

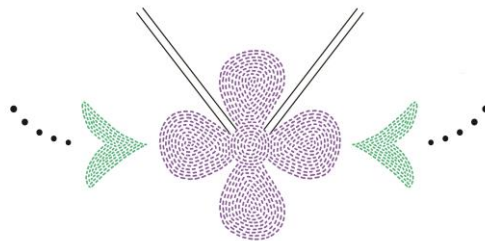
National Inquiry into  
Missing and Murdered  
Indigenous Women and Girls



Enquête nationale  
sur les femmes et les filles  
autochtones disparues et assassinées

**National Inquiry into Missing & Murdered Indigenous Women & Girls  
Truth-Gathering Process - Parts II & III  
Institutional & Expert/Knowledge-Keeper Hearings:  
“Child & Family Welfare”  
Fort Garry Hotel, Grand Ballroom**

**Winnipeg, Manitoba**



***PUBLIC***

**Mixed Part II & III Volume XI**

**Tuesday October 2, 2018**

**Panel I (*continued*):**

**Cora Morgan, First Nations Children’s Advocate Office**

**Sarah Clark, Executive Director, Arctic Children & Youth Foundation**

**Dr. Amy Bombay, Assistant Professor, School of Psychiatry,  
Dalhousie University**

**INTERNATIONAL REPORTING INC.**

41-5450 Canotek Road, Ottawa, Ontario, K1J 9G2

E-mail: [info@irri.net](mailto:info@irri.net) – Phone: 613-748-6043 – Fax: 613-748-8246

## II

### APPEARANCES

Animakee Wa Zhing #37 First Nation / Obashkaandagaang First Nation / Eagle Lake First Nation/Grassy Narrows First Nation / Ojibway Nation of Saugeen as a single collective party	Whitney Van Belleghem (Legal Counsel), Paloma Corrin (Legal Counsel)
Assembly of First Nations	Stuart Wuttke (Legal Counsel)
Assembly of Manitoba Chiefs	Joëlle Pastora Sala (Legal Counsel)
Association of Native Child & Family Service Agencies Ontario (ANCFSAO)	Katherine Hensel (Legal Counsel), Theresa Stevens (Representative)
Awo Taan Healing Lodge Society	Darrin Blain (Legal Counsel)
Battered Women's Support Services	Angela MacDougall, Viola Thomas, Brandy Kane, Summer Rain Bentham (Representatives)
Canadian Association of Chiefs of Police (CACP)	Ashley Smith (Legal Counsel)
Congress of Aboriginal Peoples	Alisa Lombard (Legal Counsel)
Directeur des poursuites criminelles et pénales (Québec)	Anny Bernier (Legal Counsel)
Downtown Eastside Women Centre	Carol Martin, Reta Blind (Representatives)
Eastern Door Indigenous Women's Association	Natalie D. Clifford (Legal Counsel)
Government of Alberta	Kate Bridgett (Legal Counsel)
Government of Canada	Lucy Bell (Legal Counsel), Anne McConville (Legal Counsel)

**III  
APPEARANCES**

Government of British Columbia	Sara Pye (Legal Counsel) Jean Walters (Legal Counsel)
Government of Manitoba	Wendy Post, Samuel Thomas & Kendra Jarvinen (Legal Counsel)
Government of New Brunswick	Heather Hobart (Legal Counsel)
Government of Newfoundland and Labrador	Dr. Judith Lovas (Representative), Denise Spencer (Legal Counsel)
Government of the Northwest Territories	Brad Porter (Legal Counsel)
Government of Saskatchewan	Barbara Mysko (Legal Counsel)
Independent First Nations	Josephine de Whytell (Legal Counsel)
Institute for the Advancement of Aboriginal Women	Rachelle Venne (Representative)
Inuit Tapiriit Kanatami (ITK)	Elizabeth Zarpa (Legal Counsel)
Liard Aboriginal Women's Society	Carly Teillet (Legal Counsel)
Manitoba Keewatinowi Okimakanak (MKO)	Jessica Barlow (Legal Counsel)
Manitoba Moon Voices	Tanis Wheeler & Alaya McIvor (Observers)
Mishkeegogamang First Nation	Paloma Corrin (Legal Counsel), Whitney Van Belleghem (Legal Counsel)

**IV  
APPEARANCES**

MMIWG Coalition Manitoba	Catherine Dunn (Legal Counsel)
Native Women's Association of Canada	Virginia Lomax (Legal Counsel)
Native Women's Association of Northwest Territories	Caroline Wawzonek (Legal Counsel)
New Brunswick Aboriginal Peoples Council	Amanda LeBlanc (Representative)
NunatuKavut Community Council	Roy Stewart (Legal Counsel)
Ontario Federation of Indigenous Friendship Centres	Niki Hashie (Representative)
Pauktuutit Inuit Women of Canada, Saturviit Inuit Women's Association, AnânuKatiget Tumingit Regional Inuit Women's Association, Ottawa Inuit Children's Centre and Manitoba Inuit Association, as a collective single party	Rachel Dutton (Representative) Beth Symes (Legal Counsel)
Regina Treaty Status Indian Services	Erica Beaudin (Representative)
Saskatchewan Association of Chiefs of Police	Katrina Swan (Legal Counsel)
Saskatchewan Aboriginal Women's Circle	Kellie R. Wuttunee (Legal Counsel)

**V**  
**APPEARANCES**

Treaty Alliance Northern  
Ontario / Nishnawbe Aski  
Nation / Grand Council Treaty  
#3

Krystyn Ordyniec (Legal  
Counsel), Anna Betty  
Achneepineskum (NAN  
Representative)

Vancouver Sex Workers' Rights  
Collective

Carly Teillet (Legal Counsel)

Winnipeg Police Service

Kimberly D. Carswell  
(Legal Counsel)

VI  
TABLE OF CONTENTS

**Truth-Gathering Process Mixed Parts II & III Volume XI**  
**Institutional & Expert / Knowledge-Keeper Hearings: "Family & Child Welfare"**

**Panel I: Cora Morgan, Sarah Clark & Dr. Amy Bombay (continued)**  
**Chair: Meredith Porter, Commission Counsel**  
**First Witness: Cora Morgan, First Nations Children's Advocate Office**

**First Witness: Cora Morgan, First Nations Children's Advocate Office**

Counsel: Joëlle Pastora Sala, Assembly of Manitoba Chiefs

**Second Witness: Sarah Clark, Executive Director, Arctic Children and Youth Foundation**

Topic: "Family Supports & Domestic Violence"

Counsel: Lillian Lundrigan, Commission Counsel

**Third Witness: Dr. Amy Bombay, Assistant Professor, School of Psychiatry, Dalhousie University**

Topic: "Transgenerational Trauma and Resilience"

Counsel: Stuart Wuttke, Assembly of First Nations

Heard by Chief Commissioner Marion Buller & Commissioners Michèle Audette, Brian Eyolfson & Qajaq Robinson

Grandmothers, Elders, Family Members & Knowledge-keepers: Lorraine Clements (National Family Advisory Circle - NFAC), Lesa Semmler (NFAC), Louise Haulli, Pénélope Guay, Leslie Spillett, Laureen "Blu" Waters, Bernie Williams, Dave McPherson (Firekeeper), Benjamin Morrisseau (Firekeeper), Annie Bowkett, Thelma Morrisseau & Stan Lapierre, Jenny Lay, Isabella Daniels, Velma Orvis, Mary Crate & Agnes Spence, Brielle Beardy-Linklater

Clerks: Maryiam Khoury & Gladys Wraight

Registrar: Bryan Zandberg

**VII  
TABLE OF CONTENTS**

	<b>PAGE</b>
Opening Remarks	1
<b><u>Panel I: Cora Morgan, Sarah Clark &amp; Dr. Amy Bombay</u></b>	
<b>CROSS-EXAMINATIONS OF PANEL I BY PARTIES WITH STANDING</b>	
Cross-Examination by MS. VIRGINIA LOMAX	12
Cross-Examination by MR. STUART WUTTKE	21
Cross-Examination by MS. ALISA LOMBARD	30
Cross-Examination by MS. KATHERINE HENSEL	36
Cross-Examination by MS. CARLY TEILLET	47
Cross-Examination by MS. AMANDA LEBLANC	57
Cross-Examination by MS. JESSICA BARLOW	61
Cross-Examination by MR. DARRIN BLAIN	70
Cross-Examination by MS. ERICA BEAUDIN	79
Cross-Examination by MS. KELLY WUTTUNEE	90
Cross-Examination by MS. RACHEL DUTTON	95
Cross-Examination by MS. JOELLE PASTORA SALA	106
Cross-Examination by MS. CARLY TEILLET	119
Cross-Examination by MS. CATHERINE DUNN	127
Cross-Examination by MS. JOSEPHINE DE WHYTELL	136
Cross-Examination by MS. WHITNEY VON BELLEGHEM	145
Cross-Examination by MS. CAROLINE WAWZONEK	161
Cross-Examination by MS. FRANCINE MERASTY	171
<b>RE-EXAMINATION OF PANEL I BY COMMISSION COUNSEL</b>	
Re-Examination by MR. STUART WUTTKE	180
<b>QUESTIONS BY COMMISSIONERS</b>	
Questions by Commissioner QAJAQ ROBINSON	181
Questions by Commissioner BRIAN EYOLFSON	188
Questions by Chief Commissioner MARION BULLER	190
Questions by Commissioner MICHÈLE AUDETTE	211
Questions by Commissioner QAJAQ ROBINSON	213
Closing Ceremony	230

1 Winnipeg, Manitoba

2 --- The hearing starts on Tuesday, October 2, 2018 at 8:34

3 **MS. SHAUNA FONTAINE:** ...back here of day  
4 two of our Institutional Experts/Knowledge Keeper Hearings  
5 on the Family and Child Welfare. I would like to also  
6 just begin and welcome everybody to Treaty 1 Territory and  
7 the homeland of the Anishinaabe, Cree, Oji-Cree, Dakota  
8 and Dené peoples and the Métis Nation.

9 To begin with this morning, I would like to  
10 call upon both Agnes Spence and Velma Orvis to come and  
11 provide some -- an opening prayer for us today, please.

12 **MS. VELMA ORVIS:** (Speaking Anishnabe).  
13 Meegwetch, manidoo, for this day for everyone here that is  
14 participating. We say meegwetch for those four  
15 directions, the four colours of people, the four sacred  
16 animals and four sacred plants around that medicine wheel.  
17 We ask for that sharing and caring to come into each and  
18 every one of us to be kind to each other, to respect each  
19 other, to love each other the way Creator would want us  
20 to, and may we be honest and truthful, and have the  
21 humility and courage to do that.

22 We say meegwetch for the Commissioners, all  
23 the people that work with the National Inquiry. And, we  
24 especially say meegwetch for the families for the sharing  
25 that they are going to do. And, we ask that each and



1 every one of us hold them close to our hearts so that they  
2 can do things in a good way, have the courage to do this  
3 most important story. And, may each and every one of us  
4 have a good day together as a community so that we remain  
5 strong. Hay-hay, meegwetch.

6 **MS. AGNES SPENCE:** First of all, I would  
7 like to thank the Creator for bringing us together here,  
8 and I thank the sisters of this territory of our great  
9 land, the sacred Canada, Kanata. And, I thank the sisters  
10 and their families for allowing me to be in their  
11 territory to be able to walk freely in their land. I  
12 thank all the Commissioners, all the staff and everybody  
13 for being here.

14 I welcome you all, honoured guests, elders,  
15 ladies and gentlemen, and most of all, the children. We  
16 are blessed with their presence. Ta-wow (phonetic),  
17 greetings to all. I greet you all in the name of the  
18 Father, of the Son and of the Holy Spirit, and I thank you  
19 for being here. Let us pray together. I will say a short  
20 prayer and I will invite you to pray with me the prayer  
21 that has been said before us according to the gospel of  
22 our Lord. So, let us pray.

23 Heavenly Father, Creator of all, may your  
24 Holy name be honoured in the entire universe. Be with us  
25 here in Winnipeg as we remember the lives of our loved

1 ones gone by, our loved ones whom have -- that have been  
2 taken from us. We will remember and tell the stories, and  
3 also to hear the stories of the families and children.  
4 Help us to remember our loved ones that have gone and also  
5 the loved ones that are with us. With your love and  
6 honour, be with us, help us, guide us and bless this event  
7 that it may truly serve and deliver the message through  
8 your love for all of us.

9 Send your Holy Spirit upon us so that we  
10 may be strengthened in your truth. May the Spirit be with  
11 us in our trials and temptations, in our pain, our grief,  
12 anger and also in moments of happiness and joy. May your  
13 love radiate and be revealed to us by our brothers and  
14 sisters, and our children, and our elders and all who are  
15 with us in this land. Oh, Heavenly Father, Creator of  
16 all, may our lives be pleasing to you, this we pray  
17 through Jesus Christ, our Lord. Amen.

18 Now, let us pray together the prayer that  
19 the Lord has left us to say. Our Father, who art in  
20 heaven, hallowed be thy name. Thy kingdom come, thy will  
21 be done on Earth as it is in heaven. Give us this day our  
22 daily bread and forgive us our trespasses as we forgive  
23 those who trespass against us. Lead us not into  
24 temptation, but deliver us from evil for thine is the  
25 kingdom, the power and the glory, forever and ever. Amen.

1                   **MS. VELMA ORVIS:** Is our Sarah here?

2                                   (MUSICAL PRESENTATION)

3                   **MS. SHAUNA FONTAINE:** Meegwetch. Thank you  
4 very much for your opening prayers and the lovely song,  
5 Sarah. I would like to now ask Annie Bowkett, if she  
6 would start us off by lighting the qulliq, please.

7                   **MS. ANNIE BOWKETT:** Good morning. I would  
8 like to start off with a prayer. (Speaking Inuktitut).  
9 Thank you. I want to say a few words, and say thank you  
10 to Lillian here, sitting beside me, who has been  
11 supporting me and helping me. I am going to talk in my  
12 own dialect, in Inuktitut, as I am lighting this qulliq.  
13 (Speaking in Indigenous language).

14                   **MS. LILLIAN LUNDRIGAN:** I would like to  
15 explain a little bit further regarding the qulliq.

16                   **MS. ANNIE BOWKETT:** (Speaking Inuktitut).

17                   **MS. LILLIAN LUNDRIGAN:** I spoke a little  
18 bit about the qulliq yesterday, but there is more to add  
19 so I would like to share that with you again this morning.

20                   **MS. ANNIE BOWKETT:** (Speaking Inuktitut).

21                   **MS. LILLIAN LUNDRIGAN:** Traditionally, the  
22 qulliq used seal oil as lamp to feed the fire, this was  
23 traditionally used. This is knowledge passed down from  
24 her mother.

25                   **MS. ANNIE BOWKETT:** (Speaking Inuktitut).

1                   **MS. LILLIAN LUNDRIGAN:** This is knowledge  
2 that unfortunately we -- she almost lost due to situations  
3 in our life that happened. She is grateful that she is  
4 able to bring this back into her life and to carry the  
5 tradition on for our future.

6                   **MS. ANNIE BOWKETT:** (Speaking Inuktitut)

7                   **MS. LILLIAN LUNDRIGAN:** As I mentioned  
8 yesterday, I was taken as a child by the police, when I  
9 was 4-years-old, due to TB. Taken from the family and  
10 sent down to a TB sanatorium.

11                   **MS. ANNIE BOWKETT:** (Speaking Inuktitut)

12                   **MS. LILLIAN LUNDRIGAN:** I was very young,  
13 4-years-old, I do not remember so much being taken from my  
14 family, but I do remember coughing and -- coughing up  
15 blood. I was very, very ill.

16                   **MS. ANNIE BOWKETT:** (Speaking Inuktitut).

17                   **MS. LILLIAN LUNDRIGAN:** When I realized  
18 what was happening, I was in a different place, I was not  
19 with my family.

20                   **MS. ANNIE BOWKETT:** (Speaking Inuktitut).

21                   **MS. LILLIAN LUNDRIGAN:** I was in the TB  
22 hospital for three years, and I was put in another  
23 institution after the TB hospital.

24                   **MS. ANNIE BOWKETT:** (Speaking Inuktitut).

25                   **MS. LILLIAN LUNDRIGAN:** I was very young

1 still when I was put into this other institution. A  
2 residential school where I was having to attend school.  
3 And, I did not know what place I was in.

4 **MS. ANNIE BOWKETT:** And, the place was  
5 called Moose Factory.

6 **MS. LILLIAN LUNDRIGAN:** The residential  
7 school was Moose Factory Residential School.

8 **MS. ANNIE BOWKETT:** And, I was the --  
9 (Speaking Inuktitut).

10 **MS. LILLIAN LUNDRIGAN:** I was the only Inuk  
11 child in that residential school.

12 **ELDER ANNIE BOWKETT:** (Speaks in  
13 Inuktitut).

14 **MS. LILLIAN LUNDRIGAN:** There was another  
15 Inuk child, but that child passed away.

16 **ELDER ANNIE BOWKETT:** (Speaks in  
17 Inuktitut).

18 **MS. LILLIAN LUNDRIGAN:** I would witness  
19 this child being treated very badly.

20 **ELDER ANNIE BOWKETT:** (Speaks in  
21 Inuktitut).

22 **MS. LILLIAN LUNDRIGAN:** I was abused  
23 sexually.

24 **ELDER ANNIE BOWKETT:** (Speaks in  
25 Inuktitut).

1                   **MS. LILLIAN LUNDRIGAN:** My mother did not  
2 know where I was. My mother thought I was no longer  
3 alive.

4                   **ELDER ANNIE BOWKETT:** (Speaks in  
5 Inuktitut).

6                   **MS. LILLIAN LUNDRIGAN:** There was no  
7 connection with my family. No communication.

8                   **ELDER ANNIE BOWKETT:** (Speaks in  
9 Inuktitut).

10                  **MS. LILLIAN LUNDRIGAN:** When I was in the  
11 hospital for TB, I was mistreated.

12                  **ELDER ANNIE BOWKETT:** (Speaks in  
13 Inuktitut).

14                  **MS. LILLIAN LUNDRIGAN:** Physically abused,  
15 whipped.

16                  **ELDER ANNIE BOWKETT:** (Speaks in  
17 Inuktitut).

18                  **MS. LILLIAN LUNDRIGAN:** This is the reason  
19 why my life has been in turmoil.

20                  **ELDER ANNIE BOWKETT:** (Speaks in  
21 Inuktitut).

22                  **MS. LILLIAN LUNDRIGAN:** I am happy and  
23 grateful that I am able to participate in these types of  
24 events, not just to light the qulliq, but to be a part of  
25 this healing journey.

1                   **ELDER ANNIE BOWKETT:** (Speaks in  
2                   Inuktitut).

3                   **MS. LILLIAN LUNDRIGAN:** Thank you very  
4                   much.

5                   **MS. SHAUNA FONTAINE:** Thank you, Annie, for  
6                   sharing that with us. I think that's why we are here this  
7                   week.

8                                 We would like to call upon a local two-  
9                   spirit consultant and advocate in the City of Winnipeg and  
10                  Manitoba, and Canada at large. So, I'd like to call up  
11                  Brielle Beardy-Linklater to provide us with a few opening  
12                  remarks.

13                   **BRIELLE BEARDY-LINKLATER:** (Speaks in  
14                   Indigenous language).

15                                 My name is Brielle Beardy-Linklater. I  
16                  come from the Nisichawayasihk Cree Nation, and I am a two-  
17                  spirit woman and youth. I am here this morning to bring  
18                  greetings and to remind people that two-spirited people  
19                  here on Turtle Island have also been affected by violence,  
20                  and that also includes myself.

21                                 I stand here today to bring heart medicine  
22                  to those families of the missing and murdered, and to  
23                  bring that knowledge from that traditional perspective to  
24                  remind people that two-spirit people have always existed  
25                  within our traditional family structures, and that

1 transphobia and homophobia replaced that love and respect  
2 for our two-spirited people.

3 Here on Treaty 1 territory, a large number  
4 of our two-spirited people have been murdered and have  
5 gone missing from here due to the rampant transphobia and  
6 homophobia. It is because of that lack of understanding  
7 for our two-spirit people that there hasn't been any  
8 justice in the last number of years. And going forward,  
9 we will remember to do so.

10 As I stand here an advocate in the flesh  
11 and spirit, I promise to serve and to speak up and shed  
12 light for those two-spirit lives who have, you know, been  
13 forgotten and who have been lost at the hands of violence.  
14 And, we need to remember to come together in a good way to  
15 include everybody in our circles, and to pray together,  
16 and to heal together, that our families and our  
17 communities cannot be complete without our two-spirit  
18 people.

19 Manidoo, as we exist here, we have always  
20 existed here, and that we were revered as people with  
21 gifts and understanding of both the masculine and the  
22 feminine. And, because of our gifts, we were targeted.  
23 We were always the subject of hate crimes for the last  
24 century. And, moving forward, we need to do what is  
25 necessary to take a look at our communities, to reflect,



1 and to look at where we can improve to improve the  
2 language, to include transgender people, gender-variant  
3 people, and including two-spirit people. That when a lot  
4 of our two-spirit people were murdered, they were marked  
5 as the wrong gender because we didn't follow these binary  
6 genders, because we had our own genders.

7 As two-spirit people, we're special to the  
8 Creator because we had certain gifts and knowledge. And,  
9 we were attacked and erased. And, we need to bring those  
10 two-spirit people back into our circles.

11 So, I want to conclude by thanking every  
12 one of you for being here, for wanting to move forward, to  
13 heal, to grow, but to come together in a good way.  
14 Meegwetch (speaks in Indigenous language).

15 **MS. SHAUNA FONTAINE:** Thank you very much,  
16 Brielle, for sharing part of your truth with us there this  
17 morning.

18 Before we carry on to cross-examination of  
19 our first panel, I just want to go over a few more of the  
20 little housekeeping pieces that we have. I just wanted to  
21 remind everybody that we are livestreaming this. It can  
22 be found on our Facebook and our website via CPAC. Please  
23 share that widely with your friends and family if they  
24 can't join us here in person, and so that they can also  
25 watch and witness this.

1           I also wanted to remind those that are here  
2 today that we do have some health and cultural supports  
3 available to you, individuals who are wearing purple  
4 lanyards. You can reach out to them. Feel free to just  
5 go and ask them if you feel you need any kind of support.

6           We do have an elders' room just up the  
7 stair there where we have some medicines and access to  
8 those cultural supports. As well, we have a family  
9 member, Gerry Pangman, who has a beading station there.  
10 So, if you wanted to do a little bit of self-care, you can  
11 go up there and bead a little red dress pin.

12           And then I also just wanted to remind  
13 everybody that throughout the day until sundown, we have a  
14 fire burning at The Forks, at the Missing and Murdered  
15 Indigenous Women and Girls monument. So, you can always  
16 go there, and you can place your tobacco offering into the  
17 fire. If you need transportation, there is a bus that  
18 leaves here every 30 minutes. But, if you have difficulty  
19 catching that bus, you can certainly talk to one of the  
20 staff at the registration desk who can assist you with  
21 getting transportation there.

22           We do have lunch that will be served  
23 outside of the room, and there's some tables all around  
24 upstairs. And, I just want to remind everybody to please  
25 turn off your cell phones.

1                   So, can I propose we take a sharp five-  
2 minute break so that the Commission counsel and the  
3 counsel can get ready? So, bringing us back here just  
4 about five after. All right, sharp five minutes, please.

5 --- Upon recessing at 9:02 a.m.

6 --- Upon resuming at 9:12 a.m.

7 **--- PANEL 1, Previously affirmed**

8                   **MS. MEREDITH PORTER:** Good morning, Chief  
9 Commissioner Buller, Commissioner Audette, Commissioner  
10 Eyolfson and Commissioner Robinson. I am Meredith Porter.  
11 I am from the Long Plain First Nation here in Treaty 1  
12 Territory, and we are going to reconvene with the cross-  
13 examination of the Panel 1 witnesses this morning.

14                   The first party that I would like to invite  
15 up to question the witnesses is from the Native Women's  
16 Association of Canada. I would like to invite up Virginia  
17 Lomax, and Ms. Lomax will have 13-and-a-half minutes for  
18 her questions. Sorry, just a second, we are -- if we can  
19 just wait a minute? We are actually missing a witness.  
20 Sorry. Thank you. Go ahead, Ms. Lomax.

21 **--- CROSS-EXAMINATION BY MS. VIRGINIA LOMAX:**

22                   **MS. VIRGINIA LOMAX:** Thank you. So, first,  
23 I want to acknowledge the spirits of our stolen sisters,  
24 as well as the families and survivors who are all with us  
25 in the room today and to the kind health support workers

1 who are taking such good care of us all. I acknowledge  
2 that we are on Treaty 1 Territory and the homeland of  
3 Métis Nation today, and I thank you all for your  
4 hospitality and for your welcome so that we can do our  
5 work in a good way today.

6 My first questions are for Cora Morgan.  
7 And, first, I would like to thank you for your lifetime of  
8 work for Indigenous children and their families. I think  
9 my friends would agree with me when I say we could all use  
10 a few more Cora Morgan's in our world. First, I wanted to  
11 ask you if you would like to describe some of FNFAO's  
12 successes.

13 **MS. CORA MORGAN:** When we first started our  
14 office, our office was flooded with people. And so, the  
15 very first family who came to us -- there was a lot of sad  
16 things that happened, but more and more there are happy  
17 things. But, the very first family that we worked -- that  
18 I worked with was a grandma. And, within a week -- and  
19 she had been fighting for over a year to get her  
20 grandchildren back. And, within a week of just merely  
21 challenging the way things were done, her child came home.

22 Our biggest accomplishment, and it isn't  
23 our accomplishment, but we were part of the journey, was a  
24 young girl who was in care and she had a baby at 15, a  
25 baby at 17, a baby at 19 all taken from birth. The fourth

1 baby that she had was going to be taken, and she came to  
2 us and asked us to advocate for her to spend one day with  
3 her baby before her baby was taken.

4 And, she was the epitome of everything that  
5 could happen to an individual; you know? Exploitation as  
6 a child, living in the system as a child, never having the  
7 opportunity to parent her children. And, you know, last  
8 Thursday, we celebrated her baby's first birthday, and her  
9 baby has gone home, and her babies are coming home soon.

10 But, even just last night, I was kind of  
11 conflicted, because as I was giving my testimony  
12 yesterday, I -- when I was done, I happened to look at my  
13 phone. And, over the weekend, there was 30 children in  
14 Winnipeg that were taken over the weekend. But, last  
15 night, when I went to bed, I checked my Messenger, and I  
16 got a thank you from a mom who was thanking me for helping  
17 her get her five children back. And, I was struggling to  
18 remember her, because everything that we did was always  
19 really fast. There are so many people coming in and, you  
20 know, I can't even remember the woman, but we helped her.  
21 And, I think that a lot of the things that we did, we had  
22 to move quickly, because there are so many people that  
23 even just standing up a little bit for one person made a  
24 difference of five kids coming home.

25 So, you know, yesterday, in her questions,

1 they asked, "What can you do?" And, it's just like,  
2 "Well, stand up and say no, and support and know what the  
3 issue is." And, you know, from my very first employer  
4 when I -- out of university, she always said that, you  
5 know, "You are an Aboriginal person. You had the  
6 opportunity of an education. You have a voice. And,  
7 whatever you do, you make sure that you use it." So, I  
8 think that is the message and that is what has helped  
9 bring kids home.

10 **MS. VIRGINIA LOMAX:** When you testified  
11 yesterday, you testified that you spoke to those involved  
12 in the system and about their experiences in the creation  
13 of your report; is that correct?

14 **MS. CORA MORGAN:** Well, we have a number of  
15 reports. The Bringing Our Children Home Report was a  
16 report that the Assembly of Manitoba Chiefs did to  
17 precipitate the creation of the Advocacy Office. I was in  
18 a different role, and I wanted to contribute to the  
19 engagement. And, since then, we have done a Lifting Up  
20 Children Report so that we can hear from survivors and  
21 children that were in care and aged out, and looking at,  
22 you know, the continuation of the theft of children.

23 And then we also did the Kehewin reports  
24 where we went into communities asking communities to tell  
25 us that -- their advice on and what we need to do in order

1 to bring our children home, and we posed the question,  
2 "Our children will be living with dignity and respect  
3 when?" So, our communities made a number of really  
4 valuable recommendations.

5 **MS. VIRGINIA LOMAX:** And so, can you speak  
6 to any -- within that engagement process, can you speak to  
7 any specific experiences of two-spirit, LGBTQ and gender  
8 diverse youth and any specific feedback they may have  
9 given on their unique experiences?

10 **MS. CORA MORGAN:** I can't speak to that  
11 specifically and I don't think that, in our  
12 recommendations, that there is anything that was specific  
13 to that. However, it is all about the overall well-being  
14 of children and honouring their gifts and talents and  
15 uniqueness. And so, I think that -- you know, that is  
16 something that deserves its own engagement I think.

17 **MS. VIRGINIA LOMAX:** You testified  
18 yesterday about how children involved in the system often  
19 experience many things that contribute to a loss of  
20 identity; is that correct?

21 **MS. CORA MORGAN:** That's correct.

22 **MS. VIRGINIA LOMAX:** And, could you comment  
23 on how a loss of identity is linked with or contributes to  
24 the epidemic of violence against Indigenous women, girls  
25 and gender diverse people?

1                   **MS. CORA MORGAN:** Well, yesterday, we heard  
2                   Dr. Bombay's presentation, and she spoke to how there was  
3                   student-on-student violence or bullying. And, I was  
4                   thinking about that, because I know that the same happens  
5                   for children in care. And, there is the dynamics that --  
6                   for a lot of young people, it is survival. And, I think  
7                   about this one young girl who, on her first day in a group  
8                   home -- and, you know, kids in care, they live in -- they  
9                   have one duffle bag with all their worldly possessions.  
10                  And, on the first day in the group home, it is almost like  
11                  a prison movie, that, you know, you have to defend  
12                  yourself. And, she ended up getting charged because girls  
13                  were trying to take stuff from her duffle bag and, you  
14                  know, that is all she had, so she fought for what little  
15                  she had.

16                                 And, it creates these dynamics of violence.  
17                  And, I think, you know, that loss of value for life --  
18                  they lose value for their own life, but they lose value in  
19                  the life of others. And so, that is how you can be more  
20                  inclined in inflicting harm on something -- someone  
21                  because you know how much you have personally suffered.  
22                  And, I think that can be applied to, you know, women and  
23                  girls.

24                                 And, I spoke yesterday about the mom who,  
25                  you know, learned how to parent from a book. And, you



1 know, when you are missing those fundamentals, like the  
2 seven teachings, and someone guiding you in life and  
3 parenting you and showing you, you know, kindness and how  
4 to be kind and how to be respectful. You know, none of  
5 that has been shown to them, so we cannot expect that  
6 those things are, to an extent, a learned behaviour too.

7 **MS. VIRGINIA LOMAX:** So, yesterday, you  
8 spoke of doing things "in our own way" when it comes to  
9 child protection, child welfare. Would you describe what  
10 this might look like to you, if you had, let's say, all  
11 the funding and all the freedom in the world to create the  
12 system, what might some central essential tenets of that  
13 system be?

14 **MS. CORA MORGAN:** What -- we have that  
15 Lifting Up Children Forum report and -- we had a panel of  
16 six youth who all spoke to their experience and care, and  
17 how, you know, they could feel in a group home, you know,  
18 or when they would be put in a new foster home, when  
19 people were just doing it for the money. And, we asked  
20 them all a series of questions and not one of those youth  
21 suggested that we invest in their parents. And, their  
22 time in care -- it's like, the thought of investing in  
23 family, no one could even arrive at it because it seemed  
24 too farfetched of a concept.

25 And, I think if we had all the funding in

1 the world, you know, we would prevent newborn  
2 apprehensions, because that's one of the most torturous  
3 things to witness, never mind experience. You know, you  
4 would have a centre where mom and baby could leave  
5 together, and that we would have grandmothers and mothers  
6 who are there to support them and, kind of, incubate and  
7 get them off to the best start in life. That is one of my  
8 dreams. Dreams to even incubate families and support  
9 them. Looking at increased social assistance rates, so  
10 that they are more comparable to foster care rates and --  
11 you know, just helping people have a good quality of life,  
12 you know, where basic needs are met at the minimum.

13 **MS. VIRGINIA LOMAX:** And so, you would  
14 agree with the statement that something like, you said  
15 earlier, guaranteed income could act as a prevention  
16 measure for involvement in the child welfare system and  
17 contribute to the betterment of overall children's health?

18 **MS. CORA MORGAN:** Absolutely.

19 **MS. VIRGINIA LOMAX:** Thank you very much.  
20 I would like to, in the remaining of my time, speak with  
21 Ms. Clark. I wanted to ask you, if in the engagements  
22 that you had done to create Umingmak, can you comment if  
23 there was any specific initiative or intentional  
24 engagement towards creating safe spaces and policies for  
25 two-spirit, and LGBTQ and gender diverse youth?

1                   **MS. SARAH CLARK:** In the engagement for the  
2 feasibility study, there was not anything specific to  
3 that.

4                   **MS. VIRGINIA LOMAX:** Would you agree that  
5 that might be a next step in order to create a safe space?

6                   **MS. SARAH CLARK:** Absolutely.

7                   **MS. VIRGINIA LOMAX:** Can you comment on how  
8 two-spirit, LGBTQ and gender diverse youth may be  
9 protected in their heightened state of vulnerability  
10 either through cultural protection that you discussed  
11 yesterday or through other practical means of safety  
12 planning and protection available through Umingmak?

13                   **MS. SARAH CLARK:** As I have not done any  
14 research on that at this time, I would not like to  
15 comment.

16                   **MS. VIRGINIA LOMAX:** Okay. And, I  
17 understand you may not be able to ask this question, but I  
18 will try. With information sharing that you discussed  
19 yesterday, what can be done to protect sensitive  
20 information in the interest of safety planning and  
21 protection?

22                                   For example, if there is a youth who is  
23 queer identified or gender diverse that may be in danger  
24 if information is widely shared about their identity,  
25 particularly in smaller communities where workers who

1 could be privy to information sharing could be family  
2 members or know the youth personally?

3 **MS. SARAH CLARK:** That is a really key  
4 point for our team. Confidentiality is stressed in our  
5 case review and in our -- any of our documents that guide  
6 us. I would say that it comes with training. So,  
7 increasing awareness amongst our team of their issues and  
8 the importance of being confidential, which is a huge  
9 issue for us.

10 **MS. VIRGINIA LOMAX:** Thank you, everyone,  
11 for being here today and for all of your work. Meegwetch.

12 **MS. MEREDITH PORTER:** Thank you. Thank  
13 you. The next party I would like to invite to the podium  
14 is from the Assembly of First Nations, counsel Stuart  
15 Wuttke. And, Mr. Wuttke will have 13.5 minutes to  
16 question Ms. Clark and Ms. Morgan.

17 **--- CROSS-EXAMINATION BY MR. STUART WUTTKE:**

18 **MR. STUART WUTTKE:** Good morning. My name  
19 is Stuart Wuttke, I am from Garden Hill First Nation and  
20 Treaty No. 5. I am also legal counsel for the Assembly of  
21 First Nations.

22 The only questions I have is for you, Ms.  
23 Morgan. Yesterday, you mentioned that young people are  
24 being charged with criminal offences. I was wondering,  
25 what types of criminal offences are these young people

1 being charged with?

