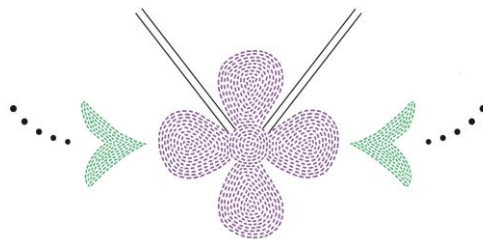


National Inquiry into
Missing and Murdered
Indigenous Women and Girls



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

**National Inquiry into Missing & Murdered Indigenous Women & Girls
Truth-Gathering Process - Parts II & III
Institutional & Expert/Knowledge-Keeper Hearings
“Sexual Exploitation, Human Trafficking & Sexual Assault”
Sheraton Hotel, Salon B
St. John’s, Newfoundland-and-Labrador**



PUBLIC

**Mixed Parts II & III Volume XVI
Tuesday October 16, 2018**

Panel II:

Mealia Sheutiapik

Jennisha Wilson, Tungasuvvingat Inuit

Dr. Pertice Moffitt, North Slave Research Centre/ Aurora Research Institute

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II

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Saskatchewan Aboriginal Women's Circle	Kellie R. Wuttunee (Legal Counsel)

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1 St. John's, Newfoundland

2 --- The hearing starts on Tuesday, October 16, 2018 at
3 8:03

4 **MS. TERRELLYN FEARN:** (Speaking Mi'kmaw),
5 good morning, bon matin. My name is Terrellyn Fearn, and
6 I'm the Director of Outreach and Support Services here
7 with the National Inquiry. Welcome to Day Two of our
8 final Institutional and Expert/Knowledge Keeper Hearing on
9 Sexual Violence.

10 We're very honoured this morning to have a
11 wonderful elder join us. As I mentioned yesterday
12 morning, Odelle Pike and her cultural support, Paul Pike,
13 were arriving a little bit later in the morning, and we're
14 very honoured that they have joined us. We're going to
15 start off this morning with Odelle providing us with a
16 traditional welcome and sharing a few words with us. And
17 then Sarah lighting the qulliq to guide us and protect us
18 throughout the day.

19 Odelle grew up in a strong traditional
20 Mi'kmaw family in St. John's, Newfoundland, and she owned
21 and operated a very successful business in a neighbouring
22 community for over 25 years. During this time, she also
23 focused her efforts on community, earning her several
24 national awards for recognition. Upon retiring, her work
25 has primarily concentrated on cultural revitalization and

1 helping Indigenous men, women and youth.

2 She is the President of the Newfoundland
3 Aboriginal Women's Network, and currently sits as the
4 President and the Founder of the People of the Dawn
5 Indigenous Friendship Centre, and sits on various other
6 committees within her community. A generous
7 philanthropist and fundraiser, she has contributed
8 immensely to cancer research and cultural preservation.
9 She is a seasoned communicator and is highly accomplished
10 in cross-sector conflict resolution, mediation and
11 facilitation.

12 Her attention of late has been in
13 supporting the families affected by the cases of missing
14 and murdered Indigenous women and girls, and residential
15 school survivors. She also has supported us in the work
16 with the families and survivors in some of the other
17 hearings that we have facilitated here on the East Coast.
18 She is a respected elder in her community and is an active
19 traditional teacher, mentor and educator, and we are very
20 honoured to have here today. So, please welcome, Odelle.

21 **MS. ODELLE PIKE:** Thank you, everyone.

22 (Speaking Indigenous language), good morning. I'm going
23 to start off this morning in a good way, and I'm going to
24 light a smudge, and I'm assuming that everybody in the
25 room knows what a smudging ceremony is. But, if you

1 don't, it's a purification. We want to make sure that
2 there is no negativity here in the room today, so I'm
3 going to light the smudge, and then I'm going to ask Paul
4 to just smudge around the room.

5 (SMUDGING CEREMONY)

6 **MS. ODELLE PIKE:** Sarah is now going to
7 light the qulliq.

8 **(LIGHTING OF THE QULLIQ)**

9 **MS. SARAH PONNIUK:** (Speaks in Native
10 language). God, yesterday I prayed that -- for you to
11 lead the conference, and today, I ask you to help us to
12 move forward so we can help others some more. And, I pray
13 that you will clean us, help us to start healing, starting
14 from here, and help the people that listen to the CBC or
15 on Facebook that read. I pray even at home they will be
16 touched, many people. I pray that you will also guide
17 them. We ask of those things in Jesus' name. Amen.

18 **MS. ODELLE PIKE:** Thank you, Sarah.

19 **MS. SARAH PONNIUK:** I forgot the mic. I'm
20 sorry.

21 **MS. ODELLE PIKE:** It's okay. I think
22 everybody heard you. First of all, I want to welcome you
23 to our territory, the territory of the Beothuk, the
24 Mi'kmaw, the Innu, the Inuit and the southern Inuit.

25 I would like to thank everyone here present

1 today. This is a very emotional and tough subject. I
2 know how difficult it is to speak the truth with such a
3 complex subject. As Indigenous people, we are very
4 resilient. It is our time for change, and as we, as
5 Indigenous people, will not sit by any longer and let
6 things happen.

7 We are strong, we are together, many
8 nations working to end all the wrongs that have been done
9 to us. We are proud, and we will hold our heads up high,
10 nevermore to be ashamed of who we are. The time is now.
11 We cannot depend on government any longer to fix the
12 issues within our communities. We have the power and we
13 will do it ourselves.

14 Last evening, at the end of the conference,
15 there was a lot of talk on the National Action Plan. Well,
16 that plan started in 2012, and in October of 2017, the
17 highlights of the findings were on prevention, protection,
18 prosecution and partnership. The evaluation further
19 stressed several key issues and gaps such as further focus
20 on labour trafficking, a centralized data collection
21 mechanism, a national referring mechanism, and greater
22 support for victims of vulnerable populations. I
23 personally would like to see a report card one year later
24 on the findings, and I think it's our obligation to ask
25 the government to produce it.

1 In closing, I would like to do a prayer.
2 Creator -- would everybody stand, please? Creator, we
3 want to give thanks for the people gathered in our circle
4 today. Doing the grassroots work from our Indigenous
5 brothers and sisters. Give them the strength to keep
6 pushing for change so that our children will have a better
7 life than we did.

8 We thank you for the many gifts you
9 bestowed on us. Place in our hearts the desire to make a
10 difference to our families and our communities. Let us
11 move forward our goals with determination, but always with
12 an abundance of humour. Let us respect Mother Earth and
13 all creation. Let us love and express that love. Let us
14 be humble, for it is a gift of wisdom and understanding.
15 Let us be kind to ourselves and to others. Let us share.
16 Let us be honest with ourselves and with others, and let
17 us be responsible to the commitment of the outcomes of
18 these hearings. All my relations (Indigenous word).
19 Thank you.

20 Paul and I are going to do the gathering
21 song. It's a Mi'kmaw song. It's always sung at
22 gatherings, and it's gathering the people and the spirits,
23 welcoming to have fun and laughter. So, we're going to do
24 the song for you.

25 **(MUSICAL PRESENTATION)**

1 **MS. TERRELLYNG FEARN:** Wela'lin.

2 (Wellaliuk). Hello? Hello. Wellaliuk to Odelle and Paul
3 for your words, for your smudge, and for the Gathering
4 Song. And, nakurmiik to Sarah for lighting the qulliq
5 again for us today.

6 So, just a reminder, a couple of reminders.
7 We're very happy to be able to announce that today's
8 broadcast will include three translations. So, it will be
9 available in English, in French and in Inuktitut. And, I
10 think the best way -- number 1 is English, 2 is French,
11 and number 3 is Inuktitut on the headsets. And, for those
12 of you that are watching at home, I believe the best way
13 is to click on our website? Yes, click on our website or
14 to go to the Facebook page, and our communications folks
15 will be letting you know the best way to log into those
16 most appropriate language translations for you.

17 Please be mindful of your care today.
18 Drink lots of water. Don't forget we have the elders'
19 room. The elder space was very active yesterday. I saw a
20 lot of people beading, and sitting, and having tea. That
21 space is available for all of you as well. And, there is
22 the private breakout space as well. So, please see
23 reception if you would like to book some private one-on-
24 one space.

25 Have yourself a wonderful day. We'll be

1 checking in on you. We have our team again, those with
2 the purple lanyards that are circling around the room, for
3 your care and support. So, please let us know if there is
4 anything that you need. We will begin in a few minutes.
5 We'll take a quick little break.

6 --- Upon recessing at 8:30 a.m.

7 --- Upon resuming at 8:46 a.m.

8 **MS. MEREDITH PORTER:** We'll get started.
9 Good morning, Chief Commissioner Buller, Commissioner
10 Robinson, Commissioner Audette and Commissioner Eyolfson.
11 I'm Meredith Porter, and I'll be leading the Day 2 panel
12 here in St. John's Institution, Expert, Knowledge-Keeper
13 hearing, focusing on sexual exploitation, human
14 trafficking, and sexual assault.

15 Today, Commission counsel will be calling
16 three witnesses, and those witnesses will include Mealia
17 Sheutiapik, who is a support staff member at the St.
18 Margaret's Anglican Church in Ottawa, and also calling
19 Jennisha Wilson, who is from the Tungasuvvingat Inuit
20 Centre in Ottawa as well. And, evidence for Ms.
21 Sheutiapik and Ms. Wilson will be led by Commission
22 counsel, Violet Ford.

23 The third witness we'll be hearing from is
24 Dr. Pertice Moffitt from the Aurora Research Institute in
25 the Northwest Territories, and I will be leading her

1 evidence following the first two witnesses. So, with
2 that, I would request that the Registrar affirm the first
3 witness, Mealia Sheutiapik. I believe Ms. Sheutiapik will
4 be sworn in with the Bible.

5 **MR. BRYAN ZANDBERG:** Good morning, Mealia
6 Sheutiapik. Do you swear to tell the truth, the whole
7 truth and nothing but the truth, so help you God?

8 **MS. MEALIA SHEUTIAPIK:** Yes, I do.

9 **MEALIA SHEUTIAPIK, Sworn:**

10 **MR. BRYAN ZANDBERG:** Thank you.

11 **--- EXAMINATION IN-CHIEF BY MS. VIOLET FORD:**

12 **MS. VIOLET FORD:** Good morning. Good
13 morning, Chief Commissioner and commissioners. This
14 morning, Mealia will be discussing her experiences of
15 being a sex-trade worker in Ottawa, and the reason she
16 found herself here, what kept her there, her encounters
17 with agencies and institutions, the supports and the
18 assistance available, and how she moved forward with her
19 resiliency. And, she will also be giving some
20 recommendations to the Commission to close her evidence.

21 So, Mealia, good morning.

22 **MS. MEALIA SHEUTIAPIK:** Good morning.

23 **MS. VIOLET FORD:** Your cultural background
24 is Inuit?

25 **MS. MEALIA SHEUTIAPIK:** Yes, I am.

1 **MS. VIOLET FORD:** Where were you born and
2 raised?

3 **MS. MEALIA SHEUTIAPIK:** I was born in
4 Frobisher Bay.

5 **MS. VIOLET FORD:** And, being raised -- born
6 and raised in that Inuit culture, you know the Inuit
7 values and beliefs?

8 **MS. MEALIA SHEUTIAPIK:** Yes.

9 **MS. VIOLET FORD:** And, you now live in
10 Ottawa?

11 **MS. MEALIA SHEUTIAPIK:** Yes.

12 **MS. VIOLET FORD:** For how many years?

13 **MS. MEALIA SHEUTIAPIK:** Since 1990.

14 **MS. VIOLET FORD:** Since 1990?

15 **MS. MEALIA SHEUTIAPIK:** Mm-hmm.

16 **MS. VIOLET FORD:** And, you are here to
17 speak about your experiences in the sex trade in Ottawa?

18 **MS. MEALIA SHEUTIAPIK:** Yes.

19 **MS. VIOLET FORD:** Specifically in Ottawa?

20 **MS. MEALIA SHEUTIAPIK:** Yes.

21 **MS. VIOLET FORD:** Okay. And, how long were
22 you in the sex trade?

23 **MS. MEALIA SHEUTIAPIK:** On and off for
24 almost 10 years.

25 **MS. VIOLET FORD:** Okay, thank you. So, I

1 am tendering Mealia Sheutiapik for the record as a
2 knowledge keeper with life experiences in being an Inuk
3 woman in Ottawa and working in the sex trade in Ottawa,
4 and those are some of the parameters of her testimony
5 today.

6 So, to begin, Mealia, what led you to
7 Ottawa?

8 **MS. MEALIA SHEUTIAPIK:** First of all, I was
9 working -- I had three jobs when I was a teenager. And,
10 before I was working, I was a witness to a murder before.
11 So, after witnessing all that murder, there was no help
12 that time. There were no social workers that would come
13 up. The RCMP were just there investigating, but not
14 asking questions. I didn't know how to talk it out
15 because I was just a kid.

16 **MS. VIOLET FORD:** And, how old did you say
17 you were?

18 **MS. MEALIA SHEUTIAPIK:** I think I was 11 or
19 -- 11 or 12 witnessing that murder. I didn't know who to
20 turn to. That's when I started looking for work, and
21 without talking to anyone, no social worker would not come
22 up. I didn't know who to go to. I didn't want to talk to
23 my mom. But, my grandmother, I'm sure she knew that I
24 heard that murdering stuff going on, but she didn't know
25 how to ask me either, because I was just a kid.

1 So, from there, I ended up looking for work
2 just to keep myself shut about what I witnessed. So, I
3 ended up working, and babysitting seven kids, and --
4 including my four -- three siblings. I was also an
5 actress for Inuit Broadcasting. From there -- and I was
6 still going to school, but I was making a lot of money as
7 a teenager. And then I found a boyfriend and he was a
8 taxi driver, and -- but without knowing that he was drug
9 dealing, we fell in love. And, I was young, and I didn't
10 know who to go to, so he was the one I was talking to
11 about what happened before. So, we ended up staying
12 together.

13 From there, we saved enough money to come
14 to Ottawa, and we discussed that we might as well get away
15 from all this while I was still fragile that time. So, we
16 ended up coming to Ontario after all that saving money we
17 did. He saved money from drug dealing and taxi driving,
18 and I saved all my money from working all those three
19 jobs. We ended up buying a motorcycle here in Ontario --
20 I mean, in Ontario, but he started abusing me, so I ended
21 up running away from him, because he was abusing me too
22 much. That's how I ended up on the street.

23 **MS. VIOLET FORD:** How old were you when you
24 moved to Ottawa?

25 **MS. MEALIA SHEUTIPIK:** Fifteen, I think.

1 I was 15.

2 **MS. VIOLET FORD:** And, whose idea was it to
3 move to Ottawa? Who initiated that idea?

4 **MS. MEALIA SHEUTIAPIK:** My ex-boyfriend
5 did.

6 **MS. VIOLET FORD:** And, when you ended up on
7 the street, were there any agencies or organizations that
8 you encountered that may have assisted you at the time?

9 **MS. MEALIA SHEUTIAPIK:** I was kind of lost,
10 because running away from my ex-boyfriend, I always just
11 ended up at my friend's place and there was hardly any
12 Inuit that time. There was only very few Inuit in Ottawa
13 that time, so I always ended up at my mom's friend's
14 house. But, without asking for any help or anything, I
15 just ended up staying at her house and not looking for any
16 help or -- I didn't know who to go to, and I was kind of
17 shy that he was beating me up.

18 **MS. VIOLET FORD:** So, were you doing drugs
19 at that time?

20 **MS. MEALIA SHEUTIAPIK:** I was smoking hash.
21 I didn't know any other drug that time. He got me into
22 smoking hash. So, I tried to kill that pain when I was a
23 witness to that murder. So, I just ended up carrying on
24 and smoking hash, and it escalated to other drugs just to
25 kill the pain and just to get numb, just to forget about

1 that thought and what happened before. And, thinking
2 about my grandma and my siblings, leaving them behind, I
3 ended up using more hard drugs. And, that also escalated
4 me to go on the street and try and get more money to get
5 high.

6 **MS. VIOLET FORD:** So, who introduced you to
7 the harder drugs?

8 **MS. MEALIA SHEUTIAPIK:** It was one of my
9 friends that just recently moved to Ottawa when I was
10 there already a year later. It was so hard that it took
11 over me.

12 **MS. VIOLET FORD:** Can you expand on that
13 part a little bit?

14 **MS. MEALIA SHEUTIAPIK:** Like...

15 **MS. VIOLET FORD:** On how it took over your
16 life?

17 **MS. MEALIA SHEUTIAPIK:** I was very weak and
18 fragile that time. I just wanted more just to kill the
19 pain and the thoughts that I had.

20 **MS. VIOLET FORD:** So, you just said that
21 you needed money for drugs, and that's when you started
22 getting into the sex trade; right?

23 **MS. MEALIA SHEUTIAPIK:** Before I went to
24 the sex trade, I was depending on my friends. But, I got
25 tired depending on my friends, so I asked how I can make

1 fast money, so that was the fastest way to make money is
2 to put myself on the street.

3 **MS. VIOLET FORD:** And, how did that come
4 about? Was there an individual or individuals that you
5 sought out that you knew were in that trade or ---

6 **MS. MEALIA SHEUTIAPIK:** There was one of
7 them already in that trade, yes, so she taught me how, and
8 then I didn't stop from there. And then money was so
9 easy, I wanted more. And, it never stopped from there for
10 a while. It was not easy either, but I took a chance
11 putting myself on the corner, and I never really thought
12 that I was taking a risk.

13 **MS. VIOLET FORD:** Would you like to talk
14 about your experiences when you were in the sex trade?
15 What were some of the key concerns, or fears, or
16 challenges you had in that trade?

17 **MS. MEALIA SHEUTIAPIK:** The worst part was
18 going out after midnight without knowing who I'm going to
19 bump into or who is going to pick me up and who I'm going
20 to bump into on the street or somebody is going to notice
21 me. So, I kept myself in the hiding for a while, worried
22 that I'm going to be seen on the street and kind of shy
23 about it. So, I was in the hiding for a long time and
24 just getting high all the time.

25 **MS. VIOLET FORD:** How did that feeling

1 ashamed or shy about it make you feel during that period?
2 What kind of ---

3 **MS. MEALIA SHEUTIAPIK:** I just wanted to
4 hide myself and -- without letting anyone know. I was,
5 like, missing in action all the time, not even -- I
6 stopped calling my family and stopped being social. And,
7 that was not me because I was very outgoing and, like, I'm
8 -- I grew up in front of the camera as an actress when I
9 was a kid. And, when I realized one day that that's not
10 me, I tried to put a stop to it, but the drug took over me
11 already.

12 **MS. VIOLET FORD:** Do you think what you
13 were going through at the time is a similar thing that
14 many other women who go through the sex trade face and
15 experience?

16 **MS. MEALIA SHEUTIAPIK:** Yes, I think so,
17 yes. Because it's kind of embarrassing when you're
18 already down like that and without really knowing where to
19 go. I think it's pretty harsh after the drugs have been
20 taking over you. It's not easy to get off it either,
21 unless you really want to. It took me how many years to
22 really get off it, because I really wanted to for so many
23 years because I knew that was not me. But, then again, I
24 started getting pregnant every year, so that kept me --
25 like, I stopped the drug when I got pregnant, and then get

1 right back on it after I give birth. It was always that
2 cycle over and over.

3 **MS. VIOLET FORD:** When you were involved in
4 giving birth to your children, was there any sense given
5 to the health care people in the hospital about your drug
6 use? Was there any signs given?

7 **MS. MEALIA SHEUTIAPIK:** They didn't really
8 seem to care, but they always end up calling the
9 Children's Aid and ---

10 **MS. VIOLET FORD:** And, what happened then?

11 **MS. MEALIA SHEUTIAPIK:** I had to go through
12 courts just to get my kids back and -- my baby. And, I
13 went through the courts, but Children's Aid were too harsh
14 on me and they didn't really give me no chance. They
15 didn't even ask me any questions, if I'd like to get
16 better or if I need help. It's all they were concerned is
17 about my baby and take him away. So, that kind of got to
18 me and then I just went back on the drugs and being hard
19 on myself.

20 **MS. VIOLET FORD:** So, they didn't ask you
21 any questions about how you were feeling, what help you
22 needed?

23 **MS. MEALIA SHEUTIAPIK:** No.

24 **MS. VIOLET FORD:** And, how long were you in
25 the sex trade for, do you remember?

1 **MS. MEALIA SHEUTIAPIK:** A little bit over
2 10 years. But, every time I got pregnant, I would stop.

3 **MS. VIOLET FORD:** At what point did you
4 decide it was enough and that you needed to really get out
5 of it? Was there a moment there that ---

6 **MS. MEALIA SHEUTIAPIK:** My ---

7 **MS. VIOLET FORD:** --- triggered that?

8 **MS. MEALIA SHEUTIAPIK:** Yes. My third last
9 baby I had kind of woke me up more, because after how many
10 kids -- after four kids, that made me realize. Then, the
11 fifth kid I had, I realized that I got to put a stop to
12 this because they've been walking all over me for so many
13 years, now I got to do something about it because I'm
14 tired of them walking all over me. That's when I started
15 looking for help, going to school, doing some courses,
16 doing counselling, went to treatment twice. But I find
17 that when I went to treatment, it didn't really help. It
18 just triggered me again, talking about all those stuff
19 that I didn't want to hear.

20 **MS. VIOLET FORD:** What type of counselling
21 services were made available to you and how did you know
22 about those services?

23 **MS. MEALIA SHEUTIAPIK:** That's when I
24 started going to those Inuit drop-ins and seeing a doctor,
25 and the doctor asked me what kind of help I want. And,

1 I'm like, I think I need serious help. And, they
2 recommended me to do counselling and seeing someone one-
3 on-one, and that's when I chose to go.

4 **MS. VIOLET FORD:** Were there any Inuit
5 counsellors?

6 **MS. MEALIA SHEUTIAPIK:** Back then, there
7 was not many, but there was one. I think I was one of the
8 first clients at Tungasuvvingat Inuit when they first
9 opened or maybe the second year, or something like that.
10 But, they didn't have much counsellors, but I still talked
11 to someone there that -- there's got to be some kind of
12 change, like, I can't do this over and over.

13 **MS. VIOLET FORD:** Just going back to your
14 decision to stop this immersion into the sex trade, what
15 were you facing when you made that decision? How were you
16 feeling? Did you feel vulnerable?

17 **MS. MEALIA SHEUTIAPIK:** Very much. After
18 what I was dealing with with Children's Aid, it didn't
19 take me much to go back to the drug and relive that moment
20 where they taken away my kid and that really hurt me.
21 And, I didn't know who to go to to talk to about the
22 Children's Aid, and they never really offered me any help
23 or where I want to go. They never really offered me to go
24 such where and where. So, I ended up going to TI -- that's
25 Tungasuvvingat Inuit -- and asking for help, because I

1 didn't know where to go. The social worker just told me
2 to try and find treatment or counselling, that's when I
3 started going counselling, one-on-one.

4 **MS. VIOLET FORD:** Did the Children's Aid
5 Society mention anything to you about your rights, your
6 legal rights?

7 **MS. MEALIA SHEUTIAPIK:** No.

8 **MS. VIOLET FORD:** Did you have any access
9 to any legal aid or any other advocacy ---

10 **MS. MEALIA SHEUTIAPIK:** They didn't even
11 mention nothing like that. They didn't even tell me I
12 needed to get a lawyer or nothing. I never had a lawyer
13 when I was dealing with the courts and with Children's
14 Aid.

15 **MS. VIOLET FORD:** Is there anything else
16 you'd like to say on that, or any other of your
17 experiences?

18 **MS. MEALIA SHEUTIAPIK:** Well, when I
19 started taking the courses and got the certificates from
20 doing the courses, then I started looking for work,
21 because I didn't want to be on the street anymore, and I
22 knew I could do better. I was looking for work, but since
23 I've been off work for so many years that I was not
24 accepted. Even though I hand out my résumé, I was not
25 accepted. It took how many years to find another job, a

1 normal job, like -- and then after almost 18 years, I went
2 back to Inuit Broadcasting and I worked as an editor. I
3 went back to acting, and then I started editing. And, I
4 was there for almost four years. But, something triggered
5 me again, and I just went right back to the drugs, the
6 alcohol and drugs. And, I got laid off. And, it was not
7 easy to find another job after getting laid off. And,
8 getting laid off, that led me to drinking again, and that
9 took over me again, that drinking.

10 So, it was not easy to find a job. And,
11 every time I hand out my résumé, I would be waiting, and
12 waiting, and waiting, and waiting for a phone call, but I
13 never got a phone call, so I ended up drinking, and
14 drinking, and drinking. And, sometimes I -- when I go
15 back to the street and doing that cycle over and over, but
16 then again I pushed myself that I know there's something
17 out there that's going to try and get myself better to be
18 a normal person or have a normal job, but it never really
19 happened.

20 So, every time I find a job, I would --
21 something would trigger me, and -- I think it was that,
22 when I was a kid witnessing the murder. I think that got
23 to me, because I never talked about it since I was a kid.
24 It was not easy to talk about. I didn't know who to go
25 to. But, now, I talked about it, now it's a lot -- a

1 little bit easier for me to talk about.

2 I just wanted to be a better person, but
3 every time I find a job, it would -- something would
4 trigger me and I would go right back to that cycle and
5 over, and over. But, I really wanted out. And, doing
6 those courses got me off the street, because I really
7 wanted to go back to work, have a normal job and be a
8 normal person like everybody else. And, it was not easy
9 though.

10 **MS. VIOLET FORD:** So, now, you're out of
11 the sex trade, and you say those courses helped you a lot
12 from going back into the sex trade; right?

13 **MS. MEALIA SHEUTIAPIK:** Yes. Every time I
14 got laid off, I would just go right back to that cycle and
15 I just wanted a normal life, like I used to, 9:00 to 5:00,
16 but it was not easy after I was doing the hard drugs,
17 pulling myself down. And, something was eating me inside
18 without knowing, so I always end up turning to drugs and
19 alcohol. Plus, I grew myself up in the South, because I
20 ran away from home with my ex-boyfriend.

21 **MS. VIOLET FORD:** Did you get any support
22 or strength from the Inuit community in Ottawa?

23 **MS. MEALIA SHEUTIAPIK:** Yes, they did give
24 me support. They tried helping, but the motivation to
25 helping another person, I think they had to look for other

1 places where they can get help for me.

2 **MS. VIOLET FORD:** Just a couple more
3 questions. What is your life like today?

4 **MS. MEALIA SHEUTIAPIK:** I like what I do
5 today. I feed the community in the Inuit community, not
6 only the Inuit, anybody is welcome to the church. I feed
7 people on Sundays, and I have this lunch program on
8 Wednesdays, and there are a lot of people that come to my
9 lunch program. And, I get overwhelmed about it too
10 sometimes and think about how I used to be, but I didn't
11 think this is where I would be today, where I'm at.

12 I'm just giving back to the community as
13 much as I can, and try not to think about what I used to
14 do, because I just want to keep moving forward. And, I'm
15 not going to stop, like, giving back to the community,
16 because I feel good when I do that instead of, like, how I
17 used to abuse myself and feeling bad about myself after.
18 Waking up guilty, feeling that awful feeling in your gut.
19 But, today, I am a lot different person now. I just try
20 to be better like everybody else.

21 **MS. VIOLET FORD:** So, doing this type of
22 work then, what I gather from what you just said, is that
23 it gives you some resiliency?

24 **MS. MEALIA SHEUTIAPIK:** Yes.

25 **MS. VIOLET FORD:** Keeps you strong?

1 **MS. MEALIA SHEUTIAPIK:** Yes.

2 **MS. VIOLET FORD:** And, what about your
3 acting?

4 **MS. MEALIA SHEUTIAPIK:** Sometimes I'm on
5 call with the Inuit Broadcasting. Well, I'm on call all
6 the time with them, because they laid me off, but they put
7 me on call. But, I got tired of waiting for that call, so
8 I ended up doing -- looking for something else to do and
9 taking some more courses. I got all my certificates.

10 **MS. VIOLET FORD:** You have ---

11 **MS. MEALIA SHEUTIAPIK:** Those certificates
12 are -- like they're just in the paper and my résumé, but -
13 - it looks good on the résumé, but there's -- it's not
14 easy to find a job like that though.

15 **MS. VIOLET FORD:** So, those are some of the
16 ongoing challenges coming out of the sex trade then?

17 **MS. MEALIA SHEUTIAPIK:** Yes.

18 **MS. VIOLET FORD:** Looking for permanent
19 work?

20 **MS. MEALIA SHEUTIAPIK:** Yes.

21 **MS. VIOLET FORD:** Do you have any
22 recommendations for the Commission?

23 **MS. MEALIA SHEUTIAPIK:** Well, I wish there
24 was more stuff for Inuit women or Aboriginal in Ottawa,
25 because there are a lot of Aboriginal and Inuit people in

1 Ottawa now. But, there's hardly any help for, like,
2 treatments for women, and you really got to look, and
3 seek, and find it. That's why I have been doing more -- I
4 still do counselling one-on-one, and I have been seeing a
5 therapist.

6 And, there's a lot of -- it's not that bad
7 as up North with the poverty in Ontario, but I think there
8 should be more -- some things for Inuit women or
9 Aboriginal. Like, people looking for treatments, and you
10 have to go outside Ottawa or -- just to get away from the
11 city. It feels like just to get away from the city, but I
12 think there should be more in the city, because there are
13 a lot of Aboriginal and Inuit in the city, but not much
14 help. Because even though I was helping myself, I still
15 try to help other girls off the street. But, the drug is
16 so powerful that they can't help it either, so they always
17 end up back on the street, because they're also shy about
18 where to go or seeking help.

19 **MS. VIOLET FORD:** Could you elaborate a
20 little bit on that recommendation, on what type of
21 specific help might be needed?

22 **MS. MEALIA SHEUTIAPIK:** Well, there's still
23 -- I mean, they're starting to have more outreach workers,
24 but I don't think that's enough. Maybe there should be
25 more outreach walking people for Aboriginal or -- it

1 doesn't matter if you're Aboriginal or not, or Inuk or
2 not. And there's only a couple of places where they can go
3 and in the area where I'm at where there's a lot of that
4 girls walking, sex trade, and the police doesn't make it
5 any better either.

6 **MS. VIOLET FORD:** What has been some of the
7 encounters with police that cause ---

8 **MS. MEALIA SHEUTIPIK:** Most of the time
9 when I notice -- sorry -- most of the time when I notice
10 about the police looking down at people, mostly Aboriginal
11 and Inuit people, they like to look down and they will
12 start questioning you without having the right papers to
13 start questioning you or they harass you.

14 And I notice in the last few years, even
15 though I haven't been on the street for how -- I lost
16 count how many years now, maybe five, six years, the last
17 time I talked to a guy like that. But when I was
18 encountered by the cop, like, they look down at you.
19 Start saying, "You got to go home" or "You can't be here."
20 And then you have no choice to listen because they're
21 higher than you or something or just because you're -- I
22 start thinking, I don't want to go to jail. And that's
23 not right for the cops to do that.

24 **MS. VIOLET FORD:** M'hm. Is there anything
25 else you'd like to say?

1 **MS. MEALIA SHEUTIAPIK:** I just wish that
2 there was more meetings like this, like -- or even I wish
3 you guys were in Ottawa all the time.

4 (LAUGHTER)

5 **MS. MEALIA SHEUTIAPIK:** And I really thank
6 you that I have to be here and speak it out; otherwise,
7 it's still just going to eat me inside, because I'm kind
8 of shy just to talk about it just to anyone, even my
9 counsellors. But I tell my therapist about what happened
10 before. She tries to help too.

11 **MS. VIOLET FORD:** Are you getting help on
12 the murder issue?

13 **MS. MEALIA SHEUTIAPIK:** That's why I'm
14 seeing the therapist.

15 **MS. VIOLET FORD:** Okay. Yeah. That's
16 great.

17 **MS. MEALIA SHEUTIAPIK:** Yeah. And I'm not
18 going to stop either. And I wish there was more help for
19 a woman on girls -- women and girls on the street, because
20 there is a lot -- there is a lot of stuff out there if you
21 find it -- if you seek and find it. There is help out
22 there and you got to want it too. You can't force a
23 person; right?

24 **MS. VIOLET FORD:** So but what about the
25 accessibility of those programs and help? Are they easily

1 accessed?

2 **MS. MEALIA SHEUTIAPIK:** No, you really got
3 to push yourself and actually push -- actually, you have
4 to ask and ask for help. I mean, if you really want help
5 or going into treatment, then there's a waiting time too.

6 **MS. VIOLET FORD:** M'hm.

7 **MS. MEALIA SHEUTIAPIK:** And while, you
8 know, people are waiting, you're just going to go back to
9 that cycle and think and put you back to that place where
10 you don't want to.

11 **MS. VIOLET FORD:** M'hm.

12 **MS. MEALIA SHEUTIAPIK:** Kleenex maybe. I
13 think the worst part is not working for a while and then
14 you get bored fast not doing anything; right?

15 **MS. VIOLET FORD:** M'hm.

16 **MS. MEALIA SHEUTIAPIK:** So I always try to
17 keep my mind occupied or busy, just to keep my mind off
18 what happened before. But I try not to let that get to me
19 anymore ---

20 **MS. VIOLET FORD:** M'hm.

21 **MS. MEALIA SHEUTIAPIK:** --- because it's
22 easier for me to talk about it now, because I tried
23 helping some girls before too because I know how it is.
24 It was scary, but when you're high on drugs you have no
25 fear. Being intoxicated and you have no fear. But I'm

1 glad I put a stop to it. It was not easy though. And I
2 was also embarrassed that I don't want my kids to know
3 what I went through because I don't want them to go
4 through that. And now I have a grandson, so I'm glad I
5 put a stop to all that nonsense because I do love my
6 family. I want out of this because we used to be.

7 Handling grieving, that's another part.
8 And grieving also tend to let me go back to my memories
9 and then grieving on top of grieving and that got to me
10 and then getting right back to the bottle again. And then
11 thinking about the drugs, but I don't let that get to me
12 anymore either, so I try to be strong all the time and try
13 not to let it beat me. And it's really hard sometimes. I
14 got to tough it out.

15 I've been through a lot in my young life.
16 I'm only 42 years old and I've seen a lot and mostly since
17 I was a little girl. I was not sexually abused. Some
18 people think that I've been sexually abused as a kid, but
19 I wasn't. I grew up in a -- I grew up with my
20 grandmother. The only abuse that was my mom was always
21 drinking and not really there for me most of the time. I
22 grew up with my grandmother.

23 I had a good life when I was a kid. I was
24 out camping and always with family, social gathering with
25 family all the time. I had a normal life. I was not

1 abused, but some people think I was abused just because I
2 worked on the street before, but it was alcohol and drugs
3 that led me to going on the street.

4 Because I met quite a few girls that were
5 sexually abused when they were kids, so I didn't know what
6 to say because I was not sexually abused when I was a kid.
7 I didn't want to talk about what I witnessed when I was a
8 kid because it's really nobody's business. But most of
9 the time every time I meet one of the girls they were --
10 they didn't even want to talk about how they were abused
11 too. So they also go through that phase when the drug is
12 taking over just to kill the pain.

13 But I'm glad I pulled myself out of it. I
14 don't know how I did it, but I really wanted out, so
15 started seeking help and going to school -- going back to
16 school and taking courses. And I'm glad I made that move.

17 **MS. VIOLET FORD:** Well, if there's no other
18 statements you want to make, those are the end of my
19 questions to you. Is there any closing words that you
20 would end with?

21 **MS. MEALIA SHEUTIAPIK:** There's a lot of
22 Inuit organizations and Aboriginal or Native in Ontario,
23 but they don't really reach out to other Aboriginal or
24 Inuit, but -- only maybe other settlements up north, but
25 not to where it's near where other people are nearby. I

1 just wish sometimes they would reach to people that's
2 closer to them around them.

3 And, there's not many Inuit counsellors,
4 and there's a lot of homeless with Inuit, too. Not only
5 Inuit; Aboriginal, white, in Ottawa, too; right? I think
6 the government is kind of corrupting like that. They
7 don't make things any better either. I just want to have
8 a normal life like everybody else.

9 **MS. VIOLET FORD:** Well, Mealia, thank you
10 very much for your presentation and your words, and your
11 truths, and providing everyone with the opportunity to
12 hear your story, and that's the end of my questions.

13 **MS. MEALIA SHEUTIPIK:** Okay. You're
14 welcome.

15 **MS. MEREDITH PORTER:** Thank you. Chief
16 Commissioner and Commissioners, I'd like to request at
17 this time we just take a quick five-minute break where we
18 can sort of reorganize the seating arrangements, and then
19 reconvene with the next witness?

20 **CHIEF COMMISSIONER MARION BULLER:**
21 Certainly. Five minutes.

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

23 --- Upon recessing at 9:31 a.m.

24 --- Upon resuming at 9:46 a.m.

25 **MS. MEREDITH PORTER:** Thank you. Chief

1 Commissioner and Commissioners, we'll then proceed with
2 our next witness, Ms. Jennisha Wilson, and her evidence
3 will be led by Commission counsel, Violet Ford. I would
4 ask the Registrar to swear the witness in. Bible.

5 **MR. BRYAN ZANDBERG:** Good morning, Jennisha
6 Wilson.

7 **MS. JENNISHA WILSON:** Good morning.

8 **MR. BRYAN ZANDBERG:** Do you swear to tell
9 the truth, the whole truth, and nothing but the truth, so
10 help you God?

11 **MS. JENNISHA WILSON:** Yes.

12 **MR. BRYAN ZANDBERG:** Thank you.

13 **JENNISHA WILSON, Sworn:**

14 **--- EXAMINATION IN-CHIEF BY MS. FORD:**

15 **MS. VIOLET FORD:** Good morning, Jennisha.

16 **MS. JENNISHA WILSON:** Good morning.

17 **MS. VIOLET FORD:** Thank you for being here.
18 Just a few questions. Can you turn to Tab B of your C.V.?
19 And, what I'd like for you to do is just to go through
20 your C.V. a little bit to give people in this room a sense
21 of what you do and how it's related to the work you're
22 going to be speaking to today.

23 **MS. JENNISHA WILSON:** Absolutely. I find
24 it really hard to talk about myself, but I'll do my best.
25 Essentially, what I had prepared was a, I believe, five-

1 page document for the -- as evidence for the Commission.
2 In terms of my C.V., I come with a few different backings,
3 one being academic. So, I completed my Master's in
4 environmental studies with a focus on why individuals
5 relocate to urban centres, the social determinants of
6 health and research.

7 A lot of my work has been embedded in
8 community development, specifically with racialized and
9 Indigenous communities in Ontario. I've been doing this
10 kind of work for over seven years, and as a part of that
11 adventure and academic work, it has led me to work with a
12 diverse group of individuals within the Province of
13 Ontario.

14 I have experience working with communities
15 in northern Ontario, specifically First Nations, urban
16 Inuit from Toronto and Ottawa, as well as two-spirited
17 folks situated, again, in urban centres. As a part of my
18 work, I strongly believe in using practices such as anti-
19 oppression and anti-racism, and really focusing in on
20 community voices through participatory action research and
21 arts-based informed research. So, using arts as a way to
22 engage with community and provide that information in ways
23 that are translatable, useful and sustainable for
24 community-led solutions.

25 In terms of just work-related history, I

1 currently -- I'm employed by Tungasuvvingat Inuit as the
2 manager for programs related to sex work, exiting the sex
3 trade and anti-human trafficking. I've been in this
4 position for about a year-and-a-half, and that is
5 specifically because we just received funding in 2017 to
6 dedicate to this kind of work, which I find very
7 important.

8 Prior to this, I was their local poverty-
9 reduction coordinator looking at many of the issues around
10 poverty and what leads individuals to become vulnerable.

11 Prior to that, I worked in Toronto as a
12 part of Well Living House, which is an Indigenous research
13 hub that focuses on community-led health research to
14 support resiliency, empowerment and well being.

15 And then in terms of just community
16 involvement and presentations and work for community, I
17 led the Indigenous-specific anti-human trafficking
18 proposal writing which has secured funding for TI to do
19 this amazing work. As well as I sit on a significant
20 amount of local committees dedicated to ensuring that
21 Inuit narratives, voices and perspectives are included in
22 anti-human trafficking conversations and conversations on
23 sexual exploitation.

