

**Stakeholder Consultation
Session**

**Séance de Consultation des
Parties Prenantes**

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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Mass Casualty Commission Office
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II

Appearances / Comparutions

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Ms. Megan Harris	Engagement Coordinator (Co-facilitator)
Ms. Hannah Langille	Communications Advisor (Tech support)
Ms. Tracey Shay	Coordinator of Integrated Services, SchoolsPlus
Ms. Joanne Thibeau	Executive Director, Boys and Girls Club in Truro
Ms. Bobby-Jay Aubin	Youth Outreach Worker, Inspiring Communities (Turning the Tide)
Ms. Surbhi Sandhir	Inclusion Coordinator, YWCA Halifax

III

Table of Content / Table des matières

	PAGE
Stakeholder Consultation Session with Ms. Tracey Shay, Ms. Joanne Thibeau, Ms. Bobby-Jay Aubin, and Ms. Surbhi Sandhir	1

Truro, Nova Scotia

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
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--- Upon commencing on Thursday, September 22, 2022 at 12:45 p.m.

MS. KRISTA SMITH: So we are now on the record. Yes, and so this transcript will become public record because everything that the Commissioners consider becomes part of the public record. And so it will live forever on the internet, one way or another, either on our website or eventually in Canada's archives.

So the way we'll structure this conversation is we have a few questions that we've circulated to you in advance. You know, it's really just meant to spark conversation. We can take it wherever it goes, wherever you guys want to take it. But that's kind of a rough guide.

And I will facilitate the discussion in the sense like I'll pass the ball to people, but we're a small enough group, I think, that we can -- you guys can feel free to play off each other directly as well, without me facilitating that piece.

I think those are my main comments.

Megan, am I -- well, we should definitely do a round to introduce ourselves. But Megan is my co-facilitator today. Am I missing anything, Megan?

MS. MEGAN HARRIS: No, I don't think so.

MS. KRISTA SMITH: Okay, great.

So why don't we -- oh, and does anyone have any questions before we get going?

I'm going to have Commission staff introduce themselves first and then we'll go on to our stakeholders.

So I already told you who I am. My background is as a labour and employment lawyer doing kind of workplace investigations and trying to really -- more recently in my practice I'm focused on trying to help non-profits with their HR issues and their governance issues because there's often not enough help for them.

Anyway, that's enough about me. And now I'm on the Commission.

Megan?

1 **MS. MEGAN HARRIS:** Hi. I know I've talked to a lot of you back
2 and forth for the planning of these meetings. I'm a Stakeholder Engagement Advisor
3 with the Commission and I also want to let you know that my colleague Hannah who
4 also works in Communications is on. She's just here in case there's any technical
5 issues or anything like that. And she did shoot me a message that she's busy doing
6 some work for a media briefing. So I don't think she's actually here to introduce herself
7 right now, but that's who the black mystery box of Hannah is.

8 And I'll pass it to Tracey.

9 **MS. KRISTA SMITH:** I was just going to simply jump in and just
10 say, if you're having technical difficulties or if there's something you want to say but
11 you're not getting a chance to say it, you can just pop it in the chat and Megan will be
12 keeping track of that.

13 So okay, now we'll pass it to -- did you say Tracey?

14 **MS. MEGAN HARRIS:** Yeah.

15 **MS. TRACEY SHAY:** Hi folks, I'm Tracey Shay. I'm the
16 Coordinator of Integrated Services for the SchoolsPlus team. I cover the Northern
17 Region. I also live in Debert, Nova Scotia, and I have been doing a lot of work with our
18 communities and our schools around the mass tragedy.

19 **MS. KRISTA SMITH:** Thank you. Joanne?

20 **MS. JOANNE THIBEAU:** Hi. I'm Joanne Thibeau and I'm the ED
21 at the Boys and Girls Club in Truro, Nova Scotia, so of course we have a lot of close
22 connections as well to the mass casualty, and many of the victims actually in Portapique
23 as well.

24 **MS. KRISTA SMITH:** Thank you.

25 Bobby-Jay?

26 **MS. BOBBY-JAY AUBIN:** Good morning. My name is Bobby-Jay.
27 I work with Turning the Tide in Digby, and I work with youth between 12 and 24 years of
28 age.

1 **MS. KRISTA SMITH:** Thank you.

2 **MS. BOBBY-JAY AUBIN:** You're welcome.

3 **MS. KRISTA SMITH:** And Surbhi, am I saying your name
4 correctly?

5 **MS. SURBHI SANDHIR:** Yes, you're saying it correctly. Hi.
6 I'm Surbhi and I'm the Inclusion Coordinator with YWCA, Halifax.

7 **MS. KRISTA SMITH:** And Surbhi, are you able to turn on your
8 camera?

9 **MS. SURBHI SANDHIR:** I did try before. Let me see.

10 **MS. KRISTA SMITH:** It's not working. Oh, there you are. Nice to
11 meet you.

12 **MS. SURBHI SANDHIR:** Hi. Same here.

13 **MS. KRISTA SMITH:** What's your role at the YWCA?

14 **MS. SURBHI SANDHIR:** So I'm an Inclusion Coordinator. So
15 basically children with diverse needs -- and we have a lot of children with diverse needs
16 in all of the classrooms. But I happen to be on [indiscernible] with the youth, like
17 children of teenagers and I haven't dealt with them right now. But I'm dealing with
18 children with special needs in the classroom. I go and help them.

19 **MS. KRISTA SMITH:** M'hm.

20 **MS. SURBHI SANDHIR:** And I'm also taking care of the before
21 and after school program in the schools.

22 **MS. KRISTA SMITH:** Okay.

23 **MS. SURBHI SANDHIR:** I just go over there to intervene and help
24 the teachers if they need my support over there,

25 **MS. KRISTA SMITH:** Okay. So you're more in the early learning --

26 **MS. SURBHI SANDHIR:** Yes.

27 **MS. KRISTA SMITH:** --- sort of pre- before children go to school?

28 **MS. SURBHI SANDHIR:** Yes.

1 **MS. KRISTA SMITH:** Okay. That's really helpful.

2 So to get us started off, I think we want to start by thinking about
3 what is it that we're talking about. We're talking about the notion of community safety
4 and what does that mean for children and youth. So what does it mean for children to
5 enjoy the conditions of safety within their communities, and how -- and I think it would
6 also be helpful if you can comment on how your organization or the work that you
7 specifically are doing to contribute to that.

8 So I'm just going to randomly begin.

9 Tracey, can I start with you?

10 **MS. TRACEY SHAY:** Sure. So I've already testified before the
11 Mass Casualty Commission, so there's a lot of my information that's probably already
12 on, in a more formalized -- that was more of a formalized role. So I just want to be clear
13 here today while I do speak for SchoolsPlus, there's a bit of a -- I don't speak for the
14 entire Department of Education. So I just want to put that out there.

15 So SchoolsPlus does a lot of work with children and youth and
16 we've done a ton of work with children and youth all along for the last 14 years in this
17 area, so around the community safety we're about engaging kids. We have a ton of
18 programs that we offer. It's about building relationships. It's about making sure families
19 and students are able to access whatever they need in communities. So a lot of our
20 work is navigating families and kids to services.

