANTON:** Thanks very much.

8 And I gather from the footnotes -- some of the information in the  
9 footnotes that the dearth of data has some structural reasons and so I suspect that it's --  
10 it takes quite a bit of courage to do the research that you do. And I just want to thank  
11 you not only for being up at quite an early hour in your time zone to join us, but also for  
12 having the courage to continue the work that you do.

13 So thank you, and I'll pass it over to Commissioner MacDonald.

14 **COMMISSIONER MacDONALD:** Yes. Thank you, Dr. Tober and  
15 Dr. Bridges, first of all, for your thought-provoking, thorough, excellent report, but with  
16 and for the great value added to the report that you've given us today with your  
17 evidence.

18 We're engaged in some very difficult work and your contribution to  
19 us and Canada is greatly, greatly appreciated.

20 And you do very important work. Your scholarship is so important,  
21 and we greatly appreciate that. But we especially appreciate your assisting us with our  
22 work, especially, as Commissioner Stanton said, so early in the morning for you in  
23 California.

24 So on behalf of the Commissioners and the Participants and  
25 everyone here, thank you so much for assisting us. It's greatly appreciated.

26 Thank you.

27 **DR. TRISTAN BRIDGES:** Thank you.

28 **COMMISSIONER MacDONALD:** So I understand now we are

1 ready to present a Foundational Document. Ms. Snowdon will do so.

2 And that will require about a two or three-minute change, and our  
3 team is ready to do that, so we'll stay on the platform.

4 **(SHORT PAUSE)**

5 **COMMISSIONER MacDONALD:** Thank you so much to our team.

6 And Ms. Snowdon?

7 **--- INTRODUCTION OF FOUNDATIONAL DOCUMENTS – VIOLENCE IN THE**  
8 **PERPRETRATOR’S FAMILY OF ORIGIN:**

9 **--- PRESENTATION BY MS. LAURA SNOWDON**

10 **MS. LAURA SNOWDON:** Good morning, everyone. My name is  
11 Laura Snowdon, and I am Commission Counsel.

12 Today I'll be presenting a Foundational Document titled "Violence in  
13 the Perpetrator's Family of Origin". I will now ask Madam Registrar to please mark that  
14 Foundational Document as an exhibit.

15 **REGISTRAR DARLENE SUTHERLAND:** That's Exhibit 3334.

16 **--- EXHIBIT No. 3334:**

17 (COMM0059379) Foundational Document entitled "Violence  
18 in the Perpetrator's Family of Origin" plus related source  
19 materials

20 **MS. LAURA SNOWDON:** And that's COMM0059739.

21 I would also ask that all related source materials be marked as  
22 exhibits.

23 **REGISTRAR DARLENE SUTHERLAND:** So exhibited.

24 **MS. LAURA SNOWDON:** Thank you.

25 Today's presentation and the corresponding Foundational  
26 Document summarize evidence currently available to the Mass Casualty Commission  
27 about violence in the perpetrator's family of origin, and by that I mean the Wortman  
28 family.

1                   As with other presentations of Foundational Documents, what you  
2 hear today will be an overview. There is a great deal more information contained in the  
3 Foundational Document itself, which is now available on the Commission's website, as  
4 well as in its source materials, which will be added to the website later this week.

5                   In this presentation I will be discussing a wide range of violent  
6 conduct, including violence against children as well as physical, emotional and verbal  
7 abuse. I will also present information about a history of child abuse spanning several  
8 generations in the perpetrator's family.

9                   I will make further reference to the perpetrator's threats of violence,  
10 his possession of weapons in his home and his alcohol use disorder.

11                   If these are difficult issues for you to hear about, you may wish to  
12 skip this presentation or to view it later when the video is archived on the Commission  
13 website. That way, you'll be able to access the information at your own pace.

14                   The document we're discussing today is one of a series of  
15 Foundational Documents that will be presented this week and next. While other  
16 Foundational Documents prepared by the Commission to date have focused on what  
17 happened during the mass casualty, the information contained in these four documents  
18 has been catalogued and is being presented for a different purpose.

19                   Each of these four documents relates to the Commission's broad  
20 mandate to enquire into the causes, context and circumstances giving rise to the April  
21 2020 mass casualty, and they relate to the Commission's specific mandate to examine  
22 the role of gender-based and intimate partner violence.

23                   Today's presentation on violence in the perpetrator's family of origin  
24 is the first in this series. It will be followed tomorrow by a presentation on the  
25 perpetrator's violent behaviour towards others, and on Wednesday by a presentation on  
26 the perpetrator's violence towards his common-law spouse, Lisa Banfield. Finally, next  
27 Tuesday, we will present a Foundational Document about the perpetrator's financial  
28 misdealings.



1                   These Foundational Documents look at violent incidents in the  
2 perpetrator's life before the mass casualty. They describe violent incidents as they were  
3 alleged or narrated by various witnesses, who spoke to the RCMP, the Halifax Regional  
4 Police, and the Commission after the mass casualty. The purpose of these  
5 Foundational Documents is, in part, to enable the Commission to examine the links  
6 between gender-based and other violence in mass casualty events, with a view to  
7 identifying possible strategies for prevention or intervention.

8                   And there are three key terms that are relevant to understanding  
9 the content that will be presented this week and next. The first is gender-based  
10 violence, which is often shortened to its acronym "GBV". The definition that you see on  
11 the slide comes to us from the United Nations High Commissioner for Refugees, and  
12 that definition says:

13   "Gender-based violence refers to harmful acts  
14 directed at an individual based on their gender. It is  
15 rooted in gender inequality, the abuse of power and  
16 harmful norms. Gender-based violence can include  
17 sexual, physical, mental and economic harm inflicted  
18 in public or in private. It also includes threats of  
19 violence, coercion and manipulation. This can take  
20 many forms, such as intimate partner violence, sexual  
21 violence, child marriage, female genital mutilation and  
22 so-called 'honour crimes'."

23                   You will also see on the slide there's a more concise definition of  
24 gender-based violence that was provided by Carmen -- Drs. Carmen Gill and Mary  
25 Aspinall. And Drs. Gill and Aspinall are based at the Department of Sociology at the  
26 University of New Brunswick. They provided an expert report to the Commission about  
27 violence in relationships, and in that report, Drs. Gill and Aspinall define gender-based  
28 violence as:

1                                    "...violence experienced due to a person's gender or  
2                                    how they express it."

3                                    The next term is intimate partner violence, or "IPV". And intimate  
4 partner violence is more specific in its application than gender-based violence. It is  
5 limited to violent behaviour targeted at a current or previous intimate partner. It occurs  
6 in all types of intimate relationships and couple pairings, including casual or serious,  
7 exclusive or non-exclusive, short or long term, and everything in between.

8                                    The World Health Organization says that intimate partner violence  
9 refers to:

10                                    "...behaviour by an intimate partner or ex-partner that  
11 causes physical, sexual, or psychological harm,  
12 including physical aggression, sexual coercion,  
13 psychological abuse and controlling behaviours. It  
14 can occur among heterosexual or same-sex couples,  
15 and does not require sexual intimacy."

16                                    The third and final definition is "coercive control", which is another  
17 form of violence that occurs in intimate partner relationships. Dr. Katreena Scott has  
18 provided us with the definition for coercive control that you see on the slide. Dr. Scott is  
19 a clinical psychologist, professor, and director of the Centre for Research and Education  
20 on Violence Against Women and Children at Western University in Ontario. In her  
21 expert report prepared for the Commission, Dr. Scott defines coercive control as:

22                                    "...a pattern of behaviours to assert control over a  
23 person through repeated acts that disempower the  
24 other partner in a number of possible ways including  
25 through fear for the safety of self or others, removal of  
26 rights and liberties or fear of this removal, by isolating  
27 them from sources of support, exploiting their  
28 resources and capacities for personal gain, removing

1 the victim's rights and liberties, depriving them of the  
2 means needed for independence, resistance, and  
3 escape, and regulating their everyday behaviour."

4 Together, these three key terms of gender-based violence, intimate  
5 partner violence and coercive control provide a framework that is useful to  
6 understanding the material that will be presented this week and next.

7 That brings us to the sources of the information contained in today's  
8 presentation and in the corresponding Foundational Document. And of course the main  
9 sources of information about violence in the perpetrator's family are members of the  
10 Wortman family themselves. So we'll turn now to a family tree that has been prepared  
11 by Commission staff.

12 It's important to say at the outset that this is not an exhaustive  
13 depiction of the perpetrator's ancestry, but it does contain the people who are most  
14 frequently named in this Foundational Document, as well as the people who provided  
15 the most information about violence in the Wortman family. They are also the people  
16 with whom the perpetrator had the most direct relationships, and as a result, they have  
17 significant knowledge about the inner workings of the perpetrator's immediate family.

18 It is also important to state upfront that the Commission is not  
19 examining violence within the perpetrator's family in an effort to excuse or explain the  
20 horrific acts that he went on to commit. There are many people who witness or  
21 experience violence and abuse as children who do not go on to perpetrate mass  
22 casualty events. Instead, examining the perpetrator's family history may help to reveal  
23 links between family violence and mass casualty events, and it may assist the  
24 Commission to identify possible strategies for prevention or intervention. This  
25 information is explored for that purpose.

26 You'll see the tree starts with George Wortman, who was the  
27 perpetrator's paternal great-grandfather. George Wortman had a son named Stanley  
28 Wortman, and Stanley married a woman named Doris. Stanley and Doris Wortman

1 were the perpetrator's grandparents.

2 Stanley and Doris had five sons. In birth order, they are: Neil  
3 Wortman, Paul Wortman, Glynn Wortman, Alan Wortman, and Chris Wortman. And  
4 you'll hear these names a lot throughout the course of this presentation.

5 As you can see on the tree, Stanley and Doris's second-oldest son,  
6 Paul married a woman named Evelyn. Paul and Evelyn Wortman are the perpetrator's  
7 parents. Paul and Evelyn also had a second son, who they secretly placed for adoption  
8 at birth. That son is the perpetrator's biological brother, and his name is Jeff  
9 Samuelson. Mr. Samuelson grew up in the United States, and he discovered that the  
10 Wortmans were his birth family in 2010. He connected with them and met Paul, Evelyn  
11 and the perpetrator around that time.

12 You will also see on the tree the perpetrator's common-law spouse,  
13 Lisa Banfield. And in addition to biological family members, Ms. Banfield, and members  
14 of the Banfield family, also provided information about the Wortman family to the RCMP  
15 after the mass casualty. Some of their recollections are included in the Foundational  
16 Document.

17 In terms of our chronology, the first witness recollections to start  
18 with are about violence in the Wortman family that pre-dated the birth of the perpetrator.  
19 And the first slide in this section is about Stanley Wortman. If you recall from the tree,  
20 Stanley Wortman is the perpetrator's paternal grandfather.

21 After the mass casualty, the perpetrator's father, Paul Wortman,  
22 told the RCMP that he, himself, was raised in a violent family. Paul said, quote, "there  
23 was more than screaming going on." The perpetrator's uncle, Alan Wortman, also told  
24 the RCMP that Paul experienced violence as a child. Alan said their father, Stanley,  
25 was violent towards the three oldest brothers, who were Neil, Paul, and Glynn.

26 In separate interviews with the RCMP after the mass casualty, both  
27 Alan and -- Alan and Neil recalled an incident where their father, Stanley, was picking  
28 on their brother Glynn. They said Glynn would have been around 14 years old at the

1 time of this incident. Glynn got a knife from the kitchen and he stabbed their father  
2 Stanley in his bed. Alan heard screaming and ran inside the house where he saw blood  
3 everywhere. They called an ambulance, and according to Alan and Neil, Glynn was  
4 charged with aggravated assault or something similar, and served jail time in relation to  
5 this incident. Alan told the RCMP he believes Glynn intended to kill their father that day.  
6 The Commission has not spoken to Glynn directly about this incident.

7                   There is also evidence that violence in the Wortman family dated  
8 back even further than Stanley. There is evidence that the perpetrator's great-  
9 grandfather George Wortman, who is Stanley's father, was also violent towards his  
10 family. When the perpetrator's biological brother Jeff Samuelson reconnected with his  
11 birth family, the Wortman's, around 2010, the perpetrator's uncle Neil Wortman wrote  
12 Jeff a letter. In that letter, Neil explained that violence in the Wortman family extended  
13 at least two generations back. Neil wrote, "Your great-grandfather George Wortman  
14 was a tyrant who brutalized his family. He managed to isolate himself from all members  
15 of his family to the point where none of his children ever spoke of him after his death.  
16 All of his children were seriously affected by the treatment that they received from him.  
17 Only one of them survives today. If you met him, or if you could have met any of the  
18 others, including your grandfather Stanley Wortman, you would have quickly observed  
19 that they were seriously off centre. All of them, to varying extents, treated their wives  
20 and children the only way they knew how, like their father treated his family members.  
21 Abused children often become abused parents."

22                   This brings us to witness accounts of Paul's violence towards the  
23 perpetrator during his childhood.

24                   After the mass casualty, the perpetrator's uncles told the RCMP a  
25 number of stories about Paul Wortman's behaviour when the perpetrator was growing  
26 up. They said Paul was always pulling scams, like forcing the perpetrator's mother  
27 Evelyn to hide in the trunk of his car, so that he didn't have to pay for her admission  
28 ticket to the drive-in movie theatre. They said Paul made a counterfeit shirt, so that he

1 could avoid paying fees at the gym, and he sewed pockets inside a coat, so that he  
2 could steal steaks from the grocery store. They said Paul once stole a dog from a  
3 family in his neighbourhood because it wouldn't stop barking, and he let it loose in the  
4 countryside. Paul's brothers also said he was quick with his fists, and we'll get into  
5 more examples of that on the next slide.

6 Two of the perpetrator's uncles, Neil and Glynn, told the RCMP that  
7 the perpetrator observed his father engage in this kind of conduct when he was growing  
8 up. And according to Neil, Paul taught the perpetrator that committing the crime is  
9 really not so bad. It's getting caught, that's what's bad.

10 The perpetrator's uncles also described Paul's physical violence to  
11 the RCMP after the mass casualty. Chris Wortman said Paul had no fuse. He had road  
12 rage, had no friends, and was in battles with the neighbours. Chris said everybody  
13 pissed Paul off. Everybody was doing things that aggravated him.

14 Neil Wortman told the RCMP that Paul was once driving on a road  
15 when someone honked at him, and Paul took offence, got out of his car, walked back,  
16 pulled the man out of his car, and beat him badly. Neil also told the RCMP about a time  
17 Paul was at Stelco Steel where he worked. A man shook a newspaper and dust fell into  
18 Paul's soup. Paul dragged the man across the table and beat him badly and Paul was  
19 suspended for that.

20 In their statements to the RCMP after the mass casualty, the  
21 perpetrator's uncles reported that Paul was physically violent towards his wife and the  
22 perpetrator's mother Evelyn Wortman.

23 Glynn told the RCMP there was violence in the perpetrator's  
24 childhood home. Glynn said Paul abused Evelyn when the perpetrator was growing up,  
25 and Glynn was once in the family home when it happened. Glynn heard Evelyn crying  
26 and screaming, and he ran into Paul and Evelyn's bedroom. He saw Paul on top of  
27 Evelyn, choking her. Paul told Glynn to get the hell out, and Glynn replied, "Well, get  
28 the hell off Evelyn." Glynn said the perpetrator would have been a little boy or a toddler

1 at the time of this incident.

2                   Alan Wortman also said he had witnessed Paul's physical abuse of  
3 Evelyn. Alan told the RCMP he once saw Paul assault Evelyn at a Christmas dinner.  
4 Alan said, "Paul gets his way and he can be violent. I don't want to paint a picture of my  
5 brother as a bad guy, but I did see Paul -- I'll tell you, I did see Paul when I was a young  
6 boy, around 16 years old, at a Christmas dinner. There was an argument at the table,  
7 and Paul was leaving, and he said, "Evelyn, you're leaving with me." And she said  
8 something, and he struck her, knocked her onto the floor, and kicked her, and kicked  
9 her, and kicked her. I had to -- I was only about 16. I said, "You have to stop doing  
10 that. Stop it." That's his -- he just blows up."

11                   Lisa Banfield told the RCMP that Paul beat on Evelyn all the time.

12                   In addition to family members reporting to the RCMP after the mass  
13 casualty that Paul abused Evelyn, they also said Paul was violent towards his son.  
14 Again, I want to state that this information is not intended to create sympathy for the  
15 perpetrator. It is included to help the Commission examine the broader causes, context  
16 and circumstances that gave rise to the mass casualty. Part of that work involves  
17 looking at earlier opportunities for intervention.