2 **MS. CORA MORGAN:** Are we speaking about  
3 children in care or ---

4 **MR. STUART WUTTKE:** Yes.

5 **MS. CORA MORGAN:** --- overall? Okay. A  
6 large portion of what I have witnessed was young people  
7 that were being charged as a result of staying in a group  
8 home.

9 So, one of the things that I recognized --  
10 and in my opinion, there is a lot of times in these group  
11 homes people are paid minimum wage, or close to, and there  
12 isn't adequate training. And so, I think a lot of times,  
13 you know, I would see an arrest report and think that  
14 there is way more to the story. And then when you would  
15 meet the young individual, you would hear, you know, the  
16 background of everything and, you know, there is a lot of  
17 antagonism.

18 So, you know, I have seen a child who broke  
19 a lamp in a group home and was charged. I have seen where  
20 a girl was prevented from using the washroom and pushed  
21 past a worker was charged. Stepped off the curb at curfew  
22 and they phoned the police and they were charged.

23 And, one of the other things that was  
24 really common was that -- and what happens is, if you are  
25 in a group home, they are such high in demand, so if you

1 go to the youth centre and you spend a night there, the  
2 next day, that bed is filled with another youth. And, if  
3 that child is deemed a level 4 or high at risk, then what  
4 will happen is they could stay at the youth centre until  
5 suitable accommodations are found by their agency. And, I  
6 have known of a young girl who is not even facing any  
7 charges, but spent three months in the Manitoba Youth  
8 Centre.

9 **MR. STUART WUTTKE:** So, in your opinion, a  
10 lot of these charges are unnecessary and could be dealt  
11 with by other means such as diversion or other types of  
12 administrative sanctions?

13 **MS. CORA MORGAN:** Absolutely. And, I know  
14 that in Alberta, they have a policy where if a child in  
15 care is charged in a group home, the charges are  
16 automatically diverted. That's not an option here in this  
17 province.

18 **MR. STUART WUTTKE:** And, would you agree  
19 that in these circumstances, First Nation or Aboriginal  
20 youth are being unfairly targeted by authorities?

21 **MS. CORA MORGAN:** Absolutely.

22 **MR. STUART WUTTKE:** Yesterday, you also  
23 talked about the high rates of apprehensions in Manitoba,  
24 which I agree are very alarming. Is there a correlation  
25 between kids that grow up in care and having their own

1 children apprehended when they reach adulthood?

2 **MS. CORA MORGAN:** Mm-hmm. Many of the  
3 newborn apprehensions that I witnessed, there's birth  
4 alerts issued on young women who grew up in care, and when  
5 they go to have a baby, they find out at the hospital  
6 sometimes that the baby has a birth alert.

7 So, the very first birth alert I responded  
8 to was within a couple of months of being on the job, and  
9 this young woman had aged out of care and she was  
10 exploited as a youth and, you know, had addiction issues.  
11 And, now, she was 23 having her first baby, attended every  
12 parenting program, and it was all self-motivated. Her and  
13 her partner prepared for the baby, and her baby was at  
14 risk of apprehension.

15 And so, when I arrived at the hospital an  
16 hour before the agency was there to pick up the baby, they  
17 had six bags of baby clothes, they had their car seat.  
18 They were all ready. The paternal grandmother was there.  
19 When I arrived, she was breastfeeding her baby, and you  
20 know, I couldn't believe what was going on. And, I had  
21 phoned our Grand Chief at the time, and I'm, like, this is  
22 happening right now, and I can't even witness this.

23 The father, you know, was just kind of  
24 beside himself. And, I said, "Well, the issue is with the  
25 mom because she grew up in care, and they've issued a

1 birth alert." I said, "There's no concerns or issues that  
2 they have with you, and it's your baby. You should be  
3 able to take your baby." He's, like, "Okay, I'll take my  
4 baby." And, he was getting ready to do that, and the  
5 assistant advocate said, "You know that the police will be  
6 called and you will likely be charged if you take your  
7 baby," and then he backed down.

8 And, you know, the worker came in with  
9 their agency car seat, and they took the baby. And, I had  
10 found out later that they had issued that birth alert when  
11 the mom was three months' pregnant, and they held onto it  
12 for her entire pregnancy. And then when the agency got a  
13 call from the hospital, they responded. And so, there was  
14 over six months of time that they could have went to that  
15 home and got to know that mom, and taken -- you know,  
16 given her the opportunity.

17 So, they are flagged. I had a woman who  
18 had her first baby at 38 years old, and because she aged  
19 out of the system, they had flagged her baby. She had  
20 been out of care for 18 years. So, yes, there is a  
21 reality of our families being at risk.

22 **MR. STUART WUTTKE:** Thank you. And,  
23 yesterday, you gave evidence about how funding is related  
24 to the number of children that are in care from many  
25 agencies, that in order to support, you know, basic



1 operations of child and family services, more children are  
2 needed to be brought into care to increase the funding  
3 levels that the agencies require. Would that be a fair  
4 statement?

5 **MS. CORA MORGAN:** The way the funding model  
6 works, it's based on the number on children in care. So,  
7 it's -- you know, the more numbers that you have in your  
8 agency, the more money you will get. If, you know, for  
9 me, if I thought about it, you know, you would give an  
10 agency the same amount of money just to provide service  
11 for your community, and by way of prevention, and if you  
12 only have 10 kids in care, then make the investment in  
13 supporting healthy families in the community rather than  
14 paying more just because they have a thousand.

15 **MR. STUART WUTTKE:** All right. Thank you.  
16 And, I'm not sure if you're aware, but that funding model  
17 is strikingly similar to what happened in the Indian  
18 residential school system where that in order for church  
19 entities to actually run the residential schools, they  
20 only got a certain amount per child. So, they brought  
21 more and more children to bring up funding, which led to  
22 results of overcrowding, poor sanitation, lack of food,  
23 which gave rise to, also, diseases such as tuberculosis.

24 In the child welfare context where First  
25 Nations agencies -- I shouldn't say First Nations -- where

1 child welfare agencies are apprehending children at  
2 alarming rates to increase their funding levels, what type  
3 of impacts do these have on First Nations people?

4 **MS. CORA MORGAN:** I know in my own  
5 community of Sagkeeng First Nation, when I started this  
6 role eight -- three years ago, there was 607 kids in care.  
7 And, although our advocacy office exists, the numbers are  
8 growing. And so, now, three years later, and several  
9 children aged out of the system, there are now over 760  
10 kids in care, and that's just one First Nations community  
11 alone.

12 And so, the numbers are continually growing  
13 and, you know, every year we get these new provincial  
14 reforms and, you know, more kids are coming into care, and  
15 there are strategies to change the way they count kids.  
16 So, it's not actually children are going home.

17 **MR. STUART WUTTKE:** With respect to the  
18 prevention services, and these are -- which is known as  
19 least-disruptive measures, like, basically intervention  
20 services that keep the kids in the home, is there a  
21 difference between the services that are available, a  
22 prevention services program available to First Nations  
23 children as opposed to non-Native people?

24 **MS. CORA MORGAN:** One of the things that  
25 I'm hopeful about is the work that's being done in

1 Jordan's Principle, because there's added supports that  
2 are offered to families by way of addressing medical  
3 issues. But, I think as Jordan's Principle should  
4 broaden, that the amount of services should broaden.

5 I know that there is a commitment by our  
6 federal government to include prevention services, and I  
7 think that what needs to happen is we have to offer our  
8 own culturally-appropriate services. If you're a non-  
9 Indigenous person living in Winnipeg, there's an array of  
10 services that are offered to you, and there's funding  
11 attached to that.

12 I don't want to see ways of healing  
13 inflicted upon us. I think we need to have adequate  
14 resources to be able to use our traditional practises and  
15 be able to train our own people to be able to serve our  
16 own people at the community level, and that more effective  
17 services need to be offered. You know, we look at all the  
18 issues of addiction and, you know, I heard a stat that the  
19 Addictions Foundation of Manitoba has a 10 percent success  
20 rate, and AA has a 5 percent success rate. And then when  
21 you look at some of the things that are happening in  
22 Vancouver, and models, and work that are connected to  
23 Indigenous communities, they have, like, 80-plus success  
24 rates. And, I think that's what we need to look at, of  
25 ways of addressing issues and addressing the root causes

1 which normally boil down to trauma and tragedy.

2 And, our trauma and tragedy is really  
3 layered. You know, you can't have something that would  
4 address just one element of a mainstream person. You  
5 know, all of us have, you know, addictions in our family,  
6 violence in our family, diabetes in our family,  
7 potentially HIV in our family, homelessness in our family,  
8 mental health issues in our family. All of these things  
9 are things that each one of us have within our units, and  
10 that has to be accounted for in the services, in the  
11 supports and the healing offered to us.

12 **MR. STUART WUTTKE:** Thank you. I've just  
13 got a few more questions. It's related to prevention  
14 programs, but what is the number of -- I should say the  
15 percentage of children in Manitoba that are apprehended  
16 due to neglect?

17 **MS. CORA MORGAN:** We don't have those  
18 breakdowns, and that's another challenge that we're faced  
19 with, is that there is no one that is capturing the stats  
20 of what we need to know. And, we also need to look at  
21 defining some of these terms, like, defining "culturally  
22 appropriate", defining "prevention".

23 In our province, in the system, prevention  
24 means a child has to come into care and maybe a year or  
25 two down the road when the child is going to be reunified,

1 then there's prevention supports offered. To me, it's  
2 upfront. And so, from our context, we need to start  
3 defining what, you know, is culturally appropriate, what  
4 prevention means, and what neglect and abuse mean. Not to  
5 say we neglect our children but, you know, when you look  
6 at the standards in our agencies, you know, they'll frown  
7 at four children sharing a bedroom and, you know, a lot of  
8 our families, you know, my mom lived in a, you know,  
9 twelve by twelve house and there were three kids in that  
10 home. And so, those standards are things that we have to  
11 define for ourselves.

12 **MR. STUART WUTTKE:** All right. Thank you  
13 very much.

14 **MS. CORA MORGAN:** Thank you.

15 **MS. MEREDITH PORTER:** Thank you. The next  
16 party I would like to invite to the podium is from the  
17 Congress of Aboriginal Peoples. Ms. Alisa Lombard will  
18 have eight minutes for questioning.

19 **--- CROSS-EXAMINATION BY MS. ALISA LOMBARD:**

20 **MS. ALISA LOMBARD:** Good morning. Thank  
21 you to the Indigenous peoples of Treaty 1 for welcoming us  
22 on their territory, elders, families, Commissioners,  
23 witnesses, counsel. Thank you for sharing your knowledge  
24 and for listening so attentively.

25 Dr. Bombay, you explained that your

1 research evidences that cultural pride and renewal have a  
2 positive impact on one's ability to cope with trauma and  
3 depression. Is this an accurate interpretation of your  
4 research findings?

5 **DR. AMY BOMBAY:** Yes.

6 **MS. ALISA LOMBARD:** You also identified  
7 aggression incentives engaged and encouraged by  
8 authorities in residential schools on student abuse; is  
9 that correct?

10 **DR. AMY BOMBAY:** Yes.

11 **MS. ALISA LOMBARD:** Do you think that  
12 aggression incentives reside in the state's prescription  
13 of identity through instruments such as the *Indian Act*?

14 **DR. AMY BOMBAY:** Can you repeat the  
15 question?

16 **MS. ALISA LOMBARD:** I'll give you an  
17 example in terms of the kinds of things that arise with  
18 respect to identity.

19 In relation to band membership, for  
20 example, my children have to choose between various  
21 communities and various nations. Or, we as parents choose  
22 for them, of course, with which community they will be  
23 registered, or whether we choose to register them at all.  
24 This creates tension in families where children are  
25 connected to multiple communities, very rich Indigenous

1 nations, tensions that are difficult to reconcile and that  
2 stand to negatively impact a sense of pride in their  
3 multiple connections, the wealth of their ancestry, the  
4 resilience of their being, with conflict in early life  
5 that is not of their making and not truly their burden to  
6 bear. No other children really face these choices.  
7 Truly, systemic barriers prevent Indigenous children from  
8 being the sum of their parts, from finding pride in the  
9 sum of their parts as a whole diverse and proud human  
10 being. This is not to say that we don't teach them to be  
11 proud of who they are and to foster all those connections,  
12 but it would be, I think, intellectually dishonest to  
13 suggest that there aren't barriers to that that are very  
14 systemically entrenched.

15 And so, I suppose my question is really,  
16 would you agree that the state's prescription or denial of  
17 identity, or the force -- forcing one to choose or parents  
18 to choose for their children engages a form of aggression  
19 incentive resulting in harmful lateral violence which  
20 works to undermine cultural pride and renewal?

21 **DR. AMY BOMBAY:** Yes. Our research hasn't  
22 really looked at specifically how other things like the  
23 *Indian Act* has been related to this. So, our research  
24 hasn't focused, but definitely, it makes sense.

25 Some of our research that we have done is

1 talking to Indigenous youth living in urban settings, and  
2 they have spoken to those issues of being from different  
3 communities, or maybe being, you know, non-Indigenous as  
4 well, with being dark or lighter, and all of these things  
5 growing up on reserve versus not being status versus not -  
6 - all of these things definitely contribute to lateral  
7 violence. And, we actually looked at predictors of  
8 lateral violence, and we found that skin colour was one of  
9 the strongest predictors, for example.

10 So, there's all sorts of different things  
11 that's stemming from colonization, you know, internalized  
12 racism, all of these things that contribute to things like  
13 lateral violence.

14 **MS. ALISA LOMBARD:** Thank you. So, would  
15 you agree, Ms. Morgan and Dr. Bombay, from understandings  
16 gleaned from your research and lived experience that these  
17 -- that -- oh, sorry. I jumped over a question here.

18 Ms. Morgan, you mentioned that over \$500  
19 million in financial incentives is set aside to administer  
20 and operationalize a provincial child welfare system; is  
21 that correct?

22 **MS. CORA MORGAN:** Yes.

23 **MS. ALISA LOMBARD:** Would you agree, Dr.  
24 Morgan and Dr. Bombay, from understandings gleaned from  
25 your research and lived experience that these financial



1 incentives are similar, at least in part, in intention,  
2 design and effect to the financial incentives in the  
3 administration and operationalize of residential schools?

4 **DR. AMY BOMBAY:** I guess I would say that I  
5 can't really speak to that from my expertise, but it makes  
6 sense.

7 **MS. CORA MORGAN:** I'm not a doctor but, you  
8 know, I really feel like there's a motive in the design of  
9 how things happen in the way of child welfare. And, you  
10 know, I will say that the system is designed and is  
11 incentivized. I believe that it targets our families  
12 specifically.

13 I think that there is a choice that could  
14 have been made to do things better. And, I know that our  
15 First Nations leadership in Manitoba have made numerous  
16 attempts to be able to get a handle on what is happening  
17 to our children, and that, you know, jurisdiction needs to  
18 be restored to our First Nations to revitalize our  
19 original ways of caring for each other, because the way  
20 things are happening, you know, every time there's a  
21 provincial reform, it's more detrimental than it is good.

22 And so, I haven't witnessed real  
23 improvement. I've witnessed several band-aid approaches  
24 that inevitably and potentially take our kids away more  
25 permanently. And so, I think that, you know, their

1 failure to do things that are more representative of our  
2 perspective leans towards the way things operated in the  
3 days of residential school.

4 I know that's a long answer, but ---

5 **MS. ALISA LOMBARD:** Thank you for that  
6 answer. So, if those paradigms shifted, if those systemic  
7 attitudes and barriers were excised towards empowerment  
8 over imposition, pride over prescription, and renewal over  
9 incentivized and systemic discrimination, how would this  
10 impact, for example, the practice of birth alerts?

11 **MS. CORA MORGAN:** Well, I think that it  
12 would end the practice of birth alerts. I think that, you  
13 know, one of the things that we need to do is look -- each  
14 of us, look down each arm and see if we have kids within  
15 our family that we can bring home and make those steps. I  
16 mean, we definitely need the resources.

17 You know, we look at what this era of  
18 reconciliation is supposed to be. Well, it should  
19 ultimately be bring us our children home and let's look at  
20 restitution for centuries of breakdowns of families, and  
21 adequately help to restore who we are and our identity.

22 **MS. ALISA LOMBARD:** Thank you. And, just  
23 with the few seconds that I have, I just wanted to ask  
24 you, Ms. Morgan, if you're aware of whether or not there  
25 are any real repercussions for authorities where they

1 unjustifiably apprehend a child at birth or when they  
2 apprehend generally, and where is the disincentive, the  
3 prevention measure or the check and balance on power and  
4 authority with respect to this?

5 **MS. CORA MORGAN:** Well, in Manitoba, you  
6 know, agencies have more authority than our police. And,  
7 in this current system, parents are guilty until they can  
8 prove their innocence. The system is designed to protect  
9 itself. And so, you know, in three years, I haven't heard  
10 of repercussions, or maybe quietly some workers might be  
11 let go for things that have happened, but out and out, you  
12 know, there's been no apologies for what has happened, and  
13 lots of terrible things happen daily, and children lose  
14 their lives.

15 **MS. ALISA LOMBARD:** Thank you. Those are  
16 my questions. Thank you, everybody.

17 **MS. MEREDITH PORTER:** Thank you. The next  
18 party I'd like to invite to the podium is from the  
19 Association of Native Child and Family Services Agencies  
20 of Ontario.

21 **--- CROSS-EXAMINATION BY MS. KATHERINE HENSEL:**

22 **MS. KATHERINE HENSEL:** (Speaking in  
23 Indigenous language). To the members of the panel and to  
24 the Commissioner, my name is Katherine Hensel, I am  
25 counsel to the Association of Native Child and Family

1 Services Agencies of Ontario. That is 12 Indigenous  
2 agencies in Ontario, all of which operate pursuant to  
3 their statutory delegated authority and many of which also  
4 operate pursuant to exercised and delegated in inherent  
5 jurisdiction within the territories that they operate.

6 I am going to start with questions for Cora  
7 Morgan, who, with her permission, I will address as Cora.  
8 Thank you. Is it fair to say, Cora, that the conventional  
9 and statutory models of child welfare that you have  
10 described, and that you work around and within, fail to  
11 even identify, much less address, the intergenerational  
12 effects of residential school trauma?

13 **MS. CORA MORGAN:** That is correct.

14 **MS. KATHERINE HENSEL:** And, that the result  
15 of these effects are transmitted through further  
16 generations, in your experience, including through child  
17 welfare experiences for both mothers, and parents, and  
18 children and their children and so on? That they flow  
19 through. They do not trickle, they flood through the  
20 generations?

21 **MS. CORA MORGAN:** In many families, yes.

22 **MS. KATHERINE HENSEL:** And, the reports  
23 that you have submitted to the Commission and in your  
24 earlier testimony, I take it that you agree that for some  
25 families -- for many Indigenous families and Indigenous

1 parents, supports are indeed necessary to permit them to  
2 reach their parenting potential or even to safely parent  
3 their children due primarily to the legacy of residential  
4 school and all that compounded it afterwards  
5 intergenerationally?

6 **MS. CORA MORGAN:** In many cases, yes.

7 **MS. KATHERINE HENSEL:** And, that that  
8 legacy we have heard from Dr. Bombay includes poverty,  
9 reduced educational outcomes, poor mental health,  
10 addiction issues and generally reduced resiliency. Have  
11 you observed that as well in the families that you have  
12 worked with?

13 **MS. CORA MORGAN:** Absolutely.

14 **MS. KATHERINE HENSEL:** Okay. And, forgive  
15 me, I am going to be going back and forth between Dr.  
16 Bombay and Cora quite briskly. Dr. Bombay, you have  
17 testified that these effects that you have described, and  
18 Cora has agreed with, those are true not just for the  
19 children of residential school survivors, but their  
20 grandchildren, their great grandchildren and potentially  
21 beyond?

22 **DR. AMY BOMBAY:** Well, our research has  
23 specifically only looked at the children and  
24 grandchildren, so I really cannot speak to beyond that.  
25 And, that is simply just because our -- the First Nations

1 Regional Health Survey only asks about that.

2 **MS. KATHERINE HENSEL:** Thank you. At least  
3 for children and grandchildren?

4 **DR. AMY BOMBAY:** Yes, definitely.

5 **MS. KATHERINE HENSEL:** And, all of these  
6 factors, that you have identified these individualistic  
7 individual factors, they pose risks, but -- and they are  
8 also -- they are not just risks, they are the source of  
9 actual harm for Indigenous girls and women, would you  
10 agree?

11 **DR. AMY BOMBAY:** Yes.

12 **MS. KATHERINE HENSEL:** Okay. And, they  
13 lead to a higher probability of experiencing violence in  
14 the lives of those girls and women in their own lives?

15 **DR. AMY BOMBAY:** Our research has not  
16 specifically looked at that link, but our research has  
17 shown that all of the risk factors that have been shown in  
18 non-Indigenous populations for being victimized or  
19 perpetrating violence is -- are outcomes of  
20 intergenerational trauma from the residential school  
21 system.

22 **MS. KATHERINE HENSEL:** All right. Thank  
23 you. And, that that violence that -- causation wise,  
24 because of this correlation or consonants between the two  
25 areas of research and their findings, could reasonably be

1 expected to result in greater and disproportionate levels  
2 of death -- violent and premature death for Indigenous  
3 girls and women?

4 **DR. AMY BOMBAY:** Absolutely.

5 **MS. KATHERINE HENSEL:** All right. Cora,  
6 you have already testified about the loss of value for  
7 life that Indigenous people experience as a result of  
8 their experiences in child welfare. In your experience,  
9 the effects that Dr. Bombay described, and I listed it for  
10 you earlier, are they made worse for women experiencing  
11 them when their children and when their babies are  
12 apprehended? Are they exacerbated?

13 **MS. CORA MORGAN:** For many women, yes. You  
14 know, you cannot measure individuals resilience and what  
15 their accumulation of trauma and tragedy as to who can,  
16 you know, stay strong. You know, there are women who have  
17 persevered through but, you know, the level of trauma and  
18 -- like the elder said, the most violent act you could  
19 commit to a woman is to steal her child. There is a lot  
20 of women who cannot recover for that.

21 **MS. KATHERINE HENSEL:** And, you have seen -  
22 - would you agree that the conventional models, the  
23 statutory models for child welfare and child protection do  
24 not take into account these intergenerational effects we  
25 have been talking about, do they?

1                   **MS. CORA MORGAN:** No, they do not. And, if  
2 there is an account for them, it is used to the detriment  
3 of the woman.

4                   **MS. KATHERINE HENSEL:** That's right. It is  
5 attributed to their individual failures, weaknesses,  
6 riskiness ---

7                   **MS. CORA MORGAN:** Yes.

8                   **MS. KATHERINE HENSEL:** --- rather than the  
9 collective experience that they are a part of and subject  
10 to, not just of residential schools, but racism and  
11 colonialism more generally, would you agree?

12                   **MS. CORA MORGAN:** Yes.

13                   **MS. KATHERINE HENSEL:** Thank you. And, the  
14 workers that you have had contact with and the services  
15 they provide, the interventions, in your view, would it be  
16 fair to say that they cause rather than preventing harm to  
17 Indigenous children and women?

18                   **MS. CORA MORGAN:** One of the issues that I  
19 recognize in our province is that there isn't consistency  
20 among agencies. They have a number of a different  
21 agencies and they -- there isn't consistency among  
22 agencies, and we have a small few agencies that work  
23 better with families and are more supportive, but it  
24 tends, in my experience -- the larger the agency, the less  
25 support and the less services that are -- there is not a



1 lot of agencies who offer support. It is more  
2 provincially funded entities that are offering support  
3 that is mainstream, and very inaccessible, and long wait  
4 times and not necessarily culturally appropriate.

5 **MS. KATHERINE HENSEL:** Okay. So, for those  
6 agencies -- and would you agree there is unevenness as  
7 between even individual workers within the same agency and  
8 supervisors?

9 **MS. CORA MORGAN:** Absolutely.

10 **MS. KATHERINE HENSEL:** And so, the workers  
11 who are not working, in your view, effectively with  
12 Indigenous children and families, and who may be or are  
13 causing harm rather than preventing and protecting it,  
14 they are not aware that they are causing this harm -- or  
15 does it appear to you that they are aware of the harm that  
16 they are causing in the services and interventions that  
17 they are providing?

18 **MS. CORA MORGAN:** Well, I think that there  
19 is people that could work better and just choose not to.  
20 I think that there is people that can appreciate the  
21 humanity of our families. And, you know, it can even be  
22 extended to the courts. I think that, you know, when  
23 people are making decisions on behalf of the family, they  
24 are flippantly doing it, but our families are the ones  
25 that are suffering because it is their lives that are

1 being affected by decisions made on their behalf. And, a  
2 lot of times, I think that, you know, our families are not  
3 treated as though they are human.

4 **MS. KATHERINE HENSEL:** Okay. So, you have  
5 described the amount of money that is spent in Manitoba,  
6 in this province. It is significant across the country,  
7 but your expert evidence is specific to Manitoba. All  
8 this time, money and resources dedicated, with possibly  
9 good intentions, I would not necessarily go that far, to  
10 protecting children, preventing harm and actually failing  
11 to do so, by your own evidence, and actually in many cases  
12 causing significant and real harm to children and  
13 families. Is it an explanation in your view, possibly not  
14 a full explanation, but a substantial one, that it is...  
15 ...because the service models and the training and the  
16 methods employed fail to take into account the collective  
17 experiences of Indigenous children and families  
18 intergenerationally and directly with respect to  
19 particularly residential school, but also racism,  
20 colonialism and subsequent involvement in child welfare.

21 It was a very long question, and I can  
22 repeat it if you'd like.

23 **MS. CORA MORGAN:** No, I was paying  
24 attention. Yes, I think the overall issue is that, you  
25 know, the system doesn't value life. And so, that -- all

1 of those indicators are -- yes, I agree.

2 **MS. KATHERINE HENSEL:** Thank you. And, for  
3 services to be safe and effective, this is for Cora again,  
4 and to actually protect children and not do harm and to  
5 prevent harm, they simply must target the experiences and  
6 address the experiences of Indigenous children and  
7 families as Indigenous children and families based on the  
8 collective experience and lived reality. Would you agree  
9 with that?

10 **MS. CORA MORGAN:** I agree.

11 **MS. KATHERINE HENSEL:** And, that if service  
12 providers, agencies and individual workers don't  
13 understand this, there's a very significant risk, and we  
14 see it played out, that they won't provide safe, much less  
15 -- or effective or safe services for children and  
16 families, Indigenous children and families, if they don't  
17 know and they don't know how to address the collective  
18 experiences?

19 **MS. CORA MORGAN:** I agree, and I think part  
20 of the issue, too, is that the way that the design of the  
21 system is, it's designed to, you know, apprehend children.  
22 And then our families, our First Nations families and  
23 Indigenous families aren't seen as appropriate caregivers,  
24 even if there was a need for protection of children.

25 And, what happens is because it's designed

1 to apprehend, and they don't look at our Indigenous  
2 community to, you know, take children in, and they're put  
3 into stranger environments and shelters and group homes,  
4 then, you know, that's just an added layer to the issue.

5 **MS. KATHERINE HENSEL:** Okay. Just as a  
6 preface to my next question, which will probably be my  
7 final one based on the clock, ANCFSAO member agencies  
8 experience again and again a phenomena where they get new  
9 workers who may be grounded in their own Indigenous  
10 culture and community, and properly oriented towards  
11 family preservation and reintegration, counteracting the  
12 effects that we've talked about, or non-Indigenous workers  
13 who have the capacity and the orientation to do that.  
14 They are then -- participate in mainstream conventional  
15 training through provincial organizations and secondment  
16 to mainstream services. And, it is difficult -- and in  
17 those environments, they internalize the practises and the  
18 values that we've been discussing in the mainstream  
19 services, and it is difficult or impossible to get them  
20 back, my clients tell me, to a mindset that will be  
21 effective and safe sometimes for working with Indigenous  
22 families.

23 This is for the entire panel to comment on.  
24 Would you agree that it would be valuable to have a  
25 recommendation to have Indigenous-created, designed and

1 delivered curriculum that is mandatory for any child  
2 protection workers who are to work with any Indigenous  
3 children or families, whether that's in the mainstream  
4 agencies or in dedicated Native agencies?

5 **MS. CORA MORGAN:** I agree, and I believe  
6 that there also should be a declaration of what -- and a  
7 code of conduct also in place, and there should be  
8 measures of accountability when you deviate from those  
9 ways of caring for our families. And, I think part of the  
10 other issue is that, you know, when you're going into a  
11 role like a social work role or anything that our  
12 Indigenous people decide to do, that we're allowed to be  
13 First Nations first and a social worker second, and that  
14 carried into the work that we do. I think that our  
15 identity needs to come first in a good way, and I like the  
16 idea of accountability and codes of conduct.

17 **MS. KATHERINE HENSEL:** (Indigenous word) to  
18 all the members of the panel for the work you do.

19 **MS. CORA MORGAN:** Meegwetch.

20 **MS. MEREDITH PORTER:** Thank you. Chief  
21 Commissioner, I'm looking at the time, and it's about  
22 seven minutes after ten. We're scheduled for a break at  
23 10:15, and I'm going to seek your direction on calling  
24 another party to the podium or if you'd like to take a  
25 break at this point?

1                   **CHIEF COMMISSIONER MARION BULLER:** One more  
2 party, please.

3                   **MS. MEREDITH PORTER:** One more party.  
4 Thank you. I would like to invite, then, the Liard  
5 Aboriginal Women's Society to the podium, and Carly  
6 Teillet will have thirteen and a half minutes to question  
7 the witnesses.

8                   **--- CROSS-EXAMINATION BY MS. CARLY TEILLET:**

9                   **MS. CARLY TEILLET:** Tansi, bonjour, good  
10 morning. My name is Carly Teillet, and I am the great-  
11 granddaughter of Sara Riel, who is the niece of Louis  
12 Riel. I am Métis, and I was born not far from here in St.  
13 Boniface, Manitoba, in the Red River Community.

14                   I'd like to begin by expressing my joy at  
15 being welcomed home by my family and by two elders of the  
16 Treaty 1 territory who were setting up the teepee down at  
17 The Forks on Sunday. And, I'd like to take a moment to  
18 acknowledge the families and the survivors, the elders,  
19 the medicines and the sacred items that are here with us  
20 today. And, I'd like to also recognize the presence of  
21 Kaska elders, Kaska grandmothers, aunties, great-  
22 grandmothers, and members of the Liard Aboriginal Women's  
23 Society Board of Directors that travelled here from the  
24 Yukon to attend this important hearing this week.

25                   My first question is for Cora, if I may use

1 your first name?

2 **MS. CORA MORGAN:** Sure.

3 **MS. CARLY TEILLET:** Yesterday morning, you  
4 made compelling arguments about the need for advocates for  
5 Indigenous families, women and children, and you spoke  
6 about the dire situation in Manitoba, the rates of  
7 apprehension, the numbers of children in care, the dollar  
8 amounts that children are worth in the system.

9 My clients who work in the Kaska Nation,  
10 which is in the Yukon and northern part of B.C., they have  
11 been asking, they have been insisting that they have  
12 information about their children in care, and they're not  
13 getting it. The elders discussed the need to understand  
14 what's currently happening in the Yukon with their  
15 children so they can figure out how to move forward. In  
16 particular, they want to know how many children from their  
17 community are in care. Where are they? Are they taken  
18 from Watson Lake to Whitehorse? How many are in  
19 Whitehorse? How many are with non-Kaska families? How  
20 much are foster parents in the Yukon being paid and how  
21 many children, Kaska children in care, are being medicated  
22 and with what? They're not getting that information.

23 Your testimony yesterday was so powerful I  
24 think in part because you have some of that information.  
25 So, I'm hoping that you can share with us a little bit

1 about how your office is getting this detailed information  
2 about children in care?

3 **MS. CORA MORGAN:** We have our -- the design  
4 of the system, our Manitoba government releases annual  
5 stats of how many children are in care. We also have  
6 authorities. We have four authorities here in Manitoba:  
7 the Métis Authority, the Northern Authority, the Southern  
8 Authority and the General Authority. And, each of those  
9 authorities have annual reports that publish numbers, and  
10 there are breakdowns of what type of placements children  
11 are placed in, whether it's a foster home, group home,  
12 shelter, or a place of safety.

13 And so, that's still very vague, because a  
14 lot of times our families do not know where their children  
15 are, and many of the families that we work with at our  
16 office, they don't know where their children are placed.  
17 And so, if a child is young and non-verbal, you can't very  
18 well ask your child on a visit where they are. And,  
19 sometimes our families have the opportunity to meet foster  
20 parents.

21 But, those are some of the ways that we're  
22 able to derive some of those numbers. Part of the issue,  
23 though, like, we've filed several FIPA requests in the  
24 last few months and, you know, you get a document back  
25 saying that they don't collect that data, or that we



1 haven't provided enough information to be able to address  
2 our question or concern. And so, it is very challenging,  
3 and it's very difficult to be able to account for where  
4 our children are. And, you know, and it reveals itself.  
5 Because we have the mechanism of the advocate office, you  
6 have people that come in and their experience points you  
7 in a direction to look at something new all the time. And  
8 so, you know, just when you think you've seen it all,  
9 something else walks in.

10 So, it's hard to answer that, but I think  
11 that, you know, you have to put the pressure on and have  
12 leadership, you know, questioning and, you know, means to  
13 be accountable and ways to account for those children.  
14 And, I think, you know, even going back to asserting  
15 jurisdiction and looking at your original family laws and  
16 putting measures in place to ensure that that information  
17 is provided.

18 **MS. CARLY TEILLET:** Thank you. Dr. Bombay,  
19 my next question is for you, and it's about the importance  
20 of language and family relationships.

21 In the case of my clients, we're talking  
22 about the Kaska language, and we talked yesterday about  
23 the importance of understanding, and learning, and  
24 revitalizing, and using their Kaska language. And, they  
25 taught me that in their language, there is no term for

1 brother or sister; that in their language, the terms are  
2 much more specific than that, and that it's important to  
3 understand that so that you can understand the  
4 relationship between family members, and that a child is  
5 taught that language so that they can situate themselves  
6 in the family and in their sibling group and kind of to  
7 the larger community. And, understanding that language  
8 also has a role of understanding the responsibilities  
9 between family members.

10 And so, yesterday, and a little bit this  
11 morning, you discussed how culture could act as a barrier  
12 against stressors, negative outcomes, exaggerated  
13 responses. In your study, were you able to look at the  
14 impact of family support or strong kinship connections in  
15 changing the behaviour and biological responses to  
16 stressors later in life?

17 **DR. AMY BOMBAY:** We haven't specifically in  
18 our work, but I know other researchers have certainly  
19 shown that both within Indigenous and non-Indigenous  
20 populations.

21 You know, I guess in relation to our work,  
22 we're planning to look more at some of those positive  
23 protective factors but, you know, we looked at, like,  
24 those ten different adverse childhood experiences. And  
25 so, you can kind of flip it like a lack of neglect and all

1 of that is a loving parent. And so, we did, in that way,  
2 we did show those connections between having -- not having  
3 a loving, you know, family and outcomes.

4 **MS. CARLY TEILLET:** Thank you for pulling  
5 that out. That's important. So, along the lines of  
6 families, I'd like to ask another question of Cora. You  
7 discussed the need to support parents and families, and  
8 that funding needs to be directed towards prevention and  
9 preservation. And, the Kaska elders have shared with me  
10 that, traditionally, their children were initially raised  
11 by parents in the early years, and that later on, it was  
12 responsibilities of aunties and uncles to continue the  
13 teachings. And now, there are a lot of grandmothers that  
14 are looking after grandkids, and they're looking after  
15 great-grandchildren, and they have no support to look  
16 after all these little ones.