21 So you know, when kids and families are struggling with specific
22 issues, we then try to connect them to who in the community can support them around
23 that.

24 I think when it comes to the issue around safety, it's so complex
25 and I think part of the struggle we're having is we're asking people to solve it and I'm not
26 sure we have a good answer for that. What we have heard from some of our kids is
27 that they don't feel safe in our community, that they're no longer playing outside, that
28 they do hide when people come and park in their driveways or there's cars around their

1 neighbourhood that they don't recognize, that they feel anxious walking down the street,
2 that they don't want to be home alone. We hear that kids, you know, at night are still
3 going around to make sure doors and windows are locked. We have children still
4 sleeping in their parents' beds. We have children that never experienced anxiety before
5 feeling extremely anxious.

6 You know, and we try to build skills and we try to do that
7 reassurance piece but I think when I'm talking to families and even for myself in this
8 community, I think sometimes where I get stuck is so what would happen today if this
9 happened down the street from me? How are we better equipped to deal with it? And
10 nobody seems to be able to give us that answer after two and a half years.

11 So if there was a shooting down the road today, are we in a better
12 place to manage that differently? And what does that actually look like? And I think
13 community is looking for that answer, and we're not getting it. We spent a lot of time in
14 the last two years pointing out everything that went wrong and I think the community is
15 looking for reassurance that there's a better plan.

16 And I don't -- I'm not insinuating that we -- you know, that we're
17 going to get it perfectly right or that, you know -- but I think we have to stop chatting
18 about it so much and let people know what the actual plan is.

19 So what is the RCMP's response if this were to happen? What is
20 the response of our professionals? You know, we talk a lot about resources and
21 response but yet we did not put any additional resources into this community for the
22 long-term sustainability. We don't have one additional resource supporting our schools,
23 supporting these kids, supporting these families that's been put in and is sustainable
24 and long-term. We don't have anybody coordinating supports in this community. We
25 don't have anybody pulling the stakeholders together. We've come together several
26 times to talk but then where is the outcome from that two and a half years later?

27 And I'll stop talking now.

28 **MS. KRISTA SMITH:** Tracey, thank you. I feel like the things that

1 you've raised should inform the rest of our conversation. I'm a little bit dying to follow up
2 with you but I'm thinking I should probably kind of get through the first round and then
3 we'll circle back to it.

4 I'm going to say it out loud though, just so I don't forget it. But I'm
5 really interested in talking a little bit about the role of community in formulating that plan.
6 And thinking about whether a realistic plan from, I guess, the powers that be, needs to
7 include the perspectives of those who have lived this for the last few years. So and I do
8 think that that is the purpose of this session right now is that we want to hear from as
9 many stakeholders as possible so that, you know, a plan such as it is isn't out in left
10 field. Yeah. Okay. I'll stop with that.

11 Joanne...?

12 **MS. JOANNE THIBEAU:** Hi. So I mean, I would echo a lot of
13 what Tracey said. But for me, if you want kids to feel safe in the community, you need
14 to have normalcy, routine, and consistency for them. And of course when this
15 happened they weren't in school so there was no normalcy. There was no consistency.
16 They were at home with their parents so, I mean, I do believe parents know what's best
17 for their children but there were no other kind of outward sources.

18 And anxiety has definitely increased with children. They feel very
19 unsafe but so do their parents. And so it's feeding down from their parents and there is
20 a huge distrust in the RCMP right now in our community with adults, and that is going
21 down to our kids. So I mean, really they need to make us trust them again so that we
22 know this isn't going to happen again, or just the things that Tracey said.

23 Like, what is the plan? Like, how are you going to make sure this
24 never happens again? And of course we were closed during the pandemic due to
25 Covid regulations so, you know, we were -- I think it was like two to three months before
26 we reopened. And as I said, I mean, we're very close to this community. You know, it
27 impacted some of our older members and people we knew. But we didn't engage the
28 children when they came back about it unless they wanted to discuss it because we

1 didn't -- we don't know how many of the kids knew about it at the time and of course you
2 don't want to make the world any scarier for them than it already is. And I think as we
3 go through the list too, I mean, you have to keep that in mind. Some of the kids don't
4 know about it, still to this date. It's really the older kids that seem to know more.

5 So when we were able to engage our older members we let them
6 lead the conversations and we just tried to -- reassure them and kind of value their
7 opinions and their emotions without giving them too many opinions. And it is hard when
8 you live in the community to, you know, keep your opinion to yourself about what you
9 feel the deal was, but at the same time you just want to, you know, recognize their
10 emotions and their feelings and make them feel heard about them.

11 **MS. KRISTA SMITH:** So I'm just writing down a few things that I've
12 heard from both you and Tracey about what might the ingredients of community safety
13 be for children and youth. And so I heard things like creating relationship, helping
14 navigate to necessary services, having the resources that there's a demand for among
15 the children, youth, and their families. And then, Joanne, based on what you said, I
16 heard that providing normalcy, routine and consistency and then letting them lead the
17 conversation and yet you reassure them and value the emotions.

18 So like, so far that's what I've heard our -- have been the
19 components. Am I missing anything? Is there anything you would add?

20 **MS. JOANNE THIBEAU:** I don't think so, not for that question.

21 **MS. KRISTA SMITH:** Okay, great.

22 **MS. TRACEY SHAY:** I think the only thing that I would add is that -
23 - and Joanne touched on it briefly, you know. Parents are struggling. I would argue our
24 front-line staff are struggling as well. And we have not done a good job supporting the
25 front-line staff who are then expected to provide these psychologicals and safe spaces
26 for kids.

27 **MS. KRISTA SMITH:** M'hm.

28 **MS. TRACEY SHAY:** And we've got a lot of work to do around

1 that.

2 **MS. JOANNE THIBEAU:** That's a good point, yeah.

3 **MS. KRISTA SMITH:** Right. You have to be well to help others be
4 well. Yeah, okay.

5 With that I'm going to take it over to Bobby-Jay. Are there other
6 components that you would add to this vision of community safety for children and
7 youth?

8 Oh, you're muted. Sorry.

9 **MS. BOBBY-JAY AUBIN:** Sorry. Good morning. What I do with
10 my program is I do accompaniments and advocacy. And I transport youth to
11 appointments across the province. So we work mostly in Digby Municipality, unless we
12 have youth that go to school here from outside of the municipality. We do system
13 navigation. We partner with local schools, SchoolsPlus, other organizations and
14 community partners. And we also run a drop-in every Thursday at our office in Digby.
15 But we're also trying to get up and running drop-ins in Weymouth, Digby, the islands.

16 **MS. KRISTA SMITH:** M'hm.

17 **MS. BOBBY-JAY AUBIN:** Sorry and Acaciaville, Jordanville, and
18 Conway, and Bear River as well, which is not an easy task.

19 **MS. KRISTA SMITH:** M'hm. And are there -- I'm just thinking
20 about what we've heard so far about ingredients to community safety. I can see how
21 drop-in centres and taking people to appointments and doing accompaniment and
22 advocacy -- those are all -- those help to create the conditions of community safety. Is
23 there anything more you would add to that?

24 **MS. BOBBY-JAY AUBIN:** A lot of homelessness and that's a big
25 safety, and then drug use, opioid use.

26 **MS. KRISTA SMITH:** Okay.

