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Committee business

Justice Policy

Intimate partner violence

Travaux du comité

Violence entre partenaires intimes

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STANDING COMMITTEE ON JUSTICE POLICY

Wednesday 14 August 2024

The committee met at 1030 in committee room 1. **The Chair (Mr. Lorne Coe):** Good morning, members. I call this meeting of the Standing Committee on Justice Policy to order. We're meeting today to resume public hearings on the committee's study on intimate partner violence.

Are there any questions before we begin? MPP Wong-Tam, when you're ready.

COMMITTEE BUSINESS

MPP Kristyn Wong-Tam: Good morning, colleagues. My question to the Clerk is whether or not she has received any communication from MPP Mantha. In particular, what I'm looking for is his resignation from this committee. Is he intending to come back to this IPV study committee?

The Clerk of the Committee (Ms. Thushitha Kobikrishna): I haven't received any communication regarding a resignation from this committee.

MPP Kristyn Wong-Tam: A motion to remove MPP Mantha would be out of order; is that correct?

The Clerk of the Committee (Ms. Thushitha Kobikrishna): Yes. That would be referred to our procedure and House affairs committee.

MPP Kristyn Wong-Tam: Can the Clerk clarify for us the process needed to remove a member from this committee?

The Clerk of the Committee (Ms. Thushitha Kobikrishna): It would be moved by motion in the procedure and House affairs committee, and then the committee would have to vote on that process.

MPP Kristyn Wong-Tam: What would be the quickest way to remove MPP Mantha from this committee? What would be the earliest date that he would be removed?

The Clerk of the Committee (Ms. Thushitha Kobikrishna): It would have to be October 21, when the House comes back. If they do agree to remove him in the procedure and House affairs committee, then the report would have to be reported back to the House.

MPP Kristyn Wong-Tam: Thank you.

Chair, I would like to add a few comments specifically about MPP Mantha and his presence at this committee.

The Chair (Mr. Lorne Coe): Committee members, we have a motion before us to go in camera. Agreed?

MPP Kristyn Wong-Tam: That is not my motion, Chair. The Chair (Mr. Lorne Coe): I'm sorry.

MPP Kristyn Wong-Tam: Chair, I just wanted to add a few comments to the exchange I just had with the Clerk ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

COMITÉ PERMANENT DE LA JUSTICE

Mercredi 14 août 2024

about the process of removing a member from this committee.

The Chair (Mr. Lorne Coe): All right.

MPP Kristyn Wong-Tam: Thank you. I think it's very important, and I believe that this has to be said. For many of us who have been working on this IPV study, this is a very important and serious matter. New details have come to light about the abusive and harassing behaviour of MPP Mantha, who is a member of our committee. I understand that MPP Mantha may be resigning. He certainly should not be welcomed back to this committee. I believe, after reading the report that came out last week, that his presence in this committee is certainly not welcome, and I certainly don't welcome it. I think that it would be also a very distracting and disruptive presence, especially given the nature of what this committee does, which is hear from survivors and subject matter experts on the issue of gender-based violence and intimate partner violence.

Furthermore, I would be calling for MPP Mantha's resignation as the representative for Algoma–Manitoulin. I know that the report was very difficult to read for those who had a chance to read it, and it certainly was triggering for many members of any workplace, especially for women. In the last few days, I've had quite a bit of time to think about the outcomes of that report, and I know that it has been very heartbreaking for me to understand that something like that would have happened in a workplace. But also, I was very mad to have read what had transpired.

I think that last spring, when MPP Stiles had just become the leader of the party, she was made aware about the very serious allegations of the staff person who came forward to share reports of sexual harassment and non-consensual conduct that she had experienced from her boss, Michael Mantha. This has happened to so many women. We know that this happens a lot, and I think we should all feel sick and angry about it. I know that the leader has also experienced this herself, personally—in private conversations she and I have had. I know this is something she would never tolerate.

I'm glad that a third-party investigation took place. I'm very pleased to know that the allegations were substantiated, although I'm very disappointed to learn this. I think that it's entirely appropriate for this committee to work towards making sure that MPP Mantha's resignation is tendered as quickly as possible. He has no right sitting on this committee, and I don't think he has any right to even represent the good people of his northern riding. I know that there will be other northern members who will pick up and do everything they can to make sure that the people of Algoma–Manitoulin have a voice in this House.

This is what I wanted to put on the record, Chair. I think that it's very important that our committee is an open committee, is a welcoming committee, and it is a safe committee for those who come to speak to us about this subject matter. Michael Mantha's presence would not add and contribute to any of that welcoming and friendly and safe environment. Thank you.

The Chair (Mr. Lorne Coe): Thank you, MPP Wong-Tam.

Any other further comments? All right. Thank you.

The Clerk has laid out the process for removing a member of this committee, and we will be following that process if there is further correspondence on this going forward.

Any further questions? No?

INTIMATE PARTNER VIOLENCE

The Chair (Mr. Lorne Coe): As a reminder, the committee has invited expert witnesses to provide their oral submissions. Each witness will have 10 minutes for their presentation, followed by 20 minutes for questions from members of the committee. The time for questions will be broken down into one round of 7.5 minutes for the government members, one round of 7.5 minutes for the official opposition and one round of five minutes for the independent member.

Of the presenters that we have this morning, we have three joining us by Zoom.

MOOSE HIDE CAMPAIGN

The Chair (Mr. Lorne Coe): I will now call on Moose Hide Campaign. Technician, can you please bring them in? Thank you.

You're going to have 10 minutes for your presentation. Could you please state your name for Hansard, which is the official recording service of the Legislative Assembly of Ontario? Then you can begin your presentation.

When you have one minute left, I'll just remind you that you have one minute left. That will allow you to summarize what is remaining in your presentation. What you're not able to communicate in your presentation, there will be questions that committee members will be asking you, and then you can provide your supplementary information at that time.

So please state your name and affiliation, and then you can start your presentation. Thank you.

Ms. Raven Lacerte: Hello. My name is Raven Lacerte, and I am the co-founder of the Moose Hide Campaign. Thank you, Mr. Chair and members of the committee, for the opportunity to speak with you this morning about your study of intimate partner violence and developing solutions to that serious societal challenge.

Remarks in Carrier.

What I just said in my Carrier language is: Hello, my respected relatives. My name is Raven Lacerte. My mom

is the late Loretta Madam, and my dad is Paul Lacerte. I am a member of the Bear Clan, and I come from the Carrier territory in north-central British Columbia.

I'm a mom. I've got two very precious little girls: Cedar, who is six, and Chas—which means "grizzly bear" in my language—is two. I'm a proud partner of Dominic Paul. My girls are a central motivation for the work I'll be talking about today. I'd do anything for them and girls like them, and especially anything to keep them unharmed.

I'm the co-founder and national ambassador of the Moose Hide Campaign, an Indigenous-led grassroots movement of men and boys and all Canadians who are committed to working together to end violence against women, children and all those along the gender continuum. The campaign especially, but not exclusively, focuses on ending violence against Indigenous peoples.

I do this work because I believe in our country, and I know you all as public servants do too. But I also believe that Canada will never achieve its full potential unless we end violence against women and children, so I'm very happy to see the work being done by this committee, and I hope it can lead to new, tangible actions to end intimate partner violence in Ontario.

1040

Before I speak about the Moose Hide Campaign's recommendations for addressing intimate partner violence in Ontario, I'd like to share the story of the Moose Hide Campaign, because that will help you understand our motivations for an approach to ending intimate partner violence. Just to let you know, this may be triggering.

The Moose Hide Campaign began in 2011, when my father and I were on our annual moose hunting trip in our traditional Carrier First Nation territory. These traditional hunting grounds, which have been in our family for generations, are intersected by the infamous Highway of Tears, Highway 16, in northern British Columbia, where so many Indigenous and non-Indigenous women have gone missing or have been murdered.

That morning, right beside the highway of tears, my father and I were blessed with a moose. We decided to tan the hide of that moose and to cut it up into little squares. My sister Sage and I then made 20,000 squares and handed them out with 20,000 little handwritten index cards that stated, "If you wear this moosehide pin, you commit to not doing violence in your life and to work with other men and boys to end violence in our families and communities."

We've now gifted over six million moosehide pins to people across Canada and even abroad. The campaign's research shows that at least five conversations about ending gender-based violence are sparked by every moosehide pin distributed. So, to date, that's at least 30 million conversations happening across Canada, many of them in Ontario.

In that context, moosehide pins are not an awarenessraising tool, they are a land-based medicine for a social illness impacting all Ontarians and Canadians. The pins are a conversation starter, a vector for traditional medicine, Indigenous medicine, and a symbol of hope, reassurance and belonging.

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The pins provide those who wear and share them with a concrete, measurable and meaningful opportunity to connect with others through conversation and knowledgesharing, in order to build and pass along skills to address gender-based violence. As a traditional medicine, the pins are always gifted for free.

Since 2011, we have also held an annual Moose Hide Campaign Day ceremony, which is a day of ceremony where we invite all Canadians to join us in a one-day fast and to mobilize in their community and organizations to take concrete and meaningful action to address genderbased violence. It is our vision that one day, one million Canadians will join us in that fast.

Federal statistics show that 44% of women who have been in relationships experience some form of abuse from a partner, and Indigenous women are three times more likely to experience intimate partner violence compared to their non-Indigenous counterparts. Simply put, intimate partner violence, often committed against Indigenous women and children, is an epidemic. With that in mind, the Moose Hide Campaign supports Bill 173. However, simply declaring an epidemic will not be enough to achieve the goal of eliminating intimate partner violence.

The Moose Hide Campaign's research and experience tells us that to achieve that goal, we must intentionally and systematically work together to provide all Canadians with opportunities to develop the knowledge, skills and abilities needed to create safe and inclusive families, communities and organizations. With proper governmental and all of society's support, that can be absolutely accomplished.

The Moose Hide Campaign approaches its work based on the premise that gender-based violence is a particularly complex issue that requires linking a system-change strategy, meaning one that holistically addresses the causes rather than the symptoms of a societal issue, and Indigenous world views. As such, the campaign advances systems change through intentional and comprehensive engagement at its institutions, and by using Indigenous culture and knowledge to create a healing anti-violence process. All Canadians are invited to participate in that process, but it especially engages men and boys to stand against genderbased violence and to develop a culture of healthy masculinity.

The Moose Hide Campaign's theory of change says that since people live their lives largely through institutions, we must engage at those institutions to change the attitudes and behaviours of large numbers of people and, ultimately, end gender-based violence.

Of course, governments are large institutions, so in the campaign's theory of change, governments leading by example is a crucial avenue for making progress. For example, a recent case of successful institutional engagement by the Moose Hide Campaign is the British Columbia public service model. Through that model, BC public servants can register for Moose Hide Campaign Day and engage with the educational resources of the campaign in many other ways. Participation is recognized through the BC Public Service Agency learning system.

That model is scalable to other provinces like Ontario and to other types of institutions such as law enforcement, Indigenous communities and educational institutions. I can provide the committee with other examples of the model's success, if wanted.

The Moose Hide Campaign encourages the government of Ontario to adopt such an institutional leadership model, and we would welcome collaborating with elected officials and public servants on developing the model.

Another point of reference I'd recommend for your work is A Path Forward, which is the government of British Columbia's plan to implement the calls for justice of the National Inquiry into Missing and Murdered Indigenous Women and Girls. As you know, the calls to justice commit Canada's government to work with Indigenous peoples to address violence against Indigenous women, girls and 2SLGBTQQIA+ people. A Path Forward recognizes that cultural-based coming-of-age ceremonies and education are crucial tools for ending intimate partner violence. That means specifically and explicitly teaching and coaching young people about respect for others, especially their intimate partners, and anti-violence during their time of transition to adulthood.

Those cultural-based processes are not just for Indigenous people. We all, regardless of race or background, need and benefit from such teachings. I know that Ontario has programming like SNAP, Fourth R and Coaching Boys Into Men that could incorporate Indigenous-medicine-informed elements like coming-of-age ceremonies and education. I encourage the government of Ontario to review those programs with a view to incorporating such elements. Again, the Moose Hide Campaign would be delighted to work with elected officials and public servants on that program design.

As just one example, a new tool the campaign has developed that could be used for that purpose is our "we are medicine" online training. The training is a self-paced, five-part learning journey, including practical guidance, to discover how you are the medicine to end violence in your home, your community and your workplace. We also have fully bilingual K-to-12 educational materials that are already used in many Ontario classrooms around Moose Hide Campaign Day. Those materials could be deployed more widely through intentional government collaboration.

In conclusion, ending intimate partner violence requires innovative approaches to resolving the socio-cultural root causes of that violence rather than only treating its symptoms. Justice Murray Sinclair has stated, "Innovation isn't always about creating new things." It "sometimes involves looking back to our old ways and bringing them forward." That is the work of the Moose Hide Campaign.

Thank you for your time and your attention. I look forward to answering your questions.

The Chair (Mr. Lorne Coe): Thank you very much for your presentation. You had 51 seconds left, but we're now going to move to questions from the official opposition.

MPP Wong-Tam, please, when you're ready.

MPP Kristyn Wong-Tam: Thank you, Ms. Lacerte, for your presentation and also for your innovation for bringing this remarkable campaign forward to the attention of this committee.

We have heard from other Indigenous organizations and Indigenous women-led organizations about the challenges Indigenous women and girls are experiencing within community and then within the larger mainstream context of receiving access and supports when violence takes place. A lot of talk has preceded those comments about the fact that people are looking for preventative strategies to stop and prevent violence before it happens.

I'm curious to understand your point of view when it comes to ensuring that women and girls are safe from a point of view that they have access to education, access to high-quality affordable housing, access to opportunities for career and workplace advancement. Can you speak about how important those things are?

Ms. Raven Lacerte: Yes, they're crucial. I think that it's so important to be talking, especially with our little ones, right from that age. In the Moose Hide Campaign, we have educational resources that go from kindergarten all the way to grade 12. It's bringing this really complex issue forward to our little ones.

So we're bringing this idea up and, in the early stages, it's really centred around the idea of love and respect and all of those pieces, and bringing this issue up with our little ones so that it's not something that we don't talk about with them, but that we start introducing from a young age. As they get older, the more complex part of these issues comes up and we can talk about it in a safe way right from the start, before we even have those conversations, talking about setting the environment to make sure it's a safe space where our little ones can hear about what real love looks like, where they can hear that violence isn't okay, that it's not a normal part of life. For so many of our young people, they see it in the home and then when they grow up, it becomes part of their regular life. They don't know any differently. I think it's so important that we're talking with our young people and creating those spaces to have them involved in these conversations in age-specific and age-appropriate ways. We don't want to put trauma onto them before we need to be talking about those hard issues. 1050

I've got young kiddos myself, and the importance of bringing this issue up—knowing that this exists and that there are things that we can be doing to show each other that we love each other, that we show each other that we want each other to have the best life and a safe life, and that there are ways that we can help involve our little ones in those conversations.

I think that a huge part of it for us in the Moose Hide Campaign is really to invite our little ones into that conversation and show them that better is possible, and then give them the tools as they're growing older. I hope that helps to answer some of them.

MPP Kristyn Wong-Tam: It does; thank you very much. That's a really important answer that you've shared with us.

I think back to the missing and murdered Indigenous women and girls report and, in particular, a big piece of the report that was highlighted was the system-wide failings when it came to Indigenous women and girls reporting violent crimes, reporting the trauma they had seen. It really hits home to me about the work that government has got to do in order for us to keep everyone safe and healthy, giving people an opportunity to thrive.

I'm interested in hearing from your point of view about what would it take for law enforcement, for the courts and for government to really centre the experience of Indigenous women and girls in the conversation of ending genderbased violence and intimate partner violence.

Ms. Raven Lacerte: Yes, I mean, it's big, right? I think that there has been so much work done.

And to the 231 calls for justice, I think that the commission went across Canada and heard stories of survivors and of people who have been in this space for a very long time, of advocating, of supporting and all of these different pieces. I think that there is a road map in that, and I think that if we can continue to go back to the road map of both the 231 calls for justice and also the Truth and Reconciliation Commission's 94 calls to action.

I think that there are a whole bunch of road maps. I think there's been a lot of work being done in these spaces and I think that maybe not enough people know about it. So I think we can go back collectively and look through those documents and see what we can all do.

In the Moose Hide Campaign, we really believe that every single person has a role to play in this, and it's one of those things that's like an inside job, right? So we invite people into that space. It's not where we go and we call each other out; it's a place where we call each other into this circle in a good way, where we say, "I'm doing this work personally in my own day. Every day when I wake up, I think about how I can be better or what healing I need to do." And then, when we have those conversations, it brings people into that space, and they take a look at their own selves and their own lives and see how they can improve.

Better is always possible and no one is perfect, right? So one of the things is that these conversations are leading to actual actions, and then—

MPP Kristyn Wong-Tam: And—

Ms. Raven Lacerte: —actions are starting to lead into that change. Sorry.

MPP Kristyn Wong-Tam: No, no. I didn't mean to interrupt you. I got excited when you said the word "actions" because I think that's exactly where this committee needs to go. We need to be able to take the advice of our subject matter experts such as yourself and turn it into actions, but with an implementation plan that has really clear outcomes and probably some very solid and agreed-upon benchmarks.

Your comments about the TRC report and the MMIWG report are actually important because those two documents, including UNDRIP, should be foundational documents that inform our work, so we're not asking people to come out and tell us again about their traumatic experience. So I take it to heart that we have a foundation of reports that we need to act upon, which hasn't already been. Thank you for bringing that to our attention again.

Ms. Raven Lacerte: Thank you.

MPP Kristyn Wong-Tam: Absolutely.

The Chair (Mr. Lorne Coe): You're at 17 seconds, so I think we maybe conclude your time, and we'll move forward to the government members, please.

MPP Dixon, please, when you're ready. Thank you.

Ms. Jess Dixon: Thank you so much, Raven, for presenting again at such short notice and for your work on the Moose Hide Campaign. I know that it certainly penetrated into the Ontario government. A number of members here wear the Moose Hide pin, including my colleague Brian Saunderson, who's just at the other end of the table, who has been wearing one for quite some time now. So your efforts are obviously working.

I wonder if you can talk a little bit more about what methods you've found most useful in raising awareness and how you determine that you've found a good method for a certain group.

Ms. Raven Lacerte: That's a great question, and it's something that we're really trying to figure out right now. I was 16 when we first started the Moose Hide Campaign, and it started just from my dad and I sitting along the Highway of Tears and practising our culture, and it really came to us in this moment of inspiration of being in our culture and doing that healing work on the land. We wanted to use that moment to offer it to Canadians, where we're inviting you into this medicine, this moose that gave its life—well, they are not giving their lives. I can share more about where the pins are coming from and all those pieces, but that first moose that gave its life to us, and the medicine and the love in those moments. Inviting people into those spaces has been so incredible for so many people.

We have on our pin order form—we give our pins out for free, and on the order form, it gives an option for people to make comments. We have thousands and thousands of stories where people have come back and shared that having these pins gave them that chance or that encouragement to have a really important conversation with their family or with their partner or with their children or in their workplace. It's creating those spaces for people to have a conversation. Sometimes it's with people that are total strangers, but sometimes it's about having those conversations with our loved ones and with the people in our lives. It's giving them a tool to make those changes in their lives. And so we have thousands and thousands of stories of people that have come back and used it in a way that makes sense to them, where they can order the pin, share it within their workplace, and their workplace is-you can tell that things are changing.

So I think because of that marker of five conversations per Moose Hide pin, it represents a whole bunch of conversations, and those conversations are leading to that action where people are mobilizing; they're inviting each other into this space, hosting Moose Hide Campaign Days. I think it's really just like an open invitation to however people want to be in this space. We have some resources on our website, and we support folks who want to engage in the campaign in a good way and invite each other into those safe spaces and talk, just talk about it on a heart level, from a spiritual level.

On Moose Hide Campaign Day, we fast for the day. That's really part of our theory of change, is connecting on that spiritual level, where we're bringing our intentions forward, and we fast for the day. From sun-up until sundown, no food, no water, so we're in ceremony together. This past year, we had over half a million Canadians participating on Moose Hide Campaign Day, and many of those people fasting. It's a way for us to connect in a different way, where, when we think about how precious we are and we think about how precious each other is, then it's inviting people into that space of that preciousness and inviting each other in in a different way. We're seeing lots of folks coming back and sharing how it has impacted their lives in a positive way.