18                   After the mass casualty, Lisa Banfield told the RCMP that the  
19 perpetrator said Paul physically abused him when he was a child. She said Paul would  
20 give the perpetrator beatings. In her interview with Halifax Regional police officers who  
21 were assisting the RCMP after the mass casualty, Lisa Banfield's sister Maureen  
22 Banfield said there was a lot of evidence very early on that the perpetrator was quite  
23 disturbed in his manner. Maureen said the perpetrator had shared, both through Lisa  
24 and directly with her, that he had been extremely abused, severely abused as a young  
25 boy.

26                   The perpetrator's uncle Glynn told the RCMP that Paul made the  
27 perpetrator's life miserable. Glynn said Paul never treated the perpetrator like a little  
28 boy. He treated him like an animal.

1 Family members gave the RCMP other examples of Paul's abuse  
2 of the perpetrator. For example, Jeff Samuelson said that Paul told him when the  
3 perpetrator was about three years old, Paul decided that the perpetrator was too old for  
4 his blanket. Paul burnt the blanket in front of the perpetrator.

5 Lisa Banfield told the RCMP that when the perpetrator was around  
6 seven or eight years old, his parents would take him to the shopping mall, let him go off  
7 on his own, and leave without him. Ms. Banfield said the perpetrator would be left alone  
8 at the mall, not knowing where his parents were, and would have to find his own way  
9 home. This meant that the perpetrator would be walking home along the highway.  
10 Evelyn would sometimes get in her car and drive back towards the mall to try to find her  
11 son along the side of the road, pick him up and bring him home.

12 Neil Wortman told the RCMP the perpetrator had a dog when he  
13 was a young boy. And when Paul felt that the perpetrator wasn't taking proper care of  
14 his dog, Paul forced the perpetrator to shoot the dog.

15 Witnesses also told the RCMP there was other gun violence in the  
16 perpetrator's childhood home. For example, after the mass casualty, Glynn Wortman  
17 told the RCMP that when the perpetrator was a little boy, Paul put a gun to the  
18 perpetrator's head and then to Evelyn's head.

19 Lisa Banfield told the RCMP that Paul once handed the perpetrator  
20 a loaded gun and said, "Shoot me. I know you want to." Lisa Banfield said the  
21 perpetrator told her he was very close to shooting his father that day.

22 Multiple witnesses told the RCMP that the perpetrator grew up to  
23 hate his parents. Lisa Banfield said he never referred to them as "Mom and Dad"; he  
24 only ever called them "Evelyn and Paul".

25 This next section of the presentation looks at the perpetrator's  
26 violence towards family members as an adult.

27 The first incident that we'll look at is the perpetrator's assault on his  
28 father during a family vacation in Cuba, as recounted by Paul Wortman and Lisa



1 Banfield in their interviews with the RCMP after the mass casualty.

2                   Around 2010, the perpetrator was on vacation at a resort in Cuba  
3 with Lisa Banfield, his father Paul, and his mother Evelyn. One night, the perpetrator  
4 was drinking at dinner and he began to criticize Paul's parenting. He was saying things  
5 like Paul wasn't much of a father. Paul said he started apologizing to the perpetrator,  
6 saying he was sorry if the perpetrator felt that he had been a rotten father. But the  
7 perpetrator became violent, he straddled Paul on a bench, and he started beating him.  
8 Paul said the perpetrator was, "pounding the hell out of me."

9                   Lisa Banfield recalled the perpetrator smashing Paul's head against  
10 the concrete by the pool. She said the perpetrator was trying to get Paul to say sorry for  
11 the perpetrator's childhood. She said Paul was denying that he ever did anything to the  
12 perpetrator, and the perpetrator just wanted Paul to admit what he had done.

13                   Lisa remembered that Evelyn was there, and she recalled Evelyn  
14 screaming at Paul to just say he was sorry.

15                   Paul told the RCMP that he became unconscious during the  
16 assault. When he woke up, he saw resort staff members pulling the perpetrator away  
17 from him. He said the perpetrator was in a rage and ready to fight the staff members.  
18 At that point, a manager came out and was able to diffuse the violence.

19                   As for Paul's injuries, he said his, "face was pretty smashed up,"  
20 and, "he lost a bit of vision in one of [his] eyes".

21                   After the assault, Lisa Banfield said Paul told her she had to leave  
22 the perpetrator. According to Ms. Banfield, Paul said:

23                                   "I was a bastard to my wife, I was a bastard to my  
24                                   son, and [the perpetrator's] gonna do the same thing  
25                                   to you."

26                   Lisa recalled that at this time, Paul's injuries were so bad he was  
27 unrecognizable.

28                   Paul told the RCMP he forgave the perpetrator for this assault a

1 few months later.

2 Also in 2010, on the evening of June 1<sup>st</sup>, the perpetrator phoned his  
3 uncle Glynn, and he told Glynn that he was going to drive from Nova Scotia to his  
4 parents' house in New Brunswick to kill them.

5 Glynn reported this incident to the RCMP immediately. When he  
6 recounted it 10 years later in a statement to the RCMP after the mass casualty, Glynn  
7 recalled that the perpetrator had been drinking that night.

8 According to various family members who spoke to the RCMP after  
9 the mass casualty, the perpetrator was upset with his parents around June 2010  
10 because of a property dispute.

11 Neil Wortman told the RCMP the perpetrator was in a fit of rage  
12 that night and got into his car armed to shoot his father. Alan added that the perpetrator  
13 was armed with a rifle.

14 In her statement to Halifax Regional Police officers who were  
15 assisting the RCMP after the mass casualty, Lisa Banfield's sister, Maureen Banfield,  
16 said the perpetrator had a psychotic break on the night of June 1<sup>st</sup>, 2010. She said the  
17 perpetrator was talking about killing himself, as well as killing his parents, and that he  
18 was also talking about dismembering his parents. She said, he said he knew how to get  
19 rid of bodies.

20 David McGrath was Maureen Banfield's long-term partner at the  
21 time of the mass casualty, and like Maureen he was also interviewed by Halifax  
22 Regional Police officers after the mass casualty.

23 In his statement to the Halifax Regional Police, Mr. McGrath  
24 recalled the incident on June 1<sup>st</sup>, 2010. He described the perpetrator as almost suicidal  
25 that night. Maureen and David stated that the perpetrator was so upset that he fired a  
26 gun in the dining room of his home on Portland Street in Dartmouth.

27 Maureen and David also told the Halifax Regional Police that it was  
28 the perpetrator's uncle, Chris Wortman, who was able to calm him down and talk him

1 out of going to kill his parents that night.

2 Now, as I mentioned, this incident was reported to the RCMP and it  
3 was investigated by the Halifax Regional Police with the assistance of some RCMP  
4 members. The reason that the Halifax Regional Police conducted this investigation was  
5 because it was determined that the perpetrator made the threat by phone from  
6 Dartmouth, so that was in the Halifax Regional Police jurisdiction.

7 Police records show that the investigation began in the early  
8 morning hours of June 2<sup>nd</sup>, 2010, when Glynn Wortman phoned the Codiac RCMP  
9 Detachment near Moncton to report the perpetrator's threat to kill his parents. Glynn  
10 called from Edmonton, Alberta, and he talked to Codiac RCMP member Cst. Len  
11 Vickers.

12 It appears that Cst. Vickers also obtained a statement from Paul  
13 Wortman that day, and that Paul advised Cst. Vickers that the perpetrator had guns.  
14 Cst. Vickers wrote up an initial officer's report stating that he had received information  
15 concerning death threats made against Paul and Evelyn Wortman by their son.

16 Cst. Vickers shared this report with the Halifax Regional Police, and  
17 the Halifax Regional Police assigned Sgt. Cordell Poirier as the lead investigator.

18 Sgt. Poirier began by looking up the perpetrator's known  
19 addresses, which included his denture clinic where he also lived in the apartment above  
20 with Lisa Banfield on Portland Street in Dartmouth, as well as his cottage in Portapique.

21 Sgt. Poirier noted there was a possibility that the perpetrator was in  
22 possession of several long-barrelled weapons, which appeared to be based on  
23 information that Paul Wortman had provided to the RCMP.

24 At 3:25 a.m. on June 2<sup>nd</sup>, 2010, Sgt. Poirier attended 193 Portland  
25 Street, which was the address of the perpetrator's denture clinic and his residence. Sgt.  
26 Poirier's notes say he spoke to Lisa Banfield, who advised that the perpetrator had  
27 passed out drunk in bed two hours earlier.

28 She said that the perpetrator had been in a lengthy dispute with his

1 parents over land. Lisa Banfield told Sgt. Poirier the perpetrator started drinking  
2 because he was stressed, and that he phoned his uncle Glynn to vent his anger and  
3 frustration.

4 Sgt. Poirier wrote in his report that Lisa Banfield would not confirm  
5 or deny the perpetrator made the threat to kill his parents.

6 Lisa Banfield told Sgt. Poirier there were no weapons in the house.  
7 Later this week we will hear from Ms. Banfield about her reasons for telling the police  
8 there were no weapons in the home.

9 Sgt. Poirier said he would come back later that evening, which was  
10 June 2<sup>nd</sup>, 2010, to speak to the perpetrator in person. And in the meantime, Sgt. Poirier  
11 conducted two searches using the Canadian Firearms Registry Online database. He  
12 was looking for any possible weapons registered to the perpetrator.

13 The CFRO database provides law enforcement access to firearms  
14 licence information, licence statuses, and firearms registration information for  
15 Canadians. Nothing came up in St. Poirier's CFRO searches, which meant that the  
16 perpetrator did not have a licence to acquire or possess firearms, and if he had any  
17 weapons they were not registered.

18 When Sgt. Poirier contacted Lisa Banfield again that evening, she  
19 told him the perpetrator had left for New Brunswick on a business trip and would not be  
20 back for about a week. Lisa Banfield again told Sgt. Poirier that there were no weapons  
21 at the Portland Street address.

22 Sgt Poirier told her that he still needed to have a face-to-face  
23 conversation with the perpetrator, so he said he would follow up with the perpetrator  
24 once he returned from his business trip.

25 On the morning of June 7, 2010, Sgt Poirier visited 193 Portland  
26 Street again. That was a Monday, but the denture clinic was closed and no one  
27 answered when he knocked on the residence door of the building.

28 As he was walking back to his police cruiser, Sgt Poirier received a

1 call on his cellphone from the perpetrator. The perpetrator was calling from a blocked  
2 number, but he said he was calling from his cottage in Portapique.

3 Sgt Poirier wrote in his report that the perpetrator would not admit  
4 or deny that he made the threat to kill his parents. The perpetrator did say he was very  
5 upset and had been drinking the night he called his uncle Glynn.

6 When Sgt Poirier asked if the perpetrator was in possession of any  
7 firearms, the perpetrator said the only guns he had were a pellet rifle and two antique  
8 muskets that were inoperable and hanging on the wall of his cottage in Portapique.

9 Sgt Poirier said he would still need to speak to the perpetrator in  
10 person.

11 The perpetrator told Sgt Poirier he had nothing more to say to him  
12 and he said that if Sgt Poirier was going to charge him with a threat, that he should go  
13 ahead and do so.

14 With that, the perpetrator ended their phone call.

15 Now, before we continue with the rest of Sgt Poirier's investigation,  
16 there's an important graphic from his report that is up on the slide. As I mentioned, Sgt  
17 Poirier was running firearms checks on the perpetrator, and as a result of those  
18 searches, a record about possible firearms in the perpetrator's possession was added  
19 to the Halifax Regional Police database on June 2<sup>nd</sup>, 2010.

20 As you can see on the slide, the record was tagged "FIREARMS  
21 INTEREST POLICE". It listed the perpetrator's name and his date of birth, and it stated:  
22 "THIS PERSON MAY BE OF INTEREST TO FIREARMS OFFICERS".

23 After conducting the firearms checks and speaking to the  
24 perpetrator, Sgt Poirier spoke to Bible Hill RCMP member Cst Greg Wiley. According to  
25 Sgt Poirier's notes, Cst Wiley advised that he was a friend of the perpetrator and had  
26 been to the perpetrator's cottage in Portapique several times. Cst Wiley said he had  
27 never seen a firearm at the cottage.

28 Cst Wiley said he would try to meet with the perpetrator at the

1 cottage in Portapique to speak to him in relation to this complaint.

2                   At that time, Sgt Poirier advised Cst Wiley that the main concern in  
3 his investigation was whether the perpetrator had any weapons at his cottage in  
4 Portapique.

5                   Sgt Poirier told Cst Wiley that if Cst Wiley found any weapons at  
6 the cottage, they would be seized under a public safety warrant.

7                   Sgt Poirier wrote in his report that due to the indirect and veiled  
8 nature of the perpetrator's threat to kill his parents and the additional information that  
9 Sgt Poirier had gathered throughout the course of his investigation, he would not lay  
10 charges against the perpetrator for making the threat.

11                   But Sgt Poirier decided the file would remain open until he spoke to  
12 Glynn Wortman in Edmonton, Paul Wortman in Moncton, and Cst Wiley after his visit to  
13 the perpetrator's Portapique cottage.

14                   Sgt Poirier added:

15                                    "At this time the writer is satisfied that [the perpetrator]  
16                                    does not pose a threat to his parents. It is clear that due  
17                                    to stress, anger towards his parents in relation to land  
18                                    issues, and alcohol these comments were made."

19                                    Sgt Poirier then spoke to Paul Wortman about the  
20                                    weapons Paul initially told the Codiak RCMP his son had.

21                   Sgt Poirier wrote in his report that Paul was convinced his son still  
22 had the weapons at his cottage in Portapique. Paul said he had seen the weapons in a  
23 storage closet next to the fireplace in the living room. The last time he saw them was  
24 over five years ago.

25                   Sgt Poirier noted in his report that because of Paul Wortman's poor  
26 relationship with his son, Paul would have no idea if the perpetrator still had the  
27 weapons.

28                   Sgt Poirier advised Paul that without recent knowledge, a public

1 safety warrant to seize the weapons could not be obtained.

2 Sgt Poirier also contacted Sgt Tim Moser of the National Weapons  
3 Enforcement Support Team, which is a team that supports the RCMP on firearms  
4 investigations.

5 Sgt Moser agreed with Sgt Poirier that there was no evidence to  
6 secure a public safety warrant in relation to the perpetrator's weapons.

7 Sgt Poirier noted in his report that he was still waiting to hear back  
8 from Cst Wiley about whether the perpetrator had any weapons at his cottage in  
9 Portapique. And Sgt Poirier wrote in his report that if he did, that would have to be dealt  
10 with by the RCMP, because the cottage was in RCMP jurisdiction.

11 A month later, Sgt Poirier called Cst Wiley and left a message  
12 requesting an update.

13 On July 17, 2010, Sgt Poirier spoke to Cst Wiley, who said he had  
14 not yet spoken to the perpetrator, but would attempt to speak with the perpetrator in the  
15 next two days and would report back to Sgt Poirier about his findings.

16 At this point in the investigation, Sgt Poirier had made repeated  
17 unsuccessful attempts to contact Glynn Wortman, Paul Wortman, and Evelyn Wortman.

18 Sgt Poirier closed the Halifax Regional Police file on the perpetrator  
19 on August 26, 2010. In his concluding report, he wrote that no further action was  
20 required on the file because there was insufficient evidence to proceed and because he  
21 did not have the cooperation of the original complainants.

22 Sgt Poirier also wrote in his concluding report that Cst Wiley from  
23 Bible Hill RCMP was looking after speaking to the perpetrator to determine if any  
24 charges were to be laid in RCMP jurisdiction.

25 Therefore, Sgt Poirier concluded that no further action was required  
26 from the Halifax Regional Police on this file, and accordingly, he closed the file.

27 In his July 2021 interview with the Mass Casualty Commission, Cst  
28 Wiley stated that he did not remember having a conversation with Sgt Poirier in 2010

1 and he said he probably would not have referred to himself as a friend of the  
2 perpetrator's, but that he was familiar with him.

3 Cst Wiley thought it was possible that he had tried to contact the  
4 perpetrator at a time the perpetrator was not at his Portapique cottage, because Cst  
5 Wiley said the perpetrator frequented that property rather irregularly. But Cst Wiley  
6 thought it was possible that he'd documented any contact attempts in his notebook.

7 In a letter from December 2021, counsel for the RCMP advised the  
8 Mass Casualty Commission that Cst Wiley had searched his home but could not locate  
9 any such notes.

10 The next incident of violence arises in the context of the  
11 perpetrator's relationship with his uncle, Glynn Wortman.

12 The following information was reported to the RCMP after the mass  
13 casualty by Robert Doucette.

14 Mr. Doucette met the perpetrator in 2011 or 2012 in the Portapique  
15 area and he worked as a contractor for the perpetrator on a casual basis until the time  
16 of the mass casualty.

17 Mr. Doucette told the RCMP that around 2013, the perpetrator  
18 attempted to gain possession of his uncle Glynn's home in Portapique. The perpetrator  
19 did not know that Glynn had already left his home to someone else in his will. And  
20 when the perpetrator learned this information, he became very angry. Mr. Doucette  
21 said that the perpetrator went to Glynn's house and drove his truck through the fence  
22 around the front of the house. Mr. Doucette told the RCMP the perpetrator smashed  
23 the whole fence down one post at a time.