27 **MS. BOBBY-JAY AUBIN:** Sorry That's the kind of work I used to
28 do back in Ontario was harm reduction. And I find that it's lacking especially in this

1 area, even from education to picking up syringes, stuff like that.

2 **MS. KRISTA SMITH:** Okay. Thank you, Bobby-Jay.

3 Surbhi, I'm going to take it over to you and maybe just ask you to
4 pick up whatever is coming up for you on this piece of community safety for children,
5 youth, and their families.

6 **MS. SURBHI SANDHIR:** So I mean, as I already mentioned I'm
7 working with the Early Learning Centre basically, but in all YWCA is a big program
8 wherein we help people for, like, women and young women for shelter as well, providing
9 them safe places. They do have programs where we provide safe places. Government
10 and then helping providing safe shelter for young women as well. And basically these
11 are the programs which are being run by YWCA over there.

12 And I am not directly involved in those. Like, we just know because
13 we are as a group. So I am basically more and more of an Early Learning Centre, so
14 it's pretty much new for me right now. I'm hearing everyone and understanding what is
15 going on and trying to take away a lot from this session.

16 **MS. KRISTA SMITH:** Yeah. And I'm just thinking, about your role
17 in particular. You're working directly with families, I can imagine.

18 **MS. SURBHI SANDHIR:** Yes.

19 **MS. KRISTA SMITH:** And especially when early intervention -- you
20 may be the first person who is recognizing that early intervention could be of benefit.
21 I'm curious about the ways that you and you're rather -- in kind of a unique role, you're
22 able to support families as they navigate what's a very -- probably a different situation
23 for them, right?

24 **MS. SURBHI SANDHIR:** Yeah.

25 **MS. KRISTA SMITH:** Like, you're trying to ---

26 **MS. SURBHI SANDHIR:** We do. Like, we do come up with
27 support programs in between and definitely we are the first person when we contact
28 with the families when they come and bring in their kids in daycare. We are the people

1 they contact. So we're kind of building that kind of relationship. Some of the parents
2 get so comfortable talking to us that they can feel that that's a safe place for them to talk
3 about, and they do come out with things and talk about with us [indiscernible] with some
4 of the programs which we offer in our centre, like which is suitable for them. And they
5 have come up later and told us that it has been really benefitted for them.

6 **MS. KRISTA SMITH:** M'hm. Okay. Thank you very much. I'm
7 going to move it on to our next question.

8 So an interesting question would be who should engage children
9 and youth about community safety?

10 So I think we can think about it in terms of all the different
11 presences in a child's life, right, from parents to their peers to their community, and
12 supports. To what extent is it up to, say, the public education or formal systems to
13 engage children and youth on this issue? And then maybe reflect a bit about that
14 versus, you know, more personal and informal type supports.

15 I think I'll just keep the order the same for now, if that's okay with
16 people. So I'll go to Tracey first.

17 **MS. TRACEY SHAY:** Yeah, I think it's everyone's responsibility
18 and I think this is what's making it a challenge for us. When this occurred, the one thing
19 that we kept hearing when we were trying to pull people together to say, you know, how
20 do we best support families and children moving forward, is that this was
21 unprecedented. And it is. But there's a ton of research and this is happening all over
22 the world and has been happening. We only need to look to the United States.

23 So I think where we fell down a bit was not having anybody
24 coordinating supports. We kind of left it up to the front lines to keep getting together
25 and trying to solve something. But this is -- you know, if we look at our public systems --
26 so if I take education as my example, because that's where I live and work, you know,
27 this is a component of what our response would be. Our first and foremost -- you know,
28 we're trying to educate children. So it just feels like when we pull all of our stakeholders

1 together and our systems together, this is off the side of people's desks, for lack of a
2 better word, right? Like, so responding to this type of an incident, or responding to grief,
3 responding to trauma, it's all a component of our work. It's not what all of us do full time
4 outside maybe the mental health world.

5 So while it's all of our responsibilities, I think where we all really
6 struggle is who is going to own it, take it on, and make sure that we've got a good
7 system in play. And so what was happening is like there was pockets happening
8 everywhere where people were trying to respond, because that's what we do in a crisis
9 to help people. But that lack of coordination was really hard for families.

10 So every system was doing their own thing. You know, we had
11 Victim Services come in and they were doing work. And SchoolsPlus was trying to do
12 work. And Education was trying to set up supports, and Mental Health was trying to set
13 up supports. Families were trying to support one another, especially in our rural
14 communities; that's how we operate.

15 But we were in a pandemic and you couldn't get together, and then
16 you just -- like, nobody kind of knew what anybody else was doing but it's not really
17 anybody's job to know what everybody else is doing. We needed a coordinator at the
18 end of the day. I'll say it 1000 times here today. We still need a coordinator. We need
19 somebody that can reach out to families and do this work, and this is their job, because
20 it's everybody's work. And I think the other piece to that is why it is families'
21 responsibility -- like, I can speak for myself. It greatly impacted my family personally.
22 We knew a fair amount of these folks. We had relationships with people.

23 It's hard to support your own family in your community when you're
24 living it. So why I do think parents have a responsibility, we have to give parents the
25 support they need to get well again themselves and to be in a place where they can
26 then support their kids. And we know in research, and you guys -- I mean, policy, you
27 would know this; it's -- we're years out from this ever -- you know, 20 years from now
28 we'll still see the impacts of this.

1 So it's everyone's job. If I had to say, you know, who is
2 responsible, I think we're all responsible. And I think our government and our
3 municipality, provincial, and federal government are all responsible. And I feel there
4 was a real absence of presence there. It just felt like everybody kept saying, "Well, you
5 know, we've never had this happen before so we're all going to step back and wait and
6 see."

7 And again, like, just that lack of leadership around it.

8 We're two and a half years out again, and we still don't have strong
9 leadership. Nobody is saying this is -- you know, this is the best way to respond. And
10 none of us want to, you know, engage children in conversations around safety and
11 parents around safety. First of all, we don't know what we can even offer. And second
12 of all, you want to make sure that when you open up those conversations, you're able to
13 support people who are traumatized and people who have a lot of trauma in their
14 worlds.

15 And so who is equipped to do that?

16 And again, if we're going to ask our front-line workers to do that,
17 then we need support for our front line workers who are hearing these stories and living
18 with it.

19 I worry sometimes that we're asking the community to solve the
20 problem, when the community may not be healthy enough to solve the problem.

21 **MS. KRISTA SMITH:** M'hm. Okay.

22 And I'm thinking about what you said earlier and just now about
23 front line workers. I feel like that they are almost the de facto first responders, right, of
24 when interacting with children, youth, and their families. And I want to have more
25 conversation about that, I think, because, you know, whether or not the leadership is
26 there or the resources are there, the needs are there. And if you're in the position of a
27 front-line worker, you're seeing that, and having to respond to it in however that looks.

28 And so maybe do you want to comment about -- like, can we

1 expand on that a little bit more, again, with recommendations in mind, right?

2 **MS. TRACEY SHAY:** Yeah. I think again, like, where part of the
3 struggle comes in and I'm not trying to say that people aren't supporting their front-line
4 workers at all. That's not what I mean. But again, it's disjunctured in that every system
5 is doing their own thing.