It's one of those things that is harder to measure, right, and so that's a big challenge for us right now: How do we measure the impact? For me, as the person that is the speaker for the campaign, as one of the main ambassadors, when we first started, all I heard were stories of people that had been impacted by violence in their lives. Now we're starting to hear more of, "You know what? This thing saved my life" or "It saved my relationship"—a whole bunch of different stories that are coming back now of the positive change that is happening.

I hope that helps to answer those questions.

Ms. Jess Dixon: Yes, yes. Can you maybe go a little bit deeper on to—if, I would say, particularly, we have men wearing the Moose Hide pin, what have you seen—you can even relay an anonymized story. Is that making other men or younger men feel more comfortable about talking to that person about concerns around violence against women? **1100**

Ms. Raven Lacerte: Yes, for sure. These pins now have become like a little beacon, I think, in the communities. People know what it is and know what it means. When they see somebody walking down the street or when they see them in their workplace or in their school, they know that that person knows what this thing is, knows enough about it to be wearing it every day, and they feel like they could be a safe person if they need to go and talk to them about something.

It has become one of those things that people, and all people, see it and know that as a person of safety or somebody that they can go to. It's one of those things that we invite each other in, and so oftentimes the people that wear these pins become an advocate for it, as well, and invite each other in. Lots of men and boys are going and inviting other men and boys into this space.

One of the things we do on Moose Hide Campaign Day is create spaces to have healing circles. It's a sacred circle. We pass around a sacred object and people have the opportunity—we have men's circles, women's circles and LGBTQQIA+ non-binary circles that are able to just come and gather and to sit in circle and share anything that they want to about this. It's a space for men to come together and to talk about something that—there's just not enough space to be talking about these kinds of things in everyday life, in everyday communities, and so that is one of the spaces that creates that space to have a safe conversation and really share.

I remember at one of the Moose Hide Campaign Days, I was walking through the circles of healing circles and I heard someone say, "This is the first time I ever shared this," and it was just the little moment that I heard. That person shared something for the very first time ever and that moment of healing is so huge. I don't know who that person was; I didn't even see them in the circle, but just to have—

The Chair (Mr. Lorne Coe): Excuse me. That completes your time for your presentation. Thank you very much for joining us. Thank you, MPP Dixon. That's the time.

Our next presenter is waiting for us-

Interjection.

The Chair (Mr. Lorne Coe): Yes, go ahead.

Interjection.

The Chair (Mr. Lorne Coe): Yes, we can do that now. We do have—and I was waiting for someone to raise their hand and ask.

Interjection.

The Chair (Mr. Lorne Coe): Would you like to do that? Thank you.

Ms. Jess Dixon: I'm not nearly as well prepared as our wonderful Clerk, but, Chair, I would ask if the opposition and government members could split the time not currently being used by our independent members.

The Chair (Mr. Lorne Coe): Do we have agreement? All right, thank you.

We will apply that for our next presenter then, please. We have to do one round because the independent has the right, as a member of the committee, to claim their time, regardless if they come in half an hour—if they're delayed in some way. I had to go one round first of all, so thank you very much for moving that motion.

Ms. Jess Dixon: Thank you, Chair.

The Chair (Mr. Lorne Coe): Thank you.

Okay, our next presenter is waiting—thank you very much for your presentation.

WAYPOINT CENTRE FOR MENTAL HEALTH CARE

The Chair (Mr. Lorne Coe): I will now call on Zoe Hilton from Waypoint Centre for Mental Health Care to make your presentation, please.

Good morning. How are you? Thank you for joining the Standing Committee on Justice Policy. You're going to have 10 minutes for your presentation. I'll let you know when you've got one minute left, so you can summarize that that you haven't already communicated. For the record, could you please state your name for Hansard and then you can begin your presentation. Thank you very much.

Dr. Zoe Hilton: Good morning, everybody, and thank you for the opportunity to speak to the standing committee today. I'm Dr. Zoe Hilton. I'm a research chair in forensic mental health at Waypoint Centre for Mental Health Care. I'm also a professor in the department of psychiatry in the Dalla Lana School of Public Health at the University of Toronto, but I'm based at Waypoint, which is located in Penetanguishene in central Ontario.

Ontario saw its 37th femicide of 2024 last month. Julia Brady was killed by her boyfriend in my own neighbourhood, so this all hits close to home.

I have been conducting research into violence in relationships for over 35 years. I am the lead author of the Ontario domestic assault risk assessment, the ODARA. The ODARA is an actuarial risk assessment tool that identifies the risk that an individual who has assaulted their partner will do so again in the future. I also oversee ODARA 101, which is the free online training, and the ODARA that's hosted by Waypoint. I continue to collaborate with researchers and practitioners to study evidence-based risk assessment and risk factors like coercive control in a project currently going on called the CELIA IPV Project. The ODARA itself was created with the support of the province of Ontario and was initially rolled out to police organizations across the province as part of the provincial Domestic Violence Action Plan.

In my testimony, I'll speak to intimate partner violence risk assessment. This is an evidence-based practice, and it's a necessary first step to preventing further violence by individuals who have assaulted their partner. I'll make three recommendations to the committee, and my recommendations have to do with using risk assessment tools to inform decision-making, using risk assessment tools to improve risk communication across sectors and funding research partnerships to ensure that risk assessment tools stay evidence-based.

My first recommendation comes from the risk principle. The risk principle is a widely supported principle of effective correctional practice. The principle states that the highestrisk individuals should receive the most intervention—the most immediate and the most intensive interventions. By interventions, I mean a wide range of risk management strategies. This can include, for example, being held in police custody after being charged. It can include pre-trial custody or the level of conditions of bail. And it can include being a priority for evidence-based treatment.

With resources like treatment and custody and other resources like victim services, if these resources were limitless, then we might not need risk assessment tools to determine priorities for these resources. But they're not limitless, so we need to make sure that resources are used for the riskiest cases in order to have the most impact on preventing violence. These decisions can also have a substantial impact on the lives of individuals perpetrating intimate partner violence and also on the victim-survivors, so the decisions need to be defensible and evidence-based.

A validated, structured risk assessment tool provides a level of accuracy and precision in risk assessment that's measurably better than using unaided professional judgment. Validated tools are also more reliable, and they provide less room for excessive bias to creep in. This is particularly true for actuarial risk assessment tools.

Police in Ontario already gather the information needed to score the ODARA. This information can be used to have that score itself available to inform evidence-based policing and related justice decisions. The score is important to these decisions because the higher the ODARA score, the more likely the person is to commit a future assault, the sooner they do so and the more injury they cause. So the score is very relevant to decisions in the justice system. But sometimes, in practice, the score isn't used, and sometimes the ODARA items are just listed among a longer list of possible risk factors. All that information can inflate how risky a case seems.

The problem here is that if we start to see everyone as high risk, then we miss seeing the individuals who are most at risk and most in need of those resources. They don't get the interventions and supports that they need to prevent violence. So my first recommendation is, don't just embed risk factors in a list of information. Embed the risk assessment tool in the decision-making process. Using the tool also gives the benefit of being able to say things like, "This person scores in one of the highest-risk categories, which means we need to do X and Y to intervene."

This relates to my second recommendation, which has to do with communication across sectors. When we're talking about risk or trying to communicate the risk that's present in an individual case, we often fall back on verbal categories like "high risk" or "low risk." But it's difficult to know what "high risk" or "low risk" actually mean if you don't have information about the actual likelihood of violence or relative risk that goes along with those verbal terms. The ODARA is an actuarial risk assessment tool. and that means that scores are interpreted based on data from large samples of cases that are used to estimate the individual's risk. The actuarial data are related to the likelihood of violence, and they also show how an individual's risk compares to others who have perpetrated intimate partner violence and give an indication of the percentage of cases that score higher or the percentage of cases that score lower. This actuarial data exists now, already, for men who perpetrate intimate partner violence, and we're gathering similar data for women now.

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Actuarial data mean that you can communicate risk within a system and across sectors using percentages. We can all understand percentages and we all have a shared understanding of what a percentage means. On the other hand, if you try to communicate risk with words like "high risk" and "low risk," what might seem low risk, for example, to, say, an assessor who has worked in a correctional setting or a prison their whole career—what seems low risk to them, that same case might seem like high risk to someone who provides services in the community. And studies have shown that there's so little alignment on how people use these verbal categories that saying that someone is high risk or low risk doesn't really communicate anything.

So my second recommendation is, use structured risk assessment tools, and especially actuarial tools, to communicate risk of intimate partner violence and to share information about risk across sectors within the criminal justice system and between the justice system and its partners in the community. That, of course, will help with consistently using risk assessment tools to inform decisionmaking. Then, once those tools are in place, continue to do the research to make sure that decisions and risk communication are based on the most up-to-date evidence.

My third recommendation has to do with funding research partnerships that are necessary for evidence-based risk assessment. The ODARA is an example here because the research to develop the ODARA came from a partnership between researchers at Waypoint and the Ontario Provincial Police and other policing services. This is a research partnership that continues to this day. The partnership has expanded to include other provinces, and there are other similar partnerships across this country involving other researchers.

Collaborations between police organizations specifically and independent researchers have many benefits, and one important benefit is that collaborations help close the gap between evidence being created and it being put into practice.

Examples of evidence from the CELIA IPV research partnership are that we found that coercive control is a risk factor for future intimate partner violence. It was one of the first studies to look at coercive control in this way. And we're now looking at more expanded definitions of coercive control, including animal abuse and technological surveillance. We want to see if any of these behaviours improve risk assessment over and above the ODARA. I'm sure you're aware this is a very key topic right now as coercive control is most likely being criminalized in Canada soon.

We're also studying more inclusive cases of intimate partner violence, including sexual and gender minority individuals, and more standardized risk communication so that a risk assessment score can mean the same thing and be communicated the same way across time and place and population.

And we've begun working with partners from First Nations—

The Chair (Mr. Lorne Coe): Excuse me. You have one minute left in your presentation, please.

Dr. Zoe Hilton: Thank you.

So, we've begun working with our First Nations partners to explore culturally responsive approaches to intimate partner violence risk assessment. Obviously, the research takes a long time to do. It involves a whole team. It's partly resource intensive because, evidently, the police databases are not set up with research in mind and risk scores are not necessarily included and so on. So federal grants run out, and researchers are always applying for new opportunities to keep the work going.

Funding police-researcher partnerships as part of a new response to the crisis of intimate partner violence in Ontario could include many things. It could include the development of the minimal data set of anonymized information. It could include new opportunities for knowledge-sharing across provincial and municipal services. It could include ongoing evaluation of intimate partner violence risk assessment tools and evidence-based policing practices.

I thank you again for the opportunity to tell you about my work and for hearing my recommendations on using risk assessment tools in justice decision-making and communicationsThe Chair (Mr. Lorne Coe): Thank you very much for your presentation.

We're now going to turn to the members of the committee from the official opposition for their questions, please. MPP Sattler, please, when you're ready.

Ms. Peggy Sattler: Thank you very much, Dr. Hilton, for taking the time to appear before this committee today and share your very important research. I think you've made a compelling case for why it's important to use evidence and data in decision-making, and in particular to assess risk.

Now, one of the concerns you raised is that the ODARA data is available to be shared across sectors but is sometimes not used. Can you explain why that happens? Like, what are the barriers to ensuring that this data is accessed and actually used in making decisions, and what are some of the recommendations to enable that problem to be corrected, so that the data is actually used by the people who are making these decisions?

Dr. Zoe Hilton: Thank you very much for the question. I can't really speak to all the barriers that may occur across the decision-making process. One of the barriers, though, that's kind of natural to human decision-making is that we feel like we want a lot of information; we're not satisfied until we have very comprehensive information. That comprehensive information is necessary for identifying treatment needs or specific safety-planning concerns, but when it comes to risk, we need to use the score on the ODARA because it's the score that indicates what the level of risk is.

What happens is the risk factors that are on the ODARA were selected through research, using Ontario police databases, to identify the most consistent, the strongest risk factors related to intimate partner violence reoffending. If we add in all sorts of other information to that risk assessment piece, then we start to see risk as inflated, or we lose sight of what the actual risk is. So one of the barriers is including excess information in the risk assessment itself.

One of the recommendations to correct that barrier would be to include the scores in records management systems, whether it's at the policing records level or in the courts—that might go before a bail court and all these decision levels—having the score available and having the information needed to interpret that score being available.

In the case of ODARA, it is a fairly straightforward score, with tables or charts that are different ways of helping in interpreting it. These can be made available throughout the justice system.

Ms. Peggy Sattler: What currently happens to this score? I understand that the police put the data into the tool and that generates a score. Who gets access to that score currently? Wouldn't it automatically go to people who are making decisions in the justice system?

Dr. Zoe Hilton: The investigating officers will put the information into the records, but it's not necessarily being used to generate a score. That would be a fairly simple procedure to do, either by the officers or by some automatic scoring procedure. So if that score is not generated, then the score is not being passed on, and the ODARA information is being embedded in other details.

Ms. Peggy Sattler: Okay. So, then, you've got this tool that requires data to be input, and then the next step is to

generate the score, but sometimes that just doesn't happen? The score is not generated? The data just sits there in the tool?

Dr. Zoe Hilton: Yes. Sometimes that score is not generated. It may depend on the organization whether they generate the score or not, but it's not consistently being generated and communicated.

Ms. Peggy Sattler: It seems odd to me that all of this work went into developing this evidence-based tool to assess risk, and that there are times within the justice system when the tool is populated but it doesn't go any further—it's not actually used to really accurately assess risk. Is that correct?

Dr. Zoe Hilton: That's my understanding of what happens in some cases. Again, it may depend on the organization whether or not they're generating that score. **1120**

Ms. Peggy Sattler: Do you have any sense—I don't know if, in your capacity as a doctor at Waypoint, you would be able to understand where within the government and ministries the change needs to happen to make sure that this validated risk assessment tool is used to its highest efficiency, which would be to provide that accurate assessment of risk.

Dr. Zoe Hilton: I think that could happen at many levels, and I think it would begin with the policing policy to generate or use the score. I believe it may be happening at other levels. For example, in community corrections, I think when they use risk assessment tools they use the tool. They use the score. They don't just use the risk factors. That kind of process could be implemented at policing and other levels.

Ms. Peggy Sattler: I was very interested in your final comments in your presentation, when you talked about the partnerships that you are currently engaging in with First Nations to develop culturally responsive approaches. Because we all know that one of the concerns about standardized tests is that they don't reflect some of the lived realities of different populations. Can you tell us a little bit more about the work you're doing with First Nations and perhaps other racialized or minority communities? Are there opportunities to make the ODARA more responsive to different cultural groups?

Dr. Zoe Hilton: Thank you for that question. The work that we have begun has been an offshoot of the CELIA IPV Project, a piece that's being led by our colleagues at the Ontario Provincial Police, with a number of First Nations organizations in our region.

As one of our first steps, we provided a knowledgesharing and education day on culturally responsive risk assessments with a focus on coercive control, because coercive control being something whereby a perpetrator exploits an individual's vulnerabilities to maintain control over that person—that experience of coercive control could be different across different cultural identities, and it's not something that we really know much about right now. So we began with a knowledge-exchange day learning about coercive control, learning about what organizations such as the Chiefs of Ontario are doing with their risk assessment and danger assessment tool kit, and gathering policing services and community services from across the province to get their input into where the challenges are and where people would like to see us bridging those gaps.

That's work that was supported by a victim support grant. Our report about that will be available soon, and we hope to be able to continue that work.

Ms. Peggy Sattler: Are there any ongoing partnerships with other communities that may also require culturally responsive approaches that perhaps wouldn't be captured in the current version of the ODARA?

Dr. Zoe Hilton: Currently we don't have that work under way. It's something we're always seeking to explore and extend.

In terms of differing identities, we did embark on a project to look at coercive control in two-spirited and LGBTQQIA+ communities. Our initial work shows that there are levels of coercive control that exceed what we see in other populations. There's a lot of missing of the experiences of coercive control that can be unique to individuals of diverse sexual identities or gender identities, so a lot of work really needs to be done to even explore what those experiences are and be able to appropriately assess them.

The Chair (Mr. Lorne Coe): Thank you, Dr. Hilton. That concludes the time allocated for the official opposition.

I'm now going to turn to the government members. I have MPP Saunderson, please, sir, when you're ready.

Mr. Brian Saunderson: Thank you very much, Dr. Hilton, for being here. It's a pleasure to see you again.

This is, I think, our seventh day of hearings, and throughout, we've heard from a number of forensic psychologists, but also some subject matter experts, and your name has come up repeatedly with the ODARA tool. We've been talking about a number of different risk assessment tools, ODARA being one of them—the danger assessment which I understand is the domestic violence assessment tool, to look at it from a victim's perspective, and then the ACE, the adverse childhood experiences tool, to look at children who have been exposed to domestic violence, their risk of going down that path in their own lives.

These tools are critical for all the reasons you've stated, and I'm wondering—we've heard some talk about the connection between cruelty to animals, the link that that is an indicator of potential gender-based violence, and I'm wondering if, in your studies, your committee—as I understand, you headed the committee that created this tool looked at that connection. And the second part of this question—and I don't mean to be too convoluted—but what efforts are ongoing to refine the tool so that we can have a much more uniform and accessible tool to help intervene? It all comes to harm prevention, I think.

Dr. Zoe Hilton: Thank you for those questions. Yes, with respect to animal abuse specifically, when we originally created the ODARA, we looked at all the information that was available to police officers and was documented by police officers in domestic occurrence reports, and we looked at which pieces of information were the strongest indicators of the risk of an individual reoffending, committing another domestic offence against their intimate

partner or a violent offence against their intimate partner. Animal abuse was one of those things that we looked at that was not among those strongest risk factors, so animal abuse is not one of the items on the ODARA.

That said, this research was conducted some time ago, to create the ODARA, and now, I think we're much more aware as a society and in policing and justice, specifically, about the importance of animal abuse. So it's possible that officers are collecting more information about animal abuse, especially ours. They've become more alert to animal abuse and other forms of coercive control.

So we are now doing that research to look at animal abuse again and digging into it more deeply than we did before—looking at domestic animals, lifestyle and so on, and different kind of threats or actual violence against them—so we will be able to determine whether animal abuse is an item, a risk factor, that should be added to the ODARA, that could help with identifying the risk of intimate partner violence reoffending. That work is ongoing.

Other efforts we're conducting now to refine the ODARA, to see what improvements need to be made, are comparing rates of reoffending now with the rates of reoffending that were documented at the time that we created the ODARA. At the time, there wasn't the level of criminal charging for domestic violence and intimate partner violence that there is today, so perhaps that would make a difference.

We are, as I mentioned, looking at more inclusive gender and sexual identifies. We can test the ODARA for all populations and we can create those actuarial data that are needed to really simplify the interpretation of the ODARA score.

And we're trying to see how we can standardize risk communication in other ways so that instead of just having a score on the ODARA, we're also able to say, "In this risk category, the risk of reoffending is, say, twice what the average person who perpetrates intimate partner violence is," and how that should be related to the levels of intervention needed, the priorities of intervention, and also to pull out some of the specific treatment needs that may exist, such as substance use or other risk factors that are on the ODARA. So we may be able to develop that piece as well.

And then, when we have these risk categories that say, "Here's the average score. Here's twice as risky. Here's half as risky but not completely zero risk," then those categories can be translated not just for the ODARA but for other tools as well, so that if other organizations, by using a danger assessment, say, with the people in their victim services—then perhaps one day after this research is completed, we'd be able to say, "Level 3 is level 3 regardless of which tool you use." That will immensely open up the feasibility and practicality of risk communication across sectors.

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Mr. Brian Saunderson: That's a great segue into my next question, because we heard from Dr. Sandy Jung from the University of Alberta and Dr. Jesmen Mendoza from

TMU talking about—I don't know if "crosstalk" is the right word, but cross-referencing between the different tools, and how do you generate a common risk assessment so that the different perspectives, whether it be dealing with the perpetrator, the victim or the children who are also victims—how do we make an efficient tool where we can get a standardized reading across the board for all of the different components of this complex issue?

Dr. Zoe Hilton: Well, it is a very complex issue, and it's a very complex and statistical approach to creating a standardized risk assessment. It has to do with how the scores are distributed on the tool in the population. We need to identify not just the average but the median, which is another way of describing the middle score that depends on the percentage scoring higher and the percentage scoring lower. We need to be able to identify what is the level of reoffending according to the definitions of reoffending that our sectors are interested in, whether it is a new criminal charge or a new criminal conviction or a new reported victimization. These can all reflect very different values. And we need to know what is the baseline risk for a person within a population to reoffend to begin with. That would be our lowest level of risk. So that process needs to go through with one tool and then with additional tools.

