

Report on the Implementation of Domestic Violence Death Review Committee Recommendations 2007-2011

Action - Research - Change



End Violence Against Women
*survivors, advocates & activists
working for change*

Ontario, Canada

December 2014

**Report on the Implementation
of Domestic Violence Death Review
Committee Recommendations
2007-2011**

prepared by

ARC

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Terms and Acronyms

VAW - Violence Against Women: Violence against women spans a continuum of attitudes, beliefs and actions. It is a symptom of systemic/structural inequality that establishes violence as a behavioural norm through its acceptance of unequal power in all forms of relationships (also defined as a gender-based analysis). Recognizes that there is a continuum of violence that can include physical, sexual, mental, psychological, emotional and financial violence; and focuses on coercive and controlling behaviour. (United Nations definition: *Any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty whether occurring in public or private life. Violence against women is a major health and human rights issue.*)

DV - Domestic Violence: Primarily, domestic violence is perpetrated by men against women. While the term “domestic violence” is frequently used and is the term chosen by the Ontario government, the report will primarily use the phrase “violence against women” as it most accurately reflects the body of evidence about violence that occurs in the home.

DVDR - Domestic Violence Death Review Committee: A multi-disciplinary advisory committee of experts that was established in 2003 in response to recommendations made from two major inquiries into the deaths of Arlene May/Randy Iles and Gillian and Ralph Hadley. The purpose of the DVDR is to assist the Office of the Chief Coroner in the investigation and review of deaths of persons that occur as a result of domestic violence, and to make recommendations to help prevent such deaths in similar circumstances. The DVDR consists of representatives with expertise in domestic violence from law enforcement, the criminal justice system, the healthcare sector, social services and other public safety agencies and organizations. Reviews are conducted by the DVDR only after all other investigations and proceedings – including criminal trials and appeals – have been completed. As such, DVDR reviews often take place several years after the actual incident. See more at www.mcscs.jus.gov.on.ca/english/DeathInvestigations/office_coroner/PublicationsandReports/DVDR/DVDR.html

APT- Advanced Patrol Training: www.opconline.ca/depts/apt

BCT- Basic Constable Training: www.opconline.ca/.../BasicConstable

CAS- Children's Aid Society: www.oacas.org

CBSA -Canadian Border Services Agency: www.cbsa-asfc.gc.ca

CFSA- Child and Family Services Act: www.mcscs.jus.gov.on.ca/e-laws

CIC- Citizenship and Immigration Canada: www.cic.gc.ca

CPIC- Canadian Police Information Centre: www.cpic-cipc.ca

CREVAW- Centre for Research & Education on Violence Against Women and Children:
www.learningtoendabuse.ca

DVRM- Domestic Violence Risk Management Report: www.attorneygeneral.jus.gov.on.ca

DVSR - Domestic Violence Supplementary Report: [www.mcscs.jus.gov.on.ca/publications & reports](http://www.mcscs.jus.gov.on.ca/publications&reports)

FLS- Front Line Supervisor: www.opconline.ca/depts/FLSonline

FRO- Family Responsibility Office: www.mcscs.jus.gov.on.ca/en/mcss/programs/familyResponsibility/

FVI- Family Violence Initiative: www.justice.gc.ca

IPV- Intimate Partner Violence: see definitions of VAW and DV

IRS- Indian Residential Schools: www.aadnc-aandc.gc.ca

IRS-RHSP- Indian Residential Schools Resolution Health Support Program: www.hc-sc.gc.ca

JWG- Joint Working Group on Violence Against Aboriginal Women: www.women.gov.on.ca

MAG- Ministry of the Attorney General: www.attorneygeneral.jus.gov.on.ca

MCSCS- Ministry of Community Safety and Correctional Services: www.mcscs.jus.gov.on.ca

MCSS- Ministry of Community and Social Services: www.mcscs.jus.gov.on.ca

MHLTC- Ministry of Health and Long Term Care: www.health.gov.on.ca

MIOB- Make It Our Business campaign: www.makeitourbusiness.com

MPRDV- Model Police Response to Domestic Violence: www.attorneygeneral.jus.gov.on.ca

NFF- Neighbours Friends and Families: www.neighboursfriendsandfamilies.ca

NRF- New Relationship Fund: www.ontario.ca/business-and-economy/new-relationship-fund

OACAS- Ontario Association of Children's Aid Societies: www.oacas.org

OAITH- Ontario Association of Interval and Transition Houses: www.oaith.ca

OCC- Office of Chief Coroner: scs.jus.gov.on.ca/english/office_coroner

ODARA- Ontario Domestic Assault Risk Assessment: odara.waypointcentre.ca

OHSA- Occupational Health and Safety Act: www.labour.gov.on.ca

OPC- Ontario Police College: www.opconline.ca

OPP- Ontario Provincial Police: www.opp.ca

OSOR- Ontario Sex Offenders Registry: www.mcscs.jus.gov.on.ca/home/policing

OWD- Ontario Women's Directorate: www.citizenship.gov.on.ca/owd

PAR- Partner Assault Response programs: www.parprogram.ca

PPO- probation and parole officers: www.mcscs.jus.gov.on.ca/corrections

SIP- Special Interest Police: www.oacp.on.ca

SPP- Special Priority Policy: www.mah.gov.on.ca

V/WAP- Victim/Witness Assistance Program: www.attorneygeneral.jus.gov.on.ca

WCH- Women's College Hospital: www.womenscollegethospita.ca

Introduction

The Inquest into the murder of Arlene May by her ex-partner, Randy Iles in 1998 which produced 213 recommendations and the Inquest into the murder of Gillian Hadley by her ex-partner, Ralph Hadley which produced an additional 58 recommendations served to highlight the need for more to be done across all Ministries to address the issue of woman abuse. Between 1982 and 1997, 550 Ontario women were killed by their intimate partners - an average of 34 per year.

For many women's organizations this was a call to action and we voiced our concerns loud and clear to the provincial leadership to do more to end violence against women in intimate relationships.

The Domestic Violence Death Review Committee (DVDRC) was created, and released its first report in 2003, reviewing deaths that occurred the previous year. The role of the DVDRC is to examine the deaths where domestic violence was a factor and to make recommendations to various Ministries, Associations and other groups with respect to policy or procedural changes that need to be made so that more deaths can be averted in the future.

The 2012 report marked 10 years for the DVDRC and in the Executive Summary they said,

"The publication of the 2012 Annual Report of the Domestic Violence Death Review Committee (DVDRC) is a milestone occasion as it represents the tenth year that the Office of the Chief Coroner has reported on its reviews and on the incidence of domestic homicide and domestic homicide-suicide in Ontario. Since its inception in 2003, the DVDRC has reviewed 164 cases involving 251 deaths.

- 55% of the cases reviewed were homicides.
- 45% of the cases reviewed were homicide-suicides.
- 73% of all cases reviewed from 2003-2012 involved a couple where there was a history of domestic violence.
- 72% of the cases involved a couple with an actual or pending separation.

The other top risk factors were:

- obsessive behaviour by the perpetrator
- a perpetrator who was depressed
- an escalation of violence
- prior threats or attempts to commit suicide
- prior threats to kill the victim
- a victim who had an intuitive sense of fear towards the perpetrator
- a perpetrator who was unemployed

In 75% of the cases reviewed, seven or more risk factors were identified." (From the Domestic Violence Death Review Committee 2012 Annual Report)

After 10 years of analysing the mitigating factors involved in 251 deaths where domestic violence was a factor, it is time to examine what has been done to ensure that the recommendations of the Coroner's Inquests and the Domestic Violence Death Review Committee are being acted upon.

This report aims to look at the recommendations that have been made by the Domestic Violence Death Review Committee to find out what, if anything, has been done to ensure that the recommendations have been put into action. In order to accomplish this, our committee reviewed the recommendations, and then wrote letters to the Ministries or Associations named in the recommendation to find out what they have done to ensure that the recommended action had been taken.

We received responses from many of the Ministries or Associations, and we would like to thank those that took the time to respond. As you will see in this report, some did not respond to our request for an update on the status of the recommendations.

