

The Joint Federal/Provincial Commission into the April 2020 Nova Scotia Mass Casualty MassCasualtyCommission.ca

Commission fédérale-provinciale sur les événements d'avril 2020 en Nouvelle-Écosse CommissionDesPertesMassives.ca

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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Ш **Appearances / Comparutions**

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None entered

1	Halifax, Nova Scotia
2	Upon commencing on Wednesday, July 20, 2022 at 9:33 a.m.
3	COMMISSIONER FITCH: Good morning. Bonjour at bienvenue.
4	Hello, and welcome.
5	We join you from Mi'kma'ki, the ancestral and unceded territory of
6	the Mi'kmaq.
7	Please join us in remembering those whose lives were taken, those
8	who were harmed, their families and all those affected by the April 2020 mass casualty
9	in Nova Scotia.
10	Part of our mandate is to explore a number of issues related to the
11	mass casualty, including police policies, procedures and training in respect of gender-
12	based and intimate partner violence. Today we will hear two roundtables focused on
13	police and institutional understandings and responses to these forms of violence.
14	As with earlier roundtables, we anticipate today's discussions will
15	assist us in our work to understand the broad context behind the mass casualty and to
16	bring forward well-informed recommendations that can help make our communities
17	safer.
18	I will now ask Krista Smith from our Research and Policy Team to
19	begin this morning's discussions.
20	Krista. Thank you.
21	MS. KRISTA SMITH: Thank you, Commissioner Fitch.
22	So my name is Krista Smith, and I'm on the Research and Policy
23	Team. And this today's roundtables will focus on police and institutional
24	understandings to gender-based and intimate partner violence.
25	This morning we'll be focusing on institutional responses to intimate
26	partner and family violence, whereas this afternoon we'll be focusing on institutional
27	responses to gender-based and sexualized violence.
28	As with every roundtable, we will not focus on the facts or evidence

- related to the mass casualty of 18th and 19th April, 2020. This work is being done in
- 2 other aspects of the Commission's process. Instead, we will be focused on examining
- the broader context and causes of the mass casualty as enumerated in the
- 4 Commission's mandate. This includes how women's experiences of intimate partner
- 5 and family violence and how police, courts and other institutions understand and
- 6 respond to intimate partner and family violence.
- 7 --- ROUNDTABLE: IPV, GBV AND FAMILY VIOLENCE: POLICE AND
- 8 INSTITUTIONAL UNDERSTANDING AND RESPONSES TO INTIMATE PARTNER
- 9 VIOLENCE AND FAMILY VIOLENCE
- 10 --- FACILITATED BY MS. KRISTA SMITH:
- MS. KRISTA SMITH: So this morning, we'll be looking at barriers
- to effective police and other institutional responses to intimate partner and family
- violence, the cultural aspects of those barriers and how they can be addressed, and the
- promising and best practices in police and institutional responses.
- So as with every roundtable discussion, the intention is to provide
- 16 the Commissioners and public with a deeper understanding of the core themes so that
- everyone is well positioned to engage in conversation in Phase 3 about lessons learned
- and potential recommendations.
- As facilitator of this roundtable, I will be directing the questions,
- 20 asking follow-ups and moderating the dialogue. The Commissioners may choose to
- 21 pose questions at any point.
- Roundtable discussions form part of the Commission record. They
- are being livestreamed now and will be publicly available on the Commission's website.
- Before we proceed, I want to pause and acknowledge that much of
- 25 the work underlying today's roundtable discussion was led by my colleague, Serwaah
- 26 Frimpong.
- So we're very fortunate to be joined today by several experts who
- have dedicated their lives to understanding these issues, so I would like to invite each of

1	you to introduce yourselves now and to speak a little bit about your work.
2	We'll start I think we'll start with Lori, who's online there.
3	DR. LORI CHAMBERS: Good morning. Thank you for the
4	invitation to participate today.
5	My name is Lori Chambers, and I'm a Professor of Gender and
6	Women's Studies at Lakehead University, Thunder Bay campus, on the Territory of the
7	Anishinaabe people.
8	I am a legal historian and I've worked in quite a few areas of
9	women's legal history, but in the last seven or eight years I've worked primarily on
10	gender-based violence with particular focus on intimate partner violence and coercive
11	control and responses of police to these problems. And I think that's all I need to say
12	today.
13	MS. KRISTA SMITH: Thank you, Lori.
14	Patrina?
15	DR. PATRINA DUHANEY: Hello, everyone. Good morning.
16	Thanks for the invitation to participate in this very critical conversation.
17	My name is Dr. Patrina Duhaney. I'm Assistant Professor in the
18	Faculty of Social Work at the University of Calgary and culture of the faculty's anti-black
19	racism task force. I have worked in the domestic violence sector for a number of years
20	My research is inter-disciplinary in nature, looking at critical social
21	work chronology, critical race studies, critical anti-racism and black feminist traditions.
22	In terms of my theoretical framework, it's often focused on critical race theory, critical
23	race feminism and intersectionality and looks at the ways in which race, racism,
24	victimization and criminalization are interconnected.
25	Currently conducting research to support black and racialized
26	individuals and so, for example, in 2021 I was commissioned by Calgary Police Service
27	to conduct an environmental scan to review and produce a final report to assess the
28	knowledge and the environment and actions needed to address systemic racism within

1	the Calgary Police Service and support the development of anti-racism strategy.
2	My current research looks at black women's experiences with the
3	police and my second research project aims to build domestic violence prevention
4	knowledge, focusing specifically on black Canadian women, men, families and
5	communities.
6	Thank you.
7	MS. KRISTA SMITH: Thank you, Patrina.
8	Carmen?
9	DR. CARMEN GILL: Thank you, Krista, Commissioners.
10	My name is Carmen Gill. I'm a Professor in the Department of
11	Sociology at the University of New Brunswick. I've been teaching courses on violence,
12	mainly, and so in criminology.
13	My research area is and has been for over 30 years now intimate
14	partner violence and I've been working on this particular issue in different capacities and
15	I've been working at the court level looking at how we're treating cases through the
16	court system and, lately, for the last, I think, 16 years, I've been working with police
17	agencies and I work in partnership mainly with the Canadian Association of Chiefs of
18	Police. And I am conducting research now on coercive control, risk assessment and
19	intimate partner violence at the police level and how they're responding to this particular
20	issue.
21	And I'm in the process of developing a Canadian centre for policing
22	intimate partner violence, and this is done as well with the Crime Prevention,
23	Community Safety and Well-Being Committee at CACP. And there's a resolution that
24	and I'm very, very excited about this because there's a resolution that is going to be
25	submitted at the general meeting next week to CACP, so we are hoping that they are
26	going to approve this particular resolution.
27	So I'm delighted to be here with you to share my experience
28	researching IPV.

1	MS. KRISTA SMITH: Thank you so much, Carmen.
2	Nancy?
3	DR. NANCY ROSS: Hello. Thank you so much for having me
4	speak today. I offer my condolences to the family and all harmed by the events that
5	have led to this Commission.
6	I have been focused on research related to gender-based violence
7	and child adverse childhood experiences and early trauma for several decades now
8	as well, and I worked as a social worker and a clinical therapist in mental health and
9	addiction settings for 20 years. And during that time, many people shared with me their
10	experiences of childhood trauma and experiences of gender-based violence, which led
11	me to pursue a PhD in peacebuilding.
12	And currently, I am doing research related to the ways in which the
13	pro arrest, pro charge, and pro prosecution policies impact the service and the police
14	service and institutional responses to people when they reach out for help. And I'm
15	working on research related to cultural responsive healthcare and services in response
16	to gender-based violence, and looking at what it might mean to apply a trauma-
17	informed, family-centred, decolonised lens to those responses. Thank you.
18	MS. KRISTA SMITH: Thank you, Nancy.
19	So to begin today, I want to just make sure we're all clear on a
20	couple of terms. So Carmen, I'd like to take you to your commissioned report, which is
21	Exhibit P003352, and if you can just give us a quick rundown of the terms "intimate
22	partner violence", "family violence", and how those how those two terms relate to the
23	term "gender-based violence".
24	DR. CARMEN GILL: So I will try to not repeat what has already
25	been said here because I heard others talking about this. I generally make the
26	distinction between intimate partner violence and family violence. Intimate partner
27	violence is really violence that occurs between partners, whether they are living
28	together married common-law or ex partners. When we talk about family violence

here I'm really, really cutting short on these terms, but family violence is going to be

- 2 broader. It means that everything that occurs where people do have a family
- relationship, it can count under the term "family violence". So it can be intimate partner
- 4 violence, but it can be as well violence against children, against older parents, among
- 5 siblings. So we are going to see that it's broader.

And so when we talk about what's happening in a relationship, we have a tendency to use the term "intimate partner violence". How is this connected to gender-based violence? Well, gender-based violence is violence that is experienced due to the person's gender, identity, and how they are going to live it. It's rooted in gender inequality. And of course when we talk about gender-based violence, there is abuse of power. Well, women and girls are generally the largest ones who are carrying the burden of gender-based violence. So when we talk about gender-based violence, we are encompassing all forms of violence that women and girls can be experiencing.

But it's not necessarily only with an intimate partner relationship. It encompasses that too, but there are other forms of relationships where -- or there is no relationship between the woman and the person who is going to be the perpetrator, and this is where we're going to start looking at violence that is hate violence towards women, where we are going to see that there are misogyny that is going to be in -- working in -- coming to play when it comes to gender-based violence. But gender-based violence really encompasses all forms of violence that generally women are the recipients of this type of violence, and if we start adding some vulnerabilities, let's say there are more vulnerable groups in our population that are going to be more the target of this gender-based violence, for example, racialized women, women with disabilities, women from remote areas, so we are going to see that they are more vulnerable to this form of violence.

So I am going to go back to intimate partner violence to talk about not just about the forms of violence that we are seeing in intimate partner violence relationships, we need to as well add this element that is extremely important to

- highlight, and it has to do with the pattern of power and control, and this is what we are
- 2 going to recognise with an intimate partner violence. And so when we talk about a
- pattern of power and control, it encompasses all forms of violence in the relationship,
- 4 but it goes beyond and broader. And this is where we have -- we are now talking more
- 5 and more about coercive control.
- 6 MS. KRISTA SMITH: And we'll head to coercive control in just a
- 7 moment. As you were speaking, I was -- you can correct me if this is wrong, because
- this just occurred to me, but it almost sounds like the Venn diagrams that are
- 9 overlapping circles, and gender-based violence is one circle, family violence is another,
- and the intersection can be intimate partner violence.
- DR. CARMEN GILL: It's possible.
- MS. KRISTA SMITH: Okay. Just thinking.
- DR. CARMEN GILL: Yeah. And there's also -- if you -- if we want
- to go even further, we can add the term "domestic violence", which I did not talk about.
- But here, just to confuse everybody, when we talk about domestic violence, we can talk
- as well of intimate partner violence. Depending on who's using, who's doing the
- 17 research, some people will use the term domestic violence.
- I have a tendency to avoid using the term "domestic violence"
- because for me, when we talk about domestic violence, it's all forms of violence that I
- will see within the domestic sphere, so the private sphere. So it can be related to IPV,
- but it can be related to other forms of violence that are occurring in the private sphere.
- 22 So I have a tendency to make the distinction.
- But at the same time, in the Foundational Document that I wrote
- with Mary Aspinall, we use interchangeably IPV and domestic violence because of the
- complexity where people are using one term versus the other. But generally, I have a
- tendency to use intimate partner violence. Despite the fact that it's a gender-neutral
- term, it doesn't mean that I'm not focussing on women that are mainly the victim of
- intimate partner violence.

1	MS. KRISTA SMITH: Thank you, Carmen.
2	Patrina, I wanted to pick up on something that Carmen said in
3	discussing these definitions, in that oftentimes vulnerabilities play a role in how we
4	understand these terms. Can you can you speak a little bit to how people's
5	marginalised experiences need to be taken into consideration when considering these
6	terms?
7	DR. PATRINA DUHANEY: Absolutely. I certainly agree with what
8	has been stated in terms of the definitions, and it's really important that we look at how
9	experiences of intimate partner violence and gender-based violence is more
10	complicated and further complicated by people's intersect and identities. And as
11	Carmen mentioned, race, disabilities, and so forth, and also economic marginalisation.
12	And so for instance, our research tells us that racialized Black,
13	Indigenous women are at increased risk, greater risk compared to their White women
14	counterparts of experience in of violence for a number of different reasons in terms of
15	how society might even explore violence in these across these various groups. And
16	so with limited research on these various populations there is also the resources and
17	supports for these women as well, and people who experience gender-based violence,
18	as well as intimate partner violence, and which certainly increases their risk in terms
19	of the extent to which they will call for support, how they might access resources and
20	even engage with formal supports as well.
21	MS. KRISTA SMITH: Thank you. And we'll flesh some of that as
22	we go in this conversation today.
23	I want to take us now to the term, "Coercive control," which Carmer
24	alluded to. And, Lori, you've much of your work deals with this concept. We included
25	an article that you authored at P003655, which really gives us a working definition of
26	coercive control. Can you help us to understand the term and how it shows up?
27	DR. LORI CHAMBERS: Certainly. I'm happy to do that, and I'll try
28	to keep it reasonably brief and not repeat too much of what is in the materials, the

1 written materials that you were provided with.

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Coercive control is extremely gendered. So we come back to what 2 Carmen was talking about, about power and control. Coercive control is based in traditional patriarchal assumptions about gender roles. And it exploits -- the men who are abusive and use coercive control deliberately exploit expectations of female subordination to both normalize and justify their behaviour and to render it invisible to 7 the wider society.

So coercive control is a pattern of behaviour that develops over time, which uses isolation, intimidation, and control to keep women from being free to make decisions for themselves, to keep them tethered to men who treat them with complete and utter disrespect. It does not have to include a lot of daily violence. So what do I mean by that?

Well, women are not necessarily being hit all the time; they're not black -- they don't have blackened eyes and broken bones. They're not showing up in the hospital, necessarily. What they experience instead is a kind of micro-regulation of absolutely everything they do all day long.

So their partners -- they start out with what appears to be loving concern and correction of their behaviours, which turns into a really totalitarian regime which feels like you are a victim of kidnapping or a prisoner of war.

So women aren't allowed to think for themselves; they can't have their own opinions, they're corrected, they're gaslighted and told that their version of reality is wrong. And sometimes men do all sorts of weird things to make women question their sense of reality; hide the keys, do things to make them think that they're losing their ability to think rationally.

They insult them, they degrade them so that women start to feel increasingly worthless. They criticize all of the things that are about women's gendered performance in society; their cooking, their cleaning, their management of the household, their rearing of children. And they also take all their money and leave them

so that they are dependent. Even a woman who has a well-paid, secure job is not financially secure living with a coercive controller because he will take control of her salary and limit her access to cash. Often a woman will either not be allowed to have a phone or will have tracking on her phone so that she's being listened to every time she uses it. They follow, they put GPS devices on people's cars, track -- use video to track

So when I -- for example, with the book that I wrote on the R. v.

people. And they use violence when they need to, to reinforce their power.

Ryan case, Mike Ryan frequently would grab Nicole Doucet by the neck and hold her up against the wall. So it's not explicitly strangulation but it's a very clear demonstration of power, control, and potential for lethality. So women are terrified. They live in a state of constant existential fear; like, they just think that their lives could end at any time. And they're also threatened that not only that their own lives but the lives of all those they care about could end at any time, including children, parents, anyone to whom they might turn for assistance.

So they become increasingly isolated to protect people they love. They don't want those people harmed because of what they view as their problem, not the problem of those they love. So they're isolated and in environments often, they'll be trapped also in environments where they're quite invisible from society, so rural women are at particular risk. If you're in a place where people don't see you and you don't have opportunities to leave, that makes it even more difficult.

I really also want to stress here that sexual violence is a routinized part of this. So women may not say explicitly they're raped, but they're forced to have sexual -- engage in sexual activities they wouldn't choose for themselves, and they're forced to it at times when they don't want to. So woken up in the middle of the night, told that they have to do this. And there's no option of saying no, and it's very clear that there's no option of saying no.

But because there aren't bruises and broken bones, there isn't a physical record of abuse in many cases. And so women don't feel confident about

calling for help, they don't necessarily name themselves as abused because, of course,

this is exploiting all these stereotypes that you're supposed to do what your husband

3 tells you anyway.

often happens in these situations.

So they don't necessarily call for help and if they do call for help, they say, "I'm afraid. I'm afraid," but they can't necessarily name approximate incident of violence that police can recognize and say, "Oh yes, you're abused," so they often don't get the help they need. They're perceived to be exaggerating or lying about what has happened, and in particular this is true if the partner is there saying, "Oh, she has mental health problems. She exaggerates everything," which is something else that

The final thing I really want to say about coercive control is that the myth that it ends when you leave is overwhelmingly dangerous because, in fact, in coercively controlling relationships, the most dangerous moment is when you attempt to leave, because it is about control; it's not about violence. It's about controlling you and keeping you. So if you are not being kept, if you're refusing -- if you're refusing this paradigm, then you're now at risk of being killed because this is the moment when you are threatening power and control of your coercive controller.

So it is -- the danger is heightened at the time of separation and for a significant period thereafter, and coercive controllers use every trick in the book after separation to try to continue to have control over their partners. So child custody and access, times when you have to meet, tracking continues. Your phone is terrible in this regard, the phones that we now have that follow us everywhere that tell the world where we are. And they're showing up at your workplace; they're showing up wherever you might be and making you feel that even though you've left, you're still not safe, and so therefore maybe you will go back.

Is it unrelenting and, as I said, the best comparison is with a victim of kidnap or a prisoner of war.

MS. KRISTA SMITH: Thank you.

1	As I was reviewing your article, I believe I recall seeing that there is
2	more of a correlation between coercive control and ultimate lethality than there is
3	between physical violence and lethality. Do I remember that correctly?
4	DR. LORI CHAMBERS: It's significantly more correlated with
5	lethality than major damage to the body.
6	MS. KRISTA SMITH: Thank you. So we'll continue with these
7	topics as we go, but we're going to start to shift into considering the institutions that are
8	involved in responding to these types of situations.
9	And to continue setting the scene for us a little bit, Nancy, I was
10	hoping you could talk to us about the policies that have been followed in Nova Scotia for
11	the last, I think, couple of decades?
12	DR. NANCY ROSS: Yes. So the pro-arrest, pro-charge, and pro-
13	prosecution policies were initiated in 1980s and the 1990s, in the 1990s in Nova Scotia,
14	largely in response to mainstream feminists, I would say, who felt that domestic violence
15	and I use the term "Domestic violence" here because these policies name refer to
16	domestic violence, but they're more broadly governing the police response to intimate
17	partner and gender-based violence.
18	So these policies were implemented because people were
19	concerned about safety, they were concerned that they wanted to make gender-based
20	violence a public session, not a personal issue or private issue, and they wanted to
21	remove the onus, responsibility from the victim survivor to report to the police.
22	So they have been so they were initiated by the Government of
23	Canada in cooperation with the Solicitor General and local police departments across
24	the country, so they contribute to the criminalization of domestic violence by providing
25	legal authority to police and prosecution to proceed with criminal charges where
26	reasonable and probable ground exist that domestic violence has occurred. And as I
27	said, they remove the responsibility from the survivor to lay a charge, and many people
28	felt this was a very positive initiation because many as I ori has talked about in terms

Τ	of coercive control, many women may wish to not charge their perpetrator.
2	However, since these policies have been initiated since the 1990s,
3	there has been they have been subject to some critique and we have conducted a
4	scoping review of all the literature published related to these policies since the 1990s
5	and reviewed 296 articles, and there are mixed reviews about these policies now. And I
6	would say that the evidence clearly points to the need for some revision regarding these
7	policies.
8	MS. KRISTA SMITH: Thank you.
9	And we'll continue that conversation as we so as well.
10	Just for the purpose of the record, the scoping review that was
11	conducted is has been entered as Exhibit P-003661. Actually, that's a PowerPoint.
12	And then the scoping review article is P-003672.
13	So with that kind of lay of the land in mind, I'd like to turn now to
14	what we know to be true, is that women often don't report to the police that they have
15	experienced intimate partner or family violence.
16	And Patrina, I'm hoping you can help us to start to understand why
17	women wouldn't call the police in such a situation.
18	DR. PATRINA DUHANEY: Certainly. I mean, there are certainly
19	many reasons why women would not call the police, but what I really want to highlight
20	first before I unpack that is talk about the overwhelming evidence that shows a
21	relationship between race and the frequency and severity of police stops and searches,
22	arrests and incarceration rates both in Canada and the U.S.
23	And so there is certainly unequivocal evidence that shows that
24	black indigenous people are significantly over-represented in the criminal justice
25	system, and so we know that there's a horrific history of colonial violence, oppression
26	and racial injustices.
27	And so when we think you know, looking at that history and

thinking about the reasons why women might be reluctant to call the police, there are a

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1	number of different reasons why they might express this reluctance, and so there might
2	be a concern around fear or retaliation from their partners. They might fear the police
3	may mistreat their partners or even mistreat them.
4	Some women might not even believe that the situation is severe
5	enough to warrant police intervention. There might be a general distrust of the criminal
6	justice system.
7	Within racialized communities, black racialized communities and
8	even indigenous communities, there might be certain messages, whether it's overt or
9	covert messaging, around disclosing the abuse. I want to be really clear that it's
10	because of that long history of racism and oppression.
11	Some women may believe that if they were to call the police for
12	help, they might be either mistreated by the police or they might not be believed. If they
13	have had previous negative contact with the police, they might fear that it might result in
14	another negative experience. They might be disrespected or the police may undermine
15	or even minimize the extent of, the severity of violence in their relationship.
16	MS. KRISTA SMITH: Thank you, Patrina.
17	There are a few other concepts that we'll look at later on as well
18	related to this.
19	For now, I want to turn us to how institutional, particularly police
20	responses are shaped when encountering allegations of intimate partner and family
21	violence. The feminist scholarship has pointed to the fact that many people have
22	misconceptions about intimate partner and family violence. This is often referred to in
23	shorthand as myths and stereotypes.
24	And Carmen, I'm hoping that you can describe what types of myths
25	and stereotypes tend to circulate about intimate partner and family violence and
26	coercive control.
27	DR. CARMEN GILL: Thank you, Krista.

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First I would like to go back to coercive control. And just to give us

an image about coercive control, I generally use the image of the iceberg floating on the ocean. And when you talk about coercive control, you're talking about what you see and you're talking as well about what you don't see, what is underneath.

So there are a lot of behaviours that we are not necessarily seeing that are going to be non-physical, so it's always important to remember that when we talk about coercive control, it involves control and all the forms of violence that we see in intimate partner violence.

I make this link with myths because what we are going to start seeing is that women that are caught in abusive relationships will need to start first to recognize that they are in an abusive relationship and, believe me, this is one of the most difficult tasks for those that are caught in those abusive relationships because it's occurring over time. You don't wake up one morning saying, "Oh, I'm a victim of violence".

So when we want to talk -- when we are looking at how we are perceiving this particular issue, I heard this question many times during the commission, "Why does she stay?". And this is where we start hearing about myths and stereotypes about intimate partner violence/coercive control.

So I will more talk about more coercive control because this is what it is.

So when we talk about myths, it's basically myths, belief about intimate partner violence that are going to lead us to minimize, normalize or, you know, it's going to be considered completely normal to see violence. So basically, we are minimizing the situation.

So myths, for example -- and I -- we can look on the internet for a number of myths about intimate partner violence. The very first one that we are going to hear about is that if they are staying, it may not be that serious, it may not be that violent. We're going to consider that violence is not serious. Like when police are responding, they will see more like verbal arguments, so it will be seen as less serious.

And there's as well when we start looking at how we are treating those that are in abusive relationship, there's blaming the person because we are going to consider that when you are in an abusive relationship, you should take the responsibility to get out of this relationship. And this is not necessarily what is happening.

There are attitudes that are really focused -- there's attitudes that are really focusing on gender roles and gender norms, so basically we are going to view particular roles for men and women in our society, and therefore, when it comes to recognise some form of pattern of violence in a relationship, we will have a hard time to determine this because we are going to consider that men are more in a dominant position and women are more in the private sector, not necessarily making all those decisions.

But what we need to remember with coercive control is that women are losing their agency, and they don't have the capacity. At some point, it's really hard when you're not in those shoes to understand that victims of intimate partner violence have a very hard time rationalise their decisions, and they are going to stay in abusive relationship because it's going to be a way of coping, they are going to develop coping mechanisms. And so when we talk about stereotypes we're forgetting to look at the complexity of the issue, and instead, we are doing like more like a black and white math about, well, if it's violence you should not be there, you should leave. And this not how it's occurring in our society.

And of course, there are as well some stigmatisation that is going to occur around victims of intimate partner violence. So victims are going to fear stigmatisation, especially if they start talking about or disclosing what they are going through, may not necessarily be comfortable in being identified as a victim. There is as well the internalisation of a form of stigmatisation, and they are going to internalise the fact that they are -- that it will become their truth, that they are in an abusive relationship and they deserve it.

And of course there is -- and this is where we're going, we're going through the stigmatisation through cultural stigmatisation, and this is where we are stigmatising victims of abuse through professionals that are dealing with intimate partner violence, with victims of intimate partner violence.

And of course, when we start looking at police, what are the main factors that are going to lead police officers not to be convinced that someone is a victim? Well, you need to a be a true victim. Okay, I'm saying something that is absurd here. But what is a true victim? It's someone that is going to be helpless, that is going to potentially be crying, will be shaky, will have some bruises, will really show that she is a victim. This is what we're seeing, this is what we are expecting. Police officers are not going to believe a victim if she fails to show that she is a victim, that she is victimised.

Imagine, you call the police, you fear the -- your spouse, you don't know what's coming next, and yet you have to demonstrate that you are a victim. And if they are unable to demonstrate a particular posture, it's going to be very difficult for a police officer to understand.

And what I'm saying here, and I'm not -- I'm not judging police officers. I think -- I think they deal with the instrument and the -- they have a toolbox to intervene, so we are going to talk about this, but really, there are elements that are in front of police officers and that prevents them from recognising someone as a victim.

And of course -- can I continue? When we talk about IPV coercive control, we're not talking about an incident. The police officer shows up, he's responding, she's responding to an incident. So when they come to a place, a victim that has to demonstrate that she's a true victim, who is not necessarily reporting an incident but a pattern that she's caught in, how do you do this? And the police officer's narrow in his way of approaching this particular issue because they're asked to look an incident, they're not asked to look for something else. We're not asking them to look at the complexity of the issue. That's a problem to me and others.