17 So, in your role as a family advocate, can  
18 you share a little bit about if you've been successful in  
19 advocating for larger family supports, to support that  
20 larger family that's really needed to care for our  
21 children?

22 **MS. CORA MORGAN:** You mean financially or  
23 just ---

24 **MS. CARLY TEILLET:** Yes, please.

25 **MS. CORA MORGAN:** Okay. Well, we advocate

1 for our grandmothers on a regular basis, and we have  
2 specific programs for grandmothers and grandparents. One  
3 of the things that we help facilitate at our office is  
4 guardianship agreements. So, we have a couple of  
5 templates that we have so that grandmothers can make  
6 arrangements outside of the system with their daughter or  
7 son to care for the children. And, when that is  
8 completed, grandmothers, for the most part, are able to  
9 access child tax to support having the children in their  
10 home.

11 Other than that, there aren't other  
12 financial resources allowed to them. And, a lot of times,  
13 there are even grandmothers that don't even access the  
14 child tax credit. We've also seen where grandmothers who  
15 -- you know, we had this one grandmother, she cared for  
16 her grandkids six days out of the week, but she was  
17 required to send them back one day a week to stay one  
18 night in the group home. And, the agency was collecting  
19 money on behalf of that child for the whole week. And,  
20 the grandmothers were caring for the child out of their  
21 own means, driving them to school every day, clothing  
22 them, feeding them and doing all of those things. Yet,  
23 someone was collecting on behalf of these children, and  
24 just wouldn't even turn the grandkids over to them.

25 So, there needs to be mechanisms in place.

1 You know, one of the things that Manitoba -- our Manitoba  
2 government is doing is putting forward this customary care  
3 arrangement. And, the idea of customary care from our  
4 position and our elders' position is that's something that  
5 doesn't need to be legislated. However, there needs to be  
6 mechanisms in place to help out grandparents who are  
7 caring for their grandkids.

8 **MS. CARLY TEILLET:** So, for my last  
9 question, I want to focus a little bit on capacity  
10 building, because that's often a term that is used to talk  
11 about why some of our communities can't take control of  
12 their children that might need care or might need  
13 assistance, that you just don't have the capacity to do  
14 it.

15 And, you've told an amazing story yesterday  
16 about two people facing and trying to do the work of a  
17 whole team, expanding out to 20 people to answer that  
18 need. And so, I was hoping that you could talk a little  
19 bit about that impressive growth of your organization up  
20 to 20 people in a very short period of time, and how you  
21 were able to build that capacity to answer that need.

22 **MS. CORA MORGAN:** Well, I think that the  
23 way that -- in most of my workplaces, it's about honouring  
24 individual gifts and talents. And, you know, each of us  
25 have those gifts and expertise, too, and ultimately, love

1 for our community and our people. And so, you know, we  
2 started with two and we grew to -- I think we still have  
3 some more positions to fill, but we'll have 24.

4 And, I'm happy to say that much of our team  
5 just arrived about half an hour ago, and we grew, but what  
6 we did was each person who came into the organization had  
7 something to offer. And so, we have, you know, a really  
8 great group of people that have, you know, different types  
9 of training to bring to the table. And, it's very  
10 exciting, because we're able to offer a lot, and everyone  
11 was able to hit the ground running, and ready to help in  
12 any way they can.

13 And so, with that -- when you bring that to  
14 the table, you can do a lot of things. And so, that's how  
15 we were able to grow because, you know, since October, a  
16 year ago today -- or yesterday is when we were able to  
17 start bringing on those more people, and in that time,  
18 we've offered ten different -- we can offer about ten  
19 different workshops and various other supports to our  
20 families.

21 **MS. CARLY TEILLET:** Just the funding to  
22 bring -- to expand that many people in.

23 **MS. CORA MORGAN:** And, we wrote proposals  
24 and that's how we were able to do that. We wrote a  
25 proposal and received funding from Canada to be able to do

1 that. It's limited to one more year from now, but we're  
2 going to look at some sustainability planning on how we  
3 can continue the work. Because it's needed, and it's just  
4 not one office of 20 people to take on what's happening.  
5 We need, you know, armies of people to help prevent and  
6 help offer services and supports and build that capacity.  
7 I think the capacity is there; we just need to harness it  
8 properly.

9 **MS. CARLY TEILLET:** That's my time. Thank  
10 you very much. Merci. Meegwetch.

11 **MS. MEREDITH PORTER:** Thank you. So, that  
12 brings us to the break time and I will seek your direction  
13 on a -- your direction with respect to the 15-minute  
14 break.

15 **CHIEF COMMISSIONER MARION BULLER:** Yes, we  
16 will take 15 minutes.

17 **MS. MEREDITH PORTER:** Okay. Then, that  
18 brings us back at about -- my math is bad. About 20 to.

19 **CHIEF COMMISSIONER MARION BULLER:** Well,  
20 that is 17 minutes, but ---

21 **MS. MEREDITH PORTER:** Okay.

22 **CHIEF COMMISSIONER MARION BULLER:** --- we  
23 will say 20 to.

24 **MS. MEREDITH PORTER:** Okay. Thanks.

25 --- Upon recessing at 10:22

1 --- Upon resuming at 10:41

2 **--- PANEL I, previously affirmed**

3 **MS. MEREDITH PORTER:** Okay. Thank you.

4 Thank you. I welcome everybody back from the break. And,  
5 the next party I would like to invite to the podium is  
6 from the New Brunswick Aboriginal Peoples Council, Amanda  
7 Leblanc will have four minutes.

8 **--- CROSS-EXAMINATION BY MS. AMANDA LEBLANC:**

9 **MS. AMANDA LEBLANC:** (Speaking in  
10 Indigenous language). Good morning, everyone. I would  
11 like to thank everybody for having us here on Treaty 1  
12 territory, for the Commissioners for coming here, for the  
13 witnesses especially for coming up here and going through  
14 this, this is hard and gruelling I would imagine. My name  
15 is Amanda Leblanc, I am the interim-Chief of the New  
16 Brunswick Aboriginal Peoples Council in New Brunswick. I  
17 am Wolastoquey from the province. This is my first time  
18 here in Winnipeg, so I am very excited to be here.

19 I would like to start, I guess, with Cora.  
20 I have recently had the opportunity to work in similar  
21 aspects that you have with advocating for families to  
22 receive their children back who were wrongfully taken and  
23 going through that process through a Head Start program.  
24 Are you familiar with the Head Start programs through the  
25 Aboriginal Head Start, urban and northern communities



1 specifically, that branch of it?

2 **MS. CORA MORGAN:** Absolutely, yes.

3 **MS. AMANDA LEBLANC:** Okay. And, would you  
4 say that it is a beneficial program that is offered across  
5 the country?

6 **MS. CORA MORGAN:** I would say that, yes.

7 **MS. AMANDA LEBLANC:** Okay. With that,  
8 there are not very many centres that are set up across the  
9 coast. So, within most recent statistics, 2016  
10 statistics, that three out of four Aboriginal people live  
11 off-reserve, yet the correlation of that to the supports  
12 for Head Start specifically do not really support that  
13 number, would you agree with that? Majority of people  
14 living off-reserve and ---

15 **MS. CORA MORGAN:** Yes. Yes.

16 **MS. AMANDA LEBLANC:** --- the Head Start  
17 that correlate. Okay. So, for example, in New Brunswick,  
18 we have one Head Start program for the entire province.  
19 And, the Head Start program has not received funding  
20 increases in over 15 years, so I think since the program  
21 started in 2001; am I correct in that? To your  
22 understanding?

23 **MS. CORA MORGAN:** I am not sure.

24 **MS. AMANDA LEBLANC:** Okay. So, it has not  
25 received funding in over 15 years ---

1                   **MS. CORA MORGAN:** Okay.

2                   **MS. AMANDA LEBLANC:** --- in increase to  
3 account for cost of living. So, in Fredericton for  
4 example, the program is only actually able to help six  
5 families. The most recent numbers in new Brunswick, it is  
6 over 26,000 people who identify as Aboriginal, who live  
7 off-reserve and would be in need of these programs  
8 specific to Head Start.

9                   With only funding to be able to support six  
10 children in this program, I think it is grossly  
11 underfunded. But, being such a strong -- I guess one of  
12 the best programs that I have been able to see in my own  
13 life and experience with because it incorporates the  
14 entire family. Is that the experience you have had with  
15 it too?

16                   **MS. CORA MORGAN:** Yes.

17                   **MS. AMANDA LEBLANC:** Okay. And, I think  
18 everybody has mentioned this a little bit in your  
19 testimonies over the last two days, that it is really  
20 important to have a collaboration and it is a family  
21 support. It is not just one individual, it takes a team,  
22 it takes everybody. And, what has not really been  
23 specifically set, a wraparound services that are able to  
24 support the families, for example the mothers, the  
25 fathers, the grandparents who are caring for these

1 children. What have been your experience, either in  
2 funding or programming, that incorporates those wraparound  
3 services?

4 You mentioned a little bit in one of the  
5 earlier responses, but what is your experience with them  
6 being supportive enough to be able to equip, I guess,  
7 families to be able to support their families once they  
8 get their children back?

9 **MS. CORA MORGAN:** I actually opened a Head  
10 Start in our own First Nation of Sagkeeng back in about  
11 2003. And, you know, you saw a lot of really positive  
12 things that happen for children. And, you know, usually  
13 with a Head Start program, you have to identify whether  
14 you are going to work with three-year olds or four-year  
15 olds, and I think that it was a really great model because  
16 our children were learning the language at an early age,  
17 there is culturally appropriate activities that were  
18 happening and their early learning was flourishing. At  
19 the same time, our parents created their own parent  
20 support group, so it created that dynamic as well.

21 And, one of the things that we were able to  
22 do, because I was working in employment and training at  
23 the time, was we opened a restaurant, and so -- with the  
24 parents of the children in the Head Start. So, while the  
25 kids were in the Head Start program, the parents were

1 working at the restaurant, the restaurant prepared the  
2 healthy meals, a parent was a van driver to come and pick  
3 them up. And, you know, to have flexibility in funding  
4 and to have adequate funding to be able to do things like  
5 that is really meaningful.

6 And, you know, one of the really successes  
7 was one of our mothers, you know, was super shy and her  
8 husband was always the breadwinner, but this gave her an  
9 opportunity to have a job and confidence and buy her own  
10 car. And, you know, I just think it is a springboard for  
11 so many positive things for families, and that, you know,  
12 Head Start should be extended so that you can -- you know,  
13 two, three and transition them into school. I think that  
14 it is a really great way. And then when you have amazing  
15 staff that are loving towards the children, I think that  
16 is the recipe for a really good start in life.

17 **MS. AMANDA LEBLANC:** That's great. I  
18 immediately regret giving up my time. Thank you very  
19 much.

20 **MS. MEREDITH PORTER:** Thank you. The next  
21 party I would like to invite up to the podium is from  
22 Manitoba Keewatinawi Okimakanak. Jessica Barlow will have  
23 13.5 minutes for her questions.

24 **--- CROSS-EXAMINATION BY MS. JESSICA BARLOW:**

25 **MS. JESSICA BARLOW:** Good morning. I would

1 like to acknowledge the spirits of our stolen sisters, the  
2 elders and the grandmothers, families and survivors, the  
3 sacred items in the room, Commissioners and the Inquiry  
4 staff, and the witnesses for sharing with us yesterday and  
5 today. I would also like to acknowledge that we are on  
6 Treaty 1 territory, in the homeland of the Métis nation.  
7 My name is Jessica Barlow, I am Anishinaabe Métis from  
8 Manitoba, and I am legal counsel on behalf of MKO.

9 All of my questions today will be for you,  
10 Ms. Morgan. And so, yesterday, you spoke about, and today  
11 as well, Jordan's Principle, and it is specifically  
12 covered in your document, the Keewaywin Report on Jordan's  
13 Principle which was listed as Exhibit 8, and I just wanted  
14 to highlight some points from that article.

15 So, on page 3 of this report, it references  
16 that there should be a recognition of capacity and  
17 strengths of First Nations, that they are a critical  
18 element in Jordan's Principle's implementation, and that  
19 even where capacity may be lacking, that this should not  
20 signify an inability to implement Jordan's Principle, but  
21 instead it should be viewed as an opportunity for  
22 government to address the gaps, make the necessary  
23 investments for full realization of First Nations'  
24 capabilities.

25 And so, given this, would you agree with a

1 recommendation that regardless of a lack of -- in  
2 capacity, that services and supports for children,  
3 especially children that have special or complex medical  
4 needs, should be insured?

5 **MS. CORA MORGAN:** I agree with that. Even  
6 further to that, I think that there has to be strides made  
7 in developing further capacity that is reflective of the  
8 needs of the community for -- it does not need to  
9 necessarily be a mainstream approach to addressing  
10 concerns, but there needs to be room for capacity  
11 development and acknowledgment of doing things that are  
12 specific to that cultural understanding of that First  
13 Nation.

14 **MS. JESSICA BARLOW:** Wonderful. Thank you.  
15 You actually anticipated my next question. So, would you  
16 also agree that any sort of infrastructure, programming or  
17 service resourcing needs to be substantively equal to the  
18 unique needs of First Nations communities?

19 **MS. CORA MORGAN:** Absolutely. Because my  
20 understanding is that many communities have received some  
21 support and funding for Jordan's Principle. However, the  
22 infrastructure of the First Nation community cannot always  
23 accommodate the extra staff and the ability to effectively  
24 run programming in their community without space.

25 **MS. JESSICA BARLOW:** Perfect. Thank you.

1 And, because a lot of these complex medical needs do not  
2 necessarily disappear with age, would you also agree with  
3 a recommendation that Jordan's Principle, and similar  
4 programs and services, be in place beyond a child reaching  
5 the age of majority?

6 **MS. CORA MORGAN:** Absolutely. And, when  
7 you hear Cindy Blackstock talk about Jordan's Principle,  
8 she talks about, you know, ensuring that the issue of  
9 Jordan's Principle goes beyond children, goes beyond  
10 medical, it should be extended to any support that you  
11 receive in an urban centre that are -- or service that can  
12 be offered in an urban centre our First Nations people  
13 should access on reserve.

14 **MS. JESSICA BARLOW:** Perfect. And, would  
15 you also agree that if Jordan's Principle is robustly  
16 implemented and services are proximate and available, that  
17 this could actually lessen the instances whereby parents  
18 sign the VPAs to ensure that they're getting their  
19 children appropriate medical treatment, that this might  
20 actually lessen the instances of that?

21 **MS. CORA MORGAN:** It should lessen the  
22 instances. Right now, our First Nations here in Manitoba  
23 are being able to offer far more to children with complex  
24 medical needs, but it has to go beyond that. It has to  
25 extend to adulthood, and it has to be fulsome so that

1 children aren't coming into care to -- there has to be  
2 ways around it. And, even though there's more services,  
3 we know that children are still -- our parents are still  
4 forced to sign these VPAs. So, it hasn't done enough to  
5 prevent that from happening just yet.

6 **MS. JESSICA BARLOW:** And, would you also  
7 agree with the recommendation that these programs and  
8 services relating to Jordan's Principle should also be  
9 implemented in proximate relation to communities? So, for  
10 example, a lot of services in northern and remote  
11 communities of Manitoba, those services aren't accessible.

12 **MS. CORA MORGAN:** That is correct. One of  
13 the concerns is that now there is added resources for  
14 Jordan's Principle, we don't have the capacity or the  
15 infrastructure or our own type of institutions to be able  
16 to effectively address, and our families are still  
17 travelling from First Nations communities to Winnipeg to  
18 access supports.

19 So, part of the aim and work of the  
20 Assembly of Manitoba Chiefs and our women's leadership  
21 council is to ensure that we have those mechanisms in  
22 place in our province so that there isn't -- they are more  
23 accessible, and our families don't have to travel far from  
24 home to be able to get the services they need.

25 **MS. JESSICA BARLOW:** And, is that a



1 recommendation that you'd make to the Commission today?

2 **MS. CORA MORGAN:** It is right now.

3 **MS. JESSICA BARLOW:** Okay, thank you. And  
4 so, we've heard in this and other hearings that programs  
5 and services and also infrastructure – and this can  
6 include things like adequate housing or access to food,  
7 food sovereignty or food insecurity even – that they are  
8 often inaccessible or unavailable to families on reserve,  
9 or that there are long wait times associated with  
10 accessing the very few programs that do exist. And,  
11 often, the people, as you've just said, people have to  
12 leave the communities to access these services.

13 And so, I'm wondering that, coupled with  
14 the fact that courts are reforming their CFS processes to  
15 try to prevent unnecessary delay -- and I suppose the  
16 thought there is that they're hoping that children won't  
17 have to be in care as long if the process goes faster.  
18 Would you agree that knowing that those -- there's a lack  
19 in services or in availability of services, would you  
20 agree that court reform alone is not able to bring our  
21 children home faster or more safely?

22 **MS. CORA MORGAN:** I would say that that is  
23 accurate. Even the expedited processes are still  
24 challenging for our families. When they're securing legal  
25 representation, especially in remote communities, a lot of

1 times, our families also are -- they don't have an ability  
2 to select a lawyer, that they're just provided one.

3 And, even further to that, you know, I  
4 believe in First Nations asserting their jurisdiction over  
5 their children and families, and that we need to work  
6 towards our own mechanisms at the community level for  
7 dispute resolution.

8 **MS. JESSICA BARLOW:** And, is that a  
9 recommendation that you would provide today?

10 **MS. CORA MORGAN:** Absolutely.

11 **MS. JESSICA BARLOW:** Wonderful. Thank you.  
12 And so, with the time that I have remaining, you spoke a  
13 bit yesterday about the link between the child welfare  
14 system and missing and murdered Indigenous women and  
15 girls, and I'm wondering if you can expand on that further  
16 with the time we have left, please?

17 **MS. CORA MORGAN:** I think, and I've said it  
18 before earlier today, that, you know, the most violent act  
19 you can commit to a woman is to steal her child. And, I  
20 spoke to, you know, when you remove a child from their  
21 family, their home, their pets, the rest of their  
22 siblings, because not always children -- do siblings get  
23 to stay together when they're apprehended, you know,  
24 they're automatically grieving and lost and, you know, I  
25 always think about it or often think about my own children

1 and what it would be like if they were taken and put into  
2 a stranger's home who doesn't know, you know, what they  
3 like to eat, or they don't have the ability to sneak into  
4 your bed at 2:00 in the morning every night. All those  
5 things that are deprived from these children and these,  
6 you know, children being put in these -- you know, we do  
7 have some really amazing people who come forward as foster  
8 parents, but we also have people who do it for the money.

9 And, you know, the things that we hear for  
10 our children, you know, it's very sad. It's very sad.  
11 But, when we look at the issue of missing and murdered  
12 women, you know, we've had women in our office that we've  
13 worked with who were murdered. And, we have heard of, you  
14 know, 16 mothers who have taken their lives because their  
15 children were removed. And, you know, one woman, her kids  
16 were only gone for 10 days, but for 10 days, she was  
17 reaching out to the agency and never got a call back, and  
18 had no idea where her children were. You know, those  
19 things were torturous, and I think those things need to be  
20 accounted for.

21 And then just, you know, the resiliency.  
22 When we look at those intergenerational effects, and you  
23 have those generations, that each generation, more and  
24 more of our identity is stripped from us and our family,  
25 and then to have that in your family background and then

1 to lose your own children, you know, the resilience, I  
2 think, is further lessened along the way. And so, those  
3 are the things that, you know, where women can easily lose  
4 value for life and, you know, they're put in situations  
5 where it's hard to recover from that. You know, when your  
6 children are apprehended, you lose your home. Then you're  
7 in a rooming house or on the street and, you know, there's  
8 not always adequate supports for someone to be able to  
9 climb out of that. There's a lot of despair.

10 I can't even remember what the question was  
11 now.

12 **MS. JESSICA BARLOW:** No, that's perfect. I  
13 thank you so very much. Those are all of my questions.

14 **MS. CORA MORGAN:** Thank you. As there's  
15 two minutes left, I was wondering if I could just ask our  
16 team from the First Nations Family Advocate Office to  
17 stand up?

18 (APPLAUSE)

19 I also want to acknowledge that we have  
20 family members, mothers that our office work -- that we  
21 work with here as well. And so, I'd like to acknowledge  
22 them for the hard work that they are doing to have their  
23 children back. Meegwetch.

24 (APPLAUSE)

25 **MS. MEREDITH PORTER:** Thank you. The next

1 party I'd like to invite up to the podium is from the Awo  
2 Taan Healing Lodge, Darrin Blain, and Mr. Blain will have  
3 thirteen and a half minutes for his questions.

4 **--- CROSS-EXAMINATION BY MR. DARRIN BLAIN:**

5 **MR. DARRIN BLAIN:** Good morning, Chief  
6 Commissioner Buller, Commissioners, to our elders and our  
7 hosts, to the families of the murdered and missing women  
8 and girls, to my new family, the parties with standing  
9 counsel. I want to take a second and honour Annie, who is  
10 tending the qulliᑭ today. Annie, I thought it took a lot  
11 of courage for you to share your story today and to  
12 disclose what you disclosed today. I think I speak on  
13 behalf of every person in this room when I say that  
14 whatever happened to you in residential school is never  
15 your fault. It will never be your fault, and we're really  
16 proud of you for sharing today.

17 I liked the words of Commission Robinson  
18 yesterday when she started our week by saying that we need  
19 to turn the child welfare system on its head. She was  
20 joined by Isabelle who had her daughter here, and Isabelle  
21 said the system just doesn't work. And it's a really  
22 interesting intersection that we find ourselves at because  
23 it feels like we're trying to live in a really broken down  
24 old house and trying to do some renovations to this house,  
25 and on the other hand, it feels like we're really wanting

1 a new house.

2 And I think a lot of us have been there, as  
3 we've grown up. I've seen my parents want a new house and  
4 trying to fix up the old house, and sooner or later we get  
5 a new house. And -- so you're striving for the new house,  
6 but you're trying to fix the old house and make it work.  
7 And that's what it feels like with the child welfare  
8 system, to be quite frank.

9 For those of you who I haven't met, my name  
10 is Darrin Blain, and I represent the Awo Taan Healing  
11 Lodge, which is a women's shelter in Calgary. We call it  
12 a place of healing, and hope, and restoration.

13 Somewhere in a courtroom today, the  
14 Director of Child Welfare is standing on one side of the  
15 courtroom in a thousand dollar suit and a \$500 briefcase  
16 wanting to get a temporary guardianship order or wanting  
17 to get a permanent guardianship order over a child or  
18 children that have been apprehended.

19 On the others side of the courtroom, if she  
20 has been served or if her and her husband have been  
21 served, if they have the resources to get to the  
22 courtroom, and if they understand what's happening in  
23 court, and if Legal Aid has blessed them with counsel,  
24 they are there too.

25 The intersection that we find ourselves at

1 is critical, and it's very real. The numbers are real,  
2 and we're talking about real children.

3 Ms. Morgan, good morning.

4 **MS. CORA MORGAN:** Good morning.

5 **MR. DARRIN BLAIN:** When someone like Tina  
6 Fontaine gets murdered in this province, do the child  
7 welfare authorities start an investigation about how that  
8 person fell through the cracks and how that person wasn't  
9 served?

10 **MS. CORA MORGAN:** The Children's Advocate  
11 Office of Manitoba from the provincial government does  
12 their investigation.

13 **MR. DARRIN BLAIN:** Would you call it a  
14 fulsome or a really good investigation, or is it tertiary  
15 or is -- how full is it?

16 **MS. CORA MORGAN:** We don't know because we  
17 don't have access to the investigation.

18 **MR. DARRIN BLAIN:** And what are your  
19 thoughts about that?

20 **MS. CORA MORGAN:** Well, I think that we  
21 need to have our own means to do our own investigations  
22 and look at the things that we feel are important as First  
23 Nations people. And I think that we need to do that from  
24 our own perspectives. And -- you know, because it's --  
25 when we have the Province of Manitoba looking at their own

1 Manitoba systems, then I don't that it's a fair process.  
2 That we need to be able to do it from our own lens and  
3 really look at what has failed that child.

4 **MR. DARRIN BLAIN:** M'hm. Maybe that'll be  
5 a recommendation that the Commission can make to the  
6 federal government in their report.

7 **MS. CORA MORGAN:** That would be important,  
8 because I think that we have to have our own means of  
9 looking at the wrongs that are committed to our families,  
10 and the wrongs that we see from our perspective. You  
11 know, sometimes, you know, the system treats us as though  
12 we're not human, and that humanity needs to be brought at  
13 a greater extent to the lens of one's life.

14 **MR. DARRIN BLAIN:** You just reminded me of  
15 something that my client said to me by email recently.  
16 She said, "Darrin, child welfare is the new residential  
17 school system, where you don't have a lot of choice."

18 So when we think about the old house and we  
19 think about the new house, I'm sure you have some  
20 recommendations for things that we need to do right now --  
21 -

22 **MS. CORA MORGAN:** M'hm.

23 **MR. DARRIN BLAIN:** --- to help with the  
24 child welfare system in this province and in this country.  
25 You've also mentioned some recommendations for the new



1 house, or the new world, or the new regime that we'd all  
2 like to see with respect to child welfare, not only in  
3 Manitoba, but across Canada, and including in the North.

4 So if you can think of -- I used to say  
5 this to my residential school clients when we'd walk into  
6 a hearing. I used to say, "This is your day. This is the  
7 one chance that you get to look the adjudicator in the eye  
8 and tell that adjudicator how this residential school  
9 affected you and your family. You drove here. You woke  
10 up today to do a job."

11 And I'm saying that you today, Ms. Morgan.  
12 You are taking time away from your office, half of your  
13 staff are here watching this, this is important to you and  
14 to the children of this province. What are the key  
15 recommendations that you want to make sure that you put  
16 before the Commission before you leave here and -- so that  
17 you can say to yourself, "Am I ever glad I said that. Am  
18 I ever glad I said that and am I ever glad I said that."?

19 When you put it all in the pot, and you  
20 boil the pot, and when you see what comes to the top, what  
21 are the things that we need to do right to help the system  
22 as it stands?

23 **MS. CORA MORGAN:** I have a similar analogy  
24 to yours, except for a I used the example of a car. If  
25 you have a car that needs 90-plus repairs, are you going

1 to make all those repairs or are you going to look at a  
2 new car? And if you have a car that has 90-plus repairs  
3 required, are you going to put -- is it going to be safe  
4 for children to be transported around in a vehicle that  
5 needs so many repairs?

6 And so, you know, ultimately, we need a new  
7 house, and that new house is the house that your parents  
8 dreamed of and should have had long ago because that is  
9 probably a house that is built on their identity and who  
10 they are as people. And so of course, I don't -- I know  
11 that a new house sounds like a super extravagant ask, but  
12 I think that after over 150 years of residential school  
13 and Sixties Scoop and a child welfare system, that a new  
14 house is not much to ask for.

15 But also, in the meantime, we need some  
16 measures in place because we have children trapped in this  
17 system right now, and there are meaningful things that  
18 could be done. And you know, when you talked about  
19 turning the system on its head, it's changing the way  
20 things are done and investment be in prevention over  
21 investment in the apprehension or stealing of -- theft of  
22 children.

23 I think that ending the practice of newborn  
24 apprehension should happen immediately. I think that we  
25 also make -- we need to make sure that apprehension really

1 is the last resort.

2 **MR. DARRIN BLAIN:** M'hm.

3 **MS. CORA MORGAN:** And those are things that  
4 could be done more urgently.

5 **MR. DARRIN BLAIN:** Okay. Now, you know  
6 what my next question will be, and that is we're going to  
7 talk about the new house. We've heard a lot here, and in  
8 the corrections hearings, and in the police hearings, that  
9 we need and Indigenous resolutions systems. Now I am  
10 assuming, correct me if I'm wrong, that we'll want to make  
11 a recommendation today that we need more Indigenous judges  
12 for starters in this country. Does that sound all right?

13 **MS. CORA MORGAN:** That sounds good, but I  
14 think that we also need our own dispute resolutions at our  
15 community level.

16 **MR. DARRIN BLAIN:** You mentioned that.  
17 Maybe the Indigenous judges could be pooled now for the  
18 current court system, and then when we build the new  
19 house, we do everything under our roof, such as the  
20 Indigenous resolutions systems, the traditional dispute  
21 resolution systems that you mentioned in your testimony.

22 **MS. CORA MORGAN:** Yes.

23 **MR. DARRIN BLAIN:** So run by Indigenous  
24 people for Indigenous people with Indigenous values, and  
25 the house looks different that way.

1                   **MS. CORA MORGAN:** M'hm. Even having a  
2 grandmother council in our communities today would go a  
3 long ways in informing the way our -- the way that child  
4 welfare operates at the First Nation level.

5                   **MR. DARRIN BLAIN:** Okay.

6                   Ms. Clark, good morning.

7                   **MS. SARAH CLARK:** Good morning.

8                   **MR. DARRIN BLAIN:** You mentioned in your  
9 testimony the National Children's Alliance that you ran  
10 across in the United States. Now my questions aren't  
11 meant to sound sassy or plain, it's not my area of law, I  
12 might not know the answers. Does Canada have a national  
13 children's alliance that is formal and established and  
14 would act, for example, in an intervenor, in a Supreme  
15 Court of Canada case, like that sort of large formidable  
16 organization?

17                   **MS. SARAH CLARK:** In Canada, as we speak,  
18 we're still developing. I know that the Department of  
19 Justice Canada has put aside funding towards creating that  
20 national alliance, and that's a goal of the -- I think  
21 it's the Victim Services section of the Department of  
22 Justice Canada.

23                   **MR. DARRIN BLAIN:** Perhaps that could be a  
24 strong recommendation to the Commission.

25                   **MS. SARAH CLARK:** That could be one, yes.

1                   **MR. DARRIN BLAIN:** Thank you. Dr. Bombay,  
2 good morning.

3                   **DR. AMY BOMBAY:** Good morning.

4                   **MR. DARRIN BLAIN:** I am going to assume  
5 that you are intimately familiar with something called the  
6 DSM-IV manual. I would be surprised if you didn't have a  
7 copy in the trunk of your car. It's the psychological  
8 assessment manual. I'm not trying to be sassy; I'm trying  
9 to honour your intelligence about psychology. Are you  
10 familiar with the manual?

11                   **DR. AMY BOMBAY:** Yes.

12                   **MR. DARRIN BLAIN:** Now, there's a Supreme  
13 Court of Canada case that's about a month old called  
14 *Ewert*. Are you familiar with that?

15                   **DR. AMY BOMBAY:** No.

16                   **MR. DARRIN BLAIN:** Okay. It stands for the  
17 proposition that when we do psychological assessment on  
18 people in Corrections Canada that identify as Indigenous,  
19 we ought to not only use things like the DSM-IV, but we  
20 also should be using things like psychological health  
21 indicators that come from their culture. So, the elder  
22 might come by and say, "This is what the person has. It's  
23 not ADD; it's this."

24                   So, will you join the seven judges of the  
25 Supreme Court of Canada and agree that when it comes to

1 assessing children in child welfare, psychologically, that  
2 we ought to be using the DSM-IV, which is the garden-  
3 variety psychological testing tool, and that we ought to  
4 start using other things like elders, and moms, and dads,  
5 and not just relying on the DSM-IV? Will you agree with  
6 that?

7 DR. AMY BOMBAY: Yes.

8 MR. DARRIN BLAIN: And, maybe that could be  
9 a strong recommendation to the Commission as well?

10 DR. AMY BOMBAY: Yes.

11 MR. DARRIN BLAIN: Good morning to you all.

12 MS. MEREDITH PORTER: Thank you. The next  
13 party I would like to invite to the podium is from the  
14 Regina Treaty Status Indian Inc. Ms. Sarah [sic] Beaudin  
15 will have thirteen and a half minutes for questions.

16 **--- CROSS-EXAMINATION BY MS. ERICA BEAUDIN:**

17 MS. ERICA BEAUDIN: Good morning.

18 Meegwetch to the elders for the prayers, songs and tending  
19 of the sacred fires this morning and for the week.

20 (Indigenous word) to the families and survivors of missing  
21 and murdered women and girls, two-spirited.

22 As parties with standing, we carry a heavy  
23 responsibility to bring forth questions that may lead to  
24 recommendations that we hope have the best chance that no  
25 other families will have to suffer what you have endured.

1 I acknowledge this Treaty 1 territory and  
2 these lands being the homelands of the Métis people. I  
3 bring greetings from Treaty 4, and promise to walk softly  
4 on your lands until I return home.

5 My name is Erica Beaudin, and I hold the  
6 position of Executive Director of the Regina Treaty Status  
7 Indian Services Inc. I also take this opportunity to  
8 acknowledge Treaty 4 elder, Lorna Standingready, who I'm  
9 not sure if she's here – she may be in the elders room –  
10 who is from the White Bear First Nations, but who works  
11 with different agencies in the City of Regina. She is  
12 attending the hearings this week here in Winnipeg.

13 Meegwetch, Ms. Morgan, for your testimony  
14 yesterday. I'm inspired by your love of children and  
15 their rightful place in the bosoms of our families and  
16 communities. My first questions are for you. May I call  
17 you Cora?

18 **MS. CORA MORGAN:** Yes.

19 **MS. ERICA BEAUDIN:** Yesterday, you  
20 discussed the concept of family support centres. Are  
21 there currently any in existence with the concept of how  
22 you believe would be considered success?

23 **MS. CORA MORGAN:** Not at this time, aside  
24 from the work that we do at the First Nations Family  
25 Advocate Office.

1                   **MS. ERICA BEAUDIN:** What would a family  
2 support centre in an urban setting such as Winnipeg, or  
3 the city I work in, Regina, look like? And, how would  
4 these support centres be connected back to our nations?

5                   **MS. CORA MORGAN:** Well, one of the things  
6 that we're working on doing at our First Nations family  
7 advocate office is developing workshops and the curriculum  
8 with the hopes that we can incubate different programs in  
9 our office and be able to make curriculum that could be  
10 disseminated to our First Nation communities.

11                   We also have a First Nations women's  
12 council that is made up of First Nations leadership in  
13 Manitoba who support our office. And, you know, we're  
14 looking to expand those services so that we have the  
15 resources to broaden the support that's offered to our  
16 families.

17                   In addition to that, we have a prenatal  
18 support team. We have a doula that's on staff to provide  
19 support to expecting moms. And, still in our province, we  
20 have a number of women who when they are expecting, they  
21 come to Winnipeg on confinement. And so, a lot of times,  
22 we have women that are coming to Winnipeg to deliver their  
23 babies and wait until it's time, and they're here alone.  
24 So, I think that we want to be able to offer those  
25 supports for women.



1                   And, we offer traditional parenting, Red  
2                   Road to Healing, and a lot of just services that will  
3                   support healthy families. And so, it just needs to be  
4                   expanded and accessible to all of our families in other  
5                   urban cities in Manitoba and our First Nation communities.

6                   **MS. ERICA BEAUDIN:** Okay, thank you. My  
7                   next question, and I'll break it down, actually, has three  
8                   components. In your experience, what role does identity  
9                   or lack of identity play in individuals or families in an  
10                  urban setting moving beyond the apprehension cycle?