In addition to providing an update on the status of the recommendations, we have also attempted to provide some background information and comments for future directions. Our comments are not intended to be a comprehensive analysis of the responses we received. Indeed, we see this document as a starting point; as a tool that can be taken up by advocates, activists and survivors throughout Ontario to measure how their communities are doing with respect to these recommendations and responses, and to work for change.

Unfortunately, the harsh reality is that women (and sometimes their children, friends and family) are still dying at the hands of their partners or ex-partners. To our knowledge, 15 Ontario women were murdered by an intimate partner or ex-partner in 2013. We have no way of knowing if this is a complete list, however, or just the ones that were reported on in the various media.

What this means is that we need to continue to be vigilant, and do more to ensure that all that can be done is being done to address this very serious and important issue.

ARC is a group of activists who are committed to ensuring that the equality rights of women impacted by violence remain on the minds and in the work of all agencies, systems, ministries and political leaders so that meaningful change can take place. Through advocacy there is dialogue, through research there is information, and combining both, there is change to eradicate violence against women.

For more information: arcstopviolenceagainstwomen@gmail.com

Women and Children murdered in Ontario

during the years of these DVDRC recommendations

(2007-2011)

2007

Elva Ashton, 36. Mother of two. Toronto. Elva died in her basement apartment as a result of multiple stab wounds to the chest. She worked taking care of elderly people. She had moved to Toronto from Grenada six years ago and had been seeing a new boyfriend for about a month. Her boyfriend, George McCleary, who was described as “jealous” called police and apparently confessed to the murder, then committed suicide by throwing himself in front of a train. (January 2007)

Vahida Blazevic, 42. Mother of two children. London. Vahida was beaten to death in her apartment. She was taken to hospital after the assault but died from her injuries. Police were called by Michael Ross, described as Vahida’s common-law husband. He was later charged with second-degree murder. (January 2007)

Nabila Asifa, 36. Brampton. Nabila was found dead in a van parked in the driveway of a house unrelated to the crime. They had been led there after a man walked into the police station and confessed to killing his wife. 41 year-old Shafqat Nagra was charged with her murder. The cause of death was not released. (January 2007)

Julie Crocker, 33 and **Paula Menendez**, 34. Toronto. Julie Crocker was a mother of two children who were present during the murders but apparently unaware of what was taking place. She worked in sales at a local radio station. Paula Menendez was a physiotherapist who had been married to radio personality that Julie Crocker was currently seeing while in the process of separating from her husband. Julie was stabbed to death in her home and Paula was found dead of “ligature strangulation” in the garage of the same house. Christopher Little, the estranged husband of Julie, called police to report that he had found the bodies. Although the crime was described as looking like a “murder-suicide”, police speculated that it may have been set up to look that way by the murderer. Christopher Little, who had been attempting to regain his relationship with Julie, was charged with two counts of first-degree murder. (February 2007)

Lyndon Wiper, 26. Mother of one child. Leamington. Lyndy, as she was known, was shot to death in her home she shared with her daughter and her parents, who found her body when they came from work. Lyndy was a press operator who, friends said, “loved life, loved animals and especially horses, which were her true love”. She had started a new relationship after breaking up with another man just a couple of months before because he had apparently become too controlling. Her ex-boyfriend, Jean Claude Gallant, was later found shot to death in his car in an apparent suicide. (March, 2007)

Rispah Adala, 32. Toronto. Rispah was strangled to death in her apartment where she lived with her husband. Rispah was described as a “friendly, outgoing, sweet, smart and generous person” by friends. She had an MBA and worked for a bank and she also dedicated time to raising funds for AIDS work and volunteering for a group supporting settlement of people from her native Kenya. Her husband, Julios Okiria Otukol was charged with second-degree murder. (March 2007)

Robin Griecken, 50. Cardinal. Police found Robin stabbed to death in the basement of her home after they received a 911 call. She had remarried her husband less than a year before the murdered and 15 years after she had divorced him after the first marriage, according to neighbours. Police had been called to the home in previous incidents. One neighbour was reported as commenting, “this is something you see in the big

cities, it's not something that happens here." Gordon Griecken, Robin's husband was found suffering from injuries outside the home. He was later charged with first-degree murder. (May 2007)

Amy Iam, 47. Scarborough. Mother of two. Amy and her mother, who was 78, were stabbed to death in their home in front of Amy's 13-year-old daughter who ran from the house wounded and screaming for help. She had tried to stop the killings. Amy's common-law partner, Alton Beckford, then killed himself. The murders took place only hours after Amy's daughter had returned from her grade 8 graduation ceremony, where she had received awards for academic achievement. Neighbours who were interviewed described Beckford as both 'happy' and a good man, and abusive to the family. Police had been called to the home previously. (June 2007)

Eugena Smith, 33. Mother of one. St. Thomas. Eugena was found strangled to death in her bed after a relative called police. Her estranged husband was found beside her suffering from a drug overdose. Court heard that she had been separated from her husband and planning to leave the church they attended. Michael Smith, 37 was convicted of first-degree murder in June 2009 and sentenced to life in prison. (June 2007)

Name withheld, Hamilton. A 16-year-old girl was stabbed to death by a 16-year-old boy in a parking lot outside her housing complex. She stumbled to her house and was taken in by her mother, who only then realized that her daughter had been stabbed. The boy was identified as the girl's ex-boyfriend. He is being sought by police. Family members asked that the girl's name not be released. (July 2007)

Landon Day, 18 months. Akwesasne Mohawk Territory. Landon was found dead by police after responding to a 911 call by the boy's mother, who was seriously injured. The woman was transported to hospital with a slashed throat and survived. Police have not released the autopsy results on the child. Carson Day, the father of the boy, was charged with first-degree murder and attempted murder. (July 2007)

Shelly Mathieu-Read, 45. Sarnia. Shelly was last seen in May but not reported missing until July. Her body has not been recovered. Her boyfriend, Thomas Moffit, has been charged with second-degree murder in connection with the murder. (July 2007)

Name withheld, 22. Toronto. Police responded to a street where they found the woman on the ground suffering from a severe head injury. She was later pronounced dead at hospital as a result of blunt force trauma consistent with falling out of a moving vehicle. A 38 year old man was later arrested and charged with manslaughter. Police have withheld the name of both the woman and the accused. (August 2007)

Shakaira Hogan, 25. Mother of one. Toronto. Shakaira was found dead in her home when someone who used to live there returned for some personal belongings. Her boyfriend later turned himself in to police. Police did not release the cause of death but said there were "obvious signs of trauma" to her body. A month after Shakaira's murder, her boyfriend apparently posted comments on a website about violence against women claiming "never would I think of harming an innocent girl." He also had a profile on Facebook saying in was part of a group called Stop Submission, which opposes Islamic teachings "if only because they radically oppresses (sic) females." David French was charged with first-degree murder. (September 2007)

Kathryn Knudsen, 41. Sarnia. Kathryn was shot to death in broad daylight in the parking lot of a local park. Police reported that she had been in a "rocky relationship" for about 18 months. Her boyfriend, Douglas James Browne, committed suicide at the same time. (September 2007)

Name withheld, 27. North York. Mother of one daughter. "Jane" was found dead in her apartment in what police described as a murder-suicide. According to police, the man killed his wife, then took their daughter to a family member's home, returning to the building to jump to his death. Police would not release how the woman was murdered and withheld the names of both the woman and man at the request of family. Police speculated that the murder was the result of "stresses" such as unemployment, finances and so on. One

police officer said it was the first time he had been called to such a scene where there had been no prior police contact with the family and called it “unusual”. (September 2007)

Aysun Sesen, 25. Toronto. Aysun, who was pregnant at the time, was stabbed multiple times in the abdomen. Her mother-in-law was also injured in the attack. Aysun’s husband, Turan Cocelli, was arrested at the scene and charged with second-degree murder and aggravated assault. (October 2007)

Zu Ling He, 47. Daughters **Xue Mac**, 4 and **Sin He**, 22. King City. Toronto. The bodies of Zu Ling and her daughters were found burned beyond recognition in a van north of Toronto. All had been shot to death. Zu Ling’s husband had also been burned in the fire and police were called when he approached a house screaming for help because of his injuries. Police indicated that there had been previous contact with the family. They later charged the man with first-degree murder. (October 2007)