1	MS. KRISTA SMITH: Thank you, Carmen.
2	To follow up on that, I'd like to ask you, Lori, in some of the work
3	that you've done in Ontario in assessing, you've been assessing responses, police
4	responses to intimate partner and family violence. From that, maybe can you speak
5	about when police first arrive on a scene, how are they making sense of what they see
6	when they first arrive? How do they make sense of what they're hearing what people
7	DR. LORI CHAMBERS: Well
8	MS. KRISTA SMITH: are telling them?
9	DR. LORI CHAMBERS: what they're supposed to do is
10	separate the parties, speak to them in a quiet, controlled environment, and try to get to
11	the gist of the incident. And Carmen made a very important distinction here, because it
12	is all about the incident that they have just arrived at.
13	So they do use in Ontario, they use ODARA, which is a risk
14	assessment tool, and they are supposed to go through all of those questions. But even
15	those questions, they're often in a hurry, they don't have the amount of time that's
16	necessary to build rapport with a person who's been abused so that they'll get honest
17	answers about things like sexual violence in your personal relationship. So often these
18	forms are not fully completed.
19	So I would say what our study shows, and it's still in its kind of
20	preliminary stages, I'm just working on writing one of the earliest articles that deals with
21	the coercive control piece of the study. It's about 4,000, just under 4,000 police calls
22	over a three-year period in a jurisdiction that is partially rural, partially small urban, and it
23	seems like the police respond very well to incidents that have clear indices of violence.
24	They are concerned about that, they want to address it, they charge appropriately, they
25	take women to places of safety.
26	But when we then looked at what we did with the data was also
27	take unique numbers for the identifiers for the individuals and track multiple interactions

with police. And so what we see is that there are people who had 12, 13 interactions

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with the police during this three plus year time period, and in one of those -- and it's all

2 over the place, the responses to these -- the couple. Sometimes it's considered low

risk, it's non-criminal, nothing is done; other times, the person is arrested. A person

who's been arrested for a very violent crime could then be deemed low risk down the

5 line because they don't necessarily even consult the previous data when they go to a

new call. And it's really not about assessing process, observing changes over time in a

relationship, or talking to women about wider patterns of control.

And I echo what Carmen is saying, that this is not about police deliberately missing this stuff, in most cases. There are of course some bad cops, and I think we can see some of that in the *Ryan* case. But there are -- there are all sorts of procedural things that make it really difficult. They don't have the time and resources to spend the hours that are necessary to build the rapport that is required to gather information in these highly fraught circumstances.

And we need to understand that and provide other kinds of services at the moment of crisis or at least in follow up immediately after a call, wellness checks within a short period of time after a call. Because what we see in the cases that we've looked at in this jurisdiction is that because there isn't any continuity, because we don't necessarily follow the data from one intervention with the couple to the next, there are missed opportunities to prevent escalation and explosion of violence, and we should be concerned about that.

MS. KRISTA SMITH: Thank you.

Patrina, I'd like to take it to you if I can, and taking us back to the myths and stereotypes conversation and thinking about how myth and stereotypes may pervade police responses and how they sort of make sense of what they're seeing. Can you help us to think about how that might affect how a police enter a scene of a culture or nationality that's not their own?

DR. PATRINA DUHANEY: No, certainly.

And you know, to really pick up on what Lori and Carmen have

highlighted, oftentimes police do not understand the complexities of violence in black

- women's lives. We know that women who are often in conflict with the law have
- 3 histories of victimization, whether in childhood, in previous relationships or current
- 4 relationships, and many may engage in defensive actions in response to this
- 5 victimization.

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And so for a black woman, it's really important for us to understand,

you know, there's this history of violence even from police officers, and so highlighting

the piece around stereotypes just like derogatory stereotypes exist in society, officers

may also endorse these derogatory stereotypes and may construct black women, for

instance, as argumentative, aggressive, violent, who instigate a fight or are more likely

to provoke their partners or emasculate black men.

And so these women run the risk of their victimization being undermined and being classified as an accomplice. As Lori highlighted, oftentimes police do not have the time or even use any -- much time to really uncover what has happened in a relationship and how things have really deteriorated.

And so we know that because of these stereotypes that may be held of black women, black women may tend to safeguard black men, black communities from further racial and gendered oppression.

And so certainly what was said earlier in terms of the ways in which some women may conform to this stereotypical images of femininity that construct women as passive, controlled, constrained and if black women conform to those stereotypical images of what a woman is supposed to be and how a woman is supposed to behave, they might not be considered as credible victims.

And so there's certainly stereotypes associated with blackness, crime and criminality which oftentimes masculinize black women's use of force against their partners. They're often demonized and their actions are characterized as criminal, and so with all those different layers, they might not receive the same protection as other women. And police may also justify their use of force and brutality against them

1	or even justify the fact that they might not even take their situation serious or provide the
2	same level of protection.
3	MS. KRISTA SMITH: Thank you.
4	I want to follow up on with Nancy. And I see you wish to speak.
5	Let me pose the question I have in mind for you, but please feel free to comment on
6	anything you've heard as well.
7	I'm just thinking about what Lori said a moment earlier, and Patrina
8	mentioned as well, that there isn't time there isn't time in these moments of initial
9	response for the police to build the rapport and to really assess the situation and to
10	create access to the services that are really needed. And I'm wondering how the pro
11	arrest, pro charge, pro prosecution policy may play into some of that initial assessment
12	of police.
13	DR. NANCY ROSS: Okay. I would like to respond to that
14	question, but I have been thinking about the myths and I just wanted to follow up on
15	what was just said because in my work, I have found that victims or survivors of gender-
16	based violence want a voice. They are some I think a myth is that they are passive,
17	vulnerable and have nothing to say. And so when they get to the court, often they feel
18	that they well, their experience is that they don't have an opportunity to speak barely
19	at all.
20	And so for me, I think that we need to hear from victims more and
21	then, in terms of the police, I think it does response it does get down to a resource
22	issue because given that to listen to people's stories you need to have time and I think
23	oftentimes people police don't give the time necessary to hear from women.
24	So that's one of the myths, is that victims are passive, that they're
25	vulnerable, that they have nothing to say. Most victims, I think, want to contribute to
26	making to ending gender-based violence.
27	And then the other thing that I think is really important to recognize
28	and I think that Carmen started to talk about is victim blaming is out there so

prominently and that this is an individual problem rather than a societal issue.

It's so easy for us to think about it as that person over there, but to
think about it as a societal issue I think it something that invites complexity and invites a
thought that this is something that's -- we're all responsible for. When people about
"Nova Scotia Strong", you know, I think we need to think about what that means and
how do we support people rather than blame them.

And then the other myth that I wanted to address is that all people

And then the other myth that I wanted to address is that all people want to end their relationship and that the best outcome is that -- is that the relationship ends.

About 70 percent of people want to remain in relationship and I think that the possibility of healing and that people can learn skills and learn conflict resolution skills is something we need to consider.

So those pro-arrest, pro-charge, pro-prosecution policies set in motion a response that often people describe as traumatic and women have described have said that if they knew what it set in motion, they wouldn't have called the police in the first place. And this is more so for people who are racialized, who have disabilities and who are economically marginalized. And that is because it also sets in motion scrutiny from child protection services and from other services where women feel that they are under increased surveillance, that they are, as I said, scrutinized and fear losing their children, so I think in terms of a trauma-informed response often these pro arrest, pro charge, pro prosecution policies set in motion a response that is more traumatic and adds a layer of trauma that I think is something we need to really pay attention to and I think provide some impetus for change.

MS. KRISTA SMITH: Thank you. And thank you for following up on the other myths that you wanted to articulate. That's -- I'm glad they're out there.

Carmen, I think you had some follow-up comments.

DR. CARMEN GILL: I think I would like to go back to the proarrest and pro-charging policies because when they put this in -- when they decided to

implement this in Canada, the one thing that they wanted to do was to remove

- 2 discretion used by police officers. And here we have the perfect example of
- unanticipated consequences about a policy that has been put in place in good faith that
- 4 it would help police officers to shape their understanding of the issue, but it's like a
- 5 double-edged sword, so to speak.

Police officers are not exempt from sharing stereotypes and have common beliefs about a victim of abuse, and so research have been showing that police officers that do really consider that women -- that they share a traditional view about women in relationships are less likely to arrest and less likely to refer a victim for counselling.

So really, when we start looking at this particular issue, we're doing with policies that we're putting in place in order to provide some guidelines or parameters for those that do have this important job to determine that they are in the presence of a situation of intimate partner violence but, at the same time, they are dealing as well with their own perceptions.

So I did a study in New Brunswick a few years back where we did a survey with police officers and I wanted to know how they were defining the issue and how they were perceiving this particular issue, and I came up with two groups: those that had a very conventional way of viewing intimate partner violence, and the other group that was more like the progressive -- the progressive group that was viewing the issue more in its complexity. And 60-percent are considering more -- have more perspective, a conventional perspective.

And when I say conventional perspective, police officers are defining IPV in light of the offences that they can use through the *Criminal Code of Canada*. So you can imagine that mainly they're focussing on assault and sexual assault, everything that is going to be related to physical evidence. And then you have police officers that do have this understanding that this is more complex, that this is a pattern, that they have to go beyond what they see at the scene.

1	So there are some roadblocks, so to speak, when it comes to police
2	response to intimate partner violence, and Lori has been as well mentioning this about
3	the risk assessment tool, but I know we are going to come back to this in a few minutes.
4	MS. KRISTA SMITH: Thank you, Carmen.
5	So I'd like to sort of take all these things that we have been talking
6	about and think about a specific case that happened here in Nova Scotia.
7	Lori, you've recently released a book I think called No Legal Way
8	Out, about the case of R v. Ryan. So I'd like to spend the rest of our time before the
9	break talking about this case and maybe unpacking a little bit of what patterns can be
10	seen through the through those facts. So maybe you can just start with telling us
11	about the case and the facts.
12	DR. LORI CHAMBERS: Okay. It's a it's an interesting but
13	horrific case, and it's interesting in a myriad of ways. I'll just try to start with the
14	beginning.
15	It's the kind of a classic presentation of coercive control in that he is
16	somewhat older than her. He meets her in a situation where he has power over her.
17	She's a cadet and he is a trainer in the in the Reserves, and she's very young when
18	they meet.
19	And he love bombs her. He is absolutely infatuated with her, and
20	she falls for the fairy tale, falls for, and that sounds like I'm judging her, I'm not judging
21	her. It is the fairy tale that little girls are fed, that a man who loves you the most will love
22	bomb you. He will be so attentive, he will so caring that he'll just carry you away to a
23	perfect future. And this is what she sees initially with him, even though from the
24	beginning he's aggressive and mean with other people, and she recognises this.
25	Fast forward, she gets married. She doesn't feel confident telling
26	her family she's gotten married. She hides it from them for a period of time because
27	they're concerned about the relationship. She gets married. He is serving and she
28	moves around the country a little bit with him.

Violence erupts first in -- when they're out West, she's with him at a posting, and it starts with a political argument. She's not allowed to have her view of the world. They disagree about politics. He tells her that she's not allowed -- that as a wife, she's not allowed to speak against what he says in public, and from here, you see the beginnings of pretty serious deterioration of a relationship, control of her behaviour, and episodes of physical control and violence.

Fast forward a few years, they buy a home in Nova Scotia, in a rural area. They buy it with money that comes from her parents, not from him, and the parents are distrusting enough that it's in her name with her stepfather, not owned by the husband at all. There's -- there are a lot of signs that things are not well.

They have a child. He becomes increasingly possessive and demanding, doesn't like her paying attention to the child, cuts her off from the family because the family's involved with the kid. She's not allowed to even see her immediate siblings and parents. And he continues this control even when he is posted overseas in Bosnia. He phones her. She has to be home at a set time every day to answer a videocall, and if she's not she knows there is going to be hell to pay.

And she's a teacher in the community with a secure job and a good reputation, and none of this protects her from being absolutely controlled in the most intimate of ways, including sexual violence on a routine basis, being held by the neck, threats that he will kill her, threats that he will bury her. He kills pets, he destroys her property, the list goes on and on. He is a miserable human being.

And she loses weight. She is under 100 pounds, closer to 90 pounds, skin and bones, suffering from PTSD, and starts to discuss PTSD and eating problems and her marital problems with a doctor and a counsellor.

She finds out that he is having an affair with their babysitter, who is underage, who is the woman he later marries and has children with, and she finally says, "I don't have to stay in this marriage anymore." She had been very committed to the idea of legal and religious marriage, and when she finds out he's having an affair

she says, "I don't have to stay", and she tells him she's leaving.

And this threat is heard by others.

And he is very concerned about keeping the property in the
marriage, and is threatening her about -- they have taken from -- there's a very
complicated financial picture where he is stealing money from her parents, effectively,
and he wants to maintain control over that money, so he threatens her a lot. And it
culminates in a day when she is trying to move some of her belongings out of the
house, and he phones her repeatedly while she's in the house with friends moving stuff,
and he threatens to burn the house down with her in it and with her child in the house.

And she phones the police and the police take her to a place of safety. She works with victims services. She's determined to be at high risk of lethality, and they recommend that she get a panic button so that she can contact the police immediately. The police, nonetheless, the Meteghan detachment, make the decision that she doesn't need any such device, that it's all just ordinary family separation, it's a civil matter, and none of it is a -- represents a danger to her.

In the three -- in -- over a three-month period after their separation, his surveillance of her heightens. He is -- he follows her to work, he goes -- waits in the parking lot for her at work, he phones her repeatedly. She feels that she is never going to get any help. She calls the police over 17 times, nothing happens. In fact, she is told when the police come to the school where her husband is waiting in the parking lot, she is told not to criticize a soldier by the police. And she decides that there is no way she is ever going to get out of it, it's him or her, and he has to go or she is going to die.

She's also very concerned about custody proceedings because she has been deemed by an assessor, who doesn't understand domestic violence, as having mental health problems based on Michael Ryan's story, and she sees that there's a possibility she's going to lose custody of the child.

It's a -- it's all very upsetting and disturbing.

She then is called by the police, cold-called by the police offering to

solve her problem. They have heard about this, we don't know exactly how they heard

- 2 about it, but they -- cold-calling to offer to kill him for her. And so she meets a police
- officer in a sting operation, a Mr. Big operation, totally inappropriate for use in the
- 4 context of domestic violence, and they -- when she gives -- hands over money and
- says, "Here's the contract on him, please kill him", she's arrested.
- She is charged with a crime not committed. She is sentenced --
- she is set for trial. She posts bail, her family posts bail. She says when she is put in jail
- that it's the first time she's felt safe in years, which in itself is overwhelmingly sad.
- In the meantime, the custody proceedings go forward before the
- court case can go ahead, and he gets custody of her child and she has not really seen
- 11 her daughter since.
- 12 When they go to court, her lawyer, Joel Pink, does an excellent job
- of bringing evidence about this abuse, and she spends many painful hours on the stand
- describing in intimate detail guns being held to her head while he rants, the threats to
- 15 kill her.
- She only breaks down at one point. She is remarkably strong and
- powerful on the stand, and I agree 100 percent, Carmen, abused women have a lot to
- stay about what abuse looks like. And she -- her comments could be -- stand alone as
- a definition of coercive control because she talks about, "He's my husband. I'm not
- supposed to say no to sex". What does it mean? He holds me by the neck and tells me
- 21 not to say things, but he's not hurting me. So this failure to see even for herself that it is
- 22 legitimately abuse.
- But the -- Justice Farrar, at the court of first instance, is very
- 24 attuned to these issues. He acquits her. She chooses a non-jury trial, just before the
- Judge, Justice Farrar. He acquits her on the basis of duress.
- This acquittal is upheld by the Court of Appeal in Nova Scotia under
- 27 Mike MacDonald, and the -- and a panel with him, of course. And the appeal decision is
- a very feminist, principled discussion of how the law has to understand the position of

what they referred to in the decision as a battered woman when she is trying to escape and acknowledging that it doesn't end when you leave. In fact, it intensifies.

The case then goes before the Supreme Court, where the Court acknowledges that she is a deeply abused woman, that he subjected her to a reign of terror and that -- but the case is overturned on the basis of a legal technicality that duress should not have been applied, but because the Crown changed its mind about using -- about whether or not duress was legitimate, they say you can't be a retrial, so there's a stay of proceedings so she can't be forced to go through this process again.

And they also castigate the RCMP. They say the -- it seems -- it's disturbing, they say, that it's -- disturbing that the RCMP seemed more eager to engage in a sting operation with an abused woman than to come to her assistance when she asked for it.

So there is a real rebuke of the RCMP's behaviour in the Supreme Court decision.

So immediately following the Supreme Court decision, Mike Ryan responds with a YouTube video in which he deflects, denies and defames, and he says that instead Nicole Doucet is the aggressor, that she is the person with the violence problem and that he's innocent and has never done anything wrong.

This gets thousands of views, mostly likes, and unbelievably vicious misogynist comments. In fact, threats to Nicole Doucet's life appear on this -- in the responses to this video.

This is only a few days after the Supreme Court's decision is released.

In the wake of all of this, there's demand -- public demand for an investigation into the behaviour of the RCMP and the Commission for Public Complaints reviews the case. But we need to understand here the problems in the process of review of police because police review themselves, effectively.

There is no accountability for police when they do the wrong thing. It is -- it's absolutely appalling the way this decision deflected all blame from the RCMP

- and it may have been reasonable to say that individual officers were not at fault
- 2 because they were following the letter of the law. And Carmen and Nancy have talked
- about some of the real problems in the law, and so they were following policy. There
- 4 were no -- there were discretionary mistakes, but there were no clear violations of
- 5 existing policy. But they went beyond that and they suggested that Nicole Doucet was,
- 6 in fact, lying and that the abuse hadn't happened.
- 7 It is an absolutely appalling report.
- 8 As soon as it was released, media coverage of the case was
- 9 dramatically transformed and culminated in an episode of W5 with Lloyd Robertson, you
- 10 know, Canada's most respected news network. The program by Victor Malarek --
- directed by Victor Malarek and produced by Victor Malarek in which he completely
- ignored all of the written decisions of the courts, all the evidence before the court and,
- instead, relied on Mike Ryan and his family and -- to describe what he saw as a
- vengeful and jealous wife who wanted to get money from Mike Ryan by killing him and
- getting his life insurance policy and getting revenge because he was having an affair.
- This is absolutely not the case. She was happy to be separating.
- 17 She had been working towards it for a long period of time. And the money was all hers
- to begin with. It had nothing to do with him. And there was no life insurance policy.
- So the entire story that appears in W5 is straight-up wrong and it's
- one of the most disturbing pieces of this case when we were writing this book. It's
- written with my friend and colleague, Nadia Verrelli.
- And one of the most disturbing pieces to me is that the police, yes,
- 23 made mistakes, the court actually -- the lower court got it right, which is unusual. The
- Court of Appeal was fantastic. The Supreme Court, while they offered a very limited
- doctrinal decision, still saw the abuse for what it was, but the media behaved in a way
- that is absolutely reprehensible and extraordinarily damaging.
- And it raises grave concerns for me about public understandings of
- intimate partner violence and coercive control, and I think that's probably enough

evidence about that case. Have some good discussion. 1 MS. KRISTA SMITH: Thank you. 2 That did -- that gives us a lot of detail to work with. And I think the 3 way I want to use the rest of our time before break is to invite each person on the 4 roundtable to think about the different institutions that were players in this story and just 5 - I provided some comment on, you know, whether that rings true with your experience 6 7 or your research, so for me, the institutions that I heard were the police. And I'm 8 interested in matters including oversight and accountability, sort of complaints 9 processes, and as well I'm interested in training that police may receive, policies that 10 guide their actions. So that -- that's one institution, the police. There's something --11 there's conversation to be had around the courts and how the courts approached this 12 set of facts and, as well, intersections within the court process between sort of criminal 13 processes and family processes and how that creates a whole picture for a woman and 14 her life that the courts sometimes don't see each other. And then the institution of the 15 16 media. So I'm just going to throw out the different institutions and kind of let 17 you each comment. 18 Nancy, can we start with you? 19 DR. NANCY ROSS: Sure. 20 There's so much to say there, I don't know where to start. But in 21 22 terms of the media, I guess I would -- and the concern that Lori raised about how gender-based violence, domestic violence is perceived in the general public, it raises -- I 23 24 think these roundtables have a role to play maybe in terms of raising this issue as one that is a societal issue. 25 It's not uncommon. It's very pervasive. It's one where often the 26 27 victims are blamed where, in this instance, we could see clearly that her trajectory as a

woman who was victimized by her partner was downplayed and how her partner was

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able to manipulate all systems, I think. Often partners are able to manipulate the court 1 system. He certainly manipulated the media. And I think police often are careful 2 around how they treat men and perpetrators and have -- often don't see the whole 3 picture in terms of what a woman is going through. 4 So I think -- I think this case really highlights the need to check our 5 attitudes related to gender-based violence, to recognise it -- that it is pervasive and to 6 7 see the complexity involved. 8 MS. KRISTA SMITH: Thank you, Nancy. 9 Carmen? **DR. CARMEN GILL:** Let's talk about an elephant in the room, and 10 it's about training. And from my experience, and from what I've seen in Canada, police 11 organisations do provide training about this particular issue for police officers to 12 intervene, but the problem is that it seems to me that when they are providing training 13 they seem to think that they train once and they're done. And the problem is that the 14 15 issue evolves. 16 Police officers are changing, and if we talk specifically about the RCMP, they move around a lot. Where do police officers receive training, do you think, 17 about intimate partner violence? They go through the different schools of police. They 18 get few hours about this particular issue. What they are learning is how to use the 19 Criminal Code and how to intervene on those incidents. They are not necessarily 20 21 trained to understand the complexity; however, police agencies are saying "My police 22 officers are trained", but they are trained to see something very specific. This particular case is it's a no-brainer. It's clear that there is 23 24 violence in this relationship. It is not just the one time, it's not just the one incident, it's repeated, it is overtime, it's accumulation of different behaviours and a combination of 25 strategies that the abuser have been using against this particular woman. 26

think we need to go even further with police officers because they do have this

So when I start thinking about police intervention, police response, I

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Roundtable Roundtable

responsibility to recognise what they are dealing with. It's -- it's extremely difficult to see

- that they cannot see it when we are, I say "we" because I feel -- I -- I am a woman, and
- 3 if I was in an abusive relationship, I would want to get the protection of the police, I
- 4 would want them to do something in the situation. I would not want them to come in my
- 5 house, stir the pot, separate the partners, and then leave. Because we know through
- research that the police intervention, if they don't do anything, it's generally fuelling the
- 7 abuser, so we're leaving the victim there with the abuser. He composes himself, is --
- 8 you know, he's really good. Right?

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But this is what coercive control is about. Those people are extremely good at presenting themselves as really controlling the situation, and they are perfect, and then they -- the police are going to leave, and we are leaving a victim in that particular situation.

Training is going to be key, but there is more to do. Can I go there?

I think we really need to recognise the complexity of the issue. If we want to train police officers, it's not just about how they intervene at the scene on an incident basis. We need to have a real paradigm shift in the criminal justice system that starts with the policing, but then it goes as well to the court. It goes to lawyers, prosecutors, and then judges. Everybody has to be on the same page.

If we want police officers to have a better understanding of the issue, they will, and in fact, I can name you places in Canada where it's happening, there is work happening. But if police officers are making those changes and the changes are not happening at the prosecution level, what will happen? Those police agencies are going to be extremely discouraged. And then if you have prosecutors who are embarking on this, but then the judges can't see a thing, this is going to be extremely problematic.

So I know it's a -- it's big, but we need a major paradigm shift in the criminal justice system that starts with policing and all those levels. That's what I think.

MS. KRISTA SMITH: Thank you.

1	Patrina?
2	DR. PATRINA DUHANEY: You know, I Lori, that was such a
3	passionate telling of the story, and thank you so much for giving us such great context.
4	I do agree with what has been stated by both Lori and Carmen.
5	And you know, not to repeat what has already been said, as I listened to Lori sharing
6	this story, it made me realise just the when we think of intimate partner violence, IPV,
7	we must recognise the various systems that are implicated in either reinforcing or
8	revictimizing a woman who has experienced violence. And so we see we hear about
9	the accused, the criminal justice system, even social service responses and how the
10	media has taken up the issue. And so, you know, I agree that the media plays a vital
11	role in capturing accurate information and ensuring that they really discuss the
12	complexities of a woman's experiences of IPV, but I really agree with what Carmen has
13	just said, that there has to be a paradigm shift.
14	And oftentimes we think of the police as if they are they are a
15	standalone entity, and we have to look at the system, the criminal justice system, as a
16	whole, from the court system and so forth, and how policies and procedures play a role
17	in reinforcing some of these barriers what women continue to face, and the violence that
18	they continue to face. And so we can't even begin to unpack the nuances without
19	looking at the interconnections between these systems and that we need to make
20	changes on multiple levels, not just with the police, because these systems are all
21	implicated in reinforcing violence against women.
22	MS. KRISTA SMITH: Thank you.
23	Lori, anything you would add to kind of wrap up our discussion on
24	this topic? No, you're a little bit muted.
25	DR. LORI CHAMBERS: Full system changes. A paradigm shift.
26	Everything that could go wrong will go wrong, and we need to tear down the system and
27	fix it with something brand new.
28	MS. KRISTA SMITH: Okay. Well, when we come back we are

- going to talk a little bit about the work that's being done presently to try to start to create
- the change, and then we'll finish with a discussion of perhaps what's getting in the way
- of some of that work and what's needed to go the distance here. So thank you very
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- 5 **COMMISSIONER MacDONALD:** Thank you very much, Krista,
- 6 and panel. We'll break for 15 minutes.
- 7 --- Upon recessing at 11:00 a.m.
- 8 --- Upon resuming at 11:18 a.m.
- 9 **COMMISSIONER MacDONALD:** Thank you.
- Ms. Smith?
- 11 **MS. KRISTA SMITH:** Thank you very much.
- So as promised, we're going to pick up the conversation now with some of the work that's being done to move things from where we have been, sort of historically, and continue to work through today.
- 15 I'd like to start off with Carmen. Can you tell us a little bit about
 16 how police use risk assessment tools, and how that might influence their exercise of
 17 police discretion?
 - **DR. CARMEN GILL:** Absolutely. Risk assessment tools that are used in -- for incident of intimate partner violence have been developed in a way that police officers will have some form of guidelines when they intervene, when they respond to a particular situation.
 - Those risk assessments have the purpose of giving some parameters to police officers when they respond. So basically, just to give you an example, police officers are not showing in at a scene and starting to make their own decisions, in light of what they feel and how they see the situation. They will have some guidelines that are going to be provided to them, and they are going to respond in light of those questions that they can ask in -- depending on the tool that they are going to use.