11                  **MS. CORA MORGAN:** I think it's -- it's  
12                  critical for all of us to know who we are and where we  
13                  came from. And, you know, we are given rites of passage  
14                  from the minute that we are conceived and in the moment  
15                  that we are born, and, you know, all of the things, the  
16                  nurturing that is to happen for every child. And, you  
17                  know, I spoke yesterday about, you know, when midwives  
18                  delivered babies and they would read the water and reveal  
19                  what the gifts and talents of that child are, the  
20                  responsibility of community to ensure that children have  
21                  those tools. And, I think that, you know, when we look at  
22                  what's happening in our child welfare system, our children  
23                  are being deprived of some of those fundamentals of life,  
24                  and those rites of passage aren't there. And, you know,  
25                  they gravitate to where they find belonging.

1                   And, some of the times, where the belonging  
2                   is, it's very unhealthy, but that is the only door open to  
3                   them. And, I think we need to work at eradicating that in  
4                   ways, and making access to ceremony and learning the  
5                   language and teachings as accessible as we can.

6                   **MS. ERICA BEAUDIN:** Okay, thank you. Do  
7                   you believe there should be mandatory requirements for  
8                   non-Indigenous foster parents to not only be educated  
9                   themselves on Indigenous issues, but also a requirement as  
10                  foster parents that they must engage with the child's home  
11                  nation and kin in order to keep their foster parent  
12                  status?

13                  **MS. CORA MORGAN:** Absolutely. And, I think  
14                  even before that, we also need our elders and grandmothers  
15                  to be defining what "culturally appropriate" is. I think  
16                  that, you know, in our current system now, part of the --  
17                  a gross part of the issue is that you could have a non-  
18                  Indigenous family or a newcomer family fostering our  
19                  children, if they put a dreamcatcher in the child's  
20                  bedroom, under our current definition in the system - and  
21                  I don't say "our" because it's not mine. I'm saying  
22                  Manitoba's system - that it's deemed culturally  
23                  appropriate. And so, we need to have our own definition  
24                  of culturally appropriate, and that it's used across the  
25                  board within these agencies to ensure, and I think those

1 connections have to be brought back. You know, if a child  
2 is placed in a non-Indigenous home that, you know there's  
3 a commitment or declaration that that child is guaranteed  
4 to have, you know, their rites of passage and their  
5 ability to access family. And, I know that there are some  
6 models in this country that exist, but it has to be across  
7 the board for everybody.

8 **MS. ERICA BEAUDIN:** Thank you. My next  
9 question is for Ms. Clark. I had the opportunity to  
10 experience the beautiful north when the National Inquiry  
11 went to Iqaluit a couple of weeks ago. It was eye-opening  
12 to personally witness how difficult it must be to build  
13 professional capacity for different positions within the  
14 city, let alone rural areas.

15 When you discuss the child and youth  
16 support centres, you shared the concept of the complex  
17 case management that occurs. Best practises state that  
18 the greater chances of success would have people from that  
19 ethnic group work with the victims. Currently, it seems  
20 the professional roles are filled with non-Indigenous  
21 people other than specific positions. Yesterday, my  
22 colleague, Ms. Zarpa, asked about the importance of Inuit  
23 people filling these positions.

24 A little bit differently than that, do you  
25 believe if there were grants and scholarships that were

1 given to students, who could prove tangible ties to  
2 communities and committed to practising in these  
3 communities after convocation, would there be a greater  
4 chance of building lasting capacity in communities?

5 **MS. SARAH CLARK:** Just so I understand what  
6 you are saying, are you saying -- are you talking about  
7 programs within Nunavut that have been developed to ---

8 **MS. ERICA BEAUDIN:** I am talking post-  
9 secondary.

10 **MS. SARAH CLARK:** Yes. So, post-secondary  
11 programs that -- giving incentives for students to stay in  
12 Nunavut after graduation or also outside of the territory?

13 **MS. ERICA BEAUDIN:** It does not matter.  
14 Just from your experience.

15 **MS. SARAH CLARK:** I can say from my  
16 experience, we have been hoping to find someone from the -  
17 - there is a social work program from the Nunavut Arctic  
18 College and we would like to have a graduate from that  
19 program. And so, in that way, yes, it would be very  
20 useful to have that be strengthened in Nunavut. Does that  
21 answer your question?

22 **MS. ERICA BEAUDIN:** Sure. Nakurmiik. My  
23 next questions are for Dr. Bombay. I am very interested  
24 with the data and analysis you provided yesterday. It has  
25 definitely confirmed for many of us what we have lived

1 through and have tried to change for our children and  
2 grandchildren. Have you used data other than the Regional  
3 Health Survey?

4 **DR. AMY BOMBAY:** Yes. A lot of our work is  
5 not using the Regional Health Survey. There is a lot of  
6 benefits to using the Regional Health Survey, which is  
7 that it is a nationally representative population. The  
8 drawback is that we are limited to the questions that they  
9 ask in a survey, and so -- for example, they do not ask  
10 about childhood experiences very much.

11 And so, in our research, we have collected  
12 other data in partnership with Indigenous organizations to  
13 look at those issues. So, a lot of the research I did  
14 present was not using the Regional Health Survey,  
15 particularly a lot of the qualitative research that I  
16 presented.

17 **MS. ERICA BEAUDIN:** Are you aware of any  
18 types of studies that take into consideration off-reserve  
19 statistics as well?

20 **DR. AMY BOMBAY:** Yes. I presented some  
21 research that we have done with Aboriginal People Survey,  
22 which is a Stats Can survey. Again, there is limitations  
23 because we are limited to what they ask, but we showed  
24 that a large proportion of status First Nations living  
25 off-reserve had been affected by residential schools, a

1 lot of Inuit had been affected. Non-status and Métis to a  
2 lesser extent, but we know that they went to day schools,  
3 and so we are not even looking at that in some of the  
4 research we were looking at. And, there has been other  
5 researchers who have done analyses of that Aboriginal  
6 People Survey showing a lot of the same effects that we do  
7 on-reserve.

8 **MS. ERICA BEAUDIN:** Okay. Do you believe  
9 conducting a specific study on the intergenerational  
10 effects of IRS on urban or off-reserve Indigenous people  
11 is important?

12 **DR. AMY BOMBAY:** Absolutely. And, that is  
13 exactly why we have been doing that for the past 10 years,  
14 and there is a lot of other people doing really great work  
15 as well. And, we want to continue it.

16 And, we are currently planning a study here  
17 in Manitoba, looking -- with the Sixties Scoop legacy of  
18 Canada, looking at not only residential schools, but how  
19 it is linked to the Sixties Scoop and child welfare  
20 experiences after the Sixties Scoop as well.

21 **MS. ERICA BEAUDIN:** Okay. Dr. Bombay, it  
22 was relayed to us that you utilize different types of  
23 methodologies for your studies, including neogenix and  
24 behavioural neuroscience. Have you taken any  
25 consideration on the role of epigenetics?

1                   **DR. AMY BOMBAY:** So, in our research, we  
2 actually have not looked at any biological factors. We  
3 are currently doing a project with the Thunderbird  
4 Partnership Foundation, doing engagement with Indigenous  
5 organizations to find out if that is something people are  
6 interested in doing and to really educate about all the  
7 implications around doing that. But, what I can tell you  
8 is that research in other groups, like the Holocaust,  
9 children of survivors, they have shown epigenetic outcomes  
10 that are associated with negative mental health outcomes  
11 associated with their parents attendance at the Holocaust.

12                   And, just in case people do not know what  
13 epigenetics is, we know now that our genes are not our  
14 destiny and that they are really regulated by our  
15 environment and our experiences. And so, I think, you  
16 know, if we were to look at that, we would find that  
17 colonization has impacted our bodies, including our genes.

18                   **MS. ERICA BEAUDIN:** Do you believe there is  
19 a role for epigenetics in studying intergenerational  
20 trauma?

21                   **DR. AMY BOMBAY:** Yes, I do. But, I think  
22 it is also really important, before we go forward with  
23 that research, to make sure we really look at all the  
24 ethical implications around that and make sure it is going  
25 to be helpful.

1                   **MS. ERICA BEAUDIN:** Okay. Do you believe  
2 more in-depth studies on epigenetics for Indigenous people  
3 may confirm Indigenous oral history of blood memory?

4                   **DR. AMY BOMBAY:** Potentially, yes.

5                   **MS. ERICA BEAUDIN:** Do you think this would  
6 assist Indigenous people -- if this was the case, that  
7 this would assist Indigenous people in bringing forth, in  
8 a more scientific way, our solutions for what we need to  
9 move beyond survival and move to surthrival, I think that  
10 Jeff from one of our last panels had said.

11                   **DR. AMY BOMBAY:** I do. I think there is  
12 potential, but we also need to be careful, because just  
13 like a lot of scientific research can be misunderstood by  
14 non-Indigenous populations who are not looking at the  
15 context. So, I think it is, again, really important we  
16 educate people about those risks, but that if we move  
17 forward in a good way and contextualize the findings if we  
18 were to show that, I think it could be helpful.

19                   **MS. ERICA BEAUDIN:** Meegwetch. And,  
20 meegwetch to Elder Lorna for standing with me today.

21                   **DR. AMY BOMBAY:** Meegwetch.

22                   **UNIDENTIFIED SPEAKER:** Lorna is getting  
23 ready. I was a little late, I am sorry for that. And,  
24 this is our way from the plains Cree, when a young lady  
25 like Erica gets up to speak, then the elders come and give



1 her that strength she needs to continue on her good work  
2 of helping those less fortunate. Meegwetch and have a  
3 good meeting. I shall sit and observe. Hay-hay.

4 **MS. ERICA BEAUDIN:** Meegwetch.

5 **MS. MEREDITH PORTER:** Thank you. The next  
6 party I would like to invite to the podium is from the  
7 Saskatchewan Aboriginal Women's Circle Corp. Ms. Kellie  
8 Wuttunee will have 13.5 minutes for her questions.

9 **--- CROSS-EXAMINATION BY MS. KELLIE WUTTUNEE:**

10 **MS. KELLIE WUTTUNEE:** (Speaking in  
11 Indigenous language). Hello, everyone. My name is Kellie  
12 Wuttunee, I am from Red Pheasant Cree Nation from the  
13 Treaty 6 territory and I am grateful for this opportunity  
14 to speak here.

15 I would like to acknowledge the Anishinaabe  
16 and the Oji-Cree traditional territory of Treaty 1 and  
17 homeland of the Métis we are on today. The elders and the  
18 families of the missing and murdered Indigenous women and  
19 children, thank you for being here. And, to the Inquiry,  
20 thank you for your kind hospitality (indiscernible). I am  
21 legal counsel for the Saskatchewan Aboriginal Women's  
22 Circle Corp. that has standing in this Inquiry.

23 And, Saskatchewan Aboriginal Women's Circle  
24 Corp. is a provincial not-for-profit volunteer  
25 organization which, with affiliates across Saskatchewan,

1 is dedicated to providing ongoing opportunities for  
2 education, advocacy, research, employment and economic  
3 opportunity to First Nation, Métis, Inuit, non-status and  
4 disenfranchised women in Saskatchewan.

5 So, my questions are for Ms. Morgan and I  
6 have one question for Ms. Bombay. So, Ms. Morgan, you  
7 mentioned the cost of child care in Manitoba, that it is  
8 \$46,000.00 per year; correct?

9 **MS. CORA MORGAN:** Yes.

10 **MS. KELLIE WUTTUNEE:** You spoke of this as  
11 commodification of the child welfare system. Can you  
12 explain where you received this data?

13 **MS. CORA MORGAN:** There was a recent  
14 announcement from the province of Manitoba last week that  
15 announced the funding and the breakdown of the costs per  
16 child.

17 **MS. KELLIE WUTTUNEE:** Thank you. What  
18 suggestions do you put forward to resolve the  
19 commodification of Indigenous children in the child  
20 welfare system?

21 **MS. CORA MORGAN:** Well, I think the key  
22 recommendation would be the need for prevention, and you  
23 know, looking at the funding model and making it more  
24 prevention focused.

25 **MS. KELLIE WUTTUNEE:** Thank you.

1 Ms. Morgan, you also mentioned the financial disparities  
2 of Indigenous mothers raising their children, and that  
3 Manitoba has the highest child poverty rate. As a result,  
4 this is setting up Indigenous mothers and families to  
5 fail. What steps are needed to resolve this?

6 **MS. CORA MORGAN:** Well, I think that there  
7 needs to be increased supports to support our mothers.  
8 You know, when we look at children who come into care,  
9 there's, you know, dollar figures attached to each child  
10 in their care, there's the ability for them to engage in  
11 sports and recreation and dance, and all those sorts of  
12 things. But then we look at our First Nations mothers,  
13 who can't barely make ends meet on Social Assistance, and  
14 not be able to afford those additional things that help  
15 our children discover their gifts and talents, I think  
16 that's a huge deficiency.

17 And even just the struggle to survive and  
18 provide the necessities of life, there needs to -- if  
19 there is resources there to pay foster parents, then I  
20 think there should be added resources for parents to be  
21 able to get starts in life and be funded adequately and  
22 have the supports for education, and, you know, revealing  
23 their own gifts and talents. Because a lot of times that  
24 investment has never been made for our mothers now, and  
25 you know, there just has to be recognition for that.

1                   **MS. KELLIE WUTTUNEE:** Thank you.

2                   Ms. Morgan, you mentioned the provincial government has  
3                   spent 5.2 million apprehending Indigenous children and  
4                   putting them into care.

5                   **MS. CORA MORGAN:** I thought it as  
6                   514 million.

7                   **MS. KELLIE WUTTUNEE:** Thank you for  
8                   correcting me. You mentioned that Canada needs to switch  
9                   the focus into building up Indigenous families. What  
10                  recommendations for programming would you make to the  
11                  Commission for this?

12                  **MS. CORA MORGAN:** I think there is a need  
13                  for, you know, those traditional parenting programs.  
14                  There was mention of Head Starts this morning and I think  
15                  that that is a good tool for families as well. I think  
16                  that, you know, there has to be opportunities for early  
17                  learning for our children, and, you know, ways of healing  
18                  for our families.

19                  You know, there is a lot of things that our  
20                  people are walking around with, posttraumatic stress  
21                  disorder, and you know, getting on with life and caring  
22                  for their kids. But, you know, they've set aside that  
23                  trauma and tragedy, and at some point, I think that there  
24                  needs to be an opportunity for people to be able to  
25                  address that in a healthy way get the adequate supports to

1 be able to do that.

2 **MS. KELLIE WUTTUNEE:** Thank you. Those are  
3 all my questions for you, Ms. Morgan. Thank you.

4 **MS. CORA MORGAN:** Thank you.

5 **MS. KELLIE WUTTUNEE:** I have one last  
6 question for Ms. Bombay. Ms. Bombay, what interventions,  
7 services, measures do you recommend that are effective in  
8 counteracting the effects of intergenerational trauma in  
9 the child welfare system?

10 **DR. AMY BOMBAY:** I haven't specifically  
11 looked at that within the child welfare system, but I can  
12 say we know -- I think we need interventions across  
13 development, including prenatally with mothers. We know  
14 that experiences of mothers, you know, during their  
15 prenatal period's really important. I think there's some  
16 programs out there that are teaching about working with  
17 prenatally, going back to traditional teachings around  
18 breastfeeding and those types of things could be really  
19 helpful.

20 We know from the neuroscience literature  
21 that intervening as early as possible is the best case,  
22 but I think considering the unique experiences of  
23 Indigenous peoples across their lifetime, we need  
24 supports, you know, really in childhood, youth, and  
25 throughout.

1                   **MS. KELLIE WUTTUNEE:** Thank you.

2                   **DR. AMY BOMBAY:** Thank you.

3                   **MS. KELLIE WUTTUNEE:** Those are all my  
4 questions.

5                   **MS. MEREDITH PORTER:** Thank you. The next  
6 party I would like to invite to the podium is from  
7 Pauktuutit Inuit Women of Canada et al. I would like to  
8 invite Beth Symes. Okay. My apologies, then.  
9 Ms. Dutton, Ms. Rachel Dutton, will be questioning the  
10 witnesses on behalf of Pauktuutit et al.

11                   **--- CROSS-EXAMINATION BY MS. DUTTON:**

12                   **MS. RACHEL DUTTON:** (Speaking Indigenous  
13 language.) My name is Rachel Dutton. I'm the Executive  
14 Director of Manitoba Inuit Association here in Winnipeg.  
15 I'm here today representing Pauktuutit Inuit Women of  
16 Labrador, Saturviit Ottawa Inuit Children's Centre, and  
17 Manitoba Inuit Association.

18                   I'd like to acknowledge that we're here on  
19 Treaty 1 territory in the homeland of the Métis, and I'd  
20 also like to acknowledge the Inuit that also call Manitoba  
21 home. And I'd like to thank Elder Annie Bowkett for  
22 sharing with us this morning your story.

23                   I want to turn -- well, I'll ask my  
24 questions, which will have a focus on Inuit children, and  
25 mainly about urban Inuit children. and I'll ask my

1 questions of Cora Morgan and Sarah Clark.

2 May I call you Cora, and may I call you  
3 Sarah?

4 **MS. CORA MORGAN:** (Non-verbal response.)

5 **MS. SARAH CLARK:** (Non-verbal response.)

6 **MS. RACHEL DUTTON:** I'll turn first to  
7 children in care in Nunavut. Sarah, are virtually all of  
8 the children in care in Nunavut Inuit?

9 **MS. SARAH CLARK:** I can't speak to that. I  
10 think if you look at the 2014 Auditor General Report, you  
11 would have a better picture of that.

12 **MS. RACHEL DUTTON:** In Nunavut, 89 percent  
13 speak Inuktitut?

14 **MS. SARAH CLARK:** That is correct.

15 **MS. RACHEL DUTTON:** Among Inuit children,  
16 the percentage is perhaps even higher?

17 **MS. SARAH CLARK:** Among Inuit children?

18 **MS. RACHEL DUTTON:** Right.

19 **MS. SARAH CLARK:** Higher than Inuit  
20 parents?

21 **MS. RACHEL DUTTON:** Within Inuit children  
22 the majority perhaps speaking Inuktitut?

23 **MS. SARAH CLARK:** I can't confirm that.

24 **MS. RACHEL DUTTON:** Sarah, for many younger  
25 children, Inuktitut is their only language. Is that fair

1 to say?

2 **MS. SARAH CLARK:** Yeah, that's fair to say.

3 **MS. RACHEL DUTTON:** Children and Family  
4 Services of Nunavut publish annual reports each year, and  
5 for the past 4 years, there's approximately 400 children  
6 each year that receive services through Children and  
7 Family Services. Sarah, roughly half of the children  
8 receiving services do so because their parents enter into  
9 an agreement, and the other half are due to court orders  
10 that children are in need of protection, either  
11 temporarily or via a permanent order. Do you agree?

12 **MS. SARAH CLARK:** I'm not an expert in this  
13 area. Sorry.

14 **MS. RACHEL DUTTON:** Approximately  
15 30 percent of children are placed with extended family.  
16 Sarah, if the extended family cannot care for the child,  
17 does the Child and Family Services then look to foster  
18 families or group homes in Nunavut in your experience?

19 **MS. SARAH CLARK:** That's my understanding,  
20 yes.

21 **MS. RACHEL DUTTON:** Sarah, do you agree  
22 that there is a shortage of Inuit foster parents in  
23 Nunavut?

24 **MS. SARAH CLARK:** Yes.

25 **MS. RACHEL DUTTON:** CFS rules require that



1 a child has his or her own bedroom; correct?

2 **MS. SARAH CLARK:** I am not an expert in  
3 this. Sorry.

4 **MS. RACHEL DUTTON:** Sarah, is there also a  
5 requirement that there be -- that there can be no one  
6 living in the potential foster home who may have a  
7 criminal record?

8 **MS. SARAH CLARK:** That is my understanding.

9 **MS. RACHEL DUTTON:** Given the high rates of  
10 violent crimes in Nunavut, would you agree that this  
11 requirement further decreases the pool of potential Inuit  
12 foster families?

13 **MS. SARAH CLARK:** Yes, and this...

14 **MS. RACHEL DUTTON:** As a result of both  
15 requirements, Sarah, do you agree that placement in a  
16 foster family in Nunavut can or does mean for a number of  
17 children they are placed in non-Inuit families?

18 **MS. SARAH CLARK:** That's my understanding,  
19 yeah.

20 **MS. RACHEL DUTTON:** Like the families of  
21 Qablanat (ph), such as teachers, nurses, RCMP, et cetera,  
22 perhaps?

23 **MS. SARAH CLARK:** Yeah....

24 **MS. RACHEL DUTTON:** Sarah, is there any  
25 requirement that Qablanaq foster families must speak

1 Inuktitut, to your knowledge?

2 MS. SARAH CLARK: No.

3 MS. RACHEL DUTTON: That they must do  
4 activities to maintain the child's Inuit culture?

5 MS. SARAH CLARK: Not to my understanding.

6 MS. RACHEL DUTTON: That they feed the  
7 children traditional Inuit food?

8 MS. SARAH CLARK: Not that I know of, no.

9 MS. RACHEL DUTTON: Sarah, do you agree  
10 that placing an Inuit child in a foster family where there  
11 is no common language, no common culture, and no common  
12 traditions, would be very difficult for that child?

13 MS. SARAH CLARK: Yes. I think that Ms.  
14 Bombay talked to that as well, and that the research that  
15 we've done for our centre points to culture as a  
16 protective factor.

17 MS. RACHEL DUTTON: And that, potentially,  
18 they could have problems in school?

19 MS. SARAH CLARK: Yes.

20 MS. RACHEL DUTTON: Perhaps problems with  
21 their physical health?

22 MS. SARAH CLARK: Yes.

23 MS. RACHEL DUTTON: Perhaps problems with  
24 mental health and may not thrive?

25 MS. SARAH CLARK: Yes.

1                   **MS. RACHEL DUTTON:** Sarah, CFS' annual  
2 report shows that in the last four years, only three to  
3 six percent of children are placed in group homes in  
4 Nunavut. Is that because there is a shortage of group  
5 homes?

6                   **MS. SARAH CLARK:** To my understanding, yes.

7                   **MS. RACHEL DUTTON:** How many are there in  
8 Nunavut, would you know?

9                   **MS. SARAH CLARK:** Of group homes? I think  
10 -- I can only think of two at this time. I'm not sure of  
11 that number.

12                   **MS. RACHEL DUTTON:** Perhaps only two in the  
13 Territory of Nunavut?

14                   **MS. SARAH CLARK:** I'm not sure.

15                   **MS. RACHEL DUTTON:** Okay. How about Inuit  
16 focused -- how Inuit-focused are these group homes?

17                   **MS. SARAH CLARK:** I can only speak to the  
18 one that I worked in, and it does -- it would do its best  
19 to integrate Inuit values into every day activities and  
20 trying to find country food, but it was not a part of the  
21 company's mandate, the company who ran the group home's  
22 mandate, no.

23                   **MS. RACHEL DUTTON:** Okay, thank you. If  
24 there is no extended family willing or able to take an  
25 Inuit child, and if there are no foster homes for that

1 child, and if there is no group home for that Inuit child,  
2 do you agree with me, Sarah, that the Inuit child will be  
3 sent out of Nunavut for care?

4 **MS. SARAH CLARK:** In my experience, they  
5 are either sent outside of territory, or they sort of just  
6 exist as kids in the community. I have a few girls from  
7 the group home that I used to work with who are bouncing  
8 from home to home at this time because they don't want to  
9 go back to their home community. They don't want to be  
10 placed in the houses that they are meant to be placed in  
11 by the family services, and they don't want to leave  
12 Nunavut. So, they are bouncing from couch to couch at  
13 this time.

14 **MS. RACHEL DUTTON:** If a child, an Inuk  
15 child, were to age out of care, say in Winnipeg, would you  
16 agree that they would be at high risk?

17 **MS. SARAH CLARK:** Yes.

18 **MS. RACHEL DUTTON:** If they returned to  
19 Nunavut, would they have lost their language?

20 **MS. SARAH CLARK:** In many cases, I think  
21 they have, yes, depending how long they would stay away.

22 **MS. RACHEL DUTTON:** Lost their culture and  
23 traditions?

24 **MS. SARAH CLARK:** Again, same with the  
25 first answer. Yes.

1                   **MS. RACHEL DUTTON:** I want to turn now to  
2                   Inuit children in urban settings such as Montreal, Ottawa,  
3                   Winnipeg, Edmonton. We're in Winnipeg, so let's start  
4                   here. I've just returned from Ottawa where Inuit leaders  
5                   and representatives of national, regional and community  
6                   agencies met to discuss the current landscape of child  
7                   welfare in the Inuit regions and urban centres in the  
8                   south. They painted a startling picture of Inuit children  
9                   being placed in CFS services outside of Inuit-Nunangat, in  
10                  non-Inuit families with no connection to their language,  
11                  culture, family or community.

12                  Manitoba Inuit Association knows that most  
13                  of the Inuit in Manitoba live in Winnipeg. The 2016  
14                  census revealed that there are approximately 315 Inuit in  
15                  Winnipeg. We heard in Iqaluit from Dr. Janet Smylie that  
16                  the Census Canada may underestimate the actual number of  
17                  Inuit living in Winnipeg, but unlike Ottawa, no research  
18                  studies have been done with respect to Inuit here.

19                  Manitoba Inuit Association knows from our  
20                  discussions with the Department of Family Services,  
21                  Government of Manitoba, that 20 of the children in care  
22                  are Inuit. That is about nine and a half percent.

23                  Cora, would you agree with me that this is  
24                  a disproportionately high number of Inuit children that  
25                  have been taken into care?

1                   **MS. CORA MORGAN:** What is the population of  
2 Inuit people in Winnipeg?

3                   **MS. RACHEL DUTTON:** 315, approximately,  
4 according to the census, the 2016 census.

5                   **MS. CORA MORGAN:** I think, yes, it's  
6 disproportionate. And, even in Manitoba alone, 11,000  
7 children and 90 percent Indigenous, and the Inuit  
8 population would be included in that 90 percent.

9                   **MS. RACHEL DUTTON:** Do you agree, Cora,  
10 that there are few Inuit foster families in Winnipeg?

11                   **MS. CORA MORGAN:** I personally don't know  
12 of any Inuit foster homes in Winnipeg.

13                   **MS. RACHEL DUTTON:** Therefore, Inuit  
14 children who have been apprehended must be placed with  
15 non-Inuit families or in non-Inuit group homes; would you  
16 agree?

17                   **MS. CORA MORGAN:** I agree, and I believe  
18 that, you know, for First Nations children and Inuit  
19 children and even Métis children, we all need to know  
20 where our children are. And, I think that, you know, that  
21 is a stat that we've approached government, and we think  
22 that there should be a breakdown to fully explain where  
23 our children are.

24                   **MS. RACHEL DUTTON:** Inuit families and  
25 their children who are in difficulty tend to be funnelled

1 into Métis Child and Family Services Agency. Would you  
2 agree with me, Cora, that this is not a culturally  
3 responsive system?

4 **MS. CORA MORGAN:** Across the board it's  
5 not. And, even working at the First Nations Family  
6 Advocate Office, we have an enormous amount of First  
7 Nations children under Métis Child and Family Services,  
8 and under the General Authority as well. And so, those  
9 are concerns because they're less culturally appropriate  
10 than -- and so, I guess there really isn't a mechanism for  
11 an Inuit-specific support to children potentially in need  
12 of protection.

13 **MS. RACHEL DUTTON:** The Manitoba government  
14 has worked on Bill 18, which is the *Child and Family*  
15 *Services Amendment Act* called *Taking Care of our Children*,  
16 which was introduced in March of '18, and received royal  
17 assent in June of this year. Customary care is defined as  
18 care provided to children in a way that recognizes and  
19 reflects the unique customs of the children's community,  
20 and preserves a child's cultural identity, respects the  
21 child's heritage, and facilitates cross-generational  
22 connections.

23 Cora, would you agree with me that Bill  
24 18's intentions are good?

25 **MS. CORA MORGAN:** That's a tough question

1 to ask. The position of the Assembly of Manitoba Chiefs  
2 was that customary care doesn't fall under -- or should  
3 not fall under provincial legislation, and that we have  
4 our own means and definition of what customary care is.

5 And then when you look down -- look into  
6 this bill, there's also concerns with -- and for the Inuit  
7 specifically, I'm not exactly sure how those rights would  
8 be recognized under this bill. You know, at the end of  
9 the day, what this bill proposes to do could be done  
10 without the bill. It could -- you know, if you read the  
11 current *Child Welfare Act*, our children should be in  
12 culturally-appropriate homes. So, Inuit children should  
13 be in Inuit foster placements. First Nations children  
14 should be within family units. And, you know, it already  
15 exists. So, the offer of culturally appropriate or  
16 customary care in this bill is, in my view, an imposition  
17 on our cultural practices and they do not necessarily need  
18 to be included in Manitoba legislation. And so, that is a  
19 quick snapshot of what I think.

20 **MS. RACHEL DUTTON:** Thank you. Well, I see  
21 my time is up, so I will -- I have other questions, but I  
22 will leave it there. Thanks very much.

23 **MS. MEREDITH PORTER:** Thank you. The next  
24 party I would like to invite to the podium is from the  
25 Assembly of Manitoba Chiefs, and questioning the witnesses



1 will be Joëlle Pastora Sala. I will invite her to the  
2 podium to pose questions to Ms. Bombay and Ms. Clark.

3 **--- CROSS-EXAMINATION BY MS. JOËLLE PASTORA SALA:**

4 **MS. JOËLLE PASTORA SALA:** Good afternoon,  
5 Commissioners. Good afternoon, family members, survivors  
6 and those watching via livestream today. Good afternoon,  
7 panel -- I guess it is good morning still. Good morning,  
8 panel members. I would like to just also begin by  
9 thanking the FNFAO staff and the family members that are  
10 here today, and survivors, as well as the elders, youth  
11 and support staff who are taking care of us throughout the  
12 process, not just this week, but for all of the hearings.

13 While I would love the opportunity to  
14 continue asking Cora questions, I do not think I am  
15 allowed to do that, so I will focus all of my questions  
16 for you, Dr. Bombay. Is it okay if I call you by your  
17 first name?

18 **DR. AMY BOMBAY:** Of course.

19 **MS. JOËLLE PASTORA SALA:** So, I would like  
20 to begin by exploring a little bit the relationship  
21 between Indian residential schools and violence against  
22 Indigenous women and girls, and I am trying to understand  
23 a little bit more explicitly the link between the two.

24 I would like to provide you with the  
25 opportunity to expand on that direct link, and so between

1 the trauma experienced by Indigenous people in residential  
2 schools and the crisis of violence against Indigenous  
3 women and girls.

4 **DR. AMY BOMBAY:** Sure. So, in my  
5 testimony, I did not really go into it, but I showed --  
6 because we have not looked at that link specifically, but  
7 we know from various literature reviews in any population,  
8 the risk factors for becoming a victim of violence and for  
9 perpetrating violence, and those things include childhood  
10 adversities, you know, all of those risk factors that I  
11 went over that were present within the residential school  
12 context.

13 We know that, again from research and a ton  
14 of research, we know that those types of institutional  
15 environments, there are so many risk factors that  
16 encourage violence. And so, what the residential school  
17 system did in addition to causing trauma, which is  
18 associated with all of these risk factors, in itself  
19 promoted violence and a normalization of violence for  
20 generations of children going back to their families. And  
21 so, that completely altered, you know, social norms and  
22 just community well-being in general, which again all of  
23 these things are risk factors for violence. And so, I  
24 think, you know, the expected outcome is what we are  
25 seeing of colonization.

1                   **MS. Joëlle Pastora Sala:** Would one of the  
2 outcomes of the Indian residential school system be the  
3 loss of value for life?

4                   **DR. AMY BOMBAY:** Yes, I think a lot of  
5 people describe that we -- you know, in our research, we,  
6 kind of, measure depressive symptoms and certainly -- and  
7 suicidal ideation, which is a direct, I think, outcome  
8 demonstrating that.

9                   **MS. JOËLLE PASTORA SALA:** And, you spoke of  
10 lateral violence in the Indian residential school system.  
11 And, earlier, when Cora was speaking about lateral  
12 violence in children in care, I noted that you were  
13 nodding your head. Is this phenomenon something that you  
14 are familiar with?

15                   **DR. AMY BOMBAY:** Yes. As I just mentioned,  
16 there is a ton of research in research literature review  
17 showing that peer bullying, peer violence, including  
18 sexual abuse, are pervasive in those types of  
19 institutions, minus, you know, what was going on in  
20 residential schools in relation to cultural genocide.  
21 And, that just is another factor. So, just in general, in  
22 group homes -- like, not just looking at Indigenous  
23 contexts, we know that that context is itself a risk  
24 factor for violence.

25                   **MS. JOËLLE PASTORA SALA:** And, can you

1 describe the links, if any, that you see between the  
2 legacy of Indian residential schools and the impacts  
3 within the community to those who commit the violence?

4 **DR. AMY BOMBAY:** So, we looked at that, and  
5 that was one of the research questions in that student-to-  
6 student abuse, was the effects on perpetrators. And, in  
7 general -- the, kind of, general consensus was that they  
8 did not learn growing up, they felt abuse was normal, they  
9 did not know how to behave around women a lot of them  
10 described, they did not know what healthy relationships  
11 were, and many of them went home and continued those  
12 behaviours not knowing anything else. And, many ended up  
13 in jail for committing, you know, certain things.

14 **MS. JOËLLE PASTORA SALA:** In your  
15 testimony, as well as the materials you provided, you  
16 referenced the diminished mental health associated with  
17 the ongoing processes of colonization; correct?

18 **DR. AMY BOMBAY:** Yes.

19 **MS. JOËLLE PASTORA SALA:** And, the fourth  
20 removal of Indigenous people through the Indian  
21 residential school process, you also referred to this as  
22 part of the government strategy to abolish cultural  
23 identities?

24 **DR. AMY BOMBAY:** Yes.

25 **MS. JOËLLE PASTORA SALA:** And, parental

1 residential school attendance is, you described, a  
2 predicator of higher rates of suicide, suicidal behaviour  
3 and psychological distress?

4 **DR. AMY BOMBAY:** That's right.

5 **MS. JOËLLE PASTORA SALA:** Are you able to  
6 provide just a very brief explanation of what is meant by  
7 processes associated with colonization?

8 **DR. AMY BOMBAY:** Sure. Our research has  
9 really, like I mentioned, focused on Indian residential  
10 school, which was just one aspect of colonization. And  
11 so, others have looked at other, I guess, processes. You  
12 know, I think in my testimony, I showed how relocation  
13 policies -- other researches showed that -- families with  
14 that history of being relocated was associated with things  
15 in the different generations and those families affected  
16 including negative mental health outcomes. And, I am  
17 sure, if we started looking at some of these other many  
18 different aspects of colonization, we would be able to  
19 show those same links.

20 **MS. JOËLLE PASTORA SALA:** Would the child  
21 welfare system perhaps be one of those processes?

22 **DR. AMY BOMBAY:** Absolutely. And,  
23 currently, the Regional Health Survey does not ask about  
24 that, which is why we are trying to get a study going to  
25 look at exactly that. And, our hypothesis is that we are

1 going to see a lot of the same effects.

2 **MS. JOËLLE PASTORA SALA:** And, would you  
3 agree generally that some of the reasons why that child  
4 welfare system may be associated with colonization in  
5 certain cases is because of the effects of also abolishing  
6 cultural identities?