6 I know in our area, you know, within SchoolsPlus, we did this year
7 try to, over the last year create a community, a practice and support for our front-line
8 workers where we brought folks together to have dialogue and conversations. You
9 know, when this Inquiry started we certainly brought everybody together bi-weekly to try
10 to make sure we were supporting people. But I don't know. Like, there's really no
11 formal -- I think sometimes it's easy to say, "Well, call EAP or call your mental health
12 clinician." But it's not even -- I think for a lot of folks it's not even about that. It's just
13 being able to have somewhere to go that's again, like, creating a psychologically safe
14 place for people to talk about what they're hearing, what they're seeing, and supporting
15 them through that.

16 So I think we need community of practice. I think we need
17 somebody who's offering training. Like, I think if you were to ask a lot of front line staff
18 they feel ill-equipped to deal with the level of trauma that this has created. And nobody
19 wants to do more harm. So how do -- you know, we've engaged -- we even talked to
20 lots of people. We certainly consult with the IWK. We certainly, you know, consult with
21 people in the field. But again, like, it's that -- I don't want to use "experts" because I
22 don't know that, you know, we don't need a ton of experts coming in. But you also need
23 people with knowledge that can make sure that what we're doing is informed,
24 researched, evidence-based, and that when we're opening up these conversations,
25 there's a plan for what families identify as needing. I think that's the struggle.

26 People are afraid to even engage in the conversation because
27 when the family starts talking about all of their needs, can we meet those? And the last
28 thing we want to say is, "Oh my God. Thanks for sharing all that. I don't know what to

1 do with you now.” You know, like, a lot of our families -- and I don’t know if anybody
2 else has run into this. You know, when it happened we put out the Mental Health’s
3 phone numbers but then a lot of our families were turned away because they were told
4 they don’t meet the criteria for Mental Health, that this is grief, not -- you know, it doesn’t
5 fit under everything else.

6 So I think if we’re going to open the door, we need to have things in
7 place to actually direct families and they need to actually fit. And so I think part of the
8 struggle is too, we’re not clear about where to direct families. So some of our families
9 have reached out to things, to organizations and spaces to only be turned away. And
10 that does a tremendous amount of damage for our families.

11 The other thing is, sometimes there’s just nobody to point them to.
12 We’re, you know -- we don’t have a lot of resources in this rural community. And then
13 how do they get there? And transportation. And then like, there’s just so many barriers
14 for people. You know, it’s great to even say, “Well, you know, go to Mental Health.”
15 Well, how are you getting to Truro if you live in Economy or you live in Five Islands and
16 you don’t have a car?

17 So I’m probably way off topic here. I’m sorry.

18 **MS. KRISTA SMITH:** Sorry, I got stuck on mute.

19 I don’t think you’re off topic at all. It’s just a lot to consider. We’re
20 talking about front line response and I think you’re illustrating all the different ways that it
21 might feel overwhelming for front line service providers when trying to genuinely and
22 authentically work with the children and families and yeah.

23 Joanne, I’m going to take it over to you. Just share whatever was
24 coming up for you

25 **MS. JOANNE THIBEAU:** I would agree with a lot of what Tracey
26 said, but for me when you’re looking at teaching children about community safety and
27 early intervention, I think it should be in the school. And I know that’s a lot for them to
28 take on, but I think if you look at -- I do believe parents know their children best but they

1 may not have the best practices to teach them about personal safety and they may
2 teach them things that, I mean, we would frown upon or you know probably aren't in the
3 best interests of the children. And I don't know if they still do it in the schools, but at one
4 time, you know, safety was part of their curriculum. I know I did it. I don't know that my
5 son has done any. He's in Grade 4. And of course it has to be age appropriate.

6 We did a personal safety course with Community SafetyNet. They
7 do up these nice little books but just basic -- obviously this is not what has happened in
8 Portapique. This is basic personal safety, on staying home alone and answering the
9 phone and locking the doors and things like that. And at one point I'd offered to go into
10 the schools to kind of do a presentation for the kids but that didn't happen. So I think
11 the schools have the opportunity too to reach out to some of the community partners
12 who can come in and do that, just the basic things.

13 And obviously as we if we want (indiscernible), you're going to want
14 somebody more skilled than somebody like me, somebody with Mental Health training
15 or psychologists. But I do think it should be in the schools because I think that's the
16 best place. It's a safe place for the kids to learn and then they may go home and have
17 conversations with their parents too, right? And then that can lead to positive outcomes
18 as well.

19 . **MS. KRISTA SMITH:** Thank you.

20 Bobby-Jay...?

21 **MS. BOBBY-JAY AUBIN:** Sorry. I keep forgetting it's on mute.

22 Yeah, so ditto from what everyone's been saying. As a front line
23 worker we usually, you know, we're the first person in terms of safety and then try to
24 find the proper resources for what the safety needs are. For the most part it is lack of
25 shelter and there is no shelter in Digby. The closest ones is either in Yarmouth or
26 Kentville and right now they're at full capacity.

27 So you know, these kids are couch-surfing and burning their
28 bridges sadly because you can only stretch that so far. And yeah, it's hard. It's really

1 hard to watch. And you know, where do we put these kids? And why are they not, you
2 know -- what's the circumstances that brought them to the streets? Some of them are
3 as young as 13. Yeah, so we're trying to connect them back to schools as well.

4 And I think due to Covid, thinking, you know, they had the two
5 years of not being in school and they think that was -- sorry, a deterrent. And yeah, so
6 that's where it's at for us.

7 You know, we talk to community members for safety as well. And
8 the kids are really -- well, the youth are not really kosher with police officers or anyone
9 in uniform, right, which makes sense. So that's where we're at, and we need to do
10 more. More needs to be done, and we need to do more.

11 **MS. KRISTA SMITH:** And you may have spoken about this
12 already so I don't know if there's more to say around kind of the formal and informal
13 ways you and your organization support the youth that you meet. It sounds, I feel like,
14 we're running up against a brick wall of resources as I hear you talk about, you know,
15 the shelters; the few that exist are full. I mean, what do you do with that? As a front-
16 line worker what do you do with that?

17 **MS. BOBBY-JAY AUBIN:** Our hands are -- we're like this. It's
18 like, I don't know what to do with -- like, where do we -- you know, we try to find them --
19 connect them with I.A. but if they're under 16 there's nothing we can do.

20 **MS. KRISTA SMITH:** I.A. is Income Assistance?

21 **MS. BOBBY-JAY AUBIN:** Yes.

22 **MS. KRISTA SMITH:** Okay.

23 **MS. BOBBY-JAY AUBIN:** And then you know, if they have a DCS
24 worker we contact them. We just don't want them falling; too many kids are falling
25 through the cracks and being left to fend on their own and that's not right. That's not
26 right at all. So we try our best to connect them with as many resources as we can find,
27 which are lacking, to be honest.

28 **MS. KRISTA SMITH:** Yeah. And so then maybe where does the

1 role of advocacy come in?

2 **MS. BOBBY-JAY AUBIN:** So you know, we can bring them to
3 their DCS worker or meet up with them and just be their advocate, you know. We can
4 speak up for them or speak for them with their consent, of course because some of the
5 families do not -- are not wanting their children at home, but where do you put them,
6 right? And there's no group home that I know of.