1	And so in Canada there are some tools that have been
2	implemented and used, and I want to acknowledge here my colleague, Dr. Mary
3	Aspinall, who has been writing this particular piece in our Foundational Document.
4	So there are different type of assessment tools, and I'm flipping the
5	pages because there's a lot of acronyms when it comes to risk assessment tools, and I
6	can't remember the long terms about those assessment tools.
7	So I will just mention earlier Lori was talking about the ODARA.
8	Well, the ODARA is the Ontario Domestic Assault Risk Assessment, and it's been used
9	and it's still used, in Ontario, New Brunswick, and Nova Scotia.
10	There is, as well, what we call the B-SAFER. The B-SAFER is the
11	Brief Spousal Assault Form for the Evaluation of Risk. To my knowledge, they are
12	using this risk assessment tool in British Columbia, and in combination with a new
13	assessment tool that they are using to assess coercive control.
14	There is as well another risk assessment tool that is called a
15	Danger Assessment. The Danger Assessment has and I'm going to come to the
16	purpose of those risk assessment tools. So the DA, the Danger Assessment, is to try to
17	assess the risk of lethality. In the case of the ODARA, we are really looking at the
18	we're assessing when there is physical violence, when there is evidence of physical
19	violence, or if there is a threat of being killed in a relationship.
20	So the police officer is going to use this assessment tool when
21	there are those two elements in the situation, and they're going to start to see that this
22	can be problematic.
23	Then the B-SAFER is also going to look at making an assessment
24	about a particular situation. They are not necessarily looking only at threat and physical
25	violence, but they are going to contextualize, a little bit more, the situation.
26	These are really the two main risk assessment tools that are used
27	by police officers. Then you will have what we call checklist, depending on where you
28	are in the country or under which police agencies you are working with, you will have a

checklist, and we will check different items in -- on the list to determine if we are in the
presence of, first, intimate partner violence and how risky the situation might be.

So I will come back to the ODARA because this is the one that is

really of concern for us in, I would say, the Maritimes. And you will understand that, for me, working and trying to understand the complexity of intimate partner violence, if we're asking police officers to understand this complexity and the only thing we're giving them is the ODARA, they will not assess the complexity of the issue because they are just going to assess the risk of -- it's going to be a predictive tool to see if someone has

a chance to reoffend. And, really, it has to be -- I see your face; I'm not clear.

It has to do with physical or the threat of being killed by the perpetrator. So, basically, if there's none of those two things, what do you think the police officer is going to do? They do not have the tool, the mechanism, in order to really assess a situation. And, for me, this is extremely important to recognize that --well, first I want to say that those assessment tools have done good, you know; it's not completely negative, but they are far than enough to really understand the situation.

So on one hand, we can say police officers are not doing much.

But how can they do more when we are not giving them the opportunity to go further?

And the risk assessment tools have been used especially to limit the discretion that police officer may use.

The use of discretion means that your perception, the attitude that you share about intimate partner violence, can come in the way in your intervention. So if you are considering that, you know, this may not necessarily be dramatic, you can use your own discretion for not assessing.

Now, I'm going to shift, and I will say, well, with what we have right now, police officers need to use discretion. They need to go further in order to understand, to really put -- to really determine that they are facing intimate partner violence.

So these are risk assessments that are used in Canada. Of

course, we can go further and look at what's happening in the world, and there are right
-- there is right now some other risk assessments that have been developed and so we
are looking more at a risk assessment tool, it's called the DARA, just to confuse
everybody. After the ODARA, we have now a tool that is called DARA, and now I am
looking for where it is here, because I would like to give you the proper -- if I have the
proper name on it.

It is a tool that has been developed following -- and I'm going to -- I don't have the -- I just have the acronym. But in the UK they had a risk assessment tool that is called the DASH, and they've been using this particular tool to assess situation of intimate partner violence. With the offence of coercive control that they have implemented and adopted in 2015, they realized that the risk assessment tool they were using was not allowing them to really assess those situation. So they come up with an assessment tool that they piloted last year, and it's called DARA, where they are really asking questions about if someone is making threats, if you have been called names, humiliated, degraded, controlled; does someone control your daily activities, so it's broadening the understanding. It's really helping understand the complexity of the issue. And instead of having a yes/no response because that's really boxing people, it gives a gradation so from "never" to "all the time", so the person, the victim, can actually put a timeline or a timing or the repetition in the particular behaviour that they are asked about.

I want to come back to Canada because in British Columbia, especially with the police force in Victoria, especially -- this is there where they have been really focusing on coercive control, and rightly so, following the case of *Cotton and Berry* where there was coercive control. He finally got access to the children and he killed the kids.

What they've been doing in Victoria is that they really start looking more at how to assess coercive control situation. And they have developed a training module that is now on the Canadian Police Knowledge Network that is assessing -- that

allows police officers to better understand the issue because it's not just about the
physical violence, but it's all the non-physical violence that they are going to be training
in order to be able to assess those situations.

Police officers, and I'm going to repeat myself because I've said

Police officers, and I'm going to repeat myself because I've said this many, many times, they have a very important role in our society when it comes to the criminal justice system. They have the role of determining that what they're dealing with is a crime of violence in intimate relationship.

So if we are not providing them with better ways of approaching those situations, we are going to continue to fail many victims that are not finding any support and response when they call the police.

MS. KRISTA SMITH: Thank you.

Lori, I'm wondering if you want to follow up a bit, if you have views on risk assessments and if they -- from your perspective, if they do help us, are they a step in the right direction in helping police to grasp more quickly what it is they're encountering when they come to respond to a call.

DR. LORI CHAMBERS: Well, I think that we're -- we need to distinguish between two different types of risk assessment, and I don't think we do this very well.

So police are coming to the door trying to assess immediate safety and I want -- if someone has a gun to my head, I want someone to respond and make sure that gun gets, you know, released to the police and that I'm protected. But the longer-term protection requires a much more detailed understanding of the individual situation than just resolving an immediate threat and the risk assessment tools that have been thus far used by police are really designed more -- as Carmen noted, other than the one starting to be used in B.C., they're really designed more for that immediate response and is there an imminent threat of lethality.

And what we've been doing in Thunder Bay is I have worked with our local shelter and designed a coercive control assessment that they use at the

1	shelter when someone comes in that is a much more detailed document. It's it really
2	takes quite a couple of hours for them to work through. And it's also accompanied by
3	a whole bunch of training materials talking about why each of the topics needs to be
4	covered and talking about ways that you could explain it to someone who's a victim who
5	might not recognize that the behaviours to which they've been subjected are actually
6	abusive.
7	And so I think that the wider assessment needs to be done outside
8	of police and then police need to accept the assessments that are made by agencies
9	that are better informed about what abusive relationships look like.
10	Not that we shouldn't also improve police response, police
11	understanding and police training, but I fundamentally believe we need to separate
12	these things out and provide more resources on the supporting the victim side that are
13	non-police based.
14	So there are programs in a number of places with police advocate
15	kind of partnerships in arriving at domestics and where the advocate will connect with
16	the victim and then do wellness checks and follow-up, and that would be a better
17	opportunity for a more fulsome and holistic under to develop a more fulsome, holistic
18	understanding of the relationship and to develop rapport with the victim so that
19	someone might have a person they can look to with trust which, for many people, is not
20	going to be the police, right.
21	There are fundamental barriers to that, and that's not that's also
22	true for some victim services. It's certainly true for CAS and social work in some cases.
23	But still, it's a better possibility that you're going to have a more fulsome understanding
24	and better rapport if you move it out of the hands of police.
25	So that would be my response on that issue.
26	MS. KRISTA SMITH: Thank you.
27	Before I take it the next step, I want to pause and note that
28	someone came to our aid, thank you, with some of the acronyms.

1	DASH is Domestic Abuse Stalking and Honour-Based Violence
2	Risk Identification and Management Model. That is a mouthful. And that's referred to at
3	page 41 of your Commissioned Report. And then DARA, D-A-R-A, is Domestic Abuse
4	Risk Assessment, and that is described at page 42 of your Commissioned Report.
5	Thank you.
6	So Lori, to go back to where you just left off Nancy, I know I
7	mean, you're coming from the school of social work and in some of our conversations
8	you've said to me that it's not always about the police response or carceral approaches.
9	How would you kind of pick up on where Lori just left off?
10	DR. NANCY ROSS: Oh, yes. There's so much to say here.
11	But many people have shared with us in our research that the
12	immediate response was often traumatic and then they felt they had no response, they
13	were left on their own. And so the safety falls apart following the initial response, and
14	they also feel that they're left with no support.
15	So I believe that in exploring alternatives to police response that
16	social workers could accompany police. I know there's different models, as Lori was
17	referring to, around the world and in our country that look at mental health trained
18	people to accompany police on all domestic calls.
19	So I think that we do have to invest more resources and that we
20	have to start to get better at acknowledging the complexity. And at that initial time of
21	contact, often people are traumatized and we don't necessarily hear the full picture.
22	And you know, so I think it's within that context of relationships over
23	time that people begin to get a firmer picture of what's happening and a more detailed
24	perspective of that relationship.
25	And then also, I think in terms of follow-up, people are starting to
26	talk a little bit about what happens when you call the police and often child protection
27	services is involved. And as I mentioned earlier, often women and families experience
28	heightened surveillance and also, at the same time, report a lack of support.

And so I think tomorrow's session will talk a little bit more about community supports and wraparound supports and ways that we can intervene that is not punitive or adversarial, but more relational and more supportive. And I think people have talked earlier about the public health model and looking at -- and a social model and looking at these issues of relationship violence in terms of a broader context that begins to acknowledge some of that complexity that I think we've all been addressing.

MS. KRISTA SMITH: So to say with the theme of complexity and getting better at recognizing complexity, Patrina, I was hoping you could talk to us a little bit about the work that you've been doing with the Calgary Police Force.

this work with Calgary Police, they recognise that police -- the police culture needs to change. And so with some of the -- with the work that I've done, I have -- I conducted research that looked at Canada, the U.S., looked at New Zealand, UK, really to look at the ways in which these systems were taken up issues of equity diversion inclusion, as well as anti-racism.

And what I found in conducting this environmental scan is that oftentimes police agencies they might respond in a reactive way. So they are using language of equity diversity inclusion, but it's really performative. Right? When it gets down to you're dealing with these deep-seated issues, the police is a system, and you know, they way they've been operating historically for them it has worked. Right? And we use the term, you know, "punitive", "adversarial", and because it's worked they want to, you know, maintain that power and control over individuals.

And so I see that there is significant work that needs to be done because of the way the system has been designed and the way it has been functioning, and so with some of the recommendations I made, it's really important that we examine alternative approaches to policing. And I know that it's been mentioned that social workers can also be part of this change, but -- so social workers have historically been agents of the state, and I'm speaking as a social worker myself.

1	And so I think we also have to be critical in terms of those roles,
2	and whoever is intervening, that they are not necessarily acting as agents of the state to
3	continue to criminalise communities or often marginalise. And so just some initial
4	thoughts right now.
5	MS. KRISTA SMITH: I'm still curious, though, to know with some
6	of the recommendations that you made to the Calgary Police Force, like did you start to
7	suggest ways that some of the historical ways of acting and perceiving can be
8	dismantled?
9	DR. PATRINA DUHANEY: Absolutely. So, you know, I can
10	certainly list some of the recommendations that I made to the police. So there are
11	actually nine recommendations, and the first recommendation is that it's really important
12	for the police to implement anti-racism training and education for all police personnel.
13	Oftentimes, it's frontline officers or workers who are asked to do this training, but it has
14	to be a top-down, bottom-up approach. So that's the first recommendation.
15	And the second recommendation is that it's really important to
16	develop recruitment, retention, and promotion strategies for who the bodies who are
17	within police so that we diversify the police force from management to frontline staff, as
18	well as those in positions of power.
19	There also has to be a complaint process that really takes into
20	consideration the horrific harm that the police has actually engaged in with, specifically,
21	racialized Indigenous communities.
22	Another piece is that we need to overhaul the current policies and
23	modify police use of force. Because oftentimes we might think that police use of force
24	is, you know, taking place in the U.S., but are certainly seeing a lot of cases here where
25	the police are engaging in problematic and violent behaviours. They have body cams,
26	but oftentimes research shows that a body cam is can be really ineffective, especially
27	if they can just turn off the body cams when they wish to turn them off.

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But when we go a little bit deeper, some of the recommendations

- had to do with developing mechanisms to engage with Indigenous and racialized
- 2 communities. Right? Because currently, it's -- these communities really experience the
- police, they're really distrustful of police, and so, you know, the police need to invest
- 4 time and effort to build relationship with these communities. Because the relationship is
- 5 not established, it's very difficult to enact change.
- 6 Another recommendation was around transparency and
- 7 accountability. The police need to be more accountable for their actions. They are not
- above the law, they're currently functioning as if they're above the law. And we can see
- 9 that in terms of even the research in terms of when they had engaged in problematic
- behaviour the fact that they're policing themselves they are less likely to be held
- 11 accountable for their actions.
- 12 It's really also important, we talked about resources, that, you know,
- although a lot of resources is being spent to criminalise communities and surveil
- communities, these resources need to be allocated towards training and developing
- 15 effective strategies to bring about change.
- And finally, we need more race-based data collection. And I've
- critiqued the ways in which our current government collects data that homogenizes
- everyone's experiences, and so it's really important that we have this aggregated data
- that looks at the complexities across different racial and ethnic groups.
- MS. KRISTA SMITH: Thank you so much for detailing all of those.
- 21 I'm going to turn now to -- back to Carmen, and ask you a little bit
- 22 about the work that you have been doing with the Canadian Police Association --
- 23 Canadian Chiefs.
- DR. CARMEN GILL: I would like to as well share what has been --
- 25 has been mentioned so far, and what I -- what I remember here, what I will -- what I will
- remember is collaboration. And this is something that needs to happen more and more
- often between police agencies and other organisations, and this is something that is
- 28 extremely difficult for police agencies to cross that line to work with others.

There are police agencies in Canada that are doing great work. 1 2 They have developed a domestic violence unit that they call that; they do have real collaboration, for example, with community-based organisations, in particular places in 3 Ontario. Patrina was talking about social workers. Police officers could work with social 4 workers as long as both of them are recognising what their role is when they are 5 working with a victim of intimate partner violence. So that was my comment. 6 7 My work right now, which has been since I joined the Crime 8 Prevention Committee at the Canadian Association of Chiefs of Police, has been to 9 really help transform and change practices. So in 2012, I started doing some think tanks with police officers to start talking about what are their practices in different 10 regions to realize that they don't talk to each other necessarily; however, we will have a 11 police agency somewhere in Canada that does a great job working with communities, 12 nobody else is aware of this. 13 So we started this way -- this is how I started my work with CACP, 14 15 which is the acronym of the Canadian Association, and from there, police agencies 16 have been asking me to keep them together. And of course my response was, "Well I don't have the money to keep you together, but we are going to work together." And I 17 have decided to develop what we called the National Framework for Collaborative 18 Police -- Collaborative Police Action and Intimate Partner Violence. That was the very 19 first document that has been endorsed by CACP in 2016. 20 In this particular document, they are laying out different guidelines 21 22 on how police agencies should handle intimate partner violence. And here I'm speaking about this because it's taking us to the organizational culture and the desire at a certain 23 24 level of policing to change how they're doing things. So I see this from, of course, this is what I'm witnessing with my work with police agencies. 25 Then after that, of course, it's percolating; right? Police agencies 26 27 are telling us they want to stay connected, but you don't know how they can stay

connected, so I decided I would go further on the understanding of intimate partner

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violence. And so I did an evaluation of the national framework across Canada, and I 1 met again with the Crime Prevention Committee, and they -- what I heard at the Crime 2 Prevention Committee, they said, "We're doing -- we think we're doing what we're 3 supposed to do in order to better intervene in those situation. We train our police 4 officers tell us what we're doing wrong." Like, how can you answer such a question to 5 police agencies? And that day, genuinely, I said, "Are we sure that we are looking at 6 the issue the right way?" And this is where my project about coercive control and risk 7 8 assessment came to light, because I thought, gee, there is something that we're missing 9 when we talk -- when police officers are responding. So I started this project., I thought I would be the only one jumping in and that police agencies would just, you know, like 10 mice just run away. And then I realize that they wanted to be in this particular project, 11 and they support this particular project, to the point that they are considering that 12 coercive control should be criminalized. 13 So I decided to do round tables, which I'm well known to do in my 14 15 research projects because I like to hear from the experience of those that are dealing 16 with those issues, and I was surprised and not surprised to hear police officers telling me what is coercive control. And so those round tables have been allowing them and 17 myself to get to understand that they don't understand the complexity of the issue.

However, police officers are not stupid. When police officers are intervening, when they go in a home, those that do have a progressive perspective -remember what I was talking before the break -- know there is something happening in the home, but they have no way of addressing, or making a move, or taking action because their toolbox does not allow them to do anything.

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I heard police officers telling me, and this is really hard to hear. they're saying, "You know, we're leaving that home, and we're just hoping that next time we're going to come here that there will be evidence that we are going to -- that are going to be sufficient, so we can be able to charge the abuser." This is frightening when you hear police officers that are telling you this.

So in this particular project, I've done numerous round tables across Canada. I heard about police officers, some of which are more advanced than others, and then we have to make that distinction between the higher level in police agencies and those that are on the ground, I mean, the patrol. And when we talk about the patrol, we're talking about another group of people in policing. They have -- the way they are doing their work is that they are responding to different calls. It's not just -- they're not just doing IPV, the whole -- during their whole shift. They're doing all sorts -- they're responding to all sorts of calls. And in their work, they have to be efficient. And efficient means how long do you spend responding to a particular call.

What I've heard from, and here's the level, the higher level of police agencies where I talk with chiefs, deputy chiefs, those that are in command of those unit for serious crimes are saying, "We're asking our patrol to spend the time to really respond to those situations." I haven't heard a police chief telling me, "Well, they should not spend more than 20 minutes in a scene." That's not what I heard. It's the opposite. But at the patrol level, you will have different ways of viewing this. You will have police officers that are going to be seen as very effective because they have responded to many, many calls, and some police officers that are seen as less productive because they're responding to less calls. In fact, it's not -- it happens that a police officer is responding to an intimate partner violence situation and he's going to receive a call from the superior asking how long you're going to stay there. So there are different ways that police officers are working that could be revised. So my project is really about understand the complexity.

We did a survey across Canada with police agencies. We're just looking at the results of this particular survey. We used a survey that was conducted by Amanda Robinson in the UK. Of course, I'm looking at the UK a lot because they're the first to develop -- to adopt the course of control offence, and she was producing two vignettes in her survey. One was there was two sentences about physical violence, and in the other one, there was no sentences about physical violence. And so the idea is to

understand how police officers are reading those two vignettes. And, of course, police

- 2 officers were not reading both. They were randomly receiving one or the other. And
- 3 surprisingly, we've noticed that even in the vignette where there was no physical
- 4 violence, they were recognizing that there was violence, but there's not much that they
- 5 can use in order to move forward with this particular -- with those particular offence. So
- 6 this is one -- another aspect.
- 7 This project is going to lead to help develop training with L'École de
- 8 police nationale du Québec, because we have a partnership with Quebec as well. And
- 9 CPKN, the -- I always have to think. The Canadian Police Knowledge Network. And so
- there's this particular project that is ongoing, and then we're developing right now the
- 11 Canadian Centre for Policing Intimate Partner Violence, and really, we want to ensure --
- and I'm coming back to stay connected -- we want police agencies to stay connected.
- We want them to share their promising practices. We want to see more a holistic
- intervention from a police perspective. So the Centre is about policing but it involves
- other people. It involves other agencies, so there will be in this particular centre,
- 16 collaboration with other agencies.
- Finally, I have a group of, I will call them police officers, well, I
- would call them my experts, that are now working on the development of another
- 19 national framework -- I think I like national frameworks -- on coercive control from a
- 20 police perspective. And I say I like national framework because I really think that we
- 21 need to understand the issue from coast to coast to coast to coast. Whatever coast
- we're looking at, we should consider the issue, have a similar understanding
- everywhere in Canada. So that's why I'm working more at the national level; however, I
- like to work with police agencies in New Brunswick.
- MS. KRISTA SMITH: Thank you very much, Carmen. There was
- a lot you just shared there, a lot to unpack. I think I'm just going to pick on one element
- 27 of it.
- Lori, I'm wondering, what do you think of the idea of criminalizing

coercive control?

control because it sends a public message that these behaviours are unacceptable and criminal. At the same time, I'm really nervous about it because in the same way that pro-arrest policies have led to dual charges and women being -- finding themselves in jail because they're deemed to be aggressors, coercive control legislation could be manipulated by abusers and used to punish women. And I don't see criminal solutions as ultimately what we need to do. We need to start -- instead of responding after the fact, we need to move to more preventative types of approaches. And I also do believe, in all but the very worst cases, in the possibility of healing that Nancy was talking about. So, yes, I think we need to, but with deep reservations.

And I think something else that I want to make sure gets mentioned is that training needs to happen beyond police. This has to be a paradigm shift for the wider society. It's not just about changing policing policies, because if all we do is look at the police and say, well, they're the problem, it's not going to get fixed. I mean, if we look at the *Cotton v Berry* case, and I submitted the article that I wrote, it's submitted as one of the exhibits, those -- she was subjected to coercive control, and she extricated herself from the situation, and criminal proceedings were never engaged. But Family Courts don't understand and we're not keeping children safe. And those children died because the Family Court didn't recognize a pattern of coercive control that put the mom and even more so the children at risk, and they were sent into a very dangerous situation which could have been prevented and Nicole Doucet lost custody of her daughter. And so we need, very clearly, we need training for judges. We need training for judges not just in criminal proceedings but across all sectors that engage with families.

And this is happening. There is a push for this. It's led in Ontario by a woman by the name of Jennifer Kagan, who I've worked with quite closely. She -- it originates in a very sad story. She was a victim of coercive control. And in a revenge,

what she believes is a revenge killing, her ex-husband and her then four-year-old 1 daughter were -- their bodies were found in the valley in Rattlesnake Point after he took 2 her hiking in completely inappropriate weather. She's certain it's a murder/suicide and I 3 agree with her that it is, although you can't -- we can't explicitly say that. It's not proven. 4 But it is certain that restrictions on his access would have prevented that. And they 5 didn't happen despite unbelievably strong evidence in her case of coercive controlling 6 behaviour, which she had documented for years. And police had supported the 7 8 documentation. She had police reports, but she had courts that kept saying, no, this is 9 just between you and the perpetrator. It has nothing to do with the child. And we need 10 to understand that coercive control and intimate partner violence can also spill into familial violence, and can go beyond that; right? Men who are this enraged and this 11 angry and this sure that they're entitled to have control over every aspect of their lives 12 and the wider world also act out beyond their families. 13 MS. KRISTA SMITH: I'd like to take the same question to Patrina 14 15 now. What's your perspective on taking a more carceral approach to coercive control? 16 **DR. PATRINA DUHANEY:** I do agree with everyone on the panel that, you know, given -- you know, coercive control is problematic. I am concerned of --17 about taking a carceral response to addressing that issue, and for the various reasons 18 that Lori and others have highlighted. And I think given that we're still working through 19 some of these complexities of domestic violence or family violence or IPV, I think we still 20 have a long ways to go before we add another piece to the mix. Yes, we need to take --21 22 really understand that it is a serious issue, and it needs to be addressed, but I would 23 caution us against using the criminal justice system as a form of response because we 24 have seen individuals who continue to be harmed by the criminal justice system's responses and they will continue to be harmed by that. And I do agree that, you know, 25 not just looking at the police, but we need to look at lawyers. We need to look at 26 27 judges. We need to look at all of those different systems that are involved in women's

lives. Children's Aid Society, and so I think all of these systems could, you know, make

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- a woman's situation even worse because they're all about looking for, oh, my gosh.
- 2 And sometimes people who are reporting these issues, they don't even have the
- training, the proper training to report these issues or to even identify it appropriately. So
- 4 I think we need to look a bit deeper, dig a little bit deeper before we begin to even think
- of penalizing from a, you know -- or having the carceral responses or approaches to
- 6 dealing with this issue.
- 7 **MS. KRISTA SMITH:** Thank you, Patrina.
- 8 Carmen, we have a couple minutes before I move on to Nancy.
- 9 **DR. CARMEN GILL:** I think I somewhat agree with Lori and
- Patrina, but at the same time, we're talking about complex behaviours that we are
- leaving out of what is criminalized. So basically, if we criminalize coercive control, or if
- we decide that we have an offence about IPV, like in Scotland, then we are recognizing
- that there is an issue that is a crime. Criminalizing coercive control would force
- everybody at every level to start looking at this issue in a very different way.
- We have, in Canada, different family policies that are in place that
- 16 are specifically addressing the issue of coercive control, depending on where you are in
- the country. The *Divorce Act* has been amended following the *Cotton Berry* case in
- B.C., and they're stipulating even if it's not criminalized, we have to take this into
- 19 consideration.
- I would not -- I would caution us to keep it outside of the criminal
- justice system, because before the 1980s, intimate partner violence was a private
- 22 matter. I don't think we will want to go there. I understand that the criminal justice
- 23 system is not perfect, but I am more into seeing things like the glass half full. So
- 24 everybody will agree that we're doing better now addressing intimate partner violence
- 25 than we were in the 1970s. Like, to me, that's clear. There is a lot to continue to do,
- 26 absolutely. So I -- that's where I agree with both of them.
- 27 **MS. KRISTA SMITH:** Thank you very much.
- Nancy, you've very patiently sat through this whole conversation.

Can you tell us what you've been thinking?