7 **DR. AMY BOMBAY:** Yes.

8 **MS. JOËLLE PASTORA SALA:** And, forcibly  
9 removing children from their families and communities?

10 **DR. AMY BOMBAY:** Yes.

11 **MS. JOËLLE PASTORA SALA:** Breaking family  
12 and community bonds?

13 **DR. AMY BOMBAY:** Yes.

14 **MS. JOËLLE PASTORA SALA:** And, perpetuating  
15 cultural shaming?

16 **DR. AMY BOMBAY:** Yes.

17 **MS. JOËLLE PASTORA SALA:** So, recognizing  
18 that it is not the focus of your research, would it be  
19 conceivable that involvement in the child welfare system  
20 may also have negative impacts on the psychological health  
21 of First Nation children and parents?

22 **DR. AMY BOMBAY:** Yes.

23 **MS. JOËLLE PASTORA SALA:** And, you were  
24 here for Cora Morgan's testimony yesterday. And, you  
25 heard that in certain cases in Manitoba, there are

1 multiple generations of First Nation children who have  
2 been removed from their homes and communities?

3 **DR. AMY BOMBAY:** Yes.

4 **MS. JOËLLE PASTORA SALA:** Is it conceivable  
5 that parents involved in the CFS system could be a  
6 predictor in high rates also of mental ill health, as well  
7 as suicide, or suicidal behaviour and general  
8 psychological distress?

9 **DR. AMY BOMBAY:** Yeah. So we showed that  
10 the more generations who were affected by residential  
11 schools, the greater the risk. And one thing that we  
12 heard a lot, I know some of our qualitative work, was that  
13 a lot of peoples affected by the child welfare system,  
14 their families were affected by the residential school  
15 system.

16 I think on Reserve it was about 25 percent  
17 of adults who had at least two generations who attended  
18 residential school, and so I think if we continue to look  
19 at those -- in those families were they affected also by  
20 the Sixties Scoop, and then also by subsequent child  
21 welfare, I think we would see those things, and that's  
22 exactly what we're trying to look at now.

23 **MS. JOËLLE PASTORA SALA:** Do you know if  
24 there's any existing research on the link between the  
25 psychological distress and involvement in the CFS system?

1 Just off ---

2 DR. AMY BOMBAY: I believe there is, but I

3 ---

4 MS. JOËLLE PASTORA SALA: Okay.

5 DR. AMY BOMBAY: --- yes.

6 MS. JOËLLE PASTORA SALA: I just thought  
7 I'd take the opportunity in case you knew. Thank you.  
8 And -- so you spoke about the impacts of stress on brain  
9 development of children in the Indian residential school  
10 system? I'll need you to confirm on that.

11 DR. AMY BOMBAY: No. So I showed pictures  
12 of children from Romanian orphanages, but again, it was in  
13 a context of, like an institution where children were  
14 growing up.

15 MS. JOËLLE PASTORA SALA: Okay. And so  
16 within that context, one of the elements that you referred  
17 to was the importance of early intervention in supporting  
18 children; correct?

19 DR. AMY BOMBAY: Yes.

20 MS. JOËLLE PASTORA SALA: Is it conceivable  
21 that children in care would have challenges in obtaining  
22 early intervention, again, recognizing this isn't the  
23 focus of your research?

24 DR. AMY BOMBAY: Absolutely.

25 MS. JOËLLE PASTORA SALA: And ---



1                   **DR. AMY BOMBAY:** I think with people even  
2 outside of care, it's hard to get early intervention.

3                   **MS. JOËLLE PASTORA SALA:** And based on your  
4 expertise, what are some of the potential negative impacts  
5 of these barriers to obtaining early intervention?

6                   **DR. AMY BOMBAY:** Just that we are missing  
7 the opportunity to turn that future around, and you know,  
8 it's possible that we know not all children are going to  
9 have those negative outcomes, but the more support we can  
10 provide earlier, the better the chances.

11                   **MS. JOËLLE PASTORA SALA:** Can I push you a  
12 little further to provide specific examples of the types  
13 of negative impacts there would be?

14                   **DR. AMY BOMBAY:** I think you could -- of  
15 just early?

16                   **MS. JOËLLE PASTORA SALA:** Of the failure to  
17 provide early intervention?

18                   **DR. AMY BOMBAY:** Oh, I think we know that  
19 those adverse early life experiences are linked with all  
20 sorts of different types of mental, physical, and social  
21 negative outcomes. You could -- I could -- depression,  
22 risky behaviours, all sorts of things.

23                   **MS. JOËLLE PASTORA SALA:** Thank you.  
24 Earlier in a question from my colleague from the Regina  
25 Treaty Status, the question referred to blood memory. Do

1       you recall?

2                   **DR. AMY BOMBAY:**   Yes.

3                   **MS. JOËLLE PASTORA SALA:**  Is that a term or  
4       a concept that you're familiar with?

5                   **DR. AMY BOMBAY:**  I have heard it, and heard  
6       Elders speak about it, but I wouldn't feel comfortable  
7       describing it.

8                   **MS. JOËLLE PASTORA SALA:**  If I described it  
9       to you as memory that is passed through in blood or bones,  
10      would that be consistent with your understanding?

11                  **DR. AMY BOMBAY:**   Yes.

12                  **MS. JOËLLE PASTORA SALA:**  Are you -- if you  
13      feel comfortable, are you able to discuss the potential  
14      links, if any, between interference in the relationship  
15      between -- or by the removal of children, either through  
16      the Indian Residential School System, or the child welfare  
17      system and blood memory?

18                  **DR. AMY BOMBAY:**  Not that I'm aware of.  I  
19      think there hasn't been any type of research looking at  
20      that.  The closest thing that I mentioned was in certain  
21      other -- in non-Indigenous populations I think they've  
22      shown how early life -- these same types of early life  
23      experiences are associated with changes -- epigenetic  
24      changes in the DNA.  And so we know that those early life  
25      -- negative early life experiences, and positive early

1 life experiences, can influence the DNA.

2 **MS. JOËLLE PASTORA SALA:** Thank you very  
3 much for your time.

4 **DR. AMY BOMBAY:** Thank you.

5 **MS. JOËLLE PASTORA SALA:** Thank you.

6 **MS. MEREDITH PORTER:** Thank you.

7 Chief Commissioner and Commissioners, it's  
8 now 5 after 12. We are scheduled for a lunchbreak. So  
9 I'm going to seek your direction on adjourning at this  
10 point for lunch, and I would suggest that -- a firm start  
11 at 1 o'clock in light of the fact that Dr. Bombay has to  
12 cease her process of cross-examination about 3:15 this  
13 afternoon. I want to make sure there's enough time for  
14 all the parties, and also for Commissioners' questions.

15 So if I could suggest a start time of  
16 1 o'clock, that ---

17 **CHIEF COMMISSIONER MARION BULLER:** Yes;  
18 1 o'clock please.

19 **MS. MEREDITH PORTER:** Thank you.

20 I also have an announcement for the parties  
21 with standing. The parties are kindly asked to attend the  
22 Assiniboine Ballroom at the beginning of lunch, so at this  
23 time, to draw for the -- Dr. Blackstock's process of  
24 cross-examination tomorrow. So for the parties with  
25 standing, if you could attend the Assiniboine Ballroom

1 right now before grabbing your lunch, that would be  
2 greatly appreciated. Thank you.

3 **MS. SHAUNA FONTAINE:** Before everybody  
4 leaves the room, can I ask that you just remain in your  
5 seats for just a moment, please?

6 In Winnipeg and in Manitoba here, we have  
7 just received some really disheartening news, and I would  
8 ask that Thelma Morrisseau please come on up here, and as  
9 well as Hilda Anderson-Pyrz, who is going to make an  
10 announcement on behalf of family members.

11 **MS. THELMA MORRISSEAU:** Bonjour. Just to  
12 always remind, I guess ourselves about how we must take  
13 care of our self. However you do that, whether it's  
14 through traditional smudging, whether you have rosaries  
15 and you say a prayer, whatever that looks like to you,  
16 that's extremely important. Whether you ensure that you  
17 have your family around you, that you're receiving hugs  
18 and giving hugs. It's extremely important for us to be  
19 mindful to take care of our spirit. Whatever that looks  
20 like to you, it's extremely important that we do that.

21 And while we can do some things with, you  
22 know, smudging and taking the fan around, offering water,  
23 ultimately, it's your spirit, and you're the one that can  
24 do that by talking to your creator, your god, whatever,  
25 however you understand that and however you practice that.

1 So I just gently urge you to be mindful of that.  
2 Meegwetch.

3 **MS. HILDA ANDERSON-PYRZ:** Thank you,  
4 Thelma. My name is Hilda Anderson-Pyrz. I am the missing  
5 and murdered Indigenous women and girls liaison for the  
6 Manitoba Keewatinowi Okimakanak, and I just wanted to  
7 share some very sad news today.

8 The Winnipeg Police found one of our  
9 sisters deceased on September 28<sup>th</sup>, and they just did a  
10 public announcement at 11 o'clock this morning releasing  
11 her name. So I ask that everybody stand and we have a  
12 moment of silence for our sister who has fallen, Mary  
13 Madeline Yellowback.

14 **(MOMENT OF SILENCE)**

15 **MS. HILDA ANDERSON-PYRZ:** Thank you. And I  
16 also wanted to share, you know, that -- ask that you keep  
17 the family in your prayers. And there is going to be a  
18 vigil tonight at the Cascades Recovery Inc. Recycling  
19 Depot, that's where Mary was located, and the address is  
20 100 Omands Creek Boulevard here in Winnipeg. So I ask  
21 that if you can come out that you come out and support the  
22 family because they really need our support as a community  
23 right now. And we're currently having a poster made, so  
24 once it's done we'll bring a few copies here so  
25 individuals can have it as well. Thank you....

1 I just also wanted to just remind everybody  
2 that we do have our health and cultural supports people  
3 available. If you need to go and visit with any of them,  
4 please do. They are identified by wearing a purple  
5 lanyard. So, please, if you feel you need to go and talk  
6 to with someone, please do. Thank you. Meegwetch.

7 --- Upon recessing at 12:11 p.m.

8 --- Upon resuming at 1:07 p.m.

9 **--- PANEL I, Previously affirmed**

10 **MS. MEREDITH PORTER:** If I could ask  
11 everybody to take their seats, please? We'll get started.

12 Okay, thank you. The next party that I  
13 would like to invite to the podium to pose questions to  
14 the witnesses is from the Vancouver Sex Workers Rights  
15 Collective. Ms. Carly Teillet will have thirteen and a  
16 half minutes for her questions.

17 **--- CROSS-EXAMINATION BY MS. CARLY TEILLET:**

18 **MS. CARLY TEILLET:** Tansi, bonjour and good  
19 afternoon. I'd like to begin by again acknowledging the  
20 families, the survivors, the elders, the medicines and the  
21 sacred items that are here with us today, and to note that  
22 it's an honour to be able to come home and work in the Red  
23 River community, and to be welcomed here by my family of  
24 the Métis nation, and also the work within the territory  
25 of Treaty 1 peoples.

1                   My clients are Indigenous women and LGBTQ  
2 two-spirit individuals who engage in sex work and trade in  
3 Vancouver's Downtown Eastside. And, my questions this  
4 morning are for Dr. Bombay.

5                   I want to ask you a little bit about  
6 information, about data. So, when you discussed the link  
7 between having one or more parent attend residential  
8 school and suicidal ideas or attempts, we looked in your  
9 PowerPoint at a graph, and the graph broke down a gender  
10 breakdown, male and female.

11                   There was no space on the graph for gender-  
12 fluid individuals or two-spirited individuals whose  
13 parents  
14 went to residential school who may have attempted or  
15 thought about suicide due to the imposition of colonial  
16 gender structures.

17                   You discussed a little bit about how you're  
18 limited at times in your analysis by the information that  
19 is collected, and one of the stories I've heard from my  
20 clients is that as two-spirit or gender-fluid individuals,  
21 they often feel erased. They're not seen. That there's  
22 often not a box for them to identify on most forms.  
23 They're often not asked about who they are. And, that  
24 these -- the results of that is that these forms or these  
25 data sets can perpetuate the colonial idea that they don't

1 exist.

2 And so, from your position as someone who  
3 intimately works with some of these data sets, can you  
4 comment briefly on the need to decolonize and Indigenize  
5 the data we use in our research so that we can actually  
6 see all of our people?

7 **DR. AMY BOMBAY:** Yes. I guess in my  
8 testimony, I spoke a lot about -- I represented findings  
9 from analyses using the First Nations Regional Health  
10 Survey, and I think they are one really great example of  
11 what you're talking about. It's a First Nations-run  
12 survey by a First Nations organization. And, at the  
13 national level, they work with each region to -- so that  
14 they can collect their own data in their own communities.  
15 They hire people from the communities to collect them.

16 At the national level, they have a regional  
17 advisory committee made up of First Nations people who  
18 provide input into the content of the survey, and also, at  
19 the regional levels, they can also modify that to suit  
20 their specific regional needs. So, I think it provides a  
21 really good example of how that's done. And, a problem is  
22 that's only done in that way for First Nations living on  
23 reserve.

24 Some of the data I spoke about for First  
25 Nations, Métis and Inuit living off reserve was collected



1 from the Aboriginal Peoples Survey, which is a Stats  
2 Canada collected survey. And, to be honest, I don't  
3 really know how they come up with their questions and what  
4 types of processes they have for Indigenous input.

5 What I can say related to your comments  
6 about the LGBTQ community, I think that's a really  
7 important one, and it should be captured on every single  
8 survey in clinical contexts. And, the good news is that  
9 the regional -- the most recent Regional Health Survey did  
10 include those questions. The data I collect -- that I  
11 showed was from the 2008/10. And so, we'll be going into  
12 the data centre soon to look at some of that more research  
13 data that was just released, and we'll be looking at those  
14 questions for sure.

15 **MS. CARLY TEILLET:** Thank you. I'd like to  
16 move into asking about kind of the interplay between the  
17 cumulative intergenerational impacts of residential school  
18 and the idea of change or the idea of choice, and how  
19 those interact with each other.

20 So, yesterday, you showed brain scans that  
21 compared an individual who was placed in an orphanage and  
22 experienced childhood trauma, and one who has not, and you  
23 noticed the differences between the scans. And then in  
24 one of the exhibits that was entered yesterday, Exhibit  
25 21, the intergenerational effects of Indian residential

1 schools, it talks a little bit about what my colleague  
2 raised, some of the epigenetic changes; that's on page  
3 332. On page 326, it talks about biological stress  
4 systems. So, adrenaline glands and whatnot. So,  
5 biological responses to stress.

6 Now, you discussed how having a family  
7 member attend residential school can act as a predictor  
8 for future generations and how they might later behave.  
9 And, there might be a trajectory that some people follow  
10 or at risk of following. So, I am interested in how those  
11 statistical models that plot out a trajectory of some of  
12 our people interacts with an individual's choice to  
13 disrupt that trajectory or interrupt it.

14 So, some of my clients have survived  
15 violence from family members, from community members, and  
16 they have shared that the experience in residential school  
17 might be part of the explanation as to why someone did the  
18 things they did to them, but it is not an excuse. It is a  
19 partial explanation, but it is not an excuse.

20 And so, you mentioned the need to be  
21 careful about using the data and the work that is done by  
22 our communities. And so, I want to ask you, what would  
23 you say to someone who might use your research to say that  
24 they did not have a choice but to reproduce the harm that  
25 they experienced by hurting Indigenous women and girls?

1                   **DR. AMY BOMBAY:** Yes. I think that is a  
2 really good question, you raise a really important point  
3 that is important to understand for people who are not  
4 familiar with the statistics and all of the research.

5                   When I am talking about those things -- I  
6 think you specifically said "risk" and that is key. We  
7 are talking about probabilities, not a specific cause and  
8 effect. If you went to residential school, it does not  
9 mean all of these bad things. And, I spoke about that in  
10 my testimony and how, you know, while there was an  
11 increased risk, there were a lot of stories of resilience  
12 and people who held on to their cultures, and traditions  
13 and identities, and who were able to avoid those negative  
14 outcomes.

15                   And so, absolutely, it is important to  
16 understand that that increases the probability, or  
17 likelihood or risk of these outcomes, but certainly there  
18 is -- choice is one of those variables that is involved in  
19 determining whether or not those outcomes will happen or  
20 not.

21                   **MS. CARLY TEILLET:** Building off of what  
22 you just mentioned, you had this really wonderful quote  
23 about an individual who learned about their family history  
24 of residential school and it explained some of what was  
25 happening in their life. And then I think the last line

1 was, I am going to break the cycle or I want to break the  
2 cycle.

3 And so, it seems like education and  
4 knowledge about our past is maybe one of the ways that we  
5 can interrupt this risk or this trajectory. Are there any  
6 studies from other places that you can think of, where  
7 individuals have been successful in interrupting these  
8 trajectories?

9 **DR. AMY BOMBAY:** Well, I think a lot of the  
10 literature on intergenerational transmission of trauma and  
11 resilience really came from the Holocaust literature.  
12 And, I think there is, you know -- I do not know any  
13 research specifically looking at that, but I think we do  
14 not -- you know, there are some things about the way they  
15 have dealt with, I don't know, remembering things that can  
16 be protective, and that has been shown. They showed -- in  
17 the context of the Holocaust.

18 Like the residential school system, there  
19 was this conspiracy of silence. And so, identifying that  
20 and then over -- and then addressing it, I think, is  
21 something that happened and something that we are seeing  
22 now within Indigenous communities now, and that is part of  
23 the healing process.

24 **MS. CARLY TEILLET:** And so, at the end of  
25 that article I was referring to, I think it was Exhibit

1 21, you cite Chandler and Proulx, and they suggest that  
2 communities that are less affected by residential schools  
3 or other traumas have a greater capacity to achieve self-  
4 government and control over child welfare, health,  
5 education and policing services. And then crucially here,  
6 I think, they make the link that this cultural continuity  
7 has been linked to suicide rates in First Nations  
8 communities.

9 So, are -- some of these factors, child  
10 welfare, health, education, policing services, self-  
11 government seems to have a direct link with suicide rate.  
12 So, do you think these might be some of the interrupting  
13 things that we could do for those trajectories?

14 **DR. AMY BOMBAY:** Absolutely. I think that  
15 is a great study to look at to provide evidence. That it  
16 is a lot of times these collective factors at the  
17 community level, which research often does not focus on,  
18 that are I think for Indigenous communities particularly  
19 important. And, that research specifically points to the  
20 importance of self-determination.

21 **MS. CARLY TEILLET:** Wonderful. Those are  
22 my questions. Thank you, merci, meegwetch.

23 **MS. MEREDITH PORTER:** Thank you. The next  
24 party I would like to invite to the podium is from the  
25 Missing and Murdered Indigenous Women and Girls Manitoba

1 Coalition. Ms. Catherine Dunn will have 13.5 minutes for  
2 her questions.

3 **--- CROSS-EXAMINATION BY MS. CATHERINE DUNN:**

4 **MS. CATHERINE DUNN:** Thank you. Good  
5 afternoon. On behalf of my client, the Manitoba  
6 Coalition, I would like to take this opportunity to thank  
7 the room for being on Treaty 1 land and to be in the  
8 homeland of the Métis. The Manitoba Coalition is made up  
9 of families, made up of survivors, made up of LBG2S  
10 individuals, political organizations and community based  
11 services who have coalesced together to make a difference.

12 My questions will start, please, with Ms.  
13 Morgan. Ms. Morgan, you have been the First Nations  
14 Children's *[sic]* Advocate since, is it, 2015?

15 **MS. CORA MORGAN:** First Nations Family  
16 Advocate for -- June 1<sup>st</sup>, 2015, yes.

17 **MS. CATHERINE DUNN:** Right. And, the  
18 reason your position came into being was because  
19 Indigenous people in Manitoba recognized that the child  
20 welfare system, as it currently exists, is harmful to your  
21 people?

22 **MS. CORA MORGAN:** That is correct.

23 **MS. CATHERINE DUNN:** And, your role, since  
24 2016 *[sic]*, has been to protect the Indigenous women,  
25 girls, men of Manitoba from child welfare system that

1 exists in Manitoba?

2 **MS. CORA MORGAN:** Since June 1<sup>st</sup>, 2015,  
3 that is our role for those who come forward and request  
4 support, yes.

5 **MS. CATHERINE DUNN:** And, since you started  
6 in that role, you have spoken to 900 families, either  
7 yourself directly or your colleagues in the room; is that  
8 correct?

9 **MS. CORA MORGAN:** That is correct.

10 **MS. CATHERINE DUNN:** And, of those 900  
11 families, is there a single family that ever said to you,  
12 I do not want my children home?

13 **MS. CORA MORGAN:** Never.

14 **MS. CATHERINE DUNN:** All right. Is there a  
15 single person in those 900 families who said, I will do  
16 anything to get my children home?

17 **MS. CORA MORGAN:** Mostly all, yes.

18 **MS. CATHERINE DUNN:** And, is it not correct  
19 that the reason these 900 people and families came to you  
20 is because they are not heard, in their view, by the child  
21 welfare system that exists in Manitoba?

22 **MS. CORA MORGAN:** That is correct.

23 **MS. CATHERINE DUNN:** And, in fact, what  
24 happened that helped you bring your organization into  
25 being was that the Indigenous people of this province went

1 to their political leaders, to their chiefs, and said, we  
2 need help. We cannot withstand the child protection  
3 system in Manitoba anymore, we need political will to stop  
4 what is happening to our people.

5 **MS. CORA MORGAN:** That is correct.

6 **MS. CATHERINE DUNN:** And, what happened is  
7 that, in 2018, we still have a child protection system  
8 which in essence, in your view and in your now experience  
9 with 900 families plus, is harmful to the Indigenous  
10 people of this province?

11 **MS. CORA MORGAN:** Yes.

12 **MS. CATHERINE DUNN:** And, when you say you  
13 are not a part of the system, in your view, that is a good  
14 thing because the system that exists today, whether  
15 maliciously or not, is there to entrap the children of  
16 Indigenous parents?

17 **MS. CORA MORGAN:** Yes, that is correct.

18 **MS. CATHERINE DUNN:** And, I am sorry, these  
19 questions are hard.

20 **MS. CORA MORGAN:** No, that is fine. I just  
21 find that, in the questions that you are asking, and I am  
22 recalling all of the things that we have seen -- that is  
23 okay. Keep going.

24 **MS. CATHERINE DUNN:** So, you and I have met  
25 before and dealt with Indigenous families in Winnipeg



1 dealing with the child and welfare system; is that right?

2 **MS. CORA MORGAN:** Yes.

3 **MS. CATHERINE DUNN:** So, you would not be  
4 surprised if I were to share with you today that... this  
5 morning. Before I came to this hearing, I sat with a  
6 grandmother whose own daughter had been murdered, and who  
7 was trying to get a custody order for her four young  
8 grandchildren who were living with her, and wasn't able to  
9 do so because, at the age of 60, she didn't have a recent  
10 criminal record check. Does that surprise you?

11 **MS. CORA MORGAN:** Not at all.

12 **MS. CATHERINE DUNN:** And, when you discuss  
13 the barriers to families in the current systems, that is  
14 one such barrier: forms. You need a form and you need it  
15 now, and your children will sit in care until you have  
16 that form.

17 **MS. CORA MORGAN:** That's right.

18 **MS. CATHERINE DUNN:** And, those 900  
19 families that you spoke with told you that wasn't fair.

20 **MS. CORA MORGAN:** That's right.

21 **MS. CATHERINE DUNN:** Those 900 families  
22 said, "We don't need a form to take our children back into  
23 our culture. We know what to do."

24 **MS. CORA MORGAN:** That's right.

25 **MS. CATHERINE DUNN:** Is that right?

1                   **MS. CORA MORGAN:** Mm-hmm.

2                   **MS. CATHERINE DUNN:** And when you did  
3 reports in your position as the First Nations Family  
4 Advocate, you, too, have evidence to say that Indigenous  
5 people know what to do with their own culture and how to  
6 deal with the problems of colonialization; isn't that  
7 right?

8                   **MS. CORA MORGAN:** Yes.

9                   **MS. CATHERINE DUNN:** They have the ability,  
10 the willingness, to change what is happening in this  
11 province as we speak.

12                   **MS. CORA MORGAN:** Yes, and for quite some  
13 time. I work for the Assembly of Manitoba Chiefs, and for  
14 30 years, there are several resolutions that our  
15 leadership have tried to move in that direction, and  
16 there's moments where they came close. And, all along the  
17 way, there has been consistent promises of reform of the  
18 system, and the promises of restored jurisdiction, and  
19 they have never amounted to that. We have only gotten  
20 reforms that, in my view, prove to be more detrimental  
21 than helpful to our people.

22                   **MS. CATHERINE DUNN:** And, you have joined a  
23 never-ending line of reports that say the child welfare  
24 system is harmful to your people.

25                   **MS. CORA MORGAN:** That's right. There's,

1       you know, a Kimelman Report, the Aboriginal Justice  
2       Inquiry Child Welfare Initiative. There's the Phoenix  
3       Sinclair Inquiry Report. There's the Bringing Our  
4       Children Home Report, Keewaywin Report. There's a number  
5       of reports that indicate that the way the system is  
6       working is harmful.

7                   **MS. CATHERINE DUNN:** And, even today, those  
8       recommendations back to the Kimelman Report, which was in  
9       the '80s, those recommendations are the same; let our  
10      people look after our people.

11                   **MS. CORA MORGAN:** That's correct.

12                   **MS. CATHERINE DUNN:** And, yet, it doesn't  
13      happen.

14                   **MS. CORA MORGAN:** That's right.

15                   **MS. CATHERINE DUNN:** You have made it clear  
16      that you stay away from the traditional child welfare  
17      system; is that right?

18                   **MS. CORA MORGAN:** To the most that we can.  
19      Some of our work requires us to -- you know, the way that  
20      the system has contorted, there's practices that aren't --  
21      that are being exercised that aren't actually in the Act,  
22      but they've just become common practice. And, when our  
23      families don't know their rights, then it goes  
24      unchallenged. And, sometimes in our work, we will -- when  
25      we're helping families, we'll refer to the

1           responsibilities that some agencies have to our families  
2           and they aren't exercised.

3                   **MS. CATHERINE DUNN:** And, the reason that  
4           the child welfare system exists is because of legislation  
5           ironically named *Child and Family Services Act*; is that  
6           right?

7                   **MS. CORA MORGAN:** That's correct.

8                   **MS. CATHERINE DUNN:** And, in your  
9           experience in dealing with these 900 families, there is no  
10          family in child welfare?

11                   **MS. CORA MORGAN:** No.

12                   **MS. CATHERINE DUNN:** And, the children in  
13          Child and Family Services are not able to protect  
14          themselves from the system in which they are surrounded;  
15          is that fair?

16                   **MS. CORA MORGAN:** That is fair. And, we've  
17          actually tried to exercise some measures where, you know,  
18          according to the *Act*, our children between 12 and 18  
19          should be able to access their own legal representation,  
20          and there's been instances where we've tried to challenge  
21          that by encouraging them to get legal representation, and  
22          they've been denied.

23                   **MS. CATHERINE DUNN:** And, for non-  
24          Indigenous foster parents, you can't go to a pow wow or,  
25          as you said, hang something in the window and understand

1 Indigenous culture, which is thousands of years old; isn't  
2 that right?

3 **MS. CORA MORGAN:** That's right. And ---

4 **MS. CATHERINE DUNN:** And, culture is not  
5 like a Tic-Tac. You don't take one and then you're good.

6 **MS. CORA MORGAN:** No. And, you know, we --  
7 the Assembly of Manitoba Chiefs currently has standing in  
8 a case where a mother has five children, and they are  
9 separated, and two children are in a non-Indigenous home,  
10 the other two children are in a shelter, and then the baby  
11 is in another non-Indigenous home. And, in the courtroom,  
12 the extent of -- our mother was told that when she tried  
13 to fight the permanency, because the agency was pursuing a  
14 permanent order on her children, she was trying to fight  
15 it in court and she lost. But, she was told that because  
16 she was living off reserve when the children came into  
17 care, then her children weren't eligible for cultural  
18 consideration in where they were placed. And, when they  
19 challenged the lack of cultural appropriate supports that  
20 the children were receiving, out of all five children, two  
21 of them had been driven past a pow wow.

22 And, in the court that day, and this is  
23 just within the last couple of months, the lawyer  
24 attributed our culture is how many pow wows are attended.  
25 And then he also made a comment that the one-year-old baby

1 doesn't need any cultural consideration because the baby  
2 is only one, and if you took the baby to a pow wow, they'd  
3 never remember. And, that's within the last three months  
4 in our court.

5 **MS. CATHERINE DUNN:** And, that attitude is  
6 very, very harmful to your people.

7 **MS. CORA MORGAN:** Yes.

8 **MS. CATHERINE DUNN:** Because babies,  
9 newborn babies, are coming into the child welfare system  
10 at the rate of 400 a year.

11 **MS. CORA MORGAN:** Yes.

12 **MS. CATHERINE DUNN:** Isn't that right?

13 **MS. CORA MORGAN:** Yes.

14 **MS. CATHERINE DUNN:** And, we've had a news  
15 release from the provincial government alleging that there  
16 is a decrease of children in care and this newborn policy  
17 is out the window. We haven't seen the report. We  
18 haven't seen the numbers, but, in your experience, newborn  
19 apprehensions in Manitoba, in the City of Winnipeg, are a  
20 regular occurrence?

21 **MS. CORA MORGAN:** Yes.

22 **MS. CATHERINE DUNN:** And, it is a regular  
23 occurrence in the child welfare system in Winnipeg that a  
24 child can experience 30, 40, 50 placements during his or  
25 her time in care?

1                   **MS. CORA MORGAN:** There is a report from  
2 the Manitoba Children's Advocate, and there was one child  
3 who spent -- was in over 270 homes in one year. And, you  
4 know, on average, I used to work in the area of Justice  
5 and write Gladue reports, and, you know, a lot of people  
6 couldn't even count how many homes they had been in, or  
7 hotel rooms. So, it's high, on average, particularly for  
8 children who are older.

9                   **MS. CATHERINE DUNN:** Thank you. I am out  
10 of time.

11                   **MS. MEREDITH PORTER:** Thank you. The next  
12 party I would like to invite to the podium is from the  
13 Independent First Nations. Ms. Josephine de Whytell will  
14 have thirteen and a half minutes for questioning.

15                   **--- CROSS-EXAMINATION BY MS. JOSEPHINE DE WHYTELL:**

16                   **MS. JOSEPHINE DE WHYTELL:** Thank you very  
17 much. Good afternoon, Commissioners. Good afternoon,  
18 witnesses and elders. Thank you very much for your  
19 evidence. My first set of questions are for Cora Morgan.

20                   Would you agree that grandparents have a  
21 special role in the lives of their children and that it is  
22 often considered a great privilege to be raised by a  
23 grandparent?

24                   **MS. CORA MORGAN:** Absolutely.

25                   **MS. JOSEPHINE DE WHYTELL:** Are you aware

1 from your experience that child welfare agencies routinely  
2 reject grandparents as appropriate caregivers due to their  
3 age? And, would you agree that this is discriminatory?

4 **MS. CORA MORGAN:** Yes.

5 **MS. JOSEPHINE DE WHYTELL:** Provincial child  
6 welfare laws serve to protect all residents of Manitoba.  
7 Do I understand from your evidence that they protect  
8 Indigenous families less than non-Indigenous families?

9 **MS. CORA MORGAN:** Well, we have 90 percent  
10 of the children in the child welfare system being  
11 Indigenous children. I think it is disproportionate and  
12 unfair that we have such a high representation overall.  
13 So, I do not believe that they are doing a better job at  
14 protecting us, I think that they are disproportionately  
15 targeting our population of people. And, I cannot  
16 effectively make a comparison to how our children are  
17 treated as opposed to the non-Indigenous.

18 **MS. JOSEPHINE DE WHYTELL:** Are you able to  
19 comment on the demographics, I am wondering, of the  
20 Manitoba legislature, and specifically whether Indigenous  
21 people are well represented among the drafting of the  
22 legislation?

23 **MS. CORA MORGAN:** No. Our people are not a  
24 part of drafting the legislation. We have had these, and  
25 this is in my opinion, you know, some token gestures



1 allowing for the inclusion of our perspective, but I do  
2 not think effectively that the Manitoba government has  
3 effectively responded to, you know, the Assembly of  
4 Manitoba Chiefs' resolutions that have passed in the three  
5 years that I have worked in this role.

6 Our Manitoba leadership have put forward  
7 requests for consideration and they have never occurred.  
8 Our Manitoba government recently had a legislative review  
9 panel that included some individual people that were  
10 Indigenous, however it is a report, there is nothing that  
11 compels change in the way that the provincial government  
12 acts. And, you know, there is a lot of things that should  
13 have compelled our government to do things differently for  
14 the last 30 years.

15 **MS. JOSEPHINE DE WHYTELL:** So, do you agree  
16 that child welfare policies that are applied to Indigenous  
17 people without their free, prior and informed consent is  
18 not culturally appropriate?

19 **MS. CORA MORGAN:** Yes.

20 **MS. JOSEPHINE DE WHYTELL:** Would you  
21 characterize it as interference?

22 **MS. CORA MORGAN:** Yes.

23 **MS. JOSEPHINE DE WHYTELL:** Do you agree  
24 that effective partnerships with the Crown have to be  
25 informed by inherent jurisdiction?

1                   **MS. CORA MORGAN:** Yes.

2                   **MS. JOSEPHINE DE WHYTELL:** Economic  
3 advantage for non-Indigenous people -- sorry, let me start  
4 that again. You talked about the commodification of  
5 children in your testimony yesterday and how the higher  
6 the negative need, the greater the economic benefit to  
7 foster parents and how that also applied to agency  
8 funding; is that correct?

9                   **MS. CORA MORGAN:** Yes.

10                  **MS. JOSEPHINE DE WHYTELL:** And, would you  
11 say that measuring outputs and responses to situations is  
12 the most common way that child welfare agencies track  
13 their expenditures and justify their budgets?

14                  **MS. CORA MORGAN:** Measuring outcomes?

15                  **MS. JOSEPHINE DE WHYTELL:** Measuring  
16 outputs. Like, what they do to respond to things.

17                  **MS. CORA MORGAN:** I do not think that I can  
18 answer that.

19                  **MS. JOSEPHINE DE WHYTELL:** Would you agree  
20 that a qualitative assessment process for measuring the  
21 outcomes rather than the output would be preferable?

22                  **MS. CORA MORGAN:** Absolutely. And, that  
23 would have to be an independent analysis or evaluation.

24                  **MS. JOSEPHINE DE WHYTELL:** Yes.

25                  **MS. CORA MORGAN:** Not our own government

1 studying themselves to measure output -- or outcome,  
2 sorry.

3 **MS. JOSEPHINE DE WHYTELL:** So, would you  
4 also suggest that maybe that the lack of qualitative  
5 assessment that is going on right now is leading to  
6 ongoing failure to resolve the problems?

7 **MS. CORA MORGAN:** I think so. But, I think  
8 that there is also a hesitation of doing that, because I  
9 do not think anyone wants to take responsibility for what  
10 has been happening to our families.

11 **MS. JOSEPHINE DE WHYTELL:** And, you have  
12 touched on my next question, which is, there are countless  
13 recommendations and they are ignored, and I would even  
14 suggest maybe there is a systemic unwillingness to fix the  
15 problem.