Mr. Brian Saunderson: You've been talking about some of your clinical research, and it is ongoing; I'm very glad to hear that. I'm wondering what this government can do to assist in those clinical trials to refine these tools to create a standardized metric, assessment. How can we help you in that work?

Dr. Zoe Hilton: Well, I'm a researcher; always my first thing is going to be that funding is always an issue for us. Any funding is appreciated.

But I mentioned at the beginning that the ODARA was initially supported by the province with a number of ministries contributing to it and initially rolled out across the province as part of a provincial Domestic Violence Action Plan. I think having a plan, having a framework, knowing where these tools fit and knowing at what junctures in the justice system decisions need to be based on the tool is another area where researchers and practitioners and policy-makers can collaborate to identify the best ways to ensure that evidence is put into practice.

Mr. Brian Saunderson: Thank you very much.

How much time do I have, Mr. Chair?

The Chair (Mr. Lorne Coe): You have one minute and 28 seconds, sir.

Mr. Brian Saunderson: Okay. Well, I'm going to try to shoehorn in a few other questions if I can, then, Dr. Hilton. Again, it's a great opportunity. Thank you for taking time to come and join us today.

We've heard from a number of other witnesses about cultural sensitivity on the Indigenous front. We also know the intersection between poverty and mental health is also a critical point in this juncture. You've talked a little bit about trying to create a culturally sensitive tool. Would that mean having different assessment tools for different cultures, or can you bring it under one roof? **Dr. Zoe Hilton:** Ideally, having one tool that is validated and applicable and useful for the full population is what we would be aiming for. Having culturally specific tools could be advantageous. It could also be a doubleedged sword. Identifying risk factors that are specific to certain cultural groups might end up making them appear more risky, for example.

So, it's something that has to be done very carefully. I wouldn't want to pre-empt how the research would turn out, but I would look forward to this more and potentially working on this more together.

The Chair (Mr. Lorne Coe): Thank you, Dr. Hilton, for your presentation today.

We now need to call on the YWCA of Ontario to make their presentation—

Interjection.

The Chair (Mr. Lorne Coe): Yes, MPP Dixon?

Ms. Jess Dixon: I believe we'd agreed to split the time of the independent.

The Chair (Mr. Lorne Coe): I'm just going to confer with my Clerk.

The Clerk of the Committee (Ms. Thushitha Kobikrishna): What the Chair has done is actually combine the time together, so each group has already had 10 minutes to speak.

YWCA ONTARIO

The Chair (Mr. Lorne Coe): Technician, can you please bring in the YWCA of Ontario?

Ms. Medora Uppal: Hello. Good morning.

The Chair (Mr. Lorne Coe): Good morning. How are you?

Ms. Medora Uppal: Good.

The Chair (Mr. Lorne Coe): You're going to have 10 minutes for your presentation. I'll let you know when you have one minute remaining. Could you please state your name for Hansard? You may begin your presentation.

Ms. Medora Uppal: My name is Medora Uppal, and I'm the CEO of YWCA Hamilton. With me today are two of my colleagues: Heather McGregor, CEO of YWCA Toronto, and Elisabeth Zimmermann, executive director of YWCA Niagara. We represent 10 YWCA member associations across Ontario which operate in urban centres and rural communities that stretch from the Niagara region to Sudbury.

YWCAs recognize that Black, Indigenous and racialized women, queer and trans women and those with disabilities routinely face disproportionate levels of IPV. This requires an intersectional lens, centering in our work those most at risk when we develop policy, interventions, programs and funding models.

In 2023, YWCAs across Ontario delivered 164 genderbased violence prevention programs and 65 intervention services. We housed an average of almost 6,000 women, girls and gender-diverse people each night through our emergency shelters and housing programs. We also deliv14 AOÛT 2024

ered more than 100 gender-based violence public education events.

Our submission today is underpinned by five principles:

(1) Intimate partner violence was a shadow pandemic during the worst of COVID-19, and IPV continues to be a real public health crisis.

(2) Our recommendations are designed to result in the best outcomes for survivors most at risk of intimate partner violence.

(3) We are guided by evidence-based recommendations across death reviews as well as those outlined in the missing and murdered Indigenous women and girls calls to justice and the Renfrew county inquest.

(4) Sexual violence, intimate partner violence and human trafficking are distinct experiences deserving of dedicated resources.

(5) There are multiple layers of policy, programs and interventions required to end and prevent IPV, and they require significant financial investment.

Women's organizations support families fleeing violence to rebuild their confidence, recover from trauma and live meaningful lives. This work is typically underfunded or unfunded. It's too often precarious and delivered intermittently and inconsistently while we struggle to fundraise through donations and one-time, small grants. We work within a broken system that we believe is no longer sustainable.

As subject matter experts, we know that the most dangerous time for women and children experiencing violence is when they try to leave their abuser. The reality is that some women will stay in dangerous situations because they face grim outcomes—poverty, homelessness, shame and further marginalization—if they leave. Then, there are those who actually do leave and realize there's nowhere to go. Our shelters are constantly at capacity. Shelter staff are overworked and underpaid and put in a position to repeatedly turn away women and children in crisis—brutal work which is taking a toll on all of us.

Ending intimate partner violence requires a whole-ofgovernment approach, and we need many solutions to this pervasive problem. This problem touches on every facet of our society and life, and the solutions are not rooted in the responsibilities of a single government ministry. For these reasons, we urge the government to pass Bill 173 immediately.

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Let's make predictable, stable and continuous investments in the gender-based violence support services. We are not funded to meet the needs of survivors, and we spend way too much time and resources fundraising and struggling to fill gaps. We urgently need you to provide long-term, adequate funding for research-backed, traumainformed wraparound support programs which could complement housing or be provided independently of housing.

We can't do this work successfully until you recognize gender-based violence shelter and housing workers are actually skilled professionals. We need increased funding for salaries and benefits to reduce turnover and its negative impacts on service delivery. Invest in our core funding and reduce the administrative burden on service providers related to cumbersome and bureaucratic reporting processes.

Let's end the gender housing crisis. If there's one thing to come out of this process, let it be that no one is a victim of femicide because she was forced to choose abuse over homelessness. You need to dedicate capital and operating funds to housing projects for women and their families fleeing violence. This means a full spectrum of shelter, transitional, supportive and affordable housing projects. Without these programs, women and their children are caught in a housing bottleneck and spending too long in shelters or, worse, returning to dangerous homes.

It's time we create conditions that enable women's financial independence. Violence against women and women's economic security are closely connected. Research by the Woman Abuse Council of Toronto finds that financial insecurity is almost a universal experience for women who have left an abusive relationship. It's well established that social assistance rates are devastatingly low. No one can afford to subsist alone on these rates, and it puts women living on social assistance at higher risk of being confined to an abusive living situation.

Let's invest in prevention. We need upstream solutions now. We can't focus on crisis responses alone. With upstream investments in prevention, we can stop the violence before it happens. This is more critical than ever, as rates of violence are on a steady incline. Preventing violence doesn't happen through the criminal justice system; it actually happens through education, early intervention programs by community-based organizations, and awareness and prevention campaigns that shift prevailing harmful norms and stereotypes. We applaud this government for signing on to the National Action Plan to End Gender-Based Violence. These funds need to be allocated immediately and with long-term sustainability in mind.

Leverage the knowledge and resources we already have. Community-specific networks of organizations have been meeting to compile data and share resources and expertise for decades. They are an untapped resource. If the government creates a gender-based violence round table, part of its mandate could be convening these various networks, consolidating research data and best practices, and mapping program services, as well as gaps.

I want to share my gratitude with the members of this committee for your attention to this epidemic and your commitment to finding solutions to intimate partner violence. I want to thank the survivors who have been here and shared their personal stories to prevent further violence. It's my sincere hope that we can work together to honour them, as well as the countless other survivors and those silenced by femicide. It's time to act and make investments quickly and strategically.

We look forward to sharing a written testimony with more detailed recommendations for you. Thank you for your time. I will turn the floor back to the Chair, and Heather and Elisabeth are ready to answer questions from the panel on behalf of Ontario YWCA.

The Chair (Mr. Lorne Coe): Thank you very much for your presentation.

I'll now turn to the members of the official opposition for questions, please. MPP Wong-Tam, please, when you're ready.

MPP Kristyn Wong-Tam: Thank you to our esteemed speakers for your presentation. I look forward to hearing your answers.

You talk about the need for core funding, and this is a repeated theme that has come forward from almost all service providers, especially those who are on the front lines, who are doing the emergency response work to GBV and IPV.

I'm just curious to know, with respect to the financial standing of the YWCA Ontario: Can you provide, on average, how much of your funding is needed through fundraising efforts to close the deficit gap? And that question can go to any one individual executive director, or you can speak as an aggregate.

Ms. Heather McGregor: It's Heather McGregor from YWCA Toronto. Thank you very much for your question. I'm not sure that I have a precise answer, and I think it depends very much on the size of those particular programs that are addressing violence against women.

In the case of YWCA Toronto, I think one of the things about core funding, sustainable funding, is that the government has a principle of a 10% administrative fee, but we can't always get that fee because our expenses are larger than allow for a real 10% addition, so we do have to fundraise.

There are other things that we provide where we get no government funding at all. For instance, we have a December 6 Fund that makes available no-interest loans to help women escape a situation of violence, and that's sort of an example of the other kinds of financial support that could be given and costs that are now raised entirely through our philanthropic efforts.

MPP Kristyn Wong-Tam: That's very helpful, Heather, and it's good to see you on the screen today.

I'm just curious, with respect to maybe fleshing out my question a little bit easier for you folks to answer, is with respect to wait-lists. I think that might be an easier way to go at it. If a woman is experiencing violence, she and her family are looking for housing today or access to shelter, how long will it take before she gains access to shelter and then to housing, whether it's transitional or permanent? What is, on average, the wait-list, for example, in Hamilton, Niagara and Toronto?

Ms. Heather McGregor: Elisabeth, do you want to go? Ms. Elisabeth Zimmermann: Yes. I want to, if it's okay, also address your earlier question. So we run programming for victims of human trafficking, which is very much a gender-based violence issue. This is for women who have been sexually exploited. Twenty per cent of our budget we have to fundraise. It is a provincially funded program. I know that, currently, there are discussions around—there is a revaluation of the human trafficking strategy, but I think it's important, as was stated by my

colleague here, Medora, that it is part of the overall under-

standing of what gender-based violence is, and intimate

partner violence, of course, fits within that sphere.

But in terms of wait-lists: Fortunately, within Niagara, we have an emergency response protocol, so if a woman identifies she's been trafficked, we will find an emergent bed or shelter bed—maybe not within our residential program. But then, it could take weeks to a few months for her to actually get into the residential program.

The other piece is for her to leave the program and come into transitional housing—again, it could be several months for her to be able to access that housing. If she's looking at some kind of supported, affordable housing, depending on what area in Niagara she's looking at, it could take two to three, and in some areas, up to 17 years.

Ms. Medora Uppal: I can answer the question for Hamilton: On average, we have about 6,000 families on our social housing wait-list, and many of those represent women and children fleeing violence. We have an average wait for women and children in shelter of about three years now. When I started 25 years ago, it was three months to wait for housing. We are at an average, according to our city, of three years.

MPP Kristyn Wong-Tam: Thank you. And for yourself, Heather?

Ms. Heather McGregor: I guess the other thing is that we turn so many women and children away, so they don't even get a bed in Toronto. Sometimes they go into the city homeless shelter system. Sometimes there's nothing. Sometimes they have to stay in a situation of abuse so that they're—again, like Medora, when I first joined the YWCA, it took about three months for women in our shelter to get permanent housing. Now, women routinely stay over a year for sure in the shelter itself to make way for others, but it doesn't guarantee that they're going into subsidized housing. We try desperately to find other unsubsidized accommodation. But as you particularly know, the rental rates in Toronto are really extreme, so it's very, very difficult.

1150

MPP Kristyn Wong-Tam: Thank you to the three of you for highlighting those challenges. I think that this committee is very interested in hearing and understanding what we can learn from all of you but also, more importantly, what the government can ultimately do to address gender-based violence and IPV.

Coming back to Medora, you mentioned that the Ontario government has signed on to the National Action Plan to End Gender-Based Violence, which I think is a good thing. It was needed. Obviously, we certainly don't want to be the provincial outlier by not signing on to the national plan. That plan came with four years of funding—\$126 million, I understand. So I'm curious to know, has the sector—I think we're two years out of the plan. Minister Ien was telling me that it's been a two-year rollout. So \$126 million to implement the Ontario plan—has that money rolled out to front-line service providers? Have you seen any funding from the national government passed through Ontario?

Ms. Heather McGregor: We certainly have in our shelter system, our violence-against-women shelters. We have seen it this year. I'm not entirely sure that it will be sustainable

funding, however, so that's an issue. I guess that's an issue with much funding to women's services; the sustainability and the thought of one-time funding is very difficult to deal with from a budget and a staffing perspective.

MPP Kristyn Wong-Tam: Just from a staffing perspective, I recognize how difficult this front-line work is. It's oftentimes undervalued and certainly underpaid. I know you folks are all striving to be top employers, but how hard is it for you to retain staff, especially on the front lines?

Ms. Heather McGregor: Elisabeth and Medora, if you don't mind me saying, one of the difficulties that we face in Toronto is actually Bill 124, which was the restriction on what we can pay our employees. Interestingly enough, in Toronto, the city of Toronto wasn't covered under Bill 124, so in fact, we're losing our shelter staff to the city, which can pay better salaries. Also, the expense of living in Toronto—we are losing staff who can no longer afford to live in Toronto, and so they are leaving us. And there are the effects of the burnout from COVID because, of course, they didn't have the perk of being able to work from home. They were on the front line the whole time.

Ms. Medora Uppal: We've seen a 75% turnover, so recruitment is incredibly difficult. The rate of pay is very, very low compared to other sectors and just in and of itself for the cost of living. Having anyone at two years here now is considered long-term employment.

MPP Kristyn Wong-Tam: I have one final question for the three of you, and this is related to the declaration of intimate partner violence as an epidemic. I think we've seen a lot of reports as well as articles come out about the shadow epidemic. Can you just very quickly summarize, what would it mean for you—

The Chair (Mr. Lorne Coe): Excuse me, but the time for questions from the official opposition has concluded.

I now will turn to the members of the government. MPP Dixon, when you're ready.

Ms. Jess Dixon: Thank you all so much for coming to present today. One of the things that we've heard a lot about at the committee is the idea of hub-style services, the one-stop shop, the concept of a number of different organizations not necessarily cohabiting but sharing resources so that victims have a white-glove hand-off, because they may be dealing with a lot of concurrent issues. The Safe Centre of Peel is one of the ones that we've heard about a lot.

I'm wondering if you can explain how, potentially, organizations like the different YWCAs could play a role in that hub-and-spoke model of victim services that we've heard about.

Ms. Medora Uppal: I noticed Elisabeth is on mute. I don't know if she's being muted—there we go.

Ms. Elisabeth Zimmerman: Thank you. If it's okay, I'd like to speak to that.

There are a lot of ways that these kinds of services can be done in a community. Within Niagara, we work very closely with all organizations and do exactly what you're talking about: a warm hand-off. The challenge often is, again, that many organizations are under-resourced, and so the challenge becomes ensuring that they can have access to services because there are such long wait-lists. So, particularly when I look at the work that we're doing in the anti-human trafficking field, which is women who have experienced extreme trauma, and now trying to connect them to services that can support the trauma, we work very closely with victim services, we work very closely with CMHA, our local branch, and other services, substance use/addiction services, all those things. But often, the barrier becomes not so much that we can't link them, it becomes that they have the capacity to take on and provide the depth of service that's necessary—coming from, again, within the sphere of human trafficking, the depth of trauma that women have experienced and being able to actually support that.

Now, the other piece is we do have an emergency response protocol. We are also building a coalition. All these things will help with ensuring that we build as much as possible a seamless service.

Ms. Medora Uppal: I'd like to add, just as a YWCA, for us in Hamilton, we exist, in a sense, in that hub. We work in coalition with other partners, but the sexual assault centre is right on site; the literacy council as well. We also have child care, and we deliver child care in community as well as here. We have immigration services specifically for women and gender-diverse people. So we're supporting people in an integrated way. We connect them right to our own employment programs that we deliver. We have a senior centre, so seniors can get support, and developmental services. For those who are dealing with violence and disabilities and developmental issues, we can make immediate connections.

So as YWCAs, we're often set up as multi-service organizations, different types of services to deliver in different communities, but we have that ability to provide that seamless, warm hand-off just within our existence. And then we partner extensively throughout the community, because we have to, because we just do not have the resources on our own to do this, nor do we need to do this on our own. This is a collective and community responsibility.

Ms. Heather McGregor: Yes, I would agree with Medora because, again, we're a multi-service organization, but we work in our own services and collaborate with many in the community, as well as—there are tables of the violence-against-women shelters in Toronto that work very closely together with the ministry to do the seamless services.

Ms. Jess Dixon: I think the thought exercise that we're engaging in with that question—it's not in any way challenging you, to say that you're not doing that currently. I have all faith that you are. But what we have been thinking about based on some of what we're hearing is this idea of increasing or stabilizing funding based on more of a hub model where if you even consider the idea of using IPV and gender-based violence in community safety and well-being plans, communities would be coming together with their local organizations, their local sexual assault crisis centre etc., and presenting proposals to government for funding that basically takes into consideration the unique needs of that community and the role of existing

organizations. I'm speaking for myself here, but one of the things that I've been thinking about over the course of this committee is the idea of, how do we support the large organizations that are already doing a good job versus the grant trend of project-based—another new grassroots organization, that type of thing?

1200

That's what I'm asking about; how would you see YWCA organizations participating in that concept of a community proposal? As I said, this is just a thought exercise right now, but it's something we've been hearing about a lot.

Ms. Medora Uppal: I think any of us would be open to thinking about it from our community perspective and the relationship we have in community. What I would say is that we have a lot of infrastructure already that needs to be supported and built up. There's always this idea and desire to create something new and different, but what we have to remember is what we've been saying: We have been horribly underfunded. Imagine what we could deliver if we were actually funded appropriately and adequately to do this, because we do tremendous work. We have been here for a long time, delivering violence-against-women services that have resulted in success, and we have success stories. As much as there are gaps, we have many successes. But if we were funded adequately and appropriately to do the work, a lot could be done.

So it's not to say the hub model is something that shouldn't be considered. It's something that could be considered, but there needs to be investment in what there already is—in the infrastructure—and not just assumptions that it doesn't work. Keep in mind that often, the failings of it are due to the funding gaps.

Ms. Jess Dixon: Keep in mind that when I talk about a hub model, I'm not saying a hub model with existing funding. As I said, this is a thought exercise. The idea is communities coming together to create a proposal based off the existing organizations that they have, with the proposal being, "What do you need to stabilize funding? What is that indexed to? Is it indexed to inflation? Is it indexed to population?"—that type of thing.

We only have about two minutes left, but maybe you can comment a little bit on—because one of the ideas that we're thinking of potentially with this hub concept is how to address the significant differences between urban and rural, where we have that per capita that doesn't actually exist in rural, but they have to deal with massive transportation costs and that type of thing. Again, it's not about a hub model only with what you have; it's a hub model that would focus on a collaborative proposal from the community about, "This is what we have; this is what we need."

Ms. Heather McGregor: Despite what Medora says about underfunding, we are very much committed to helping, as you say, newer grassroots organizations that don't have the experience that we have—to mentor them. That would be, I'm assuming, part of a hub model, where the collaboration would also build up communities that were significantly different and needed that sort of support. As you say, the transportation costs would be very difficult in Peterborough and the Muskoka area than they would be in Toronto, and—

Ms. Jess Dixon: Sorry to interrupt. Do you see that umbrella concept working? Because we're not saying that we don't want grassroots organizations, but we can't continue funding them independently based off who has the best grant writer. So the idea would be having larger organizations that are part of the hub model saying, "You can set up the Eritrean women's league, but it will be part of our hub model here that we'll be supervising and assisting you. You can provide specialized services but within the context of our existing organizations."

Ms. Heather McGregor: As you say, you're thinking about this. Going back to what Medora said in the presentation, I actually think this is the perfect thing to discuss at a round table that brings the expertise that we can offer to come up with some new solutions that will suit—

The Chair (Mr. Lorne Coe): Excuse me. This concludes the time that we have allocated for your presentation. Thank you very much for joining us and have a good afternoon.