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DR. NANCY ROSS: I've been thinking a lot because I'm -- a lot of 2 my research is framed within looking at a violence and trauma-informed approach to 3 family violence and looking at charting a pathway forward that addresses that 4 complexity. In both victims, survivors, perpetrators or those who have caused harm, 5 most of them have experienced prior trauma. And I think looking to further legislation 6 7 does acknowledge, of course, the seriousness of these issues, but it doesn't really 8 address the root of the problem, which is that we need to look to ways that we can 9 provide support for families, that we can address the pervasive issue of adverse 10 childhood experiences, childhood trauma, gender-based violence as societal issues. And so looking to a court system, I know Carmen mentioned that 11 we need a paradigm shift, but I think we need to reimagine justice, and we need to 12 reimagine community responses that maybe take some of these issues outside the 13 criminal justice system entirely. Because to address relational issues, intimate issues 14 15 within an adversarial, combative, traumatic system seems to result in more harm for so 16 many people, and I don't know if it can address those complexities of race, of colonization, of newcomers coming. Like one-fifth of women coming to this country are 17 -- you know, are -- one-fifth of women in the country are immigrants. 18 I mean, all these issues that we're -- that are so complex and so 19 nuanced, I feel that they are -- we're failing to address those within the current criminal 20 justice system and I think we need to imagine something different, something 21 22 completely new that addresses the complexity and looks to the potential of 23 accountability and healing that I think is potentially a reality that we could strive to. 24 **MS. KRISTA SMITH:** With that in mind, can you tell us a little bit about the work that you're doing right now? I think it's called "Charting Our Path 25 Forward"? 26 27 **DR. NANCY ROSS:** M'hm. We've interviewed people across the

country and internationally about alternative responses to gender-based violence and

family violence and trying to look at ways that institutions and systems and communities

- 2 can respond in ways that is helpful, that is supportive instead of this punitive,
- adversarial system that really is so narrow and so dehumanizing, often.
- And so we've heard about different places in New Zealand, but also
- one that stood out to me was we talked to Kristen Basque in Eskasoni in Cape Breton
- 6 who looks at family group conferencing, bringing people together to talk about their
- 7 experiences, to talk about what they wish to happen. And I've imagined that this could
- 8 happen across the province, you know, across the country where we could have more
- 9 family group conferencing, that we could look at restorative approaches, look at what --
- what does transformative justice mean, what does -- what is a call from abolitionists in
- terms of what do they imagine could be a reality in this province.
- I think that we are narrow in terms of a focus on an institutional --
- like a colonial sort of dated institutional -- our criminal justice system is dated. It's
- rooted in, you know, colonization. I think we need to step out of it and to think about
- 15 alternatives.
- So we've talked about -- we've talked to people that envisioned
- supporting families in ways that acknowledges that for many offenders, they say that,
- you know, "All I've ever known is violence. I grew up in violence. I've seen violence
- and I'm met with further violence in the criminal justice system", so where do we offer
- 20 people skills, opportunities to learn, opportunities to change?
- I think we have to hold up those as possibilities, that people can
- change, that people can heal, that given supports, people can flourish. And so all the
- 23 people we interviewed, I think, are thinking about indigenous -- learning from indigenous
- ideas from looking at Afro-centric perspectives that really look at gender-based violence
- as a collective issue, as a societal issue that we all have a duty to respond to. And I
- think it means reimaging community in a different way.
- So those are just some of my thoughts that I have stirred.
- MS. KRISTA SMITH: So we could keep -- there's so much to talk

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Т	about and explore and, unfortunately, our time draws short. So I would like to do just
2	one last round. I want to make sure we have time for some questions from
3	Commissioners.
4	So if each of you could just take a couple of minutes as your last
5	call, last chance, the question I want to ask is, we've identified potential ways forward.
6	What are some things that stand in the way, potentially, of moving forward?
7	That's something you could talk about or you can you can just
8	share something that you wanted to share today that you haven't had a chance to
9	speak to yet.
10	Thanks.
11	Oh, Lori, do you want to start?
12	DR. LORI CHAMBERS: I don't know that I feel the need to add
13	anything at this point apart from that I believe it has to start if we're going to and this
14	aligns a lot with what Nancy was saying about stepping outside of the criminal justice
15	system, is that teaching these skills, making them central to our educational programs
16	to thinking, actually, really, about relationships and healthy relationships and healthy
17	interaction as a big part of how we educate people from the ground up and talking
18	openly about coercive control and other kinds of problems as part of the day-to-day way
19	in which we raise children because otherwise, how do people know to hope for better
20	and to work towards something better.
21	And I just everything that we're doing with the criminal justice
22	system is a band-aid after the event, and we need to instead be getting at what is
23	making this society sick underneath from the inside.
24	MS. KRISTA SMITH: Thank you.
25	Patrina?
26	DR. PATRINA DUHANEY: Lori, I think the panel has done an
27	excellent job, you know, contextualizing the complexities of these issues, but reflecting
28	on specifically black women's experiences, I think it's really important for us to always

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recognize the very factors that influence their experiences, historical, societal, political conditions and the ways in which certain women's experiences have been rendered invisible and minimized or diminished completely.

And so from the conversation that we've had, it's -- what I'm

gathering and from my own work is that current legal responses have largely been ineffective and so context matters, therefore, acts of violence, recognizing that they're not equivalent in terms of motivation and intent and impact. So it's really important, as has been highlighted, that we really need to take preventative approaches.

And I just want to emphasize that, that oftentimes responses are reactionary. It's dealing with an issue right on the spot as opposed to having long-term solutions.

And we need long-term solutions to enact change, and so I concur that we can simultaneously have accountability, we can have healing outside of the criminal justice system, allow communities to take more ownership as we've seen in indigenous communities of these problematic behaviours and actions that are taking place. And you know, again, I do agree that colonial -- you know, our criminal justice system is rooted in colonization and so even the responses are marred based on this problematic history.

And so adopting additional approaches, whether it's indigenous, Afro-centric ways of knowing as well in terms of what's been used in the communities, I think we really need to look at different strategies, interventions and approaches to actually make impact and sustainable changes.

MS. KRISTA SMITH: Thank you, Patrina.

Carmen, I'm going to take it over to you. And again, it's open to you to respond if there's something you want to share that you haven't yet, but I'm also interested in your -- any comment you might have on, you know, what is needed -- what is needed to take the path forward.

DR. CARMEN GILL: We need to recognize that coercive control is

the violence that we see in intimate relationships that is clearly problematic, and this is something that we are still not addressing properly. So that's -- that would be what I

3 would say.

And since I've been asked by the Federal Ombudsman for Victims of Crime in 2019 to write a paper about the feasibility of criminalizing coercive control in Canada, of course I'm still thinking that I don't want to ditch the -- how do you say that in English -- ditch the baby with the water bath. I think we still need to consider this as a formal issue that has to be criminalized because if we take all those relationships outside of the criminal justice system because it's the band-aid and it's not working, then what else within the criminal justice system that we are going to remove from the criminal justice system because it doesn't work.

And I would go even further. We need to criminalize coercive control and we should have an offence about femicide. Because when we talk about intimate partner homicide, generally, we talk about intimate partner femicide, because woman are the one who are killed in abusive relationship. So, for me, this form of violence is a crime. I cannot see someone terrorizing a woman for 15 years and that's fine, but he punch her in the face once and it's a crime. But once it's criminalized, it doesn't stop there. This is not the solution. You need all the resources to be able to support how we are going to address coercive control in our society.

MS. KRISTA SMITH: Thank you, Carmen.

Nancy, last word.

between 70 and 80 percent of gender-based violence is not reported to the police. And the reason it's not reported to the police, I think we've elaborated on it to some extent here, but often, the response is traumatic and poses a barrier in general to reporting it to the police because the response they receive is not what they're hoping for.

And, you know, if we think about ways that communities and individuals can build strength, resilience, it's really to acknowledge, like, the sources of

stress that people have. And those sources of stress are often structural, historic, and

- we need to go there. And I think as a society often, we don't want to hear those
- instances of what causes stress, and I think we have to acknowledge that, and then we
- 4 have to respond to that source of stress, establish supports to help and build
- 5 relationships, and then I think we need to, as Lori said earlier, start young. Like, we
- 6 have to model what is a healthy relationship, how can we strengthen those life skills,
- 7 how can we teach people to resolve conflict in ways that is non-violent.
- So, you know, we in this province, 30 percent, in some areas at
- 9 least, grow up in poverty. I mean, when you grow up in a system like -- you know, in a
- family where you don't have enough resources, you feel stressed. And oftentimes, we
- criminalize that. So I think we need to look really deep and look at ways that we can
- reimagine justice and reimagine what is meant by supporting people across the
- province. And I think if we did that, I think more people would flourish, we'd have less
- 14 violence.
- MS. KRISTA SMITH: Thank you very much. I'm going to turn it
- over to the Commissioners now, so in case they have any questions.
- 17 **COMMISSIONER MacDONALD:** Thank you so much, Krista.
- 18 Commissioner Fitch?
- 19 **COMMISSIONER FITCH:** Thank you, everybody. Your
- 20 contributions have been outstanding today and I really have more commentary than I do
- 21 questions, but I think that's for further down the road of our process.
- I do want to say that, you know, when we talk about a paradigm
- shift in transformation, I really think that has to be a whole society, and I think you've all
- touched on that, that the grounding of all of this is a whole of society change and a
- recognition of the complexity of these issues, you know, starting young, educating
- 26 people, training people.
- 27 When we look at policing, our police officers are recruited from the
- human race, and they come into their profession with their own backgrounds and own

- experiences, whether it's -- they just become responders to these situations as
- 2 professionals, or they come into the profession as victims themselves, or observers of
- the IPV in their personal lives, or as abusers. It's very complex and I think we can lay
- 4 that veil over anybody in society and how they respond to some of these very complex
- 5 issues.

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- So I am going to just ask one very direct question and it's to Dr. Gill
- 5 because I know you've done a lot of work in terms of training for police, and Dr.
- 8 Chambers as well, and I guess actually all of you have had a hand in training of police.
- 9 Do you have any recommendations on how we can disrupt the prevailing sentiment of
- police officers that training around multiculturalism, LGBTQ, intimate partner violence
- are all soft training and some officers that possess the belief that that is time not well
- spent because they should be focussing solely on hard skills? How do we disrupt that
- narrative, because that is based in whole of society framework?
 - McQueen Fergusson Centre for Family Violence Research developed Train the Trainer for police officers. And the way that we can deconstruct, you know, how they are viewing this particular issue is to put them in. And in this particular Train the Trainer, there was a particular module where police officers were to look at themselves. And it was difficult for police officers to look at themselves because we put them in a place where they had to look at themselves as potential abusers or potential victims. And so it's extremely important, as Commissioner Fitch was just saying, where we're taking people and bring them in policing and they have -- they come from different walks, and they come with their own experiences. But when they start policing, they have as well to recognize that they are going to be impacted by what they are going to experience when they are intervening. And if they are, can we imagine that a police officer who's already controlling his spouse, abusing his spouse, how this police officer can decently intervene in a situation where there is intimate partner violence. Will he really see that there is intimate partner violence, or he will see something just normal?

So we need to work with them to deconstruct their own beliefs and how they enter in this particular profession. Police officers have been saying that they leave the problems at work at the minute they take off their uniforms. Well, they are impacted by what's going on in their work, so they have to understand that as well. So am I responding, Commissioner Fitch?

COMMISSIONER FITCH: Thank you. I think it's such a deep issue. I think it's probably hard to address in one answer and one setting but thank you very much.

mean, everyone has touched upon in one way or another the need for a fundamental shift, the need for fundamental change, the need to, you know, take down the larger structures. But, you know, systems are made of people, and I think some of the discussion has touched on the need to address, you know, from an early age, how we construct the people that then construct the systems. And these are enormous concepts and questions, and we are charged with making recommendations that are implementable by the people who make up the systems that are part of the mandate that we've been given.

So thinking about the iceberg and the example of the *Ryan* case, you have the tip of the iceberg where you can see an extreme example that is still -- the narrative for which is still rejected by a large swath of the society. And we've heard about the patterns of coercive control that are below the surface of that iceberg that are widespread, and common, and unseen, or undetected, or ignored, and that we've been hearing quite a bit over the last week and a half about the public, private dichotomy. So I think the challenge is to take the different approaches that all of you have spent a great deal of time developing and glean from them the pieces that we can apply in a way that is doable for the actors in the systems that are the subject of this Inquiry. And -- so it's not a question so much as a -- an attempt to define what it is that we need to do in terms of our path forward here.

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1	So I just want to thank you all for the for the insights that you've
2	given us into the ways that each of you have tried to tackle the iceberg, because it's
3	there it's apparent that there is no one approach that will be readily doable. It's
4	obviously a multi-factored approach because it's an extremely complicated set of
5	problems. But I'm very grateful for the commissioned report and for the materials that
6	have been put together by the Research and Policy Team and from all of you. It's of
7	great assistance to us to understand better the various tentacles of this of this
8	problem. So thank you.
9	COMMISSIONER MacDONALD: Yes, and let me begin by
10	thanking you, Krista, for organising such a stellar panel and an excellent roundtable.
11	And to Serwaah, of course, for organising much of it, and of course you were involved
12	with that as well, but we're greatly indebted to you both for this.
13	And Dr. Gill, and Dr. Ross, and Dr. Chambers, and Dr. Duhaney,
14	thank you all so very much for assisting us with our of very difficult work, difficult
15	subject matter, and enormously challenging. And my thanks, really, are given on three
16	levels:
17	First of all, thank you for the work you all do day in, day out to
18	address the enormous harm visited by coercive of control. Thanks for your tenacity,
19	dedication, and courage, actually, for pursuing that.
20	Secondly, thanks for helping us. And I've said this many times, and
21	it is worthy of repeating, that one of the gratifying things about the work we are doing is,
22	is how people step up when we ask, and everybody is anxious to help. And you are
23	stepping up and you have helped us immensely tackle a very difficult problem, and for
24	that we are enormously grateful. You're helping the Commission, but you're more
25	fundamentally helping the people of Nova Scotia and the people of Canada and
26	beyond.
27	I, personally, am learning so much, and I'm particularly grateful for
28	that, learning about the insidious nature of coercive control. And I think if we had a

- word cloud exercise here today, I think complex or complexities would be prominent.
- 2 It's so easy to oversimplify the challenges we're discussing, and that's something we
- cannot do. So I am very grateful for the ability to have our perspectives broadened.
- 4 And thirdly, thank you for your -- for your optimism and for your
- 5 forward-focussed recommendations, tangible recommendations going forward, which is,
- of course, our raison d'etre. So thank you all very much. We -- on behalf of the
- 7 Commission, we're very grateful for your contribution. Thank you.
- Yes, and we will return for our second roundtable today at 1:30.
- 9 Thank you.
- 10 --- Upon recessing at 12:32 p.m.
- --- Upon resuming at 1:33 p.m.
- 12 **COMMISSIONER MacDONALD:** Dr. Cunliffe.
- DR. EMMA CUNLIFFE: Thank you, Commissioner.
- 14 --- ROUNDTABLE: POLICE AND INSTITUTIONAL UNDERSTANDING AND
- 15 RESPONSES TO SEXUAL VIOLENCE AND OTHER FORMS OF GENDER-BASED
- 16 VIOLENCE:
- 17 --- FACILITATED BY DR. EMMA CUNLIFFE:
- DR. EMMA CUNLIFFE: As Commissioner MacDonald has
- indicated, my name is Emma Cunliffe, and I have the honour of serving as the Director
- of Research and Policy for the Mass Casualty Commission.
- This afternoon's roundtable will focus on police and institutional
- 22 understandings of and responses to sexual violence and other forms of gender-based
- violence, including, for example, criminal harassment. We'll be building on this
- 24 morning's conversation about intimate partner violence and family violence. It's
- important to acknowledge, as we heard this morning and will explore further this
- afternoon, that these forms of violence overlap.
- We'll also consider how the burden of sexual violence and other
- forms of gender-based violence inequitably distributed across Canadian society. So for

example, Indigenous women and Black Canadian women have different experiences of sexual violence and different experiences of police responses to these forms of violence than White women; older women experience sexual violence and police responses differently than younger women, and so on.

A package of materials has been prepared and shared with both roundtable members and the Participants. The core themes of this roundtable are the barriers to effective police and other institutional responses to sexual violence and other forms of gender-based violence; cultural aspects of these barriers and how can they be addressed; and promising and best practices in police and institutional responses. Based on these core themes, I'm going to ask the members of this roundtable a series of open-ended questions that will give each of them the opportunity to share their experience and expertise with us. As you will hear in a moment, when I invite them to introduce themselves, our roundtable members bring a wealth of both to this conversation.

As facilitator, I'll be directing the questions, asking follow ups and moderating dialogue. I would ask that you please speak slowly for the benefit of our accessibility partners.

Roundtable discussions will form part of the Commission record. They are being livestreamed now, and will be publicly available on the Commission's website. The Commissioners may choose to pose a question or ask for clarification at any point this afternoon.

As with all of the Commission's roundtables, today we will not focus specifically on the mass casualty of April 18 and 19, 2020, or the perpetrator of these crimes, and nor will we seek to interpret the evidence that is before the Commissioners. That work is being done in other aspects of the Commission's process.

This is also a good opportunity to remind those who are present today or are listening that we are presently conducting a further public consultation, this one online, in which we are seeking input about the recommendations that you would

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- 1 like to see considered as part of the Commission's work. You can find more information
- about this consultation on the Mass Casualty Commission website at
- masscasualtycommission.ca under the Proceedings menu. Look for the option called
- 4 Public Submissions.
- As with every roundtable discussion, the intention today is to
- 6 provide the Commissioners, Participants and the public with a deeper understanding of
- the core themes so that everyone is well-positioned to engage in conversation in
- 8 Phase 3 about lessons learned and potential recommendations.
- 9 Before I begin today's roundtable, I would like to acknowledge the
- work of Serwaah Frimpong, whose work with the Research and Policy Team forms the
- basis for today's roundtable and the associated materials.
- So to get us started, I am going to ask each of the roundtable
- members to introduce themselves.
- Lana, may I begin with you?
- MS. LANA MacLEAN: Well, good afternoon, everyone. My name
- is Lana MacLean. I'm a practicing clinical social worker here in Halifax. I've been
- practicing for close to well over 25 years. My specialty tends -- leans towards the
- impacts of race and culture on the lives of people of African Nova Scotian descent, and
- it spills into the African new Canadian community, as well as the Caribbean community.
- In my private practice, which I'll speak to this evening, or this afternoon, it's the work
- that I've done with particularly African Nova Scotian women who have been survivors of
- intimate partner violence and sexualised violence. Thank you.
- DR. EMMA CUNLIFFE: Lana, many thanks for joining us today.
- Pam, can I ask you to go next?
- DR. PAMELA PALMATER: Kwe' Ni'n Teluisi, Pam Palmater. It's
- an honour to be back home on unceded Mi'kma'ki territory. I am from Eel River Bar
- 27 First Nation. I have been a practicing lawyer for 23 years focusing on laws and policies
- that impact indigenous peoples, but in particular indigenous women and girls. I worked

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- for 10 years at Justice Canada and had many interactions with the RCMP. I was a
- 2 human rights investigator at the Human Rights Commission here in Nova Scotia, and I
- 3 currently serve as the Professor and Chair in Indigenous Governance at Toronto
- 4 Metropolitan University, formerly Ryerson University.
- And my research is primarily on police corruption, racism, misogyny
- and sexualized violence with a focus on the RCMP and the links to far-right groups,
- 7 hate groups, white supremacy and how that impacts violence against women both
- 8 inside and outside police forces. And to that end, I've given testimony at the UN and
- 9 the national inquiry on these issues.
- DR. EMMA CUNLIFFE: Many thanks for joining us today, Pam.
- Emilie, welcome.
- MS. EMILIE COYLE: Thank you, and good afternoon.
- My name is Emilie Coyle. I'm the Executive Director of the
- 14 Canadian Association of Elizabeth Fry Societies. I live on the unceded and
- unsurrendered territory of the Algonquin Nation, and so I'm very pleased to be
- welcomed here in Mi'kma'ki today. I use the pronouns "she" and "her".
- And our organization is an organization that works to address the
- persistent ways in which women and gender diverse people are impacted by
- criminalization and routinely denied their humanity and often excluded from community
- and considerations around who we talk about when we talk about the public and public
- 21 safety.
- We do this through advocacy, through engagement, education,
- 23 public awareness raising, legal reform and often legal interventions. And as part of this
- work, we go into the federal prisons that are designated for women across the country.
- we monitor conditions of confinement therein in order to ensure that the human rights of
- the people who are incarcerated there are being upheld.
- Our membership is comprised of 24 local member societies across
- this land known as Canada, and they offer critical frontline services to their

communities. Each organization is self-governing, with its own Board of Directors, and we collaborate on key issues, best practices.

Our membership works with all of the institutions that we have constructed to keep people safe. We work with police, we work with courts, we work with the judiciary, we work with counsel, we work with the prisons and we work with parole. And the reason that it's important to bring this into the work of the Commission is that policing is just one arm of our legal system that people get caught up in.

And when I use the term "criminalized", I wanted to make sure that that is defined because we use the word in recognition that systems and institutions that we created and uphold serve to create the conditions that criminalize the women and gender diverse people that we work with. I just wanted to make sure that that definition was clear because I think we've been using it a lot throughout this last few days.

And I'll get into the rest of it later, but thank you very much.

DR. EMMA CUNLIFFE: Emily, many thanks.

If I can now turn to those who are joining us virtually today.

Deepa, welcome.

MS. DEEPA MATTOO: Thank you.

My name is Deepa Mattoo. I am a lawyer and Executive Director of Barbra Schlifer Commemorative Clinic. And over 23 years of my experience in my dual roles as a lawyer, manager and advocate, I have worked with access to justice, have a lot of history of working in the field of gender-based violence and with survivors from racialized and marginalized communities.

I've trained thousands of service providers in best practices in legal education to work with forced marriage survivors, racialized non-status women and immigration law clients in the context of gender-based violence.

For the benefit of everyone in the room, the Barbra Schlifer
Commemorative Clinic is a clinic which was built in the memory of Barbra Schlifer, a
young lawyer who was assaulted and killed on the night of her call to the bar

T	celebrations in 1965. The clinic was opened to confinemorate her legacy and
2	commitment to social justice. The clinic is the only kind of institution in Canada, and it
3	provides holistic and accessible services to those who have experienced gender-based
4	violence. The services include legal representation, counselling and interpretation
5	services.
6	The clinic is a teaching clinic for law and social work students and,
7	over the years, we have incubated and successfully executed multiple knowledge
8	projects related to gender-based violence. The clinic has assisted over 100,000 women
9	in the span of its services, and last year alone, the clinic served over 8,000 women.
10	The clinic leads it services in a trauma-informed client-centric
11	approach with realistic risk assessment and safe family processes and works in
12	collaboration with the survivors' experiences and needs.
13	Thank you.
14	DR. EMMA CUNLIFFE: Thank you so much for joining us today,
15	Deepa.
16	Sunny, if I may turn to you.
17	MS. SUNNY MARRINER: Good afternoon, and thank you for
18	having this roundtable and inviting me to participate with such a great group of people.
19	My name is Sunny Marriner. I am the National Project Lead of the
20	Improving Institutional Accountability Project.
21	What the Project is, is the outgrowth of approximately 25 to 30
22	years of frontline work to address issues of primarily case attrition with sexual assault
23	reports, both at the policing level and then throughout the criminal justice system.
24	IIAP was formulated after many years of looking at possible
25	responses to case attrition, addressing barriers, identifying barriers and trying to
26	determine what the key factors were that were making sexual assault reports drop out
27	of the criminal justice system. The primary work of our Project, although we interact
28	with all levels of policing on all issues of policing and sexual violence and then further

into the criminal justice system, the primary work is implementing frontline advocate-led

2 independent case review teams in communities around Canada that review all cases

that did not proceed to charge.

What that means is that if a report of sexual violence was made to police and that case did not proceed as, on average, 80 to 85 percent do not, then an independent reviewer will review that case within three months to determine whether -- what aspects of the case created the barrier to proceeding and whether or not there are additional steps that can be taken.

The model is utterly unique to Canada. We're currently implemented in 28 communities across five provinces, and we add more every day. And my role within that is both training, advocate reviewers, working with police services around what the methodology of review needs to be to be rigorous and ensuring that the reviews can proceed operationally into the future.

All of this work of mine is informed from 25 years of working in frontline sexual assault centres. My work has primarily been with criminalized and marginalized teenager girls, so thank you to Emily for the definition of "criminalized" young women. And the theme that run between all of the frontline work that we provided with young women who were criminalized and marginalized was very often their trajectory to criminalization was or occurred shortly after or subsequent to them reporting or disclosing sexual violence and that not being believed, particularly within the criminal justice system, but at other levels as well.

And so that work over 20 years was frontline advocacy and legal interactions with young women who had encountered that barrier to their cases not moving forward.

Thank you.

DR. EMMA CUNLIFFE: Many thanks for joining us today, Sunny, and we'll be delving into the victimization/criminalization continuum, as it's sometimes called, a little bit as we move through the roundtable today.

1	And last, but certainly not least, Isabel, welcome.
2	MS. ISABEL GRANT: Thank you, Emma. And thanks to everyone
3	for inviting me to participate today.
4	My name is Isabel Grant. I'm a professor at the Allard School of
5	Law at the University of British Columbia, and I specialize in criminal law.
6	I'm grateful to live and work in the traditional ancestral and unceded
7	territory of the Squamish, Tsleil-Waututh and Musqueam Nations.
8	I've spent most of my career, which feels like a long one now,
9	working on responses to male violence against women. My expertise in particular is in
10	the area of sexual assault, criminal harassment and homicide and femicide.
11	I'm a member of the Expert Advisory Panel for the Canadian
12	Femicide Observatory for Justice and Accountability where we work to put a face and a
13	name to every femicide that takes place in this country. I've also been involved in
14	multiple contexts and litigation and law reform efforts with feminist groups and with
15	disability organizations.
16	Right now, I'm working on an SSHRC funded project with my
17	colleague, Janine Benedet, looking at the ways myths and stereotypes play out
18	differently based on the age of the complainant. So thus far we've published work
19	based on older women and on adolescent girls and now we're looking at intimate
20	partners. And we see the different ways that gender and age and then other forms of
21	marginalization as well such as indigency or race play out in these cases and how they
22	create barriers to affect the prosecution of sexual assault at each stage of the
23	complainant's life.
24	I'm very honoured to be able to participate today, although I have to
25	say I'm also very humble just by the gravity of the task that you are involved in and by
26	the pain of so many people involved in the events that we're dealing with. I don't have
27	any of the answers but I hope that this conversation can contribute something useful to
28	the work of the Commission.

DR. EMMA CUNLIFFE: Many thanks indeed, Isabel.

I'd like to begin our discussion today by discussing some aspects of the Canadian law with respect to sexual violence and other forms of gender-based violence. We'll start by talking about the law itself and explaining some of the principles that animate the criminal law and evidence in this context. We'll then turn to questions about the extent to which this law is reflected in police and institutional responses to complaints about sexual violence.