16 So, when there is so much money to be made  
17 from doing the wrong thing over and over again, and so  
18 many jobs in these industries, would you agree that to  
19 resolve systemic unwillingness, we need to attack the root  
20 of ideological supremacy in Canada?

21 **MS. CORA MORGAN:** Yes.

22 **MS. JOSEPHINE DE WHYTELL:** Do you agree  
23 that awareness and education continues to be lacking  
24 across Canada?

25 **MS. CORA MORGAN:** Absolutely.

1                   **MS. JOSEPHINE DE WHYTELL:** Would you  
2 recommend that meaningful Indigenous content be  
3 implemented in all schools and universities?

4                   **MS. CORA MORGAN:** Yes.

5                   **MS. JOSEPHINE DE WHYTELL:** Do you think it  
6 would be important, and would you recommend, that  
7 increasing awareness of meaningful Indigenous content is  
8 something that would be required for all agencies in  
9 Ontario?

10                  **MS. CORA MORGAN:** I think that -- across  
11 the country?

12                  **MS. JOSEPHINE DE WHYTELL:** Yes.

13                  **MS. CORA MORGAN:** Absolutely. But, that  
14 has to be information that is provided by our First  
15 Nations communities and vetted through elders and  
16 grandmothers, not something that is generated by  
17 government.

18                  **MS. JOSEPHINE DE WHYTELL:** Absolutely.  
19 And, that is also what I was going to ask you about. You  
20 told a story yesterday about a youth who went to pray for  
21 the first time, and how the connection to her ancestors,  
22 and to her Indigenous spirituality and the elders had such  
23 a massive benefit for that youth. I am wondering what  
24 could be done tomorrow to give that opportunity to more  
25 youth at risk and what could you recommend?

1                   **MS. CORA MORGAN:** Youth in care or youth in  
2 general?

3                   **MS. JOSEPHINE DE WHYTELL:** Youth who are  
4 identified as being at risk, whether they are in care or  
5 not.

6                   **MS. CORA MORGAN:** Well, I think that there  
7 needs to be adequate resources provided to our agencies --  
8 like our -- I do not want to use the word "agencies". I  
9 want to use the word our community organizations, our  
10 support services in the community. There has to be, you  
11 know, links available to elders, and cultural advisers and  
12 supports so that they are more accessible, particularly in  
13 urban centres.

14                   **MS. JOSEPHINE DE WHYTELL:** Mm-hmm. And,  
15 would you agree that those resources that need to go into  
16 that cannot be diverted from other program resources that  
17 are also scarce, but have to be in addition to that?

18                   **MS. CORA MORGAN:** No, I think that, you  
19 know, the -- that is a whole other issue on top of itself.  
20 You know, we always have the same size pie and it just  
21 gets divvied up in different sizes throughout the years.  
22 And, you know, a lot of the times, we react and we write  
23 proposals for specific needs, and it is not needs that we  
24 get to identify, it is needs that we are contorting our  
25 issues into so that we can get some resources to be able

1 to make something out of it.

2 I think that -- you know, we have to look  
3 at funding sources that are over and above. And, I  
4 mentioned it earlier in one of those questions that, you  
5 know, after, you know, 150 years plus of policy that  
6 removes children, that there needs to be restitution, so  
7 that we can effectively address and make those things that  
8 we should inherently have access to available to us,  
9 whatever the cost.

10 **MS. JOSEPHINE DE WHYTELL:** Thank you very  
11 much. My next questions are for you, Dr. Bombay. Your  
12 research demonstrates that assimilative policies caused  
13 collective trauma among Indigenous residential school  
14 survivors and their offspring. And, we have also heard  
15 evidence that children of residential school survivors are  
16 removed from their homes and placed in foster care. Do  
17 you impart to their parents reaction to that collective  
18 trauma, do I understand that right?

19 **DR. AMY BOMBAY:** That's right.

20 **MS. JOSEPHINE DE WHYTELL:** And, also, as  
21 part of that, youth are housed in the criminal justice  
22 system as a reaction to their parents' reaction to the  
23 collective trauma and their own intergenerational trauma;  
24 right?

25 **DR. AMY BOMBAY:** Right.

1                   **MS. JOSEPHINE DE WHYTELL:** So, are  
2 residential school survivors and their families  
3 essentially being punished for this physiological and  
4 mental reactions to collective trauma that Canada has  
5 already apologized for?

6                   **DR. AMY BOMBAY:** Yes.

7                   **MS. JOSEPHINE DE WHYTELL:** And, does this  
8 perpetuate institutional living -- institutional  
9 assimilative practices in your view?

10                  **DR. AMY BOMBAY:** Yes.

11                  **MS. JOSEPHINE DE WHYTELL:** One of the  
12 documents you introduced yesterday, the Recognition of  
13 Rights document, there was 211 pages, but I'm just going  
14 to refer to something on page 27. It mentions that  
15 traditional values of hospitality and diplomacy guided  
16 early interactions with Europeans at the onset of their --  
17 this is the right thing, yes? You have it? Thank you.  
18 Sorry.

19                                So, I'm just taking a piece from this. It  
20 indicated that traditional values of hospitality and  
21 diplomacy guided early interactions with Europeans at the  
22 onset of their relationships. However, instead of  
23 eliciting mutual respect, this was interpreted as  
24 subservience, confirming the colonized beliefs of their  
25 own superiority.

1                   Now, I just took my citizenship test  
2                   yesterday, and in preparing for it and reading the  
3                   materials, I was startled at how they continue to reflect  
4                   this, and that they are teaching new Canadians to adopt  
5                   this ideological superiority. And, RCAP found that belief  
6                   in this ideology is what caused community massacres and  
7                   welfare, and I'm wondering if you think this pervasive  
8                   ideology continues to be the most pressing barrier to  
9                   providing adequate resources and services to Indigenous  
10                  families?

11                   **DR. AMY BOMBAY:** I would say yes.

12                   **MS. JOSEPHINE DE WHYTELL:** Thank you.

13                   Those are my questions. Thank you very much.

14                   **MS. MEREDITH PORTER:** Thank you. The next  
15                   party I would like to invite to the podium is from  
16                   Animakeee Wa Zhing 37 First Nation et al. Whitney Van  
17                   Belleghem will have twenty-one and a half minutes.

18                   **--- CROSS-EXAMINATION BY MS. WHITNEY VAN BELLEGHEM:**

19                   **MS. WHITNEY VAN BELLEGHEM:** Good afternoon.  
20                   My questions today are for Ms. Morgan. There has been  
21                   discussion about children being apprehended and placed in  
22                   communities outside their own. You stated yesterday that  
23                   insufficient bedroom size could prohibit placement in a  
24                   home. The report, Bringing Our Children Home, also  
25                   references that the number of bedrooms could also be a



1 factor in prohibiting this.

2 Could you explain what other factors limit  
3 the ability of children to be placed in foster homes or in  
4 other care arrangements on reserve?

5 **MS. CORA MORGAN:** There's the issue of  
6 mold. I've had families where -- I know one grandma  
7 wanted to bring a newborn home from the hospital, and when  
8 they did an assessment, they found mold in the home, and  
9 they deemed the home inappropriate. And, the other two  
10 grandchildren she had living in the home were now put at  
11 risk as well. So, mold is a concern.

12 There's also concerns about who else is  
13 living in the home. So, if grandparents took in  
14 grandchildren and they have teenage or adult children  
15 living in their home, there's a lot of times they'll make  
16 orders where you either take the kids or you keep your  
17 older children, or you tell them that they have to move  
18 out. There's lots of conditions that are placed.

19 Criminal records are also an issue, and  
20 it's not even criminal records where there's sexual abuse  
21 or physical abuse. It's -- you know, I've heard where a  
22 grandfather had a driving intoxicated charge from 20 years  
23 prior, and that prevents them from caring for the  
24 children. So, criminal records are also an issue.

25 And, you know, they've also determined that

1 grandparents are too old to be able to care for the  
2 grandchildren. And, also, the number of children in the  
3 home also prevents. And so, usually on average, they only  
4 allow for four children to be in the home. So, if you  
5 already have four children, then you're not eligible to  
6 take additional children into the home.

7 There's quite a few different barriers, but  
8 those are some of the common ones.

9 **MS. WHITNEY VAN BELLEGHEM:** And, what  
10 supports and resources can be provided at the community  
11 level to increase the availability of placement of  
12 children within their home community?

13 **MS. CORA MORGAN:** Well, I think that if our  
14 First Nations were able to make determinations on what's  
15 suitable for a living arrangement. When I think back to  
16 my own community, you know, they talked about -- elders  
17 have talked about the supports that we had inherently to  
18 care for each other.

19 And so, no matter how many children you  
20 had, if your sibling or another person in your family  
21 needs you to take in other children, then it was just an  
22 automatic. And, you know, my mother lived in a home, and  
23 it was a small little home and there was nine children in  
24 it. And, you know, when we talked about that Bringing Our  
25 Children Home engagement, I attended that day, and there

1 was a grandmother who spoke to those dynamics. And, she  
2 says, "You know, when I was a child, you could have come  
3 into our home and saw a baby in a swing because most of  
4 our families used a sheet and made a swing for the baby.  
5 You could have -- you know, an agency would determine that  
6 as inappropriate. However, that's how a lot of our  
7 families carried their babies when they were sleeping."  
8 And, she says, "There was lots of us in the home, but when  
9 we would have visitors, there might be five children in a  
10 bed." Our agencies would come in and they would view that  
11 as sinister, and what she said is in those moments, you'd  
12 never feel so much love.

13 So, it's all about the perceptions and, you  
14 know, inviting grandmothers and our elders to -- and our  
15 community members to make determinations on how they can  
16 accommodate children in their home. I think those  
17 standards are what are most important.

18 **MS. WHITNEY VAN BELLEGHEM:** Thank you.  
19 Would you agree that First Nation established and run care  
20 facilities run on reserve by the First Nation would be a  
21 viable alternative to foster and group placements outside  
22 the community?

23 **MS. CORA MORGAN:** I think that it is  
24 important to keep our children in our community, and I  
25 think that it is viable. We do have a model here in

1 Manitoba that exists. If children are in need of  
2 legitimate protection, then I think that is the model that  
3 we need to move towards, is keeping them in their schools  
4 around their friends and their family, and having  
5 accessibility to their parents.

6 **MS. WHITNEY VAN BELLEGHEM:** Would you  
7 recommend, then, that First Nation communities receive  
8 funding to develop their own culturally-appropriate care  
9 facilities for their children?

10 **MS. CORA MORGAN:** Yes. That's led by the  
11 First Nation.

12 **MS. WHITNEY VAN BELLEGHEM:** Would you agree  
13 that while the requirements for foster homes may vary from  
14 province to province that the same general factors likely  
15 prevent children from being placed in foster homes on  
16 reserve?

17 **MS. CORA MORGAN:** Sorry, can you repeat  
18 that?

19 **MS. WHITNEY VAN BELLEGHEM:** Certainly.  
20 Would you agree that while requirements for foster homes  
21 may vary from province to province, that the same general  
22 factors likely prevent children from being placed in  
23 foster homes on reserves?

24 **MS. CORA MORGAN:** Probably, because we have  
25 housing crisis, and water, and probably mold across the

1 country in our homes on reserves. So, a lot of the  
2 preventative measures are probably common, yes. The  
3 preventative reasons why they aren't placed there, yes.

4 **MS. WHITNEY VAN BELLEGHEM:** And, what other  
5 changes might you recommend to ensure that children are  
6 not apprehended for reasons related to poor housing  
7 conditions specifically?

8 **MS. CORA MORGAN:** Well, I think -- you  
9 know, one of the things that I think about when I think  
10 about my own First Nation, you know, I think if we were to  
11 remove the agency today, I think about all the protections  
12 that we would need to put in place to make sure that  
13 children were safe, and I think that there needs to be  
14 planning amongst all of our community entities. So, when  
15 you have housing at the table and social assistance at the  
16 table, and economic development and education and all  
17 those pieces in place, and everyone works with the  
18 children in the centre and the mindset, you know, then you  
19 can focus resources to ensure that there's healthy  
20 placements for our communities. And, you talked about  
21 that economic kind of development role of having homes on  
22 reserve for when children are need of protection, and I  
23 support that idea, but I also don't believe in creating  
24 entities that rely on children being removed from their  
25 home to sustain. So there's a balance.

1                   **MS. WHITNEY VAN BELLEGHEM:** On that point,  
2 we've heard that there can be significant affects on  
3 children who are placed in care outside of their  
4 community, and yesterday you also mentioned that there can  
5 be significant affects on the mothers, such as depression.  
6 Can you expand a little bit more on the long-term affects  
7 on the family unit of having the child placed outside of  
8 the community?

9                   **MS. CORA MORGAN:** Well, it -- the system  
10 itself, well in Manitoba, is designed to break the bond,  
11 and so, you know, there's a lot of terrible things that  
12 I've heard over time, you know. We've had a few families  
13 where the children were told that their mothers died when  
14 they hadn't.

15                   And you know, the way -- and I explained  
16 this a little bit yesterday, you know, when children are  
17 taken into care it's usually on a three or six month  
18 temporary order. Mothers may have access, you know, two  
19 visits a week and then one visit a week, and then around -  
20 - as time goes on, the access to their child lessens.  
21 Even when they're newborn babies.

22                   After the child is determined that -- or  
23 made to be a permanent ward, there's only four visits a  
24 year, but if agencies don't book hotel rooms or make --  
25 have drivers picking -- arrangements for the visit to

1       happen, and it happens all the time, then it might be  
2       three visits a year. And you know, effectively, you know,  
3       you have families out there who haven't seen their  
4       children for 8 to 10 years, and we have a lot of those  
5       families. And you know, those sorts of things break those  
6       bonds.

7                   And you know, we have children that are  
8       displaced in totally different culture groups, and our  
9       children believe that they're something that they're not,  
10      and they -- that is a real risk in the way that the system  
11      runs. And -- and yeah, it just breaks the bond and  
12      removes the access.

13                   And you know, when children are placed in  
14      multiple homes, and you know, they're -- they level up  
15      because of their behaviour and unaddressed grief and loss,  
16      you know, there's just that disconnection. And when  
17      they're moved from home, to home, to home, you know, it  
18      puts children at risk.

19                   The education outcomes in Manitoba for  
20      children in our care, only 25 percent of them graduate  
21      high school, and you know, we have high populations of  
22      homeless people due to children aging out of care. You  
23      know, those are the things that when you take children out  
24      of the community and, you know, they lose language, they  
25      lose connection, they lose family, and then they come into

1 Winnipeg and they're searching for some sort of belonging,  
2 and it's not always in a good place.

3 **MS. WHITNEY VAN BELLEGHEM:** Would you agree  
4 that it's important then for a child to retain connection  
5 with their Reserve community?

6 **MS. CORA MORGAN:** Absolutely.

7 **MS. WHITNEY VAN BELLEGHEM:** And would you  
8 agree that there should be increased funding to child and  
9 family welfare agencies that is specifically earmarked to  
10 ensure that children are able to participate in cultural  
11 events and activities while they're in care?

12 **MS. CORA MORGAN:** I would rather support  
13 First Nations to get added resources and the opportunity  
14 to bring children home and have our First Nations having  
15 that responsibility to be able to bring their children  
16 home and provide those supports.

17 **MS. WHITNEY VAN BELLEGHEM:** You mentioned  
18 in response to one of my other earlier questions that  
19 there can be issues for youth returning to the community  
20 after they've time out of the system in terms of lack of  
21 housing. Are there other challenges associated with these  
22 children returning to the community, and can you explain  
23 these challenges and how they relate to missing and  
24 murdered Indigenous women and girls?

25 **MS. CORA MORGAN:** I think it's -- it all



1 depends on the circumstances of that child. You know, you  
2 have children that are taken from birth and they don't  
3 even know where they came from. We have children that  
4 when newborn babies are apprehended they are First Nations  
5 babies, but no one went through the exercise of getting  
6 them their status card. You have lots of people that age  
7 out of the system and don't even know where they came  
8 from.

9 For years, I wrote Gladue reports, and you  
10 know, for most of those, like almost 100 percent of those  
11 Gladue reports there are kids that were in care and they'd  
12 never set foot in their First Nation. And so for a lot of  
13 our children, when they've been removed from the Reserve,  
14 they have never made a trip back and they don't have  
15 connection there. And then like you said, there is  
16 housing shortages, so for them to even go back isn't even  
17 an option.

18 **MS. WHITNEY VAN BELLEGHEM:** Do you think  
19 that transitional programs that could assist these  
20 individuals in re-integrating into their communities could  
21 provide benefits?

22 **MS. CORA MORGAN:** Yes, I think so. There's  
23 lots of complexities in that as well too.

24 **MS. WHITNEY VAN BELLEGHEM:** I think what  
25 you ---

1                   **MS. CORA MORGAN:** But yes.

2                   **MS. WHITNEY VAN BELLEGHEM:** Yeah, it's part  
3 of my next question. What, in your opinion, should these  
4 programs include?

5                   **MS. CORA MORGAN:** Well, an example, one of  
6 the agencies in Manitoba that did a really impressive  
7 thing for Manitoba, they brought all the children that  
8 were in care from their community home for one week in the  
9 summertime, and they put out a call to all the community  
10 members to come forward and welcome these kids home. And  
11 for a lot of those kids, it was their first time coming  
12 home or being in that First Nation, and the first time  
13 that they met people with the same blood. So I think that  
14 that is really powerful to be able to do that.

15                   There are also, you know, some of those  
16 intergenerational traumas at the community level that  
17 disrupt -- that could potentially disrupt that process of  
18 people coming home and feeling welcome. So there would  
19 have to be, you know, some community healing and an  
20 openness to do that.

21                   I had a dream a little while ago, and I  
22 thought about my own community of, you know, everybody  
23 coming home and -- this is a dream of course -- but making  
24 this living tree so we all understood how we were  
25 connected to each other. But of course I think that that

1 is important. And everything that we do in our office is  
2 about bringing our children home, so I think those are  
3 some of the things that we need to think about and put in  
4 motion.

5 **MS. WHITNEY VAN BELLEGHEM:** Yesterday, you  
6 alluded to the fact that there is issues regarding  
7 overmedication of children in care, and then this can  
8 result into -- in addiction issues later in life when they  
9 no longer have access to the medication that they've been  
10 on. Would you agree that approaches to dealing with  
11 health, and specifically, mental health, should involve a  
12 more holistic approach to treatment involving the child,  
13 his or her family, and the community?

14 **MS. CORA MORGAN:** Absolutely.

15 **MS. WHITNEY VAN BELLEGHEM:** And during your  
16 direct examination, you mentioned that children in  
17 Manitoba who require extra needs and special supports are  
18 put into the child welfare system to get the supports that  
19 they need. Do you believe that this happens because  
20 there's a lack of services available in the First Nation  
21 communities?

22 **MS. CORA MORGAN:** To an extent, yes.

23 **MS. WHITNEY VAN BELLEGHEM:** And what  
24 alternatives are currently available to placing these  
25 children in care?

1                   **MS. CORA MORGAN:** Children with extra  
2 medical needs?

3                   **MS. WHITNEY VAN BELLEGHEM:** Correct.

4                   **MS. CORA MORGAN:** Well, in our experience,  
5 and what we've witnessed when children have extra medical  
6 needs and they're from a First Nation that don't have the  
7 medical supports, they're put into care. We do have  
8 strides that are being made in Jordan's Principle so there  
9 are added resources, but -- I mean, there is still a long  
10 way's to go to address the need, but measures have to  
11 start curving that apprehension because children have  
12 extra medical needs. We at the Assembly of Manitoba  
13 Chiefs are working on strategies about accessibility and  
14 working to measure the extent of the issue for children  
15 being -- parents having to sign these voluntary placement  
16 agreements to put their kids in care to get medical  
17 service. So, it is something that we are aware of, that  
18 we are looking at and we are also supporting the capacity  
19 building at the community level. So...

20                   **MS. WHITNEY VAN BELLEGHEM:** And, you have  
21 mentioned yesterday and again today, that the funding  
22 model for child welfare agencies in Manitoba sometimes  
23 incentivizes getting more kids into care. Do you know if  
24 there is a similar funding model in place in other  
25 jurisdictions in Canada? For example, Ontario.

1                   **MS. CORA MORGAN:** I do not know a lot about  
2 the funding model in Ontario, but they do have -- in my  
3 opinion, I think that they are far more advanced than  
4 Manitoba in having their voices heard. They have had  
5 effective customary care and kinship care supports and  
6 services offered to their community members, so they are  
7 doing things that are more progressive and they are  
8 working to implement their own family laws. So, in those  
9 ways, I think they are ahead of us here in Manitoba.

10                   **MS. WHITNEY VAN BELLEGHEM:** Would you agree  
11 that child welfare systems are complex, and that it may be  
12 difficult for families to understand and effectively  
13 advocate for their children?

14                   **MS. CORA MORGAN:** Absolutely.

15                   **MS. WHITNEY VAN BELLEGHEM:** And, would you  
16 agree that this can negatively impact the family's ability  
17 to keep their children?

18                   **MS. CORA MORGAN:** Yes.

19                   **MS. WHITNEY VAN BELLEGHEM:** What would you  
20 recommend should be done to ensure that families are  
21 supported, and that they understand the system and  
22 effectively can advocate on behalf of their children?

23                   **MS. CORA MORGAN:** Well, I think there is a  
24 need for advocates and for others to be available to  
25 support families. You know, the model of the First

1 Nations Family Advocate Office, you know, we do our best,  
2 we have an orientation where we make sure that our  
3 families know what their rights are and tools to advocate  
4 for themselves.

5 But, I think sometimes it is important  
6 because it is a really emotional time, you know? Your  
7 children have been stolen and, you know, it can make you  
8 vigilant, but it can also make you angry and upset. So,  
9 sometimes to have, you know, someone who is on your side  
10 to support you goes a long way.

11 It is hard and it is an intimidating  
12 process to travel by yourself, and a lot of our mothers  
13 are all on their own and they do not have a support  
14 network, especially if they have aged out of care and had  
15 children, they do not have those family connections and  
16 other people that they can lean on to support them. So, I  
17 think that there has to be mechanisms of support available  
18 to families.

19 **MS. WHITNEY VAN BELLEGHEM:** Thank you. Ms.  
20 Morgan, you mentioned that there is a need to address the  
21 grief and loss facing First Nations at the community  
22 level. And, Dr. Bombay, you discussed the lateral  
23 violence and the importance of families knowing their  
24 history and the importance of community members -- sorry,  
25 and the role of safe places for people to discuss these

1       difficult subjects. Can either of you offer any further  
2       details on supports and programs that could be provided at  
3       the community level to support community healing?

4               **DR. AMY BOMBAY:** I think I mentioned this  
5       in my testimony, a good model is the Aboriginal Healing  
6       Foundation, which ran for many years and provided funding  
7       for communities to -- for them to come up with their own  
8       approaches to doing that, and I think that is the best way  
9       to go about it.

10              **MS. WHITNEY VAN BELLEGHEM:** Thank you.

11              **MS. CORA MORGAN:** And, I agree, I think  
12       that each community has unique ways of looking at healing,  
13       and I think that there has to be the resources and the  
14       time set aside for that healing to happen. I believe that  
15       there is a lot of darkness in our communities, where --  
16       you know, when we have intergenerational effects and  
17       survivors and -- and then the issue of children being  
18       removed from the community creates a darkness in the  
19       community. And, I think that, you know, sometimes we need  
20       to take the time to address that.

21              And, you know, our communities used to do  
22       things as a collective, and they used to support each  
23       other and help each other. You know, when I hear stories  
24       about Sagkeeng from days gone by, they talked about, you  
25       know, helping each other when there was crisis. And, now,

1 because of everything that has happened, everyone fends  
2 for themselves, and almost as -- and that sense of  
3 community needs to be resorted, and that would go a long  
4 way in being able to bring children back and ensuring that  
5 women are safe, because there used to be those measures in  
6 place in our original ways of caring for each other.

7 **MS. WHITNEY VAN BELLEGHEM:** Thank you very  
8 much. That is all of my time, so I just want to say thank  
9 you for taking the time to answer my questions today.

10 **MS. CORA MORGAN:** Meegwetch.

11 **MS. MEREDITH PORTER:** Thank you. The next  
12 party I would like to invite to the podium is from the  
13 Native Women's Association of Northwest Territories. Ms.  
14 Caroline Wawzonek will have 13.5 minutes.

15 **--- CROSS-EXAMINATION BY MS. CAROLINE WAWZONEK:**

16 **MS. CAROLINE WAWZONEK:** Marsi, marsi.  
17 (Speaking in Indigenous language). Thank you and welcome  
18 on behalf of the Native Women's Association of Northwest  
19 Territories. My name is Caroline Wawzonek for the record.  
20 I wanted to start with a special thank you to the families  
21 and survivors who are here today, acknowledge the warm  
22 welcome we have received on Treaty 1 territory, the  
23 homelands of the Métis people and the birth place of one  
24 of my ancestors from Nalagimnodeerfon (phonetic) family.

25 My first question is going to be for Dr.



1 Bombay, and I could not have had a better segue because  
2 Ms. Morgan essentially just introduced the very issue  
3 around communities and community rebuilding that I was  
4 actually hoping to put to you. It was with respect to  
5 lateral violence and the community impacts of lateral  
6 violence.

7 And, I was hoping, first, Dr. Bombay, if  
8 you could please describe a bit the altered community  
9 norms. And, that is where I say I acknowledge that  
10 perhaps that answer, in some ways, have just been given,  
11 but from your experience, if you could explain what that  
12 does to the community and to their community structures.

13 **DR. AMY BOMBAY:** Sure. I think I can only  
14 really, kind of, pull from our research -- the student-to-  
15 student abuse research which was really, kind of, focused  
16 on lateral violence. And, I guess I can say that -- you  
17 know, for the perpetrators in residential school who, you  
18 know, were often actually encouraged and, in this case,  
19 did not have choices really, you know, for them, it  
20 completely altered their understanding of relationships  
21 and how to be around people, how to be around women, how  
22 to have a relationship with your parents, your  
23 grandparents. All of the children were taught that being  
24 an Indigenous person is bad; that internalized racism I  
25 think also played a huge role in this.

1                   In terms of safety, because of how  
2 pervasive this was, and also because -- I think another  
3 social norm was silence around these things. And, again,  
4 I alluded to that, that is in the Holocaust research, it  
5 is a common -- the conspiracy of silence. And, in other  
6 groups, it has been shown that that is a common outcome.  
7 And, I think that contributes to the lack of people coming  
8 forward to talk about this, and the stigma around it and  
9 why a lot of women do not have anywhere to go in  
10 communities. So, it really normalizes violence and  
11 normalizes silence, which allows these things to continue  
12 over generations.

13                   **MS. CAROLINE WAWZONEK:** Does that also then  
14 have an impact on the giving and receiving of community  
15 services?

16                   **DR. AMY BOMBAY:** Yes. One of the findings  
17 in that study, particularly around the research on the  
18 effects on perpetrators and collective effects was that,  
19 sometimes a lot of -- those who were bullies in the school  
20 actually went on to be in leadership positions within  
21 communities, and so that would impact people's ability to  
22 access certain programs and services.

23                   **MS. CAROLINE WAWZONEK:** Based on your  
24 observations around the factors of resiliency, would one  
25 solution then include reinvestments in nation rebuilding?

1 DR. AMY BOMBAY: Yes.

2 MS. CAROLINE WAWZONEK: And, would you also  
3 agree, given what you have just said about the impacts on  
4 leadership and communities, and who is in the positions of  
5 leadership, that it might actually be community based  
6 organizations and non-profit organizations who are well  
7 placed to lead those kinds of efforts?

8 DR. AMY BOMBAY: In collaboration with  
9 communities, yes.

10 MS. CAROLINE WAWZONEK: I have some  
11 questions, if I may, for Cora Morgan, please. Under the  
12 *Child and Family Services Act* in the Northwest  
13 Territories, every apprehension and every protection order  
14 must be served on a child's Indigenous community or  
15 Indigenous band or government, whatever their home  
16 community might be.

17 I don't have the impression that you get  
18 the same kind of service notice here in Manitoba?

19 MS. CORA MORGAN: No.

20 MS. CAROLINE WAWZONEK: And, that said,  
21 although they are served, they don't -- and they have a  
22 right of standing in court, they don't typically  
23 participate in Child and Family Services matters in the  
24 Northwest Territories, but I'm wondering with your  
25 experience what tools would you need, what funding would

1       you need, or what resources would you need if you had that  
2       notice, if you had that service to be an effective  
3       advocate in the court process? I mean, I acknowledge  
4       yesterday it was pointed out how unfriendly and how  
5       unwelcoming that court process could be. So, if you had  
6       notice, what would you need to be effective?

7                   **MS. CORA MORGAN:** Well, I think part of the  
8       issue is too that our families aren't allowed to bring  
9       anyone but themselves to the courtroom. So, they can't  
10      bring -- you know, if a mom, a single mom goes to court,  
11      she's not allowed to bring another person with her into  
12      the courtroom, and our First Nations aren't served notice  
13      to know that it's happening. So, you know, they're -- and  
14      if the mother can't afford legal representation and  
15      qualifies for Legal Aid, our Legal Aid system is very  
16      overburdened in Manitoba. You know, my understanding is  
17      that each -- the common lawyers have cases of over 300  
18      clients at a time.

19                   **MS. CAROLINE WAWZONEK:** If you were there  
20      with them, do you think you would be in a position to have  
21      an impact? Would your organization make an impact in the  
22      proceedings? Or, can you say?

23                   **MS. CORA MORGAN:** I think that we could,  
24      yes. I think that even -- we've heard repeatedly from our  
25      clients that they're instructed by their lawyers that

1 they're not even allowed to speak. And, I think even just  
2 equipping our families with their rights and helping to  
3 find their voice to speak out when they're in court I  
4 think would go a long way as well.

5 **MS. CAROLINE WAWZONEK:** And, for an  
6 Indigenous band or government that wants to send someone,  
7 from what you've heard and seen of the system, of the  
8 Child and Family Services court system, do they need  
9 specialized training or knowledge or some funding to  
10 develop that capacity before they can walk in and be  
11 effective?

12 **MS. CORA MORGAN:** I think that it would be  
13 helpful, and I think that if we're moving towards training  
14 and equipping people, then we should also look at  
15 restorative approaches that can be implemented to kind of  
16 remove as many cases going forward to provincial  
17 governments and working outside of the provincial systems,  
18 if possible.

19 **MS. CAROLINE WAWZONEK:** On that note,  
20 perhaps I'll -- a couple of the other things you had  
21 mentioned or that perhaps was in your materials, one was  
22 family healing homes, and I wasn't sure if that was still  
23 aspirational or if that's something that's already  
24 happening?

25 **MS. CORA MORGAN:** No. The idea was to try

1 and incubate a family to prevent further breakdown and  
2 support the family with resources and tools that they  
3 might need, healing potentially.

4 **MS. CAROLINE WAWZONEK:** And, would that  
5 include steps or systems for aftercare? So, once they've  
6 been living at the centre or living in the home and they  
7 are ready to move out and move on, what is needed to help  
8 support that family going forward?

9 **MS. CORA MORGAN:** I think, you know, we  
10 need to really look at the resources that are provided to  
11 the family. Like, I think that if families are on income  
12 assistance that there needs to be, you know, some sort of  
13 transitioning where they can have adequate resources to be  
14 able to get education, or employment, or training, or  
15 whatever it is that they need. And, you know, adequate  
16 supports for their children, I think those need to be in  
17 place. And, traditional parenting, we have a lot of  
18 single parents that are out there. So, I think that  
19 sometimes respite support, so that they have access to  
20 someone who can do child minding with them a couple of  
21 hours a week. And, even access for children to  
22 participate in sport or recreation, or dance, or crafts,  
23 or whatever it is that child needs to do.

24 A lot of times, what happens for our  
25 children -- like, I had one mom, and she worked with our

1 organization, and she was a good mom. She tried hard, but  
2 she was really low income and a student at the same time.  
3 And, she struggled, and she ended up going to an agency  
4 and signing a voluntary placement agreement so that she  
5 could get, you know, some things sorted out at home. And  
6 then she saw that her sons were getting to go to the beach  
7 and getting to go to Kids City and movies, and she knew  
8 that she would never be able to provide that. And, in her  
9 view, she thought that her children were better off  
10 because they had access to more fun things to do and  
11 adequate clothing.

12 So, I think that, you know, for those  
13 children to come home and a mom who isn't able to provide  
14 all those things, there has to be those supports available  
15 to families. Because kids shouldn't just be able to  
16 access those things while they're in the child welfare  
17 system.

18 **MS. CAROLINE WAWZONEK:** So, if I can turn  
19 that into a recommendation, if you would agree that it be  
20 recommended that First Nations governments, but also the  
21 federal, territorial and provincial governments with  
22 responsibility, that they have to provide that level of  
23 funding to children before they get into care and after  
24 they are out of care?

25 **MS. CORA MORGAN:** Absolutely.

1                   **MS. CAROLINE WAWZONEK:** Okay. I could ask  
2 you also a little bit about the grandmother's council and  
3 the women's leaders council that you mentioned. Is that  
4 something with a leadership role, or is it advisory to  
5 your organization? I just wasn't clear.

6                   **MS. CORA MORGAN:** The First Nations Family  
7 Advocate Office falls under the Assembly of Manitoba  
8 Chiefs. The First Nations Family Advocate Office fell  
9 under the Child and Family Matter Task Force, and we had  
10 decreased funding at the Assembly of Manitoba Chiefs, and  
11 the committee was originally only two male chiefs. And  
12 so, in April 2017, our women leadership, there was  
13 resources to be able to build onto the team, and our women  
14 leadership, chiefs and councillors asked to be able to  
15 take the lead role on the issue of child welfare.

16                   And then our grandmother council, after  
17 Bringing Our Children Home, had come together and  
18 developed a statement of action that's included in our  
19 submission. And so, our grandmothers and grandfathers  
20 have taken lead roles in determining what direction our  
21 office should move towards.

22                   **MS. CAROLINE WAWZONEK:** And so, similarly,  
23 would you agree with a recommendation perhaps directed at  
24 First Nations leadership that they ensure the inclusion of  
25 the grandmothers' voices and the mothers' voices when



1 making these decisions and determinations?

2 **MS. CORA MORGAN:** Absolutely. And, we  
3 talked to those mechanisms around court, and I talked  
4 about, you know, creating these mechanisms of restorative  
5 justice in the community and, you know, that could be a  
6 role for grandmothers or mothers or selected heads of  
7 families to be able to have roles to make determinations  
8 on whether children should be removed from a home.

9 **MS. CAROLINE WAWZONEK:** Thank you. Sarah,  
10 I have one question if I might for you, please. The MOU  
11 that you described between RCMP, prosecution staff, CFS,  
12 Victim Services, various health professionals, that brings  
13 together a lot of different organizations that don't  
14 always see eye to eye in the overlap of their  
15 jurisdictions. Can you explain how that sort of an MOU  
16 came to be agreed upon?

17 **MS. SARAH CLARK:** Yes. So, I've been  
18 working with a working group of representatives from all  
19 of those different organizations. I should mention that  
20 the prosecution is not involved at this time, and also --  
21 yes, so they're not involved at this time, because they  
22 don't want to be involved in creating the Child Advocacy  
23 Centre.