7 Mind you, I'm new to Nova Scotia so I'm still looking into that to see
8 where kids can be placed for their safety.

9 **MS. KRISTA SMITH:** Okay. So I hear you on almost what I think
10 of as advocacy for individual people.

11 **MS. BOBBY-JAY AUBIN:** M'hm.

12 **MS. KRISTA SMITH:** What about advocacy -- I guess I'm
13 interested in this question of community sector organizations and the role that they may
14 play in broader based advocacy ---

15 **MS. BOBBY-JAY AUBIN:** Right.

16 **MS. KRISTA SMITH:** --- requiring -- demanding structural changes
17 or a systems change, right? And how precarious that can be given that community
18 sector organizations are often beholden to the powers that be for funding.

19 **MS. BOBBY-JAY AUBIN:** Right.

20 **MS. KRISTA SMITH:** How do we do this dance? Maybe that's my
21 next question for this group.

22 I'll take it to Tracey if you want to think about it.

23 **MS. BOBBY-JAY AUBIN:** Sure, thank you.

24 **MS. TRACEY SHAY:** Maybe I need to think about it.

25 It's a great question and I know -- so I recently have taken on a new
26 role and now I'm in charge of the Northern Region and I sit at a lot of provincial tables
27 and this is the work we're trying to do which is make people aware of the gaps in
28 services and the struggles within systems. So as Bobby-Jay was speaking, one of the

1 things I was thinking of -- our province has done a great job over the last 10 years of
2 creating a lot of navigation and advocacy roles. The problem isn't so much that there's
3 a lack of people to do that work because when I sit at stakeholder meetings we often
4 talk about how much we all overlap in terms of connecting families to resources and
5 helping families navigate complex systems.

6 The problem that I see is more that there's not enough of those
7 places to actually refer them to where people are doing the work. So you know, like if
8 we used an example of Hospice here in Truro. So you know, Hospice has two social
9 workers. So when we talk about grief and referring families to that organization, they're
10 so limited in their capacity as a community, you know, because they have to fund raise
11 and they have to -- you know, they're a non-profit.

12 And so when you're a social worker and you can only see -- and I
13 don't know what their numbers are so please don't think I do. But let's say, you know,
14 the person has 10 to 15 people on their case load but we have a wait list of 35 and
15 we're still trying to navigate people to that system and then they're told there's a wait
16 list, I think that's where the struggle comes in. I think there's great advocacy work being
17 done and I think there's a lot of navigators, but there's not a lot of places to navigate
18 people to.

19 And so when we look at -- you know, another example I would use
20 would be, like, you know, direct support for a family. So if you're a parent and you're
21 struggling with parenting your child, you know, who are we navigating that family to? So
22 we have Parenting Journey here in Truro which is awesome and we refer to them often,
23 but again, it's one person covering an entire region. So I think where the systems --
24 where we're struggling is, there's not enough front line workers doing the work that
25 we're trying to navigate families to. There's not enough mental health clinicians. The
26 vacancy rates are huge right now across the province in the world of social work. You
27 know, we can't fill our own positions in SchoolsPlus. So even when you get a family
28 and the family asks for help and you work through their identified needs, or the youth

1 comes to you and says, like, "Here's what I'm struggling with," we're bumping up against
2 systems that don't have enough people or who have wait lists or the resource just does
3 not exist at all. And then who fills that?

4 **MS. KRISTA SMITH:** So do you think that those vacancies are a
5 function of sort of pure market economics labour shortage? Or is there a reason why
6 it's hard to find people to do this work?

7 **MS. TRACEY SHAY:** I think it's a combination of many things.
8 You know, we're not unique to anywhere right now. We can't even fill our jobs.
9 Everybody's crying for help. But I'm not sure. Again, like, we're asking a lot of people
10 without a lot of support. So you know, any time you're working with families and you
11 can't solve the problem or direct them to somebody who can assist them with the
12 problem, it's a heavy burden for people.

13 **MS. KRISTA SMITH:** M'hm.

14 **MS. TRACEY SHAY:** And how long do you keep bumping up
15 against that before you start feeling like, you know, your work isn't impactful or effective,
16 and you're tired and you don't want to do this work anymore or you're going to go work
17 somewhere else where there's better systems and better structures, where you actually
18 feel like you're making a difference. And some of that's perceived, right and some of it's
19 real, because I don't know we always know the impact we're having on people until
20 years later.

21 But again, like, I just think we don't have enough. Like, where are
22 we directing families at this point? And how do we make systems understand because I
23 can use poverty as a great example. Like, how much more can we talk about poverty?
24 We've been talking about poverty forever. We've been -- you know, there's been tons
25 of recommendations . There's tons of non-profits making suggestions. There's tons of
26 initiatives. But everything's a short-term fix. We're structurally not changing anything
27 for those families. Systems are tough. Systems -- it's hard to create change in
28 systems.

1 **MS. KRISTA SMITH:** Yeah.

2 Joanne, I saw you smile a moment ago. Maybe -- what would you
3 say about the role of community sector organizations taking on advocacy roles for
4 systems change?

5 **MS. JOANNE THIBEAU:** It's a very important role but I do want to
6 say, like, in my role it's very difficult to take that on to go up against the government
7 because they fund a lot of our programs. And we could be cut. I mean, they're not
8 going to say they did it but, you know, we could be punished for standing up for people.

9 But I was smiling because with mental health -- I mean, yes it is
10 worse right now and like Tracey is absolutely correct. You try to refer somebody and
11 there's nobody to refer them to. But this is not a new problem. You know, this has
12 been like ongoing since I've worked here. There's nowhere to send people and then the
13 government will announce that these initiatives, in like the mental health line, and it's
14 really not helpful. It's all PR. Like, it's not helpful to people and so it's very frustrating
15 from our standpoint and yes, you know, nationally we're supposed to advocate for
16 people and we can only do it in a very polite way. It's not as meaningful really. So it's
17 frustrating.

18 **MS. KRISTA SMITH:** Yeah. Okay, so Bobby-Jay had to step
19 away for a moment so maybe I might change gears a little bit and then if we have time
20 we'll get back to hear what Bobby-Jay is thinking on this.

21 I'm just thinking about what questions we have. So I guess to take
22 things in a slightly different direction -- and we did talk about this a bit so we might be
23 able to flesh it out a bit more. But what are age appropriate ways to talk about
24 community safety with children and youth?

25 And Joanne, I'm just thinking about what you were saying about
26 kind of leaving it to the kids to bring it up or letting them lead the discussion. Are there
27 other factors that you would add to that, like how we go about discussing some of these
28 issues in an age appropriate way?

1 I mean, I'm even thinking -- I'll just say this. Like, my son is 12.
2 And you know, everyone is doing their lockdown drills this week in all the different
3 classes. And what -- I mean, to me this is the most poignant example of what, you
4 know, they tell the primaries they're doing versus what they're telling my 12-year-old.
5 And I mean, my 12-year-old came home shaken because his teacher had shared that
6 he had lost someone to a school shooting. So anyway, I'll just throw that out there and
7 see what you think.