24 At any point, feel free to ask me any other
25 questions about my C.V.

1 **MS. VIOLET FORD:** Thank you, Jennisha. For
2 the record, I'd like to state that she is being tendered
3 here today as a qualified institutional witness in the
4 area of human trafficking and the sex trade as it relates
5 specifically to Inuit in urban centres, and those are the
6 parameters of her speaking today.

7 **CHIEF COMMISSIONER MARION BULLER:** Okay,
8 thank you.

9 **MS. VIOLET FORD:** She's going to begin by
10 giving a PowerPoint presentation where she will be relying
11 on some of the exhibits listed in the summary. And,
12 because there are many documents, and I don't want to
13 interfere with the flow of the PowerPoint presentation,
14 I'm asking permission to have those exhibits filed
15 afterwards.

16 **CHIEF COMMISSIONER MARION BULLER:** Okay,
17 thank you.

18 **MS. VIOLET FORD:** So, if you want to start
19 your PowerPoint now?

20 **MS. JENNISHA WILSON:** I don't know who I'm
21 directing in terms of slide directions? Awesome. So,
22 when I say, "next slide", that would just be an indication
23 to go forward. Awesome.

24 So, again, I'm here representing
25 Tungasuvvingat Inuit as their manager for programs related

1 to sex work, exiting the sex trade and anti-human
2 trafficking specific to Inuit living in urban centres
3 within Ontario. Next slide, please.

4 Just a couple of disclaimers that I feel
5 very important to note. I come here as a racialized woman
6 and an ally working with southern Inuit populations. By
7 no means do I think I'm an expert in this field, but,
8 rather, someone that has the opportunity to share 1) my
9 own lived experience around how violence operates the
10 disenfranchised, racialized and Indigenous woman, but
11 also, to bring forth the amazing work that the team at
12 Tungasuvvingat Inuit and partners from other agencies,
13 specifically Inuit-specific organizations, are doing to
14 constantly challenge violence against women, as well as
15 sexual exploitation.

16 A part of my presentation is really not to
17 provide answers, but, rather, to amplify and make the
18 voices of Inuit women that we work with on a daily basis
19 louder. And, I feel it's really important that there was
20 a witness here that is from the community, because, at the
21 end of the day, their voice should be the primary resource
22 for recommendations and information. I simply have the
23 privilege of being here as an employee, but also as an
24 ally to make sure that there's added efforts towards
25 taking this issue very seriously as it is something that

1 constantly impacts community. Next slide, please.

2 So, for individuals that are in the room
3 that are not familiar with Tungasuvvingat Inuit, I wanted
4 to provide just a little bit of context of who we are and
5 what we do. TI is a provincially mandated organization
6 based in Ontario, so we have locations in Ottawa and
7 Toronto.

8 We have currently four locations in Ottawa,
9 which is our family resource centre in the east end, our
10 head office in the west end, our -- the location that I
11 operate out of, which is 604 Laurier, that is in the
12 centretown, and they're looking to launch their Mamisarvik
13 Healing Centre hopefully in the near future, which Barb
14 will be a part of again. And, we have our Toronto
15 location which is at 216, I believe, Spadina, which is a
16 part of the Native Canadian Centre. I have been asked to
17 slow down and I totally agree. I'm a little nervous.

18 Some other items to really think about is,
19 TI is not often known in community, but we do a lot of
20 work in terms of providing frontline programming. There's
21 well over 20 well-diverse frontline programs that are
22 offered for individuals as early as pre-, post-natal and
23 for individuals that are in their elder years. So, we try
24 to cover the full spectrum of supporting Inuit that live
25 in the south, from what people like to quote "cradle to

1 grave."

2 Some other items to take into consideration
3 also is that we do a lot of advocacy work along with
4 programming as a means of constantly being reflexive of
5 the things that we see on the ground. And, finally, we do
6 a lot of policy development, not because we have a robust
7 policy shop, but because we see that as very important in
8 trying to constantly make change, to support the things
9 that we're seeing on the ground within community. Next
10 slide, please.

11 I'd like to think I have a very ambitious
12 presentation and goal here today, but I think it's also
13 very important to note that this is one of the few
14 opportunities that focus on Inuit-specific forms of sexual
15 exploitation and anti-human trafficking -- are front and
16 centre as a part of conversation. This comes with, you
17 know, constant struggles of trying to justify why it's
18 important on the ground as a part of my work, but also I
19 find it very important that I try to make sense of some of
20 the more structural forms of violence, how it's related to
21 history, how it's related to current forms of
22 vulnerability on the ground, and why we do the work that
23 we do as a form of disrupting those forms of violence.
24 Next slide, please.

25 So, I'll start off by giving some

1 demographics. Within Canada, there is said to be over
2 60,000 Inuit, and of that population, about 30 percent
3 live outside of Inuit Nunangat, which is the land claim
4 territories that Inuit are traditionally -- traditionally
5 reside within. According to different reports and
6 demographic datas, a lot of Inuit come to resettle in
7 spaces such as Toronto, Ottawa, Edmonton, Montreal and St.
8 John's. A lot of that could be due to many different
9 factors, but -- next slide, please.

10 There are also direct connection flights to
11 these urban spaces which provide individuals an easy route
12 to get to urban centres. Something to note about why
13 those connecting flights exist is because of the lack of
14 investment in different communities that lead folks to
15 have to travel to the southern provinces for support.
16 Next slide.

17 Some of these items are in search of higher
18 education or educational opportunity, job prospects,
19 visiting family by choice or to reconnect with relatives,
20 foster care relocation, incarceration, mental health and
21 addiction supports, primary medical care needs and
22 supports, poverty reduction, so looking for a better life,
23 access to better housing, affordable food and things that
24 would empower one's well-being to the best status
25 possible.

1 Now, when we look at why individuals
2 travel, often times, the narrative that I hear is that,
3 you know, there is no reason for people to travel. And, I
4 think there is a lot of conflicting ideas of what happens
5 in the north and what non-Inuit perspectives project in
6 terms of ignorance and lack of understanding of what the
7 landscape of life looks like there.

8 And, by no means am I taking away from the
9 fact that there are very resilient communities, strong
10 communities, a lot of development and leadership there,
11 but the reality is that the state does not invest enough
12 in the community to ensure that there is affordable living
13 and low numbers of poverty. And, I think that our first
14 witness expressed some of those reasons as to why she
15 migrated to the south in search of a better life and to
16 get out of some of those systemic forms of violence. Next
17 slide, please.

18 So, one of the things that is often not
19 often expressed in the narrative of when individuals
20 migrate to southern provinces in hopes of a better life is
21 the vulnerabilities that they continuously experience once
22 relocated and settled in the south. And, this is, kind
23 of, where the work of TI has really stemmed from and why
24 the work that we do is really important, along with other
25 Inuit organizations.

1 So, for a lot of folks, there is, you know,
2 the constant racism, discrimination and sexism that's
3 experienced by non-Inuit and non-Indigenous populations
4 that are driven by colonial representations of who
5 Indigenous folks are. There is poverty that exists when
6 you relocate, that's not something you shed, unless of
7 course you're able to be -- to climb the socio-economic
8 ladder in ways that are meaningful for one.

9 There's difficulty in navigating, you know,
10 white heteronormative systems. The assumption is that
11 when you go into a service provider that those services
12 are neutral. The reality is that you as an individual
13 that is a racial minority or Indigenous, you will
14 experience systemic violence through the ways in which
15 people interact with you. And, a common example of that
16 is when you go into medical care systems. Our witness
17 spoke about feeling like they did not care, did not ask
18 the right questions, that is not done by -- you know,
19 that's intentional. That's intentional forms of not
20 giving adequate services to ensure that the well-being of
21 Indigenous folks are constantly prioritized within these
22 systems.

23 Some other forms of vulnerability that
24 happen is the lack of education and economic opportunities
25 for individuals to participate in society in meaningful

1 ways. And, as a result, this funnels and pushes
2 individuals into forced forms of labour that is not
3 necessarily ideal. So, a lot of the individuals we work
4 with are individuals that are part of the sex trade field
5 by force and as survival sex workers not by choice. And,
6 individuals that get wrapped up in being trafficked in the
7 context of sexual exploitation and labour, again, not by
8 choice, but because there were no other options.

9 Some of the other things that often I hear
10 is that there are challenges of individuals not being
11 understood as what does it mean to be Inuk. They're often
12 misunderstood as being First Nations, which takes away
13 their identity and their ability to mobilize around their
14 specific needs and to understand that there are
15 differences between the cultures. Those are just a few of
16 the vulnerabilities, but you can imagine how, if you were
17 coming to the south looking for supports, and you are met
18 with racism, discrimination, lack of -- folks wanting you
19 to be there and then misunderstanding where to place you
20 as an individual, how that leads to you being mistrusting
21 -- mistrust between individuals, service providers, law
22 authority individuals, but also pushes you to feel like
23 you don't belong. Next slide, please.

24 So, a part of the reason I'm here is to
25 talk about sexual exploitation and the definitions that

1 are used. And, I find it very difficult to have this
2 conversation on sexual exploitation and human trafficking
3 without actually talking about how the state has played an
4 active role in trafficking Indigenous people and
5 normalizing those processes through colonial practices,
6 but also through the legacy of colonialism. So, it's
7 really important that in order for us to get to
8 understanding what this is, we need to encapsulate how the
9 state has participated in normalizing processes of
10 violence. Next slide, please.

11 So, these are the two definitions that tend
12 to be ascribed to when we talk about human trafficking and
13 sexual exploitation as a form of human trafficking. I'll
14 just quickly read them off, verbatim off of the slide.

15 And so, human trafficking involves the
16 recruitment, transportation, harbouring and/or exercising
17 control, direction of over-influence, the movement of a
18 person in order to exploit the person through sex, labour,
19 domestic servitude and/or organ removal and harvest. And,
20 this definition is taken from the Ottawa Coalition to End
21 Human Trafficking.

22 It's often characterized as a modern form
23 of slavery by Public Safety. And, as an extension of that
24 sexual exploitation, any actual or attempted abuse of a
25 position of vulnerability -- I can't actually read the

1 rest of it, because it's blurred on my screen, but I'm
2 hoping folks can see that. I'll just -- differential
3 power or trust of sexual purposes including, but not
4 limited to, profiting monetarily, socially or potentially
5 from the sexual exploitation of others.

6 When I work with individuals on the ground
7 and I explain these definitions, it's very difficult for
8 Inuit to see how they are being exploited or that they are
9 victims of trafficking, and thus for not responsible to be
10 blamed for their -- the exploitation and violence they
11 experience. And, for me, the reason why they're not able
12 to make sense of those experiences is because it does not
13 show how their experiences have been normalized over time
14 and, therefore, their understanding of not considering
15 themselves a victim of violence, specifically sexual
16 exploitation, cannot be recognized because of that
17 normalization process.

18 Next slide, please. So, something that we
19 actively do as a part of our program is that we try to
20 make connections of Inuit history and try to pinpoint
21 different examples and experiences of exploitation to show
22 how these -- this form of violence has been normalized
23 over time. So, for the sake of time, I will give two
24 examples of how that has happened over the trajectory of
25 Inuit history to show how the state has actively engaged

1 in trafficking in the forms of transporting, exploiting,
2 forced relocation, harbouring, grooming and deception of
3 Inuit.

4 So, the first example is forced relocation
5 that happened between 1955 and 1965 where Inuit were
6 forced to relocate to the High Arctic. And, as a part of
7 this forced relocation, they were promised freedom to
8 leave and return home after two years and support from the
9 government. However, the forced relocation of Inuit from
10 Northern Québec to what is now considered Iqaluit,
11 Resolute Bay and Grise Fiord resulted in the government in
12 neglecting those who were relocated to these communities,
13 families being separated and further experiences of
14 illness and death as a result of lack of support. So,
15 that's one example.

16 The second example is the dog slaughters,
17 and I'm not too sure if folks are familiar with
18 traditional Inuit society, but dogs -- dog teams were used
19 for the most basic resource of just hunting and also
20 helping hunters find their way home. And, I'm sure there
21 is much more to that, but that's what I'm going to share
22 in terms of the purpose of dog teams.

23 So, in 1950 and -- to 1970, the -- it was a
24 colonial strategy that was put in place by the government,
25 and it was executed by the RCMP. And, essentially, the

1 goal of this strategy was to force Inuit to give up their
2 traditional lifestyle of land-based hunting and move
3 towards Western styles of permanent settlement. So,
4 communities had trading posts set up where the RCMP would
5 trade different kinds of material.

6 So, during that period of about 20 years,
7 thousands of dog teams were killed. And, as a result,
8 communities were left to rely on store-bought foods, and
9 significant loss and self-sufficiency was an immediate
10 response to the killing of the dogs.

11 Next slide, please. So, again, if you
12 think back to that definition, I said human trafficking is
13 a form of modern day slavery? This is artwork that was
14 taken from Napachie Pootoogook, who was the mother of
15 Annie Pootoogook, who talked about, you know, the
16 experiences of colonialism and violence within their
17 community through using art. I find this particular image
18 very telling. It was posted online as a part of a
19 gallery, where you see trading women for supplies.

20 So, essentially, the killing of the dogs
21 led to having to be -- having communities rely on forcibly
22 trading individuals as a means of combatting poverty;
23 right? And, if that is not a good enough example of
24 showing how structural violence through colonial processes
25 have normalized violence and the moving and using of

1 women's bodies as property and as something that is -- as
2 property and something that can be used as a means of
3 dealing with the every day struggles that individuals
4 experience on the ground, then I'm not too sure what else
5 to turn to, because that is a very telling image, at least
6 for me, and it has been a key way of us having that
7 conversation with community members around how trafficking
8 has been normalized over time and the exploitation of
9 women's bodies, specifically within the Inuit community.

10 Next slide, please. So, very quickly on
11 this topic, making the connection. So, it's really
12 important that when we're having conversations around
13 sexual exploitation and human trafficking -- and this is a
14 recommendation for folks that are doing this work on an
15 every day basis -- that we change the definition to include
16 those colonial practices that have normalized violence
17 within these communities. I can't express how important
18 that is for Indigenous women, specifically Inuit in this
19 context, to understand that they are a part of that
20 conversation. Because, as it stands, Inuit women, within
21 literature around human trafficking and sexual
22 exploitation, are invisible.

23 There are less than a handful of articles,
24 research, reports, resources that speak about sexual
25 exploitation that are specific to Inuit, and that is not

1 something that just is. That is a result of the lack of
2 being able to make the connections and to see that they
3 are victims of what is, Public Safety calls, a ghost
4 crime: something that is very difficult to report,
5 something that is difficult to identify. When the reality
6 is, is that the way in which definitions and languages
7 used around human trafficking, it actively excludes
8 Indigenous women from being able to be included in that
9 narrative and seen as victims of this crime.

10 Something else that we really need to look
11 at is that human trafficking and sexual exploitation is a
12 complex issue, and it requires an interdisciplinary
13 understanding of how to address it. It's not something as
14 simple as, we need to stop child sexual abuse in order to
15 stop human trafficking. Because the reality is not
16 everyone that is a sex trade worker or someone that has
17 been trafficked is someone who has experienced sexual
18 abuse as a child.

19 But, rather, there are a lot of different
20 things that are at play. There is lack of housing, there
21 is lack -- there is poverty; right? Poverty is a
22 forerunner for vulnerability. There is racism,
23 discrimination and stereotypical representations of
24 Indigenous women that constantly are at play when we think
25 about who is seen as a victim and deserving of help versus

1 who isn't. There is the constant exclusion of women in
2 leadership roles and in decision-making positions when it
3 comes to the health and well-being of Indigenous women;
4 right?

5 Other items that are also at play is that
6 there's a lack of understanding in cultural competency
7 from people in positions of power to ensure that when they
8 are dealing with victims and survivors of sex trafficking,
9 that they are doing this in a meaningful, and good, and
10 harm-reduction ways; right? So, there are a lot of things
11 that are at play when it comes to making those connections
12 and addressing sexual exploitation.

13 When it comes to individuals resettling to
14 the South, one of the number of things that I often talk
15 about is that you can leave an abusive relationship, and
16 that is good, right, but, also, you have to look at how
17 violence is rearticulated through geography as well. And,
18 I say this because of past research that I have done in
19 other communities where -- and if you look at poverty by
20 postal code.

21 Within Ottawa, Vanier tends to be one of
22 the hubs where a lot of Inuit live. It also tends to be
23 the number one spot that has the highest rates of sexual
24 assault within the province. It also happens to be a place
25 where surveillance and policing happens constantly. Our

1 first witness spoke about police coming around and not
2 being there to be of support, but rather telling you to go
3 home or telling -- or surveillancing [sic] you and asking
4 you why are you out on the street. So in those veins, you
5 can see how violence is re-articulated through where --
6 geographically where Indigenous communities and racialised
7 communities are resettled as well. And so that's also
8 something we need to consider.

9 So, yes, we can do poverty reduction. Yes,
10 we can bring awareness to sexual exploitation and support
11 navigation of systems and teach cultural competency, but
12 we also have to look at how the state intentionally does
13 not invest in communities, over polices, over
14 surveillances, and creates violence geographically for
15 those individuals as well.

16 Next slide, please. So this is where I get
17 to talk about the lovely program that I am able to oversee
18 and talk about some of the very proud moments, but also of
19 the hard work that we still have to do and others have to
20 participate in.

21 So, how do we disrupt processes of sexual
22 exploitation and human trafficking, beyond what I've kind
23 of shared? It's really important that we have a couple
24 different frameworks at play. One, harm reduction and
25 trauma informed work. And I say this because if you're

1 not familiar with the area of human trafficking, there are
2 two competing perspectives. One, which is there are folks
3 that do harm reduction works that understands that the
4 state participates actively in creating vulnerability of
5 individuals and forcing individuals into sex work; and
6 then there's also the other perspective, which is
7 abolitionist, which means you should not -- once you exit,
8 you should not engage in this -- in sex work anymore or
9 human traffic anymore and everyone is a victim. And so
10 these two different competing perspectives impact
11 community in very different ways.

12 The one way I see that it impacts
13 communities it takes away resiliency and agency. And I
14 find that it's really important that if individuals are
15 coming in to access services to decrease their
16 vulnerability that you meet them where they're at and take
17 their direction in terms of how they do work.

18 So the approach that we use in our
19 workplace is harm reduction and allowing for self-directed
20 or client-centred approaches where the client directs us
21 to the supports they need and when they need them and how
22 they need them.

23 And for a lot of folks, depending on the
24 funding restrictions that you have, that might be very
25 complicated and very difficult to achieve, but we strongly

1 believe that there is no such thing as a one size fits all
2 model for supporting individuals engaged in survival sex
3 work and/or who are victims of trafficking.

4 So as a part of the work that we do, we
5 have two dedicated outreach workers. We have a youth and
6 transition worker who focuses on individuals that are in
7 foster care. We have a dedicated counsellor, Elder, admin
8 support, and myself, as well as an anti-human trafficking
9 coordinator.

10 As a team of eight people we have a
11 significant amount of work. In our first year we had a
12 caseload of 25 individuals, which is not likely when you
13 have a program that's starting up for the first year.
14 There's a lot of trust building and relationship building
15 that has to happen. Within our first six months we had 25
16 dedicated primary clients that we had to support and
17 service on the ground, which speaks to the need for Inuit-
18 specific services.

19 Some other ways that we're disrupting --
20 slide please -- processes on the ground is bringing
21 awareness to the connection between colonialism,
22 structural violence and on the ground human trafficking
23 experiences as I've been speaking about today, doing
24 policy development and program development with other key
25 Inuit-specific organizations.

1 And just to name a few, we are currently
2 working with the National Inuit Art Foundation, Pauktuutit
3 Inuit Women Association, Ottawa Inuit Children's Centre, I
4 believe it's the Southern Quebec Inuit Association,
5 Toronto Inuit Association and CAMH's Indigenous team in
6 terms of creating a community-based response to -- an
7 Inuit-specific community-based response to human
8 trafficking, because current models that are out there
9 don't include Inuit and/or are not reflective of the
10 different forms of trafficking that happens on the ground.

11 So on the ground what we're seeing, beyond
12 sexual exploitation of primarily youth who are women and
13 identify as a part of the 2LGBT community, is we also see
14 that Inuit men who are -- who have substance abuse issues
15 are also trafficked for their carvings within the city,
16 primarily by individuals coming from Montreal and/or
17 outside of Ottawa. And we also have youth that are in
18 care who are actively sought out by traffickers because
19 they know that there's a constant flow of individuals that
20 are coming to the south and being relocated for foster
21 care that are being trafficked. So those are our three
22 priority areas of working with individuals.

23 Next slide, please. I'm going to show you
24 a couple, I think there's maybe two or three images, of
25 these graphic illustrations that were done as a part of a

1 community consultation. So we asked the question of what
2 is trafficking and what does community understand it to
3 be. What are some of the barriers that they find in terms
4 of exiting trafficking situations? What are some of the
5 solutions? And what do they think is working within
6 community?

7 So we did four of these, one in
8 Kitchener/Waterloo, one in Toronto, one in Ottawa and one
9 with our partners. And then as a part of that, these
10 conversations, it was overwhelming how much of the
11 information was not only comparable between the four
12 consultations, but how much of it required us to really
13 think about how to involve Inuit survivors of sexual
14 exploitation in ways that are meaningful, in ways that are
15 sustainable, and in ways that allow for them to not just
16 tell their stories, but to be active members of creating
17 supports for other survivors.

18 And so, as you can see, going through the
19 images, there was lots of different conversations, but
20 some of the number one barriers was, as it's been
21 mentioned, shame, lack of support, intergenerational
22 trauma, the difference between navigating the north and
23 the south and how that creates vulnerability, but also
24 that there was a lack of resources and support dedicating
25 to supporting survivors.

1 And some of the solutions that were brought
2 forward was there needs to be more spaces and opportunity
3 for community to have these conversations, to create
4 programming, but also to spread the word to individuals
5 that are in the north before they come to the south and to
6 individuals in the south before they move to different
7 cities.

8 Next slide, please. Oh, you can stay here.
9 This was from the partnership committee and these are
10 individuals who are all actively trying to do anti-human
11 trafficking work and work on supporting, you know, ending
12 violence towards women. And these are some of the major
13 issues that folks are seeing, which are, again, gaps in
14 different approaches; Inuit-specific approaches to
15 supporting; lack of resources in terms of training;
16 wanting to have a more comprehensive approach, so more
17 services beyond the 9:00 to 5:00, which is typical of
18 service provision; looking for Inuit-specific shelters and
19 treatment centres, which would be really important; and
20 also, dedicated funding and funding that is not
21 competitive.

22 So, the current structure of accessing
23 funding for Indigenous folks is one that not only creates
24 competition between organizations, but it's reinforced in
25 terms of how we can collaborate; right?

1 And so in just echoing some of the wants is
2 that we want to be able to do collaborative work, but we
3 don't want to have to compete and undermine other people's
4 work, because all work is important in terms of creating a
5 solution towards these issues.

6 Next slide. Next slide. So some of the
7 recommendations which, again, I can't really see based on
8 what's up there, but I wanted to talk about what is
9 working based on what I've heard and what -- where there
10 is still room for growth.

11 So what is working, creating safe spaces
12 for Inuit women to talk about -- or just Inuit more
13 generally to talk about ways in which trafficking has
14 impacted their life and solutions towards that.

15 Frontline programming is really important
16 in terms of accessing information and resources and that
17 is something that should definitely continue.

18 Advocacy for Inuit and First Peoples from
19 different communities, specifically advocacy that takes an
20 anti-racism and anti-sexism approach in terms of how we go
21 about addressing these issues.

22 Carving out space for survivors to take on
23 leadership roles. One of the common things that I see in
24 anti-human trafficking programming and sexual exploitation
25 programming is that survivors are only given the

1 opportunity to learn how to advocate by using their voice
2 and telling their story. And I think that we're doing a
3 huge disservice to those individuals and to community if
4 that is all we're doing in terms of carving space.

5 There needs to be leadership roles. There
6 needs to be sustainable employment. There needs to be
7 better opportunities to participate in the socio-economic
8 systems that are around them than just as a survivor with
9 a story. Working with other Inuit-specific partners, and
10 First Nations, and Métis organizations to strengthening
11 the voice around Indigenous sexual exploitation is really
12 important.

13 Education on human trafficking in ways that
14 make sense to Inuit. Education around human trafficking,
15 not only on the causes and the impacts, but also how to
16 prevent it. Learning simple things like catcalling and
17 what that looks like, and how to not be sexualized when
18 you're walking down the street, which is a common
19 experience for folks. Again, in Vanier, walking down
20 Montreal Road, for a car to pull up and try to pick you up
21 and that be a safety concern, knowing how to address those
22 issues or those concerns is really important.

23 The other item I wanted to mention is that
24 a lot of focus is spent on Indigenous women, but we also
25 have to think about teaching men how to be allies to these

1 women. And, if we're not doing that, then we're not --
2 again, we're doing a disservice to Indigenous women.
3 We're empowering them, we're supporting them, we're
4 providing information, but we're not empowering men to
5 understand what their purpose is or their role is in
6 combating violence. So, I think that's also an important
7 item that I don't think is listed here, but was mentioned
8 several times in these consultations.

9 So, where is there opportunity to grow and
10 to do more? I think that in mainstream conversations on
11 human trafficking, and this is purely based on my recent
12 participation at the Public Safety Human Trafficking
13 Summit in Toronto, which happened at the end of September,
14 they are currently talking about conversations on how
15 cryptocurrency is being used to traffic women and girls,
16 community members, while Indigenous folks, we are all the
17 way back here talking about what is human trafficking,
18 which tells me that there are communities that are very
19 fortunate to be two-steps behind traffickers who are
20 really good outreach workers in terms of recruitment and
21 getting people involved, and that there's lots of work to
22 do.

23 So, opportunities of where we can
24 definitely expand in the work that we do is to talk about
25 how cryptocurrency is being used, because Facebook is a

1 prime way in which Inuit communicate. That is where a lot
2 of the trafficking and soliciting and grooming of
3 Indigenous folks is happening, but those conversations are
4 not constantly being had.

5 Some other items is cultural competencies
6 for powers of authority. One of the things that I've
7 recognized constantly through conversations with police,
8 specifically human-trafficking units, is that when a
9 victim goes in front of the judge, the judge may or may
10 not have an understanding of what human trafficking is.
11 And, when a victim has prior charges, whether it be, you
12 know, petty theft, you know, failure to comply with law
13 authority because of mistrust or whatever it may be, that
14 is used against them versus seeing them as a victim of
15 structural violence. And so, there is a need to push for
16 judges who are taking on human trafficking cases,
17 specifically for Indigenous folks, to really understand
18 what that is and the connection between history and
19 contemporary issues.

20 So, my recommendation for that is perhaps
21 moving human trafficking hearings around for victims to
22 Indigenous courts and/or using Gladue processes which
23 allows for a narrative to back someone's experience with
24 their testimony as a form of providing information.

25 Some other items and ways in which we can

1 look to creating solutions is, again, focusing on poverty
2 reduction and increasing housing. One of the number one
3 things that we work on within the first three months of
4 working with victims on the ground is providing
5 sustainable housing through priority housing channels to
6 ensure that they are not depending on someone else and
7 putting themselves at risk of being trafficked again.

8 Mental health and addiction supports is
9 really important because drugs and alcohol is used as a
10 mechanism of keeping individuals within trafficking
11 situations, and it makes it very difficult when you have a
12 dependency to look at other opportunities for yourself, or
13 to exit a situation.

14 Programming that will help men heal and
15 become better allies towards women and to LGBT communities
16 is really important. The human trafficking or sex
17 exploitation of women is a very lucrative business. And
18 so, one of the things that is often not talked about is
19 how are we creating other opportunities for women to exit
20 those lucrative and very dangerous streams of work in
21 meaningful ways? And, a part of that again, and I can't
22 stress this enough, is to create and carve out meaningful
23 employment, purposeful employment and sustainable
24 employment for these individuals.

25 The last one I'll talk about which may or

1 may not be applicable depending on the community you're
2 working with, but for Inuit, it tends to be, is making
3 sure that awareness and information is being utilized and
4 provided through airlines and different forms of
5 transportation between urban spaces, so that folks know
6 that if they are being provided with a plane ticket to
7 come to the south and being promised employment that, that
8 may or may not be true, but it may also be a form of being
9 groomed and then being trafficked. And, it's better to
10 know that information before you get off a plane and where
11 you can access information than when it's too late. And,
12 unfortunately, many of the individuals that we have seen,
13 it's been after the fact that they've been trafficked, and
14 they've been groomed that we are providing crisis support.

15 That's it for now, and I'm hoping there's
16 lots of questions, but thank you very much, and I
17 apologize if I was super fast, but I was very nervous.

18 **MS. VIOLET FORD:** Thank you.

19 **MS. MEREDITH PORTER:** Thank you. Chief
20 Commissioner and Commissioners, I'm going to once again
21 request your direction with respect to taking another
22 brief break, maybe 10 minutes, so we can, again, rearrange
23 the seating here at the table for our next witness? And,
24 also, to give the parties with standing an opportunity to
25 return their numbers to Commission counsel who will be

1 located out the doors in the foyer in order to begin the
2 verification process for cross-examination following the
3 direct examination of the witnesses. So, if we could take
4 10 minutes?

5 **CHIEF COMMISSIONER MARION BULLER:** Before
6 we do that, Ms. Ford, do you want to do the exhibits?

7 **MS. VIOLET FORD:** Yes.

8 **MS. MEREDITH PORTER:** Oh, my apologies.

9 **MS. VIOLET FORD:** Thank you. Yes, the
10 first exhibit is the Jennisha Wilson C.V., and it's under
11 Schedule B or Tab B in your binders.

12 **CHIEF COMMISSIONER MARION BULLER:** Okay.
13 Ms. Wilson's C.V. is Exhibit 44.

14 **--- Exhibit 44:**

15 CV of Jennisha Wilson (five pages)
16 Witness: Jennisha Wilson, Manager,
17 Alluriarniq Department: Sex Work,
18 Exiting the Sex Trade and Anti-Human
19 Trafficking Projects, Tungasuvvingat
20 Inuit
21 Counsel: Violet Ford, Commission
22 Counsel

23 **MS. VIOLET FORD:** Forty-four. The second
24 one is Sexual Exploitation and Trafficking of Aboriginal
25 Women and Girls under Tab C.

1 **CHIEF COMMISSIONER MARION BULLER:** Yes.
2 Sexual Exploitation and Trafficking of Aboriginal Women
3 and Girls, Literature Review and Key Information
4 Interviews - Final Report by NWAC, October 2014, is
5 Exhibit 45.

6 **--- Exhibit 45:**

7 Sexual Exploitation and Trafficking of
8 Aboriginal Women and Girls: Literature
9 Review and Key Informant Interviews -
10 Final Report, prepared by The Native
11 Women's Association of Canada for the
12 Canadian Women's Foundation Task Force
13 on Trafficking of Women and Girls in
14 Canada, October 2014 (90 pages)
15 Witness: Jennisha Wilson, Manager,
16 Alluriarniq Department: Sex Work,
17 Exiting the Sex Trade and Anti-Human
18 Trafficking Projects, Tungasuvvingat
19 Inuit
20 Counsel: Violet Ford, Commission
21 Counsel

22 **MS. VIOLET FORD:** And, the third one is Sex
23 Trafficking of Indigenous Women in Ontario.

24 **CHIEF COMMISSIONER MARION BULLER:** Yes.
25 Sex Trafficking of Indigenous Women in Ontario by the

1 Ontario Native Women's Association, February 2016, is
2 Exhibit 46, please.

3 **--- Exhibit 46:**

4 "Sex Trafficking of Indigenous Women
5 in Ontario," Ontario Native Women's
6 Association, February 2016 (21 pages)
7 Witness: Jennisha Wilson, Manager,
8 Alluriarniq Department: Sex Work,
9 Exiting the Sex Trade and Anti-Human
10 Trafficking Projects, Tungasuvvingat
11 Inuit
12 Counsel: Violet Ford, Commission
13 Counsel

14 **MS. VIOLET FORD:** And then the next one is
15 Inuit Vulnerabilities to Human Trafficking, 2013.

16 **CHIEF COMMISSIONER MARION BULLER:** Yes.
17 Inuit Vulnerabilities to Human Trafficking, July 2013 by
18 Pauktuutit is Exhibit 47.

19 **--- Exhibit 47:**

20 "Inuit Vulnerabilities to Human
21 Trafficking, prepared by Pauktuutit
22 Inuit Women of Canada, July 2013 (28
23 pages)
24 Witness: Jennisha Wilson, Manager,
25 Alluriarniq Department: Sex Work,

1 Exiting the Sex Trade and Anti-Human
2 Trafficking Projects, Tungasuvvingat
3 Inuit
4 Counsel: Violet Ford, Commission
5 Counsel

6 **MS. VIOLET FORD:** And then the next one is
7 the National Urban Inuit Community Dialogue, 2016.

8 **CHIEF COMMISSIONER MARION BULLER:** Yes.
9 The National Urban Inuit Community Dialogue - Supporting
10 Local Champions, an Urban Inuit Strategy, March 31st, 2016
11 is Exhibit 48.

12 **--- Exhibit 48:**

13 "National Urban Inuit Community
14 Dialogue: Supporting Local Champions
15 - An Urban Inuit Strategy,"
16 Tungasuvvingat Inuit, March 31 2016
17 (37 pages)
18 Witness: Jennisha Wilson, Manager,
19 Alluriarniq Department: Sex Work,
20 Exiting the Sex Trade and Anti-Human
21 Trafficking Projects, Tungasuvvingat
22 Inuit
23 Counsel: Violet Ford, Commission
24 Counsel

25 **MS. VIOLET FORD:** And, the last one is

1 human trafficking on the frontline report.

2 **CHIEF COMMISSIONER MARION BULLER:** Yes.

3 **MS. VIOLET FORD:** Concepts, perspectives
4 and responses.

5 **CHIEF COMMISSIONER MARION BULLER:** Human
6 Trafficking on the Frontline - Concepts, Perspectives and
7 Responses, final report, June 11 - 15, 2018 by the Ottawa
8 Coalition to End Human Trafficking is Exhibit 49.

9

10 **--- Exhibit 49:**

11 "Human Trafficking on the Front Line:
12 Concepts, Perspectives & Responses -
13 Final Report, June 11-15, 2018,"
14 Ottawa Coalition to End Human
15 Trafficking (46 pages)
16 Witness: Jennisha Wilson, Manager,
17 Alluriarniq Department: Sex Work,
18 Exiting the Sex Trade and Anti-Human
19 Trafficking Projects, Tungasuvvingat
20 Inuit
21 Counsel: Violet Ford, Commission
22 Counsel

23 **MS. VIOLET FORD:** Thank you.

24 **CHIEF COMMISSIONER MARION BULLER:** That's

25 it?

1 MS. VIOLET FORD: Yes.

2 CHIEF COMMISSIONER MARION BULLER: Okay.

3 We'll take a 10-minute break, please.

4 MS. MEREDITH PORTER: Okay, thank you.

5 CHIEF COMMISSIONER MARION BULLER: Oh, and
6 I'm sorry, the PowerPoint presented by Ms. Wilson will be
7 Exhibit 50.

8 **--- Exhibit 50:**

9 Powerpoint presentation: "Urban Inuit-
10 Specific Perspective on Sexual
11 Exploitation & Human Trafficking" (22
12 slides)

13 Witness: Jennisha Wilson, Manager,
14 Alluriarniq Department: Sex Work,
15 Exiting the Sex Trade and Anti-Human
16 Trafficking Projects, Tungasuvvingat
17 Inuit (Ottawa)

18 Counsel: Violet Ford, Commission
19 Counsel

20 --- Upon recessing at 10:33 a.m.

21 --- Upon resuming at 10:54

22 **--- EXAMINATION IN-CHIEF BY MS. MEREDITH PORTER:**

23 MS. MEREDITH PORTER: Thank you. Chief
24 Commissioner and Commissioners, we have our third witness
25 on this second panel, Dr. Pertice Moffitt. And, as

1 previously mentioned, Dr. Moffitt has travelled all the
2 way from Yellowknife in the Northwest Territories to give
3 testimony today.

4 Dr. Moffitt has also asked for the
5 opportunity to introduce herself in a more traditional way
6 prior to her qualification. So, I'll ask Dr. Moffitt if
7 you'd like to introduce yourself.

8 **DR. PERTICE MOFFITT:** Okay. Thank you very
9 much. Thank you and masi chok for inviting me to this
10 really important meeting. I'm honoured to be able to
11 speak here on the ancestral lands of the Beothuk and also
12 respect the many cultures of the Mi'kmaw, Innu, Inuit and
13 south Inuit of this province.

14 I wanted to introduce myself in the way
15 that I've been taught from the Indigenous elders in our
16 territory. My name is Pertice Moffitt, formerly Pertice
17 Tracy. My mother was Clara McCartney, and my father was
18 Gus Tracy. Both the McCartney and the Tracy family lived
19 for generations in Southwestern New Brunswick, having
20 immigrated to Canada from Europe. My grandparents were
21 Frank and Helen McCartney, and Percy and Lydia Tracy. I
22 have two grown children, Jordan and Morgan, who were both
23 raised and attended school on the homelands of Chief
24 Drygeese of the Yellowknives Dene. I am a settler to the
25 north, plan to stay in the north, and wish to humbly

1 submit my talk from what I have learned from local people
2 and the process of conducting research while in the north
3 and living and working as an ally to Indigenous people.
4 Thank you.

5 **MS. MEREDITH PORTER:** Thank you. And, I
6 have here at Tab A in the binder of documents, I believe,
7 a copy of your CV. Can you just have a look at this
8 document and confirm on the record that this is in fact an
9 up-to-date CV?

10 **DR. PERTICE MOFFITT:** Yes, it is.

11 **MS. MEREDITH PORTER:** Okay. And, I'm going
12 to ask you, Dr. Moffitt, if you could just highlight some
13 of the elements of your education, the training, and the
14 research, and your current responsibilities in your
15 present position that you carry on a day-to-day basis.

16 **DR. PERTICE MOFFITT:** Okay. First of all,
17 I have been a registered nurse for 45 years, now I'm
18 telling my age a little bit. I was a baby when I started
19 nursing school, which was a diploma program in New
20 Brunswick, and I graduated from that program in 1973.
21 Then, I went on -- I left New Brunswick. I worked for a
22 year there, and then I left New Brunswick, went to British
23 Columbia. My background in nursing was mostly maternal
24 child. And, while I was in British Columbia, I attended
25 the University of British Columbia and received an honours

1 bachelor of science in nursing.

2 For many years, then, I continued to work
3 in the lower mainland, and then I went to -- travelled to
4 Inuvik. And, I worked for four years in Inuvik as the
5 Director of Nursing. While in the north, I went back to
6 the south. I had a baby in the north, and then went back
7 to the south and taught nursing on Vancouver Island, and
8 then returned to the north in 1990. During my stay there
9 in 1994, a nursing program began, and it was a recruitment
10 and retention effort to get more Indigenous people into
11 nursing in the north. And so, in 1997, I decided that I
12 needed a master's in nursing.

13 I went back to New Brunswick, took my
14 children with me, and spent a year in New Brunswick, and
15 then I went back to the north where I collected data in a
16 -- I did a method called "Fourth Generation Evaluation"
17 with groups of patients, groups of faculty, and then
18 married up what they told me. And, we were looking at the
19 question, how do you integrate culture in practice? And,
20 what happened, we entitled it "Spirit of the Drum," and it
21 was all about how we interact with people.

22 Local people who were patients told me that
23 sometimes when they're at the health centre in a remote
24 community, the nurse didn't even smile at them. So, they
25 said, why doesn't the nurse just come over and have tea

1 and visit? So, very, very much personal ways of being
2 came out of that research. I realized later that I needed
3 to have a PhD to continue with work and learn more, and so
4 I attended the University of Calgary. They offered a
5 distance program, as well, so I didn't have to be there
6 full-time. I went to Behchoko, which is an Indigenous
7 community 104 kilometres down the road from Yellowknife,
8 and worked with pregnant women. And, I was investigating
9 health -- their health promotion activities, their health
10 practices, and went with them, interviewed them during
11 their three trimesters of pregnancy, and then attended the
12 births of their babies as well. This was very insightful
13 research.