24 Neil Wortman also recounted this incident in his statement to the  
25 RCMP after the mass casualty. Neil said he was concerned at the time that the  
26 perpetrator would try to damage Glynn's house through arson. Neil was worried about  
27 this because he recalled that the perpetrator had a history of working with incendiary  
28 devices and bombs as a young boy.



1                   After these violent incidents, the perpetrator's relationship with his  
2 parents deteriorated to the point that he had no contact with them in the years leading  
3 up to the mass casualty. Paul Wortman told the RCMP that he and Evelyn last saw the  
4 perpetrator around 2016. At that time, the perpetrator told his parents he did not want  
5 to see either of them again. The perpetrator told Paul and Evelyn that if one of them  
6 died, he did not want the surviving parent to let him know, because he would not care.

7                   Lisa Banfield told the RCMP that the perpetrator cut his whole  
8 family out of his life, beginning in 2010. She said he told her his parents were dead to  
9 him.

10                  In their interviews with the RCMP after the mass casualty, other  
11 relatives described the perpetrator as estranged from his family. They said he had a  
12 deep hatred, especially for his father, Paul. Jeff Samuelson told the RCMP that when  
13 he and the perpetrator had phone calls, the perpetrator would say things like "I'd love to  
14 kill my parents."

15                  Renee Karsten was a denturist who met the perpetrator at denturist  
16 school and later worked for him at his denture clinic. She recounted to the RCMP that  
17 the perpetrator told her he wanted to end the Wortman legacy. She said he told her he  
18 never wanted to have children because did not want to produce any more Wortmans.

19                  After the mass casualty, Wortman family members also provided  
20 other, more general observations to the RCMP about the perpetrator's violent  
21 tendencies, including that they came about when he was drinking. For example, Glynn  
22 Wortman and Chris Wortman told the RCMP they had witnessed the perpetrator  
23 become violent when he was drinking. Chris described the perpetrator as an alcoholic,  
24 and said he was not a friendly drunk. Chris said the perpetrator had two sides to him,  
25 and Chris had seen the perpetrator become aggressive and scary when drinking. Chris  
26 told the RCMP he had spoken to the perpetrator about alcoholism and addiction. He  
27 said the perpetrator would quit drinking alcohol for a few months to a year at a time, but  
28 he always started drinking again.

1                   In June 2009, medical records show that the perpetrator told a  
2 family doctor he had a history of alcoholism and that he drank 12 beers a day, 5 days a  
3 week. The doctor suggested the perpetrator see a psychologist to help him deal with  
4 stress, but he said he was not interested at that time.

5                   After witnessing the perpetrator's violence and the breakdown in his  
6 family relationships, various relatives reported that when they learned about the mass  
7 casualty, they were afraid the perpetrator would target them. They spoke about this  
8 fear in their statements to the RCMP after the mass casualty.

9                   At 5:00 a.m. on Sunday, April 19th, 2020, the RCMP arrived at Paul  
10 and Evelyn's home to take them to another location for their safety. The perpetrator's  
11 uncle, Neil, and his wife also left their home that weekend as a precaution.

12                   After the mass casualty, Glynn Wortman told the RCMP the  
13 perpetrator should never have ended up a killer. Glynn said that understanding the  
14 perpetrator's childhood and his parents, Paul and Evelyn, were important to  
15 understanding the mass casualty.

16                   For his part, the perpetrator's father, Paul, speculated to the RCMP  
17 after the mass casualty that the perpetrator had thoughts of suicide. Paul said:

18                                   "...I know and you know.. he knew, he was gonna die.

19                                   That was a way, of committing suicide."

20                                   "You don't go shooting people and expect to get  
21 away with it, my son was not dumb."

22                                   "He knew what he was doing and he knew he was  
23 gonna die, why he had to do what he did he probably  
24 didn't have the guts to click one off. I don't, there's  
25 other ways to kill yourself without shooting yourself, I  
26 know a couple. You can do it painlessly."

27                   This concludes the presentation of the Foundational Document  
28 about violence in the perpetrator's family of origin.

1                   **COMMISSIONER MacDONALD:** Thank you so much,  
2 Ms. Snowdon. This was a difficult presentation, and we greatly appreciate you  
3 presenting it for us today.

4                   We'll now break until 2:00 p.m., at which time we'll hear from an  
5 expert witness, Dr. Deborah Doherty. Thank you.

6                   **REGISTRAR DARLENE SUTHERLAND:** Thank you. The  
7 proceedings are now on break and will resume at 2:00 p.m.

8 --- Upon recessing at 12:53 p.m.

9 --- Upon resuming at 2:03 p.m.

10                   **REGISTRAR DARLENE SUTHERLAND:** Welcome back. The  
11 proceedings are again in session.

12                   **COMMISSIONER MacDONALD:** Ms. Hill?

13                   **MS. EMILY HILL:** Commissioners, we just had some exhibits to  
14 take care of before we move forward with the witness this afternoon.

15                   At this time, Madam Registrar, I'd like to mark a number of exhibits.  
16 They are -- have been available to the Participants, and a list was shared with them  
17 yesterday. The documents being shared today include a Commissioned report and  
18 additional exhibits related to previous Foundational Documents. There are also emails  
19 the Commission recently received from the Department of Justice related to the  
20 April 28th RCMP meeting. As is our practice, these documents will be shared on our  
21 website in the coming days.

22                   Additionally, I'd like to make an oral correction to the report of Dr. R.  
23 Blake Brown. That report is called the History of Gun Control in Canada, and is -- it is  
24 Exhibit P-0011102. The report states at page 22 that a perpetrator in a different  
25 incident:

26   "...killed four people, including two police officers, in  
27   Fredericton [in 2017]."

28                   The correct date for that mass casualty incident is in fact

1 August 10th, 2018.

2 So if those exhibits can be marked.

3 **--- EXHIBITS 3335 TO 3357:**

4 Commissioned report and additional exhibits related to  
5 previous Foundational Documents

6 **REGISTRAR DARLENE SUTHERLAND:** So exhibited.

7 **MS. EMILY HILL:** I think that concludes the comments that I have.

8 **COMMISSIONER MacDONALD:** Thank you so much.

9 Ms. Hnatiw.

10 **MS. GILLIAN HNATIW:** Good afternoon, Commissioners. As our  
11 next witness we would like to call Dr. Deborah Doherty.

12 **COMMISSIONER MacDONALD:** Thank you.

13 **MS. GILLIAN HNATIW:** Take a moment to get comfortable,  
14 Dr. Doherty.

15 And then I will ask Madam Registrar to affirm the witness, please.

16 **--- DR. DEBORAH DOHERTY, Affirmed:**

17 **DR. DEBORAH DOHERTY:** I'm not hearing well.

18 **--- EXAMINATION ON QUALIFICATIONS BY MS. GILLIAN HNATIW:**

19 **MS. GILLIAN HNATIW:** Are you able to hear me?

20 **DR. DEBORAH DOHERTY:** Yes.

21 **MS. GILLIAN HNATIW:** Okay. If at any point today you are not  
22 able to hear a question from me, from the Commissioners, or from any of the counsel  
23 who may have questions for you later, please do not be shy about letting us know that.

24 **DR. DEBORAH DOHERTY:** Okay.

25 **MS. GILLIAN HNATIW:** Okay. And so thank you for being here  
26 today, Dr. Doherty. I know you've flown in from the West Coast, but that you've spent  
27 the -- more than 30 years working in local Maritime communities, and so we appreciate  
28 you being here with us today.

1 I'm going to start by asking, Madam Registrar, if you could mark  
2 Dr. Doherty's CV as an exhibit. It's COMM No. 59736.

3 **REGISTRAR DARLENE SUTHERLAND:** It's Exhibit 3358.

4 **-- EXHIBIT NO. 3358:**

5 (COMM59736) Curriculum Vitae of Dr. Deborah Doherty

6 **MS. GILLIAN HNATIW:** And Commissioners, the Participants  
7 have a copy of Dr. Doherty's can-say, sorry, CV, a can-say statement, as well as the  
8 summary, the basis upon we'll be asking you to qualify her as a witness, and that will be  
9 for her expertise in gender-based violence, intimate partner violence, and family  
10 violence, as well as on the risk factors associated with intimate partner violence in rural  
11 and farm communities in the Maritimes.

12 So I'm going to spend some time walking Dr. Doherty through her  
13 experience and the different projects, research, and initiatives she was involved in in her  
14 career because that information relates to her qualifications as an expert as much as it  
15 does, the reasons she's here today, and then I'd like to spend some time discussing and  
16 unpacking that. I'll ask you to qualify her through later in our discussions, but I just  
17 wanted to be clear up front that we're not going to walk through her CV. We're going to  
18 have a longer discussion of her experience and expertise.

19 **COMMISSIONER MacDONALD:** Thank you.

20 **MS. GILLIAN HNATIW:** Okay. So, Dr. Doherty, I mean, let's start  
21 by a discussion of your qualifications and background, beginning with the fact that I  
22 understand you received a PhD in Social Sciences from McGill University in 1986; is  
23 that correct?

24 **DR. DEBORAH DOHERTY:** Yes.

25 **MS. GILLIAN HNATIW:** And then you went on to work as a senior  
26 policy analyst for the Women's Directorate in the province of New Brunswick. I believe  
27 you were there from 1985 to 1989. Could you tell us a little bit about what that role  
28 involved?

1                   **DR. DEBORAH DOHERTY:** That involved a consideration of what  
2 was determined to be women's issues at the time, but anything from family law, to legal  
3 aid, to women with disabilities, so preparing briefing notes and making  
4 recommendations, which the Deputy Minister would then take forward to various  
5 government departments.

6                   **MS. GILLIAN HNATIW:** And I understand one of the first tasks you  
7 were asked to do at the Women's Directorate was to organize a conference. Can you  
8 remind us of the title of that conference?

9                   **DR. DEBORAH DOHERTY:** Yeah, the only reason I mentioned it  
10 is because the conference was called "wife battering". It was a three-day -- just to show  
11 the evolution of the language into wife assault, domestic violence, intimate partner  
12 violence, and so on over the years.

13                   **MS. GILLIAN HNATIW:** And we'll return to that, but so to be clear,  
14 in 1985, you were asked to organize ---

15                   **DR. DEBORAH DOHERTY:** Wife battering.

16                   **MS. GILLIAN HNATIW:** --- a conference on wife battering.

17                   **DR. DEBORAH DOHERTY:** Yeah, sorry.

18                   **MS. GILLIAN HNATIW:** And then in 1989, you became the  
19 founding executive director of the Public Legal Education and Information Service out of  
20 New Brunswick, which I'll refer to as PLEIS. And could you tell us about what that role  
21 involved?

22                   **DR. DEBORAH DOHERTY:** That involved creating access to the  
23 justice system for the public, and the way that we tend to do that is through the creation  
24 of plain language or easy to understand resources. And again, we try to look at who are  
25 the most vulnerable, are there any special things we have to do to make access for  
26 abused women, for rural folk, for persons with disabilities. So there's always that caveat  
27 that it's not just the law and putting that in front of people. It's what are their lived  
28 realities and what barriers need to be removed in order for anyone to have access to

1 justice.

2 **MS. GILLIAN HNATIW:** And I believe you're in that role for 31  
3 years and that you just retired earlier this spring; is that right?

4 **DR. DEBORAH DOHERTY:** Yes, a few months ago, yeah.

5 **MS. GILLIAN HNATIW:** Okay. And so in the development of  
6 these materials, you would sometimes do something called field testing with focus  
7 groups; is that correct?

8 **DR. DEBORAH DOHERTY:** A technique to make sure that the  
9 materials that we were developing about the law were plain language and easy to  
10 understand, we would do field testing. So we'd have focus groups and we'd go over the  
11 materials with the appropriate target audience representatives to see if they understood  
12 it.

13 For example, we were testing a sexual violence with teens, and one  
14 of the things we gave some statistics, like, three in six teens have -- in a secondary  
15 school have experienced sexual touching, or whatever, and so we were asking does  
16 that make sense? Is that an important statistic? And the response was, what's a  
17 secondary school, you know. So it was, like, okay, let's take that out of the resource  
18 material and call it high school, you know.

19 So, yes, we did a lot of field testing of our materials. And often,  
20 when it was general, what do women with disabilities require and so on, we would, you  
21 know, try to have women with disabilities come and tell us. We sort of like participatory  
22 action research. So in that sense, we were conducting qualitative research and that's  
23 when I was invited to join the Family Violence on the farm and in Rural Community  
24 research team because we were putting so much effort into trying to understand the  
25 needs, the law information needs, the barriers and how to reach rural women.

26 **MS. GILLIAN HNATIW:** M'hm. And so while you were engaging in  
27 these field testing participatory studies, were there sort of patterns of information that  
28 you started to identify that you had not necessarily been looking for or that started to

1 come through in different legal subject areas?

2 **DR. DEBORAH DOHERTY:** Yes. You know, we didn't go in  
3 saying rural women experience this, tell us about what you experienced. It was always  
4 what do you experience, what should we know, how can we help make a difference,  
5 what would improve your access. So hearing about domestic violence and some of the  
6 barriers that women faced, the fear of disclosure, the fact that there were firearms in  
7 rural homes, the extent to which people talked about addictions and serious drinking  
8 and things of that, as exacerbating the situation, we didn't go in and say, "Does your  
9 partner drink a lot?" I mean, we said, "What is it about, you know, your rural situation  
10 that maybe makes you more fearful?"

11 **MS. GILLIAN HNATIW:** M'hm.

12 **DR. DEBORAH DOHERTY:** And then we would hear things like  
13 because the weekends is for drinking, and when he drinks, he reaches a threshold, and  
14 when he reaches that threshold, he says he's going to commit suicide, and he might  
15 take me with him. So, yes, it was -- things began to emerge and these patterns became  
16 quite solidified that, you know, we should get some additional research funding and  
17 actually focus on those as research issues.

18 **MS. GILLIAN HNATIW:** And so you mention that at some point  
19 you received an invitation from Dr. Jennie Hornosty at UNB to be involved in a research  
20 study that she was planning. Did I hear that correctly a moment ago?

21 **DR. DEBORAH DOHERTY:** At that time ---

22 **MS. GILLIAN HNATIW:** M'hm.

23 **DR. DEBORAH DOHERTY:** --- there were five domestic violence -  
24 - they were calling them family violence research centres established by the federal  
25 government across Canada, and Jennie was the chair of the Family Violence on the  
26 Farm and in Rural Communities team. And she was starting a team to do research,  
27 SSHRC-funded research out of the Muriel McQueen Fergusson Centre. And so she  
28 said, "All of this research you're doing, it's so important. You know, you should join our



1 team and we can get more leverage for funding for dissemination of findings and so on,  
2 if we work together." And so the team involved other people too. There was a police  
3 officer, an RCMP officer, myself, a farm woman, a social worker, and so a group  
4 reviewing the questions and having input into the development of the research  
5 framework.

6 **MS. GILLIAN HNATIW:** And so just to make sure I've heard this  
7 correctly, Dr. Hornosty?

8 **DR. DEBORAH DOHERTY:** Hornosty, yeah.

9 **MS. GILLIAN HNATIW:** Hornosty. I apologize to Dr. Hornosty.  
10 Dr. Hornosty was asked -- was one of five individuals who were across the country who  
11 was ---

12 **DR. DEBORAH DOHERTY:** The team, they had different names in  
13 different centres, but the Muriel McQueen Fergusson Centre was the one here -- here,  
14 I'm not in New Brunswick anymore -- the one in the Atlantic.

15 **MS. GILLIAN HNATIW:** Right.

16 **DR. DEBORAH DOHERTY:** Yes, she was the chair of that team,  
17 so she was charged with finding community, people and research -- topical experts on  
18 different aspects of the research, and so that came together. And when we started  
19 holding our meetings, the type of research that we did initially was qualitative.

20 **MS. GILLIAN HNATIW:** Okay.

21 **DR. DEBORAH DOHERTY:** So we went out and said tell us your  
22 experience, and we did focus groups all over New Brunswick and some in PEI.

23 **MS. GILLIAN HNATIW:** So she was the chair and she invited you  
24 to be part of the group and you designed this qualitative research study ---

25 **DR. DEBORAH DOHERTY:** Yes.

26 **MS. GILLIAN HNATIW:** --- is that correct? So could you tell us a  
27 little about how that study worked in first incident? Actually, let me stop myself there for  
28 a moment.

1   You said that this was something that was happening  
2 at that time, and I just wanted to confirm what time that would have been, approximately  
3 what year this ---

4   **DR. DEBORAH DOHERTY:** That we began doing that research?

5   **MS. GILLIAN HNATIW:** Right.

6   **DR. DEBORAH DOHERTY:** In the mid-90s.