And so, Isabel, if I can please turn back to you. We've heard a lot today about the idea of myths and stereotypes and you alluded to it in your introduction. I'm wondering if before we turn to other questions you could provide us with your definition of what that phrase means. What does "myths" and "stereotypes" refer to, and how have they been observed to play out in the case law of the Supreme Court of Canada?

MS. ISABEL GRANT: Yeah, that's a big topic. I mean when I talk about myths and stereotypes, I'm talking about beliefs that make assumptions about how people behave and how people are expected to behave in certain situations. That can distort a finding and legal determinations about the violence that is done to people. And what I've looked at particularly, is how those myths and stereotypes change but are very much the same, depending on the groups of women looked at. So they may manifest in different forms but they are similar and rooted in the same kinds of beliefs in my work about women and girls. So, for example, the idea that women and girls are not trustworthy, are recounters of what's happened to them, that they tend to lie, that women and girls are more likely to lie when they're talking about sexual activity and that somehow coming forward to police is something that – an experience that someone would be likely to do even if they don't have an honest story to recount. So the ways that myths and stereotypes intersect with race and with gender and with other forms of marginalization I think is really important in understanding how they operate in courts.

DR. EMMA CUNLIFFE: So would it be fair to say on the basis of

some of the examples that you've shared with us, that myths and stereotypes provide an interpretative lens through which people understand, for example, the narratives that women share about their experiences of sexual violence?

MS. ISABEL GRANT: Yes, I think that's right, and I think what's interesting about them is how embedded they can be so that you don't see the lens, you just think of it as common sense or something you intuitively know and so they're not contested or challenged in that regard; we just take them for granted; they're the way we see the world. And that applies to police, that applies to judges and to many lawyers as well.

DR. EMMA CUNLIFFE: And so the term myths and stereotypes is pejorative, of course; does it suggest that there's something incorrect about these ideas; is that fair?

MS. ISABEL GRANT: I mean, I think often myths and stereotypes may be rooted in some degree of experience, but it's the automatic application of them to people without looking at the experience of that person, of that complainant, and the context in which she finds herself in the context of sexual assault. So there may be elements of truth in some cases that may be distorted, but it's applied without looking at the individual as you say, as a lens through which to understand sexual interactions.

DR. EMMA CUNLIFFE: Thank you very much. Isabel, I'm now – I'm going to stay with you, but I'm now going to turn to some aspects of the criminal law, and in particular, to the Canadian legal definition of "consent". Could you please explain how Canadian legislation and judicial decisions define the idea of consent to sexual activity, and from whose perspective is consent...

MS. ISABEL GRANT: Yes, there's a simple definition in the Criminal Code of consent which is voluntary agreement to the sexual activity in question, but that doesn't tell us a great deal about what "consent" means. What the Supreme Court of Canada has said, is that we have an affirmative standard of consent, and what that means is, I think of that in terms of kind of setting the starting point. Prior

to the Supreme Court of Canada deciding that we had an affirmative standard, a person

2 could assume that a complainant was in a perpetual state of consent and she had to

say "no" in order for there to be any departure from that. What affirmative consent

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does, is flip that around and it says that it's only when someone says "yes" that they are

5 consenting. So you do not need to say "no", it's only when you say "yes" that consent is

6 given. And consent in law has two dimensions. It has the physical act, so did the

7 complainant consent? And that is judged entirely from the perspective of the person

8 consenting or not. So it's whether in – usually her mind, she wanted that sexual activity

to take place. So that is the physical *actus reus* component of sexual assault.

The *mens rea*, because we are talking about a criminal justice process and we don't convict people who don't have a fault component, the *mens rea* is did the accused person know or was he reckless with respect to that consent. And when we get to *mens rea* there has to be some indication that the complainant communicated her agreement to participate. So it's really important to understand that saying nothing, or acquiescing or submitting, none of those things constitute consent in law. There does not have to be force for there to be non-consent. There does not have to be resistance on the part of the complainant. And I think all of those things – I mean you shared with us the RCMP Best Practices document, which I think was frankly out of date in 2017 and even more out of date now in terms of understanding what is required for sexual assault to be established in a court.

DR. EMMA CUNLIFFE: Thank you, Isabel, and I was planning to turn to the best practice guide a little later, but actually let's do so now as I search for the Exhibit number of it. I just want to just clarify for the benefit of those who may not be legally trained, "mens rea" simply means the mental element of the crime that needs to be proven by the Crown; is that a fair definition? Mens rea, sorry. Isabel, is that a correct articulation?

27 MS. ISABEL GRANT: Yes, yes.

DR. EMMA CUNLIFFE: Okay. And now let's turn briefly to the

- 1 question of the RCMP Sexual Assault Investigation Best Practices Guide which,
- 2 Commissioners, has been tendered before you as Exhibit P003677. At pages five to six
- of that Guide is provided an explanation of consent and the Canadian law on page five
- 4 there, some extracts provided from the Criminal Code, some examples of
- 5 circumstances where consent is not given, and then a paragraph which provides
- 6 examples of lack of consent. And so it reads: "The law indicates that agreement or
- 7 lack thereof may be expressed in word or gesture. In other words, saying 'no' is not the
- 8 only way that a person may indicate a lack of consent. A lack of consent may be
- 9 indicated by words such as 'I'm not into this right now, I don't think this is a good idea,
- maybe later, I'm not sure' or by gestures such as silence, crying or body language", and
- then a variety of examples of body language are given.
- So Isabel, was that the passage that you had in mind when you
- 13 suggested that it was....
- 14 MS. ISABEL GRANT: Yes, because that passage again is
- suggesting, going back to the affirmative consent concept, that someone has to say "no"
- or at least communicate a "no" through body language or the other the other things
- that you just read out -- body language or the other -- the other things that you just read
- out, when really that is not required. There is no obligation on a woman to say no to
- sexual touching. The accused who wants to say, "I didn't know she didn't want this"
- 20 needs to be able to point to her saying, "yes", or communicating "yes" through body
- 21 language.
- But again -- and that definition, I was really surprised to see that
- definition in 2017, because this law was established by the Supreme Court of Canada in
- the 1990s in a case called *Ewanchuck*. So yeah, I think that definition creates the idea
- 25 that it's all about the complainant saying "no", which is not an accurate statement of the
- 26 law.
- DR. EMMA CUNLIFFE: Thank you. I'm going to shift gears again
- slightly now, Isabel, and stick with you as our -- as the person who is helping us to

1 understand the law in this case.

You have written about the law of criminal harassment in an article called Intimate Partner Criminal Harassment.

Commissioners, this article has not yet been tendered before you, but it will be. And for the benefit of the Participants, it is already available on Relativity at COMM0059877.

Isabel, in that article you describe the elements of criminal harassment, and suggest that to a certain extent those elements, as they're presently interpreted, fail to protect women. Could you expand on or explain the basis on which you reach that conclusion?

MS. ISABEL GRANT: Well, there's a couple of harassment to criminal harassment. If people aren't familiar with how criminal harassment works, it usually -- the crime in section 264 of the *Criminal Code* requires that somebody repeatedly communicate with someone in an unwanted way, or follow them, or threaten them, or engage in other activities that are persistent.

But the two elements of the crime that have created troubles -problems for complainants in this area relate to the fact that in order to establish
criminal harassment, the Crown has to show not only that the complainant was afraid
but that her fear was reasonable. And that reasonableness element is not necessarily
seen entirely from the perspective of her being aware of her circumstances, and doesn't
necessarily recognise that she may understand triggers or behaviours that suggest she
may be in danger, that might be as comprehensible to the outside observer. So the
idea that we only respond to women's terror when we have assessed it as reasonable
creates barriers, both to laying charges and then of course to prosecuting those
charges.

The other issue in the -- in the definition is that it has to be shown that the accused intended to or desired to cause her to fear and to be harassed. And, you know, in a lot of these cases in the intimate partner context what you see is "I just

wanted her back. I wasn't wanting her to be afraid, I just wanted to get her back to me."

2 So behaviours that have left a woman terrified are being justified based on the elements

- 3 of the offence.
- 4 So those two elements of criminal harassment I think are
- 5 particularly problematic when -- and especially when the harassment is between two
- 6 people who know each other, who may have access to each other in particular ways,
- through children, through other family members, et cetera.
- 8 **DR. EMMA CUNLIFFE:** Isabel, many thanks indeed.
- Sunny, I'm going to turn to you now. Isabel has explained that
- 10 Canadian law has a definition of consent that centres on sexual autonomy, the idea that
- sexual activity should be subjectively welcomed by parties who have communicated
- their consent to one another. You, of course, have a great deal of experience and
- expertise between your work on the frontlines of sexual violence response and your
- work in the Institutional Accountability Project.
- In your experience, how do police approach the question of consent
- when a sexual violence complaint is laid?
- MS. SUNNY MARRINER: That's a huge question, and I appreciate
- your raising it in the confines that you did.
- There are variations that I think we have to start with in terms of
- 20 understanding that with sexual violence, obviously consent only becomes an issue at 12
- 21 and over in -- under Canadian law, but the question of whether or not a complainant
- consented turns on an assessment of their credibility. And credibility assessments are
- often where we see a lot of subjective decision-making taking place in terms of policing.
- So what that means is that an officer has to establish that they have reasonable and
- 25 probable grounds to believe that a crime occurred, that's the burden of proof that they
- need to meet, and in order to do that they'll assess whether or not the complainant is
- credible in the story they have brought forward in terms of articulating their lack of
- 28 consent.

Unfortunately, police assessments of credibility and whether or not consent were present are deeply inconsistent across both police services and also across the country. So nationally from coast to coast to coast, you see widely disparate determinations of whether or not consent is present and whether or not an account is credible. Even when you have multiple cases with very similar, on all fours fact patterns, we mean that they have very similar components to them, the decision-making about whether or not consent is present often is difficult to track across those different cases, even though you have a similar body of evidence, a similar narrative, similar circumstances.

And so I think that issues of discretion in police assessments in terms of consent really factor in. They -- it frequently has less to do with what the complainant actually articulates in the interviews, or what they say in their statements, what we tend to look at in reviews is what did the officer hear. So as opposed to what the complainant said, how is that interpreted and understood by the officer listening to it?

And frequently there, we see some of what Isabel was just referencing in terms of this notion of what is considered reasonable and what we believe is a -- to be a reasonable or not a reasonable response, again, which may be based, hearkening back to some assumptions about potentially rape myths or stereotypical beliefs, we certainly look at influences of the potential for implicit or confirmation bias.

Confirmation bias for the benefit of Participants is just a tendency to seek out, analyse and interpret information through a lens of what we already think.

Most of us, actually, are very susceptible to that possibility. And we note the interactions of a lot of those things when officers are assessing complainant narratives of sexual assault.

Finally, I would just add that one of the things that we see across reviews across the country is that there is a disturbing range in understanding of the

actual law of consent. We frequently, to again hearken back to Isabel was just saying,

- we frequently see officers saying, "well, you didn't say no, so it's not sexual assault", or
- 3 "he didn't know that you weren't consenting, so it's not sexual assault", again, not
- 4 understanding the affirmative consent law in Canada. And so even at the baseline of
- 5 understanding what is consent, we see issues there.

becomes very, very high.

- And connected to that, we also do sometimes see issues of what I would say is not just a lack of knowledge of consent law, but in fact of disagreement, an active disagreement with consent law, and thus, even if the law is understood, it's not necessarily agreed with by the institution of policing itself or the individual officer, and thus, their interpretation of what is required for sufficient evidence, the standard
- **DR. EMMA CUNLIFFE:** Thank you. It was -- it was apparent in your last answer, Sunny, that you were drawing on some of the things you've learned through the Institutional Accountability Project, and you alluded to it of course in your introduction.
- I wonder if you can provide a little bit more of a description of how -of why this model has been so powerful for you, and how you arrived at the view that
 this model of civilian advocate review of police decision-making was an important part of
 a healthy functioning system?
- MS. SUNNY MARRINER: Absolutely. Well, if I can hearken back, as most things do, to my experience working frontline with survivors of sexual violence. One of the first things that we see, or we learn when we work directly with survivors is that there's a huge, obscure area in policing which is that once the survivor walks through the door of the police station, nobody truly knows what happened behind that door except for the survivor themselves and the officer that was engaged. So there's actually no visibility into, if we can use that word, visibility into what's occurring in sexual assault investigations, and that's evident to us most expressly usually through specific cases. So working with a survivor who was told that they were not believed in sexual

assault and trying to advocate for that survivor's case to move forward, I certainly
learned how difficult it was to determine what actually happened in the police decision
making in that specific case. And so that led my project and my work to many years of
assessing what types of reform efforts we tried to implement in order to address some

of these systemic issues.

It's important to note that these issues have been under discussion, under certainly a great deal of discussion in Canada, particularly in violence against women movement since before 1973, and so in looking at repeated attempts to make change to those issues in policing, what had worked and what had not. And that drew my eye and others that I work with to models of oversight and different mechanisms for overseeing police decision making in sexual violence, outcomes in sexual violence, and models around the world, including also legal advocacy for survivors, and that whole range of possible responses.

Ultimately, one of the mechanisms that we settled on and that we developed uniquely in Canada was a model of case review that took some core foundations from a Philadelphia practice that had been ongoing for about 20 years. And what differentiated it from other types of police oversight were a couple of core things, but the most powerful thing was who was doing the reviewing of the cases.

Traditionally, oversight models tend to draw on people from within the institutions or that are adjacent to or connected to the institutions that are being overseen. And this model of case review instead goes to the subject matter experts in sexual violence, so those individuals who are doing legal reform work or legal advocacy work or frontline and long-term work with survivors of sexual violence in the community that is reporting to that police service.

So what that means is that, ultimately, we drew on what is a loose network across Canada of frontline independent sexual assault centres who were created largely by survivors and for survivors across the country for their kind of core subject matter expertise and dealing with those same survivors and those same

communities that are accessing that police service on the day-to-day basis, but still

2 have a strong subject matter expertise in sexual assault, sexual violence, the behaviour

of complainants and its perpetrators. This was heretofore unheard of, and it took

4 approximately 11, maybe 12 years to build that, including work with privacy law and all

kinds of Canadian legislation to be able to implement it. But the idea is, again, to

6 ensure that there's a safety net for every single case that is not proceeding and that it's

being seen by somebody who brings a trauma-informed intersectional subject matter

lens about the dynamics of sexual assault and the behaviours of complainants, the wide

array of responses, protective behaviours that we take on as survivors in order to

ensure that we're minimizing harm, all of those various dynamics.

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So that model, I think what drew us to it particularly was that it did not rely on the idea that we can do a couple of things and fix institutional or systemic problems. Instead, it said we need to create effective, operational oversight for every single survivor, so that folks who are reporting to the police tomorrow can count on the fact that there is a review mechanism that will be in place for their case; otherwise, what we're doing is we're requiring survivors themselves to be responsibilized for bringing systemic problems to the attention of everybody else in Canada. They are the only people who can disclose what those issues are unless there's a mechanism like that that identifies those issues. So that was what was particularly drawing to that model.

DR. EMMA CUNLIFFE: Thanks very much, Sunny. And one last question, what comes of your reviews? What happens next?

MS. SUNNY MARRINER: It's a good question. There is no one-size-fits-all model that works in every community in Canada. As we know, this is a very diverse, broad country with very significant differences between policing from one area to another. So a lot has to do with what the openness to a given police service is in terms of how recommendations, how commentary might be received. But that said, the idea of review is to attempt to draw attention usually to multiple different areas of an investigation and contribute to multiple different areas of improvement. So we will both

look at systemic issues, trends, observations over time, possible areas where there may

- 2 need to be greater knowledge, skills and abilities available to policing around what
- they're doing, but we also look at specific individual cases. So, for example, if I'm
- 4 reviewing a case and I see that there are steps that were not taken, or perhaps that the
- 5 evidence in the case doesn't appear to lead to the same decision making that we see in
- 6 it, the review team can bring this back to the police service and say that that case
- 7 maybe should be reopened, or looked at a second time, or have additional investigative
- steps taken. So the goals are -- well, there are multiple goals, but the key goals are
- 9 twofold, which is to identify those systemic issues, but also, to create an actual systemic
- oversight mechanism such that survivors no longer have to do that piece of work for
- themselves when they encounter those barriers.
 - **DR. EMMA CUNLIFFE:** Thank you, Sunny.
- Deepa, I'm going to turn to you next. We've heard the word
- intersectionality a couple of times already in this round table. And so I wanted to ask
- you what does the word mean, what does a, for example, intersectional approach to
- 16 sexual violence connote?

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- 17 **MS. DEEPA MATTOO:** I'll start by saying that it's work of
- Professor Kimberlé Crenshaw from States, and she's a black feminist activist who gave
- the terminology so that we can understand that survivor's experience are at the
- intersection of number of simultaneous oppressions, and we can't have an approach of -
- or the idea that everything needs to be seen as the sameness.
- So when we talk about simultaneous operations, it could be race, it
- could be class, it could be caste, gender, ethnicity, sexuality, disability, nationality,
- immigration status, geographic location, such as rural and remote communities, and
- religion, and so on. I mean, there are many other issues, as we know, related to
- 26 homophobia and transphobia, ableism that can also be at the intersections of the
- 27 experience.
- These multiple overlapping systems of operations means that

survivors are not experiencing violence or not -- are not vulnerable to violence in the 1 same way, plus, it also means that they have additional barriers, at times, which are 2 unaccounted for in the interventions, whether it's state interventions such as police 3 services, or sometimes service interventions such as resources given by not-for-profit 4 organizations and other service resources that are structured by the government 5 funding. These intersections could be all of them together on a continuum, they could 6 7 be one or more. But I think what is really important to note is that, as Professor Grant 8 was talking about, the myths and the stereotypes, like, that -- similar to that lens, that 9 this lens, when it lacks in the service provision, or when it lacks in any kind of 10 intervention, you come to the intervention with a lot of assumptions and biases at the onset itself, and therefore, this repeated call for action from the service providers, such 11 as myself and Sunny and Professor Grant, to have interventions structured with an 12 intersectional lens without any myths and stereotypes attached to it is to actually 13 remove those biases that we see sometimes inherently structured in these 14 15 interventions. 16 **DR. EMMA CUNLIFFE:** Thank you. And if I can pick up on one of those dimensions, just one of those dimensions that you referred to. Immigration 17 status, can you explain why that's an important thing to consider in this context? 18 **MS. DEEPA MATTOO:** Well, for multiple reasons. So within the 19

MS. DEEPA MATTOO: Well, for multiple reasons. So within the context of the immigration status comes the continuum of the violence that a survivor might be experiencing before coming to the country and then after coming to the country. There's also an inherent trust issue that we see among a lot of survivors towards the police services or anyone in the uniform and folks with precarious immigration status or who are non-status, they have that inherent challenge of not trusting the police services or anyone in the uniform or anyone in authority because they don't see them as people who would be supporting them and their experiencing violence but, rather, they see them as people who might possibly be harming them or harm them in many cases, as we see.

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1	Immigration status also means that you don't qualify for a lot of
2	services that might be available to people with the status. Immigration status also
3	means that you would be seen as someone coming forward with a complaint with an
4	ulterior motive of trying to get a passport or an immigration status to this country.
5	And all of those reasons of intersections of experiences make it
6	more complex and more difficult for survivors to come forward and get support and
7	routinely neglected in the system.
8	DR. EMMA CUNLIFFE: Thank you for sharing that example with
9	us.
10	Deepa, I'm now going to turn to one of the programs you offer
11	through the Schlifer Clinic, the independent legal advice program. I wonder if you could
12	please explain how the program works.
13	MS. DEEPA MATTOO: So the program came into being in 2016
14	with the help of the funding of provincial government, and the program was structured
15	right from the beginning in two ways. The one aspect of the program was that it was
16	it is still executed through the provincial government directly through a certificate which
17	is issued to the survivors for up to four hours of service, and there's a roster of lawyers
18	that who are on the panel to accept those certificates.
19	The program was a pilot. It was started in three cities. Toronto,
20	Ottawa and Thunder Bay were the three places where this was started. And recently, it
21	has been expanded to all over Ontario, but that roster of list of lawyers has not been
22	expanded from what I know as of today.
23	The second aspect of the program right from the beginning was
24	that it was also situated at the Barbra Schrifer Commemorative Clinic. At the Clinic, that
25	cap of four hours was not right from the beginning was not kept at its cap for the
26	reasons that we have a very different structure of intake. We have a very different
27	structure of wraparound service. Anyone who's coming to the clinic with their legal
28	issues and get advice on the issue of the sexual assault or sexual harassment

experiences would also be offered a risk assessment, would also be offered a safety 1 planning and support from our counsellors for counselling as well as housing support. 2 So from -- for that -- for those reasons, the program right from the 3 beginning was not structured just for four hour services and it continues to be so. 4 In terms of what all the program offers, along with being listened to, 5 being believed and validated, being acknowledged, I think survivors -- so those are the 6 7 things that survivors, a lot of times, don't get. 8 So along with that, survivors get advice on any next legal step in 9 terms of their experience of sexual assault and violence that they have experienced. It could be a recent case, it could be a historical case. And they get support on the next 10 steps that they want to take. They also get support on decision-making around whether 11 they want to report or do not want to report and that they also get appropriate referrals if 12 they need so and, basically, capacity to better understand what all is going to happen at 13 the next step of this situation as they're accessing justice system or any other system, 14 15 for that matter, because a lot of times survivors who come to us they're not necessarily 16 going to the justice system directly. They might be thinking about making a complaint through Human Rights Tribunal. They might be thinking of accessing a civil remedy. 17 And Injuries Compensation Board was in existence in Ontario. Many of them would 18 actually choose to go to the Board as well. 19 **DR. EMMA CUNLIFFE:** Thank you. 20 And so you've alluded to the fact that you assist survivors with a 21 22 range of options beyond police reporting. I'm wondering if you can speak to the 23 patterns you're observing, if any, in the decisions that survivors make about which of 24 those options to pursue. **MS. DEEPA MATTOO:** I think the pattern of the experiences that 25

the perpetrator and a lot of their decision-making around what they want to do next is --

we see are very much similar to what we see in a lot of data that comes out, that most

of the survivors who come to us, they, many times, know their assailant or they know

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definitely stems from that very knowledge and what they want to do sometimes is
definitely around that experience.

So say, for example, if I can give you a more concrete example of that, if she's going to the same workplace or if she's going to the same university, a lot of times the decision-making is around what would happen to my career next.

So the reason, you know -- and we know that. Most of the survivors that we work with, generally it's a general stat that women don't choose to report. But I think what this project is teaching is why do they not choose to report, and why do they not choose to report is because in most of the cases, over 80 percent of the cases, they know this person. They know this person from a very intimate place, and that knowledge itself creates a lot of hardship and barriers in making their choice of going to the cops.

The additional knowledge is around how the criminal justice system works. The minute she tells us, "I want to report. What would happen?" and we start telling her about the steps of the process right from there will be a statement taken and there will be a video recording and what would happen, will she be -- will there be charges pressed, we can never guarantee that.

So all of those basic things that Sunny was talking about earlier, what happens at the police station and what we have to, as, you know, advisors of the situation have to tell her because what Sunny was saying is exactly what we have to tell her, and those are the reasons that also discourage her in reporting.

In terms of some of the things that we saw earlier in the project which we don't see as much is that when some of those statutes of limitation was, you know, changed and people could come forward with their historical cases, so we saw influx of historical cases come forward at one point, it's not at the same level any more. And I think one other additional observation that I can -- I can share with you is that during COVID, while we saw that the number of cases went really high, we saw a

1	number of people reporting go even less.
2	So again, what happens in an economic environment, what
3	happens in our work environment also impacts survivors' capacities to come forward
4	and their choices of taking it forward.
5	But a lot of times something which is worth noting is a lot of times
6	when we do our evaluations of survivors and we try to do a check-in with them after the
7	fact and ask them if they did choose to report, what was the choice of reporting, a lot of
8	times they say, "I wanted to report because I did not want this to be repeated to
9	someone else".
LO	So I think those are some of the observations that I can share with
l1	you, but if you have anything specific, I would be happy to answer that, too.
L2	DR. EMMA CUNLIFFE: No, Deepa, you've been very generous.
L3	Thank you very much, indeed.
L4	Lana, I'm going to turn to you now. You work closely with the
L5	African Nova-Scotian community and we know that African Nova-Scotian women are
L6	even less likely to involve police when they become victims of sexual violence than
L7	white women are.
L8	I wonder if we can begin, for the benefit of those who may be
L9	unfamiliar with Nova Scotia's African community, by inviting you to share some basic
20	information about the African Nova-Scotian community, its history and its present here.
21	MS. LANA MacLEAN: Certainly. It is an honour to actually speak
22	to the voices of women of African Nova-Scotian descent.
23	It's important for the Commissioners to know that since 1783,
24	people of African Nova-Scotian descent have settled in this province alongside our
25	Mi'kma'ki brothers and sisters who helped keep us alive and survive the systemic
26	racism. So to my Mi'kma'ki brothers and sisters, survive the systemic racism. So to my

There are approximately 48 historical African Nova Scotia

Mi'kma'ki brothers and sisters, thank you.

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communities in Nova Scotia. The majority of these communities are located in rural

2 districts or jurisdictions which tend to be policed or not policed at all by the RCMP.

What's really quite important is the history of the African Nova

Scotian community in terms of its under or over policing of the black community and

black bodies as one of the determinates, or the social determinates to why black women

do not necessarily call or contact police.

These unique historical factors, both hold history and contemporary lenses and must be considered as Deepa was saying, in terms of the intersectionality of gender-based violence, the legacy and historical legacy of racism in the Province of Nova Scotia. The experiences of the black community under-police and over-policing of our bodies, our view and our lack of security with police is informed by certainly our rooted – or rooted in the history of enslavement in North America. What we do know, is that our bodies are always surveilled under the chattel slavery, which even was here in Nova Scotia and in our country.

Being policed under the model also led to, back in the day we say, police patrols. So police patrols would make sure that there were no runaway black slaves or would be sent out to find black slaves and black women, anyone who chose to runaway or seek freedom.

And what is unique to Nova Scotia is, even in 2019 with the Scott Wortley Report, is that there's a different configuration of the policing of black bodies in this province through the implementation of street checks. It is therefore reasonable to suggest that people of African Nova Scotian, have a very complex and deeply rooted mistrust of policing. It's also important to note that within the African Nova Scotian community our core values are not based on the individual, but on the community and the collective well-being of others which can be a pivot point for woman of African Nova Scotian dissent reaching out to, or contacting police as a protective factor when in fact it could be a very community-disrupter and place not only the community at risk of being over-policed or as I believe Sunny and Deepa spoke to, the institutionalization of

racism, and as Isabel spoke to, the myths and the biases and those being leveraged against the community without being interrogated with truth and integrity.