14 In 2011, thinking -- I must have been on an
15 education kick. I said, "I think I need more research."
16 And, I said this at a gathering with Dr. Nancy Edwards,
17 where she was asking me to identify the needs of the NWT
18 in terms of research. I said, "I think I need a post
19 doc." And, she said, "No, I don't think you need a post
20 doc. Why don't you come though and do an internship in
21 South Africa?" So, I did that for the summer of 2011, as
22 well, which gave me some exposure to global issues and
23 considered that in light of our own people.

24 I think one honour that I just want to
25 mention that I received was the Wise Women Award from the

1 Status of Women. That was a very meaningful award for me,
2 given to me by local people and -- for my contributions in
3 the north. I think -- and I think that's as far as I'll
4 go.

5 **MS. MEREDITH PORTER:** Okay. Thank you very
6 much. And, now, it brings us up to the present.

7 **DR. PERTICE MOFFITT:** Okay.

8 **MS. MEREDITH PORTER:** So, you're now
9 located at the Aurora Research Institute in the Northwest
10 Territories, and you -- I know you carry some other
11 responsibilities as well. Do you want to speak very
12 briefly about presently what you're engaged in?

13 **DR. PERTICE MOFFITT:** Okay. So, you know
14 there are many opportunities in the north. A lot of
15 people want to collaborate with northerners. And, so we
16 get involved in a lot of things. And so, I did for five
17 years work with Dr. Mary Hampton who was the principal
18 investigator of research on intimate partner violence, and
19 I was the academic lead for the Northwest Territories.
20 This was a SSHRC funded research project that lasted from
21 2011 to 2016 with an additional year in 2017. This -- the
22 research itself was with frontline workers. And, one of
23 the things that we'll probably talk about is that we have
24 not had enough conversations with women, but this was a
25 follow-up study to the healing journey from the prairie

1 provinces that we were invited into.

2 Most recently, I've been doing an
3 evaluation of the emergency protection orders, and I have
4 listened to the stories, narratives from 19 applicants of
5 EPOs and have a much greater understanding about what
6 concerns Indigenous women that takes them to getting an
7 emergency protection order.

8 I am part of the research investigating
9 domestic homicide with Peter Jaffe and Myrna Dawson. And,
10 again, I'm a co-investigator in that study.

11 We have a very sad statistic that during
12 the time of investigating intimate partner violence in the
13 NWT, we had a domestic homicide every year. And, often
14 accompanied with that homicide was suicide. So, I think
15 that's probably enough.

16 **MS. MEREDITH PORTER:** Thank you very much.
17 So, I would like, Chief Commissioner and Commissioners, to
18 have Dr. Moffitt qualified as an expert in the areas of
19 Indigenous women's health in -- health issues in the North
20 and intimate partner violence.

21 **CHIEF COMMISSIONER MARION BULLER:**
22 Certainly. First of all, we'll mark the CV as Exhibit 51.

23 **--- Exhibit 51:**

24 CV of Dr. Pertice Moffitt (26 pages)

25 Witness: Dr. Pertice Moffitt, Manager,

1 Health Research Programs, North Slave
2 Research Centre/ Aurora Research
3 Institute (Yellowknife)
4 Counsel: Meredith Porter, Commission
5 Counsel

6 **CHIEF COMMISSIONER MARION BULLER:** And,
7 certainly, Dr. Moffitt is eminently well-qualified to give
8 opinion evidence in the areas of Indigenous women's health
9 issues in the North and intimate partner violence.

10 **MS. MEREDITH PORTER:** Thank you. And,
11 prior to going further with any additional testimony, I'm
12 going to ask the Registrar at this time to affirm the
13 witness.

14 **MR. BRYAN ZANDBERG:** Good morning, Dr.
15 Moffitt. Do you solemnly affirm to tell the truth, the
16 whole truth and nothing but the truth?

17 **DR. PERTICE MOFFITT:** I do.

18 **DR. PERTICE MOFFITT, Affirmed**

19 **MR. BRYAN ZANDBERG:** Thank you.

20 **DR. PERTICE MOFFITT:** Thank you.

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

22 **MS. MEREDITH PORTER:** Dr. Moffitt, I'm
23 wondering if you could, prior to speaking about some of
24 your knowledge with respect to the North and some of the
25 issues that you research and address in some of your

1 literature, if you could just describe very briefly for
2 the Commissioners, when we talk about intimate partner
3 violence, what exactly are we speaking about?

4 **DR. PERTICE MOFFITT:** Okay. Intimate
5 partner violence is physical violence, emotional violence,
6 stalking, sexual violence. It's based on power and
7 coercion, and it's very prevalent in the territory. Also,
8 stalking.

9 **MS. MEREDITH PORTER:** Okay, thank you.
10 And, I'm going to draw from some of the documents that you
11 have included in your binder of exhibits. It's -- I'm
12 referring specifically to a document entitled, "Intimate
13 Partner Violence in the Canadian Territorial North:
14 Perspectives from a literature review and a media watch".
15 And, on that first page of the document in the first
16 paragraph, I'm going to read briefly a sentence, and I'm
17 going to ask you to speak a little bit about what this
18 means in terms of the research that you do. Kind of set a
19 context for our discussion.

20 "The effects of intimate partner violence,
21 or IPV, are discussed publicly by local activists in the
22 hope of obliterating its occurrence and, yet, whispered
23 behind closed doors in some remote locations where
24 relationships are intimately bound. The variables that
25 increase the incidents of IPV are intermingled with the

1 support or lack thereof, as well as the uniqueness of
2 Aboriginal and remote communities."

3 Can you speak a little bit about what that
4 -- those two phrases mean?

5 **DR. PERTICE MOFFITT:** Mm-hmm. I'm going
6 to, first of all, just tell people a little bit about the
7 Northwest Territories. Sometimes when we say you're from
8 Yellowknife, they'll say, "Oh, in the Yukon." So, just to
9 set the tone right -- so the Northwest Territories is
10 found above the Provinces of British Columbia, Alberta,
11 Saskatchewan. The population is approximately 42,000.
12 It's spread over 33 scattered communities. Twenty-five of
13 those communities have less than 1,000 people.

14 So, there are many, many people who live in
15 remote communities where they may have a nurse -- nurses
16 in a community health centre, one or two, and they may
17 have two RCMP. Otherwise -- and then they'll have a
18 grocery store and a couple few things like that, and it's
19 little dirt roads. Sometimes it's a fly-in community.
20 There are a few communities on the road, but they tend to
21 be the larger communities.

22 So, in terms of the whispering, the phrase
23 of whispering, there is a culture of violence and silence
24 in the North. And, I do believe for Indigenous women,
25 it's a protective, self-preservation thing that women are

1 not talking about what's going on. It's a reason why
2 there's a lot of unreported violence. There is a very
3 caring frontline worker, but it's -- really has a
4 revolving door. Nurses are short-term. They move in and
5 out of the communities. The RCMP are usually there for
6 two-year durations. So, just as you would begin to build
7 trust and get to know the local RCMP officer, he's ready
8 to move on and someone else comes in. This means that
9 people have to tell their story over and over again to
10 someone new if they're seeking history from them.

11 I'll just talk a little bit more.

12 **MS. MEREDITH PORTER:** Yes.

13 **DR. PERTICE MOFFITT:** I'm just -- I wanted
14 to read you some of the words of frontline workers and a
15 little bit from the findings on the culture of violence
16 and silence that's happening. In our analysis, this was
17 based on historical trauma, violence that is normalized,
18 gossip as a tool for silence, community retribution,
19 family and community values and self-preservation.

20 So, one participant described a remote
21 community of the NWT by saying, "I call it the community
22 of secrets. They really never talk about anything." And,
23 one participant talked about the normalization in this
24 way, "I think it's more normalized than I would like it to
25 be. Yes, I think with the heritage with residential

1 schools, and people suffering traumatic injury, and the
2 pain being handed down generationally, I think there has
3 been generations of people putting up with a lot and
4 acting out. And, I think that goes to the blaming I was
5 talking about before. If a woman gets hit and files a
6 police report, the people around her might be blaming her
7 because, as far as they're concerned, you can't do that.
8 You don't go calling the police. It's more normalized."
9 That was from a shelter worker.

10 In terms of the historical trauma,
11 participants all acknowledge that it was an issue arising
12 from historical trauma. And, one participant said, "I
13 really think that, in the North, it goes way beyond
14 partner violence. It's like a family kind of violence.
15 You know when we do sharing circles with women in
16 communities, the violence is just not from partners. It's
17 from uncles, brothers, community members. Like, the
18 violence comes from all sides. A lot of the stories of
19 violence with the women start when they're very small.
20 It's not just partner violence. It starts when they're
21 little. So, it could be a family member; it could be a
22 community member. The violence starts sometimes as early
23 as age two or three." That was from a community
24 development worker.

25 And, from an RCMP member who was an

1 Indigenous RCMP member, he said, "It's almost DNA
2 implanted through the generations. Right through the
3 alcohol abuse, the drug abuse, the residential school
4 process, we have lost generations of parenting skills.
5 And, I am an Aboriginal person. I have lived it. It's
6 been in my family. I have witnessed it. And, that's why
7 I'm a police officer today, because they were always at my
8 door helping my mother when she was abused. And, you know
9 what? I can honest to God say that it's almost like DNA
10 implanted in our people. I'm not saying all our people
11 but, you know what? As Aboriginal people, we suffer a
12 high volume of domestic violence. We can't hide the
13 numbers. You can't sit there and say, 'Well, you know,
14 we're spiritual.' Well, yes, but at the end of the day,
15 we suffer a high percentage of it in our families and
16 communities as a whole, and we suffer as a whole, as a
17 people, because of that, because that's not the
18 traditional way, where our people come from or the culture
19 and the protocols that are attached to our different
20 societies."

21 This was confirmed by another participant
22 talking about a person struggling to regulate their
23 emotions.

24 "I had a young guy come in who was actually quite a
25 violent young [fellow] [...] I was trying to do some

1 counselling and, for some reason, he connected with me.
2 He was saying how his father was incredibly abusive to
3 him. His father tried to choke him..."

4 I'm sorry. I should have actually said I
5 hope this doesn't trigger people, some of the stories. I
6 should have given you a warning of what was about to come.
7 "...and [...] of course he had been putting this onto his
8 wife, [who] was primarily emotional violence against his
9 wife and children. But he was saying he didn't
10 understand. He was saying, "I work out, I eat well."
11 [...] "I work hard. I try to [change] things. And still
12 inside I always feel anxious and revved up."

13 This was a story given to a community
14 health nurse.

15 I don't want to take too much time, but
16 I'll just move onto another theme within there, of
17 violence being normalised. And a victim service worker
18 said,
19 "I think the message that women are getting is this is
20 normalized; 'this is my life, at least it's not as bad as
21 my neighbours'. You know, this is the normalization of
22 violence. So I think it's a really lonely journey for
23 women...There's a lot of shame, you know. Victims feel
24 embarrassment and shame in having to get service providers
25 involved...So you've done nothing wrong, you don't deserve

1 the violence but you're being violated, and then we have
2 this understanding; it's so normalized that people don't
3 even feel like they deserve full services. It's kind of
4 like, you made your bed now lie in it, and this is the way
5 it is."

6 Gossip as a tool for science -- for
7 silence.

8 "Gossip within communities was noted [by most
9 participants] as a powerful tool that keeps women from
10 reaching out to family, friends or service providers.
11 They described how this can stay with a woman and her
12 children for years and that it continues to negatively
13 impact a woman by bringing shame and blame upon her for
14 having spoken out against her violent partner. Gossip, or
15 the threat of gossip, comes from her family, the partner's
16 family, friends or other community people. From this, she
17 might feel isolated in her experience and without options
18 to reach out for help."

19 "Participants also explained that women [...] feel
20 threatened [may feel threatened] by the possibilities of
21 gossip if local people are in frontline positions, such as
22 a community social worker."

23 Many of the people who are victim service
24 workers, social workers are from the community and are --
25 could be related to the victim. So another RCMP said

1 that,
2 "I'd say people do not want someone [who is in a frontline
3 position] from their own community because there's this
4 fear that it will be all over town...People just generally
5 feel better, I think, talking to someone not from their
6 own community."

7 There is community retribution in our small
8 communities where families will blame each other and
9 they'll experience backlash if they report on the
10 perpetrator from their family. So retribution includes
11 things like harassment, isolation, restricted access to
12 housing when there is very limited housing, or limited
13 employment opportunities within the community.

14 So it's not -- it's understandable why
15 victims use a lot of self-preservation in circumstances
16 like these in a community. Women remain silent in an
17 abusive relationship. They may be working from that
18 position. They might realize the lack of services that
19 are available in their community, which increases their
20 risk to successfully leave. In the NWT, in the winter, we
21 have more roads than in the summer. We have more ways out
22 because we have an ice road in the winter.

23 The severity of abuse experienced by women
24 and thought of leaving under violent threats might be
25 enough pressure to remain in the relationship. Women are

1 also managing within the experience of trauma, which might
2 diminish their ability to function or make decisions about
3 leaving. So there exists the possible impact of
4 historical trauma, which we've already said is there.

5 And a shelter worker said,
6 "From my perspective, it looks to me as though family
7 violence or IPV is still perceived largely as a private or
8 domestic matter and not a public concern, not an issue of
9 breaking the law in certain cases and types of violence.
10 I'd say that there is still a lot of stigma attached to
11 accessing services when a woman is experiencing violence.
12 I see women experiencing, not only [intimate partner
13 violence], but then also a lot of pressure from either the
14 partner's family or community members, just to kind of
15 keep quiet about what's going on. And [she's] [the
16 victim] seen as a trouble maker if she won't keep quiet.
17 I see women who resist [intimate partner violence] in the
18 whole spectrum of ways that women resist, from being
19 violent themselves, using verbal attacks, coping through
20 substance abuse, as often being very misunderstood and
21 being perceived by community members, including service
22 providers, as being equally as abusive as opposed to
23 resisting oppressing and trying to preserve their dignity.
24 I'd say that there's a lot of blaming victims of IPV which
25 I think can also contribute[s] to women staying silent."

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

2 Chief Commissioner and Commissioners, at
3 this time I'm going to request that the document found at
4 Tab B in the book of exhibits, *Intimate Partner Violence*
5 in the Canadian Territorial North, *Perspectives from a*
6 *Literature Review* and a *Media Watch* from the *International*
7 *Journal of Circumpolar Health* dated for 2013 be made an
8 exhibit.

9 **CHIEF COMMISSIONER MARION BULLER:** Yes, the
10 next exhibit, Exhibit 52 will be *Intimate Partner Violence*
11 in the Canadian Territorial North, *Perspectives from a*
12 *Literature Review* and a *Media Watch* by Dr. Moffitt et al,
13 *International Journal of Circumpolar Health*.

14 **--- EXHIBIT NO. 52:**

15 "Intimate Partner Violence in the
16 Canadian Territorial North:
17 Perspectives from a Literature Review
18 and a Media Watch," Moffitt, Fikowski,
19 Mauricio & Mackenzie, in *International*
20 *Journal of Circumpolar Health*, 72:1,
21 published online August 5, 2013 (eight
22 pages)
23 Witness: Dr. Pertice Moffitt, Manager,
24 Health Research Programs, North Slave
25 Research Centre/ Aurora Research

1 Institute (Yellowknife)
2 Counsel: Meredith Porter, Commission
3 Counsel

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

5 And now, Dr. Moffitt, I understand -- if we
6 could have up the map image on the screen -- that you have
7 some information with respect to the incidents of intimate
8 partner violence in the north. And in the map -- if we
9 could scroll down a little bit in terms of just so we see
10 the complete territory, could you explain what this map
11 depicts and sort of some of the nuances that perhaps
12 individuals and the Commissioners may not draw from the
13 map but actually can be found with respect to not only the
14 colouring, but also the markings that have been included
15 in the communities?

16 **DR. PERTICE MOFFITT:** The large team that
17 we had working on the project that was called Rural and
18 Northern Community Response to Intimate Partner Violence
19 consisted of -- with two geographers out of -- Dr. Joe
20 Pewawa (ph) and oh my goodness, forgetting his name -- two
21 geographers from the University of Saskatchewan, Paul
22 Hackett and Joe Pewawa (ph).

23 And what we did in every jurisdiction, each
24 of the prairie provinces and the NTW, was to do an
25 environmental scan first to see what resources we did have

1 and then we got statistics. Dr. Mary Hampton got
2 statistics from the RCMP for two years of data from 2009
3 to 2010. So this is an old map, but I think it's very --
4 it's a good map and a good thing to think about if we were
5 wanting to measure are we making any improvements. It
6 would be very interesting to redo this map.

7 So what you're looking at are two
8 databases, one that demonstrates resources in terms of
9 shelters, hospitals, victim service workers, RCMP; and the
10 other that's incidents. And what -- The little circles,
11 what they don't tell you, they just give you a picture,
12 but if you look at the circle, not to pick on a community,
13 but a few smaller communities, like, look at the circle at
14 Little K for example, and then look at the circle -- some
15 of these circles are very large, and what you wouldn't
16 know is that the community has a population of only 200
17 people. So, then you can see -- and these are reported
18 incidents of violence.

19 So, there's -- we're not -- we're not
20 seeing that this is a tiny little community and the circle
21 is almost as large as the bigger community, for example,
22 of Inuvik, where there's also a lot. You'll see some
23 places where there's very -- there's not as many -- for
24 example, Wekweètì, there's very few, Gamètì has larger,
25 has been improved. But, some of these places, the RCMP

1 collect that data and it goes to a regional site. Like,
2 for example, all of the Th̄ich̄ communities, it's reported
3 into Behchoko. And, if you go up into the north, it's
4 report -- the information, like, for example,
5 Tsiigehtchic, looks like there's nothing, not much there,
6 but that information is collected in Fort McPherson.

7 So, we have to do a little bit of work on
8 how we would use this, but one thing that I want to draw
9 your attention to is if you look at where the shelters
10 are, there are five shelters, and they're in the north and
11 they're in the south. And, all the communities in the
12 middle have no shelters. So, all of the Sahtu Region of
13 Good Hope, Norman Wells, Tulita, Dél̄ine, have no shelters.

14 In terms of RCMP, there are 11 communities
15 without RCMP. They have fly-in police, but that means
16 that the response time is a lot less than is desirable.
17 In terms of Victim Service workers, 85 percent of the
18 communities do not have a Victim Service worker. They
19 have regional workers, and in terms of shelter workers --
20 I guess I already said that. So, it's something like 78
21 percent. And, most of the beds are full.

22 So, it's a way of looking at the territory
23 and saying there are no resources or there are very
24 limited resources. And, I should say as well with these
25 maps, the geographers were asking the question, "What are

1 the spatial patterns between resources for women
2 experiencing IPV and the incidents of IPV?" And, our
3 conclusion can be that the services are not matched to the
4 communities where there are high incidents, and that most
5 remote communities have limited to no services as well.

6 And, when we started this study, we had
7 wanted the Prairie provinces -- this is what makes us
8 different in the north to the Prairie provinces. They had
9 wanted us to interview Victim Service workers, shelter
10 workers, and RCMP. Those were to be the three groups of
11 participants. But, as we tried to do that, we realized
12 that they just weren't out there. They weren't working in
13 the community.

14 So, then, we started to interview some
15 nurses who work with victims. We started interviewing
16 some physicians, some other people. So, the resources are
17 very slim.

18 **MS. MEREDITH PORTER:** Okay, thank you.
19 And, what's -- I mean, we've sort of scrolled up and down
20 with the map. And so, the shelters, just to note, are on
21 the map, are actually noted with the green square; right?
22 So, because the scheme for the map is lower down.

23 **DR. PERTICE MOFFIT:** Right. You can't see
24 it.

25 **MS. MEREDITH PORTER:** You can't see it, but

1 -- so, what you're saying, then, is that if you note the
2 three green squares in the bottom of the map and then the
3 two up in the north, but really a void in between, despite
4 the large circles, like you said, for the communities ---

5 **DR. PERTICE MOFFIT:** Yes.

6 **MS. MEREDITH PORTER:** --- indicating a high
7 incidence of intimate-partner violence.

8 **DR. PERTICE MOFFIT:** Yes. I might just add
9 something else at this point.

10 **MS. MEREDITH PORTER:** Okay.

11 **DR. PERTICE MOFFIT:** I just have a fact
12 sheet about -- that came out of the poverty coalition, "No
13 place for poverty in the NWT". And, just to give you a
14 few little facts about income, we just received this.
15 Twenty percent of households earn about \$25,000 or less.
16 Twenty percent of households earn more than \$200,000. So,
17 there's this big distinction between the richest and the
18 poorest in the Northwest Territories.

19 And, in 2017, each parent in a two-parent
20 family with two children would have to earn \$20.96 an hour
21 to make a living wage in Yellowknife, and a living wage
22 assumes they work 40 hours a week. A living wage pays for
23 basic expenses such as food, rent, transportation and
24 childcare. The living wage won't pay for debt, savings or
25 luxuries such as a pet. The living wage family represents

1 the most common family type in Yellowknife with a child in
2 school and one in childcare. And, the GNWT did raise the
3 minimum wage to \$13.46 an hour. So, you can see how
4 difficult it is for people to live there.

5 The number of NWT households on income
6 assistance increased by 19 percent between 2009 and 2016.
7 The largest number of income assistance households, 27
8 percent, is in the Beaufort Delta. Food insecurity is a
9 reality in the north, and it's rising. By 2016, most NWT
10 residents faced more food security than in 2010. So,
11 we're not doing a better job.

12 Homelessness continues. It has increased
13 across the NWT. Hope's Haven in Yellowknife is a drop-in
14 for youth. It began providing emergency housing to youth
15 in 2015, and it provided emergency shelter for 71 youth
16 aged 15 to 24 in 2017/18. And, there's Housing First,
17 also from the Y, provided housing for seven single-parent
18 families with 21 children, eight couple-families with 18
19 children. Hope's Haven housed 17 youth.

20 And, I want to particularly mention
21 transitional housing because that's what came to my mind
22 to draw me back to this, because you may have heard in the
23 news recently that Rockhill Apartments in Yellowknife
24 burned to the ground. This is where the YWCA was housed.
25 This was where transitional housing occurs. This has

1 displaced 33 families. And, as I was preparing my -- for
2 the conference and resolve the emergency protection
3 orders, I said to Lyda Fuller, who is the executive
4 director, "This is an emergency protection order waiting
5 to happen." And, she said, "Pertice, it's already
6 happened. They've moved people into other housing across
7 Yellowknife, not with a security guard, and one woman has
8 recently had her door kicked in and does not feel secure."

9 So, what they were providing in 2017/18,
10 the YWCA provided transitional housing up to one year to
11 57 families and 94 children, and there were 21 youth in
12 Hope's Haven, as we said, and the Yellowknife's Women's
13 Society opened eight semi-independent units for single
14 women.

15 So, I think we have a further crisis
16 brewing for our small population. And, the numbers may
17 not seem large to you, but we're a small population really
18 spread across the north, and as an elder said to me once
19 in the community, "I count as a person."

20 **MS. MEREDITH PORTER:** Thank you. And,
21 you've spoken a little bit about some of the systemic
22 factors that increase the risk of Indigenous women in the
23 north experiencing intimate partner violence and other
24 types of violence. Can you speak a little bit about --
25 and we've heard also from other witnesses about some of

1 the factors and the variables that do increase that risk.
2 Can you speak a little bit about some of the direct
3 impacts that the experience of violence that women in the
4 north have on their health, particularly women who may be
5 pregnant or breastfeeding, women's mental health and
6 coping, and their parenting of their ...children for
7 example?

8 **DR. PERTICE MOFFITT:** Yes. Many women say
9 that they would really like the opportunity to have
10 parenting skills delivered to them with their children.
11 They suffered abuse as children themselves and they feel
12 that over time, what happened to a lot of youth that are
13 on our street today is through historical trauma.

14 The first group that attended a residential
15 school, our elders retained their language, are able to
16 identify well with their culture, and then through the
17 residential school, through alcohol, addictions. As well,
18 the next generation of family have lost some of their
19 cultural identity, and so we have some youth who are very
20 lost in terms of who they are as a person, even despite
21 the fact we are trying to revitalize that.

22 In terms of women are extremely vulnerable
23 when they're pregnant, I recently, listening to an
24 applicant describe her experience, she was pregnant and
25 being physically and emotionally abused in a remote

1 community, and she said, "I had to go to the nursing
2 station". She was eight months pregnant. She said,
3 "because I felt this pressure, I felt like my water was
4 going to break." It's a lot of stress on pregnant women.

5 A story that we heard from a -- a frontline
6 worker recounted a story from a survivor who said that --
7 she had five children, and each pregnancy was a result of
8 being raped. And, I went to the literature -- because I
9 was hearing more of this from people, a lot of it
10 unspoken.

11 But, in the literature, for example, in
12 Sweden, two authors who had studied this very subject
13 found that in nine participants, seven of them had
14 experienced rape and that we're not exploring this enough
15 with women and we're not talking in the hospital, as we
16 heard from previous witnesses. Nurses are not asking the
17 question and they're not giving women an opportunity to
18 disclose. And, partially, it could be because they're not
19 fully aware of the services and where women could go. I
20 think it's a really important thing to ask what your
21 relationship is like with your partner, have an
22 opportunity, and then have an opportunity to help them
23 with counselling and -- I think...

24 **MS. MEREDITH PORTER:** Okay. Thank you.
25 And, I think what you did want to note, and we've spoken

1 about some of the topics that you've already mentioned,
2 and particularly with respect to the map that we just had
3 up on the screen, that the map depicted reported
4 incidences of intimate partner violence, but not
5 unreported.

6 **DR. PERTICE MOFFITT:** Absolutely. Yes.
7 And, I think -- just given the culture of violence and
8 silence that is occurring there, there is a lot of
9 unreported. And, we hear about it, and we can see it, and
10 the violence is really quite severe, and causes a lot of
11 trauma within the community as well.

12 **MS. MEREDITH PORTER:** I'm going to move,
13 then, to the next document that's in the book of exhibits.
14 The document can be found at Tab C, and it is called, A
15 Web of Disheartenment With Hope on the Horizon: Intimate
16 Partner Violence in Rural and Northern Communities. And,
17 I understand that there is an image, a figure that you've
18 included in this research that you'd like to speak to.
19 It, kind of, brings together many of the issues and
20 details that you've already shared.

21 So, if we could have that put up on the
22 screen and perhaps you can speak to the Commissioners
23 about what this image is about and how it has informed or
24 how it has been informed by the research that you've done
25 and your experiences?

1 **DR. PERTICE MOFFITT:** Yes. This image
2 shows the entire -- the Prairie provinces and the NWT, the
3 perspective from the frontline service providers of what
4 they're experiencing. The central phenomenon -- it was a
5 grounded theory. The central phenomenon is
6 disheartenment. And, in our terms from the territory, we
7 heard over and over again from frontline workers, our
8 hands are tied.

9 And, from feeling like their hands are
10 tied, there's only so much they can do because there's
11 only the Mountie and the nurse in the remote communities,
12 there's more services in Yellowknife or some of the other
13 larger communities where there are shelters. But, there
14 is this social process going on in the north where we see
15 people putting up with violence, shutting up about
16 violence and getting on with life. Those are, kind of,
17 the ways that things -- the social process that is
18 happening.

19 And, I think with the variables that are
20 present are social isolation, but also isolation when
21 you're in a remote community. And, because these are the
22 processes that you're seeing on the web, we're seeing
23 isolation, the legal system, Indigenous concerns,
24 resources, unemployment as all a part of this web. And,
25 the isolation influences confidentiality for the woman's,

1 who is being violated, anonymity. They have very little
2 access to resources, very little child care. The services
3 that we do have are very reactive, they're crises
4 oriented, and the RCMP say, let's keep them safe out
5 there. So, usually, it's in response to a call that the
6 crisis mode steps in.

7 And so, there's lack of transportation for
8 someone to flee from that violence. Ways out. And, in
9 fact, on the ice road, sometimes families do quite
10 creative things, like I'll Skidoo you out and we'll meet,
11 and then I'll take you further on to the shelter in
12 Yellowknife was one story. There's a lot of -- for
13 Indigenous people, there are -- there is patriarchal
14 cultural norms. Women are still seen as property and a
15 possession. And then there's a lot of colonizing policies
16 and directives. For example, well women are -- women are
17 still -- they're travelling to give birth in the
18 territory.

19 So, women can be away from their family for
20 a good four to five weeks, and for a long time, this was
21 out -- without a partner being with them. So, they've had
22 to leave their children, they've -- and they continue this
23 process. It's based on risk discourse. I believe we only
24 have -- when we first started with the population in the
25 north, they hired midwives. And, at the beginning, back

1 in the 60s, 50s/60s, they were actually -- well, at the
2 very beginning, to go further back, there were traditional
3 midwives who actually delivered each other's babies.

4 And, in a recent study that I did on
5 breastfeeding and working with elders, there are still
6 some elders in the NWT whose baby was born in the bush
7 with their friend or their partner delivering that baby.
8 And, when you have a family together birthing a baby, it
9 strengthens the community, it strengthens the couple's
10 relationship, and their relationship to their newborn
11 child. So, we've removed that opportunity by having birth
12 in Yellowknife by yourself.

13 Sometimes whoever is staying with the woman
14 in the boarding home will go with them. So -- oh I'm
15 sorry, they took the map down. I think -- could you go to
16 the top, please? I kind of got off there talking about
17 many policies that are in place.

18 There is hope though, and we need to not
19 look at everything as a deficit. But, instead, we have to
20 look at things from a strength-based place. And, there
21 has been a lot of work in the territory on the -- from the
22 Coalition Against Family Violence working at getting
23 information out to the communities. There is an
24 Indigenous wellness section of the Department of Health
25 and Social Services, and they have started health fairs in

1 every community. They charter a plane, and we fly to
2 communities, and they have people with information and an
3 opportunity for community people to talk.

4 We do at least have shelters available, and
5 we -- during the course of the study, there were eight new
6 positions added to Victim Services, and there is job
7 training. And, this year, we did have experts come in and
8 talk to the lawyers and the justice system about trauma-
9 informed practice. The RCMP, we had them come into the
10 college to talk to the educators. So, people are --
11 hopefully, our way of being with people is improving. So,
12 these are all hopeful strategies.

13 **MS. MEREDITH PORTER:** Thank you. Chief
14 Commissioner and Commissioners, at this time, I'm going to
15 request that the document found at Tab C, A Web of
16 Disheartenment with Hope on the Horizon: Intimate partner
17 violence in rural and northern communities, Nicole Faller
18 et al in the Journal of Interpersonal Violence dated for
19 2018 be made the next exhibit.

20 **CHIEF COMMISSIONER MARION BULLER:** Yes.
21 Exhibit 53 is A Web of Disheartenment with Hope on the
22 Horizon: Intimate partner violence in rural and northern
23 communities, by Nicole Faller et al. Journal of
24 Interpersonal Violence 2018.

25 --- Exhibit 53:

1 "A Web of Disheartenment With Hope on
2 the Horizon: Intimate Partner
3 Violence in Rural and Northern
4 Communities," by Faller, Wuerch et al,
5 in *Journal of Interpersonal*
6 *Violence* 1- 26, undated (26 pages)
7 Witness: Dr. Pertice Moffitt, Manager,
8 Health Research Programs, North Slave
9 Research Centre/ Aurora Research
10 Institute (Yellowknife)
11 Counsel: Meredith Porter, Commission
12 Counsel

13 **MS. MEREDITH PORTER:** Thank you. Now, we
14 heard -- Dr. Moffitt, we heard yesterday from a number of
15 the witnesses, and you sort of quoted some of them by
16 saying that this -- or by expressing the sentiment that
17 many service deliverers and frontline staff, RCMP officers
18 address the issue of intimate partner violence in the
19 North feeling that their hands are tied. And, you have
20 mentioned with the previous image some of the barriers to
21 providing service delivery to victims and their families.
22 Can you speak a little bit more about some of the barriers
23 and some of the efforts that are being made, and some of
24 the future hopes that you have in terms of adding to the
25 already existing framework of services for women in the

1 North?

2 **DR. PERTICE MOFFITT:** Yes. Well, first of
3 all, you know, sometimes I think people in the territories
4 feel that they're forgotten. We need more funding. We
5 need stable funding. You can see that in terms of the
6 services that are provided for people. People -- we need
7 housing for people. They're living in lots of
8 overcrowding, lots of old homes.

9 And, as I say that, a really powerful thing
10 that is happening in a little community of Fort Good Hope,
11 a local man is actually bringing in lumber and actually
12 having local people assist and build homes. So, it's the
13 community saying, "We're going to get in here and we're
14 going to get homes for people," because homelessness
15 happens even in our little communities, people are couch
16 surfing, people -- it affects things like, for example,
17 breastfeeding too. I can't help but bring that in,
18 because if you have lots of people in a house, and you
19 have had violence in the home as well, it's very difficult
20 for women to expose their breast and breastfeed a baby.
21 Plus, it takes time and it takes a relaxed and composed
22 way of being. So, those are things that all affect it.

23 Other barriers are, women say there is
24 nowhere to go. How do they get out of that community?
25 So, that is what shuts them down. That's what silences

1 them; that's what isolates them. And then some women,
2 there is an opportunity to come and get a better
3 education. And, when they do that, they bring their
4 families. There is some assistance. But, then, for
5 example, even in the nursing program, there is difficulty,
6 because of -- to get your basic education in preparation,
7 your math and science that you would need to come into a
8 nursing program.

9 There's difficulty in the small communities
10 where there's -- formal education was not something that
11 was useful for grandparents, for example. And, because of
12 all this schooling and the residential school, there is a
13 distrust for going to school. I think these things
14 contribute to a poor attendance. So, it's -- women need
15 better education so that they can get better jobs so that
16 they can get better housing so that they can care for
17 their children. And, there is an intersection of all of
18 these things. It's the social determinants that are
19 really affecting community people and relationships, the
20 relationships that are quite volatile always fueled with
21 alcohol.

22 We have heavy drinkers in the Northwest
23 Territories. We have addictions. Again, though, we have
24 a good program right now, an outreach program, a street
25 program where you can walk Downtown Yellowknife and see

1 people with a brown paper bag, sometimes not, just a
2 bottle, and drinking openly on the streets. I don't know
3 if you see it like that in Southern Canada. We often have
4 people who are lying down on the ground, and you have to
5 come along and say, "Are you okay?" And, you have to be
6 an advocate, everyone for each other, because it's
7 extremely cold in the territory. So, this outreach
8 program will take people to a detox centre. So, this has
9 been very helpful. This has been within the last year.
10 So, I hope I answered that question.

11 **MS. MEREDITH PORTER:** Yes, thank you. I'm
12 going to go back also to the map once again that indicated
13 the incidents of intimate partner violence and the
14 services that were available, because I do know that, in
15 your research, you do cite the fact that even though
16 services on this map, for example, are listed as existing
17 or service provider positions may be -- may exist on
18 paper, there are issues in terms of staffing those
19 positions and delivering the services even though they're
20 listed. It doesn't actually happen. Can you speak a
21 little bit about that?

22 **DR. PERTICE MOFFITT:** Yes. What happens is
23 people are hired into positions, and then there's a quick
24 turnaround, and then the position isn't maintained, and
25 the position goes. And, quite often, it's short-term

1 funding that created a position that was useful and now
2 it's no longer there.

3 I think I mentioned the revolving door with
4 nurses, for example. There has been some permanency
5 created by people job sharing, so at least they're coming
6 in and going out, but that also disrupts a community.
7 And, the -- when we did the environmental scan looking at
8 the services that were out there, we couldn't keep up with
9 the change in names and what was going on. So, we need
10 local people who are staying in the North, working in
11 these positions becoming our future frontline service and
12 beyond that with education. And, we are making a
13 difference. We do have some nurse in charges in the
14 communities who have been Indigenous and from the
15 community, and people are so tuned into using interpreter
16 services that when a Tłı̄chọ nurse was talking to an
17 elder, even in her own language, she said, "You need to
18 get the interpreter." And, she said, "No, I'm speaking to
19 you in Tłı̄chọ." She said, "Oh." So, it's -- there's also
20 a little bit of a concern that when a nurse goes back to
21 her community, people are so distrusting of the frontline
22 service that they're worried to share, even if it is a
23 local nurse from their community, their information,
24 because they're worried that it won't be kept confidential
25 because she was from the community.

1 So, there are many, many complexities to
2 staffing and looking at our workforce, and of course, we
3 still have in the north the circuit court that goes, and
4 women have to provide statements in front of -- and be
5 witnesses in front of their communities, which is a really
6 tough thing to do.

7 So, there's many things. We think about
8 Telehealth as being the answer for counselling, that
9 people could -- we could -- I thought of that. I thought,
10 well, there's something that we could do. Women could
11 tell their story and get counselling through Telehealth,
12 not just as great as face-to-face, but I've been told by
13 some of the nurses that the Telehealth machine in the
14 health centre is in a room, and when people talk, people
15 sitting out in the waiting room can hear what they're
16 talking about.

17 So, there are structural changes that we
18 would need to do to make this a better system. In the old
19 days, the frontline workers worked very well together. I
20 think in terms of the Mountie and the nursing staff, they
21 responded to things together. And, one of the things that
22 we heard from an RCMP officer was that he went to a home
23 and a woman had been very badly beaten up, and he called
24 the nurse because he was frightened to move her, and the
25 nurse said, "We have a policy. I'm not allowed to leave

1 the health centre. You need to bring her in to the health
2 centre." And, he said, "I had to pick that woman up like
3 a dog. I am not a medic. I don't know whether I'm
4 hurting her or not to take her to the health centre."

5 And, these are our new policies that, of
6 course, have come in because they're worried about
7 liability of nurses going out in response to what would be
8 a paramedic's duty in a larger centre. But, we are not
9 the south. We are in the north, and the people who are
10 out there are generalists. They're performing multiple
11 jobs. The RCMP is the social worker at times, is, as you
12 can just hear the nurse, the nurses are sometimes
13 counsellors. People are doing the best job that they can
14 with what they've got in terms of frontline workers, and
15 they feel, when we say things like their hands are tied,
16 they feel very frustrated with the system where they can't
17 do more, where witnesses -- where women who come forward
18 feel that they can't tell their story. It is really a
19 catch-22, and where they're trying to encourage them to
20 give their statement. But, as you heard, there's -- the
21 woman herself feels that there would be lots of problems
22 with community people that keep her silenced. So, all of
23 this, there does need to be more trusting relationships.

24 So, it's a very complex -- when you're
25 thinking about barriers and strengths, it's very complex

1 what people are seeing. And, I think if the situation in
2 the north, if we -- maybe I should just go into some of
3 the things that we thought moving forward, what needs to
4 happen, we do know that we need a much more coordinated
5 response to violence than what we've got right now.

6 We need a unified response where agencies
7 actually talk to each other. But, when you have people
8 who are in these positions in short term, they don't --
9 they don't even know each other well. As one person told
10 us, there is no institutional memory. Every time, you're
11 re-learning what's going on, and the person is re-telling
12 their story.

13 So, we do have some inner-agency meetings
14 in the NWT. We need to have more inter-agency meetings.
15 There needs to be more effort with assessment and
16 screening. And, people, even though the Odera (phonetic)
17 is used in the NWT, some of the RCMP feel that we need a
18 more culturally-relevant tool than the Odera, and the
19 number is always static. And so, some of that is being --
20 the screening tools are being investigated -- are being
21 looked at through the domestic homicide study that's being
22 done.

23 We've talked about death reviews in terms
24 of domestic homicide, that we do need those in the
25 territory, and social supports. We need -- almost all

1 participants spoke about the importance of early education
2 with children and teens and recognizing the number of
3 children that we think are exposed to IPV in their family
4 homes, and we need more opportunity of bringing women and
5 their children together, and the family together, and
6 being counselled and assisted with their problems in a
7 much more coordinated way.

8 We need -- all people in the north say we
9 need community healing, and we have a very exciting Arctic
10 Indigenous Wellness Foundation that has come to the --
11 that is in the NWT. It consists of elders. We have a
12 camp and I've taken the fourth-year nursing students to
13 the camp to hear about traditional knowledge as a science,
14 and to hear from elders about their stories. And, they've
15 shared some successes already in the short time that
16 they've been there. Two or three people from the street
17 who have attended the camp come out for a cup of coffee,
18 talk to the elders, and they've been able to get them
19 referred out to treatment centres. We don't have a
20 treatment centre. This is also a limitation in the NWT.
21 We need one.