7   **MS. GILLIAN HNATIW:** Okay. And so tell us about how you  
8 designed that research and how it was carried out.

9   **DR. DEBORAH DOHERTY:** Well -- and I sort of mention this so I  
10 don't -- hate to be redundant, but we've had transition house staff and various frontline  
11 domestic violence workers involved as well, so they helped to determine questions that  
12 we could ask to bring out information about the experience of abuse in a rural setting.

13   So we went -- we started holding focus groups and I must say  
14 initially nobody wanted to come to the focus groups. And we had different mechanisms  
15 like a toll-free number with posters and "Have you experienced domestic violence? Do  
16 you live in a rural community? We'd like to hear your stories or experience to help  
17 prevent other people, other women from going through this".

18   And it would be like okay, it's been two months and we have two  
19 people. What's wrong?

20   And that's where we first kind of started learning the -- some of the  
21 unique aspects about rural life and we were told, well, women don't want to come out  
22 because they're fearful that you're inviting them to a session to demonize their men and  
23 that there's a lot of stigma against people in rural communities as being country  
24 bumpkins and sort of they need to be told what to do and how to do it. And a lot of  
25 women were telling us that -- you know, as we got started that they had concerns and  
26 wouldn't leave because of their pets. If they did, he'd shoot the dog or beat the pony or,  
27 you know, do something of that nature.

28   So you know, it took different strategies. You've got to go, hold a

1 town hall meeting, do this, do that, other things that might encourage participation.

2 And eventually we did, but all the way along we learned to ask,  
3 “What do we need to do?” and not try to assume that the techniques that were used in  
4 larger urban centres would work with rural folks. And where we held it, you know, don’t  
5 hold it in a -- don’t hold it in a mental health facility. It has such a stigma because my  
6 partner constantly says “You’re crazy. If you ever leave me, no judge would ever give  
7 you custody”, so I don’t want to be seen parked in front of the mental health centre.

8 So it was like, okay, well, how about we hold it at the community  
9 college or something. Yeah.

10 So it was a learning curve for us. We didn’t go in there with -- I  
11 mean, we did have some expectations that lack of transportation, lack of childcare and  
12 certain things would act as barriers and, indeed, they do. But we didn’t start by does he  
13 kill the dog, does he do this. These are things that that’s brought up to us as a reason  
14 why somebody might stay and put their own life in jeopardy, their love of their animals  
15 who are as dear to them as their kids in some instances.

16 **MS. GILLIAN HNATIW:** So these were things you learned over  
17 time. It sounds that as you adjusted your techniques and your approaches that you  
18 began to have focus groups where you would collect these qualitative information about  
19 those experiences.

20 I understand that in 2008 you, along with Dr. Hornosty, published  
21 this -- the results of your research and I’ll ---

22 **DR. DEBORAH DOHERTY:** There is a little break.

23 Initially, the research we were doing was funded and as we wrote  
24 papers and articles, Jennie and I travelled around Canada. We even went to Greece --  
25 that was a perk -- to an international conference on domestic violence.

26 So we started to go around and say this is what we’re finding and it  
27 was ground-breaking at the time. There was very little, if any, research on domestic  
28 violence in a rural context, you know, so really, as it went around the Advisory Council

1 on the Status of Women arranged for four or five of the presentations around New  
2 Brunswick to be in French, like French simultaneous translation, and there was a lot of  
3 recognition that this is -- this is new.

4 And we were encouraged to look for funding to explore specifically  
5 the firearms, but when we approached the Canadian Firearms Prevention Centre, I  
6 think it was called at the time -- it's now just -- I shouldn't say just. It's now a program,  
7 but it was an independent centre at the time. They said we need this information.  
8 There is nothing available for us, primary data in Canada, on domestic violence firearms  
9 victimizations and misuse in a rural community.

10 And so that's who funded the next portion, which became the paper  
11 that was published in 2008.

12 And we threw in the animal. We wanted to look at the animals.  
13 They were well, okay, look at the animals, but we want you to look at firearms  
14 specifically. And so it was called "Family Violence on the Farm and in Rural  
15 Communities", and it was a look at firearms and pet abuse and ---

16 **MS. GILLIAN HNATIW:** So it sounds like between when you  
17 began this research and the mid-1990s until the publication of this paper in 2008 there  
18 was multiple stages of the research and sort of multiple phases of the work that you did  
19 with Dr. Hornosty.

20 **DR. DEBORAH DOHERTY:** I wear hearing aids and there's some  
21 feedback, so I didn't catch that full question.

22 **MS. GILLIAN HNATIW:** I'm just confirming that I -- as -- what I  
23 understand from what you've said is that between 1990 and 2008 when the paper was  
24 published that there was multiple stages and phases of this research that you  
25 conducted.

26 **DR. DEBORAH DOHERTY:** Yes, and the paper that came out in  
27 2008 was a two-year contract to create this, to investigate, examine and create this  
28 report, which also included sharing potential recommendations for how to eliminate

1 domestic violence and prevent further occurrences and so on.

2 **MS. GILLIAN HNATIW:** Thank you.

3 Before we dive deeper into what you learned from this research, I  
4 want to sort of finish walking through some of your career experience and expertise.

5 In addition to the role you played at PLEIS for that 31 years, I  
6 understand there was also a two-year secondment as Executive Director to the Muriel  
7 McQueen Fergusson Centre for Family Violence Research. Is that correct?

8 **DR. DEBORAH DOHERTY:** Yes.

9 **MS. GILLIAN HNATIW:** And that was from 2001 to 2003?

10 **DR. DEBORAH DOHERTY:** Yes.

11 **MS. GILLIAN HNATIW:** And during your time at the Centre, you  
12 were involved in putting together something called the "Workplace Violence Toolkit".

13 **DR. DEBORAH DOHERTY:** One of many initiatives. There were  
14 multiple things going on, and I seem to be asked to sit on a lot of committees.

15 So yes, that was one of them.

16 They -- turning workplaces into resources for victims, it made a lot  
17 of sense and I think perhaps my contribution was the emphasis on not only should a  
18 human resource officer be able to take an abused woman whose domestic violence is  
19 following them into the workforce and say here's a fact sheet, here's the things that can  
20 help you define if what's happening to you is abuse, and here's how we can help you.  
21 We can walk you to your car if you stay past 5 o'clock at night or whatever.

22 But also, I call it walk the walk and talk the talk. If a workplace is  
23 going to try to be a source of support and empowerment to abused women, it can't be  
24 abusing its own employees. So supervisors can't use techniques that are -- you know,  
25 to discipline someone, you humiliate them. Well, that's what he's doing at home to --  
26 you know, you don't do that at work.

27 So that was part of it, being very careful to -- what kind of programs  
28 could be put in place to make sure that there's training for the work, for the supervisors

1 and management and co-workers and so that there's a respectful environment that is  
2 non-violent in nature.

3 **MS. GILLIAN HNATIW:** And the -- some -- do I correctly  
4 understand that some of the concept behind that program is that a workplace is a  
5 potential location of interaction?

6 **DR. DEBORAH DOHERTY:** Absolutely, yeah. That -- and myself,  
7 particularly, in the case of rural women, that may be one of the few places where he's  
8 not looking over her shoulder. So yes, getting information and support and potentially  
9 resources and so on was part of that initiative.

10 And it still goes on to this day. I was saying a couple of years ago it  
11 got a refresh because it was 10 years or so. So the look of the website and so on was  
12 refreshed and made a little more modern and responsive. But it's essentially the same  
13 program, just made easier to access on mobile devices and so on.

14 **MS. GILLIAN HNATIW:** And in 2002, I understand you helped to  
15 found the New Brunswick Silent Witness Project. Could you tell us about that as well?

16 **DR. DEBORAH DOHERTY:** Yeah. Yes, because it's really  
17 important to my understanding of rural and the differences. The Charlotte County  
18 Domestic Violence Prevention Committee in southern New Brunswick, they went to a  
19 conference in Maine. So these committee members were invited and went to this  
20 conference, and at the conference were silhouettes, 30, 40 silhouettes, red, wooden,  
21 and they stand. And, you know, can you imagine 40 red silhouettes, and each one of  
22 them was a woman who had lost her life to domestic violence and on her chest was a  
23 shield that said briefly what had happened.

24 And they borrowed the silhouettes for a conference in New  
25 Brunswick, and people were reading the silhouettes from Maine and saying, "Where are  
26 the Canadians?" "Where are the Canadians?" We're saying, "Well, yes, you're right.  
27 There should be silhouettes for the Canadian women who have lost their lives to  
28 domestic violence."

1                   And so this committee formed, the New Brunswick Silent Witness  
2 Committee, and have been doing research for nearly 20 years. Had no idea. I said my  
3 contribution will be the research. We don't -- I mean, people would say, contact us and  
4 say, "My loved one was killed by her partner. We want to do a silhouette." But then we  
5 would find out he was never charged or he wasn't convicted. So it had to be some of  
6 the parameters that it would be, there was a confirmed murder/suicide, or there was a  
7 conviction in the courts, or even -- you know, we had the discussion in the first 10 years  
8 there were three that were not criminally responsible. Are we going to include them?

9                   **MS. GILLIAN HNATIW:** So I just want to be clear, Dr. Doherty,  
10 when you say that you led the research for the Silent Witness Project, what was the  
11 purpose of that research? What were you researching?

12                   **DR. DEBORAH DOHERTY:** Well, the purpose -- sorry, I should  
13 have just said, the purpose came out of the States, which had initiated in 1990, the  
14 domestic violence or the Silent Witness Project, and then it spread across the U.S. And  
15 it was to remember the women who lost their lives, to honour the women who had lost  
16 their lives, and to create action to address, you know, like proactive strategies to change  
17 domestic violence. So those were the... Yes, bring me back.

18                   **MS. GILLIAN HNATIW:** No. So you -- do I correctly understand  
19 that you were researching who those women were? In order to create these memorials,  
20 you first needed to have a list of names to memorialise?

21                   **DR. DEBORAH DOHERTY:** Yes. So I was -- looking back to  
22 1990, we said might as well go back to -- we're a small province in Nova Scotia, there's  
23 not -- or in New Brunswick, so you know, let's go back to 1990. And so yes, I was doing  
24 the research. We were looking at court documents, going into archives. There weren't  
25 so many murder/suicides back in 1990; there's a lot now. But as I was gathering the  
26 information, I would look at the transcripts from the trial, victim impact statements, all  
27 the media stuff that was filed at the time, and so on, and as I gathered the information it  
28 was yes, there'll be a red wooden silhouette and it'll be for this woman. And we named

1 the names because the families participate with us.

2 But as I began to say, we have now looked at 25 cases of women  
3 who lost their lives, and 56-percent of them were shot with hunting rifles or shotguns.  
4 And then the national data, which when Ontario published its data, it very much  
5 matched the national because of the big population size, but it was like 20-percent were  
6 killed with shotguns and hunting rifles.

7 And so the whole nature of intervention and what can we do, when  
8 the Death Review Committee came out in Ontario 2003 to -- I have it here for you, it  
9 was an eight year period, they talked about the risk factors. There's 32 risk factors.  
10 And here is a graph showing the top ten. And so that means all -- of all the women who  
11 were killed what were the top ten risk factors that were present or clustering around that  
12 death? And I look it over, and I go, "Oh my god, the top ten don't even include  
13 firearms." It's not that firearms isn't a risk, it wasn't the top ten. But in New Brunswick,  
14 when I looked at all the deaths and put what risk factors, the known, the types of risk  
15 factors, the ones that clustered as the top ten were different.

16 So a risk factor is a risk factor, but it's the clustering of them that  
17 tells you something's going on. We can't treat or try to find solutions and resources to  
18 deal with New Brunswick and rural communities that would work in large urban centres.  
19 The -- 70-percent of the New Brunswick women were killed in communities of less than  
20 10,000, and in Ontario, 55-percent of the women were killed in communities of 55,000  
21 to a million. It's -- you know, as the women here would say, a hunting rifle is not the  
22 weapon of first choice to get at your wife in Downtown Toronto.

23 So that's when we began to know, you know, from the analysis of  
24 the data collected from the women who had been killed, the women -- the New  
25 Brunswick Silent Witness Program, that you know, I thought I was on two tracks. I'd  
26 always say one was doing the intimate partner violence research and the other was  
27 doing the domestic homicide, and it was no, those have to be on the same track  
28 because, you know, it's not two different things, it's -- finding out about rural



1 communities was important for the domestic homicide work as the domestic violence  
2 work.

3 **MS. GILLIAN HNATIW:** So there's a couple of things I want to  
4 come back and make sure I correctly understood. You made passing reference to the  
5 Death Review Committee in Ontario. And could you just clarify what exactly that  
6 committee is and does?

7 **DR. DEBORAH DOHERTY:** Sorry, sorry, I didn't catch it.

8 **MS. GILLIAN HNATIW:** The Death Review Committee in Ontario -  
9 --

10 **DR. DEBORAH DOHERTY:** Yes.

11 **MS. GILLIAN HNATIW:** --- you mentioned it, but I just wanted to  
12 make sure that everybody knows what that committee is and what it does. And ---

13 **DR. DEBORAH DOHERTY:** These are committees that were set  
14 up. There's one -- I certainly wouldn't say there's one in every province. They're more  
15 and more being set up in every province, but a lot of provinces do have review... So it  
16 could be -- it's usually overseen by the Coroner's Office, you know, and it's ---

17 **MS. GILLIAN HNATIW:** And are they reviewing particular kinds of  
18 deaths? What do those committees review?

19 **DR. DEBORAH DOHERTY:** These are domestic violence,  
20 homicide or domestic violence fatalities that they would call them, but they tend to be  
21 the domestic deaths. It's not... And some of them have, you know, like if children,  
22 they're called... Myself, in terms of the research, I always say I'm doing big, sorry,  
23 femicide research. So my focus had been on women being killed, but some of the  
24 death reviews of course do look at and include a neighbour was killed, a grandmother  
25 was killed, there were other -- the children were killed, a father-in-law was killed.

26 So they will look, but not necessarily do a comprehensive analysis  
27 of all the deaths but they might choose three that seem rather exemplary of certain  
28 types of risks.

1                   **MS. GILLIAN HNATIW:** And so these provincial death review  
2 committees would sort of aggregate the risk factors identified in their reviews, and when  
3 you were seeing the risk factors that came out of Ontario and comparing them to what  
4 you were learning for -- from your research for the silent witness death, you were  
5 noticing, you know, disparities in those risk factors between ---

6                   **DR. DEBORAH DOHERTY:** Yeah.

7                   **MS. GILLIAN HNATIW:** --- urban and rural centres.

8                   **DR. DEBORAH DOHERTY:** One of the number one risk factors in  
9 Ontario was that the deaths occurred at or after separation, and because that was so  
10 prevalent in everybody who was killed, the recommendation made around that finding  
11 was we have to do public education and create resources to promote emergency  
12 leaving and staying safe after you leave; that's the focus.

13                   Yet, when we looked at the New Brunswick data, it was about two-  
14 thirds of the women were killed in intact relationships. So who knows what they said  
15 that night they were killed. Maybe they did say, "I'm moving out tomorrow"; you know,  
16 we'll never know. But it seemed that for a rural context, we can't just promote leaving  
17 when women are saying, "Strategically I'm staying; it's safer for me to stay because I  
18 can read the look in his eyes, I can tell when he's had too much to drink." You know, so  
19 yes, we don't go, you know, with a lot of rural women will go for three days and then go  
20 back, and they'll do that when necessary. But there's a lot of victims who feel safer  
21 because they can read the situation. If they leave, what's he doing? Where is he?  
22 When will he come? Will he come in the dark with a rifle? It's scarier for some women  
23 to try to leave and take action like that.

24                   So we're saying yes, women, you know, 30-some percent of the  
25 women in New Brunswick were killed at or after separation and emergency leaving is  
26 important, but what would happen is people would say -- I was at a conference and  
27 they'd say, "Everybody knows the most dangerous time is after separation." And, not  
28 necessarily, you know. We need resources to promote safer staying. Not that we want

1 to promote staying, but if a woman chooses, strategically, to mitigate her risk and to do  
2 so she stays in the situation, then we need some resources to support her. It shouldn't  
3 be leave or nothing, you know. So that's how I came to start developing the safety  
4 planning resource called Staying Safer.

5 **MS. GILLIAN HNATIW:** And is that what led to the development of  
6 the app?

7 **DR. DEBORAH DOHERTY:** Yes.

8 **MS. GILLIAN HNATIW:** One of the last things I thought we would  
9 talk about before I officially ask the Commissioners to qualify you as an expert on all of  
10 the things that we've talked about, and all of the other parts of your career that we  
11 probably won't have time to talk about.