8 **MS. JOANNE THIBEAU:** Well, I think with the younger kids
9 obviously you're going to want to lead it a little bit more. But and I mean, it starts with
10 the practice they do in school, about teaching them how to call 9-1-1, making sure that
11 they know their name and their phone number, those types of things that they do.

12 As they get older, I think it can be a discussion and they can be led.
13 But I'm always very cautious not to make the world scarier for children than it already is,
14 like what you just said with your son. We need to be very, very careful in what we tell
15 them, and there's definitely an age -- it's not even just age appropriateness. It's
16 developmental level. You know, I have a Grade 4 who is really Grade 2, you know, for
17 social development. And this is another area where parents probably do know best.
18 They might know their kid best.

19 I mean, it's difficult because the scary thing is we need to teach
20 these kids how to do this. And at school and in their own home now, and it's scary for
21 us to teach them. So I think we have to keep that in mind. But this is why I think a best
22 practices approach in the school which for personal safety at home, not just what they
23 practice in the schools for school shootings and that type of thing. And I think the
24 people teaching it need training because -- did your son need to know that? Like, is that
25 something he needed to know? Like, I don't think it is something that they needed to
26 know. And I think that might be an adult trying to share something to relate with them
27 and make it more real to them, but me, I probably wouldn't share that with a 12-year-
28 old. And so I think -- and if we are asking teachers to do this, then they should have the

1 training and the knowledge on how to do it the best way possible.

2 **MS. KRISTA SMITH:** Okay. Bobby-Jay, welcome back. We
3 switched gears a little bit while you were gone. We're just talking about how to talk to
4 children and youth about safety and, you know, kind of figuring out when and what is
5 age appropriate. And just as an example, I have thrown out that, you know, this week is
6 lockdown drill week in all the schools. And how the different approaches you see
7 teachers taking, depending on the child's age level.

8 **MS. BOBBY-JAY AUBIN:** Right.

9 **MS. KRISTA SMITH:** And just thinking about how do you get that
10 right balance. And so Joanne had shared about the importance of knowing what is age
11 appropriate or developmentally appropriate for a child. Yeah, that's kind of where we
12 left it.

13 So I can give you a second to think.

14 Tracey, I'm going to pass it over to you.

15 **MS. BOBBY-JAY AUBIN:** Okay, I've got it.

16 **MS. KRISTA SMITH:** You want to talk? Okay, great.

17 **MS. BOBBY-JAY AUBIN:** Yeah. I do a lot of safety talk with the
18 youth I work with from 12 to 24 because -- well, not because -- several of my youth are,
19 you know, even at 12 or 13 are sexually active so I do that safety talk with them. And
20 then moving up the line in terms of age, a lot has to do with keeping themselves safe on
21 the streets, at the schools especially, the ones that are going to school. And then
22 around harm reduction, because a lot of them don't realize the severity of addiction and
23 overdosing, right?

24 I mean, in Sudbury alone we lost so many youth to overdose
25 addiction, or overdoses, excuse my language -- and yeah, it's a hard pill to swallow, and
26 no pun intended at all. So we have those kind of talks with our youth here that we work
27 with. And in terms of, you know, where they're couch-surfing, several of our youth are
28 forced into things that they don't want to do and that they shouldn't have to do in terms

1 of having or getting to stay at somebody's house, couch-surfing. And it's leading into
2 human trafficking and it's very heart-breaking, you know, when we have those talks and
3 how to keep themselves safe and trying to teach them to say "No." Yeah, we need
4 more services here, like big time, like yesterday and the day before.

5 **MS. KRISTA SMITH:** Yeah. Well, and I'm just imagining the kinds
6 of conversations you're talking about having seem like they would be the most difficult
7 conversations imaginable, particularly or potentially for a parent, right, as well. And I'm
8 just wondering if there are enough people willing and able to have these conversations
9 with kids.

10 And I mean, I think that connects back to our context because
11 people, kids, or people, didn't necessarily have anyone to have these difficult
12 conversations with when they may have been experiencing inappropriate conduct by
13 our perpetrator.

14 **MS. BOBBY-JAY AUBIN:** Yeah.

15 **MS. KRISTA SMITH:** So are there -- I think it begs the answer, but
16 you know, this -- I can't imagine there's a lot of people who are eager to have these
17 conversations, these terribly difficult conversations with kids.

18 **MS. BOBBY-JAY AUBIN:** I can count them on one hand, the ones
19 that are able to, like myself, being a parent myself to a -- she's 30 now. But we did have
20 had those conversations with my own daughter so I think that was a good segue into
21 me in this field, to be able to talk about just about anything with the youth that we work
22 with, especially when I'm transporting them, especially for the first time that, you know,
23 there's that awkwardness. And so we just start conversing and then that's when, you
24 know, stuff comes out and that's when the best conversations actually happen when I'm
25 transporting youth.

26 Or sometimes if we're -- when we do our drop-in and you know,
27 we're playing board games; that's the best time to have those conversations because
28 often more than not, you know, the youth doesn't have to look at anybody. You know,

1 we're just playing a game and then stuff starts coming out and it's just like, okay, let's
2 have these conversations. And a lot of times the youth can help each other. You know,
3 I'll just sit there and listen to their conversation, and you know, they'll actually teach
4 each other street safety and, you know, who to watch out for and stuff like that, or what
5 places to avoid, especially for trap houses where a lot of the harm reduction needs to
6 happen because a lot of those trap houses also end up trafficking youth.

7 **MS. KRISTA SMITH:** Sorry, I don't know what a trap house is.

8 **MS. BOBBY-JAY AUBIN:** So that's -- it's called a trap house
9 because you go in there and nine times out of ten, especially if it's a new youth to
10 addictions, to the -- where they'll be given a drug and then they're trapped there
11 because they have no place to go and you know -- yeah. It's a hard topic. It breaks my
12 heart. I'm very passionate about keeping our youth out of the trap houses. There are
13 several in the community and there's -- yeah, it's very scary. It's a very scary --

14 I cannot imagine what a youth has to go through to be able to fend
15 for themselves and -- yeah, because once they're -- a lot of those drugs are very quickly
16 addictive and you know, once you're addicted to a certain type of drug, you know, you'll
17 do anything to get another fix. So that's where I was going with this. So that's what a
18 trap house is pretty much.

19 **MS. KRISTA SMITH:** Okay.

20 **MS. BOBBY-JAY AUBIN:** We used to call them crack houses but
21 now they're called trap houses.

22 **MS. KRISTA SMITH:** Okay.

23 **MS. BOBBY-JAY AUBIN:** And the police are all aware of them.
24 Their hands are tied as well. Sorry, that was a little dark.

25 **MS. KRISTA SMITH:** No. Actually I mean I'm just thinking about
26 our -- recently we've had facts put on our record about how the perpetrator made some
27 of the drugs that he used in his practice or as for dentists available and traded sexual
28 acts for those drugs.

1 **MS. BOBBY-JAY AUBIN:** Yeah. It angers me. And what can you
2 do about it? You know what I mean? Like, why is this happening? You know what I
3 mean? And for me the best way is to talk to the youth and, you know, it's not fun, you
4 know, especially once they get coerced into that. And try to get them out and, you
5 know, reassure them, "I'm always here. I will come and get you. I will take you
6 somewhere." But where? That's the problem, right?

7 **MS. KRISTA SMITH:** Right. Yeah. Okay, thank you.