Committee members, we will now recess until 2 p.m. in this committee room.

The committee recessed from 1205 to 1400.

FAMILY SERVICE ONTARIO

The Chair (Mr. Lorne Coe): I call the meeting of the Standing Committee on Justice Policy to order for this afternoon. Are there any questions before we begin? Hearing none, I now call forward, please, to the tables in front of us—and you're seated already, thank you for that—Family Service Ontario.

You'll have 10 minutes for your presentation, as we talked about before we started. Please state your name for Hansard and then you can begin. I'll let you know when you have one minute left so you can sum up, because there's ample time to share additional information you might have through the questions that will be posed by the official opposition and the government members.

You may begin, please. Thank you.

Ms. Susan Somogyi: Thank you. I'm Susan Somogyi, and I'm the chief executive officer of Family Service Ontario. I'm a social worker by trade, and in my practice, I specialize in the treatment of trauma, including intimate partner violence and sexual violence.

In my 40-year career, I have worked across a continuum of front-line services, from a shelter crisis worker to counselling men who murdered their partners and were reintegrating into the community.

I represent family service agencies—40 of them—across the province that serve men, women, children, couples and families. Many of our agencies were providing intimate partner violence services before any shelter opened their door, and we were doing groups before the Partner Assault Response Program existed.

I do know that some of my colleagues have presented some sobering statistics on the prevalence of intimate partner violence in Ontario. I will just confirm that by saying that my members are seeing an increase in service demand since the pandemic by, on average, about 25%.

Today, I want to focus on my network's vantage point in dealing with families with IPV. Because we serve men, women, children, couples and families who come to us from justice programs, child welfare, the health care system or of their own accord, we feel we have some unique insights that we want to share.

I propose that one of the reasons we're not able to turn the curve on IPV is because we have a one-size-fits-all approach that misses a significant portion of the population. Most of what Ontario's system currently provides is interventions for women who want to leave their relationship or have left, and for men once they have offended, with an intervention that is only based on one offender profile.

Now, I want to be clear that I think our current justice and crisis services, from police to shelter, are critical. We need it for safety and to stop femicide. In addition to these services, we need upstream interventions to reach all Ontarians.

So let me paint a picture for you of what that means: Most women who experience IPV never go into a shelter. Sometimes they do use the other services, but they're not admitted into a shelter.

Also, many women don't define themselves as being abused. They reach out for help because of stress, selfesteem, depression, anxiety, and they don't necessarily connect the issues that they're experiencing with the conflicts in their relationship, at least initially.

Third, in about 40% of the intimate partner situations, it is situational and low risk, which means that some of the men that we're serving do not really fit the profile of what PAR is intended to do.

Also, in about 30% of the situations, when police go in, there are no charges laid because it's a conflict and there is no crime that was committed. There was no assault. Many couples do reunite, and some just stay together, and we think this number is increasing, likely because of the increasing cultural diversity in Ontario and also economic pressures, especially the housing crisis.

Finally, men do reach out for help. They want to be better husbands and fathers and they want to help to deal with the hurt, the harm that happened to them in their childhood.

So now let me paint a picture for you of what happens. How does that play out in the service system?

Women who want help but don't identify themselves as being abused often call a family service agency. Because our services are generic, they don't have to identify themselves with the system's terms. They call and say, "All is just not right in my world," and then we'll figure out the service from there. If it's therapy that they need, they'll wait about four to six months, depending on the community—some more, some less—but they will get help.

When police go to homes and there is fighting but no charges, they will often send the couple to a family service agency. So we would assess the family's needs and consider their options. What does that mean? The woman will have therapy; she'll go on our wait-list for individual therapy. Men get nothing unless they can pay for it, or if they're in a community where the family service agencies have charitable dollars that they can serve them. But they'll wait upwards of a year for that service. In some major communities, family service agencies have walk-in clinics mostly, again, funded by charitable dollars—where the man can get one session. This is extremely helpful in many situations but obviously not sufficient in all.

If the intimate partner violence is low risk and situational, then couple therapy is the ideal intervention. So again, if they have money to pay, we'll provide them that service. They may get access through charitable dollars again, if they have those charitable dollars in that community—but they'll be waiting a long time. I do remember a time when the charitable dollars covered most of the needs in our communities, but there is a growing number of communities where the money is all gone. It's not accessible to anyone.

When men reach out wanting help for change for their behaviour, as I said, they can get to a walk-in session, or they can get help once they've been charged. Mostly, men can only get help once they've been charged. I have seen situations where a man or a couple have come and they're sitting on a long wait-list for counselling, and then in the meantime the situation escalates, and they end up getting referred to the PAR Program—or he does—or the referral comes from child welfare for family counselling. This is obviously more costly in every way.

I also want to note that, according to the 211 Ontario registration data, there are 53 crisis services for women in Ontario and two for men.

Now, we know that most success happens when people get an intervention in their moment of need and at first contact, meaning not a referral to nowhere—to a service that often doesn't exist or it doesn't fit or there's a long wait—and not a phone call to register for service, but help in that first moment of reaching out.

I hope I've painted a picture for you of the gap in our current service system and shed some light on why we might not be turning the curve on IPV. Instead, we are creating a generation of people who end up feeling hopeless because the services that they need don't exist, and they give up trying to reach out for help. We're also creating a next generation of people that are more likely to continue the cycle of violence.

The ideal situation would be, of course, a stable crisis service system and services that engage men to help them deal with their own histories of trauma and help them change their behaviour, as well as interventions for couples when it is low risk, and that service would be available in people's times of need and it would be through a provincewide helpline and walk-in clinics across the province as the first point of access.

Finally, that we create a social system that allows the adults to create the change, to stop the cycle of violence and to slow the growing mental health issues in children—let's not make children do this change. It should be the adults' responsibility.

I'm going to leave you with this thought from Maslow: If the only tool you have is a hammer, you tend to see every problem as a nail. It is time that we have new tools in Ontario to fix the problem of IPV.

I thank you all for your service and for the amount of time and attention you've put into this issue.

1410

The Chair (Mr. Lorne Coe): Thank you very much for your presentation.

We'll now start our questions with the members of the official opposition. MPP Sattler, please, when you're ready.

Ms. Peggy Sattler: Thank you, Ms. Somogyi, for coming in today and speaking to this committee. You've raised a very important aspect of the IPV epidemic, and it is something that we have heard from a number of presenters: If all we do is try to put women and children in shelters after they have experienced violence, we're never going to be able to get a handle on this epidemic, and we need those upstream interventions to prevent men from perpetrating violence or abuse on their partners in the first place. So I really appreciate your perspective on this issue.

We've heard a lot about PAR, the program, and some of the issues with PAR. One of the concerns that has been raised is that it is a mandated program for somebody who, as you pointed out, has been charged in a case of IPV. There is no option for voluntary participation in PAR, unless there have been fundraised dollars that are able to support a voluntary PAR. When you talk about the need for men to have access to counselling services, is there an option to modify PAR to make it voluntary, or do we need to look at something entirely different from the current approaches to dealing with men who perpetrate violence?

Ms. Susan Somogyi: Thanks for that question. I'm very proud of the PAR Program. Having worked in it for many, many years, I think it does phenomenal work, and I think it could be modified to support men from a voluntary perspective.

I respect that from the Ministry of the Attorney General's perspective, that's outside of their mandate, because they are dealing with once a charge occurs. I will also tell you that in 30% of the situations, approximately, men ask to go through it again. How powerful is that? And they can't.

Men do ask sometimes to come into it beforehand—not just because they've been charged, but because they want help—and it can be the ideal situation. It's not for everybody; some men do better in an individual type of situation. But I think PAR is a great option as a volunteer program.

Ms. Peggy Sattler: Okay. Thank you for that.

One of the issues that you did not touch on in your presentation, but I really want to hear from you about this, is the length of time it takes for a survivor of IPV to recover from the trauma that they have experienced. You talked about the fact that women will often seek Family Service Ontario counselling services after they have experienced IPV in the home, and we know that there is a very limited number of free sessions where they can get counselling. I have heard that, overwhelmingly, for most survivors of IPV, the limited number of counselling sessions is insufficient to help them deal with the trauma effectively and move forward with their lives. Do you have any insights you can share with this committee about the access to trauma counselling services and whether we are funding appropriately to help survivors recover and move forward?

Ms. Susan Somogyi: Well, we aren't funding appropriately for all survivors. I'm not sure about "most."

I can speak to what we do in family service agencies, which is a very stepped model, where often people's first point of contact is a walk-in. For some people, at that moment in their lives, that's all that they need or want, and it's important to respect that.

If there's more that is needed, then we put them into a short-to-medium-term type of program. On average because some people will drop out of that; some people will stick with that—for the past 20 years that I've been in this particular business, it usually lands at about six counselling hours. There is a percentage of those women that will need more, more extensive, because their histories are far more extensive; that's more like one to two years, and that's where it really becomes problematic, because they start the work and they can't finish. That impacts their children, it impacts their workplaces and it impacts everything they do.

Ms. Peggy Sattler: And are you seeing that happen more often with the cost-of-living pressures that everybody is experiencing, that people have to stop accessing the counselling services that they need because they simply can't afford it?

Ms. Susan Somogyi: I would say so, but also our agencies can't afford it because we've lost charitable dollars. We used to find creative solutions. We're running out of these funded dollars. It's, "You've used up too much time, we'll put you over into our subsidized, and we can have some charitable dollars that cover you," and then, "Go out and live your life for a while, and if you need more service, call us back next year."

We're running out of those options. So you come in, you get your brief therapy and that's all.

Ms. Peggy Sattler: Yes, and that actually leads nicely into my next question: One of the recommendations that you made to this committee was around the need for a stable crisis service system. Can you expand a little bit about what your sector is experiencing in terms of the funding pressures and what that means for your ability to deliver crisis services?

Ms. Susan Somogyi: Our services are not so much crisis. Those are often more shelter services that are there for crisis lines, and we rely on those services. We refer women over to them when that's the more appropriate place for them to be served.

But we are experiencing greater demand that we're not able to meet—and depending on the community, because the funding isn't consistent from one community to the next; there's no logic to it in terms of service demand or population—so that's what is creating greater challenges for women to be able to access those services that they need.

Ms. Peggy Sattler: Okay. So the recommendation around the need for a stable crisis service system was related to

the shelters that you work with and your awareness that these shelters were really challenged in order to provide those services.

Ms. Susan Somogyi: We need the whole service system. I didn't come here just about us. Yes, the shelters are critical.

Ms. Peggy Sattler: Okay. The wait-lists: You talked about the fact that when people come to access therapy, unless it's a walk-in service, they can often wait four to six months, and mainly there you're talking about women. You said men can wait up to a year, if they can afford to get into counselling. Are the wait-lists growing or has this been a reality among family service agencies for a while?

Ms. Susan Somogyi: It depends on the community. Some of our agencies had no wait-lists prior to the pandemic, and some of them—again, because depending on the funding and the demand, it doesn't really match the population—already had long wait-lists.

Since the pandemic, people's wait-lists have increased. And if I said six months, I meant to say eight, so it's four to eight. My apologies for that.

Ms. Peggy Sattler: Oh, four to eight.

Ms. Susan Somogyi: It's four to eight, and some of my members are reported a one-year wait-list.

Ms. Peggy Sattler: And this is for women who have experienced—

Ms. Susan Somogyi: Yes.

Ms. Peggy Sattler: Okay.

The other question I wanted to ask you is around the concern you raised about women who experience intimate partner violence. The majority don't go into shelter, and many don't recognize or identify as a survivor of intimate partner violence. Do you have some thoughts about how to address the fact that this is often the experience of women, that they don't recognize themselves as being a survivor of intimate partner violence?

Ms. Susan Somogyi: That's why I think it's critical that the detailed code called "counselling and therapy," which covers the services that family service agencies provide, is in every single community someplace other than just a shelter, because then if the woman does not identify herself as a survivor and she just sees the problem as, as I said, stress, self-esteem—

The Chair (Mr. Lorne Coe): Excuse me. That concludes the questioning from the official opposition. 1420

I have, now, the government. MPP McGregor, please, when you're ready, sir.

Mr. Graham McGregor: Thank you for being here, Susan. I just want to give you a chance to finish that answer.

Ms. Susan Somogyi: So if the family service agency doesn't exist in the community—and there are communities in the province where that is the case—then there is no alternative that is generic.

Mr. Graham McGregor: Got it.

This is day 7 of our study on IPV. It's clear that many of the solutions to challenging this problem are going to involve dollars, but I'm wondering if you have any thoughts on low-cost or no-cost solutions that can be implemented immediately by the government.

Ms. Susan Somogyi: Yes. I think that if the eligibility criteria for the counselling and therapy for women were opened up to allow agencies that have that expertise and the systems in place to assess risk—if they could see their partners as well, it would allow that service to happen when that's the more appropriate service for some women and it's what they want.

Right now, we have the men's sexual abuse program, and it's only for men who had experiences of child sexual abuse. But if all men could access it who had experienced physical abuse as children, or witnessed abuse, then that would open it up for them to access those services as well so just changing that eligibility. I appreciate that that might create some more demand on services, but at least then people would be getting the services that they most want and need. And so, that would be virtually a no-cost solution.

I also think you have the VQRP program, which currently supports private practitioners instead of a service system that is our province's in terms of the funding. If that service came to those who provide the VAW counselling therapy, funded by MCCSS, as a priority access to do that work, it would help us develop some economies of scale and would augment the services and potentially help us with some of that service demand.

Mr. Graham McGregor: The fact is the majority of intimate partner violence occurs against women and children; the majority is perpetrated by men. To those in the public, to hear the solution about investing in more mental health services for men just doesn't sound cohesive with what I think the public would think.

How would you address those critics, if people were critical, saying, "What do you mean the answer is to provide more mental health service for men?" How would you answer that critic?

Ms. Susan Somogyi: I think people have a misconception about what the profile is of somebody who has offended. These are husbands, uncles, fathers—the people who we know in our lives. Your life experience is never an excuse for behaviour, but it is context, and they deserve to be helped because they still need to be fathers to their children; their children still need them. And again, many of them are staying in those relationships.

Let's do what we can to help them have a healthy relationship or a healthy separation, for the sake of the children.

Mr. Graham McGregor: Do you think there's room in the conversation for a discussion on what positive masculine identity looks like? Is that something the government should be looking into? And how would you identify positive masculine identity?

Ms. Susan Somogyi: It's something that we deal with in the PAR Program quite a bit and I think that's very helpful. Any place in our society where we can present those messages and do some public campaigns related to positive masculinity I think is helpful. It won't solve the problem alone.

Mr. Graham McGregor: I'm a massive fan of therapy in my own life. It's definitely changed the course of my life and many people I know. I think my generation is a little bit more attuned to therapy. It's less of a dirty word amongst millennials when we talk about it. I don't want to say we go, "Bro, bro, did you do therapy, bro?", but we kind of do.

One of the things that I discovered: I started using therapy in 2021, and I was lucky enough to have a government job at the time. I wasn't elected, but I did have a government job, and I did have government benefits that I didn't know that I had until I looked into it. Is there opportunity for government, or through agencies or somehow—I imagine if that was a problem I ran into, I imagine that's a problem that happens quite a bit, where people might just not know that they have the benefit that could be used for either individual or couple's therapy. Is there red tape, or is there work government can do to make that more accessible for people and more accessible for agencies that are doing great work?

Ms. Susan Somogyi: Interesting. Family service was the very first employee assistance program in Canada, FSEAP, so we do have a social enterprise. I think, depending on the company and the service providers that they use, one of the issues when it's IPV can be, are they specialized in training? Are they accredited? Do they have that level of risk mitigation?

And so, through EAP, you can end up with a phenomenal therapist who does great work, or not, when it's private. As people come into our services, we know they're going to get that quality of service that is supervised, is accredited and has those risk mitigation strategies in place.

Mr. Graham McGregor: Beautiful.

Time check, Chair?

The Chair (Mr. Lorne Coe): Yes. You have three minutes and 49 seconds.

Mr. Graham McGregor: You talked a little bit about how people assign men with one profile or the system uses "perpetrators" as one profile. Could you expand on that a little bit? What is that profile that the system views people through, and how many other profiles do we need to put a lens on?

Ms. Susan Somogyi: Michael Johnson, a leading expert in this field, has developed four different profiles, and the worst one is coercive controlling. That is the men who are more likely to kill their partners. It is also men who aren't as likely to benefit from the PAR Program. These are men that are looking for total domination over their partners.

Situational violence, which is what I'm talking about, is conflict over one issue. It comes up to situations; it comes up to challenges related to managing relationship conflict and differences and emotional regulation and, "This is the way I think it should be. The other guys are doing it this way." It's control over an issue. He doesn't want to control his partner completely. These situations can get risky, and they can get violent. It's not that there's no risk. But there are many of them. A lot of the work that we do relates to that low risk.

Mr. Graham McGregor: How can the system or how can government intervene on some of these situational—I guess you said "situational controlling"—

Ms. Susan Somogyi: "Situational couple violence," it's called.

Mr. Graham McGregor: Right. How does the system intervene early to—

Ms. Susan Somogyi: Ensure couple counselling is available for everybody and ensure there's a group program and an individual program for men, so they don't have to wait until they're charged to get help.

Mr. Graham McGregor: Got it.

One of the things that we've heard about working in some areas—I represent Brampton. We've got the Peel safe centre. That's really built around the hub model. We've heard from some people that the hub model is the be-all and end-all; we've heard from other people that the hub model might not work in rural contexts etc. What's the position of Family Service Ontario on getting services integrated in a hub?

Ms. Susan Somogyi: Our tag line is, "We're Stronger Together," and we live that every day, so any place where agencies can come together and work together I think is a good solution for everyone.

Mr. Graham McGregor: I agree. I think, with the time that we have—a minute and a half?

The Chair (Mr. Lorne Coe): You have a minute and 18 seconds.

Mr. Graham McGregor: Is there anything that we didn't ask you that you think we should have asked you here today?

Ms. Susan Somogyi: No. You asked me some wonderful questions, and I can't think of anything.

Mr. Graham McGregor: Well, I will just use the rest of the time to thank you very, very much for the decades that you've dedicated to the field and the expertise that you've shared with the government. This is a problem that needs to be addressed. It's something that the committee and the government need to get right, and hopefully your work here is helping put us in the right direction to make sure we do that. Thank you very much.

Ms. Susan Somogyi: Thank you for your time.

The Chair (Mr. Lorne Coe): Thank you, MPP McGregor. Thank you very much for being with us this afternoon. We wish you well.

WOMANACT

The Chair (Mr. Lorne Coe): I will now call on WomanACT to come forward, please. You will have 10 minutes for your presentation. Please state your name for Hansard.

1430

Ms. Harmy Mendoza: My name is Harmy Mendoza. **The Chair (Mr. Lorne Coe):** Thank you very much

I will let you know when you have one minute left in your presentation so that you have the ability to sum up. You will have the opportunity to convey additional information in response to the questions that will be posed by the members of the official opposition, followed by the government members.

You may begin, please.

Ms. Harmy Mendoza: Good afternoon. My name is Harmy Mendoza. I am the executive director of the Woman Abuse Council of Toronto, also known as WomanACT.

First, I would like to thank the committee for the opportunity to be part of this crucial moment in Ontario's history.

For over two decades, WomanACT has been a leader in the anti-violence-against-women sector. Now a charitable organization, it collaborates with community organizations, government, private sector and community members to empower survivors in ending gender-based violence and promoting equity through research, policy and education.

IPV is a pandemic in Ontario. The context of this epidemic is well documented and consistently shared by survivors and the organizations who support them.

At this point, I'm sure you have heard already about the striking and concerning statistics. In the interest of time, I will not restate them in my intervention today. Today, I will speak about the importance of adopting a preventionfocused response model to ending gender-based violence in Ontario. This crucial focus has already been recommended and proposed by the Ontario Domestic Violence Death Review Committee and the Renfrew county inquest, among other literature.

While my presentation emphasizes the importance of prevention, I also want to recognize that prevention and intervention are both vital components to ending genderbased violence that should go hand in hand rather than at the expense of each other. A recurring theme you will hear is that the VAW sector is underfunded and forced to make difficult decisions when allocating limited resources, which has resulted in the reactionary system we have today. So I want to clarify that when I propose preventative recommendations, it should not come at the risk of decreasing intervention resources.

As defined by UN Women, prevention is about addressing conditions that are linked to gender inequality which create barriers to safety for survivors across different systems. A prevention-focused approach examines the structural and social drivers that enable gender-based violence. This can include social norms and attitudes towards survivors and women-identifying individuals such as victim blaming and system inequities that facilitate conditions which increase the risk of violence for women.