24 But, we took a lot of direction from other  
25 MOUs across the country, and also in Alaska, and we've

1 basically been creating our MOU and then going through  
2 policy and legal review for each of those organizations  
3 and departments, and then coming back, revising it, and  
4 giving it back. So, it's a back and forth process for  
5 everyone to approve it.

6 **MS. CAROLINE WAWZONEK:** Okay. Thank you.  
7 That's all my time. Thank you.

8 **MS. MEREDITH PORTER:** Thank you.  
9 The next party I'd like to invite, or next representative  
10 I'd like to invite to the podium for questioning is  
11 Commission counsel, Francine Merasty. Ms. Merasty will  
12 have thirteen and a half minutes to pose questions to Ms.  
13 Morgan and Dr. Bombay.

14 **--- CROSS-EXAMINATION BY MS. FRANCINE MERASTY:**

15 **MS. FRANCINE MERASTY:** Thank you. My name  
16 is Francine Merasty, and I am Commission counsel. I would  
17 like to acknowledge that we are on Treaty 1 territory,  
18 home of the Anishinaabe and Métis people. I'm Woodland  
19 Cree from Pelican Narrows, a community in Northern  
20 Saskatchewan, and part of the Peter Ballantyne Cree  
21 Nation. I'm also a third-generation residential school  
22 survivor. As a survivor of the residential school system  
23 and raised by two generations of survivors, my dad and my  
24 parental grandparents, the research that you did, Ms.  
25 Bombay, is very intriguing, and I have some questions for

1 you regarding your research.

2 As a survivor of the residential school  
3 system aware of your research by listening to your  
4 testimony and reading the documents that you provided to  
5 us, and how adverse childhood experiences lead to negative  
6 health outcomes in adulthood, what could survivors and  
7 their children do now that would help minimize these  
8 negative health impacts?

9 **DR. AMY BOMBAY:** I think we can learn from  
10 the work of the Aboriginal Healing Foundation and from  
11 some of our research findings just showing that sometimes  
12 the first step for families is to come to a collective  
13 understanding of their history, learning about how it has  
14 impacted Indigenous peoples on a broader level to realize  
15 that maybe whatever the outcomes for them were is not  
16 something inherent or their own fault, but it's a  
17 consequence. So, I think that's often just the first  
18 step.

19 And, I think we've also learned that,  
20 again, for a lot of people, and it might not be for  
21 everyone, but reengagement and cultural practices is  
22 healing for a lot of people. And, for some people, that -  
23 - it might not be taking part in ceremony. It might be  
24 more about learning, you know, advocating, and just I  
25 think it's important that people have the pride in their

1 cultural background.

2 I think there's also a lot -- there's so  
3 many different things depending on how it's affected a  
4 given family, and I think really focusing on the next  
5 generations to ensure that whatever has affected them  
6 isn't passed on again. So, those kind of interventions  
7 addressing families at various levels, whether it's  
8 mothers who are pregnant, whether it's children, whether  
9 it's supporting parents and children, communicate just in  
10 general, but also about some of these things that are  
11 really difficult to talk about.

12 **MS. FRANCINE MERASTY:** Thank you. I want  
13 to talk about collective trauma in relation to residential  
14 school trauma. Do you agree that Indigenous people in  
15 Canada suffer collective trauma?

16 **DR. AMY BOMBAY:** Yes.

17 **MS. FRANCINE MERASTY:** Do you believe that  
18 western models of healing focus on the individual?

19 **DR. AMY BOMBAY:** Yes.

20 **MS. FRANCINE MERASTY:** Such as counselling.  
21 So, in effect, a lot of money is being directed to the  
22 western modalities that may not work for Indigenous  
23 people, or they may be of benefit but for Indigenous  
24 people, there should be opportunities for collective  
25 healing?

1                   **DR. AMY BOMBAY:** Yes, absolutely.

2                   **MS. FRANCINE MERASTY:** Would you recommend  
3 to the Commissioners that governments, organizations that  
4 work in mental health, including First Nations and the  
5 province, should fund events that promote collective  
6 healing?

7                   **DR. AMY BOMBAY:** Yes.

8                   **MS. FRANCINE MERASTY:** And, this would  
9 include cultural events, educational conferences and  
10 things that bring people together?

11                  **DR. AMY BOMBAY:** Absolutely.

12                  **MS. FRANCINE MERASTY:** I want to get your  
13 opinion on this. I frequently read on social media  
14 comments made toward Indigenous people, and especially  
15 those that experienced the residential school system, and  
16 how they should just get over it. In relation to your  
17 research, what would your response be to such comments?

18                  **DR. AMY BOMBAY:** I think it would be --  
19 referring to my own research and just showing that we know  
20 from a lot of evidence over the years that residential  
21 schools has impacted people in so many ways, and that it's  
22 after generations and generations of children being taken  
23 from their families. Based on what we know of child  
24 development, it's just not factual to expect Indigenous  
25 peoples to be able to just get over it, and it just

1 doesn't make any sense.

2 **MS. FRANCINE MERASTY:** Okay. Do you think  
3 we'll ever get over it?

4 **DR. AMY BOMBAY:** I think that there's a lot  
5 of hope for healing and improved wellness. So, I think in  
6 some ways we'll get over some of the consequences. I  
7 don't think we'll ever forget what happened and how that  
8 affected us. But, I think there is hope for healing.

9 **MS. FRANCINE MERASTY:** Thank you. And,  
10 these following questions are for Ms. Morgan. You said  
11 that you delivered services to over -- for approximately  
12 900 families. Where do you provide these services, in  
13 Winnipeg, or is it all over Manitoba?

14 **MS. CORA MORGAN:** Predominantly in  
15 Winnipeg, but we also have a toll-free number so that we  
16 can provide service over the phone. There's been  
17 instances where we've gone to communities and met with  
18 collectives of family members. More recently, we've been  
19 making trips on reserve to work with a group of families  
20 at a time.

21 **MS. FRANCINE MERASTY:** Okay. Who are the  
22 key members of the team that you rely upon to assist a  
23 family once a child is in the child welfare system?

24 **MS. CORA MORGAN:** Predominantly, the roles  
25 of the assistant advocate work with the families. If moms

1 are expecting or have babies, we also involve the prenatal  
2 support team so that they can offer supports to the mom.  
3 And then for grandmothers, we have -- or grandparents who  
4 are working to have their children in their care, we have  
5 people that work specifically with grandparents. And, we  
6 have grandmothers on staff that provide support to ensure  
7 that we have cultural integrity in the workshops we offer.  
8 And, they also provide support. When our families are  
9 upset or really struggling, they come in and calm the  
10 situation so we can get to the root of issues and the work  
11 that needs to be done.

12 **MS. FRANCINE MERASTY:** Would these service  
13 providers also include counsellors or mental health  
14 professions, like, people that would help with accessing  
15 income support or housing?

16 **MS. CORA MORGAN:** We provide supports for  
17 income and housing. We also have a new addition to our  
18 team who can do the counselling element. But, for the  
19 most part, we rely on our grandmothers to provide that  
20 counselling advice or the cultural advisory services.  
21 And, we also have ceremony and our own sweat lodge, and  
22 regularly host naming ceremonies for our families, and so,  
23 parents and their children can receive their spirit names.  
24 And, we quite often have pipe ceremonies as well as part  
25 of the way that we work with our families.

1                   **MS. FRANCINE MERASTY:** In saying that, have  
2 you ever found it difficult to find culturally-appropriate  
3 service providers?

4                   **MS. CORA MORGAN:** Well, right now, we have  
5 access to a number of grandmothers that support the work  
6 of the office. And, along the way, when we opened our  
7 office June 1<sup>st</sup>, 2015, we opened in ceremony. Every year,  
8 I, and other staff, fast for the work that we are doing.  
9 So, we do those elements as well.

10                   And, we just integrate ceremony into our  
11 every day work. Every day we have our office smudged,  
12 every day we -- you know, our programming is full of  
13 teachings and we have elements of language in our office  
14 as well. So, we have also grandmothers and grandfathers  
15 who support the work because it is very challenging, and  
16 so when things are hard, we always know that they are  
17 lifting us up.

18                   **MS. FRANCINE MERASTY:** Do you find that  
19 with the service providers that you have, is there enough  
20 ---

21                   **MS. CORA MORGAN:** Yes.

22                   **MS. FRANCINE MERASTY:** --- to provide the  
23 services that you want to provide?

24                   **MS. CORA MORGAN:** No. Well, there is, in  
25 Manitoba, over 11,000 children. We don't have access to



1 everyone and we know that there is an enormous amount of  
2 suffering and we need those supports.

3 You know, even when you think about our  
4 elders, like they are getting old and we need those next  
5 generations to be able to carry out that work, but there  
6 needs to be means to be able to have younger people take  
7 on those roles and have access to that, so that we can,  
8 you know, carry that knowledge forward.

9 **MS. FRANCINE MERASTY:** So, would you  
10 recommend that the federal and provincial government make  
11 certification and training of culturally appropriate  
12 service providers a priority?

13 **MS. CORA MORGAN:** Well, I do not know that  
14 it needs to be certified, but I think that there needs to  
15 be movement, and support and the resources and funds to be  
16 able to facilitate that transfer of knowledge to our  
17 younger generations. I am not exactly sure how that would  
18 look, but I know that in past I have spoken with elders  
19 about models that could be put in place, where young  
20 people could spend a whole year with an elder to be able  
21 to, you know, learn.

22 **MS. FRANCINE MERASTY:** Okay. Would you  
23 recommend -- I think somebody else might have mentioned  
24 this, but I want to present it in a different way, I  
25 guess. Would you recommend that all provinces and

1 territories in Canada have an Indigenous child advocate?

2 **MS. CORA MORGAN:** That is outside of  
3 government?

4 **MS. FRANCINE MERASTY:** Yes.

5 **MS. CORA MORGAN:** Yes.

6 **MS. FRANCINE MERASTY:** Okay. Further,  
7 based on your experience here in Manitoba, what are the  
8 main areas that children need advocacy for?

9 **MS. CORA MORGAN:** Well, they need a voice  
10 in the child welfare system, particularly when we do not  
11 know where all of our children are. But, I think that,  
12 you know, in the education system, they need advocacy.  
13 You know, there is huge issues of bullying that happen in  
14 our schools on- and off-reserve. You know, particularly  
15 making sure that children on-reserve are getting, you  
16 know, the preferred education levels and the types of  
17 things that are our children should be learning about in  
18 those schools, I think that there should be advocacy in  
19 those areas. I think that, you know, protections to  
20 ensure that the investments in children are being made to  
21 ensure that their gifts and talents are being invested in.

22 Yes, I just think that, in our communities,  
23 we need to have those mechanisms in place that put our  
24 children back in the center of how we do things. So, I  
25 think even at the community level, we need to have --

1 ensure that we have youth councils and that we are mindful  
2 of the children.

3 **MS. FRANCINE MERASTY:** Thank you. Those  
4 are all my questions.

5 **MS. CORA MORGAN:** Meegwetch.

6 **MS. MEREDITH PORTER:** Thank you. Chief  
7 Commissioner Buller and Commissioners, that completes the  
8 process of cross-examination of the witnesses for the  
9 first panel. At this time, I am going to canvas the  
10 counsel for the witnesses to determine if there are any  
11 questions for redirect that they would like to put to the  
12 witnesses. Ms. Pastora Salla? No. Ms. Lundrigan? No.  
13 Mr. Wuttke? Okay. Mr. Wuttke does have one question. I  
14 will pass my mic to him and...

15 **--- RE-EXAMINATION BY MR. STUART WUTTKE:**

16 **MR. STUART WUTTKE:** Thank you. Stuart  
17 Wuttke from Assembly of First Nations. Just a question  
18 for Dr. Bombay, clarification. During the cross-  
19 examination of Mr. Blain, he mentioned the DSM-4, which I  
20 believe stands for the Diagnostic Statistical Manual of  
21 Mental Disorders. Is it correct that the current manual  
22 in use by the profession is the DSM-5?

23 **DR. AMY BOMBAY:** Yes, that is correct.

24 **MR. STUART WUTTKE:** Thank you.

25 **MS. MEREDITH PORTER:** Thank you very much.

1 So, I will seek your direction, Chief Commissioner, if we  
2 will move right into the questions from the Commissioners.

3 **CHIEF COMMISSIONER MARION BULLER:** Our plan  
4 is that we will start our questions with Dr. Bombay  
5 because we understand the time limitations. After we  
6 finished our questions of Dr. Bombay, we will take the  
7 afternoon break and we will continue with our questions  
8 for the remaining witnesses after that break.

9 **MS. MEREDITH PORTER:** Okay. Thank you very  
10 much.

11 **--- QUESTIONS BY COMMISSIONER QAJAQ ROBINSON:**

12 **COMMISSIONER QAJAQ ROBINSON:** Okay. Here  
13 we go. So, my questions would be just for you for now. I  
14 want to thank you, first of all, for coming and sharing  
15 with us the research that you have done, and your  
16 insights, and critiques and honesty about the research,  
17 and about what you have learned, and discovered and what  
18 the implications are.

19 I have thoughts and I am trying to  
20 formulate them into questions. One of the things that  
21 struck me about your presentation was the reference to  
22 research that related specifically to the experience of  
23 Holocaust survivors and other groups that have experienced  
24 tremendous collective trauma.

25 And, another thing that struck me, as I

1 reviewed your research and I listened to you answer  
2 questions about, well, what does this mean? Because your  
3 work does look a lot at suicide -- impacts on suicide,  
4 depression, physical health and then lateral violence,  
5 what does this mean for children in care or, you know, to  
6 draw that connection?

7           And, in my mind, I also then thought about  
8 the connections to other incredibly scary realities that  
9 we have heard about from families across the country. You  
10 have touched on one, the high rates of suicide, the high  
11 rates of attempts among Indigenous girls for example, the  
12 rapidly increasing rate of Indigenous women in  
13 correctional facilities, the unacceptable income gaps  
14 between Indigenous women and non-Indigenous women and the  
15 rest of the country.

16           And so, as I was thinking about, well, how  
17 do you -- how do I connect the impacts of the adverse  
18 experiences of residential school to all these other  
19 things? What struck me was the, in my mind, thought of,  
20 okay, well, this needs to be studied, this needs to be  
21 studied. And then I came to the conclusion that, well,  
22 no, no, it does not. And, I went back to your continued  
23 reference to we already know this from what we learned  
24 from the Holocaust, for example.

25           We have heard from -- so you are nodding.

1 In terms of my observations, is there anything you want to  
2 correct me on or -- you are following me here?

3 **DR. AMY BOMBAY:** I think so.

4 **COMMISSIONER QAJAQ ROBINSON:** Okay.

5 **DR. AMY BOMBAY:** Just that -- yes, I think  
6 we do already know a lot of these things. I think where  
7 research and maybe -- and continued -- you know, I  
8 struggle with that too. Do we need more research on this,  
9 should more funding be put into that versus other things?

10 **COMMISSIONER QAJAQ ROBINSON:** M'hm.

11 **DR. AMY BOMBAY:** And it just always come  
12 back to you like that article that -- that article of  
13 people denying -- continuing to deny this, and that, you  
14 know, it's not just a few minority of people. And so it -  
15 - I think, you know, still part of the problem is just  
16 racism and misunderstanding of the root causes of these  
17 things.

18 And you know, a lot of the research we've  
19 done, you know, I've -- I heard from people saying it, yet  
20 when you go into talking in policy arenas with government,  
21 it's not until you have these kind of fancy graphs that  
22 they're like, oh, okay. That -- I can see that now.

23 And so I think there still is a lot to  
24 learn, but at the same time -- and a lot to show, but I  
25 still -- but at the same time, we do know a lot of the

1 answers and the things that we need to fix it.

2 **COMMISSIONER QAJAQ ROBINSON:** Thank you.

3 And I think one of the things that also struck me is the  
4 importance of understanding and characterizing and calling  
5 it what it is. And you see the responses to -- well,  
6 there -- you know, like certain senators. "Well, there  
7 were good things that happened in residential school and  
8 we have to acknowledge that"; or you know, the curriculum  
9 questions that relate to that; or even discussion about  
10 the situation is, "Well it wasn't all bad", or you know,  
11 the "get over it".

12 And I'm struck that part of what needs to  
13 happen, and why the research has to continue, but perhaps  
14 the characterization has to be changed is to stop looking  
15 at it as the outcomes, which of course need to be  
16 understood, but understanding better and calling the  
17 actions what they were. Do you know what I mean?

18 And I'll go back one step, and then go back  
19 to that. We have heard from people as recently as in  
20 Quebec City, and this is something we have heard from  
21 other witnesses, that it wasn't cultural genocide, that  
22 it's actual genocide that Indigenous people have  
23 experienced in this country.

24 And based on your conclusions and drawing  
25 of similarities between the realities here and with the

1       holocaust, is this something that you think is -- and I'm  
2       not asking you for a legal opinion -- they look the same,  
3       I guess is the question. Is that a position that, from  
4       your experience and knowledge, you may agree with? That  
5       it's beyond the residential school. Like you can't say  
6       it's residential school, you can't say just Sixties Scoop,  
7       it's that collective act of the State's actions, the  
8       Crown's actions that constitute genocide?

9                   **DR. AMY BOMBAY:** Yes. And I think that  
10       kind of goes back to, you know, again within the academic  
11       literature this notion of historical trauma, and then it's  
12       really about the accumulation of all the things across so  
13       many years. That particularly makes the experience of  
14       colonization particularly harmful, which is why we see the  
15       same affects in other Indigenous -- in other Indigenous  
16       peoples around the world.

17                   **COMMISSIONER QAJAQ ROBINSON:** It's the  
18       impacts of oppression, genocide, and that that is  
19       something that we need to start calling this that  
20       regularly so that it stops being about -- what's the word  
21       when you like find illness in a person? You know what I  
22       mean?

23                   **COMMISSIONER BRIAN EYOLFSON:** M'hm.

24                   **COMMISSIONER QAJAQ ROBINSON:** Like it stops  
25       being about the frailty or the illnesses or the -- of



1 Indigenous peoples, that it's about the State's actions  
2 and the State's attitudes and the State's current actions  
3 as instruments of oppression?

4 **DR. AMY BOMBAY:** Yes, absolutely. And I  
5 think, you know, that's partly why people want to deny it,  
6 is because they don't want to take responsibility.

7 **COMMISSIONER QAJAQ ROBINSON:** Thank you.  
8 Another thing I think we have to put on its head, how we  
9 talk about these things.

10 And I -- so I'm going to go on to another  
11 quick point that I want to get your thoughts on before I  
12 pass the mic. I know you have time limits.

13 In 2016, the Inuit Tapiriit Kanatami  
14 launched their National Inuit Suicide Prevention Strategy.  
15 Are you familiar with it?

16 **DR. AMY BOMBAY:** A little bit.

17 **COMMISSIONER QAJAQ ROBINSON:** Okay.

18 **DR. AMY BOMBAY:** Not much.

19 **COMMISSIONER QAJAQ ROBINSON:** One of the  
20 things that they talk about, and I'll just -- is  
21 protective factors that reduce suicide risks, and there  
22 are six of them. And I wanted to know what your thoughts  
23 are. And if you don't want to go into it because you  
24 don't know the research or the development behind it, I  
25 totally appreciate that.

1                   But these six factors to me, although in  
2                   this case they're speaking to suicide, from what we've  
3                   heard from families and survivors and grassroots folks as  
4                   well as previous studies, I think they speak to what is  
5                   needed to create safe communities and families for  
6                   Indigenous women and girls, and trans and two-spirited.

7                   So the six protective factors that were  
8                   identified were: family strength; coping with acute  
9                   stress; three optimal development, so safe, protective,  
10                  nurturing homes; mental wellness, access to Inuit-specific  
11                  mental health services and supports; social equity was one  
12                  that was identified, so economic equity, educational  
13                  health and other services; and then of course, cultural  
14                  continuity.

15                  Do those -- and that sort of resonated with  
16                  what I read in your work in terms of some of these key  
17                  factors that prevent or help ensure that there's  
18                  resilience to get through those adverse childhood  
19                  experiences.

20                  Do you think that as we look at how to  
21                  address the issue of violence against Indigenous women and  
22                  girls, trans, and two-spirited that these are serious  
23                  things that we have to look at is root solutions?

24                  **DR. AMY BOMBAY:** Yes, absolutely. You  
25                  know, as I've talked about a lot, is if we're looking at

1 violence, it's absolutely you have to consider all of  
2 those things. Really, if you are trying to solve any  
3 health problems that would go, you know, towards overall  
4 well-being as well.

5 **COMMISSIONER QAJAQ ROBINSON:** And it's not  
6 merely enough to enhance policing or to enhance policies;  
7 it's really about these multiple factors within people's  
8 lives?

9 **DR. AMY BOMBAY:** Absolutely.

10 **COMMISSIONER QAJAQ ROBINSON:** Okay. Thank  
11 you. I'm not good at just answering -- asking questions.  
12 I like to make sure I'm understanding the big picture in  
13 getting to connect dots. So thank you so much for your  
14 time. I'm going to pass it to Brian. Meegwetch. Thank  
15 you.

16 **--- QUESTIONS BY COMMISSIONER BRIAN EYOLFSON**

17 **COMMISSIONER BRIAN EYOLFSON:** Dr. Bombay,  
18 thank you very much for coming and providing your evidence  
19 and spending this time with us and talking about your  
20 research.

21 I just had a -- I think, one sort of  
22 question of clarification. I wanted to just ask you about  
23 the last topic you talked about in your presentation about  
24 Indigenous strengths and healing, and your research in  
25 that area. You talked about your research on healing and

1 strength in culture and cultural identity.

2 I'm just wondering if you can explain a  
3 little bit about what your research found, or clarify that  
4 a bit more?

5 **DR. AMY BOMBAY:** Sure. Well, I just  
6 finished -- some of our kind of -- our own empirical  
7 research has shown to that, so I'll talk about that, and I  
8 also recently did a literature review for the First  
9 Nations Information Governance Centre focusing on some of  
10 these things.

11 So I guess first, for our own research, and  
12 the research of others, we've shown -- it's known that for  
13 whatever reason we often find that engagement in cultural  
14 practices are associated with positive outcomes, but when  
15 we look at why that's the case. It could be due to so  
16 many factors. We know that, you know, traditional  
17 teachings around drinking, for example, is associated with  
18 lower drinking. It could be just the social support. By  
19 taking part in that with other people of your community,  
20 it's the spiritual aspect of it, of taking part in  
21 ceremony. So, there's so many pathways by which taking  
22 part in cultural activities can lead to positive outcomes.

23 And, the other thing, I think, that has  
24 come up a lot in our research with urban Indigenous youth  
25 who are often coming from different places or of mixed

1 identities, having lived on and off reserve, looking  
2 Aboriginal versus not, and so, I just want to emphasize  
3 that for some people who are differentially affected by  
4 colonization, who are, you know, differentially separated  
5 from their cultures are finding different ways, and for  
6 some people, it's getting involved in advocacy and  
7 fighting for rights. In some people, it's expressing it  
8 in the way they dress. For some people, it's learning  
9 that language.

10 But, again, I think one of the important  
11 things across the board, no matter how people engage with  
12 their culture, it's feeling good about who you are and  
13 where you come from, and that's that cultural pride, and  
14 we consistently find that that is not only directly  
15 related to, kind of, positive mental health and well  
16 being, but also buffers against things like discrimination  
17 and other aspects of colonization.

18 **COMMISSIONER BRIAN EYOLFSON:** Right. Thank  
19 you very much.

20 **--- QUESTIONS BY CHIEF COMMISSIONER MARION BULLER:**

21 **CHIEF COMMISSIONER MARION BULLER:** Thank  
22 you for joining us, Dr. Bombay. I just have a few  
23 questions. On your PowerPoint, there are a couple of  
24 slides that referred to perceived discrimination, and I  
25 think one of the first slides was exploring the pathways.

1 Can you tell us more about what perceived discrimination  
2 means?

3 **DR. AMY BOMBAY:** Sure. So, when we're  
4 doing our research, we obviously can't observe every  
5 person and see if they're being discriminated against.  
6 So, the way we measure that is by asking people about  
7 different experiences and how much they've experienced  
8 those. And, in this case, we asked about their  
9 experiences in the past year.

10 And so, what we found in that study was  
11 that those who had a parent who went to residential school  
12 were more likely to report experiencing discrimination in  
13 the past year, and that in turn was associated with their  
14 increased risk for depressive symptoms.

15 And so, that was really interesting for us,  
16 and when we went to look to the literature, again, looking  
17 at other groups, we know that being exposed to  
18 discrimination often leads to you being more prone to be  
19 kind of vigilant, because it's your experience and it's  
20 what you're kind of expecting.

21 And so, we wanted to look into that more,  
22 so we did another study that I actually didn't talk about  
23 in my presentation, but we wanted to look at this a little  
24 bit more. And so, what we did was we invited people who  
25 were affected by residential schools and not, and we asked

1       them about their cultural identity and their depressive  
2       symptoms, and we presented them with different kind of  
3       vignettes presenting scenarios of either blatant or subtle  
4       forms of discrimination, and asked them, "Would you  
5       attribute these things to discrimination?" And, "How  
6       threatened would you feel in that situation?"

7                   And so, what we found was that those with  
8       that history of residential schools, they were more likely  
9       to report past discrimination, which put them more kind of  
10      likely to -- in those new scenarios attribute those things  
11      to discrimination. So, again, it's this kind of cycle of  
12      you experience discrimination, and then you perceive it.

13                   We also found that they're more likely to  
14      be really identified with their Indigenous identity, and  
15      that having -- thinking more about your Indigenous  
16      identity kind of out in society will make you more likely  
17      to attribute certain things to your cultural background,  
18      and that that in turn was associated with depressive  
19      symptoms. So, it's this kind of cycle.

20                   But, again, that's not to say that  
21      identifying, you know, with cultures is bad. We know it's  
22      protective, but I think -- and I think the other thing to  
23      point out is that -- and we point out this in this study  
24      is that another factor is that people who often kind of  
25      outwardly identify with their culture are actually more

1 likely to be discriminated against as well.

2 So, it's kind of -- part of it is  
3 psychological, and part of it, people might actually be  
4 more discriminated against. So, there's, you know, a lot  
5 of different kind of factors going on.

6 **CHIEF COMMISSIONER MARION BULLER:** Very  
7 cyclical anyway, yes. Then, the next area of questioning  
8 I have for you, and it doesn't pertain specifically to  
9 your direct research, but I'd like to talk to you more  
10 about *laissez-faire* racism, which I take to be a type of  
11 victim blaming where someone will essentially blame a  
12 victim for a poor economic situation or a poor social  
13 situation as a result of cultural inferiority as opposed  
14 to colour. Is that a correct summary or definition of  
15 *laissez-faire* racism?

16 **DR. AMY BOMBAY:** It is except it can be in  
17 relation to any, you know, oppressed social group. But,  
18 yes.

19 **CHIEF COMMISSIONER MARION BULLER:** So,  
20 going from there, what we've heard and what we've read all  
21 across Canada has been that the media will portray very  
22 often women who have been killed, girls who have been  
23 killed or gone missing as being prostitutes, drug addicts,  
24 living on the streets. I don't even like repeating them,  
25 but they're there. Is that a form of *laissez-faire*



1 racism?

2 **DR. AMY BOMBAY:** Yes. I would say  
3 particularly if it's done in -- you know, intentionally.  
4 Some people might not be doing it intentionally, but  
5 collectively, it's reinforcing certainly those attitudes,  
6 whether or not people know it or not.

7 **CHIEF COMMISSIONER MARION BULLER:** Then,  
8 going to earlier topics of political will making change in  
9 the context of *laissez-faire* racism, within these four  
10 walls and other places, we know how rich our Indigenous  
11 cultures are. That isn't shared always outside of these  
12 four walls, unfortunately. So, is lack of political will,  
13 as we call it sometimes, really an expression of *laissez-*  
14 *faire* racism, especially when it's -- when we're dealing  
15 with Indigenous people?

16 **DR. AMY BOMBAY:** It's certainly -- you  
17 know, I can't say it's a causal thing but it's certainly a  
18 predictor and a risk factor for that. We actually did a  
19 study where we invited Indigenous and non-Indigenous  
20 peoples to take a survey after the apology, and we asked  
21 them about some of these types of *laissez-faire* attitudes,  
22 and we asked them about their knowledge about the  
23 residential school system, to what extent did they feel  
24 that the residential school system continued to impact  
25 Indigenous peoples, and also about their perceptions about

1 continued ongoing racism towards Indigenous peoples, and  
2 we found that it was the initial kind of lack of awareness  
3 about residential schools, and the -- which led to those  
4 perceptions that it didn't have long-term effects.

5 And so, I can show you -- I'm kind of going  
6 through one of these graphs which was associated with  
7 these *laissez-faire* attitudes, which was associated with  
8 their opinion about the need of whether there was need for  
9 further government support for Indigenous people. So, we  
10 did show that exact kind of associations between those  
11 attitudes and support for Indigenous peoples.

12 **CHIEF COMMISSIONER MARION BULLER:** Could we  
13 have a copy of that research?

14 **DR. AMY BOMBAY:** So, the problem is that  
15 it's not published yet. And so, those are analyses that  
16 we've done, but we haven't actually published them.

17 **CHIEF COMMISSIONER MARION BULLER:** Do you  
18 have an anticipated publishing date?

19 **DR. AMY BOMBAY:** I've got to clear some --  
20 yes, I hope as soon as possible.

21 **CHIEF COMMISSIONER MARION BULLER:** Well, if  
22 it's before the April, could you make sure, please, that  
23 we get a copy?

24 **DR. AMY BOMBAY:** Absolutely. I will push  
25 it up on my priority list, too.

1                   **CHIEF COMMISSIONER MARION BULLER:** Thank  
2 you. Going back to, again, laissez-faire racism and how  
3 that affects Indigenous people across Canada, and  
4 non-Indigenous people across Canada as well.

5                   How -- I suppose this is a very large  
6 question, how do we break that cycle of laissez-faire  
7 racism, not only at the policy level or the government  
8 level, but at community levels, next door neighbour  
9 levels? Not only to change policy, but to get -- to  
10 rebuild and move away from self-hatred that has been  
11 taught to Indigenous people for generations?

12                  **DR. AMY BOMBAY:** So do you mean within  
13 Indigenous communities, or...?

14                  **CHIEF COMMISSIONER MARION BULLER:** Well,  
15 let's start with the big picture first of non-Indigenous  
16 governments ---

17                  **DR. AMY BOMBAY:** M'hm.

18                  **CHIEF COMMISSIONER MARION BULLER:** ---  
19 federal, provincial, territorial policymakers and  
20 lawmakers, then let's go to Band governments, and then  
21 let's go to individuals.

22                  **DR. AMY BOMBAY:** Sure. I've been teaching  
23 in the medical school at Dalhousie for 4 years now, and  
24 I'm continually sharing a lot of these research findings,  
25 and with every -- and so I'm often presenting to medical

1 students and also current physicians. And it always  
2 strikes me the number of people who still don't know about  
3 residential schools and who still don't know about, you  
4 know, other aspects of colonization, how it's impacted  
5 people. So I think still there's such a need for basic  
6 awareness. And I know that TRC Calls to Action called for  
7 that -- those mandatory training and education for people  
8 in all those systems.

9 And also, you know, just as, you know,  
10 these kind of cycles of health are intergenerational so  
11 are attitudes. And so with non-Indigenous people, those  
12 laissez-faire attitudes are transferred across  
13 generations. And so it's about, again, intervening early  
14 and having our education system, you know, just completely  
15 change the way they depict Indigenous peoples and talk  
16 about the history.

17 **CHIEF COMMISSIONER MARION BULLER:** So let's  
18 turn to I think what one of the other witnesses referred  
19 to earlier about how we were taught to be ashamed of who  
20 we are or to hate who we are, and each other for that  
21 matter. Does laissez-faire racism feed into that self-  
22 hatred, and vice-versa?

23 **DR. AMY BOMBAY:** Yeah, absolutely. I know  
24 I think a lot of the stories we heard that it started in  
25 residential school from that pervasive kind of message

1 that Indigenous people were bad, that they -- I don't like  
2 repeating things, but just so many bad things. And  
3 certainly, we saw that in the next generations they  
4 reproduced those feelings.

5 And so when youth today go on websites and  
6 read about Indigenous peoples and then they look at the  
7 comments after, and they see all of these things, "just  
8 get over it", "figure it out", "why can't you just", and  
9 absolutely that's the same messages that were given in  
10 residential schools, and they're going to have the same  
11 impacts, and they do have the same impacts on youth. We  
12 hear from them that it's so hard to look at those things,  
13 and it definitely has impacts on mental health and their  
14 overall well-being.

15 **CHIEF COMMISSIONER MARION BULLER:** Well,  
16 thank you.

17 I'm mindful of the time. For once, we're  
18 ahead of schedule. We'll stop in a few moments for our  
19 afternoon break for 15 minutes.

20 But before we do that, Dr. Bombay, on  
21 behalf of all of us here, it's been a great experience to  
22 listen to you, to talk with you, to read your documents.  
23 Most of all, to hear your commitment and your love for  
24 your work and your people.

25 **DR. AMY BOMBAY:** Thank you. Meegwetch.

1                   **CHIEF COMMISSIONER MARION BULLER:** So  
2                   having said that, we have a small gift in exchange for the  
3                   gifts that you've given us -- your time, your experience,  
4                   your knowledge, and might I say, a pretty good sense of  
5                   humour.

6                   So for you, to lift you up on those days  
7                   when you need lifting up, and on those days when you know  
8                   you can go a little higher, we have an eagle feather for  
9                   you, because we know you have hard work to do, we  
10                  appreciate what you do, and we want to do what we can to  
11                  strengthen and support you in the work that you do. So  
12                  thank you very much.

13                  **DR. AMY BOMBAY:** Thank you. That means a  
14                  lot.

15                  **(APPLAUSE/APPLAUDISSEMENTS)**

16                  **CHIEF COMMISSIONER MARION BULLER:** We'll  
17                  take a 15-minute break. Thank you.  
18                  --- Upon recessing at 3:09 p.m./L'audience est suspendue à  
19                  15h09  
20                  --- Upon resuming at 3:37 p.m./L'audience est reprise à  
21                  15h37

22                  **PANEL 1, Previously affirmed:**

23                  **MS. MEREDITH PORTER:** ...everybody to take  
24                  their seats.

25                  Thank you.

1 Chief Commissioner and Commissioners, well  
2 I guess if you are prepared to reconvene and begin with  
3 the questioning of, I suppose, either Ms. Clark or  
4 Ms. Morgan at this time.

5 **--- QUESTIONS BY CHIEF COMMISSIONER MARION BULLER**

6 **CHIEF COMMISSIONER MARION BULLER:** This  
7 time, I get to go first.

8 To start off with, just a couple of  
9 clarifications, Ms. Clark. About the -- get the title  
10 right -- Peer Victim Support Training Program, Peer Leader  
11 Mental Health Training Program, that's a 3-day workshop.  
12 How often do you operate these workshops?

13 **MS. SARAH CLARK:** As I said before, right  
14 now we're under development.

15 **CHIEF COMMISSIONER MARION BULLER:** Right.

16 **MS. SARAH CLARK:** So we had an evaluation  
17 done, and we discovered that we need much more Inuit  
18 content in terms of videos and more heavily on the history  
19 so that people can have context for what we're talking  
20 about. So at the moment, we're only set to do three  
21 pilots this year and to evaluate that.

22 **CHIEF COMMISSIONER MARION BULLER:** You  
23 mentioned the locations. Could you give those to me  
24 again, please?