Joann Smith-Fairbairn, 44. Guelph. Joann was found in her home dead of “blunt force trauma.” Her husband had earlier turned himself in to police. Some neighbours talked about sharing happy neighbourhood get-togethers with the couple; others described the couple as “a couple you couldn’t get to know” because they kept to themselves. Steward Smith-Fairbairn was charged with first-degree murder. (October 2007)

Ashley Smith, 18. Naicatchewenin First Nation. Ashley’s body was found in the bush near a main road on the reserve. Police would not release the cause of death after an autopsy was performed. Bronson Green, a 20-year-old resident of Naicatchewenin, was charged with first-degree murder. (October 2007)

Amarjeet Brar, 46 and her two daughters **Manmeet**, 20 and **Dildeep**, 22. Ottawa. Amarjeet, Manmeet and Dildeep were found shot to death in their home when police investigated after a call from relatives concerned about lack of contact with the woman. Also found at the scene next to a rifle was Amarjeet’s husband, Santbir Singh Brar, who police say killed himself after murdering his wife and daughters. Co-workers of the man, who worked for the Ottawa transit system, described him as “very outgoing, always smiling and joking around,” and shocked neighbours thought the family was “very close-knit, although admitting they didn’t see much of the family.” A close friend of one of the young women, however, told of the man’s phone calls to monitor his daughter and said that he had “a bit of a temper.” (November 2007)

Maria de Los Santos, 51. Mississauga. Maria was strangled to death in her bed. Police found her husband, Angel de Los Santos, in the house with life-threatening self-inflicted injuries after a 911 call was placed. He later died in hospital of injuries consistent with a hanging. (November 2007)

Angela Sedore, 40. London. Angela was found near Peterborough shot to death in a van beside the body of a man first named as Ray King, also dead of a gunshot wound in the murder-suicide. The van had been pursued by police and was later found in a ditch with the bodies inside. Before the chase, a friend of Angela’s was injured by a gunshot in a London parking lot where Angela was taken into the van. Angela was a sixth-grade teacher at a London elementary school. Ray King was later identified as Ray Kovacs, who had been in a relationship with Angela until about two hours before the murder, when she had apparently broken up with him. (December 2007)

Ilidia “Lois” Zois, 22 and her brother, **Jamie**, 14. Etobicoke. Stabbed to death. Police found the bodies of Lois and Jamie in her apartment after another brother, suffering from stab wounds, escaped from a locked closet after being confined for 30 hours. A friend said Lois was afraid of her boyfriend and planning to move out of their home and one neighbour described hearing “lots of fighting” from the apartment. Lois and Jamie were murdered on Christmas Day. Nana Yaw was arrested and charged with two counts of second-degree murder, attempted murder and forcible confinement. (December 2007)

Stefanie Rengel, 14. Toronto. On New Year's Day, Stefanie was lured to a meeting with a phone call, stabbed six times and left to die on the street in the snow. Her parents, both police officers, gave consent for her name to be released. Stefanie was described by friends as smart, funny and "an overall amazing happy person" who liked to write songs and poetry. A 17-year-old boy, an ex-boyfriend of Stefanie, was later arrested and charged with first-degree murder in the stabbing. Subsequently, a 15-year-old girl, said to be the current girlfriend of the boy, was also arrested and charged with first-degree murder. Both were denied bail and in an unusual move, the judge in the case stated that the motive for the stabbing was "senseless jealousy" on the part of the accused girl who "used" the co-accused an "instrument of her hatred." (January 2008)

Tashina General, 21. Tashina disappeared in January from her home on the Six Nations Reserve after leaving her mother's house to go to work. Family, community and police searched for her but her body wasn't found until near the end of April. She had been strangled to death. Tashina was pregnant when she was murdered and buried in a shallow grave on the Reserve. Her ex-boyfriend, Kent Owen Hill, was found in North Bay where he was charged with second-degree murder and returned to Six Nations. (January 2008)

Ranjida Khairi, Toronto. Mother of five grown children. This woman was found slashed to death in the penthouse apartment she shared with her husband. Police said her throat was slashed but denied that she had been 'decapitated'. Her husband was charged with second-degree murder. Police would not release the names of either the victims or the accused. (March 2008)

Nadine Parker, 36. Dunnville. Mother of three. Nadine was killed when the minivan she was riding in was deliberately driven into a concrete highway pillar. Her husband, former deputy mayor of the town, was driving. He later died in hospital. Police have determined that Nadine's death was a homicide, but were unable to determine if the death of her husband, Norman Parker, was accidental or suicide. (March 2008)

Valerie Ferguson, 44. Mother of two. Elmira. Valerie was found dead in her home after police were called to check the well-being of a resident. The death was originally thought to be a sudden death, but an autopsy determined that Valerie had been strangled. Valerie was a devoutly Christian woman and a homemaker who taught Sunday school and participated regularly in church activities. She was also active in her children's school and within the community. She was described as "a giving person" with "a heart for people." Her husband, Ken Ferguson, was charged with first-degree murder. (April 2008)

Ildiko Szava, 46, mother of one and **Karolyne Gallasz**, 70, her mother. Toronto. The bodies of Ildiko and Karolyne were found after fire gutted two units of a townhouse complex. The body of Ildiko's husband, Majid Ahmad, was also found after the blaze was extinguished. Autopsies found that Ildiko died from a stab wound to the heart. Her mother was strangled. The man was found with a gun beside him, but died of smoke inhalation from the fire he set. The couple's three-year-old son had been locked outside the apartment and sent to the complex superintendent with an apparent suicide note and phone numbers for family members. Majid Ahmad was known to police and had a criminal history of domestic violence dating back to 2005. (May 2008)

Carolyn Carroll, 44, Wahnapiatae, and **Mark Anthony Comeau**, 46, Coniston. The bodies of Carolyn and Mark were found in a remote cabin on Thor's Lake, 80 kilometres north of Sudbury. The cause of the deaths was not released. Carolyn was in the midst of divorcing her husband of 19 years at the time of the murder. Her estranged husband, John Reginald Carroll, was later charged with first-degree murder in the deaths. (May 2008)

Alicia Bateman, 28. Ottawa. Alicia's body was found strangled to death in a Jeep in her garage. She had just broken up with her ex-fiancé the week before the murder. Police also found 28-year-old Ryan Sawchuk, who had dated Alicia since high school, hanging inside the home. He had flown back to Ottawa from their

home town of Calgary, where he had been working. Family and friends were “shocked” by the crime and didn’t believe he was capable of it. (June 2008)

Lien Angelis, 42. Ottawa. Mother of two. Police found Lien’s body wrapped in a carpet in the apartment she shared with her husband after he called police to say his wife wasn’t breathing. Police said it appeared that she had been dead for several hours. The two children were inside the apartment when the murder happened. Police said the couple were divorcing. Demetrios Angelis, a senior policy analyst with the Public Health Agency of Canada, was later charged with second-degree murder. (June 2008)

Liana Matthewson, 44. Mother of two grown children. Peterborough. Liana was strangled to death and her body thrown in a dump 35 kilometres away from the city. Her daughters held an Aboriginal ceremony for her at the site of her death, and their friends organized a fundraiser to help cover the costs of funeral and travel expenses for the family. David Paul Dumas, who police described as an “on again, off again” partner to Liana, was charged with first-degree murder. (July 2008)

Karina Neff, 31. Mississauga. After Karina went missing, her family called police to investigate her disappearance. Karina’s body was discovered later in a wooded area near her home; she had been stabbed to death. Karina was developmentally challenged and often took walks in the neighbourhood with her dog, a Doberman pinscher. Neighbours described her as “always smiling, always talking” and her family described her as their “ray of sunshine.” Jason Osborne, who had what police describe as an “on-again, off-again” relationship with Karina, was charged with first-degree murder. (July 2008)