A prevention-focused approach to gender-based violence is also inherently survivor-centred. Survivors' first-hand challenges with systems and programs are irreplaceable evidence of how well or not the very systems and programs designed to increase survivor safety are meeting this overarching purpose. Policies, programs and systems should be evidence-based and survivor-centred to give survivors safety options and empower them. The Ontario government can implement several prevention-focused strategies to prevent gender-based violence and facilitate the systemic changes required to end gender-based violence in this province.

But how do we support prevention? I would say by supporting community organizations in researching, testing, implementing and evaluating new evidence-based models, approaches and responses. Let me give you a couple of examples. I'm going to start with one crucial area, housing, and the Safe at Home model. Housing is a critical factor influencing gender-based violence as it is both a cause and consequence of homelessness and instability for women and gender-diverse individuals. A shortage of affordable housing exacerbates this issue, making it difficult for survivors to leave violent situations and increasing their vulnerability.

The solution includes increasing housing developments and the province's housing stock and investing in options for women that cater to their needs. It also includes expanding the spectrum of housing options for IPV survivors to include innovative options beyond the contemporary status quo, which is to remove the women from their homes. For instance, consider models that support survivors in remaining in their homes safely, such as the Safe at Home model. This model, recommended for low-to-medium-risk cases, enables survivors to remain in or move directly into independent housing, supporting their long-term economic security and addressing the shortcomings of current housing responses, which often require survivors to leave their homes, resulting in instability and hidden homelessness.

One other crucial area is improving systems collaboration focused on prevention. A coordinated and collaborative approach is essential to preventing and ending intimate partner violence. Research highlights that multi-sectoral interagency coordination significantly increases survivor safety, particularly in vulnerable communities.

Service coordination brings together key community partners, addressing the fragmented nature of services like housing, justice and mental health, thereby reducing duplication and easing the burden on survivors to navigate complex systems. This approach also enhances survivor safety by ensuring that multiple agencies understand and address risk factors through a comprehensive safety plan.

The inquest's recommendations emphasized the need for a common risk assessment framework and adequate training for all justice system personnel and service providers. WomanACT's project, which pilots the Multi-Agency Risk Assessment Conference—also known as MARAC—brings local agencies together to jointly develop risk-focused safety plans for high-risk IPV cases. This model's principles can also enhance prevention strategies by promoting cross-sectoral collaboration and awareness before cases escalate to high risk levels.

One other crucial area: training and education that is trauma-informed. A trauma-informed approach involves understanding the impact of trauma to minimize re-traumatization and avoid introducing new trauma in interactions. It recognizes how systemic, structural and institutional forms of oppression and racism affect women who experience violence, influencing their access to and experiences with support services.

At WomanACT, we acknowledge the pervasive nature of GBV and advocate for the importance of equipping everyday people with how to identify, prevent and respond to gender-based violence. We must train people in the private and public sectors to recognize the signs of genderbased violence and to take appropriate action, always prioritizing what individual survivors say they need. Comprehensive approaches include but are not limited to bystander training, community awareness and survivor engagement. Survivors are everywhere, and their allies should be everywhere too.

Data and evaluation capacity: Having data and evaluation capacity is important to understand if experiences for survivors are changing and improving-or not. We know specific demographics, including women who are Indigenous, Black, part of the 2SLGBTQI+ and newcomers, are at a heightened risk of IPV. To effectively address IPV and GBV, it is essential to create comprehensive data collection and evaluation capacity that is undertaken in complete collaboration with service providers to accurately capture survivors' experiences and service provider effectiveness. However, current opportunities to achieve this are limited due to funding constraints, highlighting a significant gap in our ability to make meaningful improvements. Sustainable, long-term funding is essential for prevention efforts that address the root causes of IPV and gender-based violence. This includes distinct investments in community-based innovation and knowledge mobilization, along with funding for direct services.

In conclusion, IPV is an epidemic, but it is preventable. Prevention saves lives, heals and alters individuals' life trajectories. It fosters acceptance, non-violence and equity, proving to be both cost-effective and innovative. It is a wise and just approach. Addressing prevention necessitates a sustained financial investment to dismantle the structural inequalities and barriers for survivors. This complex and serious social issue cannot be resolved with short-term solutions.

The Chair (Mr. Lorne Coe): Excuse me. You have one minute left, please.

Ms. Harmy Mendoza: Thank you. The evidence-based recommendations I have put forward today are prevention-focused and aim to facilitate greater service coordination, inter-sectoral collaboration, stable and sustainable funding for IPV service provision, advocacy—and I'm going to repeat that word: advocacy—knowledge mobilization, data collection and research on wider behavioural change in society. These strategies will support the province in establishing a sector and system to prevent and end IPV and GBV.

1440

The Chair (Mr. Lorne Coe): Thank you very much for your presentation.

To the official opposition for questions—MPP Wong-Tam, when you're ready.

MPP Kristyn Wong-Tam: Wonderful to see you, Harmy. I know that you have presented on this issue on so many occasions.

I want to first of all begin by also just thanking you for acknowledging that intervention and prevention work hand in hand and that they are not one-off and should not be sacrificed at the expense of the other. I think that's a very important reminder for everyone in the committee and also just for those who are presenting.

If I can just ask you to dig a little bit deeper because you are well versed on the number of reports that come before this committee as well as this government and every other government across Ontario and in Canada about the different reports that have been issued in the past on this subject matter. Whether it's the Ontario Domestic Violence Death Review Committee or the Renfrew report, I think you would probably agree that a lot of the actions that governments need to take have already been identified, including in the MMIW report. What is stopping us? I'm looking for an outsider point of view. Why are governments—not just in Ontario but right across Canada in some cases—struggling to implement the recommendations of these reports, as you see it?

Ms. Harmy Mendoza: In my opinion, if I could even categorize it, number one: resources. There are very limited to no resources to actually implement all of the different recommendations that are named again and again. If I could say, number two is lack of working collaboration between different levels of government and even between different divisions, departments and ministries. It saddens me because I keep reading the Ontario death review committee again and again. If you go back and read, for example, those reports, they no longer even explain the recommendation. They state, "As recommended in our last report"—blah blah. Forgive my language, but I just find it more candid to just say it. The recommendation is there, but it's not being implemented.

MPP Kristyn Wong-Tam: Part of the implementation failings, as identified by other GBV and feminist organizations that have presented today and also in the previous weeks—they identified the need to create almost an accountability table, some type of round table, ongoing working group with sectors and ministers all working together. Is that something that you would support?

Ms. Harmy Mendoza: There was a round table under Kathleen Wynne's administration, and it made very important advances. It was important to have it, and I would support it.

I would also highlight the importance of having clear communication and working relationships with the community at large. What I mean by that is, when round tables, particularly at the provincial level, are formed, there are specific requirements related to the communication that goes back to the community, meaning that rarely is whoever is attending able to consult or even tap into the knowledge and richness of other community members. They're simply, I believe, not allowed to do that. The conversations that happen happen in very strict, confidential guidelines, which exist for a reason. I guess what I'm saying is, yes, but please enhance it by ensuring there are really good communication lines with the community, ensuring that consultations happen with the community and particularly survivors of genderbased violence. I would suggest that is enhanced that way, to work even better than how it worked before.

MPP Kristyn Wong-Tam: Fantastic.

I think it's going to be very well proven over the days that there's always room for improvement, so we want to be able to build on and not dismantle what was there before—even though the round table doesn't exist, again, there's nothing that stops us, is what you're saying, from building a better round table and a better accountability mechanism.

Can I just ask you about the need to ensure service coordination and clear dialogue? A theme that has come up in the past six days of hearings is that there isn't a wholeof-government approach to addressing intimate partner violence as an epidemic, or even treating gender-based violence as a real, serious social illness that we need to address. And so different sector partners have come forward and said that there isn't a place for them to go. They're either talking to one ministry or they're going to another, but they have to do the system navigation, which takes time and capacity—and then, of course, the grant-writing exercise, which is capacity draining for large charities with 100 staff, let alone the small non-profits and charitable organizations that have literally maybe three staff persons.

Would it be beneficial to have a ministry or some type of designated body at the province where you know that this is where you go on this issue, and then it's the role of that minister or ministerial partner to do the system coordination so you don't have to do that?

Ms. Harmy Mendoza: I would agree to that. Again, I'm obviously not a government body expert, but I could tell you from my perspective that that coordination of systems needs to happen not only within the provincial level of government, but, yes, it would be super helpful to have it also coordinated within the other levels of government to support that system navigation, to support that call for action, to support that implementation of new ideas or to identify trends that we are seeing. Because the world changes and it changes every day, and so we need to be able to be proactive to address this issue that is in front of us.

And so, I would support it and add to it that it needs to happen through different levels. It's not easy. It's going to require a very important, complex structure that allows us to be proactive and time-sensitive to the trends that we're seeing today that are different from yesterday, for example.

MPP Kristyn Wong-Tam: Thank you.

Governments, as well as other large institutions—and I think oftentimes big bureaucratic engines—are oftentimes looking for data: "Prove to us that this is money well spent. Prove to us the outcomes. Prove to us the need." We've heard from different sector partners, including researchers and academics who are probably sitting on millions of dollars of research funds, that they need to have resources to collect the data. There need to be opportunities to share the data amongst the different agencies and to analyze it and interpret it in meaningful ways.

Your organization doesn't receive a lot of money, I don't believe. Do you receive any funding from the provincial government to do that data collection and, if not, would it be helpful for you to have those resources? And then how would you use and go about collecting that data?

Ms. Harmy Mendoza: No, we don't, and we have never received any type of funding like that. It would be helpful to be able to use it and, like I said in my presentation, work in partnership with community organizations to develop capacity building around data collection.

Community-based research is something we undertake a lot at WomanACT, and we actually train survivors to be peer researchers and help us collect data. We work on project-based initiatives at WomanACT. We don't have core funding. We don't know if we're going to be open in April 2025, which is when our next fiscal year starts, so we have to be applying and collecting funding to be able to continue to undertake research. **1450**

I think that it would be important—and if I can speak about a very important key lesson about data and also evaluation, it needs to be working in community—

The Chair (Mr. Lorne Coe): Thank you very much.

We're going to transition now, please, to the government. MPP McGregor, please, when you're ready.

Mr. Graham McGregor: Through you, Chair: You were starting a good answer there. I just want to give you the chance to finish it.

Ms. Harmy Mendoza: Sure. I was going to say it's important to work with community organizations to develop that evaluative process to collect data. It's important to have a very community-based process, not someone necessarily who would come and establish that evaluative process. There are different types of research. Some are more rigorous than others. But it's important to start somewhere, and I think that community agencies should have a say in developing that evaluative process and data collection to not only identify the issues they're building but also to respond and be proactive to it.

Mr. Graham McGregor: Right. You spoke a little bit about trauma-informed services. I'm wondering if you could give us an example of a service or a government intervention where somebody could be accessing a service—so, somebody who is trauma-informed and not trauma-informed, if you have an anecdote or an example, where does that break down and what impact does that have on survivors in the process?

Ms. Harmy Mendoza: Everywhere. Let's start with the Attorney General. Let's start with crowns, for example. Trauma-informed training for crowns: Let's start there. Let's start talking about how trauma impacts victims so that they can understand that they will probably forget, they will probably restate things in a different way so that they—not that they will change the legal structure that we have in place, but they will understand the rationale behind the reaction or the response that witness is having, for example.

And when I say "everywhere," like I said in my presentation, we all have a role to play. If you have a neighbour and you have seen signals, you should prepare yourself to respond and prevent a potential femicide. So, everywhere—it needs to be embedded. If you really want to eliminate it, we have to get everywhere.

Mr. Graham McGregor: So everywhere—and I guess in the world of government, it would be a good goal then to make sure that services are trauma-informed, not just the big shiny examples, the justice system etc., but do you think things like doctors' offices would be—

Ms. Harmy Mendoza: Physicians, dental hygienists absolutely. Dental hygienists, for example, are in a very good position to see fractures. The physical impact of GBV is usually central—meaning mouth, head—and so they are in a good place to identify and respond, for example.

Mr. Graham McGregor: Right. If I were a dental hygienist in Toronto and I reached out to WomanACT— understanding the resource challenge that your organization faces—and I said, "I want my 10 staff at my clinic, or at least myself, to become trauma-informed," how would they do that?

Ms. Harmy Mendoza: I would say to go to our website, go to education and training, click on our e-learning curriculums and at least take the e-learning training that WomanACT developed out of a project so that anybody can take it. It can be assessed to your capacity building. That would be my first reaction.

Mr. Graham McGregor: So WomanACT has training online right now?

Ms. Harmy Mendoza: Right now, yes. How did we get that? Out of project-based initiatives. And how do we sustain it? Because now, whoever takes it pays a nominal cost to be able to keep it up and running on the website, and it's part of their qualifications every year.

Mr. Graham McGregor: How time-intensive—if you're looking at, say, running an organization where you need 40 employees to be trauma-informed, does that happen once? Like, you do a two-week training and then you're good? Is it regular training? How regular? Mechanically, what's the position of WomanACT on how that should work?

Ms. Harmy Mendoza: Excellent question, and we get that question all the time. The emergency room will have a different time than someone who has one hour they could use to go through a new learning curriculum. It really varies.

I think part of the alignment that we need to do, and part of the reason why we need to assess properly or have a trauma-informed expert like WomanACT, is that they will assess the realities of a particular body or a particular group of people to start with one-on-one services and evolve from there. The assessment stage is very important because you cannot create a three-day training for someone who's not going to have that opportunity.

What we have seen lately is that online training seems to be the way to go because it allows staff to do it at their own pace and go through the questionnaires, the exams, the tests and then do it themselves. Some other employers or associations prefer half-day leadership and management training to start. Okay, let's start there. Let's start with supervision and let's start with that place.

So it really varies and it's different based on the different group of people that you want to engage to do this type of work.

Mr. Graham McGregor: So the leader of an organization runs a small business, etc. I'm thinking of MPPs; we all have staff. I'd want to know the people who were doing the training learned something at the end of it. How do we do that out of WomanACT? How do you assess that people, when they're going through the training, are absorbing what they're learning?

Ms. Harmy Mendoza: Part of what we do is an assessment. Like I said, we do that through surveys, for example,

at WomanACT. We prepare a survey and we assess and we provide a recommendation based on that. I think the elearning curriculum can be built, again, so that it has a certain level of testing so that we know, and that data could be provided anonymously. Of course, we will protect confidential information—but an idea of what the staff is going through and the understanding, and everything at WomanACT is evaluated for that.

Now, I want to build and respond and elaborate on that because you talk about leadership. I have to restate this: When a leader—a big CEO, a big ED from a big company—speaks and says, "For us, gender-based violence is important and it's not okay and we will not allow that in our workplace or in our association", that is a big statement that, believe me, comes a long way because it sends a message that my CEO sees this and views this as an important area of work and is serious at my organization.

That needs to be coupled with policy reviews, because we all have policies at work, and what the responses are that we have built in it, and training and evaluation, and continuously reassessing everything so that you can be able to be responsive to the new information you're receiving in there.

Mr. Graham McGregor: I appreciate that.

Time check, Chair?

The Chair (Mr. Lorne Coe): It's 2:05.

Mr. Graham McGregor: Okay.

Economic empowerment: A big priority for the government, a priority for all parties; something that we passed a bill on—and this isn't a partisan comment. We've got PC and NDP here. They supported a bill around initiatives to get more women into the construction industry, something that I guess a man would never think about—but something like making sure that women's bathrooms are on construction sites. That's a law that every member of this committee sitting here voted in favour of. Not a partisan comment—just a good thing that we did.

We've seen women's participation in the construction and skilled trades go up 130%. There's a lot more to do when you're starting with a low number.

Can you tell the committee a little bit about how important economic empowerment initiatives are—and making sure that everybody is financially stable—and financial well-being is to preventing intimate partner violence?

Ms. Harmy Mendoza: Hugely. It's absolutely important to be able to add that additional layer. We have at WomanACT lately started to work with the STEM sector and construction companies to, again, develop and have a bit of a baseline to us to the importance of workplace harassment, for example, or how to respond to IPV when I am seeing it or prepare their staff as to important responses, because that will impact women's economic security. **1500**

Legislation can only take you so far. You could create all the perfect legislation in the world in Ontario, but if we don't communicate to people—like the workplace violence leave: I know we have it. Every time I ask someone that is not in my area of work—because I speak about that all the time whenever I can: "Did you know that?"—nobody knows. Why? Because we're not communicating that it's a right for women to have. Women will appreciate the five days to be able to rearrange safely to continue and go back to work.

The Chair (Mr. Lorne Coe): Thank you very much for that response. That does conclude your time for your presentation this afternoon. We very much appreciate you attending the Standing Committee on Justice Policy.

Ms. Harmy Mendoza: Thank you, everybody.

The Chair (Mr. Lorne Coe): Thank you very much.

AURA FREEDOM INTERNATIONAL

The Chair (Mr. Lorne Coe): I will now call forward to the table, please, Aura Freedom. Good afternoon.

Ms. Marissa Kokkoros: Good afternoon.

The Chair (Mr. Lorne Coe): Let's try to see you through the cameras here.

Ms. Marissa Kokkoros: All right.

The Chair (Mr. Lorne Coe): You will have 10 minutes for your presentation. At the one-minute mark, before you conclude, I'll let you know so you can sum up. Please state your name for Hansard, and then you can begin your presentation. That will be followed by questions, as you observed. Please start.

Ms. Marissa Kokkoros: It's Marissa Kokkoros, and I'm the ED at Aura Freedom.

Good afternoon, honourable members. I would like to thank the committee for this opportunity that I approach with the utmost respect and importance and thank MPPs Kristyn Wong-Tam and Peggy Sattler for having community voices at the table today.

My name is Marissa Kokkoros, and I'm the executive director of Aura Freedom. We're a grassroots organization based here in Ontario working for over a decade to eradicate male violence against women and sex trafficking. We do this through a variety of upstream prevention-focused activities. I myself have over a decade of experience working with survivors; researching and documenting GBV at a community level; and implementing a wide range of programs, from post-disaster relief for women in humanitarian settings to upstream prevention of youth sex trafficking in Toronto.

Before I start, I want to acknowledge the epidemic levels of violence against Indigenous women in Canada contributing to the genocide of missing and murdered Indigenous women and girls. My language today will centre around male violence against women and children, as that has been my area of focus, but we know that anyone can experience abuse, including 2SLGBTQ+ individuals and men and boys.

I have dedicated my life to eradicating male violence against women like many of the she-roes who came before me. I have a very personal attachment to this work, having myself lived for a period of time in a domestic violence shelter as a child with my mother and brother. At the time, in Ontario, it was the 1980s. My mother had to wait until a spot was available. According to her, to her memory, there were only one or two women's shelters at the time. When they called with a room ready, she came to pick us up at school that same morning. Her car was filled with as many things as she could fit, including my Cabbage Patch doll. That was more than 37 years ago, and we're still here. And although we have more transitional housing in Ontario, we still have wait-lists for women and children fleeing violence.

Intimate partner violence is an epidemic, and it's not new, and it's not going away. The femicide observatory reports that femicides have increased 20% since 2019. I know this isn't new information, but I do think the repetition is necessary. According to OAITH, Indigenous, Black and South Asian women continue to be overrepresented in femicide data—and let us never forget the children who are murdered in the context of IPV, used as pawns in order to hurt their mother in the very worst way.

As the most extreme manifestation of male violence against women, this increase in femicides can be an indicator that intimate partner violence is escalating more frequently, that more women and their children are experiencing worsening violence behind closed doors, much of which will never be reported to the police, walking around on eggshells at home, choosing carefully every word uttered, every piece of clothing chosen, every interaction with each other, choosing it very carefully in order to stay as safe as possible. It's not domestic violence but domestic torture. We have yet another generation of children here in Ontario who must deal with the mental health impacts of witnessing their parents being harmed or worse, contributing to intergenerational violence, criminalization, homelessness, food insecurity, poor health outcomes, substance abuse, poor education results and unemployment. Herein lies the epidemic of IPV, and the costs to Ontario and all of us, fiscally and socially, are immense.

We're also seeing an increase in tech-facilitated GBV with incel spaces flourishing, children's access to violent pornography skyrocketing and the online sexual exploitation of youth increasing. In my years of work with survivors of sex trafficking, women and children, it's very clear that many of them were trafficked and exploited by those who they thought were their intimate partners.