12 I understand that in recent years you oversaw the development of  
13 an app. Could you tell us about that?

14 **DR. DEBORAH DOHERTY:** Yeah. So the idea of doing, you  
15 know, the Safer -- Staying Safer and, like, a guide, seemed like just one possible way to  
16 help support rural women who weren't staying -- weren't leaving. And Victim Services  
17 approached public -- approached me and said, "We've heard you give presentations."  
18 And that's exactly what's happening with our Victim Services staff; we want them to help  
19 women where there's been charges laid, so victims of domestic violence who are in the  
20 criminal justice system, but so often after the charges have been laid and part of the no-  
21 contact provision is stay away order, the women will approach Victim -- "Please, could  
22 you ask the judge to drop that stay-away order? He's apologized; we're getting back  
23 together." And if they did, there was nothing that Victim services could do. They could  
24 help them create a safety plan to leave in an emergency, but they had no tools or  
25 resources to help those women who were staying.

26 So we created first the handbook on leaving abuse, strategies for  
27 staying safer, and then the idea came that why not create an app that could be used on  
28 a mobile device and have an interactive service map with victims -- with whatever;

1 Victim Services, Mental Health, Addiction Services and so on, that she could sign in  
2 confidentially, have ways to protect her safety and anonymity and look at the services  
3 because on the map there'd be a little -- some little mark that you'd open and you could  
4 read about, oh, that's just the service that Moncton's, you know, Mental Health -- and  
5 get in touch.

6 Of course, you want people who are using apps and things of that  
7 nature to stay safe and him not find it. But that was the -- they thought that was perfect  
8 for their staff because it could be used as experts, their staff who are professional, could  
9 walk women through and help them. Or it could be a self-directed tool, so the woman  
10 could do it on her own when she has the right time and place to look at the phone. And  
11 then save all the addresses or the emails and so on.

12 **MS. GILLIAN HNATIW:** So the crux of the tool is that it would be  
13 something available to women who remain in the home, despite the violence because,  
14 as you say, it's a decision that they've made to mitigate their risk at this point in time.

15 **DR. DEBORAH DOHERTY:** I mean, it's a tool that could be used  
16 by anybody, and when we were disseminating it in New Brunswick to the service  
17 providers, I actually had an CMP officer say -- contact me and say, "I can use this in  
18 Victim Services with a lot of our victims, it doesn't even necessarily have to be an  
19 abused woman.

20 But we took the death review in Ontario had 32 risk factors and  
21 then they said these were the top seven. I looked at all of the different death reviews  
22 and then articles in the States, and I chose sixteen risk factors that I thought most  
23 exemplified things that a woman in a rural setting might want to address. And it wasn't  
24 just firearms. It was things like low self-esteem.

25 You talk about women putting their ducks in a row. It's pretty hard  
26 to leave when I think I'm worthless. So maybe counselling and certain types of support  
27 that would have her feeling empowered and more able to take that step to leave the  
28 abuse.

1                   So it's not your typical 32 factors, some of the factors are, like, you  
2 know, "Do you feel you're worthless and who would care? You can do this, this, and  
3 this," and they could explore different ways of getting assistance.

4                   **MS. GILLIAN HNATIW:** Okay, thank you.

5                   This feels like an appropriate time to ask Commissioner  
6 MacDonald, that he qualify Dr. Doherty as an expert in gender-based violence, intimate  
7 partner violence, family violence, and all the risk factors associated particularly with  
8 intimate partner violence in rural communities.

9                   **COMMISSIONER MacDONALD:** Yes, by all means.

10                  **MS. GILLIAN HNATIW:** Thank you.

11                  **COMMISSIONER MacDONALD:** Dr. Doherty, I'm pleased, on  
12 behalf of the Commissioners, to qualify you accordingly.

13                  Thank you.

14                  **--- EXAMINATION IN-CHIEF BY MS. GILLIAN HNATIW:**

15                  **MS. GILLIAN HNATIW:** So I want to come back to the risk factors  
16 that you alluded to and mentioned a number of times I your testimony already, but I just  
17 want to just start to clarify some of the terminology. One of the first things we talked  
18 about was the conference you put together for wife battering; we've also heard the  
19 terms domestic violence, intimate partner violence, family violence. I just wondered if  
20 you could speak to whether or not those concepts are interrelated; is it an evolution of  
21 language, or what are we talking about here?

22                  **DR. DEBORAH DOHERTY:** Yeah. I heard earlier this morning the  
23 presenters were talking about gender-based violence, and they gave a definition and  
24 they had additional definition that I think Carmen might have done for them, and it was a  
25 definition that was international in scope. So I don't want to throw in any -- but the the  
26 violence that is directed at an individual because of their gender was sort of the gist of it.

27                  And the only thing that I would add that they didn't come out and  
28 say specifically, is that the vast majority of gender-based violence is against women,

1 women and children. Not necessarily, but that's the focus.

2                   And I think over the years there was wife battering and wife assault,  
3 family violence, domestic violence, intimate partner violence, and it's hard to keep up  
4 because those forms of -- those difference in language still exist. So that, you know,  
5 there is -- the federal government might say you -- "Would you do a pamphlet on family  
6 violence in Aboriginal communities and protection orders?" Well, the legislation was on  
7 protection orders in the Aboriginal communities, and it was family violence order,  
8 whereas a lot of other legislation now has changed to intimate partner violence.

9                   And I think any of these forms of violence, let's throw the net, cast  
10 the net and try to look as much as possible to understand what the risks are and how  
11 we might make a difference. The thing is, though, that Statistics Canada might have --  
12 release a report, and the report in the early days, when we were doing wife battering,  
13 would talk about family violence, and it would be of men killing their spouses. So it  
14 wouldn't even be common-law partners killing their common-law -- or boyfriends killing  
15 their girlfriends, it was very narrow. And one of the -- another thing that I saw as a huge  
16 difference was the number of women who were killed in common-law relationships.

17                   So I think it was in New Brunswick about 69-percent were in  
18 common-law relationships that -- and it's high, higher and there's research across the  
19 U.S. and Canada shows that women living in common-law, especially at separation, the  
20 lethality threat is great. And 15 years ago, we wouldn't have even caught that because  
21 we wouldn't even be looking at common-law spouses or partners.

22                   **MS. GILLIAN HNATIW:** You would have been focussed on marital  
23 relationships, or official marriages; is that correct?

24                   **DR. DEBORAH DOHERTY:** Yes. And now they've begun to  
25 change, and certainly the data seems to include both married and ex-spouses and  
26 common-law and ex common-law.

27                   **MS. GILLIAN HNATIW:** And so, you know, loosely termed, all of  
28 these terminologies refer in some way to the violence between individuals who have

1 some sort of personal or intimate relationship, and sometimes referred to as private  
2 violence, but you know, often it sounds like your research really focussed on violence  
3 with -- within homes or within families or within ---

4 **DR. DEBORAH DOHERTY:** Yeah, the nature ---

5 **MS. GILLIAN HNATIW:** --- intimate relationships.

6 **DR. DEBORAH DOHERTY:** --- of the type of violence has also  
7 evolved and grown over time. So I mean, emotional, physical, sexual. Is it mental or is  
8 it emotional, or is it -- I mean, some of that conversation has gone on. There would be  
9 chemical abuse, which typically meant misuse of medications, not allowing a person to  
10 have the medications they need or forcing them to take medications that would be  
11 harmful to them and stuff. Religious, spiritual. So the evolutions of the types of  
12 violence our understanding has evolved over time, but in terms of what I have looked at,  
13 it's against women, with women as the victims.

14 **MS. GILLIAN HNATIW:** And I think you anticipated there my next  
15 question, which was just to confirm that when we're talking about this intimate partner  
16 violence we're not strictly talking about physical violence, but also all the other forms of  
17 abuse that you mentioned, and that there's -- there can be abuse within a relationship --  
18 -

19 **DR. DEBORAH DOHERTY:** Yeah.

20 **MS. GILLIAN HNATIW:** --- even at times when there's ---

21 **DR. DEBORAH DOHERTY:** Yeah.

22 **MS. GILLIAN HNATIW:** --- sort of acute ---

23 **DR. DEBORAH DOHERTY:** Yeah.

24 **MS. GILLIAN HNATIW:** --- incidents of physical violence.

25 **DR. DEBORAH DOHERTY:** We've been talking about the signs of  
26 -- you know, partner violence or family violence for so long we at times tend to skip over  
27 what they are, but you know, there's always people coming up who have not been  
28 involved in this area. So I think to give those definitions and define them. Because

1 even now I know some of our research would be, you know, "Do these things,  
2 psychological, emotional, do they -- have they happened to you?", you know when  
3 we're doing individual, and a woman might say, "No, no, I'm -- I've not been sexually  
4 assaulted because I just gave in and he, you know, I mean, yeah, but I agreed to it and  
5 I'm his wife, but I didn't want to and he had been forcing me, so I wasn't sexually -- I'm  
6 sexually assaulted." Not knowing that there's a thing called consent, you know, and...

7 So it's a way to help promote a greater awareness of what some of  
8 those risk factors look like and people will kind of say, "Oh, that's not me, that's not me."  
9 And indeed, it could be.

10 **MS. GILLIAN HNATIW:** Right. Okay, well let's move on to a  
11 discussion of these specific risk factors that -- or at least some of the specific risk  
12 factors that you -- that emerged and you identified through the research you did over all  
13 those years. And I'd like to start by discussing what's broadly defined as cultural  
14 responses to domestic violence or intimate partner violence in more rural communities.

15 And actually, maybe before we even do that, could we talk about a  
16 definition of what "rural" means in this context? I think I heard you say earlier that it was  
17 communities of less than 10,000. How did you understand and define that in your  
18 research over the years?

19 **DR. DEBORAH DOHERTY:** When we're doing rural and we're  
20 doing qualitative research we were able to ask people to say, "What does rural mean to  
21 you, with your community?" And people have an intuitive sense of whether they live in  
22 Toronto, you know, a big... So we wouldn't put parameters "Is your community less  
23 than 10,000?", or whatever.

24 I mean, when we were doing the quantitative research and people  
25 were filling in a survey, if they lived in Bathurst and the population was 14,000, then  
26 we'd say that they were in an urban community. And then I'd go to conference in British  
27 Columbia, and they'd say, you know, "A town of 14,000, you're calling that urban?" We  
28 didn't want to limit. We wanted women to tell us what was rural to them.



1                   Typically, I mean there's a whole cultural and social values that are  
2 associated with rural life, but fewer services, less access to things like transportation,  
3 childcare, employment training, things like that, which sound kind of negative, but I do  
4 have a -- it's a long list that was sort of here's the things that are wonderful about rural  
5 life. There's you can go outdoors and there's sunshine and fresh air, and there's -- your  
6 neighbours will -- they wave at you if you can see them. But they'd do anything to  
7 support you and help you and whatever.

8                   So it's almost ironic because you know you have "What do you like  
9 best about rural community?" "It's small, it's -- we understand each other, we support  
10 each other, we help each other." And then "As a victim of abuse, what's one of the  
11 things you have to overcome?" "The busybody factor. That everybody knows your  
12 business and is telling other people. And you know, I want help, but I don't want to be  
13 shamed", and whatever.

14                   So yeah, it's -- there is no definitive answer and it was easier to  
15 leave very broad for people to sort of self-define, are you in a small town, rural area  
16 when we were doing qualitative research.

17                   **MS. GILLIAN HNATIW:** That feels like a good segue into a  
18 discussion of the cultural responses I mentioned earlier.

19                   Could you articulate for us some of the issues in terms of attitudes  
20 towards gender-based violence or intimate partner violence that you identified through  
21 your research that you considered to be cultural responses or cultural barriers that  
22 served as a risk factor or a barrier of some sort?

23                   **DR. DEBORAH DOHERTY:** I'm not sure I heard the whole ---

24                   **MS. GILLIAN HNATIW:** The cultural responses ---

25                   **DR. DEBORAH DOHERTY:** Yes.

26                   **MS. GILLIAN HNATIW:** --- what you've called cultural responses.

27                   **DR. DEBORAH DOHERTY:** Okay. Do you want me to include the  
28 firearms, the gun culture in that, or...?

1                   **MS. GILLIAN HNATIW:** Perhaps we can start with a high-level  
2 discussion of some of the cultural responses.

3                   **DR. DEBORAH DOHERTY:** Okay. I did when I mentioned the  
4 fresh air, and so I'd forgotten about the social -- the cultural norms and values, that  
5 those value systems are much more coherent and stronger in rural communities, partly  
6 because people do know one another and they adhere to similar, if not same, value  
7 system. And that value system can be quite patriarchal so that the role of women in the  
8 family in particular where we were focusing can be that women are subservient,  
9 women's job is to create harmony in the household, to have meals ready and, you  
10 know, take care of children. And so there was a very set of traditional social value  
11 consensus. Not any kind of essentialism to rural life or rural women, but this ---

12                   **MS. GILLIAN HNATIW:** What about that concept of don't ask,  
13 don't tell? It's something I've seen referenced in your research.

14                                   Is that something that you identified as a cultural response?

15                   **DR. DEBORAH DOHERTY:** Well, yes. Women would be -- you  
16 know, you have to keep the peace. I'm just trying to keep it -- you know, and that was  
17 their role.

18                                   And I've interviewed women who've -- they want to get -- 10 years  
19 of abuse and whatever and finally they're going to leave and they have to get legal  
20 advice about having custody of their children and they might be told, "My god, what  
21 you've experienced over the last 10 years. When we go to court, don't mention it  
22 because what judge is going to think you are a good parent or you -- you know, if you  
23 say for 10 years I did this, I was abused in this way or that way, they may -- you know,  
24 just don't talk about it".

25                                   So it's like the very things I did to be a good wife, a good mother, a  
26 good rural woman, now they're saying if you mention it in court, nobody's going to  
27 believe that you did -- you know, that you don't have mental health problems, that --  
28 because he keeps saying I'm crazy or, you know.

1                   So yes, those social values would certainly impact on help seeking,  
2 on, you know, the way one would present themselves on their feeling of self-worth  
3 because if things go down -- go wrong and you're not keeping harmony in the house,  
4 then you believe it's your fault.

5                   I mean, you're self blame. You don't even have to wait for your  
6 community to blame you. You're self blaming, "Oh, my god, I can't do what other  
7 women because they tell me all men act like that on a Friday night. Like why is it such a  
8 problem for you?".

9                   So those social norms and values and the types of -- well, I mean, it  
10 can be to minimize or normalize behaviour that is very harmful and then blame and  
11 shame a victim who doesn't live up to the norms.

12                   **MS. GILLIAN HNATIW:** Did those social values often also reflect  
13 on how friends and neighbours would respond to intimate partner violence?

14                   **DR. DEBORAH DOHERTY:** Yes, I believe they do.

15                   There was a provincial study commissioned by the New Brunswick  
16 government on domestic violence and one of the questions -- I mean, they were asking  
17 where people lived in a rural, urban setting and so on. And I guess the question was,  
18 would -- if you heard your neighbour being beaten and screaming, would you call the  
19 police. And it's very counter-intuitive. I would have thought that, you know, in the rural  
20 area where very close, you know, and would do anything for my neighbours, I'd call the  
21 police. But it was just the opposite.

22                   The -- in rural areas, they were less likely to involve the police.  
23 They're not going to call the police. And in an apartment in an urban area that it would  
24 be much more likely to call the -- the police.

25                   And during -- after this report had come out and one of the focus  
26 groups, I was asking, "Why do you think that is that people would call in an urban area  
27 but not rural?". And they said, "It's because who knows who's living next door to you in  
28 an apartment. I don't know, and they're screaming and stuff. I would call the police".

1 “But no, on my buddy down the road who, you know, I fish with, I hunt with, no, I’m not  
2 going to call the police and tell them his wife’s being beaten up and screaming”.

3 So yes, it does affect the ---

4 **MS. GILLIAN HNATIW:** Okay. You’ve mentioned firearms many  
5 times in your testimony so far.

6 So perhaps you could specifically address what you learned from  
7 your research in terms of guns as a risk factor in rural communities?

8 **DR. DEBORAH DOHERTY:** Yeah. When Jenn and I first started  
9 doing that research, there wasn’t a question about firearms. It just emerged out of the  
10 research from people telling us in interviews that one of the reasons, you know, I -- I’m  
11 fearful leaving is the firearms. I mean, when he says he’s -- I don’t even know if he’ll kill  
12 me, but I think he’ll kill himself and then the kids’ll blame me and the whole community  
13 will blame me, so you know, best he not commit suicide.

14 Yeah, so they started talking about the firearms in the home. Then  
15 these were all long guns, so this whole notion of -- and with the -- I should -- if I can  
16 bring in the domestic homicide research with 56 percent of the women being killed by  
17 firearms, long guns, you know, it was a feature that we needed to think about and do  
18 something.

19 We made some suggestions in our report for ways to mitigate that  
20 risk, but.

21 **MS. GILLIAN HNATIW:** Okay. And does hunting -- is that part of  
22 the story of firearms?