So for black women, intimate partner violence or gender-based violence, must be viewed in terms of whether or not we are going to betray the community in reaching out to police. That a betrayal has a lot of cognitive dissidents, a lot of psychological and emotional aspects of well-being that must be taken into consideration, and for particularly all women, but particularly African Nova Scotian women who have prevalence of having our children apprehended by child welfare. As our brothers and sisters in the indigenous community, we need to be protective of that particular vital resource.

We are also conditioned in terms of some of our cultural and social norms given our history with systemic racism over and under policing, that it's our view that we cannot be a sellout. And so there are very complex nuance social constructions within the African Nova Scotian community that impact on how women of African dissent choose to make informed decisions when they're under trauma experiences about how they want to move forward. But the core essence of it, is that we are community-based people, ones that are based in trust and relationship and any particular aspect that would make that vulnerable.

We say black women are the keepers of culture in our community and we have to be protective of the larger – or have more situational awareness and not just our own issues of our own protectiveness, but – and we are very mindful of the impact of what it looks like for black men if they are the perpetrators, to be actually engaged in the criminal justice system and that they are over-represented in the criminal justice system. So for us, it's also another generation of loss into the criminal justice system and do we want to actively participate in that which is a part, again, of our interrogating our cultural normal and our faith-based practices with what is seen as trajectory towards justice.

DR. EMMA CUNLIFFE: Lana, thank you for sharing those

insights. In our preparatory conversation for this roundtable, you said to me that black

women encounter racialized and sexualized tropes every day. Can you explain to me

how a wide circular cultural operationalizes tropes about black women in ways that

4 engender sexual violence or excuse and minimize that violence?

MS. LANA MacLEAN: Certainly. First, the idea of those tropes are based in a womanist or black feminist politic and critical race theory and are formulated within the framework of "misogynoir" which is a term coined by the queer black feminist Moya Bailey to describe the particular racialized sexism that black women face on a daily basis. And those tropes tend to be, in simplest terms, in four categories. That the black women are viewed as too sassy, too loud; we take too much space and then presenting to the larger society, "Well, she must have been deserving, she claimed too much space" or she must have been speaking back."

The hyper-sexualization or the Jezebel issue that is rooted in systemic racism that we are overly sexualized and, therefore, looking for some form of our attention, whether it's around sexualized violence. Or are we the angry black woman who needs to be shut down, that we have, again, too much to say. And then there's this really interesting piece which is the strong black woman, that we have to take whatever is given to us, particularly in the issues around gender-based violence, and do it with a sense of dignity and decore and not to show any fragility.

So those myths and stereotypes and this particular sense of Misogynoir, how they show up in our lives as black woman can be a silencing impact on us, and then therefore, not move us forward in terms of seeking supports that are in the larger community because we're internalizing those because they have been embedded in some of the myths of how we perceive ourselves and how we have actually been seen and been impacted by society. And it's quite nuanced that, you know – what I would say is that black womanhood is routinely and systematically devalued and dismissed in ways that white womanhood isn't. And the above – those four particular tropes are just a few ways in which Misogynoir shows up in society and in gender-based violence and intimate partner abuse as

1 ways to mitigate the community's response and accountability to black women.

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DR. EMMA CUNLIFFE: Thank you. One more question and I think to a certain extent you've alluded to some of this, but I'd really like to service it more directly. What does state institutions and service providers get wrong when they seek to work with African Nova Scotian communities, or African Nova Scotian women? **MS. LANA MacLEAN:** That's a large question. In my clinical practice I think what people get wrong is that they lean into the myth of a strong black woman and believe that because we're not reporting, that it isn't happening. They lean into that the community takes care of itself, and historically, yes, I would say – I am of a generation which knows that the African Nova Scotian community has its own informal restorative justice process. It's not facilitated in ways that are formalized, but there would be a level of accountability where mostly women would meet up with each other to say your son did this to my daughter, we've got grandchildren that we need to share, how do we want to process this and keep him accountable, and then they would engage other black men in the community to provide mentorship, accountability, to talk to them about what it means to be a man and particularly within the African Nova Scotia community, a man of God, and what are their levels of community, a man of God, and what are their levels of accountability as a father, and ways in which the community historically would have provided the women or the children, or take the children out of the community or out of the home as a protective factor so child welfare wouldn't be involved.

So those particular ways of engaging have been -- have -- I think it -- I would say historically have been ways of our informal restorative justice process, which kept the community intact, kept people accountable, but also made sure that the women and children were protected. And there would always within the communities have informal safehouses that people could go to, whether it was an aunt, an uncle; or if someone had to leave the community, that there would be someone -- those women, predominantly, would say "Who has got the car to drive Lana to such-and-such a

community stay with so-and-so until things cooled down?" And then when those things occurred, the people could -- the family could go back to reunification.

That's how we informally have done the work and been able maintain some of those core cultural values and world views. That has -- since the communities are rural and aging, those resources are becoming much more thin. And so the supports for racialized, particularly African Nova Scotian women, in rural communities, that particular way of looking at family reunification, maintaining cultural and normative values has actually become very weak, and women now and children are becoming much more vulnerable and at risk because we don't have that internal resources. The place in which all those internal resources have been actually allocated have been mostly in the urban centres, and that place of being allocated to urban centres have left our Black women and children in rural settings much more vulnerable without the supports.

DR. EMMA CUNLIFFE: Many thanks indeed, Lana.

Emilie, I'm going to turn to you now, and indeed, back to the victimisation, criminalisation continuum. The roundtable package included an extract from a book by Elspeth Kaiser-Derrick called Implicating the System, resonating actually with your introductory remarks.

Commissioners, that extract has not yet been tendered, but it will be. And the extract that was shared describes a phenomenon called the victimisation criminalisation continuum built on the work of other scholars and those, such as Sunny and Emilie, who have described this pattern for women, particularly Indigenous and racialized women, of experiences of victimisation, and as Sunny quite properly said, of disbelief about victimisation propelling some women into the criminal justice system as offenders or as accused.

I'm going to start Emilie, by asking you from your vantage of ED of CAEFS, what can you share about the patterns within criminalised women's experiences of sexual and gender-based violence that you see?

MS. EMILIE COYLE: So I was watching one of the earlier panels discuss the binary between public and private violence, and I think there is an equal myth around the binary of a victim's or survivor and a perpetrator of harm, particularly in the work that we do at the Canadian Association of Elizbeth Fry Societies because most of the people that we work with, who are in the jails and prisons, are people who have experienced, countless times often, violence in their lives. And that violence could have been perpetrated by by an individual, but also that violence has and continuous to be perpetrated by state actors, such as the police, such as, Deepa probably would agree with this, Canadian Border Services Agency, such as our prison system.

And so this myth that there's a clear binary means that we're creating a narrative that portrays some people as being good and some as being bad, and often that is interwoven with ideas and biases around certain peoples. So we're looking at classism, we're looking at racism, transphobia, homophobia, all of those biases play into who is good and who is bad, who is deserving of protection and who is not.

And I'm thinking a lot about what you were just saying, Lana, because this idea of being over and under policed is this idea of often being overly surveilled, but then, conversely, under protected. And so what does it mean to have systems that were set up to protect people that don't end up protecting and end up harming instead? And so we're encouraging a system, then, that is inflicting structural violence on some of the most marginalised people in our country.

And one of the really obvious ways that this has shown up is around sexual violence and coercion in the prison system that has been exposed lately, and particularly in Nova Scotia. Around 2018 and 2019, some very brave women came forward in Nova Institution, which is a federal prison here in Truro, Nova Scotia, and they told the prison that there was a staff member who had been sexually violent with them. They were not believed, and it took them continuing to push and the work of the local Elizabeth Fry Society believing them, like many of the frontline organisations do, to

believe, as Deepa said, to validate, and to help them to understand what the

2 consequences would be for them to come forward. And of course, you may have seen

that this person has just recently pled guilty to the sexual violence that was perpetrated

4 against these people.

The Office of the Correctional Investigator, which is the ombudsperson for the prisons across the country, the federal prisons, in their latest annual report also did a very, I would say, preliminary study of sexual violence and coercion in the prisons and the prevalence of that, and the government has recently put money toward a larger study of violence in the prisons.

And we use that as an example because if you look at some of the ways that people who are criminalised by coming forward, with their examples of the sexual violence that they have experienced in their lives, and the way that the continuum of the legal system treats them, all the way up to... So for example, if you've been in prison, you understand that someone has a correctional plan, and that correctional plan follows them all the way to their parole hearing, and at the parole hearing the members of the Parole Board of Canada will actually get police reports when they're determining the liberty of that person who is before them. And the police reports, for those of you who are aware of how our judicial system work, are not, you know, taken as proven to be true right away. You have to go through the court system and you use that as part of your evidentiary record. But those police reports are often used at the end of a person's sentence to determine how their liberty is going to be structured.

And so, you know, all of this ties together, and it means that we have both individuals who are experiencing the sexual violence that may come from a perpetrator, but also the violence of a system that doesn't believe them, and continues to perpetrate falsehoods about them from state's actors all the way through their experience with the legal system.

So I'll leave it at that.

1	DR. EMMA CUNLIFFE: Thank you, Emilie, and you may want to
2	pick up again on the example of Nova Institution in your answer to the next question.
3	But I just wanted you to invite to amplify a little more, what are the additional barriers
4	that criminalised women face when they seek institutional responses for sexual violence
5	that they encounter?
6	MS. EMILIE COYLE: Can you repeat that?
7	DR. EMMA CUNLIFFE: Of course. What are the additional
8	barriers that criminalised women face when they seek to report sexual violence?
9	MS. EMILIE COYLE: Well, the fact that they're criminalised is one
10	of the pieces of the intersection of oppression that the people that we work with face.
11	The criminal record and the fact that they have been involved with the system means
12	they already have been branded in a certain way, and probably, in many people's
13	minds, within the system as less deserving of protection.
14	And so when these people came forward, they were not believed, it
15	took a really long time for them to finally be believed. And you know, behind the scenes
16	what I'm trying to do right now with the Government of Canada is push to, sorry, is push
17	them to understand that when we're looking at sexual violence or sexual coercion that is
18	perpetrated by a state actor it's really important that we get the voices of the people who
19	have experienced this violence in the mix. I think, Sunny, you talked about this in your
20	work as well because if we're always going to have experts, people who study this as
21	the voices that we listen to, we're not going to get the reality of people's experiences.
22	And we have to believe them and we have to create spaces where
23	they are not tokenized but, in fact, that we value the experience and their perspective
24	because it will help us all to create systems that are better communities of care.
25	I think about what you were mentioning, Lana, around the collective
26	well-being of others and how the African Nova-Scotian community came up with non-
27	carceral responses in many ways to the harm that was being done in the community,
28	and those non-carceral responses are certainly the responses that we at the Elizabeth

1	Fry Societies are looking towards as solutions. And I know we'll probably talk about
2	solutions later.
3	DR. EMMA CUNLIFFE: Emily, thank you very much indeed.
4	I'm now going to shift gears a little bit and turn to Pam, but it's a
5	conversation that I'll invite each of you to engage in.
6	Sunny alluded to the fact that we've been that there have been
7	efforts at reform of one sort or another of institutions, of policing, of the law about sexual
8	assault at least dating back to 1973, and arguably earlier, and it's to this pattern of
9	reports and recommendations that I would now like to turn.
10	Pam, you recently co-authored a report for an organization called
11	FAFIA, or the Canadian Feminist Alliance for International Action. That report focuses
12	specifically on RCMP culture with regard to misogyny, racism and violence, and it has
13	been tendered as Exhibit P-003654.
14	The report brings together a number of research reports and
15	inquiries conducted by others, including the final report of the National Inquiry into
16	Murdered and Missing Indigenous Women and Girls, the Bastarache final report on the
17	implementation of the Merlo Davidson settlement, reports produced by international
18	agencies such as SIDOR and the Inter-American Commission on Human Rights and
19	reports produced by non-governmental organizations such as Human Rights Watch.
20	Let's begin, Pam, with the patterns that have been documented in
21	these reports with respect to how police handle complaints of sexual violence,
22	particularly sexual violence against indigenous women.
23	What did you and your team find in this regard?
24	DR. PAMELA PALMATER: Thank you for the question.
25	We did the unpopular research of police as perpetrators of
26	domestic violence, sexualized violence, corruption, exploitation, you name it, and it
27	really goes to the question of who shows up to the call when you've been raped, when
28	you've been assaulted, when you're experiencing domestic violence. And

unfortunately, in many police forces but disproportionately the RCMP, in First Nations,

- 2 remote communities, rural communities, northern communities which, you know, are
- primarily indigenous and black, you have a high chance of a domestic abuser showing
- 4 up at your door, a rapist, a pedophile, someone who has not only committed sexualized
- 5 violence against their own teammates, female teammates, but has done so in the public
- 6 with a high degree, almost complete impunity.

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To say that that would impact the way in which the RCMP

8 investigates domestic violence calls would be a gross understatement.

All of these reports found that the RCMP represent a toxic culture of racism, misogyny and sexualized violence and also domestic violence at every level of the RCMP and in every region of the RCMP, and it's been well known and well documented for decades. They are themselves a public safety issue for women in general, but disproportionately indigenous women and girls. They are, in fact, predators or they cover up for predators.

What does this mean?

elements of a charge and whether there's evidence really is a completely separate issue when we look at the RCMP breaching the laws and human rights of women in general, but in particular indigenous women and girls. They, themselves, regularly and, according to their own internal reports on their own corruption, breach lots of *Criminal Code* provisions, including sexual assaults, sexual touching of minor, physical assaults. Domestic violence is rampant and systemic, according to the research.

They violate *Charter* equality for women and non-discrimination, and they don't treat violence against women very seriously, not surprisingly, because they do it themselves. And the wealth of international human rights laws.

So the focus on charges limits the conversation to the *Criminal Code*, but Canada has legal obligations, as do the RCMP and all other police forces, to -- legal obligations to prevent violence against women, to investigate fully and fulsomely

and properly investigate violence against women, to prosecute. And while people might

- think police aren't involved in that, not doing investigations, not filing reports or doing
- 3 shoddy reports actually hinders prosecutions and then, of course, redress, redress from
- 4 police as perpetrators themselves of sexualized and domestic violence, but also the
- 5 failure to protect women or follow up for domestic violence.

This results in, unsurprisingly, large cases of unfounded conclusions, unopened files, and under reporting by indigenous communities and women, a lack of follow-up, assessments of the woman's credibility as -- well, improper assessments of the woman's credibility, improper assessments of what constitutes consent and whether or not they choose to investigate.

Contrary to the popular police defence, this isn't about unconscious bias. These are conscious criminal choices that the RCMP, primarily, and many other police forces are making to engage in acts of sexualized violence against the public and their own members, but also breaching all of these human rights laws with, again, impunity and it hasn't gone unnoticed by all of these international communities about what's happening.

So you've got, you know, skewed discretion, lack of assessments and, even worse, in rural, northern and First Nation communities, they cover for their best friends who are doing it, so you don't even have to be an RCMP officer in order to be part of the male group of people who are immune from prosecution or they don't have to worry about it because in rural communities, that's your soccer coach, that's your next door neighbour, that's, you know, your best friend is the RCMP. And they all admittedly cover for each other.

And so, I mean, that's just kind of a basic overview, but it's the stuff people don't want to talk about in these kinds of scenarios.

DR. EMMA CUNLIFFE: Thank you, Pam.

And I wonder if we can focus on a couple of particular reports and particular findings.

1	If we can begin, please, with the Bastarache report, which is
2	perhaps the most recent and the most comprehensive study of sexual violence within
3	the RCMP, what did the former Justice Bastarache find in that final report?
4	DR. PAMELA PALMATER: It's I think it's important to
5	understand that this is a former Supreme Court of Canada Justice. They work within
6	the justice system, so he and his team would not say these things lightly. But he and
7	his team were shocked at the level of racism, misogyny and sexualized violence.
8	So we're not just talking about not allowing female RCMP officers
9	to be promoted, not just not including them in opportunities, but actual violent
10	penetrative rapes. They were shocked at how often they could do that and how easily
11	they get away with it. And also, that there was no consequence, that oftentimes what
12	happened, if it was even reported, and many of them were, was that the offending male
13	officer would be promoted. So then you have consistently within the higher ranks
14	predators, sexual predators, people who are engaged in I mean, these are crimes.
15	The RCMP will treat them as HR issues, you know, you might get
16	docked a couple of days pay, but in fact these are crimes and they're not treated as
17	crimes. And so Justice Bastarache and his team found a high level of, you know,
18	sexual assault, sexual harassment at every level and in every region. And, you know,
19	he didn't specify all of them, but anyone can go to the internet and just do a five-minute
20	cursory look at RCMP in Nova Scotia, and you will find tons of sexual assaults of
21	children, sexual assaults of women, uttering threats against women, domestic violence,
22	corruption, you name it. So it's here in Nova Scotia too, and that's an uncomfortable
23	truth.
24	They found that this led had lots of consequences. It could be
25	potentially suicide from the women who weren't helped or believed, or who were
26	traumatized in the investigatory process, who lost opportunities. Retaliation is common.
27	Even today, one of the complaints is that the RCMP officers and officials are making fun
28	of those who are participating in the settlement portion, and, you know, calling them

1 not believing them. But also, severe psychological trauma, and that impacts you

2 physically, post-traumatic stress disorder, divorces, the inability to function, the inability

- to work. Like, these were severe consequences. And not the one or two bad apples,
- 4 and he specifically addressed that myth: well, there's one or two bad apples in every
- institution. No, in fact, it's rampant in the RCMP, has been for a long time, all the way
- 6 up the chain, and they have refused to address it.

ever been fired for this.

And I think that's the other key part of this report is not only do they not have the capacity to reform themselves, is that they have refused to do so. When confronted with other reports like the Human Rights Watch Report that documented numerous reports of indigenous women and little girls being raped by RCMP officers, the response by the former Chief Commissioner was an email to all RCMP saying, "Don't worry, guys, I got your back," not, "Oh, my goodness, this could be a public safety crisis and we better look into this, we better investigate." It's, no, I got your back. The Auditor General too has also said they are concerned more about their reputation than dealing with the predators. And according to the date of her response, no one had

The other thing I think that comes out of this Bastarache Report is a really clear indication that in the billions of dollars now of class action and civil suits against the RCMP, that has not stopped the problem, nor has there been accountability on the offenders. Now imagine calling the RCMP, for guys who have raped their own female officers, and expecting them to have any semblance of dispassionate, unbiased assessment of consent, of credibility, of whether or not there's a potential of fear, whether it could be a lethal event, whether it couldn't be a lethal event. They are simply no longer qualified to be in that role anywhere near women, domestic violence, sexualized violence, or anything else.

And Bastarache, his number one recommendation is consistent with the recommendation of the UN Special Rapporteur on violence against women and indigenous women. There needs to be an external, comprehensive, powerful review of

the RCMP, which does several things, looks at whether or not the RCMP can be saved or should it be dismantled, but, too, to go after every single perpetrator in that force and look at every file that they have touched, and whether or not that could have had an influence on whether or not a woman was protected, whether or not she was believed,

DR. EMMA CUNLIFFE: Many thanks, Pam.

whether or not the guy was allowed to go on and continue to commit crimes.

Emily, I'm going to turn back to you. The pattern of recommendations and reports and failure to pick up on recommendations and reports is one that I know is also known within the correctional context. I'm wondering if you can talk a little bit about that pattern, whether through the lens of the experience of the Creating Choices Report by Madam Justice Louise Arbour or the experience of the Office of the Correctional Investigator, which you've already alluded to, to a certain extent.

wrote in the Commission into the inquiry of certain events that happened at the Prison for Women in 1996, but that was 6 years after Creating Choices, which was the report of the taskforce of federally sentenced women in Canada. And she said in her -- actually, so I wrote it down because I didn't want to get it wrong. She said in the Commission into inquiry of certain events at the Prison for Women in 1996, and this stands true today, that the rule of law is absent in the prison, although rules are everywhere. And I think we have to remember that as we -- this is 1996 that that was said. And when we go into the prisons designated for women across the country, we see that all the time, that the rule of law is absent but that rules are everywhere.

And so just to give a little bit of background on Creating Choices, in April 2020, that was the 30-year anniversary of the Creating Choices Report, which was a report of the taskforce on federally sentenced women, which the executive director of the Canadian Association of Elizabeth Fry Societies co-chaired along with Correctional Services Canada at the time. And there was a lot of optimism that we were going to be

creating a system that addressed the issues that were identified at the time. And I think if I tell you what the issues are that were identified in 1990, you're probably going to find that those issues are similar to the issues that we identify today. So we're talking about the prison for women is not adequate; it's overly secure; that programming is poor; that women are being isolated from their families; that the needs of Francophone women were not being met; that the needs of indigenous women, at the time referred to as aboriginal women, we not being met; that responsibility for federally sentenced women must be broadened; that women need to be better integrated into the community; and finally, and most importantly and something that we always bring up is that incarceration does not promote rehabilitation.

And so in order to address those issues, the report identified and recommended a blueprint for how to move forward, and it was a community centred, nonpunitive, responsive to the needs of criminalized people model. And it was intended to resolve the violence, harm, and the unlawful treatment that women and gender diverse people had long been subjected to in prisons designated for women and continue to be to this day.

Some of the examples of the reforms that were suggested were, for example, you wouldn't have correctional officers, you would have primary workers. And to this day we have primary workers, and those primary workers would be in clothing that you and I and everybody else would be wearing. They wouldn't be wearing uniforms. That there would be no fences around the prisons, that the gymnasiums that were built would be utilized by the communities as well as the people in prison, and that there would be a back and forth between community members and people who were in prison.

Within two years of the Creating Choices Report being released, already Correctional Service Canada was starting to implement more securitization within the prisons, and it was then in 1996 that the incident happened at the Prison for Women in Kingston, where 9 -- I believe it was 9 women who were violently assaulted

by Correctional Service of Canada staff, and that led to this inquiry by Madam Justice

- 2 Louise Arbour. And she made recommendations as well. Many of those
- recommendations in 1996 also have not been implemented. The Missing and Murdered
- 4 Indigenous Women and Girls Report makes recommendations around criminality.
- 5 Those have not been implemented.
- And so there are -- you know, I could probably come up with other
- 7 reports that had recommendations that have not been implemented. And the key
- learning here is that -- well, actually, the Office of the Correctional Investigator, which is
- 9 the ombudsperson for the prisons, as I mentioned earlier, does make recommendations
- frequently in their annual reports. But those recommendations are often met by
- 11 Correctional Service Canada Commissioners with platitudes and promises of ensuring
- that they'll do better, if they admit at all that they've made some errors.
- 13 When we brought forward the issue of sexual violence and coercion
- to Correctional Service of Canada, the response was we have a zero-tolerance policy.
- 15 What does a zero-tolerance policy mean when in practice people are continuing to be
- 16 harmed.
- And so we have to make sure that if there is an oversight
- mechanism, that that oversight mechanism and any recommendations that are made,
- are recommendations that will actually have teeth, will be practical, and that there will
- be accountability; that state actors cannot act with impunity, which is why people don't
- trust them. And I think that certainly if we're going to have -- you know, the Office of the
- 22 Correctional Investigator themselves are frustrated by the fact that year over year over
- 23 year they bring up the same issues; you know, aging population issues.
- The fact that people in prison are going to die 20 years earlier than
- 25 the rest of the population because of the way that they're treated in the prisons should
- be cause for alarm for all of us, and yet we allow them to continue to operate as if prison
- 27 systems are not a system that we just created ourselves. And why aren't we examining
- that prison system the way we examine all of the underfunded frontline service

- providers who have to, year over year, ask and beg for scraps of funding, when next
- year, the Correctional Service of Canada is going to get \$3 billion to continue to harm
- 3 people who are in their care?
- So I ask that any recommendations and oversight body that we
- 5 implement when it comes to any of these commissions of inquiry definitely have the
- teeth to hold people accountable and to hold systems accountable.
- 7 **DR. EMMA CUNLIFFE:** Thank you very much indeed, Emilie.
- 8 Deepa, I'm going to turn to you because I know that you too have
- 9 experience making policy recommendations and experiencing some of the risks and
- some of the possibilities of engaging in that work. I wonder if you can speak to your
- 11 experience in that regard.
- MS. DEEPA MATTOO: Sure. So the experience that I'm going to
- speak to is around the issue of the forced marriages, which, for benefit of everyone
- here, includes all different forms of violence when a forced marriage happens, and most
- likely almost all cases it follows with sexual violence and includes various other forms of
- violence, including coercion and control.
- So many feminist organizations and so much literature on the issue
- of the forced marriage actually had one strong recommendation that was given to the --
- in many policy briefs, which was around the multisectoral approach to the issue of the
- 20 forced marriage, coupled with the intersectional education strategy.
- A lot of knowledge and experts kept on asking that the racialized
- survivors should be at the forefront of any measures that are taken to address this form
- of violence. There was a lot of emphasis in the recommendations put together by the
- South Asian Legal Clinic of Ontario to make sure that there was an accurate risk
- assessment of these cases and that racialized women actually were located with the
- services which were suitable for them instead of putting them back into the structures
- which sometimes we see as the White saviour complex towards the racialized women,
- and undermining their rights and dignity.

Unfortunately, the reports that were put together by the feminists 1 and the scholars was -- were quoted as the reasons for a bill that was introduced and 2 passed into 2014 by the Federal Government, titled as Bill S-7, Zero Tolerance for 3 Barbaric Cultural Practices Act. And this Act criminalized many practices, including 4 forced marriage, polygamous marriage, so-called honour-based violence. And as the 5 outcome of that bill, there has been a complete stance taken that we have done what 6 7 we needed to do, and the issue was put under the rug. And that was the fear of many 8 racialized feminists and intersectional feminists in this country, that that would be the 9 outcome. Unfortunately, it did become a section on the Code that will never be utilized. I actually sometimes in my sarcasm say, "Why don't we interview any RCMP officer, 10 any police officer in this country and ask them, 'What is the section on the Criminal 11 Code under which you can charge someone under forced marriage?" And I think I can 12 almost guarantee no-one knows. 13 So that's the state of the affair of this section. So, unfortunately, I 14

So that's the state of the affair of this section. So, unfortunately, I think when Emilie was talking about the criminalization piece, I feel that the criminalization sometimes is used as a tick mark strategy of we have done something about it, rather than doing something about it. And it actually puts the communities in the harm's way rather than supporting them.