8 **MS. BOBBY-JAY AUBIN:** Sorry, that was really deep.

9 **MS. KRISTA SMITH:** No, no. That's ---

10 **MS. BOBBY-JAY AUBIN:** But it needs to be heard; it needs to be
11 heard for sure across --

12 **MS. KRISTA SMITH:** Absolutely.

13 **MS. BOBBY-JAY AUBIN:** Thank you.

14 **MS. KRISTA SMITH:** Yeah. Well, Tracey, what do you think?

15 **MS. TRACEY SHAY:** I have a couple of thoughts as Bobby-Jay.
16 So this is -- Bobby-Jay, you would know of any work with SchoolsPlus, like these are
17 our kids too. These are the kids we're supporting. We run into the same things.

18 On a positive note, I will say schools have more resources now
19 than we've ever had. When I think back to when I was in high school we had a
20 guidance counsellor that told us all to go to university or not to go to university,
21 depending on what type of student we were. You know, like if I look at some of our
22 schools we have psychologists involved. We have SchoolsPlus which has social
23 workers, outreach workers, child and youth care practitioners. We have police and
24 liaison officers in our schools. We have health care centre coordinators in our schools.
25 We have counsellors in our schools.

26 You know, we have a lot of people trying to provide the supports
27 and identify kids that need supports and create those safe spaces and put those things
28 into play. And you know, kids get missed; there's no doubt about it. When kids stop

1 coming to school none of those services are then available to them and that itself is a
2 problem because then we have to look to community and there's not always great
3 things in community.

4 You know, we've got mental health clinicians in our schools now.
5 And again, it comes to enough people and enough resources. And then how do we
6 change systems to understand? So as Bobby-Jay was speaking, I was thinking, you
7 know, we've done a ton of awareness on homelessness. We've done a ton of
8 awareness on sexual exploitation and trafficking. We've done a ton of awareness on
9 the drug use that our kids are being exposed to and the accessibility of that. We've
10 done a ton of education and lobbying around the transgendered population and our
11 LGBT communities and the supports that they need.

12 And I feel like we're just having the same conversations. And I
13 think that's where people are getting tired. It's not a lack of awareness of what's
14 needed; it's who is going to make that actually happen. And I think this is where coming
15 back to this Commission -- like, I don't think there's a lack of knowledge for folks. I think
16 all of these stakeholder meetings, you're going to get all the information that you could
17 possibly ever need. It's then, what are we going to do with it that actually translates
18 onto the ground to support our teams.

19 You know, we only need to look to all the research that's already
20 been done. I'm sure we're not going to tell you anything that's not already documented
21 out of all the other countries that have been dealing with it about what needs to happen
22 to make communities feel safe.

23 I would encourage you to talk to people in the education system; I
24 don't speak for them. I don't know what their curriculum is around safety. Joanne, you
25 made some great points, but I don't know if that stuff is happening or not happening. I
26 do know there is specific programming that's encouraged. Like, our team is doing some
27 work around kids in the know which is, you know, a program that's offered from P to 8
28 and then all around safety and sexual exploitation. And you know, Tess is working with

1 the Department of Education around curriculum for Grade 7's specific to sexual
2 exploitation and trafficking.

3 So there's pieces happening that I don't want to speak to because I
4 don't deal with curriculum. But I think it would be great to ask those questions to
5 somebody in education, you know. Like, how are they addressing it, because maybe
6 there's a ton of stuff happening that we're not aware of as parents. Because when I ask
7 my kids, "What did you learn in school?" they don't learn anything. Nobody's teaching
8 them anything. So I think that that would be important.

9 The other thing I think we have to be really cognizant of when we're
10 talking to kids is it's okay if kids haven't been impacted. Like, I think sometimes we're
11 looking for that impact all the time and that trauma. And I think we have to be careful to
12 not make kids who haven't been impacted feel like that's a bad thing or that maybe they
13 should have been impacted, or why are they not upset when their friend is upset?
14 Because for some of our kids life just continued on. And they don't give it a second
15 thought. And they're not worried about their safety. And they're not worried about
16 anything.

17 So I think we have to be careful in conversations that we make
18 space for both of those situations. We spend a lot of time talking about that in the work
19 I was doing out of West Colchester. We did some school wide stuff in West Colchester
20 with our psychologist and our teams down there. But the one thing we were very
21 cognizant of is not everybody has been impacted at the same level. And then we don't
22 want to have conversations that are triggering or impacting kids who weren't impacted
23 before and now they are, because now they have all this information.

24 So it's tricky. It's complex. It's complicated. And there's no simple
25 or easy one answer. And I think the other thing that we probably need to do better is
26 some education around trauma and what does that mean? We throw that word around
27 a lot. I know the Commission has been using that word. Education uses the word. You
28 know, Mental Health uses the word. What do we mean by that? What do we mean by

1 trauma-informed practices? What do parents understand about it? Do they
2 understand, you know, their own trauma? Do they understand that this is going to have
3 long-term impacts for some of their kids? And then what can they do about that?

4 So there's a lot of pieces around that, I think. I think "trauma-
5 informed" has become another one of our great buzz words but then how does that
6 actually play out in our systems, and what are we actually doing to ensure safe,
7 psychologically safe as well as physically safe spaces for kids and families to come
8 together? And then who oversees that, and who makes sure that there's appropriate
9 resources and things in place at the end of the day?

10 So that's all I have to say. And I said a lot. I'm sorry.

11 **MS. KRISTA SMITH:** No, it's good. That's the point. That's why
12 we're here.

13 And too as I was thinking about what you said around kind of how
14 tricky and complex it is when you're working with a young person and trying to be
15 responsive to their -- what they actually need in a given moment. And you were saying
16 there's no one word or there's no one thing. And I guess I was led back to the idea of
17 relationship and listening. And I think that maybe it's important to think about the
18 different institutions that exist in our societies and where trust relationships tend to
19 reside and just relationship relationship, like honest communication.

20 I mean, I think in our work with the Commission we have spent a
21 fair bit of time talking about how the police can contribute to community safety but how
22 that requires an element of trust building and relationship. But it's easier for me to see
23 how a youth would be more likely to look to any of the three of you.

24 So like it's interesting to look at how these different institutions
25 within our society -- I don't know -- create opportunities for -- to build trust in relationship
26 and how hard it is when there isn't the resources to do that work.

27 I'll stop talking.

28 Joanne, I think I just would like to pass it over to you, recognizing

1 that we're in our kind of winding down phase of our time together. I'd invite you to
2 comment on what Tracey has just said or me ruminating, which is -- can be struck from
3 the record as irrelevant. But yeah, where would you -- what's going in your mind right
4 now?

5 Maybe Joanne froze right at that moment.

6 **MS. TRACEY SHAY:** It did freeze right at that moment.

7 **MS. JOANNE THIBEAU:** So I'm not sure if I got the end of what
8 you said, but I agree with what Tracey said. Like, it is very -- it has to be very cautious
9 when you're going to educate children because, I mean, my son was in Grade 2 when
10 this happened. He has no idea it happened. So I would hate for him to go to school
11 and for them to teach him about this because that's just going to terrify him. I just knew
12 with his anxiety, like, why would you tell a child in Grade 2 this horrific thing is
13 happening, right? So we were far enough away; we were in a pandemic. We didn't
14 have to worry about it.