23 **DR. DEBORAH DOHERTY:** In terms of -- as we found out about it,  
24 there were women who were saying, “I’m fearful, and I’m more fearful when there’s  
25 serious drinking and I’m more fearful when there’s addictions and talk of suicide”, but  
26 firearms in rural communities, as we were told, have a longstanding tradition of hunting  
27 and they are thought of very positively to the extent that they’re a legal gun, they’re  
28 there for legal purposes and that kind of legitimizes or normalizes the presence of

1 firearms in the house.

2                   So if there isn't family violence, having firearms in the house is like  
3 having your baseball bat on top of the china cabinet. I mean, they were prevalent, but  
4 there was never any thought but by a lot of people that -- that they could be harmful.  
5 And certainly we started to hear about, well, that's the gun culture, you know. The men  
6 like to go out in the fall and they go to the camp and, I mean, the only moose they see  
7 nowadays is in a six-pack, but you know, the -- they still want to hunt.

8                   And hunting rifles are handed down over the generations to your  
9 grandson, you know, so they have a lot of value, a lot of positive meaning. And so  
10 there's not a lot of sympathy for people who were saying I'm fearful of that. Why would  
11 you be fearful? It's only, you know, a hunting rifle, or in PEI, a shotgun to kill birds, or  
12 get rid of the crows who are going after the crops, or, you know, something of that  
13 nature.

14                   **MS. GILLIAN HNATIW:** So women were telling you that they were  
15 fearful of the firearms in the home. Were they calling the police or other authorities to  
16 report those guns, and given the fact that they were saying they were fearful?

17                   **DR. DEBORAH DOHERTY:** One of the things we heard  
18 consistently, because -- was that don't report. Even it would take a long time for a  
19 service provider for you to feel enough trust to tell them. They felt that the police and  
20 the justice system, they didn't have enough faith or trust in going a criminal justice route,  
21 if you told and the police came and there was a firearm, even a legal firearm, but it's not  
22 -- you don't have a license. It's on top of a cabinet with the ammunition right beside it  
23 and a house full of kids and there could be then charges. It might only be an  
24 administrative charge to -- you know, you have the firearm without a license, but by  
25 telling, and if you were fearful, and they didn't find them all, and that's what the women  
26 would say, "They're never going to find them all. He's got some hidden out back.  
27 There's one on his boat. His grandpa would give him one. His best buddy down the  
28 road would give him one." It's really a fearful thing to tell the police if they come to a

1 domestic I'm fearful. Then he wouldn't know if was you that said you were fearful with  
2 the red flag legislation. Yeah, so it's very -- you think why doesn't she call the police  
3 and say there's a firearm.

4 I can't speak to illegal firearms, but there's a sense that, you know,  
5 if it's a legal firearm, it's there for legal purposes, and, you know, leave the poor duck  
6 hunters alone is what I was told at some presentations.

7 **MS. GILLIAN HNATIW:** I've heard you mention alcohol a number  
8 of times now as well, so perhaps you could discuss what you learned about alcohol as a  
9 risk factor.

10 **DR. DEBORAH DOHERTY:** Serious addictions were mentioned in  
11 the court -- so when I was looking at, you know, 25 or so cases that went to court, and it  
12 was, like, oh, that seems like a lot, and it was way more than Ontario. The addictions,  
13 yes, it figured it in terms of the silent witnesses, the women who'd lost their lives, that's  
14 become not as easy to get information since privacy laws tightened up a few years  
15 back. But definitely, there would be three quarters with some kind of serious addiction,  
16 whether it was alcohol or drugs was in association with the abuse.

17 So when women -- we'd say what makes you most fearful, it would  
18 be the firearms in the house. The drinking getting to a certain point because sometimes  
19 as a coping strategy, many of the women would adopt self harm, so they might drink  
20 too. And in fact, I know with some of the murder suicides in talking to families about  
21 whether they would be -- want a silhouette for their loved one, they'd say, "I don't know.  
22 I'm -- if it comes out that they were both drinking, which is what the coroner's report  
23 said, they were both drinking at the time of the offence, she won't seem as a worthy  
24 victim, you know." There may be -- well, that's what happens when people drink too  
25 much rather than how sad and tragic.

26 And, you know, I know some of the court case, trial materials that I  
27 would read, I'd often read the judge would say, "This was a senseless killing. We'll  
28 never understand why he killed her. This is a senseless killing." And, you know, if you

1 can believe Peter Jaffe, nothing's more predictable than a domestic homicide. And we  
2 have to find ways to make sense of the senseless if we're going to come up with  
3 strategies to predict. It's not causal. You stop drinking or you're drinking heavily it  
4 doesn't cause you, but it certainly exacerbates the situation and makes it more likely  
5 that there'll be a lethal outcome. So the firearms, the drinking, suicide, thoughts of  
6 suicide.

7                   And I think as I mentioned, it's not -- women are the best judges of  
8 their safety and what they want to do or should do to stay safe, but on the other hand, a  
9 lot of them do minimize the risk that they're in. And certainly, you know, I know one  
10 woman said she was in a common-law relationship. She had children from her  
11 previous, they were teens, two teens, and she said they would say, "Do something  
12 about the guns. He's -- you know, when he gets sad about being unemployed and  
13 whatever and takes out the guns and starts drinking, he is going to -- he talks about I  
14 should end it all. He might kill you and we don't want to lose our mother." And in that  
15 instance, she called the RCMP, and she said, "I don't want him to know." And they  
16 came, and they took the two rifles out of the basement and took them away, and it's a  
17 focus group, and she's -- that was six months ago, and he hasn't even noticed they're  
18 gone but I feel safer.

19                   And the police seem to be fearful as well, and there were a lot of  
20 mitigating actions that they would take. I'll just take the guns for a cooling down period,  
21 and I'll give them back to you in a few months, you know, when you change yourself.  
22 And one of them was an elderly couple who called the police because of a domestic.  
23 The police officer said, "Are there any firearms?" And, no, no, no firearms. And so he  
24 left. And three days later, she called, and she said, "Okay. He's sobered up and he's  
25 sorry. He can come home. But would you come over here and get our two rifles first?"  
26 And the officer in the focus group said, "So I went and got the guns that weren't there  
27 and then he went home."

28                   You know, so there's a lot of feeling that, you know, in rural

1 situations, people are not forthcoming about the firearms that are in the home. A lot of  
2 women who might go to a transition house would not -- would fill in the intake form and  
3 would not say that there were firearms in the home. And sometimes, they would say it's  
4 because what are they going to do about it? You know, nothing will happen. And even  
5 I know a domestic violence specialist had said, "It's an intake question, and we see, oh,  
6 there's a firearm in the home, but, you know, they go hunting. He's a hunter. We don't  
7 think anything of it." And yet when the police are involved and you go the criminal route,  
8 you know, as soon as that happens, as one officer said to me, you open a can of worms  
9 to all kinds of charges that could make it even worse for her when the guns are given  
10 back because it doesn't -- their confiscation didn't pass judicial scrutiny or so on so. I  
11 get off topic.

12 **MS. GILLIAN HNATIW:** No, it's okay. I think it's hard to have done  
13 as much research and have conducted as many focus groups as you have, and you  
14 seem to have a wealth of stories and experiences.

15 But I wondered if you could speak again on this notion that women  
16 are the best judge of their own safety, and that also what I heard you say emerged from  
17 your research was that many rural women chose to stay in a home with, you know,  
18 despite the presence of firearms and despite the family violence that they have  
19 experienced.

20 **DR. DEBORAH DOHERTY:** Yeah.

21 **MS. GILLIAN HNATIW:** Can you help us understand that a little  
22 bit?

23 **DR. DEBORAH DOHERTY:** It -- it's -- sometimes it is difficult to  
24 understand, and so I go back to what women told us, this is the whole participatory  
25 action, is, "What makes me feel safe is not necessarily what my neighbour would need  
26 or want to stay safe." And so there's a whole notion that we can't expect the cookie  
27 cutter approach and it'll be the same and be a beneficial or be the right way. There is  
28 no right way. There is different ways that, whether it's a professional working with a



1 client or whether it's a woman self-administering safety planning tool, really there -- you  
2 can't say "this is what -- this is what would work." I think all we can do is say "You're the  
3 expert on your own life. What would make you feel safer? If you leave, what do you  
4 think help other women who are still in this situation?"

5                   And sometimes it's -- you know, "He -- I can't access the computer,  
6 and there's some things I'd like to look up." Maybe he won't let her or she... So it's just  
7 "Maybe I need to use somebody else's computer, or have a ride, or have a babysitter."  
8 Or you know, like "What would help me feel safer isn't the police coming in." Somebody  
9 said in PEI, "If you call the police and two come, you know, you've got the whole force  
10 there", and then everybody will be blaming you for doing something that's sort of  
11 undermines the cohesion of the community.

12                   But on the other hand, what she does need might be addiction  
13 services for herself. You can't make somebody else take addiction services, but, you  
14 know, as somebody said with firearms, you know, "Not all of these men are demons." If  
15 you talk about the cavalier attitude to firearms, storage and misuse and whatever in  
16 rural communities, you're not necessarily -- I forget where I was going to go with that.

17                   **MS. GILLIAN HNATIW:** No, that's okay. I think you've shared a lot  
18 of your research and experience with us, Dr. Doherty. So just a final question: As I  
19 believe you know the Commission is tasked with making recommendations in its final  
20 report, and so I wondered if you had any thoughts or recommendations to share with  
21 the Commissioners.

22                   **DR. DEBORAH DOHERTY:** I'm just going to pull out... These are  
23 some recommendations, not all of them, but they were the more firearms related.  
24 Ensure -- our response? Okay. Ensure the risk assessment tools include questions  
25 about the misuse and abuse of firearms as well as pet abuse.

26                   And I don't think we got so much into pet abuse, but we have sort of  
27 seen that if you drill down deep enough in domestic violence situations with mass  
28 casualties, there's usually a connection. And the Latham Foundation in the U.S., which

1 promotes research, legislation and laws to recognise the link, and the link is the link  
2 between the abuse of animals and the abuse of people and domestic violence. And  
3 their latest newsletter, which I could send you if it would be helpful, talks about the more  
4 recent shootings in the U.S. that they've been able to demonstrate that at some point in  
5 the perpetrator's life he killed animals or abused or whatever animals. And they are  
6 now trying to do research going back historically to see if they can pull that out of past  
7 data, that that the animal abuse -- what was part of the whole constellation of factors.  
8 But they're saying right now from the data that they're looking at that it appears that that  
9 interconnection, not just the abuse of animals, but in domestic violence sense could be  
10 related to mass casualties. So that's another interesting point.

11                   And they also say, you know, I mean, we found that the abuse of  
12 pets and farm animals really played a role in the decision-making of the victim. So she  
13 might stay if she couldn't take the dog or if she was threatened that it would be abused  
14 or if the, you know, the kids are saying, "He'll kill it if -- look at what you've done, Mom.  
15 He'll kill the dog if we leave." So it's the intersectionality that they're promoting. If  
16 there's animal abuse there's likely child abuse, and if there's child abuse there's likely  
17 woman abuse, there's another term, you know, and that we have to see that  
18 intersection.

19                   And they have had in the U.S., just in the last few years, I think it  
20 was 36 States now have legislation to connect the -- with interconnections. So their  
21 emergency protection orders allow for, and I think a lot of ours are starting to move in  
22 that direction too, to naming pets as, you know, he can't have her pets, he can't have  
23 this; she has access to the marital home, and so on. So the stay-away orders relate to  
24 pets.

25                   But I did think it was interesting, I hadn't really thought of the  
26 connection to mass shootings until I got my newsletter by email, and I went, "Oh my  
27 heavens, that's interesting."

28                   **MS. GILLIAN HNATIW:** Okay. Well, thank you, Dr. Doherty, those

1 are my questions. Now, we will take a break. Lawyers for other parties here may have  
2 questions for you, and the Commissioners themselves may have questions.

3 Commissioner MacDonald, I don't want to pre-empt you saying  
4 we're taking a break, but that is our process.

5 **COMMISSIONER MacDONALD:** Well, yes. Thank you so much,  
6 and thank you so much so far, Dr. Doherty. We'll take a break for 20 minutes ---

7 **DR. DEBORAH DOHERTY:** Okay.

8 **COMMISSIONER MacDONALD:** --- and then our counsel will  
9 meet with counsel for the various Participants and work on some -- potentially some  
10 further questions for you.

11 **DR. DEBORAH DOHERTY:** Okay.

12 **COMMISSIONER MacDONALD:** So thank you so much ---

13 **DR. DEBORAH DOHERTY:** Wonderful, thank you.

14 **COMMISSIONER MacDONALD:** ---- and we'll have you back in  
15 20 minutes.

16 **DR. DEBORAH DOHERTY:** Okay. Thanks.

17 **COMMISSIONER MacDONALD:** Thank you.

18 **REGISTRAR DARLENE SUTHERLAND:** Thank you. The  
19 proceedings are now on break and we'll resume in 20 minutes.

20 --- Upon recessing at 3:25 p.m.

21 --- Upon resuming at 3:53 p.m.

22 **REGISTRAR DARLENE SUTHERLAND:** Welcome back. The  
23 proceedings are again in session.

24 **COMMISSIONER MacDONALD:** Thank you.

25 Ms. Hnatiw.

26 **MS. GILLIAN HNATIW:** Thank you, Commissioner MacDonald.

27 There are two Participants who have additional questions for Dr. Doherty, and I would  
28 like to invite Erin Breen for one of the coalitions. Have the witness come back first and

1 turn the microphone over to her.

2 **COMMISSIONER MacDONALD:** Thank you, and to perhaps both  
3 our Participant Counsel could explain their retainer to the witness each time. Thank  
4 you.

5 **--- DR. DEBORAH DOHERTY, Resumed:**

6 **COMMISSIONER MacDONALD:** Thank you again, Dr. Doherty. .  
7 Two counsel will have questions for you.

8 **DR. DEBORAH DOHERTY:** Okay, great.

9 **--- CROSS-EXAMINATION BY MS. ERIN BREEN:**

10 **MS. ERIN BREEN:** Thank you. Good afternoon, Commissioners.  
11 My name is Erin Breen, and I am counsel for the Participant Coalition of Avalon Sexual  
12 Assault Centre, LEAF, and Wellness Within.

13 Dr. Doherty, good afternoon.

14 **DR. DEBORAH DOHERTY:** Good afternoon.

15 **MS. ERIN BREEN:** Dr. Doherty, I wanted to start with you had  
16 mentioned in your testimony that a cookie cutter approach to intimate partner violence  
17 or domestic violence is not ideal, and I just wanted to explore that a little bit with you.  
18 One question I have for you is that currently in Nova Scotia there is a pro-arrest, pro-  
19 charge, pro-prosecution policy in place with respect to when police become involved.  
20 And I wanted to know, in your experience and in your research, have you had this cited  
21 to you as a barrier for women to call the police, knowing that there is a pro-arrest, pro-  
22 charge, pro-prosecution policy in place?

23 **DR. DEBORAH DOHERTY:** It's a little more complicated than yes  
24 or no. I think with the pro-arrest, pro-charge, what I used to see was that's an  
25 improvement over looking at the woman and saying, "Do you want to charge him?" And  
26 so the onus was on the woman to charge. With the pro-arrest and pro-charge, what I  
27 came to understand is they can arrest at any time. So, you know, that's a good signal  
28 that the initiative -- well, whatever has happened has been taken seriously, then that's

1 fine. But the pro-arrest, you still need the cooperation -- or the pro-charge, you still  
2 need the cooperation of a victim and the likelihood that you'd have a conviction in order  
3 to proceed, so it's much less likely if the woman says, you know, no, I'm not going to  
4 make a statement and I'm -- you know, I'm getting back with him, to do the charging part  
5 of it unless they have independent evidence to corroborate that some kind of crime was  
6 committed.

7 So, you know, and I think -- but I think if she doesn't act as a  
8 reluctant witness, then she may be seen to support the charge, which again could put  
9 her in jeopardy with, you know, the partner ---

10 **MS. ERIN BREEN:** Yes.

11 **DR. DEBORAH DOHERTY:** --- for doing so.

12 **MS. ERIN BREEN:** I understand. And I guess one of the  
13 questions I had was though, has it ever been cited to you that I don't call the police  
14 because what I'm looking for is help. I'm looking for the violence to stop. I don't want to  
15 go through the court system, and I know if I call the police and tell my story ---

16 **DR. DEBORAH DOHERTY:** All the time. Yeah. Women will say  
17 that I don't want to go into the criminal justice system because the slightest -- and I'm  
18 calling the police. The police come. He's already taken off and he's gone over to his  
19 buddy's. I just go home now. Leave us alone. Because, you know, I want to help seek.  
20 I want to look for services. And you can't help me. But that isn't always the case.

21 **MS. ERIN BREEN:** Right. And I'm wondering, do you see that as  
22 a barrier or as a problem in that a woman who calls for help, or to have the violence  
23 stopped in the moment, when there is no discretion, there has to be a charge, there has  
24 to be a court process, do you see that as a problem?