Right now, in Toronto, in DV shelters, we have women who are fleeing not only violence but also human trafficking. We also have women who are strategically criminalized by their traffickers—getting them to recruit others, commit other crimes—in order to isolate them further and keep them from reaching out for help.

I have called male violence against women a national emergency, and I know I'm not the first one. We are going about our days with a blaring alarm sounding off. We go about our days; we try and muffle the noise, but we've never tried wholly and truly to find out what is causing the alarm.

My main recommendation today is the same one that Aura Freedom and many others have been advocating for years, to look upstream and invest more in primary prevention. I will give a suggestion of a framework and specific examples.

Let me be clear: As Harmy mentioned—and I'm glad she's repeating—we are not recommending that funding be reallocated from front-line work to primary prevention. I consider front-line work sacred; it was there for my family when we needed it. It must be robustly funded, resourced and supported. Yet just as crucial is preventing the violence from happening in the first place, preventing the trauma that rips through our families, affecting them for generations.

All we are seeing now still, 37 years after I left the shelter, is one woman leave with her children and another one show up. The recommendation today is to zoom out and for Ontario to stop that revolving door. We need bold, new and robust investments in three unwavering pillars. Ontario-STANDS has some good places we can start: upstream or primary prevention—pillar 1; midstream or secondary prevention, also known as early intervention; and then, the tertiary prevention, direct response—sacred, long-term healing.

All pillars are robustly funded and resourced to the size and scale of their issues. All pillars are regarded with the same importance and value; we've never seen this before. All pillars are research-driven, large-scale and sustained not for the long term—for the very long term. Pillars are accountable and include time-bound goals and measurable outcomes. Pillars address systems as well as individuals child welfare, Family Court and others. And pillars work together as a framework which is created with community stakeholders at the table—culturally and geographically targeted and all of the things that we know a framework needs. Ideally, this framework is housed under its own ministry.

Yes, we need bold investments. In our written submission, we're outlining examples of primary and secondary prevention which address root causes and the drivers of GBV, and we know what they are: gender inequality, patriarchy, colonialism, racism, homophobia and more. We know that secondary and tertiary prevention are equally important and can indeed prevent violence, but they prevent further violence, repeat violence and intergenerational violence.

Primary prevention is unique in that it focuses on creating communities where GBV can no longer thrive and where it's no longer the norm. It can also support individuals who are already experiencing violence. Aura Freedom has extensive experience working at both the system and individual levels creating innovative, award-winning primary and secondary interventions, but they're often thwarted or delayed because of a lack of funding or project-based funding that always prohibits us from scaling up.

Four examples of primary prevention are developing and rolling out province-wide, school-based curricula on a range of topics—I will focus on GBV because we're talking about IPV today. In 2021, Ontario mandated school boards address sex trafficking through memorandum 166. Following the mandate, we were called by the Toronto District School Board—Aura Freedom—to support and inform them as they rolled out this anti-sex trafficking plan, created a community advisory table and facilitated training for school board staff, which we created. We are recommending similar policy changes, appropriate for IPV and GBV.

1510

Number two, addressing online misogyny, violent pornography and the responsibilities of tech giants. Number three, addressing and shifting the way genderbased violence is portrayed in the media and responsible journalism.

The Chair (Mr. Lorne Coe): Excuse me, you have one minute left, please.

Ms. Marissa Kokkoros: And number four, implementing sustained public education campaigns on GBV.

These are only four examples, and I can elaborate. Ontario has the opportunity to be a leader, but it will take time. There's no quick fix. We can't see primary prevention happening in real time. You will not be able to point to it, touch it, just like you can a shelter bed that was there for me. And frankly, it will take time to put a price tag on this. I can't give you a price tag tomorrow; that's the work that starts now.

With support and resources, we can turn this ship around, and as we address the root causes, we will begin to see Ontario flourish and see benefits in all other areas of society. That's the world I want to leave behind for my daughter and for all of our kids.

I'll stop there.

The Chair (Mr. Lorne Coe): Thank you very much for your presentation. We'll now start with our questions with the members of the official opposition. MPP Sattler, please, when you're ready.

Ms. Peggy Sattler: Thank you very much, Ms. Kokkoros, for your passion and your willingness to take the time today and come and present to this committee. I really like the pillars that you outlined, the upstream or primary prevention, the secondary midstream or earlier intervention, and then the tertiary crisis services.

You talked about the need for bold new investments across all three pillars so that they're—it's like a threelegged stool. They all have to be balanced in order to keep the system stable. But the language of bold new investments—we've heard a lot from other presentations at this committee that the solutions are there. The solutions have been documented in so many reports that have been provided to the government by the Domestic Violence Death Review Committee, by various coroners.

I'd like to hear your perspective on those. Do we need new solutions, or is it what you said: the bold new investments in the solutions that we already know work and that have been identified by so many experts like yourself who are working in the field?

Ms. Marissa Kokkoros: We don't need new solutions. We know what to do. We do need the new, bold investments. Violence against women has been the perpetual hot potato. I don't want it. This ministry doesn't want it. That ministry doesn't want it. It's hard to look at it. We know. It's hard to deal with it because we're all touched by it in a way.

We need the bold investments. The know-how, the expertise is there. What we need to do—the work now is really to sit down together and actually create what this framework will look like, what these three pillars will do, how they will work together, but the solutions are there.

What it will take to really eradicate gender-based violence—I know I'm going to die and never see the eradication of gender-based violence. That's just the reality.

But we know that our legacy has been putting those ripple effects into action, because if not, again, that revolving door.

So, yes. Short answer: The solutions are there. It's the investments and, really, the political will that hasn't been there.

Ms. Peggy Sattler: Thank you for that response. You talked about the need to ensure that there is accountability across those three pillars and also the meaningful and direct involvement of community at the table in developing and implementing in these pillars, and you proposed a stand-alone ministry.

Now, one of the things that we have heard about from other presenters is a reference to the former round table that existed on violence against women—actually, Harmy Mendoza from WomanACT just referenced it—and the importance of having some kind of provincial coordinating body that could potentially work with a stand-alone ministry that would enable the dialogue with the community to happen.

Do you have any insights or perspectives that you would like to share with this committee on the importance of having that provincial coordinating body or mechanism to enable the community to be involved in the implementation of these solutions?

Ms. Marissa Kokkoros: A round table could be housed under this ministry, and it is crucial for the round table to be reinstated. It was dismantled and it affected a lot of work, a lot of movement-building that was happening, and it really did affect the sector. But this round table could be housed under this ministry.

We have a provincial anti-human trafficking office. That is a relatively new office. So memorandum 166, which mandated sex trafficking education or policy—the memorandum itself is not perfect, but it's a start. And so all of these different policy and legislation changes could happen under this ministry and be advised and informed by this round table of community experts.

An issue I know with the coordinating committee tables now is that they are comprised of those who are transfer payment recipients, which Aura Freedom is not. You will never hear of so many grassroots organizations' voices. You won't hear of the Somali single mothers' group of 12 women. You won't hear of the work that's happening on the ground because we are not funded. You won't hear about us in phase 2 because we just aren't there.

So I think this ministry, this office, if it is created—and I realize that that's bold, but this issue is big and bad and ugly and old, and we need a really bold outlook and a bold approach.

Ms. Peggy Sattler: I think that the personal story that you shared was very powerful. This was the 1980s—that was like 50 years ago—and women are still being turned away from shelters every day in every community across this province.

I also really appreciated your comments about techfacilitated gender-based violence. That's also something that we've heard from some of the other presenters. Can you talk to us a little bit more about the solutions that you think need to be put in place to address this prolific reality of tech-facilitated gender-based violence that so many in Ontario, especially young women, are experiencing?

Ms. Marissa Kokkoros: Patriarchy doesn't just hurt women; it hurts men and boys, too. Young men and boys are looking for acceptance. They're looking for a place to go for a brotherhood, for a bond, and they're finding that online in spaces in incel cultures. They're finding that through guys like Andrew Tate who are telling them everything they want to hear. They want to be validated.

And so, we need to focus on online spaces and keep up with the online misogyny and the hate on social media because I am proposing education in schools on gender equality and IPV, but even that won't keep up with what they are being bombarded with online, because that is way more powerful and it's constant. So we need to keep up, and that is addressing masculinity and healthy relationships and all those things and really holding tech giants responsible.

In our brief, in our submission, we will have more details, but this, again, is going to be coming into the framework. There are things that work. We don't have to look outside of the country. There's stuff that's happening inside of the country, but then outside of the country, on what works to cut through the noise on social media and what kids need. Youth know what works for them on social media.

So yes, I think if we can learn about and adopt the incel culture as a young person, we can also learn about and adopt compassion, respect, honourability and all those things. Our boys and men are not lost—they're not—and masculinity itself is not toxic. It's when it causes harm that it is unhealthy. So that's what has to be taught. **1520**

Ms. Peggy Sattler: The other issue that you raised in your presentation was around child witnesses of intimate partner violence and the long-term impact on children. As we are in the midst of an epidemic of gender-based violence, more and more children are exposed to it in the home or in the community. Can you elaborate a little bit more about what Aura Freedom has done related to child witnesses of IPV?

Ms. Marissa Kokkoros: We don't work downstream. Most of our work is prevention in primary and secondary, but that's where—when we say that all those pillars are important, downstream intervention, working with children who have experienced harm, is very, very important to disrupt intergenerational cycles of violence. Yes, those wait-lists for trauma counselling are just as important as going upstream. I do want to stress that. But those interventions are trauma-informed interventions for children. It doesn't mean that anyone who experiences violence is completely lost. We can go on to do wonderful things and lead great lives. But it takes a big community around you; it takes a lot.

My mother was an immigrant, but I know that her experience would have looked different if she didn't have a full-time job, if she wore a hijab, if she came from an Indigenous community. We might have been taken away from her. Who knows? Her trajectory was very different than someone else's trajectory, so systems—the children witnessing that harm—

The Chair (Mr. Lorne Coe): Excuse me, I'm sorry. That concludes your testimony today. Thank you.

I'm going to need to call up our next presenter-

Ms. Jess Dixon: We still have the government questions.

The Chair (Mr. Lorne Coe): Yes, yes, yes. Sorry, I'm getting ahead of myself. MPP Dixon, thank you.

Ms. Jess Dixon: Thank you so much, Marissa, for coming today to present. I think some of my questions for you are a little bit wide-ranging, but I was actually thinking last night—this is the stuff that I think about when I walk my dog-about the similarities between the idea of the human trafficking, a practice memorandum and IPV. What was going back and forth in my head was, what are we trying to accomplish by teaching kids more about it? Are we trying to have them understand for their future relationships? Because I'm fully in favour of education and prevention, but are we running a risk of putting teachers in a positionin a mandatory-reporting setting where children will be disclosing IPV to them, and then they're having to report it? What are your thoughts about-understanding that I'm very in favour of it, but what risks are we looking at by teaching that?

Ms. Marissa Kokkoros: We have to be ready for the risks, because the violence is happening. So you can look at it in the face, or you can choose to completely ignore it; it's still going to continue. It doesn't mean that that child is not going to go home and witness it or experience it. Yes, the risks are there, and we need CYCs in schools— child and youth counsellors. There is not one in every school. Some schools don't even have one; there's one just for a region. That's an issue there. Every school needs to have a CYC because you can bet that when we start IPV and GBV education, yes, we will have disclosures.

Aura Freedom was one of the first organizations to do sex trafficking education in schools, way before memorandum 166, and we had a 50% disclosure rate. We travelled with a trauma counsellor who received those disclosures and then, with referrals and with the CYC at the school or the guidance counsellor or the teacher—whoever it was we made the referrals. But there will be—we have to be ready for that, but I don't think we can ignore it.

Ms. Jess Dixon: When you were talking about how Aura Freedom operates and other non-funded or non-agency, grassroots, that type of thing—I'm curious about your thoughts. We keep hearing about this idea of holistic models, hub models. One of the things that I've been turning over in my mind is this idea of—we have the concept—it's not terribly well utilized—of community safety and wellbeing plans, which don't actually include IPV as a mandatory feature, which is certainly something we're aware of for the context of this committee. But this idea of having communities look around and say, "What resources do we have?" including grassroots organizations, what role do you see for—I guess, say we're talking about school disclosures. Yes, we have a practice memorandum, but a community, a locality itself, coming up with its own proposal about how to respond to that by bringing its major agencies, its grassroots agencies—where do you see a group like Aura Freedom fitting into something like that?

Ms. Marissa Kokkoros: I think, if I look back at our work with TDSB for memorandum 166, when they called us, we helped them inform their approach, form their committee and create terms of reference, and then we did a very deep needs assessment with the school board in what specifically, geographically TDSB needed to address sex trafficking at the school level.

So these, yes, are community-driven. I do think, however, there does need to be provincial coordination. Then all the magic of the grassroots groups and community stuff will come into play, because these frameworks exist. Maybe there's just not, once a year, a school assembly on intimate partner violence or gender-based violence or masculinity, but it is embedded in the curriculum. When it's embedded in the curriculum, it is regarded with the same importance as math, reading, science. That's what happens when you embed something in the curriculum. We start to normalize talking about it.

And then, the community groups: I see them informing the framework and then also being part and parcel of delivering, facilitating and all of the things that come with it.

Ms. Jess Dixon: We had a group called Triple P present—it's a parenting program. When you think about the role of access to parenting programs—because when I think about some of the types of grooming that I am aware of, particularly when it comes to human trafficking, I think about it oftentimes as preying on people with low self-confidence, attachment issues, that type of thing. Do you think that increasing resources for parents also plays a role in that?

Ms. Marissa Kokkoros: A huge role. Parenting can be primary prevention. Parenting can be secondary and early intervention, as well.

In our written brief, we do speak a little bit about parenting classes and parenting education and information, and it kind of plays into the public education. Just like in the 1980s, everyone knew that seat belts save lives; we still see seat belt signs. We still see no smoking signs on planes we know we can't smoke—because it has been embedded in our culture.

So this is what, when we say "bold," we're calling for with the primary prevention. And parenting classes—it will be in your place of worship. Information will be at your doctor's office. Information will be with coaches and sports managers, and, working with tech, information for gun owners or gun sellers. This information will be everywhere, and that's a whole-of-government approach. That would come with designing the framework and finding all of the avenues that we can put this information in.

Ms. Jess Dixon: Thank you. There's a family doctor in my area called Alison Yeung. She's on Instagram as @thesmartphoneeffectmd. She's sort of a one-woman crusade against smartphones, you know, sort of tech-assisted mental health issues, essentially, in children. I had

a conversation with her, and we were talking about how it's very challenging, particularly when the government gets into ordering professions to do certain things. But one of the things that she was talking about was the idea of having primary care physicians, as part of your child wellness programs, literally flagging for parents that Internet usage, cellphone usage, that type of thing, actually can have significantly negative consequences and needs to be monitored the same way that you might monitor your lead paint. Is that something that you also can see a role for?

Ms. Marissa Kokkoros: When we talk about tech-facilitated GBV and addressing the responsibility of tech giants, I think that plays in there, and also information for parents. Grooming is extremely confusing because it feels in the beginning like a really good time. Everything you've ever wanted to hear is told to you, and traffickers or exploiters are really good at finding what your needs are and filling them. So I think that that information, mixed with Internet safety and tech giant responsibility, will make an enormous impact.

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Ms. Jess Dixon: And then we've got about two minutes left, so we'll see if you can give me some hope in the last couple of minutes.

When I think back to high school, I'm probably—in myself, I would be one of the people that would be least susceptible to any types of domestic violence, just from the way I present. I find it hard to imagine going back to high school or elementary school and thinking about some way that somebody could teach me to have enough self-confidence that I wouldn't, even to this day, still, be laid low by an emotionally unavailable, mid-ugly man—we'll put it that way—for example. Do you think that that is something we really can teach girls, to have that type of confidence earlier on?

Ms. Marissa Kokkoros: Oh, that's a question—yes. Yes, I think anything can be taught. I think what we see now is a manifestation of a lot of inequities that intersect and drivers—normalizing violence, sexualizing girls from a young age, demonizing men and boys and men of colour. I do think that this can be learned; I absolutely do. If I didn't, I would not ever say that primary prevention is part of the solution, so yes. But how we do that: We have to look at programs that work. We have to look at evidencebased programming.

And again, we need to speak to youth. They will tell us. I was once very much humbled when I walked into a classroom and one of the students said to me—she called me "Miss" even though I wasn't the teacher. She's like, "Miss, I've got to tell you, that was great, but your slides are ugly." They tell us. She's like, "We didn't want to look at them. They were horrible." We need to listen to them, and that's what I mean. When we create the framework with stakeholders at the table—no one knows social media better than youth.

The Chair (Mr. Lorne Coe): Thank you. Your time has concluded. Have a good afternoon.

CANADIAN CENTRE TO END HUMAN TRAFFICKING

The Chair (Mr. Lorne Coe): I will now call on the Canadian Centre to End Human Trafficking to approach the table, please.

Good afternoon. You'll have 10 minutes for your presentation, and I will let you know at the one-minute mark that you can start summing up.

Please state your name for Hansard, and you can begin your presentation.

Ms. Julia Drydyk: Hello. My name is Julia Drydyk, and I'm the executive director at the Canadian Centre to End Human Trafficking. I want to thank the members of the committee for having me here today.

Just for a bit of background: The centre was founded in 2016 with a mandate to end all forms of human trafficking in Canada, notably sex and labour trafficking. But for the purpose of today's meeting, I'll be focusing on sex trafficking.

In 2019, we launched the Canadian Human Trafficking Hotline, a 24/7, 365, confidential, multilingual and traumainformed resource to connect victims and survivors as well as friends, family members and service providers with resources in their communities, as well as law enforcement—but, importantly, only if they so choose or we have a duty to report.

Unfortunately, we also know that human trafficking is grossly misunderstood in Ontario and across Canada. Unlike what you see in the movies, it rarely involves kidnapping or smuggling people across international borders, and sex trafficking is not the same as consensual sex work. Really, it looks far more like intimate partner violence which is why I'm here today—where traffickers are controlling and exploiting another person within the commercial sex industry entirely for their own profit or gain.

Traffickers look for people with vulnerabilities in their lives. This could include anything from low self-esteem, problems at home, problems at school, poverty, homelessness, substance use or mental health challenges. There's no one profile of what a potential survivor of human trafficking could look like.

They position themselves as someone who loves the victim and who can be trusted. It usually starts with a process of intense love-bombing, finding out the dreams and aspirations of their potential victim, but also their greatest fears, and then they will shower them with every-thing they've ever wanted—and, yes, that could be expensive clothes and bags and accessories, but more often than not, it's the promise of unconditional love. It's a promise of a dream and a future together.

But all too quickly and insidiously, they start pulling that away. They'll distance their victim from their friends and their family, and then they'll convince their target that they're actually indebted to them because of everything they've given to them. They'll coerce them into the commercial sex industry as a form of repayment but also a buyin to their shared dream together. I want to be clear that all forms of intimate partner violence are horrific, and that sex trafficking is often considered on a pretty extreme end of what we see in Canada. Survivors experience intense trauma and have complex service needs.

In the first three years of operating the Canadian Human Trafficking Hotline, we identified 1,500 cases of human trafficking that involved 2,170 individual victims and survivors, and among those survivors that contacted the hotline, the services most in need were shelter and emergency housing, case management and supportive counselling, but we're actually one small touchpoint for survivors to access services. We know that they often require legal supports, health care services, mental health and addictions treatment, as well as financial support. As we've heard, these are all downstream interventions. We're supporting individuals after these intense acts of exploitation, of abuse have already taken place. Due to their acute experiences of trauma and the incredible stigma that's imposed on anyone who is involved in the commercial sex industry-the very complex service needs, as well-we need to understand that programs and services that are focused broadly on domestic violence or intimate partner violence are not appropriate for people that are exiting sex trafficking.

So I'm going to take housing and shelter as an example. Human trafficking survivors do have unique needs that often cannot be met at shelters designed for people experiencing homeless or intimate partner violence. For example, shelter policies like curfews, scheduled closures during the day, restrictions on substance use, requirements to do chores—all of these things may actually unintentionally harm survivors as they actually mimic the control that they were experiencing when they were being trafficked. So we need low-barrier and accessible supports tailored to the needs of sex trafficking survivors, and we need dedicated funding streams to provide specialized programs based on these unique needs.