22 They've had a patient who was a
23 schizophrenic from the hospital who was leaving the
24 hospital coming for visits to the clinic, and they were
25 having some coffee, and the executive director told me, he

1 said, "Well, why are you hospitalized?" And, he said,
2 "Well, I'm seeing things and I'm hearing things that
3 aren't there." And, one of the elders was sitting there
4 and said, "I do that too."

5 And, he feels very accepted. He did that
6 for about two or three weeks. He kept coming for coffee,
7 and the psychiatrist actually noted that there was a big
8 improvement in his hallucinations and what was going on.
9 And, when they had asked the man about, "What happens when
10 you're in the hospital? What do they do they do for you?"
11 "They give me pills." That was all he could say, whereas
12 the conversation, the relationship to the land is
13 something that is so important for healing, and as soon as
14 you walk into the camp, you feel a peace. It's so
15 conducive to talking and conversations and sharing and
16 learning. It's a great class to take students to, and to
17 hear from elders.

18 **MS. MEREDITH PORTER:** Thank you. The final
19 document that I have here in the book of exhibits is
20 called Perspectives on Regional Differences in Intimate-
21 Partner Violence in Canada: A Qualitative Examination, and
22 it is found in the Journal of Family Violence dated for
23 2017. I understand that this document actually preceded
24 some of the research that you've already spoken to this
25 morning.

1 But, one of the similarities that I wanted
2 to highlight in terms of the findings or the way forward
3 that is cited in this document, and is also cited in some
4 of your research documents that we've already tendered as
5 exhibits, is the need for further research going forward
6 and a robust research agenda that speaks to some of the
7 issues and gaps that you have already highlighted. If you
8 wouldn't mind just briefly, for the Commissioners, what
9 does that research agenda, in your opinion, look like?
10 Are you undertaking some of that research at this time, or
11 are there plans, I guess, to go forward with some of that
12 research? Where is that at?

13 **DR. PERTICE MOFFITT:** Yes. I mean, there
14 is a great deal of research in the NWT, and I -- we are
15 right now investigating emergency protection orders and
16 how they're used. We're analyzing the data as we speak.
17 But, there is a much greater need to actually follow-up,
18 to examine women's narratives and their experiences with
19 IPV and service provision. And, even though this study we
20 did told -- gave us good evidence, it fails to understand
21 the true impact of inconsistent and intermittent services
22 on women's mental and emotional well-being.

23 And, we know from studies done in Southern
24 Canada that women who are in a chronic abusive and violent
25 relationship suffer from depression, suffer from post-

1 traumatic stress, and we need to find help for women and
2 we need to understand it better. We need to understand
3 our population and investigate that.

4 So, the study that we just did talked about
5 primary or secondary services, but we need to look more at
6 the quality of the resources that are available for women
7 in remote communities. We need to find solutions focusing
8 on Northern and remote communities, looking at the risk
9 for violence and the experience of violence that
10 Indigenous women face.

11 There's a lot of concern from local people
12 to look at the perpetrators, men who are performing
13 violent acts and to get them help, because many of the men
14 we know were abused as children, and we need to understand
15 that as well. We need to understand their experience and
16 we need to come up with ways that will help.

17 And, we need to consider all of the
18 intersections that we saw in the web and the causative
19 factors that we think we know, the things about
20 colonization, patriarchy, social determinants as opposed
21 to looking at them each individually. How is it that they
22 work and create these situations? And, if we address the
23 determinants of health, if we had better housing, if we
24 had employment, if we had better quality of life, would we
25 see significant improvement? I think so. We need to also

1 be able to monitor what's happening, and we need research
2 that actually looks at indicators of violence and actually
3 measures solutions that we put in place to see if they're
4 effective.

5 So, there is a big research agenda that
6 people could work at, I think, for a long time to make
7 improvements. We can never forget that we need to be
8 doing community-based research, that communities need to
9 be leading the question, and communities need to be
10 involved in the process. And, whenever we see that
11 happen, we get much better results, and we see the social
12 action and the effectiveness that happens from research
13 when it's done in that way.

14 And, we think that the solutions need to be
15 multifaceted. They need to include key initiatives that
16 look at things like travel, and transportation, and child
17 care, and emergency intervention, and job training. And,
18 I don't know necessarily if we need more shelters. If we
19 had our determinants of health improved, would we end up
20 with a better place to live? Would we end up -- if we had
21 more parenting and work with more families, would we end
22 up with healthier relationships?

23 Those are the things that are really
24 important to try, and that kind of action, intervention
25 research would be good to try setting up really good

1 parenting initiative, inviting families in, and then
2 evaluating the effectiveness of that. And, that, at the
3 same time, acts on the problem that is there, right,
4 today.

5 **MS. MEREDITH PORTER:** Thank you. At this
6 time, Chief Commissioner and Commissioners, at Tab D is
7 the document, "Perspectives on Regional Differences and
8 Intimate Partner Violence in Canada: A qualitative
9 examination", by Kimberly Zorn et al. from the journal of
10 Family Violence, 2017. If that can be made an exhibit?

11 **CHIEF COMMISSIONER MARION BULLER:** Yes.
12 Exhibit 54 is Perspectives on Regional Differences and
13 Intimate Partner Violence in Canada: A qualitative
14 examination by Zorn et al. Journal of Family Violence,
15 2017.

16 **--- Exhibit 54:**

17 "Perspectives on Regional Differences
18 and Intimate Partner Violence in
19 Canada: A Qualitative Examination,"
20 by Zorn, Wuerch, Faller & Rucklos
21 Hampton in *Journal of Family Violence*,
22 Volume 32, published online February
23 15, 2017 (pp. 633-644)
24 Witness: Dr. Pertice Moffitt, Manager,
25 Health Research Programs, North Slave

1 Research Centre/ Aurora Research
2 Institute (Yellowknife)
3 Counsel: Meredith Porter, Commission
4 Counsel

5 **MS. MEREDITH PORTER:** Thank you. So, at
6 this time, I don't have anymore questions for the witness.
7 Dr. Moffitt, do you have any final comments that you
8 wanted to share, or do you believe that you have spoken to
9 what you intended to speak to today?

10 **DR. PERTICE MOFFITT:** I do believe I have
11 spoken to most things. I want to say I get a little off
12 track, because in the NWT, you know, most -- like I said
13 before, the people who are there doing multiple jobs, it's
14 the same as with research in the North. We are -- my
15 approach is as a generalist for women's health, and
16 hopefully things are improving. And, I haven't mentioned
17 the whole context, but we have elder abuse happening as
18 well in the territory mostly because they have a pension
19 cheque coming in. And, that's another area that could be
20 addressed with further research in the NWT. Thank you
21 very much. Masi chok.

22 **MS. MEREDITH PORTER:** Thank you. And so,
23 at this time, I'm going to suggest it's the lunch hour.
24 And, in order to ensure that we have enough time for the
25 cross-examination of the witnesses this afternoon and to

1 ensure that we also try, as much as possible, to adhere to
2 the schedule as closely as possible, I'm going to request
3 that we limit the lunch hour for approximately 49 minutes,
4 I guess, at this point, and reconvene at 1:00 for the
5 process of cross-examination.

6 **CHIEF COMMISSIONER MARION BULLER:** Yes,
7 1:00 please.

8 **MS. MEREDITH PORTER:** Thank you very much.
9 And, I would also like to indicate to the parties with
10 standing that Commission counsel is kindly requesting that
11 the parties with standing have one representative attend
12 the parties with standing room for cross-verification at
13 the beginning of the lunch hour prior to getting your meal
14 so that that process can get underway and we can limit,
15 again, the delay this afternoon in undertaking the cross-
16 examination of the witnesses. So, thanks very much and we
17 will reconvene at 1:00.

18 --- Upon recessing at 12:12

19 --- Upon resuming at 13:07

20 **MS. MEREDITH PORTER:** Good afternoon, Chief
21 Commissioner and Commissioners. We're now moving into the
22 process of cross-examination of the witnesses. And, the
23 cross-examination of the witnesses is one of the elements
24 of the participatory rights of the parties with standing,
25 but I just wanted to gently remind parties that will be

1 questioning the witnesses of the rules of procedure.

2 In particular, I wanted to draw the
3 attention to Rule 45, which outlines the order of
4 examination, and particularly in (b), parties that are
5 posing questions to the witnesses as we are, according to
6 Rule 7 of the Rules of Procedure, a trauma-informed
7 process, the questioning of the witnesses must also be
8 done in a non-traumatizing manner to the extent of the
9 interests of the witnesses.

10 So, I just wanted to gently remind the
11 parties that when they are coming to the podium or posing
12 questions to the witnesses, not only to be mindful of how
13 the questions are being posed to the witnesses, but to
14 also keep in mind perhaps how the questions that you're
15 posing are actually being received by the witnesses as
16 well.

17 So, with that, I will invite the first
18 party up to the podium. And, the first party I'd like to
19 invite up to the podium is from the Association of Native
20 Child and Family Services Agencies of Ontario, Ms.
21 Katherine Hensel. And, Ms. Hensel will have nine and a
22 half minutes for questioning.

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

24 **MS. KATHERINE HENSEL:** (Speaking in
25 Indigenous language). Thank you, Ms. Porter. And, good

1 afternoon, Commissioners. I should begin by acknowledging
2 and expressing my gratitude for being here on the
3 traditional and ancestral territory of the Beothuk people.
4 And, my gratitude to all of the witnesses who are
5 appearing here today.

6 My first question is for Mealia. And,
7 first of all, I'd also like to express my gratitude that
8 you are here. You are here. That you're safe.

9 **MS. MEALIA SHEUTIAPIK:** Thank you.

10 **MS. KATHERINE HENSEL:** And, that you're in
11 a position to assist us in solving these problems that are
12 so pressing, as you know. And, to take you back -- and of
13 course you can't, it's completely -- if you haven't turned
14 your mind to it, or if it's too much, or if it's too
15 difficult to answer or if you don't have an answer, that's
16 completely understandable and reasonable. But, to take
17 you back to when you were 15 and 16 in Ottawa, just what
18 you described when you were -- first stepped onto the
19 streets, and you described yourself as alone and there not
20 being resources that you could see or find.

21 Knowing what you know now as a mature --
22 from a place of safety, relative safety that you are in
23 now, as a mature healthy woman, mother, grandmother who
24 knows resources, knows now what might be possible and
25 you've assisted other girls, what would have been most

1 valuable and helpful for you during those moments and
2 during that time as you -- when you left your relationship
3 and found yourself alone?

4 **MS. MEALIA SHEUTIAPIK:** Well, I think today
5 there's a lot more resources, because of how I pushed the
6 people to look for other resources to find a way to get
7 off the street. And, back then, there was not much.
8 There was no counsellors. The social workers were just
9 looking at how they're going to support you with monthly
10 income. I think they were also confused how to try and
11 ask me what kind of help I want. And, from there, that's
12 when I really started pushing myself, what can I do more,
13 but there was not much then.

14 **MS. KATHERINE HENSEL:** Yes. So, the people
15 that were around, the workers, whoever you did deal with,
16 they weren't Inuk? Were they non-Indigenous people?

17 **MS. MEALIA SHEUTIAPIK:** Yes.

18 **MS. KATHERINE HENSEL:** Yes. Would it have
19 been helpful to you at the time to have Inuk specific
20 resources available to you?

21 **MS. MEALIA SHEUTIAPIK:** Yes. It would have
22 made a big difference today.

23 **MS. KATHERINE HENSEL:** Would it have made a
24 difference to you, would it have been helpful or
25 meaningful to have -- to be able to step into a space

1 dedicated to northerners and to Inuk women as a place of
2 safety?

3 **MS. MEALIA SHEUTIAPIK:** Can you repeat
4 that? Sorry.

5 **MS. KATHERINE HENSEL:** I'm thinking --
6 like, one of your main concerns I assume, and correct me
7 if I'm wrong, at the time was shelter. A safe place to
8 live.

9 **MS. MEALIA SHEUTIAPIK:** Oh. Back then, it
10 was only shelters for white people and I didn't feel right
11 about being in a room with strangers. Even though I was
12 already on the street and dealing with strangers, I was
13 just, kind of, scared to go into a shelter, being in the
14 same room with a stranger.

15 **MS. KATHERINE HENSEL:** Would you have felt
16 more comfortable, do you believe, to go into a Inuk
17 specific -- a shelter for Inuk women?

18 **MS. MEALIA SHEUTIAPIK:** Yes. Today, there
19 are more Aboriginal shelters -- there's a couple of
20 Aboriginal shelters for Native or Inuit people, but back
21 then there was none, so I never really bothered with them.

22 **MS. KATHERINE HENSEL:** And, is there
23 anything else -- you described you were dealing with
24 trauma, trauma from home and then new traumas since the
25 time you were 11.

1 **MS. MEALIA SHEUTIAPIK:** Yes.

2 **MS. KATHERINE HENSEL:** What would have been
3 most helpful to you at that time, when you were in Ottawa,
4 in addressing those traumas?

5 **MS. MEALIA SHEUTIAPIK:** There was really no
6 place for me to go to talk to someone about -- when I
7 wanted to get off the street. So, I ended up talking to
8 my social worker, but I think she was looking for
9 solutions for me to go and get help.

10 **MS. KATHERINE HENSEL:** And, was she able to
11 find any solutions?

12 **MS. MEALIA SHEUTIAPIK:** Not really, no.
13 That's when I found myself back on the street all the
14 time.

15 **MS. KATHERINE HENSEL:** And then you were --
16 so you were out for about 10 years?

17 **MS. MEALIA SHEUTIAPIK:** Yes.

18 **MS. KATHERINE HENSEL:** So, five years
19 later, you described you had experienced further trauma,
20 more drug use, more risk ---

21 **MS. MEALIA SHEUTIAPIK:** Yes.

22 **MS. KATHERINE HENSEL:** --- or harm?

23 **MS. MEALIA SHEUTIAPIK:** Yes.

24 **MS. KATHERINE HENSEL:** Is there any -- what
25 would have been -- and you were older. Is it the same

1 resources that would have been helpful to you or is there
2 anything further or different that would have helped you
3 when you were say, 21, 22, 23, and still out?

4 **MS. MEALIA SHEUTIAPIK:** That time when I
5 was 20, that's when I first gave birth, and that's when I
6 started thinking for me to get better and get off the
7 street. But, Children's Aid got involved somehow. And
8 then when they went into my life and my son's life, then I
9 got all confused. I didn't know where to go. I went to
10 my social worker again, but she couldn't help me. So, I
11 started looking for other places for help and there was
12 not much help then. Like, my son is 22 now. My oldest
13 son is 22 now. And, back then, there was hardly any Inuit
14 in Ottawa and any other organizations that's here today.

15 **MS. KATHERINE HENSEL:** Would it have been
16 helpful -- during the time that you described that -- when
17 you were pregnant you stopped using, you stayed off the
18 street, those were periods of relative health and hope for
19 you?

20 **MS. MEALIA SHEUTIAPIK:** Yes.

21 **MS. KATHERINE HENSEL:** Would it have been
22 helpful, just in a perfect world, where the best services
23 and the most effective services are available, to be
24 developing a relationship during that time, when you're
25 motivated and hopeful, to allow you to safely parent and

1 remain safe yourself after the birth of your son? Do you
2 know -- what would that relationship have looked like to
3 you, if you can imagine it?

4 **MS. MEALIA SHEUTIAPIK:** I think I would
5 still have my son. I wouldn't have given him up.

6 **MS. KATHERINE HENSEL:** Yes. And, you had
7 several other windows of opportunity. Did anybody step in
8 during those times when you were -- when you weren't using
9 and you weren't street involved?

10 **MS. MEALIA SHEUTIAPIK:** No. Children's Aid
11 just tried -- they really wanted to take my son, so I
12 ended up talking to my grandmother -- and that was before
13 my grandmother passed away. So, I asked my grandmother,
14 what am I going to do? Because social services are on my
15 ass -- on my butt and, you know, bothering me about my
16 son. So, she -- we had a discussion, me and my
17 grandmother talked about try to think about who we can
18 take care -- who can take care of my son. So, we chose my
19 aunt because she can't have babies and I thought about it
20 and I'm, like, okay, she can't have babies, so let her
21 take care of my son instead of the Children's Aid and a
22 strange family.

23 **MS. KATHERINE HENSEL:** M'hm. So we made it
24 fair.

25 **MS. MEALIA SHEUTIAPIK:** Yeah.

1 **MS. KATHERINE HENSEL:** Right. And so I'm
2 going to ask Ms. Wilson some questions now about your
3 description, your experience.

4 So what resources are in place now for
5 women -- girls and women who find themselves -- and I'm
6 thinking particularly of pregnant girls and women who are
7 motivated and vulnerable and in great peril in terms of
8 potentially unhelpful Child Welfare interventions that
9 don't actually serve to support the woman or the family?
10 Does your agency have anything in place now?

11 **MS. JENNISHA WILSON:** So at TI we do have a
12 family wellbeing program and we have a dedicated violence
13 against woman worker and she also does CAS-related cases.
14 So if there was a situation of apprehension, she works
15 with the mother to have the child returned safely and in
16 ways that are going to be sustainable.

17 In terms of some of the more significant
18 barriers around, like, housing and substance use, other
19 programs that TI does have is the Housing First program
20 and a housing support program. They do try to help
21 support Inuit who are most vulnerable access housing, but
22 the issue in Ottawa, like other cities, is that there's a
23 shortage of housing. It's really difficult to house
24 individuals in affordable housing when the market is very
25 scarce, and also there's a lot of racism and

1 discrimination from landlords towards Inuit and other
2 First Nations, Métis populations in the city.

3 In terms of treatment and support, there --
4 Mamisarvik was up and running different periods of time.
5 It is currently in the process of being up and running
6 again. So it's the Inuit-specific mental health and
7 addictions treatment program. So it has day treatment and
8 residential treatment aspects with programming that ranges
9 from day-to-day to weeks and months at a time.

10 Realistically, the barrier there is
11 funding; right? And sustainable funding to ensure that
12 there is a constant open door process to support
13 individuals that come when they are ready.

14 In terms of just supporting pregnant women
15 or women that find themselves pregnant and vulnerable, I
16 can't tell you if there's one program that supports that
17 particular catch. It's rather multiple programs that put
18 together, so piecemeal a support plan for that individual.

19 **MS. KATHERINE HENSEL:** All right. Thank
20 you. Kukschem.

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

22 The next party I'd like to invite to the
23 podium is from Pauktuutit Inuit Women of Canada et al.
24 Ms. Beth Symes will have 21 and a half minutes for
25 questioning.

1 --- CROSS-EXAMINATION BY MS. BETH SYMES:

2 MS. BETH SYMES: Thank you. I am counsel
3 to Pauktuutit, to the Inuit Women of Labrador, to
4 Saturviit the Inuit Women of Nunavik, to the Ottawa Inuit
5 Children Centre and to the Manitoba Inuit Association.

6 Thank you for keeping the qulliq tended
7 today.

8 I want to focus all of my questions about
9 trafficking of Inuit women and girls. And I want to
10 extend my thanks to my many colleagues who have
11 contributed their time to asking questions about this.

12 Mealia, how old were you when you left
13 Iqaluit to come south?

14 MS. MEALIA SHEUTIAPIK: I was 14 turning
15 15.

16 MS. BETH SYMES: And how old was your
17 boyfriend?

18 MS. MEALIA SHEUTIAPIK: He was 29.

19 MS. BETH SYMES: And had you finished
20 school at that point?

21 MS. MEALIA SHEUTIAPIK: No.

22 MS. BETH SYMES: Now, you talked about
23 being raised by your grandmother ---

24 MS. MEALIA SHEUTIAPIK: Yeah.

25 MS. BETH SYMES: --- in Iqaluit and you've

1 talked very positively about her and growing up.

2 **MS. MEALIA SHEUTIAPIK:** Yeah.

3 **MS. BETH SYMES:** When you came south, did
4 you keep in touch with your grandma?

5 **MS. MEALIA SHEUTIAPIK:** All the time.

6 **MS. BETH SYMES:** Okay.

7 **MS. MEALIA SHEUTIAPIK:** The only time was a
8 pay phone and it had to be long distance, a collect call.
9 So she would accept my collect call all the time.

10 **MS. BETH SYMES:** And in terms of Ottawa,
11 did you have lots of friends from the Inuit community or
12 were you isolated?

13 **MS. MEALIA SHEUTIAPIK:** I was more
14 isolated. There was not much Inuit people at all.

15 **MS. BETH SYMES:** And did you then or do you
16 now know Inuit women or girls who were trafficked in
17 Ottawa?

18 **MS. MEALIA SHEUTIAPIK:** Yes.

19 **MS. BETH SYMES:** From your lived experience
20 -- and you're so brave -- can you try and ---

21 **MS. MEALIA SHEUTIAPIK:** Thank you.

22 **MS. BETH SYMES:** --- help us give some
23 dimension to the numbers? How many girls, how many women,
24 Inuit women, do you know that were trafficked?

25 **MS. MEALIA SHEUTIAPIK:** Maybe about almost

1 10 and there's one woman that's missing as we speak right
2 now. And she just went missing last year. She's in the
3 missing persons with Ottawa Police. And there still are
4 girls out there right now as we speak.

5 **MS. BETH SYMES:** Okay. And can you tell us
6 anything about the persons who trafficked these 10 Inuit
7 women or girls?

8 **MS. MEALIA SHEUTIAPIK:** Pardon? Sorry.

9 **MS. BETH SYMES:** Do you know anything about
10 the men that trafficked these 10 Inuit women and girls?

11 **MS. MEALIA SHEUTIAPIK:** No, I try to keep
12 away from them as much as possible. When I was out there
13 I was always on my own. I didn't have any men around me
14 like that. I chose myself to go out there and I didn't
15 want any men like they have today.

16 **MS. BETH SYMES:** Okay. Jennisha, I want to
17 obviously congratulate you on such a fantastic program
18 that is really making a big difference in Ottawa. You
19 said it's a five-year program; is that right? Who is the
20 funder?

21 **MS. JENNISHA WILSON:** So the funder for --
22 is Public Safety Canada, and they are funding the portion
23 of the project that is supporting survival sex trade
24 workers exit the sex trade to more sustainable options.
25 We also have funding from the Ministry of Community and

1 Children Community and Social Services I believe the new
2 acronym, and they are funding a one-year project to
3 develop a community-specific strategy to end human
4 trafficking.

5 **MS. BETH SYMES:** Okay. So when does the
6 funding from the Ontario government end?

7 **MS. JENNISHA WILSON:** January.

8 **MS. BETH SYMES:** Do you need it extended in
9 order to continue your work and your analysis?

10 **MS. JENNISHA WILSON:** I think something
11 that you'll notice about a lot of Indigenous organization,
12 the work happens with or without funding. So absolutely,
13 we'd need funding, but it won't stop the work that's
14 happening on the ground and in community because it's very
15 important to aid and support the other programs and --
16 that are delivered through TI.

17 **MS. BETH SYMES:** Okay. Now I want to talk
18 a little bit about the demand for sexual services from
19 Inuit women and girls. I think you talked about Inuit
20 women and girls walking down Montreal Road in Vanier and
21 being propositioned.

22 **MS. JENNISHA WILSON:** Yes.

23 **MS. BETH SYMES:** And you would have heard
24 that from the women that come to your program?

25 **MS. JENNISHA WILSON:** From the women that

1 come to our program, from our outreach workers that are
2 out there providing harm reduction resources to these
3 women, Facebook posts that individuals indicate that
4 someone's tried to pick them up. They've taken photos of
5 license plates and have warned the rest of community.

6 So a couple different channels from which
7 information comes from, but all consistent in terms of
8 location, type of catcalling or propositions that are
9 used, and the common feeling of unsafe, right, and in
10 danger.

11 **MS. BETH SYMES:** In Montreal, Rebecca Jones
12 who is an Inuk -- you know Rebecca.

13 **MS. JENNISHA WILSON:** Absolutely.

14 **MS. BETH SYMES:** An Inuk staff worker at
15 the Ottawa Inuit Children's Centre told the Commissioners
16 about being propositioned on Montreal Road while she was
17 going to work, right ---

18 **MS. JENNISHA WILSON:** Yeah.

19 **MS. BETH SYMES:** --- or coming back from
20 work and how unsafe it made her feel.

21 **MS. JENNISHA WILSON:** M'hm. Right.

22 **MS. BETH SYMES:** And if you were 14, almost
23 15 when you arrived, would you agree with me that that
24 must be very frightening?

25 **MS. JENNISHA WILSON:** It's definitely

1 frightening, but also, something that I've learned from a
2 lot of different community members, especially young
3 folks, it's not always the good-looking guy that's trying
4 to pick you up. Sometimes it's a friendly gentleman or
5 woman saying, "Hey, it's snowing outside. Would you like
6 a ride to the bus stop?" Right? So, proposition comes in
7 different forms. The question is, why actively go out of
8 your way to support someone on -- when you see them
9 walking down a street if you're not trying to look for
10 something out of it; right?

11 **MS. BETH SYMES:** Hmm. And what year did
12 this particular program of TI begin?

13 **MS. JENNISHA WILSON:** Which portion? The
14 anti-human trafficking or the larger exiting the sex trade
15 program?

16 **MS. BETH SYMES:** Exiting the sex trade.

17 **MS. JENNISHA WILSON:** So, the program
18 started technically when I was hired for the position in
19 2017, but I will note, I think, the proposal was put in
20 five years prior to. That's how long it kind of took to
21 get a buy-in and funding.

22 **MS. BETH SYMES:** Okay. So, it runs to
23 2022?

24 **MS. JENNISHA WILSON:** I believe so, yes.

25 **MS. BETH SYMES:** Okay. And, you said in

1 Year One you immediately had a caseload of 25 Inuit women
2 and girls?

3 **MS. JENNISHA WILSON:** Yes.

4 **MS. BETH SYMES:** Okay. Can you tell us
5 today how many Inuit women and girls do you serve?

6 **MS. JENNISHA WILSON:** So, the severity of
7 support differs; right? So, some individuals come for --
8 just so that they're not in isolation and that they have
9 support. Some individuals come in for intense case
10 management. Some for just one-off counselling sessions
11 and/or navigation. So, when we look at, kind of,
12 caseloads, we have primary clients, which is 25, and we're
13 hoping to continue engaging folks; and then secondary
14 clients, which are the one-offs, we're looking -- we're
15 closer to the 35 mark, 40 mark, but it's really hard for
16 me to give you a number at this time, because I audit my
17 files at the end of every month.

18 **MS. BETH SYMES:** So, it's somewhere up of
19 65 Inuit women and girls either one-offs ---

20 **MS. JENNISHA WILSON:** Yes.

21 **MS. BETH SYMES:** --- or continuing court
22 cases. Can you help us, what percentage of those do you
23 think are being trafficked?

24 **MS. JENNISHA WILSON:** So, when it comes to
25 -- again, using a harm reduction, trauma-informed

1 approach, we allow folks to identify as being trafficked
2 or someone who's involved in survival sex work; right? So
3 -- because they have no other choice, they engage in
4 forced sexual exploitation. I can't tell you the numbers
5 off the top of my head, but I can say that depending on
6 who you speak to, right, they might tell you that the
7 severity and time in which they have been exploited may be
8 a one-off or a long period of time, or something that they
9 go back and forth. So, between coercion and consent;
10 right? I don't have an actual number for you, but it's, I
11 would say, almost everyone on my caseload has some
12 experience of feeling as though they're forced into sexual
13 exploitation.

14 **MS. BETH SYMES:** And, of course the reason
15 I'm asking you the question is that we heard yesterday
16 from police -- I don't know if you were here.

17 **DR. PERTICE MOFFITT:** No.

18 **MS. BETH SYMES:** So, we heard from the
19 RCMP, we heard from the OPP and we heard from the
20 Newfoundland Constabulary about the number of human
21 trafficking charges, et cetera. And, the numbers for all
22 of Canada are really very small and, yet, you and Mealia
23 are telling about a substantial number of Inuit -- just
24 Inuit women and girls in Ottawa right now that you know or
25 have reason to believe are being trafficked. And so, I'm

1 asking you, why are the police numbers for all of Canada
2 for all of Indigenous women and girls so small, whereas
3 just for Inuit women and girls in one city are really
4 significant? What's the mismatch?

5 **MS. JENNISHA WILSON:** So, I can't tell you
6 why there's a mismatch, but I can give you some food for
7 thought. I think the number one thing is not every single
8 person who is trafficked goes forth and uses the police as
9 a form of reporting the trafficker. There is a
10 significant reluctance for Indigenous women, specifically
11 Inuit, to engage with police because of prior experiences
12 of being seen as a criminal, being blamed, being seen as
13 not a victim, causing it on themselves.

14 The other item is depending on the police
15 force, do they segregate data based on who's coming
16 through their doors; right? Something that we're
17 constantly working on in Ontario, specifically with the
18 Ottawa Police Services, is how to make sure that if an
19 Inuk comes through your door and they're saying they're
20 being trafficked that you know it's an Inuk that's coming
21 through your door. They don't have, from my knowledge, a
22 process of self-identification, which adds to the skewing
23 of data.

24 The other item also is if someone doesn't
25 know they're being trafficked and all they're doing is

1 accessing services, a service provider can say, you know,
2 "These are forms of exploitation." But, if the client
3 does not come forth and say, "I'm being trafficked," it
4 does not get reported; right? So, there's a lot of
5 discrepancy in terms of what is being reported, who it's
6 being reported to and how information is seen as valid and
7 reliable versus taking all the information you can get
8 from different places and trying to make sense of that
9 data; right? I hope that answers your question.

10 **MS. BETH SYMES:** It's at least an
11 explanation as to why the discrepancies. Now, I want to
12 focus on what -- yesterday, I talked about Inuit women and
13 girls who are lured to the South to be human trafficked.
14 And, today, I want to talk, picking up on what you had
15 said, which is Inuit women and girls, I would think they
16 were sort of almost all girls, who are aging out of care.

17 **MS. JENNISHA WILSON:** Yes.

18 **MS. BETH SYMES:** Right? They have been in
19 Child and Family Services, and now they're aging out of
20 care. And, in Ottawa, does that start at about age 18 and
21 19; is that right?

22 **MS. JENNISHA WILSON:** I think it's 18 is
23 the age of the cut off for consent, like you're an adult
24 and you start aging out within the ages of 20; right?
25 Yes.

1 **MS. BETH SYMES:** Okay. And then under the
2 changes to the law in Ontario is that with consent, right,
3 services can continue to be provided to someone who is up
4 to age 21?

5 **MS. JENNISHA WILSON:** Yes.

6 **MS. BETH SYMES:** Okay. And, for aging
7 Inuit, let's call it girls, aging out of care, is there
8 sometimes this real need or perceived need to be
9 independent; right? Not to have any further ties with
10 Child and Family Services?

11 **MS. JENNISHA WILSON:** Yes, I think there's
12 a lot of pressure put on women in care, so Inuit, to make
13 sure they're self-sufficient before they age out. And,
14 often times, you know, there isn't the accurate cultural
15 and/or relatable resources to ensure that they are
16 receiving all the information to develop navigational
17 skills, transferrable skills to do so. In fact, I think
18 it's quite evident that the previous ministry called
19 Ministry of Children and Youth Services created Youth in
20 Transition workers because of that significant need,
21 right, that children in care that were aging out were not
22 getting the skills that they needed by the time they were
23 to be independent.

24 **MS. BETH SYMES:** Now, this morning, you
25 said something that was really quite shocking that is

1 that, in Ottawa, Inuit girls in care are actually being
2 sought by traffickers. That is before they have aged out
3 of care?

4 **MS. JENNISHA WILSON:** Yes.

5 **MS. BETH SYMES:** Okay. And, how do you
6 know this?

7 **MS. JENNISHA WILSON:** So, we have a Youth
8 in Transition worker. We have three of them at TI, and we
9 have one that's specific to human trafficking. And,
10 through one-on-one trust building, developing
11 relationship, doing case management, those things come out
12 naturally through conversation. In order to work with our
13 human trafficking specific Youth in Transition worker,
14 there needs to be that indication that they're at risk of
15 being trafficked or have been trafficked before.

16 And, through indication and accurate
17 training of staff on what human trafficking looks like,
18 what the human -- the mind of someone who has been
19 trafficked, how they articulate through different
20 languages, they are able to support in that understanding.
21 A lot of it is also the work of creating trafficking
22 narratives that we do in-house to ensure that we're making
23 sense of their timeline; right?

24 **MS. BETH SYMES:** And, can you help us, what
25 do you know about these traffickers? Can you give us

1 anything about their profile?

2 **MS. JENNISHA WILSON:** So, there is not one,
3 I guess, profile for a trafficker. There has been a
4 couple of different things; right? We have had
5 individuals who are Inuk woman who have youth in care who
6 have been trafficked who become traffickers at the expense
7 of ensuring their safety is intact with the expense of
8 somebody else; right? And so, you learn violent
9 behaviours and you perpetuate those violent behaviours.

10 And then there's also men between the ages
11 of 18 and 34, predominantly men, but there's also women as
12 traffickers, right, who, for the most part, are not --
13 it's not you're a person that's also in poverty with you.
14 It's people who are affluent who have homes in the suburbs
15 who can -- know how to manipulate systems that are preying
16 and preying on vulnerable people; right? Often times,
17 there is gang affiliations and/or groups of individuals
18 that will work together to traffic other individuals or
19 vulnerable people.

20 So, different -- so just to give you some
21 age brackets, individuals that tend to be younger that
22 traffic folks tend to be in high school cliques or groups
23 together. And, it's like, how could I make a dollar off
24 of someone else? Like, that's the language that's used.
25 Individuals that are older, it's like, how do I maintain

1 positions of power over someone else; right? And, I'm
2 going to prey on people who the system already neglects to
3 see as victims; right?

4 So, there is -- no, I can't tell you if
5 it's a Caucasian, if it's a black, or if it's a Native. I
6 can't tell you those things, right, because the diversity
7 of trafficking folks that we have seen, there is no, you
8 know, consistency of, it's this particular group. It
9 tends to be men who want to exercise power over vulnerable
10 people.

11 **MS. BETH SYMES:** In terms then, of girls --
12 Inuit girls in care in Ottawa, do you have any sense as to
13 how many there are?

14 **MS. JENNISHA WILSON:** I don't know the
15 number, because realistically, there is no cross-
16 communication between, for example, the government or CAS
17 putting people in care and letting different Indigenous
18 organizations know, hey, you might want to know that this
19 person is in care to provide support. There is a
20 breakdown in communication there and that's also a part of
21 the larger structural issues, right, where you apprehend
22 someone, you remove them, and you isolate them, and you
23 don't let community folks on the ground doing good work
24 know that they can go in and support, so that person
25 doesn't become vulnerable to trafficking or to other forms

1 of vulnerabilities.

2 **MS. BETH SYMES:** And, we had evidence from
3 Montreal and also from Winnipeg that Nunavut, when it's
4 unable to place a child within its jurisdiction, sends
5 south, say, to the Ottawa Children's Aid. Do you get any
6 notice? Let's say a 12-year old girl who is coming from
7 Iqaluit or Hall Beach to Ottawa, do you get any
8 notification that she is coming and that she might need
9 some support?

10 **MS. JENNISHA WILSON:** Sadly, we don't.
11 But, a part of the work that we're doing on the ground is
12 including private foster care homes as a part of the
13 strategy. So, Bairn Croft Homes that's based in Ottawa
14 sits on our strategy team to ensure that we are making
15 those connections with or without government involvement.
16 Beyond that, the only time I've ever had any communication
17 with, for example, Nunavut Family Services is when they're
18 looking to find someone who has gone AWOL or missing in
19 the south. They'll call my team to go and get police
20 escort and try to figure out where that person's located.

21 **MS. BETH SYMES:** So, I just wanted to come
22 then, to this Inuk girl who is aging out of care and in
23 terms of what are her realistic options; right? I mean,
24 is it realistic that she would return to her home
25 community in Nunavut?

1 **MS. JENNISHA WILSON:** I think it's wrong of
2 us to assume that someone wants to go back home or to --
3 after being put into care. I think it really depends on
4 what their aspirations are. For some of the folks that we
5 work with, yes, going home is a huge part of their goal
6 setting. But, also, going home means being reintroduced
7 to forms of trauma and neglect that put you in care in the
8 first place; right?

9 So, in order to imagine a system that
10 allows for repatriation of individuals, it also requires
11 to think about how is the state actively investing in
12 those communities that we're repatriating folks too, to
13 not set them up to be vulnerable again; right?

14 **MS. BETH SYMES:** And, would you agree with
15 me that less than half of the girls who are aging out of
16 care have finished high school?

17 **MS. JENNISHA WILSON:** I can't tell you if
18 that's an accurate number. I think that we should not
19 only look at high school, but other transferable skills --
20 -

21 **MS. BETH SYMES:** Right.

22 **MS. JENNISHA WILSON:** --- as a way of, I
23 guess, quantifying social and economic mobility. High
24 school is one thing, but there's so many other things that
25 folks wish they knew before they were trafficked.

1 **MS. BETH SYMES:** We heard from the youth
2 panel in Vancouver that within a year of aging out of
3 care, half of them are homeless. Is that also experienced
4 in Ottawa?

5 **MS. JENNISHA WILSON:** Again, I think that a
6 lot of the population that you see in Ottawa that is
7 homeless tends to be Indigenous youth, LGBTQ, our two-
8 spirited folks, or -- they tend to make up a significant
9 amount of the homeless population. And, I think that
10 doesn't only speak to folks in care, it just speaks to the
11 lack of program. So, when you are no longer a youth,
12 there is no transition plan.

13 **MS. BETH SYMES:** And, would you agree with
14 me then, that these youth, Inuit youth, Inuit girls aging
15 out of care are highly vulnerable to being trafficked?

16 **MS. JENNISHA WILSON:** I think with those --
17 with the context that I said, yes, absolutely, it would
18 make them vulnerable to being trafficked. Again, other
19 things are at play; right? Poverty, dealing with trauma,
20 healing, seeing non-Inuit -- seeing non-Indigenous folks
21 as a part of the equation of that solution of it's not
22 just an Indigenous issue; right?

23 **MS. BETH SYMES:** So, just to end, you and I
24 have only talked about the youth, the Inuit youth coming
25 from, say, Nunavut to Ottawa or being in Ottawa, but would

1 you agree with me that from the central Arctic, that those
2 youth, Inuit girls would come to Winnipeg, from the
3 western Arctic might come to Edmonton or Yellowknife, from
4 Quebec would come to Montreal, and from Nunatsiavut would
5 go to St. John's? In other words, you have given merely a
6 small ---

7 **MS. JENNISHA WILSON:** Yes.

8 **MS. BETH SYMES:** --- subset of what is the
9 problem of trafficked Inuit women and girls from across
10 Canada?

11 **MS. JENNISHA WILSON:** Definitely.

12 **MS. BETH SYMES:** And, are you in connection
13 with any of those other providers?

14 **MS. JENNISHA WILSON:** Yes. A part of our
15 partnership is -- so, looking at where Ontario is situated
16 again, because that's our work, we work with the Quebec --
17 Southern Quebec Inuit Association as a part of that
18 partnership to address human trafficking, and TIA, which
19 is in Toronto. In terms of other communities, in terms of
20 -- Ottawa is very fortunate to have an organization that's
21 been around for 30 years doing this -- like, not just
22 doing this work, doing other work, while other communities
23 are still growing.

24 So, while there's mentorship and support
25 happening, there also needs to be capacity. So, we need

1 other Inuit that are in those spaces, that are dedicated
2 to this issue, to also have the capacity to do that so
3 they're not stretched, because no one needs to be
4 stretched in dealing with multiple issues, because it
5 doesn't do justice to supporting victims; right?

6 **MS. BETH SYMES:** Mm-hmm. Thank you so much
7 for painting a much clearer picture of trafficked Inuit
8 women and girls.

9 **MS. JENNISHA WILSON:** No problem.

10 **MS. BETH SYMES:** Thank you.

11 **MS. MEREDITH PORTER:** Thank you. The next
12 party I'd like to invite to the podium is from the Native
13 Women's Association of Canada, Ms. Virginia Lomax. And,
14 Ms. Lomax will have six minutes for questioning.