25 **DR. DEBORAH DOHERTY:** Sometimes I do, sometimes I don't.

26 It's ---

27 **MS. ERIN BREEN:** It's complex.

28 **DR. DEBORAH DOHERTY:** --- it's very much dependent on the

1 situation. But I think if there was a more collaborate approach to domestics, I mean,  
2 they -- obviously, they can be the most dangerous, the police will tell you, you know,  
3 and that's when our radar goes up. We take extra care looking at our back because  
4 they're dangerous calls. Yet if doing something escalates, what I've been told is just  
5 the very act of saying that there's going to be a charge, and it might only be for, you  
6 know, not having your firearm locked away, and it's going to be given back to you, you  
7 know, if it was -- but it can create a real rage if hunting season's coming up, or -- and  
8 then as, you know, the officers would tell me that you've opened a can of worms.  
9 You've opened a can of worms and things will get really bad. So she knows it, and she  
10 may want the police help initially, but then it's, like, okay, I'm fine now. Go away so I  
11 can protect myself.

12 **MS. ERIN BREEN:** And for women, you've talked a lot today about  
13 particularly in rural areas that there are women who wish to stay in the relationship.  
14 And oftentimes, we see that there's a real focus on, you know, wanting women to leave  
15 the relationship. For women who do want to stay in the relationship, what are currently  
16 are you aware of, you know, non-carceral approaches or alternatives for them in terms  
17 of trying to get the violence to stop but without going to police or without going through  
18 the criminal justice system?

19 **DR. DEBORAH DOHERTY:** Well, the safety planning tool that we  
20 created, Public Legal Education, was intended to help promote help seeking, so that  
21 women could identify potential strategies that could mitigate their risk if they stayed or  
22 didn't want to go or went and came back. So, I mean, not that that's the answer, and  
23 that maybe goes back to your cookie cutter approach question. It's not if you stay and  
24 you use this guide, you'll be safe.

25 **MS. ERIN BREEN:** Right.

26 **DR. DEBORAH DOHERTY:** It's, you know, use your intuition. All  
27 of these safety planning tools and strategies that can be put forward, they may or may  
28 not work. The simplest in safety planning is do no harm. So, you know, you want to

1 support her to make a -- empower her, I guess, to make a decision, hopefully, that  
2 they'll be no harm.

3 **MS. ERIN BREEN:** Doctor, are you aware of community-based  
4 programming though? For example, there is a program that I understand will be some  
5 evidence before the Commission I'll call the Bridges Program operating in Truro, which I  
6 understand people can access on a voluntary basis without having to go to the police,  
7 or without having to be ordered by probation, or child protection, or, you know, formal  
8 systems. Are you aware of those programs that exist in Atlantic Canada for people  
9 involved in intimate partner violence who are looking for, you know, assistance outside  
10 of the criminal justice system?

11 **DR. DEBORAH DOHERTY:** There are a few that I know of, and  
12 New Brunswick, I know, they have the DV outreach offices used to be the DV outreach  
13 coordinator and now they are more coordinated with Victim Services, Mental Health and  
14 so on, so that it's more of a one-shop stop when you go to that particular location to get  
15 help. But there's still a lot of -- I mean, if you go to a transition house and you have  
16 children, and there's any sense that those children witnessed violence, Child Protection  
17 will be called. You go to the hospital and Child Protection could be called. So I know  
18 women do a lot of dodging. I'm not going to that hospital. They have screening  
19 questions. That little rural hospital might be the better place to go. And it sounds like  
20 you may be making an unwise decision for your child, but again, that whole sense that  
21 women are the best -- the experts on their own wellbeing and they're going to make a  
22 decision that'll keep them and their children as safe as possible.

23 **MS. ERIN BREEN:** And so in your experience, in terms of hearing  
24 the stories of women in rural communities who wish to stay in the relationship, and I  
25 know when children become involved, things become even more complicated, but for  
26 women who wish to stay in the relationship who don't want to involve the police for  
27 whatever reason, don't want the criminal justice system's help, do you see that there is  
28 a need for more resources for non-carceral or restorative approaches where people can

1 voluntarily go to get assistance? And, you know, in the same question, I'm talking more  
2 about male intervention programs, counselling basically and professional assistance for  
3 both people who wish to stay in the relationship but who want -- when the woman wants  
4 the violence to stop.

5 **DR. DEBORAH DOHERTY:** Well, I can only say yes, of course, I  
6 wish there were more resources to support those types of broader initiatives, because if  
7 we think that the answer to this is the criminal justice system, then think again. It's one  
8 part of, but it certainly isn't the solution. And I think a lot of victims have already seen  
9 that it's a road that may be not safe for them to go down and the road that will take them  
10 to safety in a non-violent and respectful future might be through one of these services,  
11 the counselling addiction services and other things to support them in a transition.

12 **MS. ERIN BREEN:** Okay. Thank you, Doctor.

13 I wanted also to ask you a few questions about your phone app that  
14 you had developed. It's EVO. Is that correct?

15 **DR. DEBORAH DOHERTY:** EVO, yeah.

16 **MS. ERIN BREEN:** So I'm just wondering about the results of your  
17 development of the app, whether you can tell us, you know, was there a good uptake on  
18 the app, were the services actually accessed?

19 **DR. DEBORAH DOHERTY:** Yeah. Let me tell you, COVID-19 did  
20 us no favours.

21 I do have the hard copy. You know, we started off with -- well, it's  
22 in there somewhere -- with the guide. You know, it was a hard copy booklet.

23 And the next step was the app, and we worked with the New  
24 Brunswick Community College to develop because they have the expertise for the  
25 programming.

26 And we started that and we'd just launched it and then COVID hit.  
27 And our next step after the first year was to do an evaluation of who's using it, how  
28 many usage -- you know, the whole bit. But -- and it hasn't gone back on track yet.



1                   **MS. ERIN BREEN:** Okay.

2                   **DR. DEBORAH DOHERTY:** So I don't have any ---

3                   **MS. ERIN BREEN:** So you don't have the results. You're not able  
4 to say how successful it was or how much usage.

5                   **DR. DEBORAH DOHERTY:** Yeah. I have just anecdotal input so  
6 that when we did the dissemination of the booklet and you could click and download it  
7 as an app, Victim Services, for example, who had commissioned us to do, it said this is  
8 fabulous because when we help a woman to do a safety plan at our office, they can't  
9 take the safety plan out of the office because he might find it, get upset or enraged and  
10 hurt her, so they leave it. And what good is the safety plan if she doesn't have access  
11 to it, you know. And she's maybe written down numbers and stuff.

12                               So they were saying this is fabulous. She might start it in the office  
13 and then say I'm -- okay, I'm going to lock down my -- the app. They have codes to lock  
14 it down. And when I have time, I'll finish it on my own where I can think about how to do  
15 it.

16                               So there was the option of a self-directed or you can only do safety  
17 planning if a professional helps you. And again, that's very not empowering.

18                               It's helpful if you want a professional involved and the professional  
19 can sometimes, with the safety planning app, do the reality check. You know, you didn't  
20 -- you didn't think that could be a risk for further harm. Did you know that 70 percent of  
21 women -- this -- you know, it is a risk but just, you know, may not be something that  
22 concerns you, but if you weren't aware it could be something, that could end up being  
23 harmful.

24                               I don't know if that answers your question, but.

25                   **MS. ERIN BREEN:** Thank you very much. It does.

26                               Dr. Doherty, I wanted -- we received a can say to prepare for your  
27 evidence today because I understand you haven't authored a report. But one of the  
28 issues listed in your can say is about prevention piece for intimate partner violence, in

1 particular, education.

2 And I understand you were active in public legal education for a  
3 number of years.

4 My question relates more, though, to youth education and youth  
5 intervention because we know that, you know, intimate relationships are starting at  
6 younger and younger ages and even in junior high school oftentimes we see that, you  
7 know, this behaviour starts.

8 So I'm wondering if you can tell us whether you see that as a  
9 problem in that the -- we don't have the tools to educate our young people as we should  
10 at a very young age consistently starting right away in kindergarten about the nature of  
11 these relationships for both males and females.

12 Can you comment on that in terms of your experience?

13 **DR. DEBORAH DOHERTY:** Well, I've not done any research  
14 specifically on that, but we have developed pamphlets for teens, indigenous teens, you  
15 know, and not on teen dating violence that tries to point out the types of factors that they  
16 should be aware of. Needing to review your cell phone to see who you're talking to, you  
17 know, that's not something that is respectful. And so we try to bring in information into  
18 the resources we develop and I would be all for resources from birth, not just five, to  
19 start to educate people young about what is equality, what is respectful behaviour and  
20 so on because it's at the -- one of the pivotal underlying things that seems to be missing  
21 in so much of the educational programming.

22 **MS. ERIN BREEN:** Yes. And I understood in some of your data  
23 and focus groups women actually said to you, "I wish I had been educated as, for  
24 example, the meaning of consent at a very young age".

25 So is that -- it's a need that you've heard from women, that they  
26 would like to have had education as young girls in relation to this issue?

27 **DR. DEBORAH DOHERTY:** Not quite like that, but similar.

28 You know, people will say, "I stayed for the children. I left because

1 of the children, you know. I thought they should have a father in their life". And so I  
2 endured a lot of abuse and whatever until my son suddenly told me I was a blanking this  
3 and it was like oh, my god, he's now starting -- he used to protect me when he was  
4 three or four years old, don't hit mommy. And now look, he's calling me the same  
5 names. He's acting towards his sister the same way his father acts. I got to get out to -  
6 - you know, because my children are being so negatively affected.

7 But yes, the women are seeing impacts on their children that  
8 certainly could be perhaps mitigated by very early training.

9 I didn't have any women saying there should be a program or you  
10 should create these resources, but saying, you know, that the impact on the children is  
11 very negative.

12 **MS. ERIN BREEN:** And with respect to the issue of bystander  
13 intervention, so how a child or a young person would react to a situation if they become  
14 aware of it, do you see that as a need for further education, that we are providing  
15 education to young people at an early age on that issue as to how to react in these  
16 situations if you learn of this situation in your community?

17 **DR. DEBORAH DOHERTY:** The bystander component's really  
18 important because it's sort of you're either for us or you're against us. I mean, if you -- if  
19 you do nothing, you're doing something and it's typically showing support for the  
20 perpetrator, whether it's -- you know, at public legal education and I know here in Nova  
21 Scotia our counterparts are doing sexual harassment in the work site -- in the workplace  
22 materials and they all include a component on bystander. In the workplace, it could be  
23 your colleagues and whatever.

24 You know, if they are not speaking out, not condoning or using  
25 micro aggression to express rather than openly saying things, then again, they're part of  
26 the problem, so ---

27 **MS. ERIN BREEN:** And I guess -- so you agree that there is a  
28 need for that education for our children?

1                   **DR. DEBORAH DOHERTY:** Well, I would say personally I'm  
2 retired. I'm not a stakeholder in this. Yes, the earlier that there could be training and  
3 resources to try to stop this before it really starts.

4                   **MS. ERIN BREEN:** And as a person and a researcher who's been  
5 involved in the development of technology in relation to these issues, is that a step we  
6 should be looking at, you know, in terms of educating our youth because so much  
7 today, we all know, comes on their iPhone. Do you see that as a progressive step and  
8 something that should be given more attention and focus and funding?

9                   **DR. DEBORAH DOHERTY:** Well, I think technology whenever it  
10 can be used in a positive, supportive way is important, which is why we went with this  
11 app to try and give women the opportunity when they wanted to take it and if they  
12 wanted to take it to use, you know, a tool online. And I think anything you put for kids  
13 that is online and exciting and colourful and in their language, you know, then language  
14 level and so on, can only be a positive.

15                   **MS. ERIN BREEN:** Okay, those are my questions for you. Thank  
16 you very much ---

17                   **DR. DEBORAH DOHERTY:** Okay. Thank you.

18                   **MS. ERIN BREEN:** --- Dr. Doherty.

19                   Thank you, Commissioners.

20                   **COMMISSIONER MacDONALD:** Thank you so much.

21                   **COMMISSIONER FITCH:** Dr. Doherty, if I could, just before we  
22 jump to the next, you had mentioned and Ms. Breen had mentioned about your app, the  
23 EVO. Could you just spell that out for us, just for the record? I don't know if it was  
24 picked up or not.

25                   **DR. DEBORAH DOHERTY:** It's called EVO, E-V-O, and it stands  
26 for EVOLution to a Violent-free Life, and it was based on the guide that was done that  
27 had three components. One was telling somebody. That was telling -- who could it be?  
28 A teacher, a friend, a neighbour, your sister, your minister, your doctor. Who can you

1 tell? It's somebody you trust, and so on. So that was the first, encouraging them to  
2 trust. And went over all the reasons why people don't, you know, "All my friends are his  
3 friends too", and then it would be, "Well, here's the counterargument." So there was a  
4 whole thing around...

5 Then there were the 16 situations that could make you feel  
6 vulnerable or fearful, and then you would make a decision, you know, "Is alcohol a  
7 factor? Does it factor into situations that make you feel", not judgemental, "Oh my god,  
8 you're drinking on Friday night." It was "If you drink on Friday night, do you feel safe or  
9 not?" You know, it was based more on a self-assessment of concern.

10 And then the third part was a directory of services. And so you  
11 could -- there was a index and you could look up firearms, you could look up DV  
12 outreach, you could -- and choose services that maybe you could email and make an  
13 appointment and so on.

14 **COMMISSIONER FITCH:** Thank you. I just wanted to follow up on  
15 Ms. Breen's question before you moved on. Appreciate it.

16 **DR. DEBORAH DOHERTY:** Thank you.

17 **--- CROSS-EXAMINATION BY MS. ANASTACIA MERRIGAN:**

18 **MS. ANASTACIA MERRIGAN:** Hello, Dr. Doherty. My name is  
19 Anastacia Merrigan, and I represent the Transition House Association of Nova Scotia  
20 and we're in a coalition with Be The Peace Institute and Women's Shelters Canada.

21 I just have a couple of questions to follow up on your testimony so  
22 far. The first question is around risk assessment tools. You mentioned those a few  
23 times...

24 **DR. DEBORAH DOHERTY:** I'm sorry, can you speak a little  
25 louder?

26 **MS. ANASTACIA MERRIGAN:** Okay. My first question is around  
27 risk assessment tools, and you mentioned those a few times in your testimony. And I  
28 wondered if you could explain a little about why risk assessment tools are important in

1 the context of intimate partner or gender-based violence.

2 **DR. DEBORAH DOHERTY:** I think we've come to know that the  
3 more risk factors that are associated with someone who is being victimised, the more  
4 likely it is that there will be a lethal or a negative outcome. And so the -- I know with the  
5 Ontario Domestic Homicide Review Committee all of the deaths had at least, I think it  
6 was 10 known risk factors. There is more than -- 10 was the graphic they did on the top  
7 10. But knowing that, that those -- if there is one it doesn't mean there couldn't be a  
8 fatality or there couldn't be a death, but the more there are the more likely it is that's  
9 something very seriously wrong is going to happen. They're not causal, but they are  
10 predictive.

11 So you know, to say that the partner is drinking, that's a risk factor,  
12 it doesn't mean -- and there's lots of people who drink and they do not harm or kill their  
13 spouse and children, and there's a lot of people who have mental health problems and  
14 they don't kill or they're not violent to anyone. So it's not a causal thing, but it's when  
15 you look at domestic violence, a history of abuse with this partner, the more risk factors  
16 that you see clustering around that person the more they need -- the more they need to  
17 be protected and given resources to protect themselves.

18 **MS. ANASTACIA MERRIGAN:** Thank you. And do you think that  
19 the risk assessment tools are more important for the victims themselves, or are they  
20 more important for the people offering services?

21 **DR. DEBORAH DOHERTY:** More important than what?

22 **MS. ANASTACIA MERRIGAN:** More important for the victims  
23 themselves, or are they for really the people offering services, police officers or social  
24 workers or counsellors?

25 **DR. DEBORAH DOHERTY:** I'm not sure I'm catching what you're -  
26 - what you're saying.

27 **MS. ANASTACIA MERRIGAN:** All right. Sorry, I will try to speak  
28 louder. I can hear myself quite loudly from here.

1 Do you find that the risk assessment tools are more useful for the  
2 service providers, the people giving assistance, or are they designed to help the victims  
3 themselves?

4 **DR. DEBORAH DOHERTY:** A lot of risk assessment tools are  
5 designed to be delivered by professionals. So in the -- Jackie Campbell's risk  
6 assessment tool and so on, and I know with the victims services in New Brunswick, they  
7 all had training on how to use that tool.

8 The tool demonstrated the likelihood that the offender would  
9 reoffend, and that information wasn't shared with the victim, it was something that was  
10 done to -- for the victim, "we're going to ask you these 20 questions", and then, you  
11 know, they would go on -- they might hear, you know, "you need strategies to stay  
12 safer", and so the emergency leaving and staying safe after leaving would come into  
13 effect.