25 **MS. SARAH CLARK:** Of where we delivered?

1                   **CHIEF COMMISSIONER MARION BULLER:** Yeah....

2                   **MS. SARAH CLARK:** We've done it in Iqaluit,  
3 I think three times; Baker Lake two; Chesterfield Inlet  
4 and Rankin and also Nowyat. I was mistaken yesterday.  
5 Sorry.

6                   **CHIEF COMMISSIONER MARION BULLER:** No,  
7 that's fine. Thank you very much. Ms. Morgan, just a few  
8 questions for you. Earlier on in your testimony, you said  
9 that there are things that can be done right away and  
10 would cost no money in order to improve the lives of  
11 children and young people. Can you give me some idea of  
12 what some of those things are?

13                   **MS. CORA MORGAN:** One of the things that  
14 our office is working on right now is when I first started  
15 this role, and I don't have a child welfare background,  
16 when we were doing this work and we were challenging  
17 agencies, there would be agency workers that would come  
18 forward, and they would, you know, quietly try and point  
19 me in directions to look at certain things.

20                                 And so, I had heard from a couple of  
21 workers that, you know -- and it was talked about earlier  
22 that the system is overburdened with administration and  
23 paperwork. And so, for a child to come into care  
24 requires, in Manitoba, approximately 60 forms that need to  
25 be filled out. And so, when a child is returned or



1 considered for reunification, there's almost equally the  
2 amount of forms that need to be filled out.

3 And so, it was suggested to me by a couple  
4 of workers that there needs to be evaluations to ensure  
5 that -- for audits done on files to ensure that  
6 reunification is looked at and time dedicated to  
7 reunifying children, because if a worker sends a child  
8 home, then the likelihood is that they'll have to take a  
9 brand-new child into their case load, that would require  
10 another 60-plus forms.

11 And so, one of the recommendations we had  
12 suggested to the Manitoba government that they work  
13 towards setting aside the time to audit the files and  
14 identify, you know, people to be able to look at  
15 reunifying and expediting that reunification of children.

16 And, for newborn babies that are  
17 apprehended from the hospital, a lot of times, what will  
18 happen is an agency in Winnipeg will open the file for the  
19 -- issue the birth alert, and it could be unbeknownst to  
20 the mother that there's a birth alert on their baby, and  
21 that mom will go throughout her pregnancy, and she will be  
22 at the hospital, deliver her baby, and then get a letter  
23 from the agency that her baby is going to be apprehended.

24 And so, a switch in process would be that  
25 as soon as that file is -- or that birth alert is issued,

1 that it's transferred to the appropriate agency, and the  
2 agency looks at the circumstance of the mom upfront and,  
3 you know, look at if there's ways to address things before  
4 baby comes into the world instead of waiting for baby to  
5 be born.

6 And so, those are just two quick examples  
7 of ways to just reorganize resources to be able to have  
8 impacts for moms and babies and children.

9 **CHIEF COMMISSIONER MARION BULLER:** Thank  
10 you. We've heard a lot about supports for mothers and  
11 grandmothers, and I'm not asking this by way of criticism  
12 at all, but where are the fathers in this process?

13 **MS. CORA MORGAN:** When we first started the  
14 office three years ago, we had taken a stat about how many  
15 women we were supporting and, you know, it was about 75  
16 percent was the mothers coming forward, and then about 20  
17 percent of the time it was grandmothers coming forward to  
18 try and get their grandchildren out of the system. And  
19 then we had kind of a small pocket of dads that were  
20 coming forward, and grandfathers. We had a couple of  
21 grandfathers as well.

22 And so, over time, we're seeing more and  
23 more fathers coming forward, but a lot of times, the way  
24 that the system is designed, agencies seemed to prioritize  
25 woman than they do fathers, and fathers don't necessarily

1       feel they have -- not that our mothers have lots of  
2       rights, but they have the perception that they have less  
3       rights, particularly if fathers have any kind of criminal  
4       record. So, it makes it a little more challenging.

5                       But, that's an area that our office is  
6       working to focus on. And so, now we have programming for  
7       men as well, so that way, we open the space for them to be  
8       able to come forward and pursue that reunification or  
9       access to their children, because not always are families  
10      coming to us just to have their children -- not just.  
11      But, to have their children returned. Some of them are  
12      coming to us just to have access to their children and  
13      visits. And so, we are wanting to make space so that men  
14      feel that they can do that as well.

15                      **CHIEF COMMISSIONER MARION BULLER:** Sorry, I  
16      can't read my handwriting. I'm just curious about one  
17      comment you made, that mothers have been told that they're  
18      not allowed to bring someone with them to court, a support  
19      person, I would assume. Who is telling them that, do you  
20      know?

21                      **MS. CORA MORGAN:** Well, it's -- before I  
22      worked in this area, I worked in the area of Justice. So,  
23      if someone has any kind of charges that they're going to  
24      court for, or any trial, the courtrooms are open to  
25      everybody. You can sit at court all day long and listen

1 to everything that's on the docket.

2 In this, all of the families are in the  
3 corridor, and when it's a family's turn, they're called  
4 in, and they're told they're not allowed to bring supports  
5 in with them.

6 There have -- I've seen a very small  
7 fraction of exceptions made, and I guess it all depends on  
8 the judge or the master that is -- the docket or the...

9 **CHIEF COMMISSIONER MARION BULLER:** Is it  
10 the -- is it the judge, the master or the lawyers telling  
11 the mothers this?

12 **MS. CORA MORGAN:** Sometimes it's lawyers as  
13 well. Yes. We've heard a lot of times that moms have  
14 been told that they can't speak in court as well.

15 **CHIEF COMMISSIONER MARION BULLER:** By their  
16 lawyers or by a judge or a master?

17 **MS. CORA MORGAN:** But their lawyers.

18 **CHIEF COMMISSIONER MARION BULLER:** In some  
19 parts of Canada, social workers, ministry social workers,  
20 are not allowed on reserve land unless they have  
21 permission from the band to enter the reserve land and/or  
22 are escorted by a band member or a council member at all  
23 times while they're on band land.

24 In some communities, this has created  
25 positive change, actually, on the part of social workers

1 and not apprehending children immediately. In other  
2 cases, it hasn't. But, do you see any application of this  
3 to an urban setting or a town setting? Is there a way  
4 that this work can't be done by a social worker alone?

5 **MS. CORA MORGAN:** Well, I think -- and  
6 what's challenging is that there isn't consistency across  
7 the country. And so, different provinces operate  
8 differently, and there's more -- you know, I've heard of  
9 Alberta where if a child comes into care, say, in an urban  
10 centre, there's an automatic call to the First Nation, and  
11 the First Nation makes a determination. So, if a child is  
12 in immediate need of protection, the child is picked up,  
13 and then the First Nation picks the child up and then  
14 finds appropriate family to place.

15 We don't have those considerations here in  
16 Manitoba, and when a child is picked up, it's  
17 automatically into a legal process. So, in Alberta, the  
18 way that it was explained to me is that -- I don't like  
19 using myself as an example, but if that were to happen and  
20 they would call my First Nation, and my First Nation would  
21 seek out ...my mom or my brother and place the children  
22 there, and then I would have to go to my family and, you  
23 know, get my children back. If it was a repeat offense,  
24 then it would engage the courts.

25 In Manitoba, you know, children will come

1 under apprehension. Sometimes, our mothers will be kind  
2 of coerced into signing a Voluntary Placement Agreement.  
3 You know, we've heard numerous times where moms are told  
4 well if you -- the agency will say, "Well, if you sign  
5 this, then you're going to have more access to your  
6 children and you're going to have more say."

7 And they might not even the grounds for  
8 apprehension, but if they get that agreement from the mom,  
9 then the children are taken. If there is grounds, in  
10 their view, then if they've -- they do a 3-month order or  
11 a 6-month order, they'll take the children and then it's  
12 automatically in the court process.

13 And you know, the things that we're finding  
14 too is that when a child is taken, the parents are  
15 supposed to be given a case plan of all the things that  
16 they need to do to get their children back, but you know,  
17 we've had even cases where, you know, parents haven't been  
18 given those instructions of what they need to do in order  
19 to get their children back. And so if, you know, you're a  
20 young mom, and you don't understand...

21 You know, I had a mom who couldn't read and  
22 she was told -- and was from my own community, and she was  
23 told what it was -- what it said, and she was told that  
24 she had to sign it. And she signed it. And you know,  
25 those considerations aren't allowed, and you know, there

1 should have been more care provided to that mother, and --  
2 you know, things should just be done differently.

3 But you know, I think part of it is that we  
4 need far more education on our rights and more consistency  
5 across the country and more mechanisms where we have, you  
6 know, our Indigenous voices influencing how the system  
7 operates, and ultimately, you know, jurisdiction over our  
8 own children.

9 **CHIEF COMMISSIONER MARION BULLER:** Do you  
10 think, knowing the situation in Winnipeg, in particular,  
11 that there would be room for something along the lines of  
12 a Memorandum of Understanding between your organization,  
13 and perhaps others, and the government so that a mother  
14 and/or mother and father would not be seen alone, they  
15 would be -- by a social worker? In other words, somebody  
16 from your organization would have to be present at the  
17 time of removal?

18 **MS. CORA MORGAN:** And I think that would be  
19 key, and I always think about developing these grandmother  
20 councils at -- in the First Nations level to be that  
21 mechanism of support.

22 For us in Manitoba, we have this -- I don't  
23 know if -- I call it a fallacy of devolution. And so we  
24 have agencies in all of our First Nation communities, and  
25 that allows for workers to be in each of our communities

1 to facilitate, but they're ultimately -- they're supposed  
2 to be a movement to asserting jurisdiction, but instead,  
3 the provincial government just has control over the way  
4 everything is done and everyone -- all these different  
5 agencies have to follow the *Act* and the standards, the  
6 funding model, and the court processes all under the  
7 provincial government. So I think that's what, you know,  
8 hampers and allows for what's happened.

9           And you know, even for our First Nations to  
10 have -- our leadership in First Nations to have more of a  
11 say, there has been, in my view, you know, some attacks on  
12 their voice to be able to influence what's happening at  
13 the community level. You know, there was a lawsuit and  
14 different things that have happened, and then when there  
15 was certain influence over things -- because we used to  
16 have local childcare committees that would have -- be that  
17 mechanism in the community level.

18           And what happened was over time, since we  
19 had this apparent devolution, the province would go in,  
20 and in many of our agencies, they did kind of a third-  
21 party management if they determined or had concerns about  
22 how the agency was running. And when they put those third  
23 party management arrangements in place, the numbers of  
24 kids went -- in care grew, and a lot of these agencies  
25 lost those local childcare committees when they were under



1 this administrative arrangement.

2 And so when the agency was finally given  
3 back, even though it was still under provincial control,  
4 those mechanisms were gone from the system, or from the  
5 First Nations. So those protections were gone.

6 You know, before when they had those local  
7 childcare committees they have intervenors. That if a  
8 child was a need of protection, a person in the community  
9 was dedicated to go around the community and find a home  
10 for the child to be placed in, in the interim, or whatever  
11 arrangement was arrived on.

12 So you know, some of those things were kind  
13 of stripped away from our agencies to -- and from our  
14 communities to have that local voice over the children and  
15 families.

16 **CHIEF COMMISSIONER MARION BULLER:** Do you  
17 think those local childcare committees can be reinstated?

18 **MS. CORA MORGAN:** Well -- and that is one  
19 of the hopes, and that could be another fairly cost  
20 effective mechanism that could be in place to ensure that  
21 those protections are afforded to our families.

22 **CHIEF COMMISSIONER MARION BULLER:** M'hm.  
23 Okay. Thank you both very much.

24 **MS. CORA MORGAN:** Thank you.

25 **--- QUESTIONS BY COMMISSIONER MICHÈLE AUDETTE**

1                                   **COMMISSIONER MICHÈLE AUDETTE:** Merci,  
2                    beaucoup, Commissaire en chef.

3                                    First of all, I want to apologize because  
4                    you notice I wasn't in the room, and the sad reason is  
5                    that we share here, my family, my colleagues, my friend,  
6                    responsibilities or the love that we put in this important  
7                    journey. So I was asked by some women to go meet the  
8                    family of Mary Madeline. So I was there on -- for us, all  
9                    of us in this room. So it wasn't easy, but I knew that a  
10                   lot of love from this room was for the family. So I  
11                   apologize.

12                                    But I want to take this opportunity to say  
13                    thank you so much. I was able to say it to Dr. Bombay.  
14                    Thank you so much to come here. Probably you were  
15                    stressed, probably you were finally it's about time,  
16                    whatever. I just want to say that it was very powerful,  
17                    very important, very -- that's me. I sometimes like  
18                    unbelievable that we're still like this here in Canada in  
19                    2018, and that you're still standing up for our families  
20                    and children, most of all, for the women.

21                                    And I think my colleague,  
22                    Commissioner Robinson, was able to talk about -- with one  
23                    of the witness, we've heard officially the word of  
24                    "genocide". So Canada needs to hear that, needs to hear  
25                    also all the work you do for many, many, many of us.

1                   And I have to finish with this, to say that  
2                   you brought us so many solution, so many recommendation.  
3                   Same with Dr. Bombay. I have to commend also the people  
4                   that I was able to hear from the party with standing.  
5                   That, right on. Great question. Important question. And  
6                   also making sure that it become in our reflection for  
7                   recommendation.

8                   And I don't know how you do it, you and  
9                   your team, the people who came, and you're at the  
10                  frontline on a crisis mode every day. So you have all my  
11                  respect, all my respect.

12                  And also, for you to go live in the North,  
13                  the real North, where there's a debate here with  
14                  Commissioner Robinson. I'm from the North, but there's  
15                  another North. And I was able to touch a little bit the  
16                  culture of that beautiful -- the beautiful people of that  
17                  North, the Inuit, and I always believed that they're the  
18                  most forgotten.

19                  So the Inquiry is a tool, an opportunity  
20                  also, to make sure that the voice of Inuit, and we have a  
21                  few lawyers in this room that represent organization, make  
22                  sure that they're part of this process, report, and  
23                  recommendations. So thank you very much. Merci.

24                  **COMMISSIONER BRIAN EYOLFSON:** I'd like to  
25                  take this opportunity to thank you both as well for coming

1 and spending all this time with us and sharing so much  
2 information. Thank you for telling us about the work that  
3 you do, it is very much appreciated.

4 And, like my colleague, Commissioner  
5 Audette said, there were so many good questions asked  
6 today that I think the questions that I had have all been  
7 covered off, so I am not going to trouble you with any  
8 further questions. I just want to say thank you very much  
9 for your evidence again, and I will pass the mic on to  
10 Commissioner Robinson. Chi-meegwetch.

11 **MS. SARAH CLARK:** Meegwetch.

12 **--- QUESTIONS BY COMMISSIONER QAJAQ ROBINSON:**

13 **COMMISSIONER QAJAQ ROBINSON:** I always have  
14 questions. I am not going to apologize, but I always do  
15 and I do today as well for both of you, so thank you so  
16 much. Sarah, I can start with you, and you are okay with  
17 me calling you, Sarah?

18 **MS. SARAH CLARK:** Mm-hmm.

19 **COMMISSIONER QAJAQ ROBINSON:** Okay, thank  
20 you. I want to thank you for your presentation and  
21 sharing with us, not only the work of the foundation, but  
22 also some of the work that you are involved with at  
23 Tukisigiarvik. We heard from (Speaking Indigenous  
24 language) while we were in Iqaluit, and she spoke of the  
25 work that is done at Tukisigiarvik.

1                   She also spoke of the importance of working  
2 together, different cultures, Inuit, non-Inuit with a  
3 shared respect. And, I think if she has got you running  
4 programs, that says a lot, and I just want to say that,  
5 because the work that Tukisigiavik does within the  
6 community, it is born from that community, for that  
7 community and it is a beacon that we can all learn from.

8                   I also want to just comment on the peer  
9 training in an environment where more than half the  
10 population is under the age of 25 and where the service  
11 inequities are so glaring. We have heard from young  
12 people who have watched their friends suffer in violent  
13 relationships, and lives been lost, and not having any  
14 tools to do anything, and then themselves, within the  
15 community, and that that has a long-lasting impact on the  
16 sense of what I could have done. So, I think it is very  
17 important that youth are given those tools and empowered.  
18 I wanted to -- so I just wanted to make that comment and  
19 commend that work.

20                   With respect to the centre for the  
21 children, I worked as a prosecutor in Nunavut for a number  
22 of years, so I was in that box ---

23                   **MS. SARAH CLARK:** Yes.

24                   **COMMISSIONER QAJAQ ROBINSON:** --- on your  
25 chart. And, I can tell you how difficult it was to work

1 on cases involving children and know that when it came to  
2 different agencies' involvements, it was never for the  
3 purpose of the child's well-being.

4 It was, if you were the police, to gather  
5 evidence and address safety issues if they were required,  
6 but not well-being; you know? Restraining orders, no  
7 contact orders, prohibited contact. That didn't always --  
8 they were factors, but it wasn't about well-being. As a  
9 prosecutor, the objective was to prosecute the case. Do I  
10 have reasonable grounds to proceed? Is there a reasonable  
11 chance of conviction? So, I want to commend this work of  
12 making the work of these agencies focused and child-  
13 centred, and to be focused on having the least negative  
14 impact possible.

15 I wanted to draw a connection and go a  
16 little bit further on one point that you made, and I think  
17 it was on the last page of your PowerPoint when speaking  
18 to recommendations. And, the fifth recommendation is on  
19 True Integration of Inuit Qaujimajatuqangit Principles.  
20 It is often called Inuit societal values. As a lawyer, I  
21 called them laws.

22 And, as I looked at this chart, I see the  
23 different jurisdictions. So, Child and Family Services is  
24 under the territorial government. Prosecutions is  
25 federal. Victim Services is a combination of territorial

1 and non-for-profit or NGOs. Mental health is territorial  
2 with some federal jurisdiction under Health Canada if  
3 (indiscernible) involved. Medical services, same thing.  
4 RCMP is federal.

5 I see different layers of government and  
6 different layers of power. And, when I look at how you  
7 truly integrate Inuit Qaujimajatuqangit and Inuit laws  
8 within these agencies, I look at who has the power to make  
9 the laws that govern these agencies. When you -- so I see  
10 that as a challenge when it comes to true integration, and  
11 I was wondering if you could speak to that a little bit  
12 more and what you may think a path forward is with that.

13 **MS. SARAH CLARK:** Thank you very much for  
14 your words about the work that we are doing, it means a  
15 lot. I think one of the themes that has come out from our  
16 talks this -- from this panel, especially from Cora, is  
17 the discrepancy in what each culture thinks is best for  
18 the child. And, she talks a lot about being outside of  
19 the system, and that is really important.

20 And, right now, the power is with the  
21 government, with the territorial government and the  
22 federal government. But, we also -- and, at this point,  
23 we have all of those people at the table working with us.  
24 And, signing an MOU that says they will try their best to  
25 work within IQ principles and Inuit societal values, and I

1 know that that is in a lot of documents and that is not  
2 necessarily going to change anything, our hope with this  
3 is that having NTI at the table and also having an NGO at  
4 the table who are actually providing the services of the  
5 centre, we can start very small with little changes in  
6 terms of having the location be familiar and culturally  
7 safe, having language services available and having our  
8 mental health and our healing be more entrenched in  
9 cultural values. That is where we start.

10 And, I think from there, as very --  
11 luckily, one of the lawyers said today, having a child  
12 advocacy network that can potentially even advocate at  
13 higher levels of government, that could be something that  
14 we work on in the future. But, right now, we are starting  
15 with creating that team. And, with every interaction that  
16 we have with our multi-disciplinary team and our members,  
17 like lawyers and RCMP, every time we have that contact, we  
18 are able to educate people and we are able to keep them  
19 accountable to the values that -- the Inuit societal  
20 values at that time. That is what our hope is.

21 **COMMISSIONER QAJAQ ROBINSON:** Thank you. I  
22 know under the Nunavut Land Claim Agreement, Article 32,  
23 governments, when dealing with all matters that relate to  
24 Inuit culture, which I think are all matters -- I am not  
25 going into a debate about 32 with anybody, but to -- I



1 think when you are talking about family and care for  
2 children, that is fundamental to Inuit society and  
3 culture. It requires a partnership between states and NTI  
4 or Inuit.

5 To better serve the children at the centre  
6 of this circle, do you think that these agencies, RCMP,  
7 Victim Services, prosecution, Child/Family Services,  
8 should be engaging in a fulsome review of their laws and  
9 policies in relation to how to ensure it best serves the  
10 kids? As you said, understanding that what is in the best  
11 of the child in full partnership with NTI?

12 **MS. SARAH CLARK:** Yes, that would be. And,  
13 I just want to say, the people that I work with that are  
14 working, like you did, in the prosecution or with the  
15 RCMP, they all -- they work very hard and they all, I  
16 mean, this is not all, but the people that I work with are  
17 all trying to do their job the best they can, and they  
18 don't always have access to the time, and that's why we  
19 try and decrease the work burden off of those agencies as  
20 well and educate people where we can.

21 **COMMISSIONER QAJAQ ROBINSON:** Wonderful.  
22 Thank you so much for being with us, answering my  
23 questions, and spending two days here. Nakurmiik.  
24 Qujannamiik.

25 Cora, can I call you Cora? So dumb.

1       Sorry. I want to thank you so much for sharing with us  
2       and talking about the role as the advocate and the things  
3       that you have seen. I think that you talked about -- one  
4       of my main questions was about the delegation or the  
5       devolution and the fallacy of that. You spoke about that,  
6       but I'd like to give you an opportunity to talk about what  
7       is -- what is the difference between that delegation or  
8       devolution and jurisdiction? Because you see a lot of  
9       government agencies. Well, yes, you know, whether it's  
10      policing or there's been some cases where delivery of  
11      FNIHB has been transferred to, for example, the  
12      Nunatsiavut government, self-government, they have taken  
13      that over.

14                    But, it's these acts of, here, we'll give  
15      you what we're doing and you can do what we were doing.  
16      And, that that is sometimes characterized or is asserted  
17      to be a form of jurisdiction or self-determination. And,  
18      I'd like to hear your thoughts on that fallacy.

19                    **MS. CORA MORGAN:** Well, I think, you know,  
20      the language of delegation, it's -- it's still never  
21      giving up control. It's still imposed. It's still  
22      prescribed. It's still -- you know, as long as you follow  
23      the rules, we'll let you administer, and the many times,  
24      you know, you've heard lost of people talk about getting  
25      our own people to administer the poverty or the -- you

1 know, the despair or the -- and so, it's always keeping us  
2 in a box and not allowing for, you know, free will to be  
3 able to fully return to those customary ways or, you know,  
4 our own world view of how things should be.

5 So, I think it's still -- you know, it's  
6 still -- they're still holding onto the purse strings.  
7 They're still, you know, imposing the law, the standards,  
8 the policy. And so, you know, until they can let go of  
9 those things, we're never going to -- we'll make  
10 improvements in the confined areas that we're able to, but  
11 we can never, you know, create that broader change that's  
12 needed.

13 **COMMISSIONER QAJAQ ROBINSON:** Thank you. I  
14 think that that is a key part of the puzzle, that it's  
15 about self-determination, and that in and of itself is  
16 being a very important right that is recognized, but also,  
17 what's effective. So, thank you for that.

18 Throughout the testimonies, we've heard the  
19 importance of -- of course, and you've shared with us the  
20 importance of the Indigenous voice being part of decision  
21 making and work, but we've also heard a lot about the  
22 importance of those with lived experience.

23 We heard when we were in -- oh, what city  
24 was that? Calgary from Ms. Anderson, I believe, who runs  
25 a -- is it a shelter here in Winnipeg? Yes. She was

1 talking about the importance of when you're looking at the  
2 issue of sexual exploitation, and when the police are  
3 looking at developing task forces and plans and techniques  
4 that they should be talking to the girls, that you need to  
5 talk to those with lived experience, because they know the  
6 tactics. They know where the johns and the pimps are  
7 going to hang out. They know the game that's being  
8 played.

9                   And, we've heard that about all sorts of  
10 different services that are available or not, and how  
11 fundamental the knowledge and the wisdom of those with  
12 lived experience is to those services. I was wondering if  
13 you had some thoughts on that, the importance of hearing  
14 from the women and the children and the families that you  
15 work with at the highest level?

16                   **MS. CORA MORGAN:** Well, I think it's  
17 critical, and I think that, you know, our office has seen  
18 success and growth and all of those things. But, at the  
19 end of the day, you know, a lot of it is attributed to our  
20 families and, you know, before our office existed, you  
21 know, our families were separated. They were suffering in  
22 silence, and there was no one stringing together how much  
23 wrong there is with the way things are done. And, you  
24 know, I think with our First Nations leadership and being  
25 able to listen and communicate, you know. What

1 precipitated our office to begin with was a commitment  
2 from the leadership to hear from grassroots, and that's  
3 what sparked the creation of our office.

4 And, once we created our office, it was the  
5 voices of our families and their experiences that allowed  
6 for the response in some areas, and for our office and our  
7 leadership to have a stronger voice when it came to what  
8 is happening to our families.

9 And, I think about, you know, in the areas  
10 that there's still no voice for issues. You know, there's  
11 a voice for missing and murdered. There's voices for  
12 children in care. We still need voices in the justice  
13 system, and at the end of the day, all of these issues are  
14 interconnected, and that's why, you know, looking at the  
15 roots of where all of these social issues are coming from,  
16 and I think, you know, Dr. Bombay talked about some of  
17 those roots in the residential school and those rippling  
18 effects. And, you know, people were talking about get  
19 over it, and you know, those things. And, at the end of  
20 the day, you have survivors that still haven't even  
21 personally come to terms and, you know, in our own  
22 families, you know, my own -- in my own family, you know,  
23 my grandmother will never share with any of us what her  
24 experience was.

25 And so, she protects us, but at the end of

1 the day, you can't impose those things on people when we  
2 haven't even come to terms or acknowledged that in our  
3 family, or looked at how it touched us all. And, I think  
4 that it's important to hear from our grassroots people and  
5 part of why we are in this mess is people who perceive to  
6 be above us are looking down on us in manipulating things  
7 on how they think we should live our lives, or how we  
8 should take children, or how we should, you know, offer  
9 service. All of those things are impositions. And so, it  
10 just -- and this idea of devolution, you know, it's just  
11 distracting us from being able to look at the roots of  
12 things, and able to appropriately fix or repair harm.

13 And so, you know, I think that in anything  
14 that we set out to do, it's the voice of our grassroots  
15 people that has to be listened to, because, you know, we  
16 don't need anymore imposition. That's how we stay where  
17 we are, in my view.

18 **COMMISSIONER QAJAQ ROBINSON:** Yes, thank  
19 you. As I listened to you talk, and I'll go to Darrin's  
20 analogy of the old house and building a new house.

21 And one of the biggest gaps that I heard,  
22 as I heard you speak, and a lot of the evidence we heard  
23 today sort of coming all together in my head, was really  
24 the lack of oversight and accountability of these  
25 agencies. And they need to have strong tools for

1           Indigenous families and children's going through --  
2           Indigenous families and children going through this system  
3           to protect themselves against the system.

4                         And it struck me, I agree that, you know,  
5           renovations on the old house doesn't make a lot of sense,  
6           but the new house won't be built overnight.

7                         **MS. CORA MORGAN:** M'hm.

8                         **COMMISSIONER QAJAQ ROBINSON:** So as I think  
9           well what do we do with that old house in the meantime,  
10          because we're stuck living in it for a while, and  
11          hopefully not that long, but its foundation is quite  
12          strong, and it's going to take a lot to break it.

13                        You spoke a lot about the role of advocates  
14          and navigators, and Commissioner Buller spoke a little bit  
15          about that, so I won't go there. But do you think that in  
16          the meantime, to ensure -- two thoughts that came to me --  
17          to ensure that it's not as damaging or it's less damaging,  
18          that there be legislation or bodies set up immediately  
19          that provides for independent accountability and oversight  
20          of child welfare agencies that has legislated power and  
21          resources, and that is Indigenous run to oversee the  
22          accountability and the oversight of these agencies and the  
23          process at work in the meantime?

24                        **MS. CORA MORGAN:** I think that would be a  
25          resolve. My only concern about that is that it is known

1 to be an interim measure. Because in different things  
2 that I've witnessed over time, when you make an extension  
3 like that, government could say, "Okay. Well, we've done  
4 our job here", and then the new house is never even ---

5 **COMMISSIONER QAJAQ ROBINSON:** Yeah.

6 **MS. CORA MORGAN:** --- we don't even get to  
7 the blueprints of that.

8 So that is one of my concerns, is that, you  
9 know, it has to be fully aware that it is an interim  
10 measure, and...

11 You know one of the things that I think  
12 about -- and when I was first hired, you know, I was told  
13 don't empower the system. And the work that I was doing,  
14 I thought, well, we're not going to empower that system,  
15 and you know, we're not going to try and...

16 You know, I believe in some interim  
17 measures, but you know, as First Nations people, you know,  
18 I would love to say, well, you know, Province of Manitoba,  
19 you can keep your child welfare system; we're just not  
20 going to put our children in it. And in order to not put  
21 our children in it, then we need the resources for us to  
22 be able to do those preventative things, and the education  
23 with their families. To be able to equip them with what  
24 they need to know, and the voices to do that.

25 But yes, I do believe in making some



1 changes, but they can only be interim. That we're not  
2 bolstering a broken system anymore.

3 **COMMISSIONER QAJAQ ROBINSON:** Thank you.  
4 Those are all of my questions. I want to thank you so  
5 much for spending the last two days with us. Meegwetch.

6 **MS. CORA MORGAN:** Thank you.

7 **CHIEF COMMISSIONER MARION BULLER:** On  
8 behalf of all of us here, thank you very much for being  
9 with us for two full days, very full days, thank you. And  
10 I want to tell you very clearly that what you've told us  
11 and what you've shared with us has made a real difference  
12 in our work. So we're very grateful.

13 Because you've given us the gifts of your  
14 knowledge and your time, in particular, we have a small  
15 gift for both of you. Like Dr. Bombay, we know there are  
16 days that you need help to be lifted up, and there are  
17 days where you can go even higher than you thought you  
18 could. So we have eagle feathers for both of you to help  
19 you and help you do your good work.

20 So thank you both again very much. It's  
21 been a real pleasure to have both of you with us, and  
22 please keep working, keep fighting, both of you. Thank  
23 you.

24 **(APPLAUSE/APPLAUDISSEMENTS)**

25 **MS. MEREDITH PORTER:** As the Commissioners

1 are thanking the witnesses prior to their departure, I did  
2 want to let the parties with standing know that  
3 immediately following the hearing today there will be a  
4 verification meeting in the Assiniboine Ballroom. So for  
5 the parties that are planning to cross-examine tomorrow,  
6 if they could attend the Assiniboine Ballroom immediately  
7 following this hearing for the verification process.

8 Thank you.

9 **CHIEF COMMISSIONER MARION BULLER:** And we  
10 will adjourn to tomorrow morning. Our opening has to be  
11 at 8 o'clock because Dr. Blackstock tomorrow has very  
12 limited time. So we have to start promptly at 8:30 with  
13 her. Thank you.

14 **MS. MEREDITH PORTER:** Thank you.

15 **MS. SHAUNA FONTAINE:** I just want to take a  
16 moment to thank everybody for joining us today for Day 2  
17 of our Expert and Institutional Knowledge Keeper Hearing  
18 on the Family and Child Welfare.

19 I also did just want to remind you that  
20 there is a vigil that will be held this evening at 6:30 --  
21 from 6:30 to 7:30 in honour of Mary Tom Madeline  
22 Yellowback. There is a poster at the registration desk if  
23 you are interested in going and you want to know more  
24 information about where that's held. You know, please  
25 feel free to go and take a look at that, and I hope to see

1           you there at that vigil this evening.

2                           And I'm going to call upon Thelma  
3           Morrissette to close us off in a good way today so that we  
4           can carry our spirits in a good way this evening.

5                           **MS. THELMA MORRISSEAU:** You don't have to  
6           stand, but if you feel better, you can. Thank you. If  
7           you -- if anyone sees Sarah out there, tell Sarah she has  
8           to come here because we need a closing song. But, I want  
9           to say meegwetch, meegwetch for this day. But, I want to  
10          remember Mary Madeline, Yellow Back Bun. I just find it  
11          so bizarre that this should happen at this time, that it  
12          should happen at all.

13                           If anybody sees my husband out the door,  
14          could you tell him to come up here, please? I want to say  
15          meegwetch to all of you who have been here today. I want  
16          to say meegwetch to the families, to the women and  
17          children, to the men who are in this, our presence as  
18          well, to all the presenters, to the Commissioners. This  
19          is really hard work. Our wish is that at the end of all  
20          this hard work, at the outcome, would be in the best  
21          interest of Indigenous women and girls, and ultimately our  
22          families, our community, our nation, that all of this is  
23          not for not.

24                           So, I know it has been a long day and I  
25          know we are probably all really tired, I know that I am,

1 but it would be good to see you at the vigil for Mary  
2 Madeline, Yellow Back Bun, to show her family that her  
3 life mattered, that Indigenous women and girls do matter,  
4 and that this is not okay. So, I say to grandfather  
5 (speaking Indigenous language) to look at us, to know it  
6 is in our heart and our mind, to take care of us, to guide  
7 us, to love us, to lift us, because it is a dark time,  
8 yet, for our women.

9 (MUSICAL PRESENTATION)

10 **MS. THELMA MORRISSEAU:** (Speaking  
11 Indigenous language). Meegwetch.

12 **MS. SHAUNA FONTAINE:** We would now like to  
13 ask Annie Bowkett if she would please extinguish the  
14 qulliq for us.

15 **MS. ANNIE BOWKETT:** (Speaking Inuktitut)

16 **MS. LILLIAN LUNDRIGAN:** The qulliq has run  
17 out of oil. It lasted perfectly to this time. The flame  
18 is strong, but now it is time to extinguish it for the  
19 day, and she will be using the droppings of the oil to  
20 extinguish the light.

21 **MS. ANNIE BOWKETT:** (Speaking Inuktitut)

22 **MS. LILLIAN LUNDRIGAN:** I feel very  
23 thankful to be a part of this, to be here with you today,  
24 to the Commissioners for allowing me to be here. I am  
25 thankful that my youngest daughter was able to come for a

1 brief -- for sometime after school today.

2 **MS. ANNIE BOWKETT:** Thank you.

3 **MS. SHAUNA FONTAINE:** Thank you.

4 Meegwetch. We will reconvene here tomorrow morning at  
5 8:00. And, as Chief Commissioner Buller has highlighted,  
6 we need to start promptly at 8:00 so that we can begin  
7 with Dr. Cindy Blackstock's testimony for 8:30. Thank  
8 you. Good night.

9 --- Upon adjourning at 4:39 p.m.

10

11

12

13

LEGAL DICTA-TYPIST'S CERTIFICATE

14

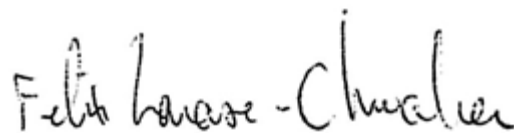
15 I, Félix Larose-Chevalier, Court Transcriber, hereby  
16 certify that I have transcribed the foregoing and it is a  
17 true and accurate transcript of the digital audio provided  
18 in this matter.

19

20

21

22



23

Félix Larose-Chevalier

24

October 2, 2018

25