15 **--- CROSS-EXAMINATION BY MS. VIRGINA LOMAX:**

16 **MS. VIRGINA LOMAX:** So, first, I want to
17 acknowledge the spirits of our stolen sisters who are in
18 the room with us today, to the elders for their prayers
19 and the sacred items that are here with us. I acknowledge
20 that we are on the homeland of the Beothuk, Mi'kmaw, Innu,
21 the Inuit and southern Inuit, and I thank you all for your
22 hospitality so that we can do our work in a good way
23 today.

24 Mealia, I'd like to begin by asking you a
25 few questions. You said today that you would like to see

1 more supports in Ottawa, and I'd love to hear from you
2 more about specifically what types of supports you would
3 like to see.

4 **MS. MEALIA SHEUTIAPIK:** Well, mostly for
5 Aboriginal, Inuit, Métis. There's hardly any places where
6 they can go to share what they want to share and how they
7 feel about what's going on inside them and what brought
8 them out there. And, I'm sure they are shy to talk about
9 -- that they're on the street or they're shy to ask for
10 help with what kind of situation they're in.

11 And, those outreach workers, there's not
12 enough outreach workers, and that's Aboriginal outreach
13 workers. There's only very few, like Jennisha's part of
14 the outreach workers, and there's another one -- I think
15 it's Minwaashin. But, I think there should be more
16 outreach workers out there on foot because they're always
17 just driving by.

18 **MS. VIRGINA LOMAX:** Do you think it would
19 be helpful to have some sort of navigation service,
20 specifically to help people navigate through any legal
21 issues they might have, to direct people to the different
22 places they need to go, the different people they need to
23 speak to if they're in conflict with any government
24 services?

25 **MS. MEALIA SHEUTIAPIK:** Yes. And, I think

1 there should be more -- they should start asking more
2 questions. They need -- if the girls need help or is
3 there anything that we can do to avoid this kind of
4 situation, or if you're shy to talk about it, if you want
5 to talk to someone else, if you're not comfortable with
6 me, something like that would be nice.

7 **MS. VIRGINA LOMAX:** And, connecting to an
8 Inuit community in Ottawa, how did that impact your
9 journey?

10 **MS. MEALIA SHEUTIAPIK:** Actually, it
11 impacted a lot because I tried to help myself to get off
12 the street. I pushed myself, and pushed myself, and
13 pushed myself, and that was the only way that I got myself
14 out of there, is by asking questions and going to see
15 counsellors and Tungasuvvingat Inuit, because back then,
16 there was not much help with counsellors or drop-ins like
17 we have today.

18 **MS. VIRGINA LOMAX:** Thank you.

19 **MS. MEALIA SHEUTIAPIK:** You're welcome.

20 **MS. VIRGINA LOMAX:** Jennisha, today you
21 testified that two-spirit, LGBTQ individuals and youth are
22 both priority areas for your organization, when it comes
23 to trafficking; that's correct?

24 **MS. JENNISHA WILSON:** Yes.

25 **MS. VIRGINA LOMAX:** Can you describe some

1 of the engagement that you've done with the two-spirit,
2 LGBTQ community and what you've learned from that
3 engagement?

4 **MS. JENNISHA WILSON:** So, prior to working
5 at TI, when I worked in Toronto as a part of Well Living
6 House. Two-Spirits of the First Nation was one of the
7 community organizations as part of my portfolio, and we
8 all worked together towards a health wellness program
9 specific to smoking cessation, but also looking at how
10 different forms of violence impact why individuals engage
11 in use of commercial tobacco.

12 From that work, it had -- it allowed me to
13 grow a lot of really great relationships with two-spirit
14 folks in Toronto, but also to really broaden our
15 understanding of what that means for programming and the
16 perspectives that are constantly used when looking at
17 priorities; right? So, often times when we look at work
18 around violence, it's typically done from a feminist or
19 gender lens, but that gender lens often neglects two-
20 spirited or 2LGBTQ community members, right, from that
21 perspective.

22 So, a lot of the work -- and I have to pay
23 homage to Percy Lezard and Blu Waters, who I know is in
24 this room, for providing a lot of that knowledge for me in
25 reciprocal ways, right, and understanding that. It's not

1 enough to just say that it's inclusive of those folks, but
2 to have them at the table in decision-making processes.

3 **MS. VIRGINIA LOMAX:** Has TI developed any
4 specific supports for the two-spirit LGBTQ community?

5 **MS. JENNISHA WILSON:** To be honest, not to
6 my knowledge that I know. And, I will say that unlike
7 First Nations and Métis folks that ascribe to the term
8 "two-spirited", I have learned over the two-and-a-half
9 years I have worked as an employee for TI that two-spirit
10 isn't a concept that is applicable to this community.
11 Colonialism, which has happened -- literally, we have
12 elders that go from igloos to microwave in their timespan,
13 they're still understanding what traditional gender roles
14 look like for Inuit and what that means in the face of
15 mainstream society telling them what inclusion should look
16 like as well for this community; right?

17 So, I think that a lot of the work there is
18 trying to unpack colonial violence in that process, and
19 trying to make sense of what it looks like for them, what
20 feminism looks like for Inuit women and what inclusion
21 looks like for folks that ascribe to being two-spirited or
22 LGBTQ; right?

23 **MS. VIRGINIA LOMAX:** Yes. And so, have you
24 also developed specific supports for youth as a result of
25 any youth engagement you may have done?

1 afternoon, everyone. Thank you to all the witnesses for
2 being here. My name is Roy Stewart, and I'm here on
3 behalf of the NunatuKavut Community Council, which is the
4 representative organization for approximately 6,000 Inuit
5 in Southern and Central Labrador.

6 And, I think my questions are -- I think
7 they're all for you, Ms. Wilson. I'm just curious, are
8 you familiar with who the Inuit of NunatuKavut are?

9 **MS. JENNISHA WILSON:** I'm not, but I am
10 familiar with Labrador. There are a few staff that are on
11 our team that are from Labrador.

12 **MR. ROY STEWART:** Okay. In your PowerPoint
13 this morning, you outlined some of the urban Inuit
14 demographics. And, in your slides, it identified some of
15 the Inuit groups, and I noticed that NunatuKavut Inuit are
16 not identified in your list. And then later on in your
17 talk this morning, you spoke about the voice of Inuit
18 women, you know, often being silenced. And so, I guess my
19 first question is, would the exclusion or omission of
20 NunatuKavut women and girls contribute to perpetuating
21 that silence of these women?

22 **MS. JENNISHA WILSON:** Definitely, it does
23 perpetuate the silence. I think just to clarify, a lot of
24 my work is provincially mandated and through partnerships
25 that have been developed in the somewhat year-and-a-half

1 that I have been in this position is what's reflected in
2 my presentation and not so more the purposeful exclusion
3 of any particular group.

4 **MR. ROY STEWART:** Right. Yes, and I don't
5 mean these questions to be attacking your work.

6 **MS. JENNISHA WILSON:** Oh, no, absolutely
7 not.

8 **MR. ROY STEWART:** And so, this morning you
9 also mentioned, and I'm paraphrasing, but that a
10 misattribution of identify takes away from the ability to
11 mobilize on or around specific needs and pushes
12 individuals, or specifically women and girls, into
13 believing that they don't belong. Is that, I guess, an
14 accurate summary of what you said?

15 **MS. JENNISHA WILSON:** When you say
16 "misattribution", as in when Inuit come to the south
17 they're identified as First Nations, or in terms of
18 narratives and conversations around human trafficking that
19 tend to exclude Inuit women in terms of documents,
20 resources and naming in any kind of Indigenous, or pan-
21 Indigenous resources?

22 **MR. ROY STEWART:** I was initially thinking
23 about just the first example that you gave, but I guess
24 thinking about both. So, if an Inuit woman or girl is
25 made to feel as if she doesn't belong, so say if it's a

1 young female coming from NunatuKavut and she comes to St.
2 John's, and either of those examples happen to her, that
3 is only going to increase her sense of isolation and
4 contribute to her vulnerability, do you agree with that?

5 **MS. JENNISHA WILSON:** Absolutely.

6 **MR. ROY STEWART:** And so, at previous
7 hearings, numerous of the previous hearings, we have heard
8 discussions about the absence of or inadequacy of services
9 in Labrador, whether it's services in or near communities,
10 and that Inuit women and girls, you know, from
11 NunatuKavut, at least that's who I can speak for today,
12 often travel hundreds of kilometres from their communities
13 for health services, you know, whether it's midwife
14 services, intervention services, and then there's
15 education and health. And so, we have that factor, and
16 then we're -- we have also heard about violence on Inuit
17 women and girls in the city.

18 And so, I was just -- given that St. John's
19 is so close to the Inuit of NunatuKavut and the other
20 Inuit peoples of Labrador, has the research that's been
21 done through the urban Inuit work that you presented on
22 here, has that done any research on St. John's being, sort
23 of, the, you know, primary urban hub for, I guess, the
24 first step for these women and girls to get to for safety
25 or for services?

1 **MS. JENNISHA WILSON:** So, I know that --
2 I'm not too sure. Are you familiar with the National
3 Urban Inuit Community Dialogue document that TI published?
4 So, as a part of that, St. John's was included as one --
5 as the urban hub and are identified by the community as
6 the urban hub for folks in this region or community close
7 neighbouring to St. John's as their community hub for
8 urban, I guess, resources and/or designate, if you want to
9 call it that.

10 In terms of vulnerability and for
11 trafficking, I think there are a couple of things that
12 you're talking about or saying, and I want to respond to.
13 One, yes, it's really good to have St. John's as a space
14 that may have resources to support. I'm not, again,
15 familiar with all the resources there, but the concerning
16 factor, for me, is having to actively relocate yourself
17 over 100, you said, kilometres or miles?

18 **MR. ROY STEWART:** I think it's a little
19 over probably 1,000 kilometres maybe.

20 **MS. JENNISHA WILSON:** Okay, that's
21 significant; right? And, in that 1,000 kilometres, a lot
22 can happen; right? This is what contributes to missing
23 and murdered Indigenous women; right? Having to go out of
24 your way, which is a significant barrier, to accessing
25 services will often push individuals to either not access

1 services and continue being vulnerable. You will see
2 people become really resilient in the sense where they
3 will come up with their own alternatives, which may or may
4 not be the best solution and/or they will go to services
5 that will -- that are harmful just because it's closer.
6 So, I think that, and what I'm trying to say is that, yes,
7 we, can look at St. John's as a place, but we also have to
8 look at where those other factors are that may or may not
9 contribute to provoking unsafe access to resources and
10 increasing vulnerability and trafficking of women and
11 girls.

12 **MR. ROY STEWART:** Okay. And, this morning,
13 you also recommended working with other Inuit-specific
14 partners to facilitate change for communities, and I was
15 just curious, were you speaking of Inuit-specific partners
16 in the urban setting, or Inuit partners located, you know,
17 in their traditional Inuit territory?

18 **MS. JENNISHA WILSON:** I think it's a
19 mixture of both. One of the things that -- unfortunately,
20 because of our funding, we had a year to develop a
21 strategy; right? And, a year is not a lot of time to
22 develop what I believe a truly comprehensive community-
23 involved strategy. And, this is not to take away from the
24 work that's happening on the ground. There's still good
25 work happening. But, it also minimizes how much you're

1 able to dedicate to building relationships with cross-
2 border community organizations and groups.

3 And so, in my ideal world, I would love to
4 make community partners with every single Inuit org. to
5 make sure that it's a consistent, inclusive, reflective
6 strategy, but the reality and the constraints of funding
7 do not often allow for that, and that is one of the major
8 barriers to doing this work.

9 **MR. ROY STEWART:** Okay. So, what you just
10 touched on, funding, that's what my last question is
11 directed at, and it's in relation to -- I believe it's
12 Exhibit 48, which is the National Urban Inuit Community
13 Dialogue document.

14 **MS. JENNISHA WILSON:** Yes.

15 **MR. ROY STEWART:** On page 15, it describes
16 particular concerns participants had on service delivery
17 and the administration of funding, and suggests a couple
18 of options, one being that an Inuit organization, for
19 example, ITK, would be capable of administering funding
20 for Inuit and improve proportional allocations to Inuit
21 populations.

22 Now, I'm in agreement that, you know, all -
23 - like you've just explained, all Inuit organizations,
24 groups, territories, need to be represented and need
25 services. But, let's say that this is the avenue chosen.

1 What happens to Inuit communities that are not represented
2 by ITK or fall underneath that umbrella?

3 **MS. JENNISHA WILSON:** I think that's a
4 really good question. I particularly do not think that
5 one organization should be responsible for such
6 allocation. It creates what I believe is a colonial
7 process of Big Brother and determining who and when
8 funding should be allocated based on meeting a particular
9 criteria. I think that perhaps a collection of governance
10 of different organizations that equally represent rural
11 versus urban versus land-claim regions may be more
12 appropriate to make sure the diverse perspectives are
13 achieved.

14 But, I think that when it comes to funding,
15 and it also -- this is how I also think about when
16 different organizations are funded resources to do work in
17 Indigenous communities, it's that folks need to stop
18 gatekeeping that funding and determining when and how
19 Indigenous folks are involved, but rather, look at
20 Indigenous communities as equal contributors to knowledge,
21 experts in their own right, and individuals who know
22 what's good for their community, and make -- break down
23 those barriers to accessing those funding.

24 So, whether it be act as a trustee and
25 simply allocate that money properly so that communities

1 can make sure they know what they're doing is happening on
2 the ground, but I don't -- I try to refrain from engaging
3 in the assumption that there should be organizations that
4 gatekeep funding, because it doesn't -- on the ground,
5 it's not making the impact that it needs to have for
6 community. It's actually creating even more barriers,
7 creating more hoops to jump through to justify why this is
8 needed.

9 We already know why it's needed; right?
10 And, I think that's where folks need to start thinking, is
11 how can we be allies versus people in power making
12 decisions on behalf of communities that we don't work with
13 on an every day basis. We're not on the ground.

14 **MR. ROY STEWART:** Thank you so much. I'd
15 love to chat more, but the Commissioners are always
16 denying me extra time, so...

17 **MS. JENNISHA WILSON:** I'm sorry to hear
18 that.

19 **COMMISSIONER MICHÈLE AUDETTE:** And, it's
20 not true. We didn't deny.

21 **MS. MEREDITH PORTER:** Thank you. The next
22 party to question the witnesses is from the Inuit Tapiriit
23 Kanatami, Ms. Elizabeth Zarpa, and Ms. Zarpa will have 15
24 minutes for questions.

25 **--- CROSS-EXAMINATION BY MS. ELIZABETH ZARPA:**

1 **MS. ELIZABETH ZARPA:** Good afternoon. My
2 name is Elizabeth Zarpa. I represent Inuit Tapiriit
3 Kanatami, and Inuit Tapiriit Kanatami represents the four
4 Inuit land-claim regions known as Inuvialuit, Nunavut,
5 Nunavik and Nunatsiavut, where about approximately 60,000
6 Inuit live.

7 I want to acknowledge the original
8 habitants of this land, namely the Mi'kmaw of Mi'gma'gi,
9 the Beothuk of Newfoundland, and the Inuit and Innu First
10 Nation of Labrador. I want to acknowledge Ms. Peogi
11 (phonetic) for taking care of the qulliq all week. I
12 appreciate it. And, I want to -- I appreciate all the
13 help from my colleagues in terms of allotting me their
14 time voluntarily. I didn't ask for it, but that's great
15 that they came to me. Nakurmiik for that.

16 My questions will be very rushed, because I
17 feel as though I'm trying to get through a lot of ground
18 in a little bit of time, but my questions will be to you,
19 Ms. Sheutiapik, and also you, Ms. Wilson. Ms. Wilson, are
20 you comfortable speaking to the documents that were
21 tendered as exhibits?

22 **MS. JENNISHA WILSON:** Yes.

23 **MS. ELIZABETH ZARPA:** Okay. I will read
24 this paragraph out verbatim so you don't have to access
25 it, but it's in the Sexual Exploitation and Trafficking of

1 Aboriginal Women and Girls, Exhibit No. 45 at page 73.
2 And, it states, verbatim, "Additionally, we would like to
3 specifically address the aspects of torture in sexual
4 exploitation and trafficking. Torture that occurs in the
5 context of intimate relationship and trafficking is
6 dismissed as an assault or domestic violence. Two of the
7 key informants that were interviewed spoke of how
8 disappointed they were in Canada because of the present
9 government's refusal to change Section 269.1 of the
10 *Criminal Code* so that a private individual, a non-state
11 actor who commits classic torture can be criminally
12 charged for the crime of torture they perpetuate. Making
13 such a change in the *Criminal Code* was a recommendation
14 given to Canada by the United Nations Committee Against
15 Torture in 2012. They explained further that the *Criminal*
16 *Code* only criminalizes torture perpetuated by the state
17 actors such as military and police personnel. Currently,
18 the definition of human trafficking is about perpetrators
19 who work to enslave a victim to the ways described in the
20 Canadian law and the U.N. protocol to prevent, suppress and
21 punish trafficking in persons, especially women and
22 children. The interviewee strongly emphasized that once
23 enslaved, the reality is that many are tortured, and
24 Canadian law does not provide for holding such torturers
25 criminally accountable for the torture they inflict. They

1 must be to eliminate discrimination under the law and
2 support the human and legal rights of women and girls so
3 victimized to speak their truth, be heard and seek
4 justice.”

5 That was a long paragraph, but would you
6 support a change to Section 269.1 of the Canadian *Criminal*
7 *Code* to reflect the torture women and girls experience in
8 sexual exploitation and trafficking by non-state actors?

9 **MS. JENNISHA WILSON:** I think that torture
10 that happens in terms of the grooming process or the
11 keeping of someone in trafficking is definitely something
12 that needs to be considered. I say this because, again,
13 based on just narratives from community members around
14 when a judge asks you, “Well, why did you stay if you had
15 the ability to leave a room because your trafficker was
16 not there?” And, that is used to dismiss victimism or
17 being a victim. It fails to see how things that happen
18 outside of, you know, the hotel room. So, being tortured
19 psychologically keeps someone in a room even if they are
20 able to leave, because they know that they don’t want to
21 go back into a situation where they’re going to be
22 tortured. So, yes, I think that definitely needs to be
23 considered.

24 **MS. ELIZABETH ZARPA:** Okay, thank you for
25 that. And, also throughout your testimony, you

1 highlighted that Inuit women, to exit the sex work, have
2 to have meaningful employment. And, from that, I would
3 like to understand a little bit more around two questions.
4 One is what are the financial barriers facing Inuit women
5 living in Ottawa who are put in vulnerable positions to be
6 exploited? And, also, secondly, what resources are
7 essential for Inuit women in a city like, for instance,
8 Halifax where there are low numbers of Inuit?

9 **MS. JENNISHA WILSON:** So, for your first
10 question, I think one of the realities for Inuit that are
11 vulnerable is that they live under the poverty line or
12 just at the poverty line, which means that on an every day
13 basis, you're sacrificing a certain aspect of your well
14 being, whether it be access to food to sustain yourself in
15 order to cover rent, or you're couch surfing because you
16 can't afford rent. You're always sacrificing something,
17 and it's, I think, to a certain extent, you're violating
18 your own human rights because of poverty, structural
19 poverty and violence; right? So, I think that's one of
20 the major forerunners for why individuals become
21 vulnerable, become groomed and cooned (ph) into -- by
22 traffickers to say, "I can provide you somewhere to
23 sleep," and that covers one of the vulnerabilities; right?

24 To answer your second question, I can't
25 really speak to Halifax, but I can speak to where there's

1 low numbers of individuals and I'll liken it to Kitchener,
2 Waterloo, for example, where there are low numbers of
3 Inuit. I think in those spaces, just like how TI started,
4 and ITK, is that you have to work with friendship centres,
5 you have to work with partnering agencies that understand
6 Indigenous realities in order to build capacity and to
7 show that there is a need until, of course, the government
8 realizes that we just need to ensure that there's ever
9 flowing funding; right?

10 **MS. ELIZABETH ZARPA:** Right. Thank you for
11 that. I appreciate you touching based on those -- that
12 important area.

13 **MS. JENNISHA WILSON:** Certainly.

14 **MS. ELIZABETH ZARPA:** Okay. And, in
15 Exhibit 48, which is the National Urban Inuit Community
16 Dialogue, at page 22 and 23, it outlines the Urban Inuit
17 St. John's Action Plan. And, it outlines things that
18 Inuit in St. John's have issues with, like accessing
19 transportation while in the city and also creating
20 programming to help facilitate the Inuit experience while
21 in St. John's, like access to language classes or the
22 creation of the Inuk and Town pamphlet. Are these action
23 plans and the manifestation of these efforts remunerated?

24 **MS. JENNISHA WILSON:** What do you mean by
25 that?

1 **MS. ELIZABETH ZARPA:** Are they paid
2 positions to create these -- to manifest these action
3 plans, is the work that needs to go into that volunteer or
4 is it paid?

5 **MS. JENNISHA WILSON:** So, my understanding
6 is -- at least my personal perspective is that I really
7 hope they're paid positions, because I don't think that
8 we're honouring community members and their knowledge by
9 not paying them for their time to put towards this work.

10 I will say that the National Urban Inuit
11 Community Dialogue was the starting place for how funding
12 for that particular funding pot for urban Aboriginal -- I
13 forget the name of the actual funding pot -- would allocate
14 over the course of, I think, three to five years; right?
15 So, they were trying to create what was needed to show
16 funders that this is the action plan they have put forth.
17 So, I can't speak to that, but I can suggest that I'm
18 assuming that all of this was created with the intent of
19 paid positions for Inuit by Inuit in their communities.

20 **MS. ELIZABETH ZARPA:** Okay. Thank you for
21 that. And, also, in your PowerPoint presentation, which
22 is Exhibit 50. On the slide that relates to factors that
23 relate to Inuit vulnerability to sex trafficking or
24 exploitation, it states that a lack of awareness of what
25 grooming for exploitation looks or feels like. Could you

1 please, in brevity, explain what does grooming for
2 exploitation look or feel like on the grounds, say for
3 instance of an Inuk woman who lives in, like, Nunavik, or
4 Nunavut or ---

5 **MS. JENNISHA WILSON:** So, for folks that
6 live in the land claim regions, grooming can happen online
7 for example, where someone will befriend you on Facebook
8 and tell you that they have job opportunities in the
9 south. They will literally ask questions about what is --
10 what are your basic needs and how can they fulfil those by
11 you coming to the south? And, that is used as the bait
12 for getting folks to come to the south. So, someone will
13 befriend you, say, "Hey, if you come down south, I'll buy
14 your ticket. I'll have job opportunities set up for you."
15 And, individuals will buy into this, assuming that someone
16 cares about me and they have an opportunity for me. And
17 so, that is one of the most common narratives we have with
18 the women that we work with.

19 **MS. ELIZABETH ZARPA:** Okay. So, it's
20 predominantly through social media. And then in the
21 experience of, say for instance, a woman recognizes this
22 is a grooming experience for exploitation, living in the
23 northern region, who did that individual generally go to?
24 For example, if they go to the RCMP in the north, is there
25 a specialized unit dealing with human trafficking in Inuit

1 Nunangat?

2 **MS. JENNISHA WILSON:** So, from my
3 understanding, the RCMP has acknowledged and signed on to
4 addressing human trafficking issues. That was information
5 shared at the Public Safety Human Trafficking Summit that
6 happened recently in September. Yes, naturally someone
7 would go to the RCMP because they are the designate for
8 human trafficking in the north. Whether or not there is
9 trust, there is -- that that would be helpful, and if
10 people comfortable doing so, I cannot speak to that. But,
11 those are probably competing or conflicting barriers to
12 why they may not go forth.

13 **MS. ELIZABETH ZARPA:** And, is there
14 anything in place for youth who -- from TI for instance,
15 if they wanted to contact an Inuit specific organization
16 and elaborate that this is happening, is there a contact
17 person at TI?

18 **MS. JENNISHA WILSON:** So, one of the things
19 that we've been working on throughout TI and is part of
20 the program is making sure that everyone, so the entire
21 staffing team is educated on what human trafficking is and
22 what sex work -- or sex trade work looks like, as a means
23 of ensuring that there is no one person, you can go to
24 anyone and they should have that knowledge to support and
25 direct you to the appropriate service. That is something

1 that is a part of this year's plan for the project.

2 **MS. ELIZABETH ZARPA:** Thank you so much.

3 My next questions will go towards you, Ms. Sheutiapik. In
4 your -- thank you for your testimony this morning. It was
5 very powerful.

6 **MS. MEALIA SHEUTIAPIK:** You're welcome.

7 **MS. ELIZABETH ZARPA:** In your two decades
8 of living in Ottawa, have you seen the number of Inuit,
9 like vulnerable Inuit women decreasing or increasing
10 throughout your lived experience?

11 **MS. MEALIA SHEUTIAPIK:** I think it's every
12 year increasing.

13 **MS. ELIZABETH ZARPA:** Increasing?

14 **MS. MEALIA SHEUTIAPIK:** Yes.

15 **MS. ELIZABETH ZARPA:** Okay. And, you also
16 highlighted when you were speaking that -- you highlighted
17 that you try and help Inuit women who are in vulnerable
18 positions, and -- but that the drugs are strong. Can you
19 please elaborate on what you mean by the drugs are strong?

20 **MS. MEALIA SHEUTIAPIK:** Well, first of all,
21 hash and marijuana are not harsh as cocaine and heroine
22 are, and that's what I mean by hard drugs.

23 **MS. ELIZABETH ZARPA:** Okay. And, from
24 seeing an increased number of Inuit women who are probably
25 really strong, but also there's an increasing number of

1 Inuit women who are also vulnerable, could you -- like,
2 are the types of drugs becoming stronger than, say, hash
3 or marijuana?

4 **MS. MEALIA SHEUTIAPIK:** Very much. Today,
5 yes. And, all those opiates that they talk about and go
6 on the news. I think anybody could be vulnerable to those
7 kind of stuff; right? And, it's more on the streets out
8 there, like heroine and opiates.

9 **MS. ELIZABETH ZARPA:** And, you're seeing
10 that throughout the community that we're talking about?

11 **MS. MEALIA SHEUTIAPIK:** Even in Ottawa,
12 yes.

13 **MS. ELIZABETH ZARPA:** Okay.

14 **MS. MEALIA SHEUTIAPIK:** And, it's even
15 travelling up north too. So, it's not only Ontario,
16 Quebec or any other province, even up north too.

17 **MS. ELIZABETH ZARPA:** Okay. And, also, for
18 instance, if you're dealing with, sort of, a -- you want
19 to decrease or reduce your consumption on, like, an
20 addictive abuse -- I mean, addictive substance, in
21 accessing programming like Native treatment or Aboriginal
22 treatment as an Inuk woman, could you please explain that
23 experience?

24 I guess what I'm trying to say here is, as
25 an Inuit woman who accesses different types of programs in

1 the south, in an urban centre, that's geared towards
2 Indigenous populations or Native populations or Aboriginal
3 populations. As an Inuk woman, is that pan-Aboriginal or
4 pan-Indigenous approach reflective of your needs in that
5 moment?

6 **MS. MEALIA SHEUTIAPIK:** I think the
7 treatment should be longer than one month like we have
8 today, because that's the longest I've ever been in a
9 treatment, is one month, and that's not enough.

10 **MS. ELIZABETH ZARPA:** Okay.

11 **MS. MEALIA SHEUTIAPIK:** It should be
12 longer, like maybe six months to a year.

13 **MS. ELIZABETH ZARPA:** Okay.

14 **MS. MEALIA SHEUTIAPIK:** That's if the
15 person is strong enough. Like, I don't mind going to a
16 treatment for six months instead of just one month.

17 **MS. ELIZABETH ZARPA:** Okay. And, if it's
18 Inuit specific or non-Inuit specific, it's okay either
19 way?

20 **MS. MEALIA SHEUTIAPIK:** Well, mostly for
21 Aboriginal and Inuit, because we have a lot of -- we're a
22 little bit different than white people or anybody else,
23 because we have strong self-esteem. And, we learn how to
24 tough things out by our own sometimes, without any help.
25 Yes.

1 **MS. ELIZABETH ZARPA:** Okay, one more
2 question. And, would you, Ms. Sheutiapik, think that --
3 from your experiences, does the high cost of flights from
4 the North to the South create an inseparable barrier for
5 Inuit women and girls?

6 **MS. MEALIA SHEUTIAPIK:** Very much, yes.

7 **MS. ELIZABETH ZARPA:** Okay, thank you.

8 **MS. MEALIA SHEUTIAPIK:** You're welcome.

9 **MS. MEREDITH PORTER:** Thank you. The next
10 party I would like to invite to the podium is from the
11 Regina Treaty Status Indian Services, Ms. Erica Beaudin.
12 And, Ms. Beaudin will have six minutes for questions.

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

14 **MS. ERICA BEAUDIN:** Thank you. Good
15 afternoon. Wela'lin to the elders, drummers and singers
16 for their prayer songs. Ee-na-ga-muk (phonetic) for the
17 lighting of the qulliq. Once again, I acknowledge and
18 thank the L'nu for the welcome to the unceded territories
19 of the Mi'kmaw and Beothuk, as well as the Inuit, Innu
20 people call this home. My name is Erica Beaudin, and I
21 hold the position of Executive Director of the Regina
22 Treaty Status Indian Services out of Treaty 4 Territory in
23 what is now Saskatchewan.

24 Ms. Sheutiapik, may I call you Mealia?

25 **MS. MEALIA SHEUTIAPIK:** Yes.

1 **MS. ERICA BEAUDIN:** And, did I say your
2 name correct? Could you ---

3 **MS. MEALIA SHEUTIAPIK:** Yes, Mealia.

4 **MS. ERICA BEAUDIN:** Mealia.

5 **MS. MEALIA SHEUTIAPIK:** But, my birth
6 certificate is Marya, so everybody calls me Mealia.

7 **MS. ERICA BEAUDIN:** Mealia?

8 **MS. MEALIA SHEUTIAPIK:** Yes.

9 **MS. ERICA BEAUDIN:** Okay. Thank you for
10 your courage in coming to share your truth. You are the
11 very definition of resiliency, bravery and love. Your
12 story, both the highs and the lows, have inspired me, and
13 I will remember your words when I feel down. We need to
14 remember how strong we are.

15 My first question is to you. I was a
16 mother at 19, which is very close to your age when you
17 became a mother. I think back now and wonder how did I
18 ever survive that first year? You had many more
19 challenges than I did. Saying that, because I had a very
20 unstable relationship with my daughter's father, there
21 were times I had to be on assistance. It was a last
22 resort for me, because I knew that being on assistance
23 invited social workers into my home and to pass judgment
24 on all aspects of my life. Other than being in a violent
25 relationship, this was the scariest time in my life. My

1 child was my life. My life was not perfect, and Creator
2 knows it definitely wasn't white or mainstream perfect.

3 If there was an Inuit-centred comprehensive
4 program that included a safe home, addictions counselling,
5 training and education opportunities, parenting classes
6 and one-on-one trauma counselling, would this have created
7 a different future for you, your child and other children
8 to come?

9 **MS. MEALIA SHEUTIAPIK:** Very much, yes.

10 **MS. ERICA BEAUDIN:** Would you consider that
11 a recommendation for the Commissioners to put forth?

12 **MS. MEALIA SHEUTIAPIK:** Yes.

13 **MS. ERICA BEAUDIN:** You came to ---

14 **MS. MEALIA SHEUTIAPIK:** I think it will be
15 very strong, yes.

16 **MS. ERICA BEAUDIN:** Thank you. You came to
17 the city at a young age. It must have been the very
18 definition of culture shock. If there was a youth centre
19 or youth programming that focused on Inuit language and
20 culture, would you have gone there?

21 **MS. MEALIA SHEUTIAPIK:** Yes, I would have.

22 **MS. ERICA BEAUDIN:** If that centre had
23 programming that focused on girls, young women and
24 supported young Inuk women to know their rights and how to
25 survive in this new program, would that have helped and

1 would have that maybe changed your future?

2 **MS. MEALIA SHEUTIAPIK:** Very much. I think
3 I would still have all my kids, even though I talk to my
4 kids every now and then, but that would have really helped
5 back then, yes.

6 **MS. ERICA BEAUDIN:** Thank you. You spoke
7 about the courses and certificates that you have, and how
8 these qualifications didn't necessarily help you get a
9 job. If these courses had jobs attached to them at the
10 successful end of the course, would this have also may
11 have changed your life at certain points?

12 **MS. MEALIA SHEUTIAPIK:** Very much, yes.

13 **MS. ERICA BEAUDIN:** Thank you.

14 **MS. MEALIA SHEUTIAPIK:** You're welcome.

15 **MS. ERICA BEAUDIN:** You seem to be at a
16 good point in your life. Knowing yourself, in a perfect
17 world, what supports do you need to keep on this path?
18 That's the first part. The second is, do you believe that
19 people who have to deal with grieving on top of grieving
20 require years-long supports to live the best life they
21 can?

22 **MS. MEALIA SHEUTIAPIK:** Yes. And, the
23 first question again was? Sorry.

24 **MS. ERICA BEAUDIN:** Knowing yourself, in a
25 perfect world, what supports do you need to keep on this

1 path right now?

2 **MS. MEALIA SHEUTIAPIK:** Well, more --
3 there's no Inuk therapist, because our ancestors were very
4 strong. We would go to our elders asking, seeking for
5 help or what can we do next, and we don't have that much
6 in Ottawa or Ontario. Plus, we don't really have many
7 elders anymore like we did back then. I think it would be
8 nice to get some more training for Inuit people to be a
9 therapist or some kind of training for Inuit people to
10 counsel people like me how I was back then.

11 **MS. ERICA BEAUDIN:** Thank you for your time
12 today. I hold your words with honour.

13 **MS. MEALIA SHEUTIAPIK:** Thank you.

14 **MS. ERICA BEAUDIN:** Ms. Wilson, may I call
15 you Jennisha?

16 **MS. JENNISHA WILSON:** Yes, you may.

17 **MS. ERICA BEAUDIN:** Okay, my next couple
18 questions in 1 minute and 20 seconds are for you. You
19 spoke a bit about Gladue. Can you explain how you feel
20 that using Gladue for survivors is important and when it
21 should be used? And then the second part of that, because
22 we're running out of time, do you feel the government
23 should support Gladue applications through better funding
24 and training more Gladue writers that are free of charge
25 for the woman who utilize your services?

1 **MS. JENNISHA WILSON:** So, to answer your
2 second one, absolutely. The first one, so the Gladue
3 process essentially allows for a very extensive narrative
4 of why someone has become a victim, so it encompasses that
5 structural violence, it encompasses colonialism, colonial
6 legacies, experiences of witnessing particular things in
7 life that has led them to become vulnerable. It allows
8 for a victim to truly identify how the state has
9 participated in creating their vulnerability.

10 And so, the Gladue report is usually used
11 within -- in the context of Ottawa, the Indigenous
12 People's Court to look at a victim or someone who has
13 committed a crime to suggest what are better
14 recommendations than putting them in incarceration and/or
15 denying them as victims and looking at more restorative
16 justice practices for supporting resiliency. And so, I
17 think that if that was considered for human trafficking
18 victims and not just seeing them as someone who may or may
19 not have been able to leave a situation, as someone as an
20 active agent and looking at different forms of
21 normalization processes of violence, then a lot more cases
22 would actually be tried in court and be successful,
23 specifically for Indigenous women.

24 **MS. ERICA BEAUDIN:** Thank you, nakurmiik.
25 That's my time for today.

1 **MS. MEREDITH PORTER:** Thank you. The next
2 party I would like to invite up to the podium is from the
3 Vancouver Sex Workers' Rights Collective, Ms. Carly
4 Teillet. And, Ms. Teillet will have nine-and-a-half
5 minutes for questions.

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

7 **MS. CARLY TEILLET:** Tashi, bonjour and good
8 afternoon. I would like to begin by acknowledging our
9 presence on the ancestral territory of the Beothuk and the
10 Mi'kmaw, and on lands that Inuit, Innu and Southern Inuit
11 call home, and to acknowledge the spirits of our women and
12 girls, their families, the survivors, the elders and
13 medicines, and the sacred items that are here with us
14 today.

15 I have the incredible honour of acting as
16 counsel for a collective of Indigenous women and LGBTQ,
17 two-spirit and gender fluid individuals who engage in sex
18 work and trade in Vancouver's Downtown Eastside. May I
19 call you Mealia?

20 **MS. MEALIA SHEUTIAPIK:** Yes.

21 **MS. CARLY TEILLET:** Thank you ---

22 **MS. MEALIA SHEUTIAPIK:** Thank you.

23 **MS. CARLY TEILLET:** --- for sharing your
24 truth, your story.

25 **MS. MEALIA SHEUTIAPIK:** You're welcome.

1 **MS. CARLY TEILLET:** Indigenous women
2 survivors of violence, people who are current or former
3 sex workers hold valuable knowledge and that needs to be
4 shared. I will not be asking you about your experiences
5 as a youth, vulnerability, anything you have witnessed or
6 experienced, because that's your story and that's not
7 appropriate. But, listening to your story, I heard how
8 you constantly made choices to survive, to move forward,
9 how you resisted violence and poverty, lack of services
10 and government services.

11 For my clients, their lives, their
12 experiences and their reasons for engaging in sex work and
13 trade is very personal to them, and every woman I have
14 spoken with has a different and very important story about
15 how and why they did sex work and trade. And so, on their
16 behalf, I want to thank you for so powerfully raising that
17 assumptions about sex workers can be inaccurate and
18 harmful.

19 **MS. MEALIA SHEUTIPIK:** Yes.

20 **MS. CARLY TEILLET:** You talked about
21 services and having to push for services. And, one of
22 your recommendations was to have people walking, and I
23 love that, so I want to talk to you a little bit about
24 accessing services. So, one of the initiatives that some
25 of my clients' use is a mobile access van that drives

1 around in the community. It goes to where the women are.
2 They don't have to come to a building. It goes to where
3 the women are. And, the van provides harm reduction
4 supplies for those that use substances, food. It helps
5 them complete bad date reports to help keep other women
6 safe. And acts as a way to help them assist to get
7 information about housing, information about programs and
8 services, access to healthcare. Might this be the kind of
9 service that you think would be helpful when you talk
10 about walking?

11 **MS. MEALIA SHEUTIAPIK:** Very much. That
12 would -- that sounds very interesting actually. I heard
13 about that before. It just never happened in Ottawa
14 specifically. I think that would be very helpful. And
15 those bad date list thing, because the girls are very
16 fragile in every way. They might think they're not, but
17 they are.

18 And a vehicle like that, what is that?
19 Harm reduction vehicle?

20 **MS. CARLY TEILLET:** So it's a mobile access
21 vehicle and it goes and it provides ---

22 **MS. MEALIA SHEUTIAPIK:** Oh.

23 **MS. CARLY TEILLIET:** --- multiple different
24 types of services.

25 **MS. MEALIA SHEUTIAPIK:** I think that would

1 be beautiful and just right for Ottawa, because there's a
2 lot of girls like that in Ottawa now and it's accumulating
3 almost every year.

4 **MS. CARLY TEILLET:** Thank you. My clients
5 have told me that they have a -- there's a combination of
6 factors that go into accessing services and calling the
7 police. And so some of those are a fear of violence,
8 losing their children or housing, how they're treated by
9 service providers for being sex workers, for being
10 Indigenous women, for being homeless, and how they're
11 treated by the police, and that there's a general lack of
12 trust of service providers and of the police. And so I
13 was wondering if you could share a little bit about the
14 importance of trust in being able to access services and
15 feel safe?

16 **MS. MEALIA SHEUTIPIK:** I think it's kind
17 of hard for the girls to have trust in just anybody in
18 general, mostly about the police, policing system, how
19 they look down at people and how they treat people. And
20 then they just end up driving away without wanting to or
21 help, without looking at your background, what happened
22 before. They don't ask questions if you're going to be
23 okay. They don't look at your background or they don't
24 want to ask you questions what happened before you're
25 here, what happened before you got yourself here. That's

1 a make you want to not trust the cops then or not -- it's
2 not the trust part about -- it's not that part about
3 trusting a cop. It's how they treat you and look at you
4 and look down at you, mistreating you and that's when the
5 trust -- we lose trust in anybody else by feeling -- from
6 your gut feeling; right? Yeah.

7 **MS. CARLY TEILLET:** Thank you. Thank you
8 for sharing your voice, your truth and for your incredible
9 strength.