Yvonne Leroux, 58. Lindsay. Yvonne was found shot to death in a trailer park just south of the town of Lindsay. A number of people heard shots but thought that they were the shots of hunters in the area. Police conducted a manhunt across the region and about eight hours later, arrested her estranged husband after spotting his vehicle on Highway 7. Jack Hale was charged with first-degree murder. (September 2008)

Barbara Short, 48. Mother of two. Sarnia. Barbara was found dead in her home after a call from a family member. Police said she had sustained fatal injuries from an undisclosed weapon. She had recently filed for divorce from her partner of 28 years. Her husband, Craig Short, was charged with first-degree murder. (October 2008)

Susan Ryan, 57. Mississauga. Susan was found dead in her home after a 911 call to police. Police withheld the cause of death after an autopsy was performed, citing concerns about keeping the investigation pure and the jury pool unaffected, and a justice of the peace placed a ban on publication of any details on the case. Susan was a prominent real estate agent in her community who was involved in numerous community activities and causes. One of her activities was supporting Interim Place, the local women’s shelter. Lawrence Kenneth Ryan, Susan’s husband of 30 years and a recently retired officer with the Toronto Police Services, was charged with second-degree murder. (November 2008)

Wanda DeLong, 64 and her daughter **Elizabeth Tompkins**, 41, and her son, **Richard DeLong**, 38. Toronto. Wanda was found after the husband of her daughter came to the house to check on Elizabeth and found a note on the door: “Do not enter. Call police.” Inside the house was the body of Wanda and her two adult children stabbed to death. Wanda’s husband was found with them, shot through the head. Autopsies determined that Keith DeLong had stabbed his wife and children before killing himself. Wanda had been getting ready to leave the next day for a visit to her dying mother in Mexico. Neighbours on the street where they had lived for over 30 years described the couple as “wonderful” and “treasures” and said the double murder-suicide didn’t make any sense. (November 2008)

Zdenka Praljak, 53. Toronto. Zdenka was found stabbed to death in her home after police were called by a woman identified by neighbours as her mother. According to police, her husband, Mladen Praljak, was charged with second-degree murder while in hospital suffering from self-inflicted injuries. (December 2008)

Linda Eaton, 61 and her son, **Daniel**, 23. Waterloo. Linda and her son Daniel, were found in their home after emergency crews and firefighters were called to a fire that gutted the house. At first the deaths appeared to be related to the fire, but police later reported that both Linda and her son had been stabbed multiple times. Linda's husband, John Eaton, later died of smoke inhalation in hospital. Two other university-aged children were not at home at the time. (January 2009)

Cybil Dawn Stoney, 37. Thunder Bay. Cybil was found dead in her apartment after a family member concerned for her safety called and asked police to check on her. Her ex-partner had been convicted a month earlier of uttering threats, breaching two court orders and assault causing bodily harm against Cybil. He had been sentenced to five months in jail and ordered into a substance abuse and anger management program based on First Nations teachings. Michael Shingabis was later apprehended by police at a nearby university and charged with second-degree murder and breaching his probation order. (January 2009)

Nadia Gehl, 28. Kitchener. Nadia was shot to death as she walked to a bus stop to go to her job as assistant manager of a local toy store. Her body was found by people nearby who were waiting for the bus. Police reported that someone was seen running from the scene and that neighbours heard the shots, but no leads immediately led to an arrest and police could not discover a motive for the murder. Nadia's husband, Ronald Cyr, made an emotional plea on television for information about the killing and several months later talked to media about the pain and loss he was experiencing with her. He had previously worked for three years as a legal assistant to Nadia's uncle, a prominent criminal defence lawyer in the community, but was working as a salesperson and with youth in the community at the time of the interview, according to press reports. In August 2009, police arrested Cyr, 31, along with two other men, Nashat Qahwash, 24 and Zdenek (Dennis) Zvolensky, 24, and charged all three with first-degree murder. (February 2009)

Muruwet Tuncer, 41. Mother of four. Hamilton. Muruwet was found dead with her throat slashed in a house she shared with other family members. Her 13-year-old niece, who witnessed the attack, was also stabbed a number of times but escaped and ran for help. Muruwet sought help more than once from shelters, police and immigrant services and had the support of family and friends in both Canada and abroad. She had been separated from her ex-husband, who was previously convicted of assaulting her, for four years but was ordered by family court to provide access to their 4-year-old son and regularly discuss the child's upbringing with her abuser. Muruwet had also applied for permanent residency in Canada on humanitarian grounds because she had left France to escape an earlier life-threatening marriage. Her appeal was turned down. Her ex-husband, however, had previously been granted refugee status in Canada. According to her sister, police and probation knew that Muruwet was being harassed but did not follow-up, claiming there was nothing they could do about text messages she was receiving and that she considered threats. Her ex-husband, Cengiz Isiko, was charged with first-degree murder and attempted murder. (February 2009)

Laurie Funke, 48. Mother of four. Hamilton. Laurie disappeared and was reported missing by her family. Her body was found in the Niagara River at Fort Erie three months later, where it had likely been dumped, police reported, on the day she vanished. Police would not release details of how Laurie was murdered. Kenneth Knaus, 46, a man that Laurie had been seeing for about 18 months, has been charged with second-degree murder. Family expressed shock at the arrest and reported that Knaus appeared to be a "softy" who would never do anything like that. (February 2009)

Sherry Martin, 52. Mother of three grown children. Police responded to Sherry's home after complaints of a disturbance. They found her body inside the home with "obvious signs of trauma". Some neighbours reported that police had been to the house on previous occasions but that they didn't know much about the couple because they kept to themselves. Sherry's common-law partner, Ken Mullin, 40, was arrested at the scene and charged with second-degree murder. (February 2009)

Pamela Olara, 33. Mother of four. Toronto. Police found Pamela dead in her apartment after they were called, apparently by her teenaged son, who also told a neighbour that his dad was trying to stab his mom. Pamela's husband, Felix Apoko, was shot by police and taken to hospital, where he was in critical condition. A police officer also suffered serious but not life-threatening stab wounds. The couple had recently separated, according to reports, but the husband had visited the apartment. The children were placed in foster care until family members can be found. Pamela worked in a child care program where a spokesperson reported that she was loved by the parents because she was loved by their children. The provincial Special Investigations Unit was called in to examine the incident because the man was shot by police. No charges have been laid in the death. (April 2009)

Helen Slichta, 71. Mississauga. Helen was bludgeoned to death in an attack that was targeted on her daughter, Heather, 44, who was taken to hospital in critical condition. Heather's 25-year-old daughter was also injured in the attack. Helen was visiting her daughter's home at the time of the attack and reports suggested she and her granddaughter had intervened in an attack on Heather. Horace Weekes, 59, the estranged partner of Heather was later found unconscious and suffering from hypothermia in a ravine area some distance from the home, and was taken to hospital. He was later charged with first-degree murder of Helen, as well as aggravated assault and attempted murder of Heather and her daughter. Weekes had a history of violence in the relationship and had been charged with assaulting and threatening Heather in 2005. Charges were withdrawn. Court records indicated that Heather feared for her safety. Just a month before the attacks, Weekes had been released from a 33-day jail term resulting from breaching a court order to stay away from Heather. (May 2009)

Ingrid Hutt, 61. Hamilton. Ingrid was found shot to death in a field in Ancaster, near Hamilton, beside the body of Helmut Roesslet, 79, who was also shot. The couple had been in a relationship but Ingrid lived alone. Friends did not see anything amiss in the days leading up to the deaths. Police would not say if the deaths were a murder-suicide or a "suicide pact", but a lifelong friend of Ingrid's said that she couldn't believe that she would commit suicide because although she was upset because her daughter had delivered a still-born baby, she had plans to visit her another child and her grandchildren in the summer. Two guns were found at the scene. Roesslet was a hunter. He was described by friends and neighbours as a very nice gentleman. (May 2009)