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Emilie also mentioned about MMIWG, and I really want to give one example of that kind of -- in the context of Ontario, it's really important to remember the MMIWG recommendations came out in April 2019. One of the recommendations was that the provincial government should establish a healing fund for families of missing and murdered women. These funds should be accessed through an application process pursuant to established guidelines.

In June 2019, in the same year, the Ontario government actually purged a three-decade long Criminal Injuries Compensation Board, the only board which actually had a compensatory scheme through which people could access funds for healing. Instead, they replaced it with Victim Quick Response Program, which only

1	offers supports for immediate needs, and none of the sexual assault survivors can
2	actually get any healing funds from that program.
3	So these two examples I wanted to share with you to just
4	demonstrate that how many times the recommendations made or how many times the
5	very well-taught labour of the feminist communities is either becomes part of the
6	material on the shelves or it results in outcomes which are completely unrelated.
7	And a lot of these issues are treated as if they're happening in
8	siloes, as if they're unrelated, as if they don't have one thing has nothing to do with
9	another which is a complete smokescreen, if I may say call it. And I believe that an
10	accountability mechanism and implementation is really important, as Emilie was saying.
11	But I also want to say something that probably is important for all of
12	us to reflect on. Most of the discussions that we are going to are doing today or going
13	to do, is the knowledge that we already have, it's the knowledge that we already know.
14	Most of us in the room probably did not hear anything new. Most of us in the room are
15	probably not shocked. And to me, that speaks to itself, that speaks to what is lacking,
16	that speaks to what we are not doing.
17	Thank you.
18	DR. EMMA CUNLIFFE: Thank you very much, Deepa.
19	I see that we're just a little past our normal break time. I've got one
20	more question before we take the break.
21	Sunny, I wanted to turn to you and ask you, Deepa's just spoken to
22	the frustration, and I think we heard the same frustration from Pam. Two questions that
23	I wanted to draw two strands out from some of what Pam shared with us. The first is,
24	Justice Bastarache in his report, spoke to the courage showed by the RCMP women
25	who came forward and described the sexual violence that they've encountered. I
26	wonder if you can speak a little bit to that.
27	MS. SUNNY MARRINER: Thank you, yes.
28	In my frontline support work, it happened somewhat organically that

people started brining female police officers for support to me over a period of time,

about 10 years, and I'd like to draw from that experience as well.

What I will say is that in the -- you know, in 25 years in frontline sexual assault centres that are fully anonymous, fully confidential, often we have slogans like, "No records no time for no reason" for the protection of our clients or our service users. Female police officers do not reach out and come forward to frontline services very regularly. I can certainly say that I didn't see it for many, many years.

The code of the "blue wall" is often stronger than the need and desire to seek support when a person is in significant personal crisis or experiencing trauma. So even if a police officer -- a female police officer who's experienced sexual violence is, for example, contemplating suicide or sitting at home considering, you know, other injurious responses, that person still is so deeply conditioned, frequently, against picking up that phone and telling someone what happened inside their experience with policing. That's considered a huge betrayal of everything that is kind of built into the integrity of a policing service and that idea of a, quote/unquote, and I use this word deliberately, "fraternity" of police.

And so that particular barrier further isolates survivors, like policing survivors of sexual violence, and further puts them in a position where not only can they object to the lack of institutional accountability of the workplace that very often they have gone to because they believed that it held honour, integrity, professionalism, a lot of those core values, they can't speak out about that, but then they also can't get some of the elements that are needed for healing.

One of the ways that any of us heal from traumatic experiences is through a shared experience with others. So even studies, for example, of folks who have gone through mass tragedy events is that the connection to other people who can understand what you've experienced is very often what helps you feel more resilient and helps normalise your own reactions.

So those officers who spoke out, just in that way, just in breaking

that fundamental code had to breakdown something internal about what they felt they

were able to speak to, and also, interestingly, also grapple with a feeling of betrayal of a

service that for many of them loved. But then above and beyond that, survivors of

4 sexual violence, who are within -- and this also extends to military, this extends to a lot

of sort of paramilitary institutions, they also deeply risk their own health safety and lives.

6 So it is not infrequent at all to hear survivors of sexual violence, or officers who

transgress in any way, internally threatened with not receiving backup or being left to

8 deal with calls on their own. This is particularly a weighty threat for officers who work in

isolated detachments and detachments where there is very little or very little backup to

begin with, and so that's a very real threat of the potential of loss of life or injury if you

breach those informal codes.

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So what we learn, and I think Pamela alluded to this, what we learn is that even if you have one officer who is committing crimes, you have nine officers who will not identify publicly or outwardly that that officer is committing crimes because of a whole -- all of those factors that we have just talked about.

on the same topic is how -- one -- another of the threads that Pam spoke to that's been documented in the reports is this turn to protect the institution rather than try to understand what's happened and grapple with it. And I'm wondering if you heard parallels in that to your experience with respect to your work on unfounded reports and how police have responded to, for example, the Globe & Mail series about unfounded?

MS. SUNNY MARRINER: Yeah. I would say that for many decades of frontline work and feminists work and systemic change work in trying to address issues within policing, one of the first barriers that you hit is a denial that it's occurring at all, and so that is the starting point of anybody who wants to do active work is you are placed in a position of having to prove that the problem exists. And when we do an analysis, particularly of police reform work, but with violence against women, specifically, and we look back over, you know, 50 years, just, you know, taking that one

1	block in Canada of work, a vast swathe of that work is about trying to prove that the
2	problem actually exists. So consultations, research reports, white papers, you know, all
3	of these mechanisms are all about trying to articulate the problem. Exactly as Deepa
4	said. Things that have been said again and again, and then again, but when the next
5	issue occurs we are right back to trying to argue that the problem is that the problem
6	doesn't exist.
7	And so I think that there is a huge issue that Sorry. I realise that
8	I can have a loud lawnmower in the background, which is probably disturbing to you, so
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LO	DR. EMMA CUNLIFFE: We can't hear it all, Sunny, actually.
l1	MS. SUNNY MARRINER: Oh, you can't? Okay, that's wonderful.
L2	I was so worried about that.
L3	So yes, absolutely. As I said, I think where we get dragged down
L4	into cycles is trying to prove the problem exists, but then also not having access to the
L5	information that allow us to articulate that problem. So access to policing data, access
L6	to statistics on what happens to reports. So you're asked to prove something
L7	continuously, you go through the mechanism of proving it, it is proven,
L8	recommendations are released, and then we're back to the cycle again when we start
L9	up again with the question of need for proof.
20	DR. EMMA CUNLIFFE: Thank you very much, indeed.
21	Commissioners, my apologies for running a little long there.
22	COMMISSIONER MICHAEL MacDONALD: Not at all. We'll take
23	a 15-minute break. Thank you.
24	Upon recessing at 3:23 p.m.
25	Upon resuming at 3:41 p.m.
26	COMMISSIONER MICHAEL MacDONALD: Thank you.
27	Dr. Cunliffe?

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DR. EMMA CUNLIFFE: Thank you, Commissioner.

1	During the break, Lana, you mentioned that there is something
2	you'd like to add to the answer you previously gave to my question about what state
3	institutions and service providers get wrong about African Nova Scotian communities. I
4	wonder if you want to take the opportunity now?
5	MS. LANA MacLEAN: I appreciate that, thank you very much.
6	What I failed to identify was that within the African Nova Scotian
7	community there are certain ways in which service delivery, the conventional service
8	delivery agents for women-serving organisations although meaningful and well
9	intended, may hire someone who looks like me; however, putting that level of
10	accountability and capacity and responsiveness to the African Nova Scotian black
11	women's lives with one person sets that person up for race-based trauma themselves.
12	So what they tend to get wrong is, like, siloing or just, you know, finding small amounts
13	of funding to provide a service delivery to a large group of women who have different
14	experiences. So what they get wrong is based on their lack of core funding to provide
15	responsive care to culturally diverse communities, specifically, the African Nova Scotian
16	community.
17	What other things that I don't think are intentional is that we lean
18	into this whole idea of trauma-informed care without critically understanding the
19	intersectionality lens that I think Deepa spoke to, but specifically to the African Nova
20	Scotian community how race and trauma, not just impact on the individual, but also on
21	the community. Again, needing to have that wider situational awareness. And that, you
22	know, when black women do take the courageous step to engage with policing forces to
23	talk or even speak to the issues of gender-based violence, that once again, that they
24	are not believed. People assume in 2022 that black women's voices will be heard. And
25	it goes back to what was spoken to again about the implicit and unconscious bias that
26	black women are disproportionately still are being impacted by.
27	And the last thing I think that service providers certainly need to
28	have an awareness of is that, again, program designs don't always take into

consideration a cultural lens. When we look at how housing or shelters are designed,

- 2 for many black women who may leave, going to a shelter can actually be putting
- themselves in psychological harm to engage in racism in a shelter environment,
- 4 whether it's by other women in those shelters who may not have ever cohabited with
- 5 other black folks, that there's a higher level of, you know, critique that women find and
- 6 vulnerability to collaborative or co-sharing, even though we intergenerationally
- 7 cohabitate in our communities. To have a lens as a black woman in a sheltered
- 8 environment doesn't always mean that they're safe from the impacts of micro-racial
- 9 aggressions. So I think those are really important elements that service providers need
- to take into account.

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- And in terms of policing, there's a prevalence for police to look or seek to leadership in the African Nova Scotian community by informed men. They look towards male leadership. And that becomes problematic when, as I said earlier, women are the keepers of culture. And leaning it to men to be the leaders or the spokespersons from our community can put women more in jeopardy because now these men are elevated by police, and similar to what Pamela was speaking to, some of these men are perpetrators of violence as well. So those are very nuanced pieces that I think it's important to take into consideration that the -- you know, connecting or creating partnerships with the African Nova Scotian community that are not gendered, equity-based places women at risk in a different nuanced way.
- So I caution when RCMP or police agents say that they are partnering with the African Nova Scotian community. Who are those people that they're partnering with? And I think it's, again, based on gender, how people perceive leadership when that is not necessarily culturally reflective and it can, again, put women and children at risk and in harm.
- So I just wanted to just to circle back to those particular things that from an African Nova Scotia lens are really I think important for the Commissioners to know. But whatever funding's available, I think there needs to be targeted funding,

- whether it's to the conventional women's servicing organizations, to ensure that the
- 2 service delivery models are making adaptations that are culturally responsive to black
- women, and that the funding models would not just be about hiring one woman to
- 4 service a large demographic, but a team of black women, or people who support black
- 5 women's liberty and protection around domestic violence or intimate partner violence
- and sexualized violence, and that some of that work from an African Nova Scotian lens
- is intergenerational, so young women and older, mature women as part of the teams
- 8 that lead some of the work.

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- 9 **DR. EMMA CUNLIFFE:** Lana, thank you very much for addressing those dynamics.
- So I'm now going to shift gears again a little. So far, our discussion 11 has addressed some of the general patterns of police and institutional responses to 12 sexual violence and other forms of gender-based violence. We've heard about some 13 individual cases along the way, but we're now going to turn to a longer discussion of a 14 15 particular case, that involving Ms. Susan Butlin. Ms. Butlin was murdered in September 16 2017 at the age of 58 by her neighbour. They lived near Tatamagouche, Nova Scotia. A summary of an internal RCMP report about the events leading up to the events of Ms. 17 Butlin's murder has been exhibited as Exhibit P-003678. And a more complete version 18 of that -- a complete version of that report, subject to redactions, has also been 19
 - Isabel, if I can turn first to you, at the outset of our discussion, you kindly explained the definition of consent in Canadian law, and we'll come back to that in a moment. But first, can I please ask you to describe what happened to Ms. Butlin, both the actions of her neighbour and what you know of how the police and judicial system responded to her experience.
 - **PROFESSOR ISABEL GRANT:** Yes, thank you. Well, as you've described, Ms. Butlin called the police in August of 2017, and told them that she had been sexually assaulted the month before by her neighbour. She described aggressive

conduct on his part. She described him as intoxicated, and that she was afraid. She told him she wasn't interested but he persisted. And she then made the decision, for her own safety, to acquiesce to his sexual advances. And then he -- as -- when she finally got him to leave, he told her that he would be back, which she took as a threat.

When she called the police a couple of weeks later, they told her that no crime had taken place, that that -- what she had described was a consensual

When she called the police a couple of weeks later, they told her that no crime had taken place, that that -- what she had described was a consensual sexual encounter. So a few days later, she went and she tried to get a peace bond.

The notice was served on the perpetrator and there was a delay, an inevitable delay.

The judge who was hearing that application for a peace bond thought there's more here than a peace bond, that there's evidence of a crime. And so he asked the Crown counsel there to get back to the RCMP, and the RCMP repeated their position that there had been no crime that had taken place.

In the meantime, the perpetrator's wife had contacted the RCMP and told them that she was afraid her husband was going to kill Ms. Butlin, that he was drunk, and then she called them back and said that he had a gun. The RCMP briefly arrested him for impaired driving, but my understanding, and I'm not entirely clear on this detail, was that he was released.

So she continued to try to communicate with police her discomfort at how this was being handled, but received the same response. Said that she -- the police told her she hadn't said no, she hadn't told him that she wasn't welcoming his advances and she wanted them to stop. At one point, he even threatened her, trying to get her to withdraw the application for a peace bond.

All this happened, and then a few days before the peace bond was to be adjudicated, the perpetrator shot her in her home and killed her. My understanding is that he has since been convicted of second-degree murder and that -- it's just -- if I can just add, anyone reading this description, it's a very upsetting description because she did everything she could to use the systems in place to get her some help. She talked to a friend to get support. She called the police. She repeated

those concerns. And reading that description, you can also see several potential crimes

in addition to sexual assault that the police could have used to at least try to intervene in

- 3 this situation, but they didn't.
- 4 **DR. EMMA CUNLIFFE:** Thank you. And, Isabel, if I can just take
- 5 you back to one of those potential crimes, you carefully explained Ms. Butlin's statement
- that she decided for the sake of her safety to acquiesce to the sexual activity. Does that
- 7 meet the criteria for consent in Canadian law in your view?
- 8 **MS. ISABEL GRANT:** Absolutely not. There is nothing in that
- 9 description. And, again, I'm limited to that description, that there's nothing in that
- description that suggests either that she wanted the sexual activity to take place, which
- is the "act" part of the crime, nor that she communicated her consent or agreement to
- the perpetrator. She said that she was afraid. She said that he was stronger than her
- and that he was very intoxicated. And women are constantly in the position of having to
- make those split-second assessments about their own safety and what is the best way
- to prevent this from escalating even further. And she made that split second
- 16 assessment.
- But I sort of understand where the problem came from when I saw
- that RCMP Best Practices document, because as you read earlier, it describes the
- different ways she can say "no", which is not accurate.
- The other thing about that document, if I can just add one more
- detail, is it leaves out a number of other circumstances in which no consent is obtained.
- They cite a bunch of examples from one section of the *Criminal Code* that is specific to
- sexual assault, but there's another section of the *Criminal*
- 24 Code that deals with all assaults, including sexual assault. And it specifically talks
- about no consent is obtained where there is violence or a threat of violence. And that's
- 26 not in that RCMP document which was a pretty glaring omission, particularly in the
- 27 context of this case.
- DR. EMMA CUNLIFFE: Thank you, Isabel. In an article titled

1 "The Sexual Assault of Older Women" with your co-author Janine Benedet –

- 2 Commissioners, this article has not yet been tendered but participants, it's
- 3 COMM0059877 for your reference.
- You write about the cases and patents that are discernable in the
- 5 law with respect to the sexual assault of older women which you define as being women
- 6 over the age of 50. And my first question is, is why did you choose this age?
- 7 MS. ISABEL GRANT: Yeah, no, and I know many of us in the
- 8 room probably don't want to think that 50 is an older woman. We did that quite
- 9 deliberately after reviewing the literature that looks at ways of thinking about age that
- are context-specific. And for women, in the context of sexual violence, 50 is older
- because we see the typical expected, if you will, victim of sexual assault as either being
- a girl or a woman in midlife and, you know, we link it to sexual attractiveness. There
- may be subtle links to a woman's, you know, ability to procreate, all kinds of things. But
- we wanted to have an inclusive definition because we were struggling, frankly, to find
- these cases in the case law. There were so few cases. So we decided to go with a
- lower age recognizing that these women are not necessarily old, but they are older than
- the more paradigmatic sexual assault complainant.
- DR. EMMA CUNLIFFE: Thank you. So "older" is carefully
- 19 chosen?
- 20 **MS. ISABEL GRANT:** Yes.
- DR. EMMA CUNLIFFE: And my next question is really about the
- 22 conclusions that you and Professor Benedet drew. What did you observe about the
- experiences of the women in this group, to the extent that you could find cases?
- MS. ISABEL GRANT: Well, I think what was really striking to us,
- was what we didn't observe more than what we did observe. We looked at 20 years of
- reported case law. That's a long time. And we compared that to the social science
- evidence. And what we saw in the social science evidence was that, like with younger
- women, older women tend to be sexually assaulted by people they know, their spouse,

loved ones or very old women, often caregivers. Those cases are not what we saw. In

fact what we saw looked like what we saw with sexual assault for all women in the case

law three or four decades ago. Those cases of intimate partner sexual assault, sexual

4 assault by a neighbour or friend or a date or any of those kinds of sexual assault were

5 completely absent. The cases we saw involved older women whose homes were

6 broken into in the middle of the night by a stranger and they were beaten and raped.

7 They were very, very violent, very disturbing cases, but much more kind of the

stereotypical, if you will, sexual assault. There was violence, there was resistance,

9 there were often weapons, there were often very grievous injuries to the women

involved. But completely absent in the case law were intimate partner sexual assaults

11 for this group of women.

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And what we concluded, is that there are two things probably, and again, describing what you don't see is harder than describing what you do see, but we concluded that there were reporting barriers for this group of women, but that there are also likely barriers around how police were responding to these women. Because police do not see older woman as sexual in a lot of the same ways that police may see younger women as sexual. And they falsely link sexual attractiveness to sexual assault as if you choose your victim based on how attractive she is and stereotypes about older woman makes them largely invisible in terms of attractiveness.

Whereas if you saw sexual assault as about power disparities, you would choose a very – you would choose a very different – you would have a very different understanding of how people choose their victims. But we hypothesize that these cases just haven't been brought to light, and I think frankly the feminist movement hasn't done a great job of highlighting the experiences of older women either. So we were just trying to sort of shed light on that and to draw more attention to this as an important research area.

DR. EMMA CUNLIFFE: Thank you, Isabel. Deepa, if I may turn to you now. Returning to the Susan Butlin case, is the police response set out in the

summary that you received of this incident, unusual in your experience, recognizing of course that you work in a different jurisdiction?

unusual and in fact what I would like to say, is that what really lacks in the system is a standardized requirement of some level of risk assessment when a call like that comes. The police officer did not do any assessment of that, did not try to even understand who this perpetrator is, what potential access to arms or weapons or resources this person has. And the mistakes were made repeatedly. So it's very well documented, and I know Professor Grant can direct u to those research reports that have repeatedly told us that when a woman chooses to report or take an action against a perpetrator, that's when she's at a more heightened risk of violence. And that's exactly what we see in this case. If she chooses to do something about it, he loses complete control and now is going to kill er and then kills her.

And those are the very risk assessment points that an assessment needs to happen, it just needs to be understood and then mitigated, which we see repeatedly a complete missed points of intervention by the system, especially by the police officers, but then by extension, also by the Crown in the later stages. Because something that I want to say about the assessment of the risk in particular is, that there is a lack of this understanding in the system that the risk doesn't stop after a case starts. The risk actually starts when the case stops. So that's another really – the thing that was really as a red flag jumping at me as I was reading the summary of the report.

Some of the other important pieces that I would say that repeat themselves, is, again,, I would go back to that whole concept of the intersectional factors that are in that – in this case, in this particular instance, where we – there is no lens of what is happening to the trauma, to the isolation. There is no – no one is actually flinching on the mistrust of the system when she says that this is why I want to talk to a female police officer. Like no one flinches, no one gets worried that – because if you think about it, police officers and police service is a service being given to the

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In any other setting when a complaint of that kind, a mistrust of that 2 kind would be conveyed, someone would be thinking about it and be uncomfortable in their seat and say "Oh, let me try to, you know, understand and unpack why she's saying that". Maybe there is something that I'm not understanding, and there is no response to it. So she's escalating it in our introduction as you service users, she was escalating. She was saying, "That's why I want a police officer" and there was no one taking any note of that as if it was not to be taken seriously. And that trivialization is consistently the experience that we see at the clinic by women. So absolutely, as Sunny said earlier, it's coast to coast-to-coast same experience that we see repeatedly happen, and the only time the system actually reacts is when that risk assessment has completely failed. And most of these survivors actually are very well resources themselves and they actually take care of their situations themselves. That's why we don't see as many of them killed because they are actually doing their own risk assessment and safety planning. The system is failing them repeatedly. **DR. EMMA CUNLIFFE:** Thank you. MS. ISABEL GRANT: Emma, can I just interject on that with the whole safety planning notion? And is that -- just for one minute? **DR. EMMA CUNLIFFE:** Yes. Go ahead, Isabel. 21 22 MS. ISABEL GRANT: It just strikes me that we do -- we see a lot of that in criminal harassment, that we -- the police and others expect women to be taking steps, changing their lives, changing the way they get to work, changing the locks on their house, changing all of those things to deal with threats from violent men and

We've individualized responsibility for keeping women safe, and that's particularly true in criminal harassment, but also in sexual assault.

without recognizing that that's kind of a -- that is a state responsibility.

1	DR. EMMA CUNLIFFE: Thank you, Isabel.
2	And I believe we'll have a bit of a conversation about hyper-
3	responsibilization [sic] of women tomorrow morning, but Emilie, I'm conscious that this
4	particularly something that's important to CAEF, so I wonder if you'd like to comment on
5	that.
6	MS. EMILIE COYLE: Yeah, I do. Just as you were saying that,
7	Isabel, I was thinking that I failed to mention some of the reasons that women and
8	gender diverse folks that we deal with end up in prison is because of the ways that they
9	respond to violence in their lives and then they are then punished for the way that
10	they've responded because we have really gendered notions around how women
11	should be responding and when they don't fit within that gendered response box, which
12	is, you know I think you were mentioning it, Lana, around how black women are
13	supposed to be behaving and if they behave a certain way, particularly if they're angry
14	or, you know then they become criminalized and then what happens is, as they go
15	through the prisons through the justice system, through the legal system, they're then
16	overly punished for their responses.
17	So I've I spoke, in fact, with a woman that I worked with who was
18	in prison in Joliet, a black woman, who was a co-accused of someone who she didn't
19	commit the crime. She was there at the time, and she received a lengthier sentence
20	than the person who actually did the stabbing in this case.
21	And so that's just one example. There are many, many examples
22	that demonstrate how, if a woman doesn't behave in a demure, you know, sort of
23	motherly fashion, that she's going to be punished for it and then that is exacerbated
24	when that person is a person who is a person is black, is a person who is indigenous,
25	who is a person who is trans, gay, doesn't present in a particularly feminine way the
26	way we expect people to.
27	So thank you for letting me explain that a little further.
28	DR. EMMA CUNLIFFE: Thank you, Emilie.

1	And also, just again, for the benefit of the record, this is something
2	that Professor Patrina Duhaney spoke to in this morning's roundtable specific to the
3	responses of black women in particular.
4	And Deepa, I wonder, then, if I can turn back to you. You alluded
5	to processes of risk assessment in your answer and with Isabel's important caveat, of
6	course, about who bears the responsibility for risk assessment.
7	My understanding is that the Barbra Schlifer Clinic has been
8	working on developing risk assessment processes for women who've experienced
9	gender-based violence.
10	I wonder if you can describe the process that you've been using to
11	develop your risk assessment tools.
12	MS. DEEPA MATTOO: Thank you for the opportunity to talk about
13	the project of the Clinic.
14	So the Clinic's current project, which is titled as "Guiding Systemic
15	Response to Survivors of Gender-Based Violence Through Risk Assessment: A
16	Survivor-centric Approach", is a project which is funded by WAGE, the federal
17	government, and the project is focused on building a blueprint for risk assessment and
18	safety framework.
19	And our focus is to analyze what is already available. There are
20	lots of risk assessment models that are available, but after reviewing over 40 tools by
21	now, what we have understood is that most of these tools are not rooted in trauma-
22	informed approach. They do not consider intersecting identity factors and they definitely
23	are not survivor-centric and do not consult with survivors in creation of those tools. And
24	those are the things that we're trying to curate through our process.
25	We are engaging with survivors, survivors from various identities
26	and locations and trying to understand from them where where does the risk
27	assessment go wrong and exactly observation made by Professor Grant is exactly on
28	point, that how a system actually, instead of making an assessment and doing the

planning with them, actually tells them to do certain things to just keep themselves safe.

And in my experience, I have also heard, "Why don't you just

change your phone number?" as if that's the only thing that's required from the

4 harassment to continue.

We also are very much aware that service providers and people who work with survivors are also experts in their own right and they have also a lot of information of understanding why current tools are not working, so we're also consulting with them as part of the process.

And by no means our expectation is that there is one size fits all would happen after the tool is ready or the blueprint is ready. What we believe is that there needs to be a standardized framework, an agreement on language, an agreement on understanding, an agreement on intersectionality, an agreement on understanding that women from specific cultural identities need services which are rooted in their cultural reality. Black women, racialized women, indigenous women need services and supports which are rooted in their distinct and unique experiences. And that language plays a big role in the way women describe their violence.

And we feel repeatedly what we encounter is how she talked about it and how she described it, even if she is speaking English and French, another thing about -- another layer of challenge that a lot of women who we work with do not speak English. We provide interpretation in order 200 languages, and that really is where the credibility actually goes into play when -- are questions when the case goes to the court. But at the onset when they are seeking support, that is where that bias starts playing a huge role in understanding what will they need, what kind of safety do they need and what kind of effective management of that risk that they need. So that's what the process is.

We have reviewed a lot of literature. We have reviewed -- so there's a lot of research work. There is an advisory committee of experts and service providers and researchers, and there are several advisory committees at the community

1 level from -- based in the communities from survivors.

So that's what the project looks like, and our hope is that this will actually inform a much broader blueprint that WAGE is planning to put together.

Meanwhile, as a resource, the clinic had started and completed a project for risk assessment in the family court system. That was our previous project that was done between 2018 and 2020, and we created a tool which has three parts, Rea 1, Rea 2 and Rea 3. That's what those three parts. They're available -- publicly available for anyone to use and adapt on our website and they start with some basic 13 questions that can help any stakeholder who works with the survivors and the family courts to identify red flags or high-risk situation and then, based on their assessment, they can choose to go through the next two parts of the assessment or make a referral.