Despite the fact that Ontario is, honestly, the leader in sustaining action against human trafficking in Canada, front-line agencies are still barely able to keep up with the demand for services. There is nothing worse than having to tell a survivor who has mustered the incredible courage to leave that after over a dozen call-outs to every single shelter that's listed in our national referral directory, going through central intake and googling everything in a broader area, there's not a single bed available for them and hearing that they're just going to return to their trafficker because there is literally nowhere else to go. Unfortunately, this is something that we hear far too often from people that call the Canadian Human Trafficking Hotline.

And so, like other witnesses today, we're calling for long-term sustainable funding that goes beyond just project funding. If governments continue to rely on short-term catch-all granting systems, it only continues to fuel the competition for very scarce resources amongst front-line agencies, and it also leaves almost nothing left over to focus on important work like prevention, service coordination and collaboration. I have a vision where programs for survivors of sexual exploitation, abuse and gender-based violence are adequately funded so that no one who experiences this extreme form of trauma ever gets turned away.

I want you to imagine if we actually used evidence to inform our investments so that no one fell through the cracks of Ontario's social safety net. I want you to imagine an Ontario where specialized beds are available to provide safety and security for survivors of sex trafficking immediately upon exit. And I want you to imagine something even more radical, where emergency shelters are actually just emergency shelters, where you only stay there for a day or two, and then there's accessible transitional housing with holistic wraparound supports that are able to help survivors begin their journey to healing as soon as they are ready. And I also want you to imagine a community services sector that isn't riddled with burnout and staff turnover because they actually are adequately compensated for their professional services and have sustainable long-term funding.

The good news is that this is actually possible, because we do this-not always perfectly but adequately-for public education, schools, hospitals and other essential services like law enforcement. We need to start applying the same methodology to ensuring that there is a robust safety net and adequate services within the various regional catchment areas so that people that have experienced gender-based violence and sex trafficking are never left without anywhere to go. We can do this by focusing not only on the outputs that are resulting from provincial investments, which so many non-profits are forced to do, but developing more impactful reporting mechanisms to help identify how many people are being turned away. Where are the gaps and where are we losing opportunities due to working on such shoestring budgets? Collecting on these data points is something that we're actually actively looking to incorporate into our practice at the Canadian Human Trafficking Hotline.

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But beyond responding to the crisis in front of us every day—and trust me, we are—we're on a bigger mission, and that's actually to end all forms of human trafficking in Canada. We need to focus on prevention and addressing the root causes of sex and labour exploitation in Ontario and across Canada. We need to create a world where the Canadian Human Trafficking Hotline is no longer needed.

The housing and homelessness crisis, rising rates of poverty, the cost of living, inequality and inequity in Ontario are paving the way for traffickers to exploit others for their personal gain. We need to ask ourselves, what are the social conditions that are making human trafficking possible in our communities?

The upstream answer is about access to opportunity and ensuring that we're creating a level playing field where everyone can clearly see a pathway to achieving their own potential. The upstream answer is about addressing the root causes of patriarchy and misogyny and racism and colonialism and all of those other systems that are creating inequities in our communities, which are resulting in vulnerabilities. The Chair (Mr. Lorne Coe): Excuse me. You have one minute left.

Ms. Julia Drydyk: So it usually starts with the community. It starts with our schools, recreation programs and ensuring all youth have their basic needs met. It continues with access to post-secondary training and meaningful employment and long-term housing. I know these sound big, but a holistic and whole-of-government strategy, similar to what we're applying around human trafficking, to genderbased violence has hope to significantly reduce this issue in our communities.

I thank everyone for the opportunity to be here. I'd be pleased to answer any questions.

The Chair (Mr. Lorne Coe): Thank you very much for your presentation.

I'll turn now to the members of the official opposition for questions please. MPP Wong-Tam, when you're ready.

MPP Kristyn Wong-Tam: Thank you very much, Julia, for your presentation. I want to just also acknowledge that you are coming to us, I think, with a plea for us to really just take a look at the systemic structural inequities in society that government has, obviously, a role in bringing an end to.

I appreciate that you're not coming to us with a request for a program, because you're asking to literally just do our job: invest in education, invest in recreation programs, make sure that the education opportunities are there for all people, invest in young people, invest in everybody so that they see a pathway to a healthier, more vibrant world. Thank you. That is a very different approach, I will admit, than many of our other esteemed speakers who have been coming to us with different program and proposal pitches.

I also want to just really acknowledge and thank you for sort of keeping it real, to be quite honest. I think you're bringing to us a level of seriousness—and it has been serious; all seven days, it has been very, very serious. But you're telling us that the solutions are here. We could do a better job, all of us—government, everybody. But we have to be able to stop creating gaps and exacerbating these structural deficiencies by underfunding core services, essential services.

So my first question for you, because I want to be able to break it down into smaller bites now—that was a big bite. I want to be able to ask you a question, because you specifically raised the issue around housing and shelter. If we were to take a look at what survivors of human trafficking really need in order for them to flee the violence and this is the intervention piece—what would it take for us to adequately fund the number of beds required so that those who are fleeing human trafficking can access shelter and support when they are able to step out of it?

Ms. Julia Drydyk: I appreciate the question, but I also want to be very clear that emergency shelters are breeding grounds for grooming and for recruitment, so they are not safe in any way, shape or form, and often other people who are being exploited are being put into shelters to recruit others who are vulnerable.

We've seen different models. There are human-trafficking-specific shelters that have additional security features—but again, also low-barrier, understanding the incredible manifestations of trauma that a lot of folks experience. But we've also seen other promising cases where there are human trafficking beds that are maintained on an emergency basis. I believe that's actually happening in Covenant House Toronto, where they're able to keep people there with additional kinds of security wraparound supports until they're able to find a way into transitional housing.

Emergency shelters are some of the most psychologically and physically dangerous places that you could ever send someone exiting sex trafficking, so it really needs to be a short-term intervention, and we need to be focusing on having more of those transitional housing opportunities available.

MPP Kristyn Wong-Tam: I believe, in the city of Toronto, we have literally just a handful of these beds dedicated to survivors of human trafficking. I also believe that, at any given time, they're pretty much full. So when you don't have a place to place someone, where do they go?

Ms. Julia Drydyk: We are very creative in being able to leverage our network of over a thousand front-line service delivery partners across the country. Often it does involve trying to arrange transportation across either—it's not just across the city; sometimes we're looking at transporting people across very long areas of northern and rural Ontario. And so, separately in our deputations and our work with the Minister of Community and Social Services, we're saying there needs to be intentional transportation there.

But we're just doing patchwork work. We're bending ourselves into pretzels trying to manoeuvre a system where people are just falling through constantly, and there are times when we cannot find any available solutions.

MPP Kristyn Wong-Tam: You talked about the pathways around human trafficking and grooming, and that oftentimes we have the idea or the image that this is international, that it could be the north exploiting the south. But I think that for our purposes here and from what you're seeing in terms of the trends, a lot of the human trafficking is domestic, and it could be women of the north, women who are in rural and Indigenous communities, who find their way to bigger cities and then we see them get caught up.

In my own community, in Toronto Centre, we have the Eaton Centre. We've got some iconic cultural destinations. I'm very aware that we are also the host of major sporting events, and when it comes to big sporting events and big festivals, when they hit the city, we also see a massive spike in human sex trafficking—and so you can elaborate on that.

I'm wanting to understand—because oftentimes when there is any discussion about human trafficking, I think that government resources tend to go towards more policing, more surveillance work, which I think is important as well. But we don't see the same type of correlating excitement or enthusiasm in funding intervention services such as the shelters, the counselling, the pathways to re-education and career development. How important is it for us to do both?

Ms. Julia Drydyk: In the first year of operating the Canadian Human Trafficking Hotline, out of all human trafficking cases we identified, only 6% wanted anything to do with law enforcement. What they need is emergency shelter and support. They often have had bad experiences with law enforcement in the past. They might have been coerced into crimes. They might have been told it's their fault. They might be being lied to that they're going to get in trouble. So really, we need to be focusing on stabilization, meeting basic needs and holistic support.

Out of all of the great law enforcement that we've worked with, they've often said, "We need to be focusing on their human rights and their well-being first, before we bring law enforcement involved." You cannot arrest your way out of this, also because of the huge issues in achieving any form of successful verdict in our judicial system, which is very flawed.

So there is a very important role for law enforcement. I think they're there to make sure that everyone is safe when they want to be. We call the cops and we connect them with law enforcement when they want to be. But over nine times out of 10, what they're looking for upon exit is a safe place to go where they're not going to be judged and where their basic needs are going to be met.

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MPP Kristyn Wong-Tam: With respect to the National Action Plan to End Gender-Based Violence, have you been following that national conversation?

Ms. Julia Drydyk: A little bit—more on the renewal of the anti-human trafficking strategy.

MPP Kristyn Wong-Tam: I think there is going to be money that will be allocated to address GBV, IPV. I think when we see where those funds are going, I think what we're going to end up seeing is that some provinces and territories may prioritize more funding towards policing and law enforcement, which is important and critical. But what I'm hearing from you is that just as important, if not more so, is the intervention services so that people can have housing stability—not emergency shelter stability, housing stability is what you're saying. That's where you would invest the money. If we had \$100 to spend today, you would invest it in housing.

Ms. Julia Drydyk: Yes, I would invest it in housing, both on the response end but also on the prevention end. We talk a lot about folks living in poverty and homelessness that are potential targets, and that is true. But with the extent of the housing affordability crisis right now and the fact that everyone is desperate just to keep a roof over their heads, and they are this close to losing everything, it means that you're widening the population of people that are potentially vulnerable to people preying on them. Everyone is becoming more vulnerable right now. So again, those transitional housing beds are so incredibly important.

Also, unless you have someone that is on their way to healing and stabilization, the way our judicial system is set up, they will not be seen as a credible witness. There is a huge amount of bias that still exists within the judiciary. We also know that the defence are brutal and that it's a really re-traumatizing experience going through the courts. So unless those supports are there, and because we're so reliant on victim testimony to see human trafficking convictions, you're never going to incarcerate a trafficker unless they're stable.

The Chair (Mr. Lorne Coe): Thank you very much for that response.

We're now going to move to the members of the government. I have MPP McGregor, sir, when you're ready.

Mr. Graham McGregor: Chair, through you: Thank you so much for being here today and the work that you do to end human trafficking. Obviously, your organization is a national organization. You talked about Ontario being the leader, but with massive room to improve. What are some of the other provinces that maybe, overall, you wouldn't call a leader—but are there policies that other provinces have put forward that Ontario is missing the mark on that we should take a look at and push for?

Ms. Julia Drydyk: Alberta is doing something interesting where they're piloting a provincial anti-trafficking coordination office that's in partnership with front-line agencies and government. So it's not just a governmentcentral coordinated office, but it's also got formal governance of non-profit agencies. It's still in its early days, but it's interesting to follow. It's hard to compare apples and oranges because the investment that Ontario has put into anti-human trafficking supersedes any other province, even per capita, so we're just seeing that there's a lot more integrative action.

I also think having the provincial anti-trafficking coordination office—also having had, I believe, the premier director of that be an individual with lived experience who is incredible is really precedent-setting in terms of what we point other provinces to do—also, the success of the PATCO office in being effective and actually working across government to achieve shared interests.

Mr. Graham McGregor: You talked about, within the justice system—I think the number you quoted was 6% of survivors of human trafficking want to—

Ms. Julia Drydyk: Seven per cent of human trafficking survivors who contacted us in the first year—out of what they were asking for, only 7% wanted anything to do with law enforcement, be it a 911 call or connecting with a specialized human trafficking investigator.

Mr. Graham McGregor: Got it. So that's not even wanting to pursue a case; that's even things like calling 911 or getting police involved at all?

Ms. Julia Drydyk: Yes. Sometimes, they do want to call—and we have protocols with—specialized human trafficking investigators, where they can start to actually engage to pursue long-term criminal charges rather than 911 calls.

Mr. Graham McGregor: By providing supports, a safe place to be etc., does that number get higher when survivors of human trafficking—when their other needs are met, do you think that number would be higher? Is

there a position that your organization has on—would it be 15%? Would it be 50%? Would it be 100%?

Ms. Julia Drydyk: I can't give you stats on that. One of the downsides of being a completely confidential hotline—and we take that very seriously—is that we don't see what happens after we make the referral. We've heard anecdotally through our partners, and every once in a while, someone will call us back and talk about how we were their first call, and then two years later, it ended up in a conviction, which keeps us going every day. But we don't get those feedback loops regularly because, again, we take confidentiality so importantly as a core part of why we exist as—

Mr. Graham McGregor: In a world with the kind of phone calls that your organization gets, I imagine those are very good days when you get that kind of phone call.

Speaking of it from a crime perspective or as a revenue tool, how organized is human trafficking? Is it one-off abusers? Is it large groups of abusers? Are they using human trafficking revenues to get into other crime? From your organization's perspective, what is that element? What's the scope of that element?

Ms. Julia Drydyk: Based on research that I conducted in 2019 on human trafficking corridors in Canada, what we were hearing through key informant interviews with front-line service delivery partners and law enforcement was that while many traffickers can have some relationship with organized crime, it's not part of the actual mechanism of organized crime. It's not like drug trafficking or weapons trafficking where you can really follow the money and see where things line up to a structure of how the criminal entity is organized; it's happening ad hoc.

This has been probably said a million times, but sex trafficking is a low-risk, high-reward crime. More often than not, a lot of the money trail is put in the name of the victim, which can also result in horrific debts upon exiting, which the government of Ontario is also looking at right now. While FINTRAC and other financial investigative bodies have been great through Project Protect, they're being intentional on covering their tracks and putting in the names of other people. So we're not seeing it as being formally embedded, but we do hear often that traffickers have some relationship with organized crime.

Mr. Graham McGregor: Are there additional witness supports or things that the justice system could do, or victim services could do, or agencies could do to lead to more convictions, lead to more people being charged with what is a vile, heinous, awful crime? Do additional supports lead to holding more people accountable?

Ms. Julia Drydyk: I want to be fair to you that this also falls within federal jurisdiction, so I don't ever like to ask people to do what they're not capable of doing, but one thing we've been working on is working with crown prosecutors, AI and tech companies and law enforcement around alternative forms of evidence to support trials. Unlike what people think—I think a lot of people are like, "Oh, you can look at ads and track things down." You can't. It's really hard to actually differentiate between consensual sex work and trafficking.

What we actually need are better systems to be able to gain access to traffickers' cellphones, to be able to obtain the text messages and the data that support the coercive element of trafficking and to be able to curate that into a way that will make sense to judges. Because right now, there is going to be so much data.

Similar to other forms of intimate partner violence and it makes me sick—people say, "Well, why didn't she leave?" Here, you see them, and they're in a great relationship. But then here, she's saying—there's a lot of he-saidshe-said and a lack of actually trusting victims and survivors. But by being able to better access and curate digital and electronic evidence to support the narrative of how the relationship played out over the course of exploitation, we're hearing would be very helpful in prosecutions.

Mr. Graham McGregor: One of the things on intimate partner violence as a whole, but I suspect in human trafficking as well—you can't rely on survivors to always come forward. There's a role for government and agencies to play to find survivors and offer assistance and be proactive. Where are some of those opportunities that you see in Ontario? What are we doing well and what do we need to do better to make sure that we're not missing people? 1600

Ms. Julia Drydyk: So we've been trying to work more effectively with the hospitality industries to be able to conduct anti-human trafficking training to be able to understand the science and the indicators, but also so people don't act as if they should be intervening as by-standers. It's dangerous and it's unhelpful. So it's providing people with the skills to be able to recognize when people are in distress and clearly need support, and how to approach them and help connect them with trained professionals in a way that will be successful.

Mr. Graham McGregor: What's an example of that? When you're doing in the hospitality industry, what are things that management should be looking for with employees or employees should be looking for with customers? What are some signs of human trafficking that are—

Ms. Julia Drydyk: So someone at a front desk of a hotel with one or two young girls with a much older man—they might not have bruising or cuts, but they're not willing to make eye contact. They might be dressed inappropriately. He might be holding their ID. They might just be showing signs of intimidation. Again, it's the more nuanced signs of people that are being emotionally and psychologically controlled.

Often, for survivors—I don't encourage people to try and save anyone. Survivors are the ones who save themselves. They say one thing that often makes a difference is just having one person look them in the eye, treat them like they mattered and ask if they were okay. And so, I think it's about providing the training for the general public to see people as people, to be able to see distress.

And also, that's why the Canadian Human Trafficking Hotline is there, because we can walk people through safety planning, access to resources, ways to approach them to see if they're okay, to see if they can connect them with someone else.

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The Chair (Mr. Lorne Coe): Thank you very much for your presentation this afternoon. Have a good afternoon.

ONGIA

The Chair (Mr. Lorne Coe): Members, I will now call on the Ontario Gang Investigators Association to come forward, please, to the table.

Good afternoon, sir.

Mr. Andrew Hammond: Good afternoon. Presentation or PowerPoint?

The Chair (Mr. Lorne Coe): The Clerk will come and get it, just hold on. Thank you.

Interjections.

The Chair (Mr. Lorne Coe): You'll have 10 minutes for your presentation, sir. I'll let you know when you have one minute left, and you can sum up. That will be followed, as you saw, with questions from the official opposition and then government members. For the record, please state your name and affiliation.

Mr. Andrew Hammond: My name is Andrew Hammond, and I'm here representing ONGIA, the Ontario Gang Investigators Association.

The Chair (Mr. Lorne Coe): Well, welcome to the Standing Committee on Justice Policy, sir. You can begin your presentation.

Mr. Andrew Hammond: Thank you—oh. There's a bunch of files in there.

Interjections.

The Acting Chair (Mr. Graham McGregor): Please go ahead. You have 10 minutes for your presentation.

Mr. Andrew Hammond: First of all, just talking just about a bit of my experience or my expertise: 17 years in law enforcement, the last seven to eight years involved in guns and gangs with the agency I'm with. During that time that I spent in guns and gangs, I spoke to over 700 gang members across the GTA, and it really opened my eyes to the complexities and the problems that street gangs face in this province, in this country. That led me to doing a lot of panels, a lot of international committees on street gangs and testifying in court quite a bit on street gangs and their affiliation to organized crime groups and the impact that they're having in cities.

So I'm still actively testifying in court quite a bit. I've become a court-qualified expert. I joined ONGIA, so this non-profit organization that I'm president of. It's a nonprofit organization. Its main purpose is to deliver training and awareness to communities, shelter staff, educators. We train law enforcement on the issues surrounding street gangs, including human trafficking, including the drug trafficking and the migration patterns of street gangs across the province. We do this all on our own. The board is made up of experts from across the country, from MAG, so we have a retired lawyer, CBSA, corrections, bail and probation, law enforcement. All of us right now are just doing this on our own time, but we're raising awareness and going into communities to teach them and show them the signs of kids getting involved in street gangs: What does it look like? What is a street gang, for that matter?

I think it's really important to understand what a street gang is. Across southern Ontario, we all have the same definition of understanding what a gang is: three or more people, some common sign or symbol that unites them, if it's a tattoo, if it's jewellery, if it's some type of hand sign, some indicia, and then they work together, involved in street-level criminal activity, and that separates the organized crime groups that are importing a lot of drugs and guns into the country. It's more the street-level stuff that we're seeing.

Every street gang is a criminal organization, so I think that's really important. So really, a street gang by the numbers: 90% of street gangs use firearms; they're the most violent crime group that we have. If you look at the Mafia or bikers, although they do commit crimes, they don't have the risk to public safety, as street gangs do.

There are over 50 assessed street gangs in the province. The number is going to be a lot higher; it's probably over 100 street gangs. Thousands and thousands of gang members are involved, the average age about 18 to 25 years old. We're seeing, if you just look at the news recently, kids as young as 14 years old pulling the trigger, shooting into large crowds of groups, committing crimes, and the majority of street gangs have now got themselves involved in human trafficking.

Gang migration: Why would a gang move across the province? If it's for drugs, if it's for guns or if it's for human trafficking. Really, what it comes down to is they recruit younger kids from smaller cities who idolize what they see on social media. They idolize what they're seeing on YouTube, the glamorization of street gangs.

Prices are a lot higher. What a trafficker gets in Toronto would be a lot different than what a trafficker will get in Moosonee or northern Ontario, and that same thing applies to drugs. Fentanyl down in Toronto, let's say, is \$25 a point. It could be upwards of \$100, \$150 for the same amount of drugs in the north.

And it expands their criminal network. More money is really what it comes down to.

I think we often look at street gangs as unorganized groups of individuals. They're a very sophisticated group of individuals.

A quick map: These are gangs that are around the GTA who have been stopped, investigated or arrested across the province, and those aren't gangs in those cities; those are GTA gangs that have moved across the province.