Kerry Walters, 25, and her daughter **Starla**, 11 months. Carleton Place. The bodies of Kerry and her baby daughter were found hidden in a bedroom of their home after they were reported missing. Just hours previously, police had been called to the Queen Elizabeth Hotel in Montreal, where a man had apparently jumped from the 17th floor to his death. The man was identified as Lennox Walters, 28, Kerry's husband, who had recently been released from the military after serving in Alberta. The couple had moved back to the Ottawa area where Kerry found work as a social worker and was closer to her family and friends. A weapon was seized from the murder scene and the deaths of Kerry and Starla were later ruled a double homicide, but police would not disclose the cause of death or the type of weapon found. Subsequent information suggested that Kerry and her husband were separating and that there had been abuse in the relationship. Lanark County Interval House organized a vigil in memory of Kerry and Starla with the consent of Kerry's family. (May 2009)

Michelle Simon, 45. Mother of three grown and three adopted children. Barrie. Paramedics answering a 911 call found Michelle in her apartment suffering from stab wounds. She later died in hospital. Her husband of 21 years was charged with second-degree murder. (June 2009)

Dayna Jamieson, 34. Guelph. Dayna was found dead at her home by police. Police did not release the cause of death, but arrested her boyfriend, who was suffering from serious, but non-life-threatening lacerations, at the scene. Dayna had been living with Haley for about eight months. Friends and family remembered Dayna as a nature and animal lover who cared for abandoned pets and was popular with many friends. Casey Haley, 34, was charged with second-degree murder. (June 09)

Maria Nzokilandevi, 53. Mother of three. Windsor. Maria was found stabbed to death by her two youngest children, one in kindergarten, after they arrived home from school. They ran crying and screaming for help to neighbours who called police. Maria and her children had moved to Canada from Burundi less than a year before her murder. She was described as a happy woman who, despite challenges with speaking a new language, was friendly and very nice to everyone. Her husband, Melkioro Gahungu, 57, was later found and charged with second-degree murder. (June 2009)

Hilda Agawa, 63. Batchewana First Nation near Sault Ste. Marie. Police were called to Hilda's home after relatives became concerned for her. They found her murdered body in her bedroom with the body of James Dunn, 55, who died of a self-inflicted wound. Police would not provide any other details of the deaths than to say they were a murder-suicide. Hilda and Dunn were reported to be in a relationship but did not live together. Acquaintances and neighbours of Dunn said he was a quiet man who seemed to be a decent guy. No further information was provided but police reported that there had been no suggestion of past violence. (July 2009)

Heidi Ferguson, 39. Mother of two children. Orangeville. Heidi was shot to death by her estranged husband about 45 minutes after police responded to a disturbance call at her home about her ex-partner. By the time police had arrived her ex-partner had left but returned later to kill her. She staggered to a neighbour's house saying "I've been shot by my husband, help me" but she died of her injuries later in hospital. Two hours after police responded to the house Hugh Ferguson, 42, shot himself at his million-dollar home in a nearby community as police surrounded the home. Heidi had separated from her husband 14 months before the murder-suicide. The case was turned over to the Special Investigations Unit of Ontario to review police response in the case. (September 2009)

Name withheld, 19, name not released at request of family. Toronto. This unknown young woman's body was found strangled in her apartment after her boyfriend walked into a police station and turned himself in. The woman had moved to Toronto two years ago and had been in a relationship with the man for almost a year. He lived in New Orleans and had moved to Toronto six months before the murder. Police claimed the motive for the murder to be "jealousy". Binh Nguyen, 23, was charged with first-degree murder. (December 2009)

Tammy Lewis, 29. Mother of two. Oshawa. Tammy was found dead in her home after police responded to a 911 call. Police also found a man in the home with non-life-threatening injuries, who was transferred to hospital. It was just a few days after Christmas. The cause of Tammy's death was not released. Shawn Pegg, 30, who had been living with Tammy for about two years, was charged with second-degree murder. (December 2009)

2010

Stephanie Hoddinott, 20. Midland. Stephanie was shot to death in a residence just weeks before her 21st birthday. She had completed her studies in veterinary college and was planning to move with her cousin to Toronto to begin a new part-time job at the University of Toronto. Her ex-boyfriend was found in a vehicle not far from the home suffering from a gunshot to the head. He was taken to hospital in Toronto. An arrest warrant was issued for Jacob Ferrier of Penetanguishene on a charge of first-degree murder but Ferrier later died of his self-inflicted injuries. (January 2010)

Ashley Boudreau, 24. Ottawa. Ashley was found dead in her apartment, along with her boyfriend, Andrew Ferguson, who was also found dead. Autopsy results indicated that it was murder-suicide. According to a family member, Ashley was planning to leave the relationship with the man she had dated off and on over a number of years. Nine days before, police had responded to a 'domestic' at the same address. The Special Investigations Unit reviewed police response to the earlier incident because it took place on the same day as the funeral for a slain local police officer and there were questions about the level of police intervention. Even though a witness is cited in their report saying that officers on scene were heard saying the assault was

ongoing while they were on the scene, the SIU determined that officers acted reasonably when they left the scene despite failure to make contact with either Ashley or her partner. They had seen Andrew through a window but he had refused to answer the door. Ashley was murdered later the same day. (January 2010)

Name withheld, 48. Mother of two children. Richmond Hill. A woman was found stabbed to death in her condo apartment after police were called. Efim Klimovich, 52, was charged with second-degree murder. Police would not speak publicly about the relationship between the accused and the woman, but characterized the murder as a “domestic homicide”. Neighbours reported that a couple had lived in the condo for about six years and had two older children. (January 2010)

Michelle Quemener, 46. Mississauga. Michelle’s body was found in a condominium apartment after police were called to the home. Eugene Wong, 60, of Toronto who was the owner of the condo was charged with first-degree murder. Police would not reveal the relationship of the accused to the woman but called the murder a “case of domestic violence”. The accused and the woman had apparently known each other for a long time. (February 2010)

Marie Roberts, 29. St. Thomas. Marie was shot to death and her body found in the Radisson Hotel in London. She had been reported missing after not returning from a trip to the city. David Hatch, 30, of Calgary Alberta was charged with first-degree murder. Hatch had moved to Calgary to work and had previously known Marie and her boyfriend. Police would not clarify the relationship of the accused to Marie but referred to the case as “domestic related”. Family and friends of Marie described her as a “total angel”. (February, 2010)

Bryce Smith, 3 mths. Sudbury. Bryce was taken to hospital after he was found by paramedics in his home in critical condition. He later died of his injuries in hospital. Christopher Smith, 21, the baby’s father, was later charged with manslaughter, criminal negligence causing death and failing to provide the necessities of life. He was also charged with assaulting his wife, Angele Bertrand and ordered not to communicate with her. After he was released on bail, he fled with Bertrand and was later charged with breaching the non-communication order. Angele Bertrand was also charged with being a party to the breach and released on bail on condition that she stay at a women’s shelter. (February 2010)

Lorena Sousa, 36. Leamington. Mother of two children. Lorena’s body was found in the basement of her home. Autopsy results confirmed that she had been stabbed to death. Her husband, Miguel Sousa, was also found bleeding in the driveway with his throat slashed. He later died in hospital. Neighbours described them as “the perfect couple”. (February 2010)

Hinda Tannous, 64. Leamington. Mother of five grown children. In a case eerily similar to the murder of Lorena Sousa, Hinda was found dead in her home after the body of her husband, Mohssen Tannous, was discovered in his driveway by a passerby. There was a knife nearby. Police said the couple died of edged weapons injuries. Police wouldn’t confirmed that the case was a murder-suicide but indicated that the public had nothing to worry about and that no suspects were being sought. The murder took place only several hundred meters from that of Lorena Sousa just weeks earlier. (March 2010)

Marion Deacon, 46. Whitechurch-Stouffville. Mother of three children. Marion’s body was found dead of blunt force injuries to the head after firefighters were called to a fire at her home. Her boyfriend, Paul Kenyon, 43, was found unconscious outside the home and taken to hospital. He was later charged with second-degree murder. Marion was described by her best friend as a “wonderful person, a great mother and a hard worker” who had worked as an aerobics teacher. (March 2010)