10 **MS. MEALIA SHEUTIAPIK:** Thank you and
11 you're welcome too.

12 **MS. CARLY TEILLET:** My next question is for
13 Jennisha, if I may call you that?

14 **MS. JENNISHA WILSON:** Absolutely.

15 **MS. CARLY TEILLET:** Wonderful. So I'd like
16 to talk to you a little about meeting and providing
17 services for women from where they are. In particular,
18 kind of appropriate services and what the stigma of sex
19 work and the stigma surrounding substance misuse of
20 alcohol and drugs and how that plays into service
21 provision. And I think you used the word there's this
22 idea of people that deserve help.

23 So in 2013 about 160 sex workers in the
24 downtown east side were interviewed by peers about a
25 variety of topics. And I'm just going to share what they

1 said about self-care.

2 **MS. JENNISHA WILSON:** M'hm.

3 **MS. CARLY TEILLET:** Firstly, each person
4 did multiple things to self-care and there's no -- they
5 had no one single definition of what that was. So some of
6 the things they talked about was grounding themselves,
7 keeping their body healthy, reflecting on themselves in a
8 positive way.

9 **MS. JENNISHA WILSON:** M'hm.

10 **MS CARLY TEILLET:** Seeing friends and
11 family. And around a 50 per cent of the individuals that
12 were interviewed said that using drugs was self-care.
13 Some called it self-medication.

14 **MS. JENNISHA WILSON:** M'hm.

15 **MS. CARLY TEILLET:** And about 30 per cent
16 of them said that having sex was self-care.

17 **MS. JENNISHA WILSON:** M'hm.

18 **MS. CARLY TEILLET:** Now, unfortunately,
19 often Indigenous women, and sex workers in particular, are
20 blamed for the violence they experience and services that
21 they access may further harm them by triggering them or
22 erasing how they tell their truth.

23 **MS. JENNISHA WILSON:** Absolutely.

24 **MS. CARLY TEILLET:** Erasing that that's
25 self-care, their resistance, and try to correct them to

1 make them think that they're damaged or they're not
2 survivors. So can you speak briefly to the importance of
3 providing services for women where they are in their
4 journey and respecting their truth?

5 **MS. JENNISHA WILSON:** Absolutely. I think
6 that one of the main factors in being able to do that is
7 having people with experience on your team, so they know
8 where folks are coming from; right? So something I don't
9 openly share, but depending on the context, is that almost
10 everyone on my team has experienced sexual violence in
11 some capacity, have history of being sex workers and/or
12 engaged in transactional sex, or have a family member,
13 relative or close friend that they have supported through
14 that journey.

15 And that was one of the leading factors,
16 along with the cultural aspect, being from community, to
17 be hired on my team. That stood out more importantly for
18 me than coming with a certificate. Because at the end of
19 the day, you can understand theory, but may not know how
20 that applies in the real world context.

21 So for meeting where people where they're
22 at, you can always get training, but you have to come with
23 that lived reality and/or significant understanding of
24 what that looks like.

25 And so we do also engage in different forms

1 of self-care, boosting self-esteem, looking at treating
2 yourself as a human being and as whole. And there is no
3 conversations of what is sex -- what is correct forms of
4 sex positivity or anything like that. We allow for the
5 women to -- and men who are part of our program, to direct
6 what that looks like.

7 And a lot of our programming is always,
8 always centred around improving self-pride for Inuit
9 through engaging and creating community pride. So they
10 see that strong connection of doing things in communal
11 settings to improve their own self-worth and understanding
12 of pride.

13 So we try to create a lot of our program
14 around that.

15 **MS. CARLY TEILLET:** That's my time. Thank
16 you all very much. Meegwetch.

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

18 The next party I'd like to invite to the
19 podium is from the Missing and Murdered Indigenous Women
20 and Girls Manitoba Coalition, Ms. Sandra Delaronde. And
21 Ms. Delaronde will have nine-and-a-half minutes for
22 questions.

23 **--- CROSS-EXAMINATION BY MS. SANDRA DELARONDE:**

24 **MS. SANDRA DELARONDE:** Thank you. Good
25 afternoon, Chief Commissioner, Commissioners. Good

1 afternoon, witnesses.

2 I'd like to acknowledge the sacred mantle
3 that sits in the middle of the room that carries the hope,
4 carries the voice and the strength of all of our ancestors
5 and the spirit of this land. And I just want to say
6 metaquayasin (ph).

7 I'm not very good at pronunciations of
8 names, so I'm going to try my best. And if I pronounce
9 your name wrong, feel free to correct me. Maria (ph)?

10 **MS. MEALIA SHEUTIAPIK:** Yes.

11 **MS. SANDRA DELARONDE:** Okay. I was sitting
12 with my sisters from Manitoba at lunchtime today and we
13 want to honour you for your strength and to acknowledge
14 your healing and that to acknowledge that healing just
15 does not take place by talking with a therapist, but to
16 acknowledge your healing through feeding your community,
17 you know, and providing them with your love and your
18 strength through your food and that greatness, you know,
19 of that meal extends across generations and extends across
20 time. So, such beautiful work that you do and, you know,
21 keep continuing to heal yourself in that way and heal your
22 community and all of us, in fact, so thank you.

23 **MS. MEALIA SHEUTIAPIK:** Thank you. Yeah,
24 thank you.

25 **MS. SANDRA DELARONDE:** I wanted -- I had a

1 couple of questions to ask you because of your strength
2 and your ability to work within community and your lived
3 experience. There's been this great debate for several
4 years about whether the people that are involved in the
5 sex trade -- and I might use the wrong terms, so, you
6 know, forgive me if I do -- or have been trafficked, so
7 there's this question about the legalisation of sex work.
8 As a person who's experienced that in, you know, most
9 challenging situations, most challenging choices, what do
10 you think of that conversation?

11 **MS. MEALIA SHEUTIAPIK:** I was really
12 nervous and scared. I've been shy about it for so many
13 years, because I think it's not something just anybody
14 talks about daily. But, I think it's been eating me
15 inside for so many years. I got tired of abusing myself,
16 so I finally made that step and just to keep moving
17 forward, that I have to talk it out. The more I keep it
18 inside, I'm not sure which way I would go or which way I'm
19 going to go? The only way I can keep moving forward is
20 I've got to talk it out and seek some more help and still
21 do counselling every week. I'm not going to stop doing
22 what I'm doing and I'm not going to give up.

23 **MS. SANDRA DELARONDE:** So, the harms that
24 you encountered and the trauma are taking, you know,
25 incremental steps to your healing then?

1 **MS. MEALIA SHEUTIAPIK:** Yes.

2 **MS. SANDRA DELARONDE:** So, I wanted to ask
3 a question about CFS or Child and Family Services, and
4 your involvement. Did you find when you were in your
5 crisis situation that -- did CFS provide support to you to
6 maintain your family home with your children or did they
7 do something else?

8 **MS. MEALIA SHEUTIAPIK:** They didn't do
9 nothing. They didn't ask if I need help. They didn't --
10 they never asked me if I need something to make me better
11 or -- they never asked questions to me. They're only
12 concerned about my kids.

13 **MS. SANDRA DELARONDE:** Okay.

14 **MS. MEALIA SHEUTIAPIK:** They didn't even
15 offer me counselling or -- I did a parenting course with
16 them and that's about it.

17 **MS. SANDRA DELARONDE:** Okay. So, you
18 didn't feel they provided help to you to keep your kids
19 with you?

20 **MS. MEALIA SHEUTIAPIK:** No. I had to seek
21 for help by myself.

22 **MS. SANDRA DELARONDE:** Okay. Thank you.

23 **MS. MEALIA SHEUTIAPIK:** You're welcome.

24 **MS. SANDRA DELARONDE:** So, yesterday, the
25 police officers, and I can't recall which one, said that

1 you can't help -- you cannot get people out of situations
2 of trafficking unless they want to get out. But, if
3 you're in situations that -- where you don't really know,
4 how can you support -- from your experience, how do you
5 think you could -- we can all provide support to women who
6 want to move out of situations of being trafficked?

7 **MS. MEALIA SHEUTIAPIK:** Just like I said,
8 the outreach workers try to help, but they -- they don't
9 really ask questions. I think they're not supposed to.
10 I'm not sure. But, I don't know. It's not my thing to
11 say. But, it would be nice if they can ask questions to
12 the street workers or street walker, if they can try and
13 at least help them get out of it instead of just feeding
14 them if they're hungry or giving them whatever they need.
15 If they can at least maybe do a little -- what do you call
16 those -- like, questionnaire. If the girl is comfortable
17 enough to fill that out, only just a brief little
18 questionnaire, it would be nice, like -- and then try and
19 help the person after, like what do you need, or what made
20 you go here, and what can we do to help you to get off the
21 streets?

22 **MS. SANDRA DELARONDE:** Okay. Thank you.
23 Just one last thing, on behalf of my sisters from
24 Manitoba, we just want to say that we love you.

25 **MS. MEALIA SHEUTIAPIK:** Thank you very

1 much.

2 **MS. SANDRA DELARONDE:** And, we honour you.

3 I have my next question to Jennisha.

4 **MS. JENNISHA WILSON:** You said it right.

5 **MS. SANDRA DELARONDE:** Okay. So, you
6 stated that you can't tell if the trafficker is Caucasian,
7 black or Inuit, but can you tell us that it's all of those
8 groups?

9 **MS. JENNISHA WILSON:** Absolutely.

10 **MS. SANDRA DELARONDE:** Okay.

11 **MS. JENNISHA WILSON:** It's not just those
12 three groups, but it's a variety, but, yes.

13 **MS. SANDRA DELARONDE:** Can you tell us if,
14 in this profile that you have, if the perpetrators are
15 gang involved, either street or organized crime?

16 **MS. JENNISHA WILSON:** Some are
17 predominantly in formal street involved gangs. Almost the
18 likening of someone who has status on the streets because
19 of their reputation of perpetuating violence towards women
20 or towards others.

21 **MS. SANDRA DELARONDE:** Okay. And, I also
22 wanted to point to the Gladue factors. And, often used, I
23 think, the focus is on the, you know, of course, the
24 colonial aspects and challenges that an individual faces,
25 but I also think of part 2 and how that's not actually

1 being used and, you know, what are the strengths of the
2 community and how the community can support an individual.
3 Do you think that using the Gladue factors to support
4 victims is also a critical part of the court process or
5 justice process?

6 **MS. JENNISHA WILSON:** Absolutely. I think
7 that's the more critical aspect of it. Because the
8 reality is, you can suggest recommendations, but if you
9 don't -- again, the capacity to support an individual, it
10 will again lead to the cycle of violence; right? At TI,
11 we're very fortunate to have a restorative justice program
12 and a Gladue program, where we're able to ensure someone
13 is guided through that process of reintegration in a
14 positive way.

15 **MS. SANDRA DELARONDE:** Okay. Thank you. I
16 guess I just have time for a "yes" or a "no" answer from
17 Dr. Moffitt. Well, it might be a bit more than ---

18 **MS. MEREDITH PORTER:** Actually, you're out
19 of time at this point.

20 **MS. SANDRA DELARONDE:** Can I just put the
21 question on the record? What are the forms of
22 intergeneration strengths that you have seen? Thank you.

23 **DR. PERTICE MOFFITT:** Want me to answer it?

24 **MS. MEREDITH PORTER:** Well, I guess
25 briefly. We're going to take a break anyway. I would ask

1 for a break.

2 **DR. PERTICE MOFFITT:** So, go ahead?

3 **CHIEF COMMISSIONER MARION BULLER:** I think
4 we'd all like to hear the answer ---

5 **MS. MEREDITH PORTER:** Okay.

6 **DR. PERTICE MOFFITT:** Oh.

7 **CHIEF COMMISSIONER MARION BULLER:** --- and
8 then we'll take a break. Thank you.

9 **DR. PERTICE MOFFITT:** Okay. One thing, in
10 terms of intergenerational strengths that has come up, and
11 I think by Amy Bombay when she was talking about, you
12 know, when we talk a lot about the residential school
13 experience and we hear a lot of the stories that are
14 gruesome and awful, sometimes we -- it has this effect of
15 being very oppressive and it carries on. And, one of the
16 things that I think I heard her say in a presentation was
17 that we need to acknowledge those elders and those people
18 who hid the children away during that schooling time, and
19 the strengths that they had, and we need to think about
20 people who came out of a residential school, like, they
21 still had their culture and they were able to demonstrate
22 the strength of regaining these things. So, there are
23 some very strong people. And, we just want to always know
24 that we have strong women in the territory -- we see it all
25 the time -- resilient women. And, they are survivors.

1 They're strong people. I hope that answered the question.

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

3 So, at this time, Chief Commissioner and Commissioners,
4 it's 2:45. I'll seek your direction on taking a break and
5 then reconvening after 10, 15 minutes.

6 **CHIEF COMMISSIONER MARION BULLER:** Fifteen
7 minutes.

8 **MS. MEREDITH PORTER:** Fifteen minutes.
9 Okay.

10 --- Upon recessing at 14:46

11 --- Upon resuming at 15:09

12 **MS. MEREDITH PORTER:** The next party I
13 would like to invite to the podium is the Native Women's
14 Association of the Northwest Territories, Ms. Amanda
15 Thibodeau. And, Ms. Thibodeau will have six minutes for
16 her questions.

17 **--- CROSS-EXAMINATION BY MS. AMANDA THIBODEAU:**

18 **MS. AMANDA THIBODEAU:** Thank you. Masi
19 chok. As mentioned, my name is Amanda Thibodeau. I am
20 here representing the Native Women's Association for the
21 Northwest Territories, and all of my questions are going
22 to be directed towards Dr. Moffitt today.

23 Good afternoon. Thank you for coming to
24 testify today. My first question is regarding the
25 Indigenous frontline service providers in the Northwest

1 Territories. Many of the local Indigenous people who are
2 doing the frontline work have, themselves, experienced
3 trauma and intergenerational trauma, as well as burnout,
4 PTSD and vicarious trauma from the work that they are
5 doing. I also understand that many of those frontline
6 workers do not have access to supports for themselves.

7 Based on your knowledge and experience, can
8 you, Dr. Moffitt, indicate how this may affect the
9 provision of services in the Northwest Territories?

10 **DR. PERTICE MOFFITT:** Well, I think it
11 would affect it in a very negative way. I think everyone
12 deserves that kind of service, and that's our problem with
13 resources across the board. And, you know -- I don't know
14 what to say. We just need more services.

15 **MS. AMANDA THIBODEAU:** Would you agree that
16 this may contribute to difficulty with training,
17 recruiting and retaining Indigenous people in those
18 positions?

19 **DR. PERTICE MOFFITT:** Absolutely.

20 **MS. AMANDA THIBODEAU:** And, would you agree
21 that supports should be made available to all frontline
22 workers including those who are doing work for NGOs, such
23 as Victim Service workers?

24 **DR. PERTICE MOFFITT:** Absolutely, yes.

25 **MS. AMANDA THIBODEAU:** Thank you. My next

1 question, you mentioned some of the reasons why formal
2 training and education access can be a challenge for those
3 in smaller and remote communities. To what extent could
4 we train community members and elders as prayer
5 professionals? So, for instance, could we bring
6 professionals to the communities to train local people to
7 provide some of those services without having them
8 necessarily qualified as professionals themselves?

9 **DR. PERTICE MOFFITT:** Yes, I think so.
10 And, in terms of grandmothers with the breastfeeding study
11 that I have just done, grandmothers want to help. They
12 actually would like to do some home visits. They would
13 like to -- you know, elders in the North, some seniors
14 that are in homes in their little community, they are
15 quite isolated from their families. And, the government
16 actually has created the -- what are they called?
17 Government Service Officer. And, it started as to provide
18 service like access to a computer for people who were
19 computer illiterate.

20 And, what it grew into, in particularly
21 remote communities, was the need for people who didn't
22 speak English to have someone who could fill out, for
23 example, their pension plans or to look at letters that
24 had piled up in their home that they couldn't understand.
25 So, they were missing benefits to let them know about

1 their benefits. So, there certainly is a lot of work that
2 can be done in the community. And, yes, I think there
3 needs to be a creative solution to getting more education
4 out there and more assistance.

5 **MS. AMANDA THIBODEAU:** Thank you. My next
6 question is in regards to one of the reports that you were
7 referring to today. It observes that intimate partner
8 violence cannot be a women's issue alone and must be
9 considered a product of social, political and cultural
10 structures. Therefore, we need to go beyond the violent
11 act and address how these structures are creating intimate
12 partner violence environments which -- while continuing to
13 oppress women.

14 The report also notes that often
15 programming and services are often not available to the
16 perpetrators themselves of the violence, to proactively or
17 preventively deal with their issues, but only after
18 entering the legal system are these services made
19 available to them in many instances. Based on your
20 research and experience, and your personal knowledge
21 working in the Northwest Territories, what recommendations
22 would you make for programming and services that should or
23 could be made available to the perpetrators of violence to
24 address their use of violence? Could we merely apply your
25 existing recommendations with modifications?

1 **DR. PERTICE MOFFITT:** It seems that what
2 happens in the territory, which is probably a bit of a
3 colonial policy, is that the services that are provided,
4 even the men's programs, happen in Yellowknife. So, these
5 programs are not out there and helpful to perpetrators.
6 You know, when they come out of corrections, they can
7 sometimes access some of the services. But, I think that,
8 definitely, we need programs for perpetrators.

9 **MS. AMANDA THIBODEAU:** Do you have any
10 suggestions as to what kinds of programs could be put in
11 place?

12 **DR. PERTICE MOFFITT:** One of the things
13 that I'm thinking to make them really culturally
14 congruent, the On the Land Program, and that is just
15 starting to work with elders, to work with local people.
16 They would like to see this extended. They would to see
17 more programs like that, and programs that give people
18 purpose and where they can relate to the land, which is --
19 which they have a relationship to, so that they can renew
20 that.

21 **MS. AMANDA THIBODEAU:** I'm out of time.
22 Thank you. Masi chok.

23 **MS. MEREDITH PORTER:** Thank you. The next
24 party I would like to invite to the podium is from the
25 Families for Justice, Ms. Suzan Fraser, and Ms. Frazer

1 will have six minutes.

2 **--- CROSS-EXAMINATION BY MS. SUZAN FRASER:**

3 **MS. SUZAN FRASER:** Thank you. My name is
4 Suzan Fraser. I'm here on behalf of Families for Justice.
5 And, just for the people who are following along at home
6 and my clients who are watching, we have six minutes
7 because that is the time that is assigned to us, not the
8 time that we have identified that we need. And, just for
9 the record so that people understand that, I probably
10 could ask you many more questions than I have today.

11 So, thank you to our Elder Sarah for the
12 qulliq. Very grateful for the light at this time of day.
13 Most of my questions are going to be for Ms. Wilson,
14 though I really value the evidence that the other two
15 witnesses have brought today, so thank you very much for
16 sharing your knowledge with us. Ms. Wilson, I want to
17 spend a little bit of time building you up, because when I
18 look at your CV, I see some very deep knowledge that might
19 not be immediately available when you first look at your
20 CV.

21 And, I say that, because I look at the
22 Oakdale Community Centre, 1 Grand Ravine Drive, in the
23 Jane and Finch neighbourhood in Toronto. And, for those
24 who are living in different parts of the country, the Jane
25 and Finch neighbourhood is a very diverse neighbourhood

1 with many communities within that neighbourhood; would you
2 agree?

3 **MS. JENNISHA WILSON:** Absolutely.

4 **MS. SUZAN FRASER:** And, that sometimes, we
5 look at Jane and Finch, and we think it's just one
6 community, but it has very many communities within it; is
7 that fair?

8 **MS. JENNISHA WILSON:** (No audible response
9 was given).

10 **MS. SUZAN FRASER:** Oakdale, I came to know
11 as a valued place for some young people I worked with
12 after a tragic fire on Grand Ravine Drive where Diane
13 Anderson and two of her children died in 2007. And so, in
14 communities that -- so Grand Ravine Drive and the Oakdale
15 Community Centre deals with a lot of people who might be
16 overrepresented in the justice system or who have
17 experienced police -- over-policing.

18 **MS. JENNISHA WILSON:** Absolutely.

19 **MS. SUZAN FRASER:** And, in that
20 neighbourhood, there is a great degree of social
21 inequality in terms of financial inequality; is that fair?

22 **MS. JENNISHA WILSON:** Mm-hmm.

23 **MS. SUZAN FRASER:** And, in that community,
24 there is a great deal of pride about people who contribute
25 to society; is that fair?

1 **MS. JENNISHA WILSON:** Yes.

2 **MS. SUZAN FRASER:** And, there's also a
3 great deal of crime from time to time?

4 **MS. JENNISHA WILSON:** (No audible response
5 was given).

6 **MS. SUZAN FRASER:** And, I'm taking your
7 approach which I've admired in terms of hearing from you
8 today some of the lessons that you've applied to your work
9 at TI are lessons that go back to doing that basic
10 community work; is that fair?

11 **MS. JENNISHA WILSON:** Absolutely.

12 **MS. SUZAN FRASER:** Okay. Because you would
13 have come to TI with the knowledge that sometimes police
14 violence is normalized, sometime poverty is normalized,
15 inadequate housing can be normalized?

16 **MS. JENNISHA WILSON:** Absolutely.

17 **MS. SUZAN FRASER:** All right. And, all of
18 those factors can go to making people more vulnerable; is
19 that fair? You're nodding your head. You have to say
20 yes.

21 **MS. JENNISHA WILSON:** Yes. Yes.

22 **MS. SUZAN FRASER:** Okay, thank you. And
23 so, we often think about people who are vulnerable, but
24 people don't just become vulnerable. As somebody else
25 said, people who we think are vulnerable are often people

1 who are oppressed through law or social policy; is that
2 fair?

3 **MS. JENNISHA WILSON:** Yes.

4 **MS. SUZAN FRASER:** Okay. And so, when we
5 look at what can be done at a drop-in centre, at a
6 community centre, those places are key solutions in terms
7 of enhancing and building up communities, because the
8 workers, if they're the right kind of worker, can meet the
9 person where they're at; is that fair?

10 **MS. JENNISHA WILSON:** Absolutely.

11 **MS. SUZAN FRASER:** All right. And that
12 you've probably never met one person in any of your work
13 either from Oakdale or working in the program that you're
14 working in now who hasn't been able to identify one thing
15 that would make their life better; is that fair?

16 **MS. JENNISHA WILSON:** In terms of a staff
17 or an individual?

18 **MS. SUZAN FRASER:** Individual coming to
19 access a service.

20 **MS. JENNISHA WILSON:** Probably, yes.

21 **MS. SUZAN FRASER:** Right. Usually,
22 somebody can identify, "This is what I need to make my
23 life better."

24 **MS. JENNISHA WILSON:** Yes.

25 **MS. SUZAN FRASER:** Would you agree? Yes.

1 And, often, they can identify one person somewhere in
2 their life that might be a support to them.

3 **MS. JENNISHA WILSON:** Absolutely.

4 **MS. SUZAN FRASER:** And, the challenge is
5 always building up the supports around that person,
6 allowing them to access that support, or having them
7 access the practical services or the practical thing that
8 they identify as improving their life; is that fair?

9 **MS. JENNISHA WILSON:** That's fair, but I'd
10 also say that a part of that is building up their own
11 agency and resiliency to know that their voice also stands
12 as legitimate information on its own, not just the
13 resources around them for support.

14 **MS. SUZAN FRASER:** Okay. And, in all of
15 the time that you've worked in the past decade, is it fair
16 to say for the past decade, you've worked with
17 marginalized people?

18 **MS. JENNISHA WILSON:** Oh, yes.

19 **MS. SUZAN FRASER:** In that past decade of
20 working with marginalized people, has anybody ever said to
21 you that they need more police?

22 **MS. JENNISHA WILSON:** No.

23 **MS. SUZAN FRASER:** No. Okay. Has anybody
24 ever said to you that they want the government to have a
25 greater role in their lives?

1 **MS. JENNISHA WILSON:** No, not in that
2 sense. It's more like, "I wish the government would
3 understand what's going on in my life."

4 **MS. SUZAN FRASER:** Right. And, the people
5 who generally are working with somebody, the people who
6 are right there on the ground in the community working
7 with them, they usually can know what would help that
8 person improve their life and are usually willing to help
9 if they only had the resources to do so; is that fair?

10 **MS. JENNISHA WILSON:** I think, yes,
11 everyone tries to help within the confines of their work
12 and the resources accessible.

13 **MS. SUZAN FRASER:** But, it's starting with
14 the self-identified needs of the person that we can really
15 begin to make change; is that fair?

16 **MS. JENNISHA WILSON:** Yes.

17 **MS. SUZAN FRASER:** Okay, thank you very
18 much. Those are my questions.

19 **MS. MEREDITH PORTER:** Thank you. The next
20 representative I'd like to invite to the podium is from
21 Liard Aboriginal Women's Society. Ms. Carly Teillet will
22 have six minutes for questions.

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

24 **MS. CARLY TEILLET:** Tansi, bonjour and good
25 afternoon again. It's important to do so, and so, I begin

1 every time I come up by acknowledging our presence on the
2 ancestral territory of the Beothuk and the Mi'kmaw, and
3 the lands that Inuit, Innu and southern Inuit call home,
4 and to acknowledge the spirits of our women and girls,
5 their families, the survivors, the elders, the medicines
6 and the sacred items that are here with us today.

7 I have the privilege of acting as counsel
8 for the Liard Aboriginal Women's Society, and they serve
9 the Kaska Nation, which is in the northern B.C. and
10 southern Yukon Territories. And, generally, they're
11 incredible women, and they advocate for Indigenous women
12 from the Yukon, and they advocate all across Canada and
13 internationally.

14 My questions today are for Dr. Moffitt and
15 Ms. Wilson, but before moving to that, I want to say on
16 behalf of the Liard Aboriginal Women's Society, Marya,
17 thank you for sharing your story.

18 **MS. MEALIA SHEUTIAPIK:** You're welcome.

19 **MS. CARLY TEILLET:** The Board of Directors
20 of Liard are Kaska women. They are elders and
21 grandmothers. They are aunties, they are great
22 grandmothers, and they have always believed that
23 Indigenous women know what they need to be safe, to heal,
24 to thrive, look after themselves and their families, and
25 today, your voice joined theirs. You're not alone, and

1 those words can't be unheard. So, thank you.

2 **MS. MEALIA SHEUTIAPIK:** You're welcome, and
3 thank you.

4 **MS. CARLY TEILLET:** Dr. Moffitt, my first
5 question is for you. This morning in your testimony you
6 mentioned that there is a culture of violence and silence
7 in the north, and that there are communities of secrets.
8 Now, I had the honour of sitting in Whitehorse last week
9 with Kaska elders and with powerful, knowledgeable women
10 from communities all around the Yukon, many of whom
11 volunteer to support Indigenous women in their
12 communities. These women are not silent about what's
13 happening in their community, and they know what is
14 happening in their community. One woman described how
15 when there's a crisis, when there's violence in their
16 communities, select people know, are alerted. And then
17 there's a scramble at 2:30 in the morning to try and find
18 a safe place for that woman; sometimes that woman and her
19 children. They don't have resources, funding or support,
20 but they know. Specifically, I heard Canada and Yukon
21 need to hear our voices and then resource our vision.

22 Now, you mentioned in your talk that
23 there's a lack of shelters in communities in the Northwest
24 Territories, in certain key areas. And, drawing on that
25 and the experience I just shared about my clients, would

1 you support a recommendation that all Indigenous
2 communities, in the north, in particular, need to have
3 long-term sustainable core funding so that they can
4 provide safe places in those communities for Indigenous
5 women and girls?

6 **DR. PERTICE MOFFIT:** Yes. I don't think
7 that's the whole answer, though. I say "yes" to that, but
8 I think there's so many determinants of help and it's very
9 difficult in a tiny community to find a safe house. I'm
10 not sure how it would work. I have a colleague who I work
11 with who is Sammy, who is a very respected community
12 member in a northern Norway community, and she has an
13 apartment in her home. People know about it, but -- and
14 it's a community of 2,000 people. I think it's respected,
15 but at times she's fearful.

16 So, I think we have to really think about
17 it and think about the bigger picture of poverty, of all
18 of these things that are putting women at risk, which are
19 the tougher things to address, really, than to say, "Let's
20 put a safe house there." Definitely, they need a safe
21 place to go. And, actually, they usually, within their
22 safety planning, just as you said, I mean, there are
23 people that they know where they can go. That's probably
24 a part of the secret from the formal system when we were
25 talking about a culture of secrets. And, I, myself, I've

1 worked with some wonderful, strong and resilient elders
2 who share stories and who share advice that is really
3 helpful.

4 **MS. CARLY TEILLET:** Thank you. Jennisha,
5 if I may call you that, my next question is for you. This
6 morning, you raised the important point that the state has
7 played an active role in trafficking Indigenous people,
8 and I apologize this is abrupt ---

9 **MS. JENNISHA WILSON:** I see the time. Go
10 ahead.

11 **MS. CARLY TEILLET:** Would you agree with a
12 recommendation that the Government of Canada and all
13 provinces and territories acknowledge that the systemic
14 and cyclical short-term funding of Indigenous women's
15 organizations and shelters has directly contributed to the
16 murdered and missing Indigenous women and girls of Canada?

17 **MS. JENNISHA WILSON:** Yes, because it
18 undermines the longevity that's needed to actually come up
19 with sustainable solutions.

20 **(APPLAUSE)**

21 **MS. CARLY TEILLET:** Thank you. And,
22 lastly, this afternoon, parties discussed some of the
23 factors that contributed to vulnerability of Indigenous
24 women and girls. So, some of those were cost of flights,
25 fly-in, boat, winter road access communities, lack of

1 Victim Services, shelters, poverty, unemployment,
2 inadequate housing, and these were discussed in reference
3 which I've admired in terms of hearing from you today some
4 of the lessons that you've applied to your work at TI are
5 lessons that go back to doing that basic community work;
6 is that fair?

7 **MS. JENNISHA WILSON:** Absolutely.

8 **MS. SUZAN FRASER:** Okay. Because you would
9 have come to TI with the knowledge that sometimes police
10 violence is normalized, sometime poverty is normalized,
11 inadequate housing can be normalized?

12 **MS. JENNISHA WILSON:** Absolutely.

13 **MS. SUZAN FRASER:** All right. And, all of
14 those factors can go to making people more vulnerable; is
15 that fair? You're nodding your head. You have to say
16 yes.

17 **MS. JENNISHA WILSON:** Yes. Yes.

18 **MS. SUZAN FRASER:** Okay, thank you. And
19 so, we often think about people who are vulnerable, but
20 people don't just become vulnerable. As somebody else
21 said, people who we think are vulnerable are often people
22 who are oppressed through law or social policy; is that
23 fair?

24 **MS. JENNISHA WILSON:** Yes.

25 **MS. SUZAN FRASER:** Okay. And so, when we

1 look at what can be done at a drop-in centre, at a
2 community centre, those places are key solutions in terms
3 of enhancing and building up communities, because the
4 workers, if they're the right kind of worker, can meet the
5 person where they're at; is that fair?

6 **MS. JENNISHA WILSON:** Absolutely.

7 **MS. SUZAN FRASER:** All right. And that
8 you've probably never met one person in any of your work
9 either from Oakdale or working in the program that you're
10 working in now who hasn't been able to identify one thing
11 that would make their life better; is that fair?

12 **MS. JENNISHA WILSON:** In terms of a staff
13 or an individual?

14 **MS. SUZAN FRASER:** Individual coming to
15 access a service.

16 **MS. JENNISHA WILSON:** Probably, yes.

17 **MS. SUZAN FRASER:** Right. Usually,
18 somebody can identify, "This is what I need to make my
19 life better."

20 **MS. JENNISHA WILSON:** Yes.

21 **MS. SUZAN FRASER:** Would you agree? Yes.
22 And, often, they can identify one person somewhere in
23 their life that might be a support to them.

24 **MS. JENNISHA WILSON:** Absolutely.

25 **MS. SUZAN FRASER:** And, the challenge is

1 always building up the supports around that person,
2 allowing them to access that support, or having them
3 access the practical services or the practical thing that
4 they identify as improving their life; is that fair?

5 **MS. JENNISHA WILSON:** That's fair, but I'd
6 also say that a part of that is building up their own
7 agency and resiliency to know that their voice also stands
8 as legitimate information on its own, not just the
9 resources around them for support.

10 **MS. SUZAN FRASER:** Okay. And, in all of
11 the time that you've worked in the past decade, is it fair
12 to say for the past decade, you've worked with
13 marginalized people?

14 **MS. JENNISHA WILSON:** Oh, yes.

15 **MS. SUZAN FRASER:** In that past decade of
16 working with marginalized people, has anybody ever said to
17 you that they need more police?

18 **MS. JENNISHA WILSON:** No.

19 **MS. SUZAN FRASER:** No. Okay. Has anybody
20 ever said to you that they want the government to have a
21 greater role in their lives?

22 **MS. JENNISHA WILSON:** No, not in that
23 sense. It's more like, "I wish the government would
24 understand what's going on in my life."

25 **MS. SUZAN FRASER:** Right. And, the people

1 who generally are working with somebody, the people who
2 are right there on the ground in the community working
3 with them, they usually can know what would help that
4 person improve their life and are usually willing to help
5 if they only had the resources to do so; is that fair?

6 **MS. JENNISHA WILSON:** I think, yes,
7 everyone tries to help within the confines of their work
8 and the resources accessible.

9 **MS. SUZAN FRASER:** But, it's starting with
10 the self-identified needs of the person that we can really
11 begin to make change; is that fair?

12 **MS. JENNISHA WILSON:** Yes.

13 **MS. SUZAN FRASER:** Okay, thank you very
14 much. Those are my questions.

15 **MS. MEREDITH PORTER:** Thank you. The next
16 representative I'd like to invite to the podium is from
17 Liard Aboriginal Women's Society. Ms. Carly Teillet will
18 have six minutes for questions.

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

20 **MS. CARLY TEILLET:** Tansi, bonjour and good
21 afternoon again. It's important to do so, and so, I begin
22 every time I come up by acknowledging our presence on the
23 ancestral territory of the Beothuk and the Mi'kmaw, and
24 the lands that Inuit, Innu and southern Inuit call home,
25 and to acknowledge the spirits of our women and girls,

1 their families, the survivors, the elders, the medicines
2 and the sacred items that are here with us today.

3 I have the privilege of acting as counsel
4 for the Liard Aboriginal Women's Society, and they serve
5 the Kaska Nation, which is in the northern B.C. and
6 southern Yukon Territories. And, generally, they're
7 incredible women, and they advocate for Indigenous women
8 from the Yukon, and they advocate all across Canada and
9 internationally.

10 My questions today are for Dr. Moffitt and
11 Ms. Wilson, but before moving to that, I want to say on
12 behalf of the Liard Aboriginal Women's Society, Marya,
13 thank you for sharing your story.

14 **MS. MEALIA SHEUTIAPIK:** You're welcome.

15 **MS. CARLY TEILLET:** The Board of Directors
16 of Liard are Kaska women. They are elders and
17 grandmothers. They are aunties, they are great
18 grandmothers, and they have always believed that
19 Indigenous women know what they need to be safe, to heal,
20 to thrive, look after themselves and their families, and
21 today, your voice joined theirs. You're not alone, and
22 those words can't be unheard. So, thank you.

23 **MS. MEALIA SHEUTIAPIK:** You're welcome, and
24 thank you.

25 **MS. CARLY TEILLET:** Dr. Moffitt, my first

1 question is for you. This morning in your testimony you
2 mentioned that there is a culture of violence and silence
3 in the north, and that there are communities of secrets.
4 Now, I had the honour of sitting in Whitehorse last week
5 with Kaska elders and with powerful, knowledgeable women
6 from communities all around the Yukon, many of whom
7 volunteer to support Indigenous women in their
8 communities. These women are not silent about what's
9 happening in their community, and they know what is
10 happening in their community. One woman described how
11 when there's a crisis, when there's violence in their
12 communities, select people know, are alerted. And then
13 there's a scramble at 2:30 in the morning to try and find
14 a safe place for that woman; sometimes that woman and her
15 children. They don't have resources, funding or support,
16 but they know. Specifically, I heard Canada and Yukon
17 need to hear our voices and then resource our vision.

18 Now, you mentioned in your talk that
19 there's a lack of shelters in communities in the Northwest
20 Territories, in certain key areas. And, drawing on that
21 and the experience I just shared about my clients, would
22 you support a recommendation that all Indigenous
23 communities, in the north, in particular, need to have
24 long-term sustainable core funding so that they can
25 provide safe places in those communities for Indigenous

1 women and girls?

2 **DR. PERTICE MOFFIT:** Yes. I don't think
3 that's the whole answer, though. I say "yes" to that, but
4 I think there's so many determinants of help and it's very
5 difficult in a tiny community to find a safe house. I'm
6 not sure how it would work. I have a colleague who I work
7 with who is Sammy, who is a very respected community
8 member in a northern Norway community, and she has an
9 apartment in her home. People know about it, but -- and
10 it's a community of 2,000 people. I think it's respected,
11 but at times she's fearful.

12 So, I think we have to really think about
13 it and think about the bigger picture of poverty, of all
14 of these things that are putting women at risk, which are
15 the tougher things to address, really, than to say, "Let's
16 put a safe house there." Definitely, they need a safe
17 place to go. And, actually, they usually, within their
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20 a part of the secret from the formal system when we were
21 talking about a culture of secrets. And, I, myself, I've
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23 who share stories and who share advice that is really
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9 provinces and territories acknowledge that the systemic
10 and cyclical short-term funding of Indigenous women's
11 organizations and shelters has directly contributed to the
12 murdered and missing Indigenous women and girls of Canada?

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14 undermines the longevity that's needed to actually come up
15 with sustainable solutions.

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17 **MS. CARLY TEILLET:** Thank you. And,
18 lastly, this afternoon, parties discussed some of the
19 factors that contributed to vulnerability of Indigenous
20 women and girls. So, some of those were cost of flights,
21 fly-in, boat, winter road access communities, lack of
22 Victim Services, shelters, poverty, unemployment,
23 inadequate housing, and these were discussed in reference
24 to Inuit, and Dr. Moffitt discussed some of these factors
25 in the Northwest Territories. But, would you agree with

1 me that First Nation communities in the Yukon and First
2 Nation and Métis communities whose territories are the
3 northern parts of provinces face these similar barriers?

4 **MS. JENNISHA WILSON:** Absolutely.

5 **MS. CARLY TEILLET:** Wonderful. Thank you.
6 Meegwetch.

7 **MS. MEREDITH PORTER:** Thank you. The next
8 party I'd like to invite to the podium is from the
9 Aboriginal Women's Action Network, Ms. Fay Blaney. And,
10 Ms. Blaney will have six minutes for questions.

11 **--- CROSS-EXAMINATION BY MS. FAY BLANEY:**

12 **MS. FAY BLANEY:** Oh, my goodness. I
13 thought I had one more in between. Okay. I want to say
14 from my Coast Salish ancestors, Mealia, my hands are up to
15 you. (Speaking in Indigenous language). I'm giving you
16 blessings from my homelands.

17 **MS. MEALIA SHEUTIAPIK:** Thank you.

18 **MS. FAY BLANEY:** I can't my paper around
19 this thing. I really admire your strength and your
20 courage and the way that you've survived, and you're
21 definitely a highlight in this Inquiry. You know, you're
22 the voice that I wanted to hear for this Inquiry.

23 I wanted to ask you, first of all, I
24 understand that you're clean and sober?

25 **MS. MEALIA SHEUTIAPIK:** Yes.

1 **MS. FAY BLANEY:** Yes. I am too, I'm coming
2 up to a sobriety birthday pretty soon, in the middle of
3 November. One of the parties with standing was saying
4 that, as a means of self-care, that the women use alcohol
5 or drugs and sex. Now that you are where you're at, being
6 away from alcohol and drugs, and being away from the sex
7 industry, do you see it as self-care?

8 **MS. MEALIA SHEUTIAPIK:** Yes, I do.

9 **MS. FAY BLANEY:** You see sex and alcohol as
10 self-care?

11 **MS. MEALIA SHEUTIAPIK:** No. I did before,
12 yes.

13 **MS. FAY BLANEY:** Yes, you did before.
14 Okay. I just wanted that on the record. And, Dr. Moffitt
15 was talking about some of the things that go on in
16 community and throughout this Inquiry, we've heard others
17 give similar testimony about the levels of violence in
18 community. Did you see that in your community?