I'm sorry I took a bit longer.

So that's where I would end.

DR. EMMA CUNLIFFE: No, that's fabulous, Deepa, and I've got a follow-up, but I think that Pam wants to jump in on a point about risk assessment first.

DR. PAMELA PALMATER: Yeah. Just very quickly, I think this is a really good example of a disproportionate focus on a charge. So the issue isn't how do we prevent violence? How do we keep this woman safe? What can we do with all of the tools available to us? It's my sole job is to see if there is a charge, that's what my focus is. If there isn't, that's it. But their legal obligation, under international human rights, it to prevent the violence, investigate fully the violence, and prosecution comes later. Like that's a secondary step. The first one is how do you keep the woman safe, which you have a legal obligation to do? It's a state obligation. Police are a state institution, whether it's federal or provincial.

And so she was in fear of her life, she felt under threat. They could have, at a minimum, started from the beginning, okay, how can we prevent harm from her? Is she at risk? This is a neighbour, there's proximity. Have we investigated him for guns or weapons? All of those things. Have they done wellness checks? Did they

- show a constant presence to maybe act as a deterrent to him? All of those things
- 2 around safety, your legal obligation to prevent violence. Regardless of the charge she
- 3 experienced violence. Whether it's -- your job isn't just to prevent convictable violence,
- 4 it's all violence. And I think that's what really missed in this. It was no concern for her,
- 5 just whether or not they would get the charge.
- 6 **DR. EMMA CUNLIFFE:** Thank you very much, Pam.
- Deepa, if I can look back to you and to Ms. Butlin, I wanted to ask
- you, actually, based on the work you have been doing around risk assessment, are
- 9 there specific risk factors that would have increased your concern in a scenario such as
- this if it came to you? I'm sorry, Deepa.
- 11 MS. DEEPA MATTOO: Yeah. I will -- I will definitely speak to that.
- I just wanted to very quickly say that what Pam said is exactly one of the biggest
- problems in the existing risk assessment systems, and -- or the tools that we have
- studied. There is a lot of focus on the prosecution. There is a lot of -- given -- given the
- ones that are used when they do identify a high-risk situation, they -- there is a lot of
- focus on the prosecution, there is a lot of focus on how would we make this into a good
- case that will be prosecuted, instead of paying attention to can we actually prevent
- violence from happening, that might happen in future to her or to her family members or
- to people in the community at large.

- 20 Because once someone comes forward with a disclosure about a
- 21 perpetrator or a potential perpetrator, I would say what Pam is saying, is it's totally on
- point. But I will actually go even further and say that as your duty to actually prevent
- violence from happening in the community, the responsibility on the cops is to take
- every call seriously so that they can actually prevent. I mean -- and it kind of is a bit
- 25 mindboggling to some extent that you would want people to give you tips, you know, like
- anonymously, but when that phone call comes to you, yourself, you would not take it
- seriously. So it's -- the system definitely is broken in many, many places.
 - Going back to the case of Susan Butlin's case, and things that

could have easily been seen as red flags, I think the biggest red flag, as Pam just

2 mentioned in her example, is that a woman is calling and she's asking for a woman. For

me, that itself is one of -- in my assessment, that would be an important factor for me to

take it seriously and be like there is -- there is -- there is a situation of sexual assault

5 here. Someone's asking for a woman. To me there is more to the story that I have

understood. I need to -- and that's why I said that how come no one's name is on that

ask? How come no one was saying there needs to be an emphatic response to it which

is just more than kind words?

The other really important red flag that I noticed was completely missed was the proximity of the person, where the person lived. The missed red flag is about the fact that the person is saying that "I was consistently trying to say no", and that person kept on going, and the fact that they were -- they were talking about alcohol in the -- in the -- in the mix of the experience, no one looked at that either. Then they go -- they go back and say that, "you should go ahead and apply for a peace bond without any resources."

So that's another missed piece within the assessment of a risk that you are -- you're looking at it as something serious enough that you're offering the woman to go and apply for a peace-bond, but you're not offering any services to her to go with it. Like if you are going to apply for a peace-bond you should also go to this XY, call this place, here is a -- here is a line that you can call and get support. There is no offer of any support, so that's another, I think, a missed flag or a missed opportunity of intervention.

And then, finally, of course, when the call comes and you know, the call of the -- the distress call comes and then there is a -- there is a weapon reported, all of those are things which are completely missed because no one had asked those questions. No one had taken in trust in this perpetrator actually at any point before that happened.

So all in all, I think there were lots of times when there could have

- been an intervention and there could have been lots of times where there would have
- been -- if someone had sat down with those top 13 questions at the clinic, all of those
- things would have come up. Someone would have said, "Okay. Do you know if this
- 4 person has any weapon? Do you know what this person actually does? Do you know if
- 5 they have had any history? What is your history with this person?" No one asked
- those questions because people were just focussed on what she said and what they
- 7 needed to do get the call off their books.
- 8 MS. EMILIE COYLE: Emma, can I -- can I add something? Is that
- 9 okay?
- DR. EMMA CUNLIFFE: Yes, go ahead, Emilie.
- MS. EMILIE COYLE: It strikes me when we're having this
- conversation, and something that Pam also mentioned, is that we're focussing a lot on
- the individual risk, when if we are really wanting to create a community of care that
- prevents victims from becoming victims or even having to become a survivor, then we
- need to also be thinking about what the needs are. So when we're already at this place
- where somebody is indicating that they're going to be perpetrating potentially some
- harm on someone, we're already pretty far down the road.
- And so, you know, if we're creating communities of care, we need
- to be working way upstream and asking ourselves, "What is it that people need? What
- is it that women need? What is it that we have a deficit of in our community that could
- 21 be filled in order to prevent them from becoming victims in the first place?"
- So I caution us because we tend to focus specifically on individual
- incidents, obviously because they arise and we have to, but also, we have a general
- lack of understanding of the cumulative effect of all of the ongoing trauma that is
- continuing to happen in our communities. So how can we ensure that this, you know,
- understanding can point us towards filling some of those gaps?
- DR. EMMA CUNLIFFE: Thank you, Emilie. And that is a perfect
- 28 segue to my next question.

Which I'm going to start with Lana. What is it that women need? 1 Where is it that we should be making investments in women's safety? How should we 2 be approaching things? Do you agree with Emilie, first off, and if you do, where do we 3 put the attention, the resources, the money? 4 MS. LANA MacLEAN: Yes, I agree with Emilie. And my first 5 thought is the resources must be placed in the communities or the communities of care 6 7 in which women are located in, and whether that's women-serving organisations, for 8 me, I think of the African Nova Scotian community. 9 And some of the leading best practices, and I know we're getting to 10 that later, but just the idea of providing resources and supports to a clustering of community organisations, such as the African United Baptist Association, who in 1999 11 did a two-part documentary series with Sylvia Hamilton called No More Secrets, where 12 they interrogated in a very gentle but culturally responsive way the impacts of intimate 13 partner violence in the lives of Black women intergenerationally. And that has never 14 15 been taken up. 16 So I think the resources need to be for -- shouldn't be carte blanche. Every community has some cultural nuances that need to be taken into 17 consideration. So I -- for me, the resources and the supports needed must be 18 connected to the community of care in which the women live in and be culturally 19 responsive. 20 I think resources need to be given in terms of training and supports 21 22 for people in the child welfare system to ensure that when children are taken into care 23 from the African Nova Scotian community and that those women have a cultural impact 24 assessment, similar to what we do in criminal justice system, but with a family focus and model that is reflective of the cultural responses that women -- that put women at risk. I 25 think we need to upstream as well -- or downstream -- upstream, in terms of making 26 27 sure that there's program designs and development -- and resourcing, for not just youth -- not just for young women but for young men as well. 28

1	I think there needs to be a collaborative approach around gender-
2	based violence that we also attend to ensuring that young men have good literacy and
3	good knowledge around how they are how male socialization can be toxic and how
4	they can be colluded into that. So I think some of the resources need to be within male-
5	serving organizations as well.
6	And for me specifically, I lean into, in this province we have the
7	African Nova Scotia Justice Institute, and I believe they are the best positioned in terms
8	of meeting some of the unique needs of gender-based violence for women in terms of
9	how they can and I throw this out as an opportunity develop a culturally responsive,
10	restorative justice approach to meeting the needs of the African Nova Scotian women.
11	So I think there's some resourcing there that we can leverage that
12	we can build, not just financially into, but culturally responsive care.
13	So I think there's multiple pathways. I also think that the funding
14	supports that organizations, the policing organizations like the RCMP already have in
15	place around their diversity and inclusion. Initiatives, they do take a trauma-informed
16	lens. I don't know if that trauma-informed lens also has a cultural nuance to it. So
17	having more rigour around some of those culturally responsive programs embedded
18	within the RCMP to ensure that there's some rigour and accountability to ensuring that
19	the needs of our diverse communities are addressed.
20	DR. EMMA CUNLIFFE: Thank you very much, Lana.
21	Sunny, it's been some times since we heard from you, so I'll turn to
22	you next, if I can. If investments are to be made in women's safety, where should they
23	be made?
24	MS. SUNNY MARRINER: Thank you for that question.
25	If I can very briefly, though, note one missed opportunity with the
26	Butlin case I know we're running short on time, but I think it's really important to point
27	out.
28	We do note throughout the Butlin case that there were multiple

opportunities where multiple officers reviewed and re-reviewed and re-reviewed, and I

- think that one thing that's important for Commissioners to know and for people to think
- about and unpack is the culture or reluctance to second-guess another officer or
- 4 another officer's decision. And so even when we have opportunities to try to address
- 5 perhaps missed opportunities or failure to properly assess risk, if we have that culture
- 6 where we will not second-guess or potentially be seen to be undermining another
- officer's decision, we will both lose accountability for acknowledging what goes wrong,
- and then, second, any opportunity for a survivor who's consistently attempting to seek
- 9 support to be assisted because each subsequent officer will just concur with the
- individual's officer's approach.

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- So I just wanted to kind of bring that piece out as a really important cultural element that really needs to be addressed.
- In terms of funding, we could have a whole day, I'm sure, on that, as we could on many other areas. And I imagine this has probably been said before in prior roundtables, but I think, you know, before anything else, we have to be thinking about safe, secure, and affordable housing, for women and children, particularly, but for all members of our community. When people are not adequately housed or have no ability to be housed, they're placed in proximity to far greater vulnerability to violence on a regular basis, or they're further unable to escape violence.
- So I think that's -- people often don't connect housing and homelessness to these issues. I think they absolutely have to in the discussion of any commitment to actually reduce vulnerability to violence. So that's one really important area.
- I think also that we need to be looking at real needs for real survivors on the ground. So I was pleased that Deepa got an opportunity to talk about the legal advocacy work done at the Schlifer Clinic.
- In my 25 years of talking to survivors, they are constantly,
 constantly, constantly seeking advocacy and support for basic needs, things that they

need to do in order to reduce their exposure to violence or be able to decrease their vulnerability. That might be things that go so far as, you know, attending housing tribunal meetings with survivors, which we do, or going to doctor's appointments, or

seeking legal advocacy.

So we talk about legal advice, and actually the Province of Nova Scotia currently is talking about legal advice mechanisms, but survivors really need advocates who are going to participate in these processes if they choose to engage these systems. They need to have informed advocates that know what's going to happen when they encounter those systems. And I don't just mean policing here. I mean all institutionally based systems, so again housing, basic assistance supports. Like, all that kind of stuff.

And we do all those things with survivors, and frontline centres used to do a lot more of that work with survivors; like, on-the-ground work with survivors but as demand as increased and as funding has stayed stagnant, more and more of that ability to walk beside a survivor as they try to navigate what they need to help keep themselves safe, that ability has been removed more and more and more.

And so I think I would land at the kind of a survivor centre place, my last comment on that which is that I've been in frontline sexual assault centres for 25 years. There are unbelievable waiting lists for survivors who are experiencing violence, whether they experienced it yesterday, they experienced it 25 years ago, so risk isn't even coming into the equation, and these spaces, very often, are the only non-institutional spaces who work particularly for the survivors and the survivor's interest. So they're not employed by any other interest than that interest of the survivor.

If survivors can't access that when they're seeking support, then it's very, very difficult for them to be able to leave a situation where they're potentially at risk, or even make decisions or talk through decisions about whether or not they want to engage systems. We know 95 percent of survivors never report to police to begin with, or the criminal justice system.

1	So we have to be talking about what are survivors telling us they
2	need, and the number one thing I think that survivors have been telling us they need is
3	people to walk beside them as they navigate these issues and trusted supports that
4	they can invest in, and we need to be putting funding on that level because when you
5	empower that survivor to be able to make those choices through those mechanisms,
6	then all of these other types of risk that we can't necessarily get out of the system, and
7	we've proven repeatedly that we're failing to remove from the system, all of those things
8	can be, in some ways, mitigated for those survivors as they move forward.
9	So those are some of the things that I would put forward as things
10	to consider.
11	DR. EMMA CUNLIFFE: Thank you, Sunny.
12	Pam, if we're to invest women's safety, where should we spend the
13	money?
14	DR. PAMELA PALMATER: So everything everyone said;
15	#whatshesaid. But in addition to that, taking into account very specific considerations
16	for Indigenous women and girls, for example, the RCMP spare no amount of money on
17	public relations, settling class action lawsuits. They will create new units to suppress
18	Indigenous rights against women land defenders, but when it comes to investigating
19	murdered and missing Indigenous women and girls, or preventing violence in the first
20	place, you don't see them expending the same amount of money. So it's where we're
21	putting the money, and for what purpose.
22	We continue to fund racism and misogyny in the RCMP; we fund
23	their impunity; we fund their PR, but we're not funding safety for Indigenous women and
24	girls, which obviously includes the support but it's also the basics of life like clean water,
25	food, access to real healthcare where they're not also going to be sexually assaulted by
26	the hospitals or denied healthcare.
27	So it's the way these units work together, how the RCMP work with
28	hospital to take away children. So it's really extracting the RCMP from this and putting

all of the money on all of these people, all of the women, to maintain just the basics;

- 2 child support. What are they going to do for child support when they have to go to
- school? What are they going to do for housing, not just the shelter but there's the
- 4 transitional housing, there's education for their kids; it's all of that stuff. And the
- 5 navigators are absolutely essential. Even a doctor's appointment can be traumatizing,
- 6 especially for Indigenous women and girls, when we know that they can experience
- 7 sexual violence from the doctor themselves.
- 8 So navigators are a check on that, and they're also a check on
- 9 RCMP, which are in their schools, which are in the hospitals, which are in the social
- 10 workers' offices.
- So you can see how we need to do not just the money for all of this,
- but to extract the RCMP and to make sure that money is going to the support people on
- the ground, even if they're grassroots, and it's so important that they be detached from
- the police. So not victims services at the police force, for example.
- DR. EMMA CUNLIFFE: Thank you, Pam.
- 16 Emilie, if I can turn to you next.
- 17 **MS. EMILIE COYLE:** Everything that everyone else has said, yes,
- 18 I agree. The frontline community organisations are where we see beautiful
- transformative innovative creative models that we should be continuing to sustain
- through adequate funding year, over year, over year, over year, without requiring
- 21 frontline organisations to continue to beg for -- for every tiny penny that they get.
- And I think what you will do with that is you will start to model, and I
- 23 think this is really important, some of the values that are -- that we say are very
- important to us in this country. The values of effective public health, the value of care,
- decolonisation, equality, fair treatment, all of these remain unattainable with the systems
- that we currently have because we've flipped how we are using our public dollars. And
- so if we were to reverse that and to start really investing in the places where people are
- 28 necessarily, because they work one-on-one with the people that are affected by these

systems, they -- and are -- and are learning from them daily, what is it that they need, 1

then that's the place where you're going to see the real change. 2

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safety?

I just wanted to go back super quickly to that example of the woman that got more time than the person who had actually done the harm, the stabbing. She -- and the reason we know that it was as systemic racism that happened throughout her time was the judge said to her, "you are a single mother, you should have known better" in his decision. So we knew that in his decision. And then in her 7 correctional plan, her primary worker had written that she came from a community where violence as a method of parenting was common.

And when I received that correctional plan that was going before the parole board, I wrote a scathing letter saying, "This is full of racism, and it should be completely written. And if it's not, you should take no account or put any weight on what is being said in this correctional plan." Which brings us to the point of how many people go before decision-makers without advocates and navigators, like everyone else here is saying? So that's another really important piece.

DR. EMMA CUNLIFFE: Thank you, Emilie.

Deepa, if I can turn to you. Where should we invest in women's

MS. DEEPA MATTOOO: So I would go back to what Lana started as by saying put the money back into the communities and let the communities actually come together to find the solutions that the communities need. I, for first 10 years of my life here in Canada, I worked for South Asian Legal Clinic of Ontario, and I started with them, and it was not a legal clinic, it was a project. And I know the huge impact that clinic has made on the voices of the South Asian community in the Greater Toronto Area and Ontario and Canada. So from that perspective, I do see the value of putting the money back into the communities when it -- when it comes to the cultural needs, when it comes to the voice of the community. So there is definitely need for that.

service providers and the navigators who are existing doing this work. So help the new 1 groups come up, support the existing groups, and educate. 2 I think the education and training and capacity-building of police 3 officers, prosecutors, judges, all the justice professionals, for them to understand why 4 they are inherently wrong in the way they are operating and why they need a 5 transformation because at the end of the day, they are part of the society. And what 6 7 hurts me to -- like to really understand and unpack for myself is that they are 8 themselves all living in trauma. These institutions are breeding, breathing, and 9 perpetuating trauma every day, and it isn't until they actually get that opportunity to 10 educate and train themselves in a new way this cannot stop. So while we can provide supports and services, we need to 11 understand that there is something inherently wrong with the system, and that system 12 needs help. So I'm coming from a very compassionate side of me today, and that's why 13 I'm saying it. 14 But it's also going the Pam's point originally, this is also part of 15 16 international standardised mechanisms that a lot of UN mechanisms have been giving. So it's really very well written in some of those, as they call them, model books, or 17 health books, or playbooks, whatever the knowledge that they use. 18 And then Canada is really falling behind a national framework of 19 addressing gender-based violence. We are really falling behind. We don't have that 20 national action plan that we really desperately have been talking about and wanting, 21 22 and we don't have it. And unless and until we have it, this pandemic of gender-based violence won't be behind us. We haven't invested in this pandemic as we should have, 23 24 and we are really behind and very late. Thank you. **DR. EMMA CUNLIFFE:** Thank you, Deepa. 25 Isabel, where should we invest in women's safety? 26 27 **MS. ISABEL GRANT:** I guess the simple answer is everywhere,

but you know, just to reiterate what some of my colleagues have said, I think housing is

Т	really, really certifal. I did a study of the crilid protection system in british Columbia,
2	women are losing their children because they cannot afford to leave violent men. So
3	economic self-sufficiency for women is really important.
4	The point about communities, I just want to stress that we need to
5	make sure that there's a basic standard of supports that isn't just in, you know,
6	Vancouver, Toronto, Halifax, but is also in rural and remote communities because of the
7	unique challenges there. Facilities that, you know support pets that for women in
8	farm communities we need to think about, you know, they're leaving their livestock,
9	their, you know, their livelihoods, their communities. But we need to make sure that all
10	of those services are widely available in those rural and remote communities where we
11	don't have access to the same supports that we do in big cities.
12	The other thing I just wanted to say briefly is that we have done a
13	pretty good job with judicial education, and I think we need to extend that to police
14	services more directly. I think you know, Deepa was focussing on how Ms. Butlin
15	really wanted to speak to a female officer. That needs to be an option for everyone.
16	Every woman complaining about sexual assault needs to automatically have access to
17	a female officer, they shouldn't have to wait until the next shift. Those officers should
18	have special training in both the law regarding sexual assault, but also all the kinds of
19	barriers that we have been that we have been talking about today.
20	But I think economic self-sufficiency for every woman in this country
21	is a really big part of facilitating women's abilities to escape both physical and sexual
22	violence.
23	DR. EMMA CUNLIFFE: Isabel, many thanks.
24	Commissioners, I have some closing remarks today, but I'd like to
25	give you the opportunity to ask questions, and if you wouldn't mind coming back to me
26	to give me the opportunity to do that I'd be grateful.
27	COMMISSIONER MICHAEL MacDONALD: Commissioner Fitch?

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COMMISSIONER FITCH: I don't have any questions. I've very

- much appreciated contributions of everybody. But I know that Emilie did want to get
- one more point in, so I will give my time to her today, if that's okay.
- 3 MS. EMILIE COYLE: It pays to be sitting beside you, I guess.
- 4 Thank you.
- I guess what I want to say is the larger systems that are at play, the
- 6 larger oppressive systems that are at play, like patriarchy, like classism, like
- transphobia, like racism, I realise that they're not going to be effectively eradicated
- through any recommendations, perhaps, that will come out of this Commission.
- 9 However, I think it's important that any recommendations that are made by any
- commissions have to weave those themes throughout because every time we
- individualise patriarchy and racism and transphobia, et cetera, we won't get at the root
- 12 of it.

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COMMISSIONER MICHAEL MacDONALD:

Commissioner Stanton?

express my gratitude to all of you for what you've shared with us today. The previous roundtables in the last week-and-a-half have made the connection gender-based violence, intimate partner violence, and mass casualties very clear and one of the things that this panel is doing, is assisting us with seeing how do we then address gender-based violence and intimate partner violence as a root cause. And, of course, you've just named and weighing some of the root causes of that. Emilie and Deepa and others have also talked about the aspect of all of this that I have been voicing as well in previous discussions of the last few days about the litany of repeated recommendations over the years and the need to consider and identify and then address the barriers to implementation of what we know to do. Because we continue to see what we need to do, but yet we don't do it, and so what is the barrier preventing us there and we may look to some of the root causes again in terms of those structures, but it's – it's helpful to surface that, I think. I'll leave it there though. Thank you.

1	COMMISSIONER MacDONALD: Dr. Cunliffe?
2	DR. EMMA CUNLIFFE: Thank you, Commissioners. I would like
3	to begin by thanking our round table members today and for that matter this morning for
4	a very rich, and at times, a very difficult conversation about gender-based violence and
5	the ways in which institutions respond to that phenomenon.
6	This is the last round table that I will facilitate before September,
7	although my colleague Krista Smith will facilitate another round table tomorrow
8	focussing on personal and community responses to gender-based violence, including
9	intimate partner violence.
10	But in light of the fact that this is my last opportunity to say
11	something on the record, Commissioners, I hope that you'll permit me to express my
12	sincere thanks to those team members we don't see on the live stream but whose work
13	is indispensable to the running of public proceedings and who, in particular, make these
14	proceedings accessible to as wide an audience as possible.
15	Our accessibility partners, AV and IT techs, security personnel, Jen
16	Cotteral and her team, Victim Support and Mental Health workers. The public
17	engagement team, work tremendously hard to ensure that we can do our work. And
18	over the last three months that's included supporting these round tables. And so I would
19	like to take the opportunity to place on the record my appreciation for their contribution
20	to our work.
21	COMMISSIONER MacDONALD: Thank you so much, Emma,
22	and I would hastily echo that thanks and add you to the thank you list. Thank you,
23	Emma, for putting together another wonderful panel for us and to Sirois, who is here
24	with us as well behind the scenes working so hard putting together a panel. You know,
25	these just don't happen. I'm sure it will come as no surprise and a lot of work goes into
26	it and we greatly appreciate it.
27	On behalf of my fellow Commissioners, I want to personally thank

our panellists, Ms. McLean, it's so nice to see you again and thank you so much and

Ms. Coyle, Ms. Palmater, Ms. Mattoo, Ms. Marriner and Professor Grant, thank you all so very much for assisting us today with our important work. You know, we have a very challenging mandate, it's a difficult mandate. Our work and our mandate was born of suffering and sadness and it permeates our work by necessity and we have to have difficult conversations as you have identified Emma, and today was no exception. But they are so important to have and we are so appreciative of you four, for bringing your wealth of experience, your wealth of expertise – and I can only imagine how busy you all are – for broadening my perspective at least significantly, and for that, I am very

grateful.

And especially thank you for your practical forward-thinking recommendations, that's very helpful for us. Having the benefit of your collective experience and expertise to land some practical, but very important recommendations is, as we move into phase 3 of our work, is so important and we're greatly appreciative of that, so thank you so much for your contributions and thank you for your time and thank you to everyone.

COMMISSIONER STANTON: Thanks, Commissioner

MacDonald, and just a few final words. The Orders in Council ask us to make – to
account for lessons learned and to make recommendations to help keep our community
safer and today, of course, your recommendations are particularly related to police and
institutional responses, to gender-based intimate partners and what kinds of violence.

Just as the Orders in Council ask us to look at public alerting, and so we gathered together experts to tell us about the complexities of public alerting systems so that we can make pragmatic recommendations on that. We have gathered together experts who deeply have studied gender-based violence and intimate partner violence and, of course, sexual violence being a significant form of those forms of violence, to assist us in making recommendations that will be pragmatic.

The Orders in Council specifically require us to examine issues, including contributing and contextual factors such as the role of gender-based violence,

1	intilinate partirer violence. Also we're required to look at police policies, procedures and
2	training with respect to a gender-based violence, intimate partner violence. And so we
3	need to make recommendations that directly address the issues that arise from this
4	mass casualty, but we must also be alive to the fact that our recommendations must be
5	implemented within structures that historically, disproportionately affect various groups
6	in our society. And so it's important to hear from people who are well aware of these
7	dynamics to avoid compounding the structural inequalities that exist in our society.
8	Tomorrow we'll hear another round table discussion focused on
9	personal and community responses to these forms of violence. And as we continue,
10	please do remember that there are many support services available to help you if you
11	have experienced violence or abuse in your life and some of them are available through
12	our website.
13	So we'll see you again tomorrow and thank you so much everyone.
14	Upon adjourning at 4:49 p.m
15	
16	CERTIFICATION
17	
18	I, Sandrine Marineau-Lupien, a certified court reporter, hereby certify the foregoing
19	pages to be an accurate transcription of my notes/records to the best of my skill and
20	ability, and I so swear.
21	
22	Je, Sandrine Marineau-Lupien, une sténographe officiel, certifie que les pages ci-hautes
23	sont une transcription conforme de mes notes/enregistrements au meilleur de mes
24	capacités, et je le jure.
25	
26	JHI upo
27	Sandrine Marineau-Lupien