Tracy Hannah, 46, and her daughter, **Whitney Hannah**, 14. Ameliasburgh. Tracy and her daughter were shot to death and another daughter, Shannon, critically injured in the shootings but survived the attempt on her life. Dean Brown, 18, who had dated Shannon for a number of years previously to ending their relationship a month earlier, was charged with two charges of first-degree murder and one of attempted

murder in the case. Another young girl who was staying at the home for the night escaped harm by hiding in a closet during the attack. (March 2010)

Carol Ann Brunet, 54. Renfrew. Mother of two and grandmother of four. Carol Ann was found dead in her home. Police have withheld details of the murder and the cause of death. Dugald Barr Jamieson, 47, Carol Ann's former boyfriend, was charged with first-degree murder and breach of probation. Her sister told reporters that she suspected that Carol Ann was in an abusive relationship and had seen bruises on her, but that her sister wouldn't disclose the abuse. (June 2010)

Charmaine Whitley, 38. Mississauga. Charmaine's body was found in her home with obvious signs of trauma but police have withheld the cause of death. Police had been called by family to check on her when she didn't go to work or answer her phone and email. Police attended to the home but didn't go into it until the next day when family members drove to the city and once again called police to check the house. Charmaine's fiancé, Timothy Turosky, 44, was also found at the home. He was arrested and charged with second-degree murder. (June 2010)

Ayan Osman, 28. Mother of three children. Ayan suffered multiple stab wounds to her body and was found dead in her apartment after police were called. Later a man was stuck by a transport truck on Highway 401 and taken to hospital with serious injuries. He was connected to the incident and later identified as Joey Shepherd, 26, the estranged boyfriend of Ayan. Reports were that he walked into the traffic on the highway. Police said there were a number of people in the apartment at the time of the incident who left when the incident took place. Friends told reporters that the couple had three children together, but police would not confirm how many children they had. Ayan had told neighbours that she was afraid something bad would happen and that she would be killed. She had received a restraining order against her ex-boyfriend the week before the murder. According to police there was a history of "domestic abuse" between them. Shepherd was charged with first-degree murder, aggravated assault and assault causing bodily harm. (June 2010)

Carina Petrache, 23. Toronto. Carina's body was pulled from a burning rooming house after firefighters responded to a fire in the building. Later police determined that she had died of stab wounds and burns. Fashar Badakhshan, 27, was also found at the scene with burns to most of his body. He was transported to hospital and expected to survive but was in an induced coma. Police referred to him as a "strong person of interest" and suspect that the incident is a murder-suicide attempt. He had been dating the young woman, who was entering her third year in university studying psychology and criminology. (July 2010)

Sereena Denesiuk, 26. Owen Sound. Sereena was killed on a farm south of Owen Sound after being hit by a tractor with a large farm implement on back. Also seriously injured in the incident was April Smith, 27, who was with Sereena. April's common law partner, Laurie Porteous, 48, was charged with second-degree murder and attempted murder. Some months later he was granted bail with conditions not to contact the families of the victims, but reasons for the release were withheld. (July 2010)

Jocelyn Amber Bishop, 21. London. Jocelyn was reported missing by her family in June of 2010 and her body was found buried in a makeshift unmarked grave behind her home a couple of weeks later. She had been shot in the head. Her common-law partner had called her family looking for her, saying that they had had a fight and she left him. He later admitted to burying her body. Christopher Gale was charged with a number of offences after the body was discovered, including gun and drug offences and causing an indignity to a body. He said that Jocelyn had shot herself during their argument with a gun he had built himself. A number of guns and ammunition were found around the house—although Gale apparently didn't have a firearms licence, he had 18 weapons registered to him. Gale was eventually also charged with second-degree murder. (July 2010)

Kayleigh Ingram-Summers, 4 months. Cambridge. Kayleigh was taken to hospital with life-threatening injuries after a family member noticed that she was unwell. Questioning from the hospital led to police

being called. Kayleigh father, Sean Michael Summers, 19, was arrested and charged with aggravated assault, but charges were later upgraded to second-degree murder. Summers was estranged from Kayleigh's mother and in what he had described on facebook as a "complicated" relationship. He later identified himself there as single, apparently indicating that the relationship was over. (July 2010)

Aster Kassa, 32. Ottawa. Mother of one child. Aster died from multiple stab wounds in the apartment where she lived with her 18-month old daughter. She had recently left a relationship with the father of her child, Tamrat Gebere, 35, who has since been charged with second-degree murder. Aster had moved with Gebere to Ottawa from Toronto, having left Ethiopia after political unrest there. She had also left him a year previous to her death to return to Toronto, but had returned to the relationship some months later. A friend of the man told media that he was desperate to see his child who he "loved very much". After his arrest, he was ordered to have no contact with her and she was placed into the custody of the Children's Aid Society. Aster's family hoped to adopt her. Gebere had also asked a priest for help and the priest reportedly had tried to contact Aster to "bring them together" but Aster had not responded. (July 2010)

Anne Julien-Guerin, 48. Sudbury. Mother of three children. Anne was stabbed to death in her home and later died in hospital. She was a teacher who worked in Sudbury for 25 years and was remembered for her smile and her kindness to students. She was an avid reader and a Scrabble champion that was "full of life", according to her obituary. Her husband, Denis Guerin, 48, a laboratory technician at the hospital where Anne later died of her injuries, was found by police a short distance away from the crime scene after a 911 call. He was charged with second-degree murder. (September 2010)

Joanne Cooke, 36. Kearns. Mother of two children. Joanne was found shot to death in her home by her six-year-old daughter. Also found dead was Marco Gagne, common-law partner of Joanne, who committed suicide. The couple had been together for 17 years. Both police and community members in the small town near Kirkland Lake were "shocked" by the murder because everyone in the small community knew each other and police said they had had no contact before with the family. (September 2010)

Adrienne Roberts, 33. Arthur. Mother of one child. Adrienne was found dead by police after they responded to her home. Her 7-month-old son was given to her family for care. Adrienne was a paramedic based in nearby Guelph and was described as "always honest, pure in her thoughts and her passion always came through." Friends said she had a great sense of humour, always had time for everyone and had a strong work ethic. In a tribute to her, Local 231 OPSEU described Adrienne as "a great activist, a respected co-worker, a good friend and most importantly, a wonderful mother." Her husband, Terry Tremble, was charged with first-degree murder. (October 2010)

Wanda Taylor, 44. Sudbury. Wanda was found by police who responded to a 911 call. She was bleeding and suffering from multiple stab wounds. A man was also found beside her, unconscious. Both were taken to hospital where Wanda later died of her injuries. The man was treated and released the next morning. Police reported that the situation was similar to one where he had previously been convicted of a 2005 aggravated assault with a knife on an ex-girlfriend and sentenced to four years in jail. He had appealed the decision but the appeal was denied. Charles Sinobert, 51, was charged with second-degree murder and possession of a dangerous weapon. (October 2010)

Antoinette Lavoie, 69. Murillo. Mother of two adult children. Antoinette's body was found in her home, along with the body of her husband, who had called 911. Murillo is near Thunder Bay. A post-mortem examination determined that she had died of a single gunshot wound. Her husband died of a self-inflicted gunshot. Police had charged Joseph Lavoie in October with assault causing bodily harm arising from a 'domestic' dispute in August. Police were trying to track the gun, which was unregistered, and where it might have come from. Lavoie had previously had five guns seized after charges were laid in the previous assault. Serious questions about police and court actions regarding the case were raised by local women's advocates, but their concerns receive only slight response and a report of the systemic review in the murder-suicide was not publicly released. (December 2010)

Lillian Cardinal, 80, Caledon. Lillian was taken to hospital from her seniors' residence with serious injuries. Two weeks later she died there. Lillian had become friends with another senior who had entered the residence at the same time. They spent most of their time at Lillian's apartment and rarely socialized with other residents, keeping mostly to themselves. Other residents of the facility, however, reported frequent fights between the two and a rocky relationship. Lillian had even taken out a restraining order against the man in the months before her death. Adolf Graf, 70, was originally charged with assault; in August, over six months later, charges were upgraded to manslaughter. (February 2011)