15 The other thing too, when you're teaching -- it's complex; there's no
16 one answer. I do feel like school's the best way to approach it. I feel like exposing
17 children at age appropriate, developmental level ages, to personal safety. It is
18 important, you know, having police in the schools so that they do trust them. They can
19 put a face to a person. I mean, generally, young children do like the police. They do
20 trust them. They might be a little scared. But then once they hit that middle school age
21 it's really when they rebel against the police. There's a lot of distrust. Yeah, it's
22 complex. So I mean, this is why if you were taught in the schools you really need a
23 good set of professionals and experts kind of developing the curriculum and developing
24 how it works. Yeah. It's definitely not easy.

25 **MS. KRISTA SMITH:** Definiely not easy. And I was going to kind
26 of put the -- I want to put the magic wand question out there as well. And you started to
27 answer it just there. Like, what's most needed or how do we achieve best case
28 scenario? And you've mentioned training. And you talked about developing best

1 practices.

2 **MS. JOANNE THIBEAU:** Yeah. And once again, I do think it has
3 to go in the school because that's how we're going to reach the most amount of kids
4 and it's going to be the same message. I mean, when we're all doing things differently,
5 like, we may be sending different messages. We're not working collaboratively and I
6 just feel like in the school you're going to get all the kids. It could be a provincial-wide
7 curriculum and then obviously with input from people more knowledgeable than I am.
8 Yeah.

9 And I also recognize then that not all kids are in school so that's
10 just why it's very complex.

11 **MS. KRISTA SMITH:** Right. Okay. That's helpful. Thank you.
12 Bobby-Jay, I'm going to take it to you kind of as a magic wand or
13 last word.

14 **MS. BOBBY-JAY AUBIN:** Oh boy. We need to lobby the
15 governments to give us more resources, more funding for resources because the
16 burnout rate in this field is really high because there's only so many of us to go around.
17 And yeah, we need to lobby for more funding from not only the provincial but the federal
18 government as well, you know?

19 **MS. KRISTA SMITH:** M'hm.

20 **MS. BOBBY-JAY AUBIN:** So you know, it's all -- it can be all nice
21 and rosy for some communities but for other communities it's just not. And like Tracey
22 was saying regarding the SchoolsPlus, you know, there are amazing workers and
23 advocates for youth that are in the school but once the youth leaves school for whatever
24 reason, it's out of their hands as well.

25 **MS. KRISTA SMITH:** Okay. So what I've started doing is just kind
26 of outlining what we've heard today around what's going to be needed, what is needed
27 to improve community safety for children and youth.

28 And so Tracey was quite articulate about the importance of

1 coordination and leadership, and sort of like -- and I think that goes to that systems
2 question, right? Like, you need the systems to do something, not just poor people, front
3 line workers and -- yeah.

4 Resources, straight up. Funding. And schools as a great way to
5 reach many, many kids and there are a couple of components that schools can offer.
6 One is curriculum based and the other is more like what Tracey coordinates through
7 SchoolsPlus.

8 Tracey, I'm assuming that when you testified you were able to get
9 on the record an explanation of what SchoolsPlus is?

10 **MS. TRACEY SHAY:** Yeah. We spent some time looking at that.
11 And the other person that shared that testimonial space with me was Janet Balignasay
12 who is our Student Services Coordinator. So she was able to talk a little bit more
13 around the curriculum pieces and the educational part of it. Yeah, so I think that was
14 important.

15 One thing I will say about the coordination of services -- I think it's
16 really important that where we -- if that recommendation ever came to fruition, where
17 that person is housed is going to be really important because what we've seen in the
18 past is depending on who houses something dictates the parameters under which that
19 person can operate.

20 So you know, if it was to go into Health and then we look at, you
21 know, what's Health's mandate, and then we look at an issue such as grief, Health
22 would tell you they don't deal with grief, that grief isn't a mental illness so it doesn't fall
23 under them. And I would say grief is a massive component of the support that's needed
24 out there. We've done a ton of work around grief in the Northern Region prior to this
25 and that's all on record as well, Krista. We -- I don't know. You've probably spoken with
26 Serena Lewis but she was a big part of all that work that I was a part of.

27 But when we house it in a specific umbrella, we have to be really
28 careful that we don't fall into the trap of their mandate and that they have to work within

1 that structure and can't coordinate or -- I don't know if I'm being clear about what I'm
2 trying to say. But I just think we have to think about who will own it. I know we love to
3 shove stuff into a system but it needs to be a system that's flexible enough to meet the
4 needs of the community. And it can't have such a narrow mandate that we aren't
5 meeting the needs of the community.

6 The other thing I would say is I know we're a little bit focused on
7 children's safety, but whatever we put in place has to go across the life span. We have
8 a lot of elderly people struggling. We have a lot of single folks struggling. We have a lot
9 of, you know, middle-aged folks struggling. This can't -- you know, whatever the
10 recommendations from the Commission, it can't be child specific. It can't be adult
11 specific. It needs to go across our entire life span of resources and supports.

12 **MS. KRISTA SMITH:** M'hm.

13 **MS. TRACEY SHAY:** And I think that's really important.

14 **MS. KRISTA SMITH:** Yeah. Joanne, anything you would add to
15 the wish list of recommendations?

16 **MS. JOANNE THIBEAU:** I don't know. I think everything that
17 Tracey says about location and what -- it would almost be nice to have an independent
18 person who's not maybe linked to any of these who could bring them all together.
19 Yeah, and I think it needs to be long-term. It's like you put bandaids on these
20 sometimes but it needs to be a long-term position, maybe independent, and they can
21 bring organizations together so we can work more collaboratively together so we're not
22 duplicating services and so that we all are on the same page and doing the best that we
23 can.

24 **MS. TRACEY SHAY:** Joanne, I'm really glad you said that
25 because I think one of the concerns of the community is even after the Commission
26 makes their recommendation, that these will be short-term interventions. Like, okay,
27 we're going to fund this for the next two years. We need funding for the next 20 years.

28 **MS. KRISTA SMITH:** Yeah. And we definitely heard that -- We did

1 some -- Research and Policy did some roundtables and then we heard from people who
2 had been providing support and grief counselling after 9-1-1 and after some of the mass
3 shootings in the States. And it's quite clear that the needs are there 20 years out,
4 particularly when there weren't supports made available right in the beginning.

5 Well, you guys, is there anything else that you'd like to say while
6 you have the Commissioners' ear before we go our separate ways?

7 I feel like we covered a lot of ground today. And I really appreciate
8 your willingness to be open and to talk about these heartbreaking -- I think was the word
9 Bobby-Jay used -- some of the heartbreaking realities that front line service providers
10 are facing every day. Yeah, I think that that really needs to play into the
11 Commissioners' thinking when it comes to recommendations.

12 So you've really, really helped us. So thank you very much.

13 Okay. We'll sign off. Take care.

14 --- Session concludes

15


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CERTIFICATION

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18 I, KAREN NOGANOSH, hereby certify the foregoing pages to be an accurate
19 transcription of the audio recording provided to the best of my skill and ability, and I so
20 swear.

21

22 

23 KAREN NOGANOSH