19 **MS. MEALIA SHEUTIAPIK:** When I was younger,
20 yes. It was more alcohol abuse.

21 **MS. FAY BLANEY:** Mm-hmm. And, was there
22 incest?

23 **MS. MEALIA SHEUTIAPIK:** What's that?

24 **MS. FAY BLANEY:** Family members sexually
25 abusing children.

1 **MS. MEALIA SHEUTIAPIK:** No.

2 **MS. FAY BLANEY:** No?

3 **MS. MEALIA SHEUTIAPIK:** No.

4 **MS. FAY BLANEY:** Did you see women getting
5 beaten up?

6 **MS. MEALIA SHEUTIAPIK:** No.

7 **MS. FAY BLANEY:** No? Okay. I sure did. I
8 saw a lot of that in my community. So, I just -- I wanted
9 to shift now to -- I hope I can say your name, Jennisha.
10 I'm just mindful of the clock and I've got lots of
11 questions. You've said that in the push/pull factors for
12 women leaving the north, I promptly noted that I didn't
13 see the power dynamics or male violence against women
14 being included in there. Is there a reason why it's not
15 included in the push/pull factors?

16 **MS. JENNISHA WILSON:** Not particularly. I
17 think that it definitely is a push and pull factor, but
18 when you look at broad stroke, that slide on why Inuit
19 leave the north, those are more generally the items. But,
20 vulnerability and violence is definitely one of those push
21 factors for leaving the north, but also it can also be
22 challenged to say that's also why people don't leave, they
23 don't see it as an option for them to leave. And, that's
24 something that requires a lot more discussion to kind of
25 unpack and make sense of.

1 **MS. FAY BLANEY:** In my testimony, I
2 submitted an article as an exhibit that talks about that.
3 And, I fled at the age of 13, and my mother fled at the
4 age of 23, and both were due to male violence in our
5 communities. So, just to follow up on that, do you see
6 the importance of having a gendered lens in this Inquiry?

7 **MS. JENNISHA WILSON:** I do think there is
8 an importance for a gendered lens, but it needs to be
9 interdisciplinary, so including an anti-racism lens, as
10 well as a lens of including individuals that don't self
11 identify as female, so two-spirited, trans, LGBTQ
12 communities; right?

13 **MS. FAY BLANEY:** Okay. I wish I could
14 follow up more, but I have more questions. In Vancouver,
15 our mayoralty candidate said that upwards of 60 percent of
16 women in the sex industry are Indigenous women. Do you
17 think the figure is similar in Ottawa?

18 **MS. JENNISHA WILSON:** To be honest, there
19 is no accurate data in Ottawa because it is -- it's a
20 conversation that's not relatively new, but newer than
21 Vancouver's progressive work that they're doing around
22 harm reduction and identifying and supporting sex workers.

23 **MS. FAY BLANEY:** And, in other parts of the
24 country, the figures remain pretty similar. Do you have
25 any explanation for that overrepresentation of Inuit and

1 First Nations, Métis women on street level sex work?

2 **MS. JENNISHA WILSON:** As to why that
3 happens or ---

4 **MS. FAY BLANEY:** Yes. Yes.

5 **MS. JENNISHA WILSON:** Again, back to those
6 root causes of vulnerability, poverty. I think one of the
7 number one things, even taking from Mealia's testimony, is
8 that when you are in survival mode and there are a lack of
9 options within white heteronormative systems, you go to
10 what is carved out for you. And, unfortunately for
11 Indigenous women, you're constantly reminded that your
12 body is hyper-sexualized and seen as property; right?

13 **MS. FAY BLANEY:** For Indigenous women;
14 right?

15 **MS. JENNISHA WILSON:** Mm-hmm.

16 **MS. FAY BLANEY:** Okay. Thank you. And,
17 I'm quoting you really quick here. You said that you
18 understand that some can understand theory, but not know
19 how it works on the ground or in the real world. Do you
20 believe that bringing Inuit women together can result in
21 consciousness raising?

22 **MS. JENNISHA WILSON:** Absolutely. I think
23 it's relative; right? So, if Inuit women are coming
24 together and creating solutions for them, by them, then
25 absolutely.

1 **MS. FAY BLANEY:** And, are you aware ---

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

3 **MS. FAY BLANEY:** Oh.

4 **MS. MEREDITH PORTER:** Yes, your time's up.

5 Thank you.

6 **MS. FAY BLANEY:** Others got to ask their
7 last question.

8 **MS. MEREDITH PORTER:** It's so quick. Thank
9 you. The next party I'd like to invite to the podium is
10 from the Assembly of First Nations, Mr. Stuart Wuttke.
11 And, Mr. Wuttke will have nine and a half minutes for
12 questions.

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

14 **MR. STUART WUTTKE:** Good afternoon. I'd
15 like to thank the panel for your testimony earlier today,
16 especially you, Ms. Sheutiapik, for your compelling story
17 and sharing your life story with us. And, also the hope
18 that it provides many other Indigenous people that are
19 watching and can learn from your story. It definitely
20 brings a lot of hope to those that are living in difficult
21 times at this point.

22 My name is Stuart Wuttke. I'm legal
23 counsel for the Assembly of First Nations. The Assembly
24 of First Nations represents over 634 communities across
25 Canada. I'd like to begin off by asking Dr. Moffitt some

1 questions. In your studies and also in your presentation,
2 you provided some valuable qualitative information for
3 this panel, and especially it brings further information
4 to the body of knowledge that's being considered by the
5 Inquiry. There are, however, some generalizations that
6 were presented that I'd like to just, you know, clarify
7 the record on.

8 First of all, it was sort of implied that,
9 you know, even though it's horrible that Indigenous women
10 are being abused, but not all Indigenous women are being
11 abused, would that be correct?

12 **DR. PERTICE MOFFITT:** Yes.

13 **MR. STUART WUTTKE:** And, similarly, not all
14 Indigenous men are abusers?

15 **DR. PERTICE MOFFITT:** Oh, absolutely. Yes.

16 **MR. STUART WUTTKE:** And, even in the
17 northern context, there are a number of mixed marriages
18 that are ---

19 **DR. PERTICE MOFFITT:** Yes.

20 **MR. STUART WUTTKE:** Yes. Thank you. As I
21 mentioned, the research you provided is qualitative, and
22 even though it is valuable information, you know, the
23 people that will pick apart the testimony and also the
24 evidence that's being put forward, all the naysayers, so
25 to say in Canada, they may look at some of the study --

1 first of all, your first study is based on a literature
2 review of journals, government documents and news
3 articles. The second one had 122 participants. And, the
4 third one, I believe, had 10 women participants. Are
5 there plans, as far as your research, to do more
6 quantitative research that would provide more
7 statistically representative findings?

8 **DR. PERTICE MOFFITT:** Well, one thing,
9 there will never be very statistical findings in the NWT.
10 We don't have a population that's large enough. And,
11 quite often what they will do is a pan-territorial study.
12 And, I know the people from the Yukon, people from the
13 NWT, people from Nunavut will say we are not all alike,
14 but they could get clumped alike if you were looking at it
15 statistically and trying to -- who would you be
16 generalizing that to? And, I am primarily a qualitative
17 researcher, and I think that narrative inquiry, I think
18 stories, I think talking in that manner with Indigenous
19 people is a more relevant Indigenous methodology. Sharing
20 circles, those types of things, then -- there's a place
21 though. I'm not saying there's not a place. We do want
22 to find out quantitative information. And, I mean, we do
23 quantify some things in the territory, because we want to
24 know.

25 For example, I just did a breastfeeding

1 study, and I wanted to know what the rates of
2 breastfeeding were in the territory. So, I used some
3 numbers, and I used some statistical processes. But, even
4 that, that was looking at health records. So, even with
5 that, that does tell a story, that does give us an idea
6 about our population. But, the scientist out there would
7 argue about our small sample size. So, that's something
8 we have to think about always.

9 **MR. STUART WUTTKE:** All right, thank you.
10 You also stated earlier that it's really important not to
11 blame the victim, in this case, Indigenous women who are
12 being abused?

13 **DR. PERTICE MOFFITT:** Yes.

14 **MR. STUART WUTTKE:** Is it also equally
15 important not to blame the Indigenous communities those
16 women come from?

17 **DR. PERTICE MOFFITT:** Yes.

18 **MR. STUART WUTTKE:** And, considering the
19 fact that a lot of Indigenous communities are in peril as
20 a result of government policy, colonization, Sixties
21 Scoop, child welfare?

22 **DR. PERTICE MOFFITT:** Yes.

23 **MR. STUART WUTTKE:** Thank you. Most of
24 your -- I shouldn't say most. Part of your testimony this
25 morning focused on the weaknesses that many Indigenous

1 women encounter also in your research as well. Does your
2 research also identify which strengths Indigenous women
3 have? And, if so, what are those?

4 **DR. PERTICE MOFFITT:** Oh, absolutely. But,
5 the research -- well, if we're talking about the intimate
6 partner violence research, it was with frontline workers.
7 So, it was frontline workers' perspectives of women. This
8 is something that we need to do more research in is talk
9 to Indigenous women. But, I can tell you, Indigenous
10 women have a lot of strengths. They have a lot of
11 strengths, self-preservation strengths. There are a lot
12 of Indigenous women who, in the NWT in particular, who
13 still have their language, who speak their -- who are good
14 language speakers, who have very strong cultural practices
15 and ties. And, there is a real movement to, in young
16 people as well, to revitalize this.

17 And, just recently, we had the urban group
18 of young Indigenous scholars in the area. We had them set
19 up an urban camp in Sombe K'e Park, which is right beside
20 City Hall in Yellowknife, where local people pass,
21 including myself, walking my dog, we can stop, spend time
22 with people. There is moosehide tanning going on. There
23 is a real feel of community brought to the city for people
24 in the community, and the same with the Indigenous camp.
25 People who are on the street, everyone, is welcomed into

1 these camps. And, these are positive effects that are
2 happening, and they are the strengths of local people.

3 **MR. STUART WUTTKE:** Thank you. And, just
4 touching upon that, the cultural camps, the cultural
5 component, we heard earlier testimony that individuals
6 that have strong links to their culture or their community
7 are more resilient to human trafficking and also sexual
8 violence. In the North, especially in providing those
9 types of programs, we note that First Nation community
10 members or Inuit community members who actually provide
11 these services aren't compensated like doctors or other
12 professionals in the South. Do you agree that those
13 individuals should be compensated at rates that are
14 comparable to other professionals?

15 **DR. PERTICE MOFFITT:** I do, and it is a
16 very difficult -- it's a colonial process that we have in
17 place, and they should be compensated, yes.

18 **MR. STUART WUTTKE:** And, in the Northwest
19 Territories, is it covered by a numbered treaty?

20 **DR. PERTICE MOFFITT:** In the Northwest
21 Territories, there are only two reserves, two small
22 reserves, and there are treaties, Treaty 8, Treaty 11, and
23 they are at different levels of self-government in the
24 NWT. And, the Tłı̨chǫ region, actually where I was doing
25 my PhD, have their own research institute. They're a very

1 strong voice and have a very powerful negotiator, Dr. John
2 B. Zoe.

3 **MR. STUART WUTTKE:** All right, thank you.
4 I just have to move on, but I wanted to touch upon, you
5 know, numbered treaties have a number of benefits that are
6 an obligation to Canada. But, I'll move on to Anita
7 Wilson?

8 **MS. JENNISHA WILSON:** Jennisha.

9 **MR. STUART WUTTKE:** Jennita? Jennisha?
10 Sorry.

11 **MS. JENNISHA WILSON:** It's okay.

12 **MR. STUART WUTTKE:** Ms. Wilson, now you
13 have talked about a number of -- how police interact with
14 the Inuit in the southern parts of Canada. I was
15 wondering if you can touch upon what problems those
16 individuals face and what interactions would be more
17 appropriate.

18 **MS. JENNISHA WILSON:** So, just as, like, a
19 general information, I think that while there are several
20 issues with police interactions, there are a handful of
21 individuals who are police officers working towards
22 changing that negative interaction. So, in terms of some
23 of the things that folks experience when engaging with
24 police is -- and it ranges; right? There is fear of
25 authority and mistrust in what's going to happen. Often

1 times there is a lack of understanding of one's rights.
2 Language barriers, right, in terms of what is being said
3 to an individual and what they should and should not share
4 with a police officer. Simple things like if you have
5 been questioned by a police officer, you can also ask for
6 their badge information to follow-up. A lot of folks
7 don't know that; right?

8 So, the lack of understanding of having,
9 you know, rights, it tends to be the issue. And then also
10 where police officers have constantly undermined community
11 in their interactions is questioning minors without an
12 adult knowing that they have a language barrier and not
13 seeking support when there are cultural supports possible.
14 Taking someone from one community in terms of in the
15 South, so from Ottawa, being apprehended for a crime that
16 you did in Perth, and bringing them to Perth without
17 notifying their guardian; right? So, there's constant
18 inconsistencies in terms of police relations, and that
19 spreads like wildfire in community. We share -- they
20 share that information; right? And so, it doesn't exactly
21 support in creating better relationships.

22 The other thing also is that you have
23 officers that may or may not understand the Inuit versus
24 First Nations reality or Métis reality and/or have no
25 cultural competency whatsoever and are engaging with folks

1 that have traumatic experiences with RCMP or law
2 enforcement; right? And so, all of that combined doesn't
3 really produce positive and meaningful relationship
4 building.

5 **MR. STUART WUTTKE:** The second part of the
6 question was what would?

7 **MS. JENNISHA WILSON:** So, what would?

8 **MR. STUART WUTTKE:** Yes.

9 **MS. JENNISHA WILSON:** I think a starting
10 point is -- and something that police officers in Ottawa
11 are trying to do is getting to know community,
12 participating in community events, building that
13 relationship, coming out and doing information sessions on
14 knowing your right, trying to do cultural competency
15 trainings, making it mandatory within their police forces.
16 Other things they're doing is participating in creation of
17 solutions with community organizations and members, right,
18 to be an active participant in the role that police do
19 have in serving, protecting individuals in positive ways.

20 And so, there are a variety of things that
21 can happen, but on the ground, it's a simple thing as, if
22 you come across an Inuk, the number one thing I have heard
23 is that they want to have an organization called to be a
24 liaison, right, or have a liaison officer that is Inuk
25 that will ensure that their rights are not violated;

1 right?

2 **MR. STUART WUTTKE:** All right, thank you
3 very much. That's my time.

4 **MS. MEREDITH PORTER:** Thank you. The next
5 representative I would like to invite to the podium is
6 from Animakee Wa Zhing 37 First Nation et al. Ms. Whitney
7 Van belleghem will have nine and a half minutes for
8 questions.

9 **--- CROSS-EXAMINATION BY WHITNEY VAN BELLEGHEM:**

10 **MS. WHITNEY VAN BELLEGHEM:** Good afternoon.
11 I would like to start today by acknowledging the ancestral
12 territory we are on today of the Beothuk and the Mi'kmaw,
13 the Inuit, the Innu people, and I would like to
14 acknowledge and thank the families, the survivors here
15 with us today, the elders, the Commissioners and the
16 Inquiry staff.

17 My questions today are for Dr. Moffitt. I
18 would like to start by discussing substance abuse. In
19 your research, is it correct that there is a connection
20 between alcohol and drug abuse and violence?

21 **DR. PERTICE MOFFIT:** Yes.

22 **MS. WHITNEY VAN BELLEGHEM:** In your
23 experience, is it accurate to characterize the root causes
24 of addiction as complex, inter-related and based on both
25 recent and inter-generational trauma?

1 DR. PERTICE MOFFIT: Yes.

2 MS. WHITNEY VAN BELLEGHEM: Would you
3 agree, then, that a comprehensive community-based approach
4 to drug and addition-related issues is an important part
5 of the response to violence?

6 DR. PERTICE MOFFIT: Yes, it is.

7 MS. WHITNEY VAN BELLEGHEM: Would you also
8 agree that a culturally-specific treatment program located
9 in Indigenous communities and designed by these
10 communities could better address the root causes of
11 addiction?

12 DR. PERTICE MOFFIT: Yes.

13 MS. WHITNEY VAN BELLEGHEM: I'd like to
14 turn now to the issue of trust. Is it fair to say that
15 trust in service providers is an important factor for
16 victims of violence when determining whether to seek
17 services?

18 DR. PERTICE MOFFIT: Yes.

19 MS. WHITNEY VAN BELLEGHEM: Would you also
20 agree that a lack of trust results in many victims
21 choosing not to access these services?

22 DR. PERTICE MOFFIT: Yes.

23 MS. WHITNEY VAN BELLEGHEM: The journal
24 article that you co-authored titled A Web of
25 Disheartenment with Hope on the Horizon - Intimate Partner

1 Violence in Rural and Northern Communities, which is
2 Exhibit 53, this article states, basically, that a lack of
3 sufficient resources can be the result of staffing issues
4 such as high turn over rates in service providers. Would
5 you agree that this high turn over rate for service
6 providers is a barrier to building trust with Indigenous
7 communities and the individuals that they serve?

8 **DR. PERTICE MOFFIT:** Yes, I would.

9 **MS. WHITNEY VAN BELLEGHEM:** Does a lack of
10 community specific cultural competency and understanding
11 in service providers also serve as a barrier to trust and
12 accessing services?

13 **DR. PERTICE MOFFIT:** Yes. I should say,
14 though, that every government frontline worker has an
15 opportunity to take cultural safety and has an
16 orientation. They do have that. But, the turn over is
17 sometimes too rapid.

18 **MS. WHITNEY VAN BELLEGHEM:** You also spoke
19 today about the normalization of violence facing many
20 Indigenous communities in the north. In your experience,
21 have you seen any successful approaches or programs that
22 address this?

23 **DR. PERTICE MOFFIT:** Well, I think, no, not
24 one that I could speak to. I think, really, what we have
25 to do is take a -- you know, in the past, I know the

1 government did -- or maybe it was the Status of Women.
2 Someone did a survey of attitudes, and they wanted to redo
3 this survey to see if attitudes had changed, and it never
4 went anywhere because there are so many other more
5 important issues than just simply looking at attitudes.

6 And, I think, you know, it's been -- the
7 normalization has been well-defined. I think that things
8 are going to change when we address things like the
9 determinants of health and the barriers that women have.
10 We're going to -- we're going to see a change if we
11 address those things. It won't be so normalized. We'll
12 have women who have been empowered, who are empowered, who
13 are able to speak about what happened and what is
14 happening, and who have resources available.

15 **MS. WHITNEY VAN BELLEGHEM:** So, with
16 respect to reporting, then, this morning you discussed
17 some of the complex challenges facing women regarding
18 reporting violence in small communities. Can you give any
19 examples of successful approaches or options for reporting
20 violence in these small communities that support a woman's
21 physical and emotional safety and privacy as well?

22 **DR. PERTICE MOFFIT:** Mm-hmm. Well, you
23 know, I really thought at one time that it would be very
24 helpful if we could use a Telehealth process, that women
25 could speak and talk that way and have some assistance

1 that way. I don't know that I really think that anymore.
2 I think we need to go -- we haven't actually -- we were
3 listening to frontline workers' stories.

4 We need to hear more stories from women.
5 Women know in the communities what they need. We need to
6 hear those local stories. And, communities do have a
7 great deal of strength, and I think communities can be
8 involved in the research process, can identify what the
9 questions are, what the intervention is that we need to
10 do, and I think that would be a valuable lesson for us.

11 **MS. WHITNEY VAN BELLEGHEM:** So, you would
12 agree, then, that currently that's a gap that should be
13 addressed that we need to look more into options for
14 reporting that could keep these individuals safe and
15 maintain their privacy?

16 **DR. PERTICE MOFFIT:** Yes.

17 **MS. WHITNEY VAN BELLEGHEM:** During your
18 evidence today, you showed us a map of the Northwest
19 Territories, and you pointed out that many of the
20 communities had little to no access to shelters or safe
21 houses. Would you agree that this is a problem facing
22 many Indigenous communities throughout Canada?

23 **DR. PERTICE MOFFIT:** Yes, particularly
24 communities in the north and in the northern provinces.
25 That kind of north.

1 **MS. WHITNEY VAN BELLEGHEM:** Can you explain
2 the impact on women experiencing violence in a community
3 that does not have access to a safe space or shelter
4 available to them?

5 **DR. PERTICE MOFFIT:** Well, this is -- this
6 is a part of being silent, a part of self-preservation, a
7 part of knowing where they can go, having a plan, having a
8 plan for their children, and emergency protection orders,
9 having that there. But, then, some -- it is still a
10 telephone call. They access an EPO in the NWT by calling
11 the Alison McAteer House. So, they still -- they have to
12 tell their story. Then they have to tell their story
13 again if it's deemed an emergency. They can happen pretty
14 quick.

15 But, if you're in a remote community and
16 there is no police service there, there's no one who is
17 going -- they have to fly in to serve it, and then what's
18 going to happen? So, I don't know if I answered your
19 question. You might need to rephrase.

20 **MS. WHITNEY VAN BELLEGHEM:** Thank you.

21 **DR. PERTICE MOFFIT:** Thank you.

22 **MS. WHITNEY VAN BELLEGHEM:** You've
23 mentioned today a number of times that there's a number of
24 determinants of health. In addition to addressing some of
25 these other determinants of health that you've mentioned,

1 would you also support providing sustained funding and
2 resources to Indigenous communities to establish these
3 shelters or safe houses within their community?

4 **DR. PERTICE MOFFIT:** Yes. I think that was
5 raised once before. Yes. I think, though, we need to
6 explore that. What is a safe community -- a safe house in
7 a community of 75 people, you know? I think we need to
8 think about that. The community would need to be spoken
9 to about that. How do we do that?

10 **MS. WHITNEY VAN BELLEGHEM:** So, you would
11 agree, then, that this is something that the community
12 should be consulted on ---

13 **DR. PERTICE MOFFIT:** Yes.

14 **MS. WHITNEY VAN BELLEGHEM:** --- and should
15 have input on?

16 **DR. PERTICE MOFFIT:** Yes.

17 **MS. WHITNEY VAN BELLEGHEM:** Thank you very
18 much. Those are my questions.

19 **MS. MEREDITH PORTER:** Thank you. The next
20 party I'd like to invite to the podium is from
21 Concertation des luttes contre l'exploitation sexuelle.
22 Ms. Diane Matte will have six minutes for questions.

23 **--- CROSS-EXAMINATION BY MS. DIANE MATTE:**

24 **MS. DIANE MATTE:** And, you're lucky I'm
25 going to talk in English. At the end of the day, I'm

1 tired, but you're tired, too, so I'll try my best in
2 English.

3 First of all, thank you for all of your
4 testimonies today, and I want to, once again, honour the
5 Indigenous women who in any way, shape or form fight men's
6 violence against women. I work with that French word that
7 you heard, which means coalition against sexual
8 exploitation based in Montreal. We work with women who
9 are in prostitution or who have exited prostitution.

10 We advocate for the right of women not to
11 be prostituted. I was particularly -- can I call you
12 Mealia?

13 **MS. MEALIA SHEUTIAPIK:** Yes.

14 **MS. DIANE MATTE:** I was particularly
15 touched, Mealia, by your testimony and reminded of all the
16 women I've heard in the last 10 years who have come to our
17 group and have told us that if they had heard the question
18 that you put so nicely, so clearly this morning, "What can
19 we do to help you get off the street?" They would have
20 exited much earlier. And, for me, this is one of the most
21 important questions. Right now, across Canada, women do
22 not have access to exiting prostitution, or almost no
23 access. So, I would like to hear you about the importance
24 of asking that question.

25 **MS. MEALIA SHEUTIAPIK:** The main thing is

1 it's not easy to ask a girl to get off the street, and you
2 can't control a person; right? So it's all we can do is
3 just ask them politely what can I do to help you or is
4 there anything I can do to try and help?

5 **MS. DIANE MATTE:** Yeah. The women we work
6 with say that just knowing that a group like us exist is
7 also inspiring, so making sure that we -- that there are
8 some services that are funded and that that is publically
9 known that these -- this option should be offered to women
10 is very important to them -- well, I guess it would be to
11 you as well.

12 **MS. MEALIA SHEUTIAPIK:** And plus, a lot of
13 that stuff has been happening in Ottawa lately and there's
14 no organisations or there's no drop-ins for a woman.
15 There's one drop-in that's called Sophie's downtown. They
16 try and help out girls on the street to get off the
17 street, but there's nothing in Vanier like that. It's not
18 only in Vanier that happens with the girls on the street.
19 It's all over Ottawa and all over Canada or ---

20 **MS. DIANE MATTE:** Yeah.

21 **MS. MEALIA SHEUTIAPIK:** And it would be
22 nice where there's mostly Aboriginal and native and Inuit
23 girls, but every -- there's all kinds of race where the
24 Aboriginal and Inuit and people are. And there's no
25 specific spot for the Inuit girls to go to or even a

1 shelter, but it's a Aboriginal shelter.

2 **MS. DIANE MATTE:** M'hm.

3 **MS. MEALIA SHEUTIAPIK:** And any woman can
4 go there, but there's also a waiting list all the time to
5 go in there too. And unless there's a space and sometimes
6 you have to wait a day or two and then the girl gets
7 confused to go where and then they always end up back on
8 the street.

9 **MS. DIANE MATTE:** Yeah, that's the circle.
10 It's exactly the words that as I was saying that we hear
11 every day from women.

12 **MS. MEALIA SHEUTIAPIK:** Yeah.

13 **MS. DIANE MATTE:** And for us it's also
14 important -- and my next question would be to you,
15 Jennisha, if I can call you Jennisha. The importance of
16 offering, of course, services, support to women, offering
17 the possibility of exiting prostitution, you're offering
18 alternatives that you've named ---

19 **MS. JENNISHA WILSON:** M'hm.

20 **MS. DIANE MATTE:** --- the question of
21 economic autonomy, possibility of fighting discrimination
22 and so on and so forth. But it's also important for us as
23 well to talk about the evolution of prostitution.

24 **MS. JENNISHA WILSON:** Yeah.

25 **MS. DIANE MATTE:** You gave a definition

1 this morning that I don't agree with. For us, abolition
2 of prostitution is about stopping men from buying sexual
3 acts, because we deeply believe that we identify men as
4 the motor, the fuel, the cause, the root cause of
5 continued sexual exploitation, specifically of Indigenous
6 women, in pornography and prostitution.

7 You talked in your presentation about
8 disrupting the sexual exploitation and trafficking. I
9 would like to hear you about how important it is to
10 disrupt the demand.

11 **MS. JENNISHA WILSON:** M'hm. I think that
12 there's definitely the need to talk about the demand --
13 the supply and demand, specifically what you spoke about,
14 men buying sex, but it should not -- and I think this is
15 where we need to pay consideration to women, Indigenous
16 women, some of who are sex workers by choice, and with
17 pride say that they are sex workers by choice and not take
18 away their autonomy in identifying as such.

19 And I think as a non-Indigenous person to
20 Canada, it's not my place I think to say what is and what
21 isn't, but for individuals to self-identify, and for those
22 narratives to still hold weight in those conversations.

23 So while I think it's very important to
24 talk about the abolition and more so men -- stopping the
25 supply and demand, we also need to consider all those

1 narratives that women are putting forth; right?

2 **MS. DIANE MATTE:** But I see my time. Do
3 you agree that the voices of Indigenous women that we've
4 been hearing through this Commission ---

5 **MS. JENNISHA WILSON:** M'hm.

6 **MS. DIANE MATTE:** --- who say that they
7 want to exit ---

8 **MS. MEREDITH PORTER:** Excuse me.

9 **MS. DIANE MATTE:** --- prostitution should
10 be heard as well?

11 **MS. MEREDITH PORTER:** I'm sorry, but your
12 time is up.

13 **MS. DIANE MATTE:** Yeah, but the other one
14 went two minutes after. I'm sorry.

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

16 **MS. DIANE MATTE:** I would like the council
17 to be more aware.

18 **COMMISSIONER MICHELE AUDETTE:** I'll say
19 this in English.

20 **MS. DIANE MATTE:** Yeah.

21 **COMMISSIONER MICHELE AUDETTE:** We notice
22 that it happened couple of times.

23 **MS. DIANE MATTE:** Yes.

24 **COMMISSIONER MICHELE AUDETTE:** And we told
25 her in a nice way to make sure that it doesn't happen

1 again. It's ---

2 **MS. DIANE MATTE:** Okay.

3 **COMMISSIONER MICHELE AUDETTE:** --- a rule.
4 Do I like it? No. So I am so sorry that you and Fay had
5 to go through that. It sounds like we made some decision
6 against you or something like that. It's not.

7 **MS. DIANE MATTE:** Okay.

8 **COMMISSIONER MICHELE AUDETTE:** Okay?
9 Believe me. We won't do it again. We'll make sure that
10 we respect the time, a time that I don't like. I don't.
11 Merci.

12 **MS. DIANE MATTE:** Thank you. Merci.

13 **MS. MEREDITH PORTER:** That completes the
14 process of cross-examination of the witnesses.

15 And I'm going to ask my colleague, Ms.
16 Ford, if there are any questions on the record. Do you
17 have any questions for re-direct of any of your witnesses?

18 You're shaking your head no? Okay. You do
19 not. Okay, thank you.

20 **--- RE-EXAMINATION BY MS. MEREDITH PORTER:**

21 **MS. MEREDITH PORTER:** Dr. Moffitt, I just
22 have one question for you. Following the questions for
23 cross-examination that have been put to you, are there any
24 further comments on any of the issues that our parties had
25 asked you about that you wanted to add any comments to at

1 all?

2 **DR. PERTICE MOFFITT:** Yes, I mean, I did
3 want to add -- I'm sorry, I can't even remember who asked
4 me about the intergenerational strengths. Well, there are
5 many, many strengths that I could say. There's strengths
6 of people living out their cultural practices and their
7 relationship with the land. These are all strengths. And
8 what they contribute to our north is huge. It's their
9 land. We're settlers on that land, but they are so
10 welcoming to people as well. And they have many
11 strengths. They have a lot of resilience. And they are
12 looking at preserving their stories, particular the
13 Elders, because they are worried about their language and
14 the stories being lost because they haven't been recorded.
15 And so at greater numbers they're recording their stories.
16 So there is a lot of strength in young people as well.

17 So I just want to make sure that people
18 realise in case I didn't address that. Thank you.

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

20 At this time, Commissioners, I'd like to
21 ask if you have any questions or comments for the
22 witnesses.

23 **--- QUESTIONS FROM CHIEF COMMISSIONER MARION BULLER:**

24 **CHIEF COMMISSIONER MARION BULLER:** Yes, I
25 have just a few questions. I was expecting to go last.

1 Good thing I wrote them down.

2 Ms. Wilson, you've heard Dr. Moffitt talk
3 about the violence and silence in the north, and I'm
4 wondering if you've encountered the same sort of silence
5 in the south in urban centres?

6 **MS. JENNISHA WILSON:** No, I think that
7 women are actively talking about this issue and so are men
8 that are not perpetrators of violence. I think the matter
9 that is not spoken about is, is everyone else listening to
10 what they're saying, because they -- folks are, like,
11 speak up. We need to hear what you're saying. Folks are
12 sharing that information. It's a matter of if the folks
13 that are receiving this information is actually listening
14 to what's being said.

15 **CHIEF COMMISSIONER MARION BULLER:** Okay,
16 thank you.

17 Ms. Sheutiapik -- pardon me if I
18 mispronounce that -- what's --

19 **MS. MEALIA SHEUTIAPIK:** It's okay.

20 **CHIEF COMMISSIONER MARION BULLER:** -- your
21 view? Do you think from your experience in an urban
22 setting in the south that this same type of silence about
23 violence exists in urban centres in the south?

24 **MS. MEALIA SHEUTIAPIK:** I think that's been
25 happening a lot lately. Nobody's coming up to talk about

1 what's been going on. And but we don't also want to push
2 the person to talk. It's just a matter of being patient
3 and you can't really force a person to talk either; right?
4 But there is a lot of silence out there that could be
5 spoken, because there is help out there.

6 **CHIEF COMMISSIONER MARION BULLER:** Without
7 asking you to repeat yourself, how can we encourage Inuit
8 women, in particular, to speak out?

9 **MS. MEALIA SHEUTIAPIK:** There's only one
10 drop-in for Inuit people in Vanier. And but they don't --
11 it's mostly for housing help, but nothing much to do with
12 Inuit women or girls, and not enough women counsellors,
13 but there is going to be another treatment opening which
14 I'm happy for. Yes.

15 **CHIEF COMMISSIONER MARION BULLER:** Okay.
16 Thank you. Starting with you, Ms. Wilson, I don't know if
17 you're familiar with what used to be, and I don't know if
18 it still happens, john shaming campaigns that have gone on
19 across Canada, usually from the grassroots level, not
20 initiated by the police so much. What's your view of
21 those types of campaigns?

22 **MS. JENNISHA WILSON:** To be honest, it
23 hasn't been a point of conversation when working with
24 Inuit; right? Because the focus hasn't been on shaming
25 other people, it's about how can we heal from this; right?

1 I think that my -- and this is me speaking
2 with very limited information on this topic. I find that
3 a lot of movements around shaming other people is often
4 led by White Canada. It's not often led by Indigenous
5 people or racialized folks who are experiencing the
6 violence by these johns. And, with saying that, I think
7 that there are better methods than shaming someone in
8 trying to find solutions.

9 So, while they may have a place in other
10 narratives of supporting -- ending violence towards
11 particular groups, I don't feel as though it would be most
12 appropriate for the communities that I've worked with and
13 that I'm a part of in terms of racialized (indiscernible)
14 shaming other individuals. And, I'll say that the reason
15 why I say that is because sometimes, the individual who is
16 perpetrating the violence as a john may also be a
17 community member. So, I don't think it's fair in terms of
18 looking at restorative practices of how do we ensure that
19 everyone is healing together to move forward if we're
20 constantly shaming individuals for learned behaviours
21 sometimes.

22 **CHIEF COMMISSIONER MARION BULLER:** The
23 reason I'm asking the question is I'm trying to do a shift
24 in thinking that may be impossible. But, rather than
25 looking at -- or maybe in addition to considering, what

1 services, what supports do we need to put in place to help
2 women leave the street? What do we need to do -- let's
3 flip it over now to the other side. What do we need to do
4 or what can we do to make mostly men and boys understand,
5 and the traffickers as well, hands off, these women are
6 not property, and you will be convicted of offences --
7 criminal offences even without their testimony in court.
8 How -- what do you think about that?

9 **MS. JENNISHA WILSON:** I think it's a very
10 interesting concept and idea, and I would love to explore
11 it more with you at a different point. Personally, I --
12 in terms of directions, where you might find more
13 information is, I know the Ottawa police has a from johns
14 to gentlemen program, that they might actually be able to
15 provide more insight on how they're doing that.

16 **CHIEF COMMISSIONER MARION BULLER:** And then
17 finally, Ms. Wilson, over the course of hearing evidence
18 from families and survivors all across Canada, we've heard
19 about how language can be a real barrier to accessing
20 services. What languages do you have available, and in
21 what languages do you offer services at TI?

22 **MS. JENNISHA WILSON:** So, TI, it's
23 predominantly English. I know we have some French
24 speakers on staff if needed, and Inuktitut as needed and
25 requested. We also have funding -- we're very fortunate

1 to allocate to having translators for staff in the case
2 that we're working with someone that would prefer that as
3 their primary language.

4 **CHIEF COMMISSIONER MARION BULLER:** Okay.
5 Thank you. Well, thank you all three for your testimony
6 today. It's been very helpful.

7 **--- QUESTIONS BY COMMISSIONER QAJAQ ROBINSON:**

8 **COMMISSIONER QAJAQ ROBINSON:** I'm going to
9 start by thanking you all. (Speaking in Indigenous
10 language). I want to thank you especially. And, we've
11 spoken before, and now we're speaking on this forum and
12 (speaking in Indigenous language). Thank you so much for
13 bringing the rest of us to a place of understanding that
14 only you could have brought us. So, nakurmiik, Mealia.

15 **MS. MEALIA SHEUTIAPIK:** You're welcome.
16 Yes. I was so scared and nervous. It's not something
17 anybody talks about daily.

18 **COMMISSIONER QAJAQ ROBINSON:** Yes, but it
19 happens daily; right?

20 **MS. MEALIA SHEUTIAPIK:** Yes.

21 **COMMISSIONER QAJAQ ROBINSON:** And so, we do
22 have to talk. And, I'm thanking you so much for having
23 the, like, (speaking in Indigenous language), your
24 strength to just do it.

25 You said something that was so powerful,

1 that it took all of these programs, agencies, government
2 services that were around you all the time. The cops were
3 around you, the Child and Family Services were around you.
4 But, it was somebody saying, what help do you need, that
5 was that point.

6 And, people talk about -- we use terms and
7 we talk about how we provide services and how services
8 have to be focused, and you'll hear words like, it has to
9 be person-centered, or dignity-focused or meet them where
10 they're at. And, I think all those concepts, you just
11 made it -- those are just fancy terms and you captured
12 what in essence that is, you ask, what do you need? But,
13 the most important thing following asking that question is
14 acting, then you have to give what is needed.

15 So, thank you for helping me understand in
16 a very real way what some of these fancy terms coming out
17 of research ---

18 **MS. MEALIA SHEUTIAPIK:** Right.

19 **COMMISSIONER QAJAQ ROBINSON:** --- have told
20 us. So, nakurmiik, Mealia, for that.

21 **MS. MEALIA SHEUTIAPIK:** (Speaking in
22 Indigenous language).

23 **COMMISSIONER QAJAQ ROBINSON:** And,
24 Jennisha, as I thought about that and I looked at the
25 pushes and the pulls that you identified, and these are

1 consistent with what we heard yesterday from the police,
2 different factors that push and pull women into situations
3 where they'll be exploited. A couple -- I mean, those are
4 all consistent, but I have also heard from women who have
5 shared with me in private that belonging, a sense of worth
6 ---

7 **MS. JENNISHA WILSON:** Yes.

8 **COMMISSIONER QAJAQ ROBINSON:** --- and love
9 were what they needed too.

10 **MS. JENNISHA WILSON:** Absolutely.

11 **COMMISSIONER QAJAQ ROBINSON:** And, what I'm
12 learning is that when we as a society, as community
13 members don't give that to our fellow humans, and when
14 governments don't give what is needed, the pimps do.

15 **MS. JENNISHA WILSON:** Yes.

16 **COMMISSIONER QAJAQ ROBINSON:** So,
17 fundamentally, it goes back to what Mealia said, what do
18 you need? And, it's our collective responsibility to give
19 our Inukatiks (phonetic), our fellow humans, what we need.

20 So, I just -- I wanted to share with you
21 both, and Dr. Moffitt your testimony as well, how that
22 made me think, sort of, 45,000 feet up, what this -- what
23 you're teaching me and I wanted to share it with you. I
24 think it's important that you know I'm learning, so I just
25 wanted to convey that. It's fundamental. If we don't

1 give as a society, as governments, as humans what is
2 needed for our well-being, those predators will take that,
3 and they'll use it and they'll target.

4 I struggle with the word "vulnerable" --
5 and this is a conversation for another day. But,
6 "vulnerable" seems to place it on the person, when
7 marginalization, exploitation, targeting is the real
8 problem. So I was intrigued by some of the key factors
9 that you talked about Jennisha for the push. Education,
10 foster care location, incarceration -- jails ---

11 **MS. JENNISHA WILSON:** Yes.

12 **COMMISSIONER QAJAQ ROBINSON:** --- mental
13 health, addictions, health care, and then poverty
14 reduction, affordability of food. So, in Nunavut and many
15 northern parts of provinces, in Nunatisavut, Nunavik and
16 NWT, Yukon and to our friends from Northern Ontario,
17 Northern Manitoba, every northern part of the provinces,
18 these are realities. There are no universities. There
19 are still places where in Northern Ontario where you can't
20 even get your high school. You have to go down to Thunder
21 Bay. There aren't hospitals. For simple things like
22 dental work, you need to jump on a plane and go three
23 hours to then go and be in a health facility where
24 everyone's housed as a group and then targeted.