Tunde Nemet, 46, Ottawa. Mother of three. Tunde was stabbed multiple times in her home in front of her 15-year-old son, who ran to neighbours telling them, "my dad's stabbing my mom" over and over again. The family, which had settled in Sudbury after fleeing war in Serbia for peace in Canada, had been living in Ottawa for a couple of years. Less than two months before the murder, the woman's husband had moved out of the house and was under orders not to communicate with the family after a charge of assault against one of his daughters was laid. According to a friend, he had been trying to make amends and get his family back. Said the friend: "After being 25 years with his wife and having those children, you know it's not easy...He did everything he could, and his wife just didn't want to take him (back)." Mihalj Nemet, 56, was charged with first-degree murder. (March 2011)

Maria Rosario Avidago, 43, Mississauga. Mother of two. Maria was stabbed in the kitchen of her home and later died of her injuries in hospital. A neighbor and friend called 911 after seeing Maria's 13-year-old daughter standing in the street in the afternoon screaming that her mother was being stabbed. Apparently, Maria had returned home from her job as a dental hygienist to pick up a child car seat to give to her sister. One neighbor described her as a "beautiful soul, a loving mother, always smiling." "There's no one with a purer heart," said a friend. When police arrived, they were confronted by Maria's husband holding a knife. After a brief stand-off, they used a Taser weapon on him and arrested him at the scene. Victor Avidago, 46, was charged with second-degree murder. (March 2011)

Petty Mahabir-Chaitram, 43, Brampton. Mother of three. Petty was stabbed to death by her estranged husband, Mathura Chaitram, 46, who then committed suicide. Her body was found on the patio of the home where she had recently rented a basement apartment, the home owner said, "to get away from her husband." She had moved with him to Canada a year before from Trinidad, where she had married Chaitram after her first husband and the father of her children had died. Her cousin and niece from Trinidad said that he had been abusive for a long time and very jealous, and that she left him when he started to "rough up the kids and be harsh with them." Petty was described as very nice, quiet and kind. (April 2011)

Elaine Robertson, 61, Thunder Bay. Mother of three adult children. Elaine's body was found at her home after her husband arrived at the police station to turn himself in. No cause of death, or very little else about the murder or about Elaine, has been reported. Police were reported to say that it "appears to have been a 'domestic' incident. Neighbours at the apartment building where the couple lived described them as "nice, with the husband looking out for his wife." An obituary notice described Elaine as a "loving wife, mother and grandmother" who loved to watch her grandchildren play hockey, cook and spend time with family and friends. John Roberston, 63, was charged with second-degree murder. (April 2011)

Constance Fuhrmann, 43, London. Mother of three. Connie, as she was known, was found dead after police were called to respond to a highrise where a man had apparently fallen to his death. Police identified the man as Ken Fuhrmann, 47, the estranged husband of Connie Fuhrmann, who lived in a 10-floor apartment of the building. An autopsy was performed but it did not confirm the exact cause of Connie's death. Police later described the situation as a murder-suicide. Connie had recently separated from her estranged husband and had moved from their home in nearby Thorndale. (April 2011)

Patricia Pacheco-Hernandez, 41, London. Mother of three. Patricia was found dead by police after a frantic 911 call from a neighbor. The cause of death was not released. Patricia and her husband had fled Colombia as refugees in 2002 after threats were made against the family by militants. She was a lawyer in her homeland and, although she liked Canada, was lonely for her family and missed her work there. In Canada, we worked as a cleaner and sold jewelry that she brought from visits back home. Reportedly she and her husband had been arguing in the weeks before her death and that she had wanted a divorce and that she wanted to return to Colombia. Patricia was described as a “remarkable mom” and an avid gardener who had recently become anxious. Friends said her husband was a “really nice guy” and a hard worker. Patricia’s family wanted to bring her body back to Columbia to be buried but could not afford the expense, so she was buried in Canada. Her husband, Daniel Jimenez-Acosta, 43, was charged with second-degree murder. (May 2011)

Marilyn Dellaire, 56, Mississauga. Mother of two adult children. Police found Marilyn in her home with obvious signs of trauma after they received a report of a ‘domestic’ disturbance. The specific cause of death was not released but a police source revealed that a weapon was used. Little was reported about her or her life except to say that she and her partner lived alone in the apartment and that the residence was apparently known to police. Her long-time common law partner, Doug McCoy, 48, was charged with second-degree murder. (June 2011)

Kamillah Keller, 19, Tweed. Mother of two. Kamillah, or Kami as she was known, was found dead in her apartment by police officers responding to reports of a “domestic” at the address. Police would not comment on how Kami died, but other sources said that she was stabbed. One police officer was also reported to have received serious injuries as a result of an attack by the suspect in an altercation at the home where police then opened fire, shooting and injuring the suspect. Neighbours described both Kami and her partner as nice, polite and well-spoken and said they didn’t know of any conflict between them although one described their relationship as “rocky”. Kami had just returned to the home the night before the murder after staying with friends for a few days, and had reportedly taken the children to the apartment of the building superintendent at the time of an alleged fight in the apartment heard by neighbours concerned about it. Nathan Williams, 22, the father of the children, was charged with first-degree murder and two counts of attempted murder. (June 2011)

Joanne MacKenzie, 23, Peterborough. Mother of one. Joanne disappeared on the morning of July 2nd and her body was found several days later in a rural area just north of the city. Joanne had recently moved back to Peterborough to find work after living in a smaller community. An autopsy showed that she died of sharp force trauma. Members of her close circle of family and friends had been searching for her since she disappeared. “She was an angel,” one of them reported. “Anyone who knew her was blessed to have known her.” Her daughter, they said, was everything to her. Joanne’s estranged common-law partner and the father of her daughter, Robert McGregor, 25, was charged with first-degree murder and obstruction of justice. (July 2011)

Shaher Bano Shahdady, 21, Scarborough. Mother of one. Shaher was strangled to death in an apartment she had recently rented after leaving her husband. Although raised in Canada, she had been sent to Pakistan at 18 for an arranged marriage and returned to Canada for the birth of her child. She sponsored her husband to come to Canada only two months before she was murdered. Neighbours reported hearing a loud fight and a child screaming in the apartment, but no one called police. Her two-year-old son was left in the apartment after the murder until Shaher’s father arrived to check on her 12 hours later. The case sparked media speculation of so-called “honour” killing because Shaher’s husband reportedly did not agree with her desire to go to school or work outside the home and opposed her use of Facebook. Her estranged husband, Abdul Malik Rustam, 27, was charged with first-degree murder. (July 2011)

Dawn Bailey, 27, Gilford. Dawn’s body was found after firefighters were called to the home where she lived with her parents. Neighbours had tried to enter the home but were driven back by thick smoke. Police later reported that she had been stabbed to death and the house set on fire. Dawn was an avid hockey fan,

player, coach and mentor for younger female players in the Aurora Girls Hockey Association and the Barrie Women's Hockey Association. Friends were reportedly "devastated" by her murder, calling her an "awesome person with an awesome attitude." One of her teammates who ought of Dawn as a little sister told media: "It's so tragic and so sad. She was so young and had her whole life ahead of her." Dawn's ex-boyfriend, Ryan Kovacs, 27, of Bradford was charged with first-degree murder, two counts of arson and break and enter with intent to commit a felony. (July 2011)

Nasrin Toreihi, 47, Thornhill. Mother of two. Nasrin was found by police stabbed to death on her kitchen floor. Her ex-husband, Kaveh Tabatabaeim, 50, was found holding a knife and was shot and killed by police at the scene. Nasrin's teenaged daughter witness the attack and ran into the street screaming for help. Police had responded previous to the same residence and eight officers were dispatched to the call. Because the case involved a police shooting, it was investigated by the Province's Special Investigations Unit and the officers cleared of any wrongdoing. The investigation reported that police found Mr. Tababahaeim alternately attempting to stab himself and lunge at the officers. They attempted several methods to subdue him but were unsuccessful and finally decided to shoot. Police did not have Taser weapons with them. A close friend of Nasrin told reporters that her friend had predicted her husband would one day come and kill her. (August 2011)