14 **MS. ANASTACIA MERRIGAN:** Thank you. And it sounded like  
15 from some of your earlier testimony that you felt that there were some aspects of the  
16 risk assessment tools that perhaps weren't useful or that may need to be changed, and  
17 particularly around the way the tools are used in a rural setting versus an urban setting.  
18 Do you think there are some changes that need to be made to the risk assessment tools  
19 that are currently being used?

20 **DR. DEBORAH DOHERTY:** You know, I think if you're doing  
21 safety planning in a urban context, the tool may be just right for you. And this is  
22 something that I keep saying there's no right or wrong way, there's no this is the best  
23 tool and everybody should use it. Some women should use it, and some of the training  
24 that is given to the frontline staff on how to use those tools might be very important in  
25 terms of explaining to the woman what the -- what the risk factor parameters are, these  
26 sort of like "You may not feel you need this, but here's a little reality check in terms of  
27 what I can offer you is this information might affect your decision and if it does I'm here  
28 to help." So I think that I'm here to help and I'll -- and I have a tool I think would be

1 really useful for you" is important, but that tool may not work for all women.

2                   And you know, I think Jackie Campbell says, "You can't -- you  
3 shouldn't expect everybody to have the same outcome from that one tool or safety  
4 planning initiative. That you have to do what's going to be most effective for the  
5 particular victim, and that circumstances." That might mean a different safety planning  
6 tool for use in a rural area that recognises and respects why she's staying, you know,  
7 why she -- why is she drinking with him, you know, if he's so dangerous when he  
8 drinks? Why is she doing? Some of these safety tools that would deal with a rural  
9 situation might not be as productive when used in an urban setting, but it may be the  
10 same risk factors, just the presentation and the understanding of -- I mean, staying or --  
11 after separation.. I don't know, I'm trying to put this in... The whole safety planning  
12 around it's intact relationships and whether you leave, you don't use the same strategy.  
13 If you didn't leave, you don't need strategies about stalking behaviour as much because  
14 you're sitting down for supper together and, you know, and maybe you're at risk that  
15 night for some other reason, but not because you left.

16                   I don't know if that makes sense, but...

17                   **MS. ANASTACIA MERRIGAN:** It does. It does make sense.

18 Thank you for clarifying that.

19                   I also wanted to ask you about your recommendations. You  
20 mentioned that you made some recommendations, particularly around firearms. And I  
21 believe that's from a report that you wrote in 2008. Do you know if any of the  
22 recommendations you made were followed; and if so, have you been able to measure  
23 the success of those changes?

24                   **DR. DEBORAH DOHERTY:** In a way I'd have to say no. I mean, I  
25 know of some of them that were put into effect because -- Dr. Hardesty and I did this  
26 research purely as an academic exercise, so to speak -- there were people involved in  
27 developing the, you know, the research strategy from government, from DV Outreach  
28 and transition houses and so on, but nobody had commissioned us to, "Do this



1 research, to write this report, and we'll enact your recommendations."

2 But we tried to make recommendations and present them, so we  
3 did go around and do presentations. And I know the Domestic Violence Court in  
4 Moncton, they incorporated some of these recommendations into the Court. And one  
5 was in all instances of domestic violence, confiscate the guns. But the guns weren't  
6 involved in the -- that doesn't matter, confiscate them. It's a domestic violence situation  
7 and the person is convicted; they shouldn't have firearms.

8 So, you know, we're saying you don't need a Domestic Violence  
9 Court to do that in all instances, in all courts.

10 **MS. ANASTACIA MERRIGAN:** And were you able to see any  
11 change from 2008 until today, or is that something you were able to measure?

12 **DR. DEBORAH DOHERTY:** When you say, "See any change," I'm  
13 not sure that -- I mean, we didn't do a follow-up study because the Court was being  
14 introduced and I think -- I think Carmen Gill at UNB did an evaluation of the Domestic  
15 Violence Court, but it was almost simultaneous, so, you know, I'm not sure if it reflected  
16 outcomes of that evaluation, the result of the findings of this report.

17 **MS. ANASTACIA MERRIGAN:** Thank you.

18 And my final question; you mentioned when you were speaking  
19 about police officers going to retrieve firearms that weren't there, that anecdote that you  
20 told earlier; in any of your roles in your career, have you been involved with delivering  
21 training to police officers or other first responders around the issues of firearms and  
22 intimate partner violence?

23 **DR. DEBORAH DOHERTY:** We did public education sessions. So  
24 when this report was finished and came out, we did some that were community-based,  
25 some that were -- we had police officers and RCMP involved in the -- I don't know if I'd  
26 call it training but the information sessions, and just the fact that you share what you  
27 find, it's really important or it's going to collect dust on a shelf somewhere. And I know  
28 that when we were going over the pet part, one of the officers who was taking part said,

1 “I’ve gone to so many domestics over the years where she’s -- I’m taking her to the  
2 transition house and she’s saying, ‘But my dog, my dog,’ and it’s, ‘Well, the dog’s not  
3 coming.’”

4                   And that’s now changed in New Brunswick. We developed a  
5 program, “Safe for Pets Too,” and we had -- do I say, with Leanne Fitch, who was Chief  
6 of the Fredericton Police Force acting as the first Chair of the committee that was going  
7 to help create a program, free program to shelter pets of abused women for up to 30  
8 days or longer, if they needed it. And that was one of the recommendations in the  
9 report.

10                   So that’s still in place. And I must say a couple -- a few weeks ago  
11 I was given an award at the Muriel McQueen Fergusson Centre for Family Violence.  
12 But one of the neat things about the award was they were going to give \$1,000 to the  
13 charitable organization of my choosing, and I chose Safe for Pets Too. So that could  
14 help. But that’s constant, constant, that that program gets requests from women who  
15 say, “Please help me. I have a cat and a dog. You know, my little girl would be  
16 heartbroken if I gave up my pets permanently. Can you help me?” And the program  
17 has a website now, but it’s several times a month that we were being asked for help to  
18 facilitate leaving.

19                   **MS. ANASTACIA MERRIGAN:** Thank you. Those are all of my  
20 questions.

21                   **COMMISSIONER MacDONALD:** Thank you so much.  
22 Ms. Hnatiw?

23                   **MS. GILLIAN HNATIW:** Thank you, Commissioner MacDonald.  
24 No further questions for Dr. Doherty today.

25                   **COMMISSIONER MacDONALD:** Thank you.  
26 Commissioner Fitch?

27                   **COMMISSIONER FITCH:** I don’t have any questions but do want  
28 to thank you very much for joining us, and I know Commissioner MacDonald will bring

1 thanks on behalf of the Commission, but I do want to say how much I appreciate the  
2 work that you've done and the fact that you chose Safe for Pets Too and Transition with  
3 You for your charitable donation.

4           And I think examples like that are really important to help people  
5 understand who may be watching or following our proceedings when sometimes it's  
6 hard to figure out why we're spending so much time on academic research, you know,  
7 how does this stitch into our mandate? You know, everybody understands when we're  
8 trying to figure out what happened, you know, look at that first 13 hours, but then the  
9 drilling down into the how and the way things happened and some of the context, these  
10 types of examples, such as what you're providing, are so important, I think just to help  
11 people understand how complex all of these things in our mandate our, and, you know,  
12 to know that for the example that you've just given, that somebody's pet could be a  
13 barrier to leaving abuse because they don't -- as you said earlier, don't want the partner  
14 killing the pet and then the person who's being abused feels responsible that the kids  
15 have lost their dog, for example.

16           And I think when we can share those real-life examples, I just can't  
17 help but to think that for the average person that is listening to our discussions and all  
18 the experts that are coming in, that it makes it more relatable and understandable to  
19 why we're spending time on all these expert reports, bringing people like yourself in. So  
20 I just wan to thank you very much for that.

21           **DR. DEBORAH DOHERTY:** That police officer did say, "From now  
22 on I'll be asking, 'Is there violence, you know, against the dog?'" and...

23           **COMMISSIONER MacDONALD:** Commissioner Stanton?

24           **COMMISSIONER STANTON:** Thanks very much.

25           I think that you had some more recommendations for us that you  
26 didn't have an opportunity to share earlier.

27           **DR. DEBORAH DOHERTY:** I did.

28           **COMMISSIONER MacDONALD:** And I wonder if you might like to

1 take the opportunity to ---

2 **DR. DEBORAH DOHERTY:** Yeah.

3 **COMMISSIONER MacDONALD:** --- share them ---

4 **DR. DEBORAH DOHERTY:** And I won't talk about them, I'll just  
5 put them forward.

6 So one of them says, create a public education campaign about  
7 pets and animal abuse. I think I go back to the police, though. Educate police, justice  
8 officials, and service providers on the nature and extent of firearms victimization in rural  
9 areas. And it may seem counterintuitive to say, "Educate the police," but a lot of the  
10 findings and a lot of the strategies the women say they put in place to not tell the police  
11 that there's firearms in the home, and to -- would be very helpful, I think, if the police  
12 were trained and understood why sometimes we hear, "I don't know why they lie to us."  
13 And they're not. It's not that they're lying, it's this they don't have the trust in the  
14 criminal justice system to take that step to share that information until they're so sure  
15 that they won't be in danger; that somebody's going to act in a way that is not going to  
16 have all the firearms back in the home in a few months. Restrict firearms access on  
17 stay away and no contact orders and peace bonds in all domestics. So I think in New  
18 Brunswick anyways, the new *Emergency Intervention Act* allowed for, permitted for  
19 putting pets and firearms and different things on to the orders.

20 Ensure follow up and support for victims following a charge, and  
21 better enforcement of protective orders. Enact legislation to compel professionals,  
22 mental health and doctors, for example, to report concerns about the stability of a gun  
23 owner. And so we're into that actually happening at the federal level, and there are this  
24 red flag and yellow flag provisions, but I'm now come to the point where I'm asking the  
25 question, is reporting the instability of a gun owner the right thing, or making it  
26 mandatory to report, or would it be making it mandatory to support, support the victim,  
27 or support the perpetrator in getting mental health. So, you know, it's not just let's take  
28 the gun and this -- now I've done my thing because people don't know when you report

1 what will happen. But if the mandatory aspect of it is for the medical, the doctor to  
2 support the perpetrator to get mental health, or whatever kind of information they need,  
3 or -- I think you know what I'm saying. It's just shifting from the onus is on the woman to  
4 say I'm fearful, you know. So that's a red flag, you know, and he has mental health  
5 problems. I mean, you're still relying on the woman to say I'm fearful as per the red flag;  
6 whereas, maybe what the onus should be is there's mental health problems and  
7 firearms. The doctor could make what treatment options and modalities are there that  
8 would make a difference. So that's what that.

9                   Create pro-removal and co-confiscation of firearms a policy similar  
10 to the pro-arrest and pro-charge. And I said to someone on break, maybe I would tell  
11 the robotic moose story. What do you mean by robotic moose? But while this research  
12 was going on, there was a court case in Nova Scotia of a man who had -- I believe it  
13 was just on the Friday night going to do his grocery shopping with his wife and his  
14 daughter with a loaded rifle underneath his seat, and he saw a moose. And he stopped,  
15 and he said just -- you know, "Oh, my God, there's a moose." And he shot at the  
16 moose. Well, it turned out it was, like, a sting. It wasn't a moose. It was a robotic  
17 moose that had been put there by the police or wildlife people to -- because moose are  
18 an endangered species in Nova Scotia. Anyway, he had been found guilty and his -- he  
19 got a lifetime confiscation of the firearms and I think it was he lost his car for 10 years.  
20 And in this focus group, they had pointed out did you see that decision of the court?  
21 Someone said if they only treated abused women like robotic moose, we'd be all set.  
22 So that's my robotic moose story. But, yes, pro-confiscation in any domestic situation.  
23 Now that was just a misuse, but, I mean, the family was there, the loaded gun and so  
24 on.

25                   Public education. I -- maybe it's from my background on the Public  
26 Legal Education initiative, but I think it's a huge part, and I think the question's about the  
27 youth education and so on, but at all levels. Public education and maybe a series of  
28 gun commercials targeted at rural communities and provinces on gun safety because

1 women would say, you know, I know I'm saying he's doing all these horrible things, but  
2 he does love his kids. And if part of our campaign was do all these things to keep your  
3 kids safe, so they don't crawl under the bed and accidentally shoot themselves, and so  
4 on, so there could be different aspects of this research that we shared with the public in  
5 a public education campaign. And we started -- we've been doing that in New  
6 Brunswick and it's just, I would say, run its course. It's been about 10 years. And it  
7 could be refreshed, and technology could be used to make the uptake of the information  
8 more interesting.

9 Safe haven. Anyway, I think those are the main things I wanted to  
10 share that, you know, there -- there's so much that could be done and said, and so  
11 many aspects of this research I haven't even touched on. But the report itself is on the  
12 Public Legal Education website under safer communities -- safer homes, safer  
13 communities, I think. So, you know, if you want to read the whole thing, it's there. And  
14 there's, you know, a lot of places where I've written about the domestic homicide risk  
15 factors articles and so on, and those are -- I think they'll be available through the  
16 Commission as a list that I provided them with the connections with the links.

17 **COMMISSIONER STANTON:** Thank you very much.

18 **COMMISSIONER MacDONALD:** Dr. Doherty, thank you so very  
19 much for sharing your important insights with us. You've had such a fascinating career,  
20 and you have been a pioneer and a ground-breaker, for sure, and have made an  
21 enormous contribution to your province in New Brunswick, but also across the country  
22 and you've left a wonderful legacy.

23 **DR. DEBORAH DOHERTY:** Thank you.

24 **COMMISSIONER MacDONALD:** And so as a Canadian and a  
25 Nova Scotian, thank you for that, but thank you for your contribution this afternoon more  
26 specifically, for sharing your vast experience with us with such humility. You have such  
27 knowledge and such wisdom, and you've delivered it with such humility. I really, I know  
28 I speak on behalf of the Commissioners, appreciate that so much. I've written down that

1 we have to find ways to make sense of the senseless and that's just one pearl of  
2 wisdom that I've taken from today. So thank you so much.

3 **DR. DEBORAH DOHERTY:** Thank you for those kind words.

4 **COMMISSIONER MacDONALD:** Thank you.

5 **COMMISSIONER STANTON:** Apologies for the audio challenges  
6 that we're having today. Thanks for bearing with us on that.

7 Thanks to all of the expert witnesses that we heard today, and to  
8 Counsel for your questions, and to Commission Counsel for sharing the Foundational  
9 Document focussed on violence in the perpetrator's family.

10 Of course, this week's work relates to the Orders in Council, our  
11 mandate that require us to examine issues as they relate to the mass casualty,  
12 including contributing and contextual factors including the role of gender based and  
13 intimate partner violence and access to firearms and a number of other areas. So these  
14 aren't easy incidents and issues to hear about but they're an important part of our  
15 growing understanding of how and why the mass casualty happened. We appreciate  
16 everyone's commitment and respectful engagement, and we encourage anyone who  
17 feels they may need help to reach out to our mental health team or to the support  
18 services available through the website.

19 Tomorrow, Commission Counsel will be sharing a Foundational  
20 Document focussed on the perpetrator's violence toward others. We'll also hear from  
21 former Portapique resident witness Brenda Forbes about her knowledge and  
22 experience of the perpetrator's violent behaviour and the circumstances surrounding her  
23 complaint to the RCMP in 2013 with respect to the perpetrator.

24 As you know, the Commission's 61 Participants continue to assist  
25 us in our work by taking part in proceedings and making submissions. This past Friday  
26 was the deadline for Participants and their Counsel to make written submissions relating  
27 to our phase 1 work, which is focussed on understanding what happened on April 18<sup>th</sup>  
28 and 19<sup>th</sup>, 2020. We'll be posting these submissions on our website in the coming days.

1 And once again, we do thank Participants and their Counsel for your engagement, and  
2 we'll see everyone here tomorrow at 9:30. Thank you.

3 **REGISTRAR DARLENE SUTHERLAND:** Thank you. The  
4 proceedings are adjourned until June -- sorry, July the 12<sup>th</sup>, 2022, at 9:30 a.m.  
5 --- Upon adjourning at 4:45 p.m.

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### C E R T I F I C A T I O N

8

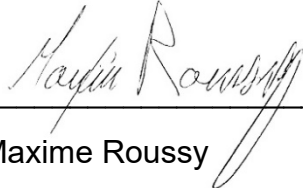
9 I, Maxime Roussy, a certified court reporter, hereby certify the foregoing pages to be an  
10 accurate transcription of my notes/records to the best of my skill and ability, and I so  
11 swear.

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13 Je, Maxime Roussy, un sténographe officiel, certifie que les pages ci-hautes sont une  
14 transcription conforme de mes notes/enregistrements au meilleur de mes capacités, et  
15 je le jure.

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