25 I was intrigued by these service related

1 pushes -- pulls. And, it reminds me of -- and I'm not
2 sure if you're familiar with the Qikiqtani Truth
3 Commission, but we heard evidence about what went down in
4 '30s, '40s, '50s, '60s, '70s in the Eastern Arctic in
5 Nunavut and the relocation to settlements, some were
6 forced, though, relocations. Others were coerced by the
7 promise of services.

8 We look at the migration south now in 2018
9 and the growing number of Inuit in urban settings. Is it
10 your understanding that this population is growing because
11 of migration or because having babies in the South?

12 **MS. JENNISHA WILSON:** What do you mean by
13 "having babies in the South"?

14 **COMMISSIONER QAJAQ ROBINSON:** Like, that
15 just families are growing, that it's not part of a
16 migration, that it's just a family that's moved south and
17 they have kids, and -- but that the major contributor to
18 the growth in the population is migration versus growth?

19 **MS. JENNISHA WILSON:** I think it's more so
20 migration than a growth, to be honest. And, just to add,
21 it likens to -- when I think of when immigrants come from
22 international spaces to Canada of this idea of fleeing
23 poverty or a better life, it very much mirrors that;
24 right?

25 **COMMISSIONER QAJAQ ROBINSON:** And, it

1 strikes me that this failure, or this limited resourcing
2 of the North, and Dr. Moffitt, you spoke to this as well,
3 that has resulted in coerced relocations in the '50s, '60s
4 and '70s is arguably because of the lack of investment and
5 resources in the northern communities is now resulting in
6 a coerced migration out of rural areas into urban
7 settings. Is this -- is my math off?

8 **DR. PERTICE MOFFITT:** No, your math is not
9 off. And, in fact, quite often from our remote
10 communities, they will come into Yellowknife for a medical
11 and stay on the street and not go back. There are more
12 services for them on the street than there are back in
13 their community. It's very sad.

14 **COMMISSIONER QAJAQ ROBINSON:** Did you want
15 to add to that Jennisha or Mealia? Are you -- that forced
16 movement from the North/South?

17 **MS. MEALIA SHEUTIPIK:** There has been a
18 lot of medical travel, and the cancer, and stuff like
19 that. So, a lot of escort services that are escorting a
20 sick person, they end up abusing. And, when they're
21 supposed to be taking care of a sick person, they end up
22 drinking, and then they get kicked out of the boarding
23 home, and that's how they end up stuck down here, because
24 they either missed their flight or they just don't want to
25 go back up and purposely miss their flight. And, that's

1 how they end up down here, and then end up on the street,
2 and then abuse themselves. It's that vicious cycle again,
3 over and over.

4 But, I think there should be something to
5 do with the medical travels after they miss the flight. I
6 noticed a lot of that about Inuit women too. They end up
7 getting stuck in Ontario without getting any help, without
8 knowing where to go, but there's only a few drop-ins for
9 Inuit people. And then that's how it usually happens, and
10 there are other ways that people get stuck down here
11 without knowing where to go.

12 **COMMISSIONER QAJAQ ROBINSON:** And then it's
13 easy for the traffickers to pick them up ---

14 **MS. MEALIA SHEUTIPIK:** Yes.

15 **COMMISSIONER QAJAQ ROBINSON:** --- or they
16 become exposed to more risk?

17 **MS. MEALIA SHEUTIPIK:** Yes.

18 **COMMISSIONER QAJAQ ROBINSON:** Yes. Thank
19 you. I think that's something that's really important to
20 look at. And, Jennisha, you touched on this basically
21 state sanctioned trafficking.

22 Dr. Moffitt, I wanted to speak to you a
23 little bit about what information is available and if this
24 is an area of concern and need to be looked at more, the
25 sexualized violence within intimate partner violence.

1 Full disclosure, I prosecuted for a number of years. And,
2 it was interesting to see how because of views that, you
3 know, sex between a husband and wife were okay, that sex
4 between a husband and wife were normal, the fact that it
5 happened right after a beating or something like that,
6 that it wasn't recognized as sexual assaults or sexualized
7 violence because it was between a husband and wife. Is
8 this something that continues today, sort of like an under
9 appreciation, under recognition, and then therefore a lack
10 of reporting and prosecution?

11 **DR. PERTICE MOFFITT:** I think the answer is
12 I don't know. But, when I look at Judith McFarlane from
13 Texas Woman in the States, she has identified that it is a
14 problem, that it's under researched and that we need to
15 look at this. So, I can't really -- I just hear about it,
16 but I don't really have good knowledge about it to be able
17 to speak to it.

18 But, I think it's an area when we're
19 talking about areas that need to be researched and looked
20 at, I think it's a really important area. And, I think
21 healthy sexuality, like when we're talking about healthy
22 relationships, we need to have conversations about -- you
23 know, always about consent and always about how they're
24 feeling and whether they're doing it on their free will,
25 or whether they feel obliged, or whether it's really a

1 continuation of the violence, or whether it's something
2 that -- out of desire trying to -- you know, where they
3 appreciate the sex; you know? So, I don't think we know
4 all the answers, but I think it is an important area to
5 look at in terms of sexual assault.

6 **COMMISSIONER QAJAQ ROBINSON:** Thank you.
7 You recounted an experience of an individual with
8 schizophrenia whose ability to hear voices was appreciated
9 by an elder. And, it struck me that in situations like
10 that, the whomever who is doing the research or reporting
11 on that is in a very -- there's high responsibility in
12 terms of how you talk about a report, that kind of an
13 experience.

14 For a reader that is a die hard DSM-V fan,
15 you would read that and say, "Well, they're just ignoring
16 a mental health crisis," whereas a knowledge keeper who
17 has the science of their science that would recognize that
18 as a gift. So, I'm wondering, perhaps, if you could talk
19 about the importance of how those experiences are retold
20 in research and reporting, and I suppose the -- sort of
21 the ethics around that.

22 **DR. PERTICE MOFFITT:** Yes, it's very
23 difficult. I even wondered if I should say that as well,
24 but when, you know, when you've received funding for,
25 like, something like the Arctic Inspiration Prize and you

1 want -- you need more funding, this to me seems like a
2 beautiful initiative that's helping people, and we're so
3 into evaluating and measuring it in terms of our western,
4 do we have to do that? Those are considerations.

5 Is it ethical? Yes, I really struggle with
6 that, because that's not my knowledge, but it's an
7 important story that this man is getting better, and it's
8 related to that sacred knowledge keeper piece of
9 information, and there's always concern about exploiting
10 Indigenous knowledge as well. I mean, you know, having
11 sacred things stolen from them.

12 And so, it does make you feel -- it's
13 definitely a dilemma, and it's a dilemma that we need to
14 explore more and think about it, and how would we resolve
15 it? But, you know, we were told that with pride when we
16 were there as a -- we are being successful. We're helping
17 this man with our medicine, basically. Our medicine with
18 a cup of tea and being out in the land, and I'm not
19 belittling that because there is truly a relationship that
20 people have that is beyond my relationship. But, it's
21 something that's really important. It's something that we
22 have to acknowledge and put some funding there.

23 That's the problem. We can't just do this,
24 the same old stuff, where they don't have stable funding.
25 They need to -- now, they had great difficulty actually

1 accessing land for the Indigenous foundation. Now they're
2 talking about, okay, they had a meeting just before I left
3 in terms of what should this place look like where we have
4 this land that's going to be near the new hospital? What
5 should that be like? How do all of those things work?
6 What are the best protocols?

7 I know some of the Indigenous elders have
8 visited Anchorage in Alaska. They've seen some of their
9 facilities. They talk about what they want to do there.
10 One of our elders, Be'sha Blondin, just a short time ago,
11 was not allowed to take her medicine into our hospital.
12 So, those are openly shared.

13 Now, I mean, now she can do that but, you
14 know, there's a lot -- so much to think about that would
15 be much better coming from an Indigenous elder than coming
16 from me. I'm probably not getting it right at all, but I
17 hear it. I understand what people are saying, and I
18 think, you know, when they tell you things like this, then
19 it's -- and you witness it when you're out there. You
20 witness people in much better health, feeling free to
21 talk. Even the students, the Indigenous students that are
22 in the class feel more free to talk. So, it's
23 interesting.

24 **COMMISSIONER QAJAQ ROBINSON:** Well, thank
25 you so much, and I want to extend greetings from Lesa

1 Semmler who sits on our National Family Advisory Circle,
2 and who I understand was one of your students when she was
3 becoming a nurse, and she is a woman from -- an Inuk from
4 the Inuvialuit Region who is -- who has been such a gift
5 to us. So, I extend her greetings to you. Jennisha and
6 Mealia, nakurmiik. Thank you. And, Jennisha, full
7 confession, I was on the TI board before the Inquiry
8 started.

9 **MS. JENNISHA WILSON:** I know.

10 **COMMISSIONER QAJAQ ROBINSON:** Okay. And,
11 the fight to get the money for this work was a battle,
12 that constant government's will versus what people need,
13 that constant tension, and to recognize that this is a
14 tool being utilized and a resource utilized makes -- I'm
15 very happy about that. And, again, Mealia (speaks in
16 Inuktitut).

17 **MS. MEALIA SHEUTIAPIK:** Thank you very
18 much.

19 **--- QUESTIONS BY COMMISSIONER BRIAN EYOLFSON:**

20 **COMMISSIONER BRIAN EYOLFSON:** Thank you.
21 First of all, I just want to thank all of the -- all three
22 witnesses very much for your evidence for coming here and
23 spending the time with us to share with us. Ms.
24 Sheutiapik, I especially want to thank you for sharing
25 some of your journey with us, some of your truths, and I

1 just want to thank and acknowledge your strength and your
2 courage for doing so in contributing to the work of the
3 National Inquiry. So, thank you very much.

4 **MS. MEALIA SHEUTIAPIK:** You're welcome.

5 **COMMISSIONER BRIAN EYOLFSON:** Dr. Moffitt,
6 I just had a couple of questions for you. In the -- in
7 your evidence, you were talking a bit about -- well, you
8 were talking about the normalization of intimate partner
9 violence, and you had mentioned a bit about residential
10 schools and the intergenerational impacts of residential
11 schools, and you talked about -- at one point, you
12 mentioned, you know, the first generation that goes
13 through residential school, they may still retain their
14 language, but then the subsequent generations, for
15 example, there's a loss of language and culture.

16 But, I'm just wondering if you could unpack
17 a bit more the impact of residential schools in
18 intergenerational terms in terms of its contribution to
19 the normalization of intimate partner violence?

20 **DR. PERTICE MOFFIT:** Well, I think, you
21 know, in our territory, we are very lucky to have elders
22 come into the -- our school programs, and we talk a lot
23 about the legacy and the history and the trauma. And,
24 certainly, it's systemic, and it's related to
25 colonization. And, I didn't say it, but in 2004, when I

1 was doing my Ph.D., I wrote a paper called Colonization: A
2 Determinant of Health, and I believe colonization is a
3 determinant of health. And, I think -- I think that's a
4 big part of why it's normalized as well. And, maybe it's
5 a part, as well, that shuts people down, you know? I
6 don't know. Did that answer your question?

7 **COMMISSIONER BRIAN EYOLFSON:** Mm-hmm.

8 **DR. PERTICE MOFFIT:** Thank you.

9 **COMMISSIONER BRIAN EYOLFSON:** And, just
10 further to that, then, you know, what needs to be done in
11 your region to help overcome those intergenerational
12 effects and the role that they may play in normalizing
13 violence in terms of healing?

14 **DR. PERTICE MOFFIT:** Yes. Well, you know,
15 I hear reconciliation. We need to -- we do need to
16 reconcile. We need to -- I don't always know quite -- how
17 we're going to do that, but we need to identify that we
18 had this terrible history, we're going to change this,
19 we're going to give more power to local communities.
20 That's one of the things we need to do.

21 Any type of research, you know, that's been
22 done, it's really expensive to do research the right way
23 in the north, with communities, with questions coming from
24 the communities and the type of back and forth and
25 consultation that needs to be done. And then, you know,

1 people joke about every individual in the north having in
2 their family a mother, a father and an anthropologist, you
3 know, and sometimes we've had some wonderful
4 anthropologists. So, I'm not putting down
5 anthropologists.

6 But, sometimes with other, like, one-time
7 studies, people don't come back. They do a study and they
8 don't come back to the community and talk about the study.
9 And, you know, sometimes what they'll say is, "Well, we
10 don't have the money." So, it means that when we're
11 developing grants, we have to write that all into the
12 grant. We need to go back to the community.

13 And then when we go back to the community,
14 we need to know what the community wants from us. You
15 know I was trying to figure out, okay, for OCAP, I'm going
16 to give you all back these transcripts that I did for
17 breastfeeding, and the grandmothers in Tulita said to me,
18 "We don't want those. We want you just to make a booklet
19 from the grandmothers to the mothers." Okay. We'll do a
20 booklet. So, we need to -- even with knowledge
21 translation, knowledge mobilization, what do local people
22 want? What is going to work best for them? How -- let
23 them steer the ship. I mean, that's where we -- what we
24 need to do and we need to be reminded of that, I think,
25 often.

1 **COMMISSIONER BRIAN EYOLFSON:** Okay. And, I
2 just have a follow up question as well. You were asked
3 about programs for male perpetrators of violence, and I
4 noticed one of the papers you provided, Intimate Partner
5 Violence in the Canadian Territorial North, that was
6 Exhibit 52 at Schedule B, talks about the Department of
7 Justice in the Northwest Territories has created a nine
8 month program for male perpetrators of violence that was
9 offered through the Healing Drum Society. Do you know
10 anything about that program?

11 **DR. PERTICE MOFFITT:** Yes. Of course it no
12 longer exists. And then after that, they had a new day,
13 after that we've had programs. And, now, we have one of
14 the Indigenous counsellors, I think he was at the program,
15 works with the Arctic Indigenous Camp. And, the programs
16 for men have always only been in Yellowknife, so we need
17 programs whereby perpetrators have more access. We need
18 to figure out something that works better in terms of
19 communities. And, we do -- we have an Indigenous
20 psychologist in Inukvik and he's doing a PhD, he's
21 Blackfoot in Inuvik and -- you know, so we have some real
22 hopes. He leads a lot of men's groups. So, we just need
23 a more whole, W-H-O-L-E, approach to our little -- yes, I
24 had to say that because you said yesterday. I was here.

25 I think -- you know, I say this often, just

1 to think more from a system. We only have 42,000 people.
2 We're like a little town in the south. It's just that
3 we're spread out. Okay. So, we need to treat us like a
4 system and try to think about what our issues are and map
5 it out, and try to say, let's not get caught up in which
6 department should do this or that, or who has priority or
7 who gets that funding, and the politics of it, but just
8 map out a new plan that's to address our problems. I
9 think that's something that we could do.

10 **COMMISSIONER BRIAN EYOLFSON:** Okay. I
11 think those are all my questions. Thank you very much,
12 everyone.

13 **--- QUESTIONS BY COMMISSIONER MICHÈLE AUDETTE:**

14 **COMMISSIONER MICHÈLE AUDETTE:** First, I'm
15 going to start en Anglais, and then Inuktitut, and then
16 English -- my wish. But, I guess not today. I'll start
17 in English.

18 This morning was a hard morning. I always
19 wake up saying, thank you, you know, for just being alive
20 and being here, a mom, sometimes a Commissioner -- it's a
21 tough one this week. But, as a human being. But, very
22 sensitive about what is happening around the world and
23 most of all with my brothers and sisters, Indigenous, a
24 big family across Canada.

25 So, the Quebec -- people from Quebec were

1 reading in the newspaper this morning, a big, big wave of
2 suicide in Puvirnitug, and you were talking when the news
3 was out, so it was very -- for me, try to breathe and stay
4 calm, stay here with you, and -- but also thinking about
5 the families that every month will lose a loved one
6 because of suicide.

7 And then it remind me also, I used to live
8 in Montreal and work for the friendship centre and for an
9 organization called Quebec Native Women. And, we had that
10 friendship or relationship also with the sister from your
11 people, the Inuit women and girls. And, a year ago, Qajaq
12 and I wanted to go for a walk, a march in Montreal, to
13 honour two Inuit young girl who were found dead, Siasi and
14 Sharon.

15 **MS. MEALIA SHEUTIAPIK:** Okay. Yes. Yes.

16 **COMMISSIONER MICHÈLE AUDETTE:** Yes. Yes.

17 And, what we were able to learn from either families, or
18 media or groups that walk for the families, and made a
19 vigil, you know, a beautiful moment for the family, that
20 they left for a better life. And, it seem like many of us
21 have to run away or leave our place, our home for a better
22 life. And, I want to make sure if I understood, is it
23 something -- you also left for a better life?

24 **MS. MEALIA SHEUTIAPIK:** You mean from up
25 north?

1 **COMMISSIONER MICHÈLE AUDETTE:** Yes. To go
2 in the south.

3 **MS. MEALIA SHEUTIAPIK:** I was very young
4 and naïve that time. And, I was -- I always wanted a
5 better life because that's why I had three jobs when I was
6 a teenager -- beginning of my teenage life. And, of
7 course, we have dreams at a young age. And, I wanted a
8 better life of course, and running away from home,
9 thinking that I'm going to make it better, it just got
10 worse.

11 **COMMISSIONER MICHÈLE AUDETTE:** But, do you
12 think we, as Indigenous women, who come from the north, we
13 deserve to have a better life in our home, respective
14 home?

15 **MS. MEALIA SHEUTIAPIK:** Yes. I think
16 that's another one that I was really upset about myself,
17 leaving back home, and leaving my grandmother, and leaving
18 my siblings and just leaving everything behind. I didn't
19 realize that until I was starting to give birth, and then
20 that's when I started thinking about my siblings. And, I
21 think that's another one that I've always been grieving,
22 is leaving my family behind. And, I don't think I'll ever
23 stop grieving about that because I haven't really stopped
24 grieving over my kids. I know they're in good hands.

25 **COMMISSIONER MICHÈLE AUDETTE:** Where are

1 they?

2 **MS. MEALIA SHEUTIAPIK:** They're in Ottawa.
3 And, my two other ones are up north. But, I know they're
4 in good hands, I talk to them. They know where they come
5 from.

6 **COMMISSIONER MICHÈLE AUDETTE:** And, they
7 know you love them?

8 **MS. MEALIA SHEUTIAPIK:** Yes, very much. I
9 always feel bad, mostly leaving my grandma. And, when she
10 passed away, that's what made me started doing hard drugs
11 and other stuff, which I didn't really want to, but I did
12 just to kill the pain.

13 **COMMISSIONER MICHÈLE AUDETTE:** I understand
14 that part, to kill the pain or many pain.

15 **MS. MEALIA SHEUTIAPIK:** I always had a hard
16 time talking about my siblings and my grandmother, because
17 I felt embarrassed leaving them behind. Before I did the
18 hard drugs, it was the hash and the weed, but I always
19 thought about them. I never forget about them. I always
20 talked to my grandma and call her, tell her that I'm okay.

21 **COMMISSIONER MICHÈLE AUDETTE:** And, what
22 did she say?

23 **MS. MEALIA SHEUTIAPIK:** "When are you
24 coming back home?" Yes. And, I know she's watching over
25 us. I was trying to do better, that's all. I had enough

1 of abusing myself. I was just tired. I've been tired for
2 so many years, but without showing it, always pretending
3 to be happy. Yes. Thank you. That's another one that
4 had to come out. Yes.

5 **COMMISSIONER MICHÈLE AUDETTE:** And, you
6 know what we do after with your tears? If you want. We
7 burn them. Sacred fire.

8 **MS. MEALIA SHEUTIAPIK:** Thank you.

9 **COMMISSIONER MICHÈLE AUDETTE:** Yes. If you
10 want.

11 **MS. MEALIA SHEUTIAPIK:** Yes, I don't mind.
12 Eventually we're all going to be ashes one day.

13 **COMMISSIONER MICHÈLE AUDETTE:** But knowing
14 that we're very alive, I cry and I know crying is part of
15 the healing, one of many solutions, you know, for -- so I
16 found it's very cold, but I'm the one who asked for table,
17 okay, so I can have my stuff. But, I have to say how,
18 from where I'm sitting or from where I feel the thing, how
19 strong you are, and how women like Siassi (phonetic) or
20 Sharon and many other sisters from your people, from the
21 Inuit would have learned from you.

22 And, for those who are here and listening
23 are -- will hear from you, gee, you're very powerful.
24 Very powerful.

25 **MS. MEALIA SHEUTIAPIK:** Thank you.

1 **COMMISSIONER MICHÈLE AUDETTE:** Yes, and we
2 can go scream outside. The world will take the rest, but
3 very important.

4 **MS. MEALIA SHEUTIPIK:** Nakurmiik.

5 **COMMISSIONER MICHÈLE AUDETTE:** And, the
6 courage, because I'm from the North, me too. It's not
7 that north when ---

8 **MS. MEALIA SHEUTIPIK:** Nunavut?

9 **COMMISSIONER MICHÈLE AUDETTE:**
10 Schefferville. Schefferville. We used to be neighbours.
11 And, knowing that we don't have programs or services, or
12 lack or -- it's hard to have a better life in
13 Schefferville, and I believe by listening to you that it's
14 also a reality in your community.

15 And, this Inquiry will not change
16 everything in one day, but as a mom, it's my wish along
17 many other people that if we can put one seed or many of
18 it, I don't know if seed put -- grow up in your region,
19 I'm sure it does, but it's worth that you came here. For
20 me, you're the expert. You're the most powerful expert.
21 You too, but I believe that grassroots women who lived the
22 experience will help me to make a better decision when
23 it's time to write the report and make the recommendation.
24 I see you say yes. I will ask like Maître Fraser, say
25 yes, for the record.

1 **MS. MEALIA SHEUTIAPIK:** I totally agree
2 with you, yes.

3 **COMMISSIONER MICHÈLE AUDETTE:** See, Maître
4 Fraser, I'm capable too. But, you know, humour, also,
5 it's part of the healing.

6 **MS. MEALIA SHEUTIAPIK:** Yes.

7 **COMMISSIONER MICHÈLE AUDETTE:** I will say
8 to you another thing, that if you want to add more, if you
9 want to connect with us, continue that dialogue, that
10 giving knowledge to us, the door is open anytime.

11 **MS. MEALIA SHEUTIAPIK:** Thank you very
12 much.

13 **COMMISSIONER MICHÈLE AUDETTE:** Anytime.
14 Yes. It's very important. And, if you ever, one day,
15 feel like you want to go back to a dark road, call us, us,
16 human beings, that like to walk beside you.

17 **MS. MEALIA SHEUTIAPIK:** Yes, for sure, I
18 will.

19 **COMMISSIONER MICHÈLE AUDETTE:** And, for the
20 two other strong women beside, make sure that your
21 research, your articles, your knowledge broke those --
22 break the walls or the doors on the other side who are the
23 people that are writing policies, laws, legislation,
24 programs. Don't stop. Don't stop. We have a beginning
25 and we have an ending with this Inquiry, as you can tell.

1 Everybody says that they didn't have enough time. It's
2 true. We don't collectively have enough time, but you
3 will continue, you. And, me too, with my free moccasin
4 after, for sure.

5 I will ask this question in French. In
6 fairness, we were able to hear questions from parties with
7 standing even though the time was over, and I think it's
8 important that you hear the last question, and that's me.
9 Fairness. Very important. You will hear the last
10 question. It's going to be in French, and the three of
11 you can answer. Un groupe... vous m'entendez, maintenant?
12 Je parle super-bien anglais, maintenant! Je n'ai plus
13 d'accent, je ne fais plus de fautes quand je parle
14 anglais!

15 (LAUGHS/RIRES)

16 Tu peux même l'écouter en inuktitut, mon
17 français!

18 **MS. MEALIA SHEUTIAPIK:** No, I have it now.

19 **COMMISSIONER MICHÈLE AUDETTE:** Inuktitut or
20 English?

21 **MS. MEALIA SHEUTIAPIK:** English.

22 **COMMISSIONER MICHÈLE AUDETTE:** I think you
23 have Inuktitut. I am so triple language now, wow. Mais
24 c'est une question importante... c'est une question
25 importante. Madame Blainey, dans sa conclusion, voulait

1 vous poser une question importante, ici, au niveau de la
2 conscientisation entre les femmes. Est-ce que vous saviez
3 que la prise de conscience entre les femmes, c'est aussi
4 un outil principal d'une intervention abolitionniste? Ça,
5 c'est la question.

6 Et le message qu'elle vous lance aussi,
7 c'est : nous ne voyons pas uniquement les femmes comme des
8 prostituées ou des victimes. Nous les défendons, nous les
9 soutenons et nous marchons avec elle.

10 And, that for me, that part that I walk
11 with and defend, I think it's beautiful. So, in fairness,
12 voice la question qui a été posée par un groupe.

13 **MS. JENNISHA WILSON:** Would you like us to
14 answer? I agree with that. Like, I think that our --
15 often times allies take up space with arguing what is the
16 better method when we really should be listening and
17 taking our cues from the individuals experiencing it on
18 the ground, and paying an homage to their struggles by
19 listening, supporting and fighting for what they need in
20 that moment and over time.

21 **MS. MEALIA SHEUTIAPIK:** I think it's really
22 strong what you just said. I'm kind of lost for words,
23 but I also agree that I don't mind you guys walking beside
24 me.

25 (APPLAUSE)

1 **MS. MEALIA SHEUTIAPIK:** Thank you.

2 **COMMISSIONER MICHÈLE AUDETTE:** Usually,
3 Chief Commissioner, la grand patron, will say something to
4 you, but she doesn't know -- oh, you want to add
5 something? I rewind it.

6 **DR. PERTICE MOFFITT:** Well, I just wanted
7 to say that I absolutely agree to that statement. I do
8 take every opportunity to show people that I'm an ally in
9 the Northwest Territories when we have things like Take
10 Back the Night, or any of those, and I walk and I listen,
11 and I think we need to continue to do that, making a
12 statement, and walking as well in private times when
13 somebody approaches us and needs a listening ear, and
14 remembering to ask the question, and be prepared to take
15 action. I think we said both of those things.

16 **COMMISSIONER MICHÈLE AUDETTE:** Merci.
17 Merci, and Marion will say something to you, but there are
18 some women in the back that they have been like this since
19 the moment you start your truth -- sharing your truth with
20 us. They are our guide, our mentors, our women, not --
21 they don't belong to us. The women that support the work
22 that we have to do. And, sisters, mothers, grandmothers,
23 and we have an elder, she's young, beautiful elder that
24 wants to say thank you in her way to you. And, she's
25 cute.

1 **ELDER NORMA JACOBS:** Wa-scan-o (phonetic).
2 I just wanted to acknowledge and to validate, you know,
3 your good words, your strong words and, you know, I wanted
4 to honour you for your struggle, for your story, and that
5 many of us who are here and concerned with the events that
6 have unravelled in our time, like -- and it's not just
7 now. Like, it's been for 500 years and over. And I
8 wanted to acknowledge you and for, you know, for making
9 those changes in your life and the impacts.

10 Like, in our culture that, you know, we
11 have ways that we move about and that we have a council,
12 you know. And this is in our stories. And I believe that
13 we all have a story. We all have a creation story and we
14 all have principles and protocols that we follow, and
15 through colonisation that a lot of those have been
16 diminished and exterminated in our communities to our
17 understanding. And so, you know, with your story, that,
18 you know, we have dreams. We have wishes. We want
19 change. We want good things. We want a good life. I
20 mean, that's an expectation that we come here with.

21 And but in accordance to our stories that
22 councils that brought us from the sky world gave us a
23 bundle, and for us to carry with great dignity and
24 integrity. You know, they value our journey here. And,
25 you know, and that kind of bundle still carries on in our

1 community today that we, you know, we sent people to
2 different communities in search of answers, in search of
3 new ways, in search of knowledge.

4 And that, you know, so when we get the urge
5 to leave our community that, you know, for those dreams
6 and those wishes that prior to colonisation that we
7 actually had a ceremony, you know, to send our people off,
8 but we gave them a bundle that they could carry with them
9 and that, you know, every once in a while they could look
10 in there if they got stuck to search out those principles
11 or those protocols or tools that were provided for us to -
12 - you know, whether it be pictures or medicine or food,
13 and to unwrap those things that -- as we journey that we
14 were still guided by the council in our community.

15 You know, so journeying to another
16 community is not new to us, but it's when we do it without
17 those supports from our community and knowing what's
18 impacted our life and who do we look for change. And it's
19 knowing ourselves and, you know, what we're reaching for,
20 what is it that has got fulfilling, you know, in our life.

21 And many of us here have, you know,
22 experienced and, you know, maybe not to the depth of your
23 experience, but there are some of us who have. And that,
24 you know, coming forth and sharing your story and, you
25 know, in the company of people that you don't know. That

1 takes strength and it takes courage. And I want to honour
2 you for that, you know, for that courage.

3 You know, just like in our communities when
4 we give life to our music instruments or to our children
5 that we always dress them up and we introduce them to
6 creation. You know, and, you know, and we bring these
7 gifts of knowledge to our newborn, you know, with words of
8 encouragement, with kindness, with love. You know, and we
9 embrace those children to be a part of our family. You
10 know, we welcome them because they bring us joy, because
11 they bring us happiness and they come to help us reflect
12 on, you know, that existence of the sky world and how
13 beautiful it is there. And that's where we come from, you
14 know.

15 And we need to remember that on our human
16 journey, because we are spiritual beings, that we need to
17 remember that on our human journey that we are to be
18 reflective of what exists in that sky world because we are
19 honourable people in many ways, in many stories, in many
20 ceremonies, in our language. Everything is there that we
21 need, you know, to exist on this land as a human.

22 And so, you know, those things have been
23 eroded from our families many times over through many
24 different circumstances. But we, as the women here, you
25 know, in this whole room, have experienced, you know,

1 trauma in our life. And we have a -- you know, as a
2 Haudenosaunee woman, I stand here as a proud
3 Haudenosaunee woman. And that, you know, we have many
4 ceremonies that enhance our life, you know, throughout the
5 season, every day, giving thanks for life, giving thanks
6 for all of creation that surrounds us, because they too
7 are our medicine. They walk with us every day. They
8 direct us. They guide us. You know, they talk to us, but
9 we have to make the time to listen.

10 So, you know, we stand here because we know
11 of the need to be recognized as that foundation of our
12 communities. We need to be recognized as the holders of
13 truth. We've given life to many things, many, you know,
14 humans, many babies, many children, you know. And we have
15 given them the best of who we are with the teachings that
16 we were given in our bundles.

17 You know, and, yes, we lose our way.
18 Doesn't mean that we're perfect people and it doesn't mean
19 that, you know, that we never have grief, because we do.
20 But it means that we have the tools in order to move
21 forward, to open those bundles and to look inside and to
22 say this is what I need today. And to always have the
23 Creator in the -- you know, as our person that we talk to
24 and to acknowledge and give thanks to for this life.

25 You know, many of us struggle because of

1 the loss of our tradition, because of the loss of our
2 culture, because of the loss of our language. You know,
3 we've lost or way, but you know what, when we go within,
4 within ourselves, in the deepest part of our body and our
5 heart, we find those tools that are already there. And we
6 have to bring them out. We can't depend on services to --
7 you know, to promote that, because it's within us. It's
8 our story. It belongs to me, you know, as it belongs to
9 you.

10 So, you know, it makes me happy that you
11 have, you know, jumped over all of those hurdles, you
12 know. And it has created that strength for you, you know,
13 to come through this and to be offered an opportunity to
14 serve your people.

15 You know, and I always -- I often ask
16 because I used to work for -- in the prison, you know, to
17 talk with the women and I always ask them, what will your
18 community do without you? You know, and we don't think
19 about those things in our moments of, you know, of grief,
20 of sorrow, of helplessness, you know, because we have the
21 tools to help ourselves and we have to go within to find
22 those things.

23 And, Jennisha, like, I welcome your -- you
24 know, your research, the work that you do, because I've
25 done that work, you know, from my own culture. I don't

1 have a degree. I don't have a, you know, be a huge
2 background, like a Grade 8 graduate. But I've done the
3 work and I've done the research, so everything that you
4 talked about I know is true, because I learned it from my
5 culture, from my ceremonies, from my language, from what I
6 see every day, you know. So I know that you come from a
7 place of truth. And that's what's valuable to us is that
8 we look for the betterment of our people because we need
9 to recognize our losses. We need to know that when those
10 visitors come of sadness and grief, that they're only
11 reminders -- that they're only visitors, and they'll only
12 be here for a little while. We acknowledge them and they
13 leave, you know, just like when we have neighbours come
14 in, you know? Grief comes the same way. I know. I
15 experienced that, and I know that, you know, we have that
16 time to remember, and we have a time to acknowledge and
17 validate, yes, that's true. I had a loss, you know? But,
18 I'm moving forward because we have still the coming faces
19 that are yet unborn, that we have to make change and to
20 grasp those things from our past and move it into our
21 present so that we can prepare for that future.

22 So, the work that you do and, you know,
23 your commitment to ensuring the truth for our people, you
24 know, is, you know, high up here. And, I really
25 appreciate that, because when I was growing up, my dad

1 always told me that. He says, "You watch when you see
2 people go off to school, go to university. There's not
3 one person that's going to come back and teach you about
4 us, because you'll come back with a western thought, and
5 you'll try to change the rest of us."

6 So, it's another process for colonization,
7 you know? And, I looked around and I see, you know, we
8 have Native nurses, we have Native doctors, we have Native
9 clinicians, and not one of them has talked about who we
10 are and the strength that we have, the medicines that we
11 carry, you know, and the honour of being a woman and being
12 of this land, you know, the original people.

13 So, you know, the work that you do is
14 important and, you know, I just want to hold you up and,
15 you know, be grateful for you that you've come this far in
16 your journey, and that we can celebrate, you know, with
17 you your achievements, you know, and you know, you still
18 have goals to reach still. You know, you have, I'm sure,
19 all of our blessings to uphold you to that, and to, you
20 know, like I said, to hold you in that high regard that
21 you are working from your heart, and that's where we all
22 need to come from, is from our heart, you know, because,
23 you know, we all have a need to be, you know, accepted.
24 We all have purpose, you know? We're learning from one
25 another.

1 And, the one thing I heard that you were
2 talking about grooming, and one of my things that I like
3 to speak about is that, you know, the English language is
4 so uncertain, and has no roots, and that, you know, when
5 you talked about grooming, and I thought of a bride and
6 groom, you know?

7 And, I always think, you know, that that is
8 a word that contributed to the colonization of our people
9 and the lesser being, that we needed to be groomed, you
10 know, in order to be accepted, and that the bride, you
11 know, is the bridle that they put in a horse's mouth to
12 lead them around, you know, to turn whenever they want and
13 be controlled by that groomer.

14 And, I see it today, you know. I came from
15 that kind of situation, you know. So, you know, it's
16 important that we know who we are. And, I want to leave
17 you with another story that was told to me by another
18 elder, is that, you know, there was this family and a
19 grandmother, a mother and a daughter, and they were -- the
20 daughter got married, and she -- her partner said, "Why do
21 you always do that?" Because they had been working -- you
22 know, living together now for a while.

23 And, he said, "Why do you always do that?"
24 He said, "You cut off the, you know, the ends of the roast
25 before you put it in the oven?" And, she said, "I don't

1 know," she said, "but my mother used to do that." He
2 said, "Well, let's go and find your mother and we'll ask
3 her why you're cutting off the ends of that meat." And,
4 they said, "Okay, we'll go look for her."

5 So, they went to the mother, and she asked
6 her mother, she said, "We came here," she said, "for a
7 purpose, to find out why you cut the ends of that roast
8 off before you put it in the oven?" And, she said, "Oh, I
9 don't know." She said, "My mother used to do that," she
10 said. So, they went to the mother and the grandmother,
11 and they asked her. They said, "Well, we have this
12 concern because, you know, the mother and the daughter is
13 now practising your practice of cutting off the ends of
14 the roast." And so, they said, "Well, you know, we want
15 to know why you did that?"

16 And so, the grandmother, she laughed and
17 laughed, and she said, "You silly girls," she said. "Why
18 I cut the ends of the roast off," she said, "was because
19 the pan was too small."

20 So, a lot of times in our work, you know,
21 because of colonization and because of someone else trying
22 to control our thinking, that we forget about the simple
23 things in life, and the truth of our life. And, we carry
24 those behaviours and those attitudes and pass them on to
25 generations after us, and nobody knows that there was a

1 simple reason, you know, because she didn't have a pan
2 large enough, you know, to hold her roast.

3 And, we forget about that, you know, and we
4 need to get back to the basics of life, because we're not
5 going to be here that long. We all have a time when we're
6 done, and we should be doing the best that we can, you
7 know, to embrace our people, to support them, to honour
8 them, to walk with them, you know, and to sit and to have
9 conversation. You know, that's the two-row welcome, you
10 know.

11 So, the wampums are not empty today. They
12 still have a lot of meaning that we can look back on to
13 find our answers to why this violence exists, you know,
14 and why we have to have a gathering and, you know, look
15 for answers to why we have murdered and missing Indigenous
16 women, because we know the truth, but we haven't been
17 allowed to speak that truth. And, you know, like I said,
18 I've done the work, and I know where it comes from. And,
19 I know how our women have been marginalized and that they
20 have been used, you know, to proclaim power, and it still
21 exists today, you know. It's ongoing.

22 And, we, as the women, because we're the
23 foundation of all of our nations that we have to be the
24 ones to make change. And so, we have to come forward and
25 to use our voice, and to be an example of our struggles

1 and to share those things that we experienced.

2 So, again, and for -- I'm sorry, Moffitt?

3 **DR. PERTICE MOFFIT:** Pertice.

4 **ELDER NORMA JACOBS:** Pardon?

5 **DR. PERTICE MOFFIT:** My name is Pertice.

6 **ELDER NORMA JACOBS:** Oh, okay. And, I
7 didn't -- I'm sorry, I didn't hear your presentation, but
8 you did talk about research, and we did research long ago
9 in regards to breast feeding, you know, and we know, you
10 know. It's beneficial. And, you talked about health, you
11 know, that colonization was, you know, not a good
12 determinant for our people, because it changed and it
13 caused fear, you know, and it affects us today because of
14 the illness and diseases that exist. We never experienced
15 those before, you know, but it's because of the
16 oppression, because of the fear. So we're ...upsetting
17 our foundation; you know? Because that's where the
18 strength lies in the Earth, and we are the Earth. We are
19 the ones who give life. So, I want to thank you for being
20 here today and, again, to acknowledge your courage for
21 sharing now.

22 **COMMISSIONER MICHÈLE AUDETTE:** Merci
23 beaucoup, Norma. Thank you very much. Barbara, Norma and
24 Gladys will, if you will accept, give you an eagle
25 feather.

1 **MS. MEALIA SHEUTIAPIK:** Okay, yes.

2 **COMMISSIONER MICHÈLE AUDETTE:** Yes.

3 **MS. MEALIA SHEUTIAPIK:** I always wanted one
4 from someone else.

5 (LAUGHTER)

6 **COMMISSIONER MICHÈLE AUDETTE:** What did you
7 say? I want to translate it.

8 (APPLAUSE)

9 **COMMISSIONER MICHÈLE AUDETTE:** Oh, they're
10 from the Mi'kmaq Territory.

11 **MS. MEALIA SHEUTIAPIK:** Okay, wow.

12 **COMMISSIONER MICHÈLE AUDETTE:** Yes, even
13 better wow.

14 **MS. MEALIA SHEUTIAPIK:** Nice.

15 **COMMISSIONER MICHÈLE AUDETTE:** Yes, very
16 powerful. Very nice. And, I would like to ask my sisters
17 to come here. And, the rest is very technical, so I leave
18 it to Chief Commissioner to adjourn.

19 **CHIEF COMMISSIONER MARION BULLER:** Thank
20 you. We're adjourned until 8:00 tomorrow morning.

21

22 --- Upon adjourning at 17:21

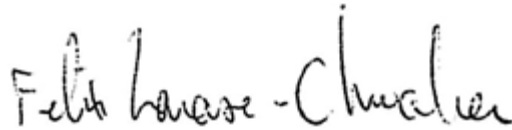
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LEGAL DICTA-TYPIST'S CERTIFICATE

I, Félix Larose-Chevalier, Court Transcriber, hereby
certify that I have transcribed the foregoing and it is a
true and accurate transcript of the digital audio provided
in this matter.

A handwritten signature in cursive script that reads "Félix Larose-Chevalier". The signature is written in black ink and is positioned above a horizontal line.

Félix Larose-Chevalier

Oct 16, 2018