Just a quick snapshot, again, of across the country: These aren't gang members from those cities; these are gang members from southern Ontario moving across the country.

Human trafficking: One of the fastest-growing crimes in Canada in relation to street gangs. So, why? Why would a street gang decide to get into this type of crime? Well, just like the other presenter indicated, it's easy to evade police. If you're trafficking a couple of girls and you have them in the back seat of your car and you're heading north for a weekend or a week, you don't have any crime, unless one of the victims comes forward and says, "I'm being trafficked."

It controls the girls through violence. They groom over time, and a lot of individuals use social media as that platform.

It's hard to prosecute. I know you guys just went through that, so I won't belabour that.

It makes a lot of money. One girl, some of the stats will say, can make a trafficker upwards of \$250,000 a year—one trafficked girl.

1610

Recruitment: One of the forms of income for street gangs is human trafficking. They're using social media apps— Snapchat, Instagram—and that's how they're reaching out to groom these girls, because a lot of teenage girls now are putting themselves up on social media. It's a quick way for people to see it, start friending these individuals and taking control.

Girls are being recruited from schools, group homes, shelters; foster care is a really big one. And it crosses all socio-economic boundaries. This is not limited to newcomers to Canada. It's not driven by poverty. I know police officers' daughters who have been trafficked. I know judges' daughters who have been trafficked. I know politicians' daughters who have been trafficked. What it comes down to is they've got themselves into a situation they can't get out of. If it's a boyfriend, an older boyfriend that I think loves me, I send an inappropriate picture or there's a video made, now that person has leverage, and they use that as leverage for them to get into the sex traffic work. And again, it crosses all socio-economic boundaries.

The younger the girl is, the more money they make. That's the fact. Most street gangs are trafficking more than one girl. Every street gang that I'm aware of is into human trafficking.

Next slide, just a quick—this is a study done down in the States. The FBI did a study. You can click through. The point of this is just that their belief was that every 16year-old girl in Fresno county, that part of California, had been approached by a sex trafficker, and that would have been online. So it is rampant.

The numbers: 98% of the victims are female; 91% of trafficked girls knew their trafficker; 24% of them are under 17; 45% between 18 and 24. So 91% knew their trafficker, so there's a relationship there. That grooming process has taken some time. It doesn't happen overnight. You're not grabbing someone off the street—although it does happen, I'm sure—and getting them into sex traffick-ing; it's going to happen over time. It's in your community. It's in your high school. It's in your shelter system. It's in the foster care. Street gangs and organized crime groups, from my perspective, are the primary traffickers.

This is actually—I'm not sure where she works, but I think she was from the hotline, where I took this. This is just really to show that Ontario is the primary province for trafficking. It's a big deal.

The money: Profits from human trafficking are going to purchasing firearms, purchasing drugs. They're trafficking drugs with that. It also helps them facilitate a certain lifestyle, glamorizes the lifestyle—jewellery, things like that that street gangs often buy and show on social media. Money is being used to facilitate all that.

Just a couple of case studies: Anecdotally, our organization had a call from an educator out in the Waterloo region in, I think it was, June. She was saying that they were hearing a 14-year-old boy is trafficking a 12-year-old girl.

The Chair (Mr. Lorne Coe): Excuse me, sir. You have one minute left in your presentation.

Mr. Andrew Hammond: Okay.

That was shocking. They were looking for education. They were looking for some awareness piece.

High school girls, 14 and 15 years old, invited to parties, drugged, inappropriate video taken, get them to do some type of sex acts and now you have leverage over them.

Next, what can be done? So, awareness: We just need to raise awareness, and that's what our organization does. To community members, teens, high school students, city staff, librarians, newcomers to Canada: Here's what it looks like. We need to raise awareness.

Again, just the training piece. This is important. We need to make sure people understand what it looks like. We had school resource officers. They were a really important tool to look and see the signs of gang membership or human trafficking and reach out and help that person. That was a big piece that's no longer there.

The Chair (Mr. Lorne Coe): Thank you, sir, for your presentation.

We're now going to move to questions. To the official opposition, please: MPP Wong-Tam, when you're ready. Thank you.

MPP Kristyn Wong-Tam: Thank you very much, Mr. Hammond. I just want to recognize—were you coming to the end of your presentation? Is that the next slide?

Mr. Andrew Hammond: Yes, that was it. Some of the training and awareness piece I could speak to after.

MPP Kristyn Wong-Tam: Okay. Thank you. I just wanted to make sure you had a chance to complete that.

This is a very serious issue and one that I have limited knowledge about, just because of some of the areas in Toronto that I've been focused on—guns and gangs and, especially when it comes to youth, recruitment. The connection to human trafficking is very evident. You've just laid out the case there.

When it comes to where young people congregate, they're not everywhere in society. We see them in schools. We see them in other social environments where young people are—obviously on social media. So it's not that they are everywhere. We need to focus the awareness and the programs to support them in places where they're gathered.

Would you say that one of the most important places is schools, social clubs, anything related to youth activity and where youth congregate, that's where the awareness campaigns need to go?

Mr. Andrew Hammond: I think that's one of them, definitely. But it can't be limited either. I think we also need to get into the homes of individuals and teach families what it looks like. Because I think we all have a misconception.

MPP Kristyn Wong-Tam: It's much harder for government to reach into homes, but easy for government to reach into schools—

Mr. Andrew Hammond: Correct.

MPP Kristyn Wong-Tam: —very easy for government to reach into recreation programs, just because, in the city of Toronto, it's the largest provider of recreation programs, one of the largest providers of art and culture programs. Obviously, every school-age child in Ontario, with few exceptions—obviously there are some who are home-schooled—touches the education institutions in one way or the other.

What would it take for us in Ontario to ensure that awareness campaigns are placed where students gather?

Mr. Andrew Hammond: Just repeat that last part. What was the question?

MPP Kristyn Wong-Tam: Yes. That is the question.

Mr. Andrew Hammond: Where to place the campaigns? MPP Kristyn Wong-Tam: That's right—and to develop it in a way that people will relate to it. Because if they're attracted to it, if we're trying to build a campaign for 40year-olds, 50-year-olds, maybe those in the room will get it. But if you're trying to bring it to the attention of 12year-olds and 11-year-olds, we need to speak in a totally different language, and we need to present that material in a different way.

What would it take for school boards and maybe the Minister of Education to provide that clear direction that this is a significant problem that's plaguing every community and we need to get in front of it?

Mr. Andrew Hammond: I think it's just making sure the educators, first and foremost, know the signs. If you see those students every day for a three-year, four-year period while they're in grade school or high school, you will know the signs of when someone is being trafficked. You know their baseline and if they get off their baseline.

I think the very first step is building that relationship, because—as the other presenter said—victims of trafficking really need someone to reach out to and trust. It's not always law enforcement, and it's not always necessarily the teacher or the principal either. But if we can show people what it looks like and we can deglamorize what happens, I think it's building that relationship where they feel comfortable saying, "Look, I'm in trouble."

MPP Kristyn Wong-Tam: Right. You showed an example in the city of Waterloo where a 14-year-old boy was grooming a 12-year-old girl for trafficking. What would lead a 14-year-old boy to do that type of crime?

Mr. Andrew Hammond: Good question. We haven't gone out there and had that conversation yet, but it would probably be maybe an older sibling doing it, maybe people in his community that he's connected with trafficking individuals online. Social media, the lifestyle—it's everywhere. It's behind closed doors, so people in their bedrooms can sit and just watch Snapchat or Instagram and start seeing this, and it almost normalizes it to some people. **1620**

MPP Kristyn Wong-Tam: Would you say that the majority of human-trafficking incidents, domestic in Ontario or in Canada, begin as some form of intimate relationship?

Therefore, the young girl that's being recruited, as described by a previous speaker, is being love-bombed. They may feel the lack of supports or they have low selfesteem. They have a young man who is showing interest in them. That begins an intimate relationship, and that quickly then evolves into human trafficking. Is that how it's happening?

Mr. Andrew Hammond: Yes, and I think that's the majority of the sex trafficking with young girls. It starts off with the grooming period over a long period of time. That trafficker will stroke every single insecurity that that girl has, and that girl truly believes that this older boy loves her and will do anything for that boy, even getting into the trafficking.

MPP Kristyn Wong-Tam: That's a very powerful story to overcome with respect to young girls who are feeling insecure, who are craving the attention of, perhaps, someone who is giving her attention—it could be anybody. But that's a very strong story to overcome.

And so, what would be the counterbalance of that? What would give this young person the strength to stand on her own two feet? That young boy, young man, could be very persuasive and technically very competent in pushing all of those buttons to groom her.

Mr. Andrew Hammond: They're a master at their craft of knowing what buttons to push.

That's a really good question; I'm not sure if I can sit here and answer that and give you some direction. That's a really tough question. There are a lot of insecure people in the world, and I think a lot of our focus on human trafficking is always towards the female: What did the female do wrong?

But we often lose sight of the male. It's the man that's doing the trafficking. It's the male, it's the consumer, who wants a 14-year-old girl and you're 45 years old. We lose sight of, first, the trafficker or the people who want these young girls, and we always focus a lot of our attention on the girl who has done something that she regrets—sending a picture to somebody, and now that person has leverage over you.

I think it's providing support. It's providing services where—maybe that young girl, 13-year-old girl, can't go to dad or mom and say, "Look, I really messed up." Well, who can you go to? And if you can't go to anyone, they kind of sit there on their lonesome and with no escape.

MPP Kristyn Wong-Tam: In the city of Toronto, we recently lost a very large advocate who was doing everything he could to provide supports to young people. It's Louis March of Zero Gun Violence Movement—a huge advocate in gun violence. The work that Louis did, specifically about raising the alarm bell about the lack of government support when it came to young people, was to invest in boys, and particularly young Black men, and make sure that the provisions and supports were there at the earliest possible intervention in schools.

Right now, in Ontario, we're seeing a bit of a crisis happen in the education system where the schools are overcrowded—maybe capital backlogs are deferred. We aren't seeing enough education supports to support teachers and support assistants in those classrooms. Would it make a huge difference in the work that you do to prevent human trafficking, sex trafficking, if the school system was better funded and resourced, including with the promotional campaigns that you're talking about?

Mr. Andrew Hammond: Yes, I would support that. If we can raise awareness in the school system, we would all be better off to know the signs and the triggers. Again, the teachers are with those students quite a long period of time and you could see the change of baseline, right?

MPP Kristyn Wong-Tam: Yes.

I want to come back to the challenge around identification, because we can't necessarily go into people's DMs although it happens all the time. But because a lot of the grooming and the recruitment is actually taking place online and there is some sense of anonymity when someone is reaching out to someone else—I could be projecting myself as an entirely different person than I am; that person develops a relationship and a bond.

What responsibility do tech companies have with respect to identifying and building in preventative measures to stop the medium and the form around grooming?

Mr. Andrew Hammond: Yes, unless the tech companies can actually read the text messages and see the grooming over time—I know Apple recently has put some childproof measures on their operating system where any nude pictures or what are believed to be nude pictures will flag, blur out, notify a parent. Those are really good steps, but they're just initial steps. Tech companies play a role, parents play a role, organizations play a role.

The Chair (Mr. Lorne Coe): Thank you, sir. We now need to move to the government members. MPP Dixon, please, when you're ready.

Ms. Jess Dixon: Thank you so much for coming to speak with us today. It's giving me a weird memory: In the first human trafficking case I was ever involved in, I did research for the sentencing brief. She was sentenced as an adult, a 15-year-old girl in Ottawa who trafficked five other girls—one of the most bizarre cases. It's making me remember a lot of the stuff from that. It was a very brutal thing to hear about.

Can you talk to us a little bit more about what makes this so difficult, to identify, charge and put together a case for prosecution? You used the example of driving up north and a trafficker has two girls in the back seat; there are so many different ways that you could explain that, and it doesn't necessarily look like a criminal offence. Can you talk a little bit more about what makes this so difficult?

Mr. Andrew Hammond: I think it starts with the intervention. Let's say it's law enforcement. You pull over a car—it's knowing the signs. I think a lot of front-line officers, a lot of community workers, a lot of city workers don't have that front-line training as to what it looks like. I could tell you personally, three weeks ago when I was working, there was a call for a domestic assault or an intimate partner assault, and the moment I got there, right away, I'm like, "This is going to be a human trafficking case." I told my officers right away to treat it as a human trafficking case. Thirty minutes later, she confessed that she was being trafficked.

I think with the right triggers and the right trainingand again, law enforcement plays a role in bringing these people before the courts, but we need the support services, just like the presenter said, for the victims. That's not necessarily our role; we're the first initial contact most of the time. But I really think it comes down to raising that awareness and training people to know what to look for. If you suspect it's going to be potentially a human trafficking case, you've got to treat it a lot differently, because a lot of times people get frustrated. If you've been assaulted and I show up, interacting with you—let's say your boyfriend has beat you up and you're not co-operating with me-it gets really frustrating, because I'm here to help you. But if I believe you're being trafficked, I take an entirely different approach, and it works and then gets the right people involved and in place to support that victim. Let the police deal with the charges and take them before the courts.

But this is why gangs are getting into human trafficking: because it's so hard, and these girls are so afraid to tell. I could tell you, I was on a wiretap project where we tapped the phone of a street gang that was all into human trafficking. I could tell you, one girl was going to leave one day after she got beat up so badly-and I'm listening on the phone. She left. From Oakville, she went to Toronto, and she was going from Toronto to Ottawa. She was so scared. This pimp, or this trafficker, called every hotel in Toronto, finally found out where she was, and she was so scared and went back to him. It is so deeply ingrained, the fear in these victims. This is why the gangs will do it, right? They don't need to sit in the room with you. "I know you're not going to take that money. I know you're going to give it to me at the end of the night." I mean, gangs do a whole bunch of other crimes too; I'm not just saying that. But this is why human trafficking is so lucrative for them. Four girls is a million dollars a year.

Ms. Jess Dixon: I'm going to invite you to discuss something that is admittedly one of my—"pet peeve" is far too light a word for it. But having been a crown attorney, I've done bail hearings with this, or bail hearings where we all knew that that's what was happening and couldn't say it because it hadn't been charged. It was very frustrating, because you'd know what was going on and you'd have a JP up there that's telling you, "Oh, you can't lead that evidence because it's not part of the charges and it wasn't part of the conviction."

In those cases, we'd be dealing with a victim who had actually talked to police. So like our previous presenter was saying, the 7% that would even have anything to do with it, she was one of them. Knowing that this person is going to be released—increasingly so, in my experience and then you're stuck being like, "Yes, he can't come near you because he has a piece of paper that tells him that he can't come near you. The justice system is going to take a year or two or three to go through this process. Please just stay safe in the meantime." **1630**

What does that look like—I've seen it, but from your perspective—when you're trying to put together a package that you could actually get a conviction on and you just know, "Oh, the guy's out again," and everything that you said about how maybe we could try to keep her safe is just not true anymore?

Mr. Andrew Hammond: It's really hard. I mean, there's not just the trafficker, but it's the trafficker's friends. It's the other gang members who will follow you home. And if that trafficker is on conditions, well, the rest of the gang is not on conditions to talk and to intimidate and to send messages—because they're not sending it on behalf of the trafficker; they're there to intimidate.

I don't prosecute human trafficking cases. I have a lot of friends who do, and it becomes really frustrating because of the time. You tell a victim, "Be out there. Be safe. Call us if he comes near you," but that victim really feels that she is going to die or her family is at risk. That's a tough one. I don't know if that's even fixable unless people don't get bail and they're behind bars. But even behind bars, I know individuals who are involved in street gangs who are controlling their sex victim behind bars. They're making phone calls from behind bars and controlling. I know of three people who are controlling their victims behind bars.

Ms. Jess Dixon: Yes. Given the prevalence of this type of sex trafficking, is it something that's covered at all at police college, whether it's at OPC or Toronto Police College, de facto?

Mr. Andrew Hammond: Unless it has changed recently—I didn't get any, and I know most front-line officers that come out now, it's not part of their curriculum. Don't get me wrong; I haven't been through it in a while. But not to my knowledge, because there are new officers who come into policing now and they have no idea.

Ms. Jess Dixon: I know there's a lot to learn when you're a new police officer, but do you think that that's something—given the prevalence of this and its connection to being able to fund drugs and guns and daylight shootings and everything else as well, is that something that we should be looking at trying to push?

Mr. Andrew Hammond: I think it would be a great idea—and along with that, also, what are the signs of those involved in street gangs? Both of them, you don't learn any of that when you're getting in. You're learning the basics on the road, and I think you learn that over years of experience and talking to people. But right out the gate, I think anyone who can recognize the signs of human trafficking or involvement in street gangs and organized crimes—we're all better off for it.

Ms. Jess Dixon: Yes.

We've got two and a half minutes left. Can you talk a little bit more about—you talked about the SRO program, the school resource officer program. I personally knew a lot of police officers who were very passionate members of that program and quite devastated when, in various jurisdictions, it was removed. You brought it up as potentially prevention or intervention. Can you expand on that a little bit more?

Mr. Andrew Hammond: Yes. It's just another touchpoint. If you're trained at knowing the signs of, say, human trafficking or a street gang or someone is being groomed to go into a gang, and you have these school resource officers, school safety officers—whatever term you want to call it—it's just another means to intervene early.

That individual developed great relationships—I had a lot of friends who did. I actually have friends of mine whose school—high school students—actually really enjoyed that. It was an outlet. They had good relationships with them. And if you have that relationship, if it's with a police officer in a school, if it's a principal, if it's a guidance counsellor, that's one avenue of exit that that person could potentially go down and say, "Hey, I need some help. I'm really in trouble."

I think it's a lot of great successes there. There are a lot of great success stories with having officers in schools. But I'll leave that for—

Ms. Jess Dixon: When you talked about this idea of if you combined expertise with being able to identify street gang activity, grooming, recruiting almost—if we had SROs who were aware of that, do you think that's something that we'd be able to see them actively involved in? Or, perhaps, do you think it would empower educators or other members of the school system to feel more confident in coming forward, because they have that sort of expert opinion?

Mr. Andrew Hammond: Right. You could then go and speak to that officer and say, "This is what I think" or "This is what I'm seeing." It's definitely an outlet and I think, with the right training—you can't just put anyone in that environment, in a school, to say, "Find victims of human trafficking." You would need the right training, the right people, the right personalities, and the right individual who's going to fit into that demographic, as well, wherever that school is located. That's an important piece.

Ms. Jess Dixon: Thank you very much. I think I'm just about done.

The Chair (Mr. Lorne Coe): You don't have a whole lot—let's just say five seconds. You did well managing the time.

Thank you very much, sir, for your presentation and your responses to the questions.

Mr. Andrew Hammond: Thank you. Can I just get my thumb drive back so I don't forget that?

The Chair (Mr. Lorne Coe): We've got it right here. We're going to give it back to you.

MPP Kristyn Wong-Tam: Will you provide the committee a copy of that?

Mr. Andrew Hammond: If need be.

MPP Kristyn Wong-Tam: Yes, please.

The Chair (Mr. Lorne Coe): Thank you, sir. I appreciate it.

To the members of the committee: Thank you very much for your participation this afternoon. The Standing Committee on Justice Policy will now adjourn until Thursday, August 15, 10:30 a.m., committee room 1, Legislative Assembly of Ontario.

The committee adjourned at 1636.

STANDING COMMITTEE ON JUSTICE POLICY

Chair / Président Mr. Lorne Coe (Whitby PC)

Vice-Chair / Vice-Président Mr. Sol Mamakwa (Kiiwetinoong ND)

Mr. Will Bouma (Brantford–Brant PC) Mr. Lorne Coe (Whitby PC) Ms. Jess Dixon (Kitchener South–Hespeler / Kitchener-Sud–Hespeler PC) Ms. Goldie Ghamari (Carleton IND) Mr. Sol Mamakwa (Kiiwetinoong ND) Mr. Michael Mantha (Algoma–Manitoulin IND) Mr. Graham McGregor (Brampton North / Brampton-Nord PC) Mr. Brian Riddell (Cambridge PC) Mr. Brian Saunderson (Simcoe–Grey PC) MPP Kristyn Wong-Tam (Toronto Centre / Toronto-Centre ND)

> Substitutions / Membres remplaçants Ms. Patrice Barnes (Ajax PC) Ms. Peggy Sattler (London West / London-Ouest ND)

> > **Clerk / Greffière** Ms. Thushitha Kobikrishna

Staff / Personnel Ms. Ellen Wankiewicz, research officer, Research Services