Raquel Junio, 42, Brampton. Mother of two. Raquel's body was found in a pond near Bolton four days after she was dragged from her home and forced into a pickup truck. Shortly after her disappearance, her estranged husband was charged with kidnapping, forcible confinement and assault, but he refused to provide any information about her whereabouts. A friend of the accused was also charged with kidnapping. After Raquel's body was found, charges against her husband were upgraded to first-degree murder. Raquel worked at a second hand store where co-workers described her as "an amazing human being" with a great sense of humour who talked a lot about her two children, but never mentioned her husband. Friends of the accused reportedly described him as kind, generous and "not violent at all" but that he was upset that the marriage was ending and he apparently thought Raquel was "taking everything from him." Macdermid Ermacora, 42, was charged with first-degree murder, kidnapping and forcible confinement. His friend, Gary Murray, 42, was charged with kidnapping, forcible confinement and accessory after the fact to murder. (August 2011)

Rejina Kendy, 26, Kitchener. Rejina was found by police in her home dead of blunt force injuries. She was six months pregnant at the time and had been in Canada for only about a year, after being sponsored by her husband. Both had fled to Egypt to escape war in the Sudan and had married in 2009 in Cairo. She was described as an easygoing person who could get along with everyone and a very religious woman who believed that everything would work out with the help of God. Her husband was on bail at the time of the murder for a serious assault against Rejina only months after she arrived in Canada and had apparently stemmed from a previous miscarriage in Egypt. Less than three weeks before the murder he was again charged with breaching his order to stay away from her when a child welfare worker reported to police that the couple was living together. On the breach charge, the judge decided to release him with the same orders to stay away and deemed the first assault "one single incident" with no indication of prior trouble. He was released on a \$3,000 bond with no deposit, with a long-time friend as his surety. Four days before he was to appear in court on the assault charge, Rejina was found dead. Her husband, Ambrose Kose, 28, was charged with first-degree murder and two counts of violating bail terms. (August 2011)

Kiranjit Nijjar, 17, Mississauga. Kiranjit's body was found by police with "obvious signs of trauma" in a wooded ravine near her high school some hours after a 16-year-old youth jumped from a highway overpass. The youth later died of his injuries in hospital. Students who organized a vigil for Kiran, as she was called, said the pair were close friends but that the youth had wanted to take the relationship to another level, saying Kiran did not want more than a friendship. The young man had battled depression and Kiran had tried to help him get support. School officials reportedly said everything that could be done was done for him. Before he leapt to his death he left messages on Facebook that indicated both would RIP and that he was

"leaving this sad world today." Kiran was mourned by friends as a kind, friendly and very smart young woman who always had a smile for everyone. (September 2011)

Paula Mare, 38. Cambridge. Mare was found stabbed to death in a room at the Comfort Inn where she was employed as a weekend housekeeper. Police also found Mare's common-law partner, Jorge Moniz, 48, at the scene suffering from stab wounds and he was taken to hospital. Paula was described as a private person, but one who would help anybody. Staff at a local high school where she worked as a custodian for three years remembered her beautiful smile. "The smile would come down the hall and you knew she was coming," said the school principal. Her partner was charged with charged with first-degree murder. (October 2011)

Xuyen Tran, 51. Hamilton. Mother of three. Xuyen was found murdered in her home after police received an emergency call. Although police withheld the cause of death, emergency responders reportedly said that she was stabbed to death. Her husband, 54-year-old Hiep Huynh, was also found at the scene with life-threatening injuries. He later died in hospital. A teenage son of the couple was present during the murder. Police have determined that the case was a murder-suicide. There had been a history of violence against Xuyen, including calls to police in the 1990s. In August of 2011, a weapons charge was laid against him and then withdrawn with a peace bond agreement. The peace bond did not include "no contact" provisions. Neighbours were shocked at the news, saying the couple was nice and quiet and kept to themselves. A former co-worker of the abuser told media that he was a "gentleman" with a quick temper. As a basis for the murder-suicide, media honed in on stress within the family caused by Huynh's job loss two years previously and subsequent financial issues, including gambling. (November 2011)

Therssa Wilson, 30. 2010 London. Mother of two. Therssa disappeared in November of 2010. Her badly decomposed body was discovered four months later on the banks of the Thames River near Chatham. An autopsy eventually revealed that she died of head trauma. At the time of her disappearance police described her as having a "high-risk lifestyle" because she had a history of drug use and was known to them. Therssa was an Aboriginal woman with a large extended family whose parents had died years previously and who had just reunited with an older sister who had been put up for adoption as an infant. Almost a year after her disappearance, police arrested her boyfriend after finding blood spatter in the apartment that they shared. Family members held out hope but feared the worst when Therssa didn't make contact with family or call at Christmas, something they said she would never do to her children if she were alive. Her ex-husband and father of her children, with whom she maintained contact, described her as strong, smart and fun-loving. Bryan Robinson, 52, was charged with second-degree murder in October 2011. (November 2010)

Samantha Collins, 29, Bracebridge. Mother of two. Samantha's remains were found by a caretaker at a Wood Lake cottage near Bracebridge in July of 2010. The cause of death has not been reported. Samantha had moved with her common-law partner to Bracebridge from the Toronto area before the birth of their second child and then in 2007 just vanished without a trace. Her sister has described her as a free spirit who just went off and did her own thing. At the time of the disappearance, her partner told family that she had just taken off to British Columbia. No one heard from her again. During her time in Bracebridge she made the front page of a local newspaper for helping to organize a public protest against impending closure of the hospital emergency room services she used as a result of epilepsy. Her mother told media that she was "so beautiful, with so much potential." She didn't have any close friends in Bracebridge, however, so family had little to go on. Eleven months after her remains were found her estranged partner was arrested. According to family members, the couple was in a bitter custody dispute at the time Samantha vanished. Ian Charles Borbely, 35, of Orillia was charged with second-degree murder and indignity to human remains. (Month unknown 2007)

Whitney Van Der Wouden, 15, Sudbury. Whitney, or 'Dolly' as she was called, disappeared in April of 2009 after calling her mother to ask if she could stay with a friend overnight. She was told to come home, but never heard from again. In June, police investigating her disappearance found her burned and crushed remains in a campsite in the woods where two men, one a 17-year-old youth that she was seeing and

“sweet on” and an older 28-year-old man had been living. She had been stabbed before her body was burned, dismembered and buried under the fire pit. The two men left town after the murder but were later arrested in Quebec after they turned themselves in. The older man told a friend of the murder saying that they murdered Dolly after she refused sexual advances. Dolly’s family described her as “rebellious” but had a big heart. The two men had been at the family home for lunch on the day of Dolly’s disappearance. The youth (who cannot be named until his appeals are heard) and the older man, Kristopher Lavallee, 28, were charged with first-degree murder and indignity to human remains. The youth was tried and convicted of second-degree murder and sentenced as an adult. Lavallee will be tried in 2012. (April 2009)

Denise Bourdeau, 39, Waterloo. Mother of three. Denise was last seen leaving a restaurant with a man police described as a “close acquaintance” on New Year’s Eve 2006. Her body was found on the banks of the Grand River four months later. The Native Women’s Association of Canada website for missing and murdered Aboriginal women described Denise as someone who could “light up any room” with her “easy, beautiful smile and her amazing sense of humour.” Although police said they were working the case and that it never went ‘cold’, it was four years later that an arrest was made. In July 2011, Denise’s mother, Amy Miller, was featured in a Kitchener newspaper recalling the murder of her daughter and calling for action on the case. The story described her frustration with lack of information from police and justice for her daughter. She said the man with Denise on the night she disappeared was her former common-law partner and that Denise had broken off the relationship before her disappearance. Two days later, her ex-partner was arrested. David Robert Thomas was charged with second-degree murder. (January 2007)

Lisa Roy, 27. Mother of two, and **Jean Rock**, 32. Both of Ottawa. Lisa disappeared in 1990 and was not reported missing. A neighbour reported that her husband told everyone she left him. Jean was never seen again after 2003. Her family didn't report her disappearance because they thought she didn't want contact with them. She was in a common-law relationship. The partner of both of the women was Camille Cleroux, 57, who was charged with first-degree murder in their deaths in June of 2010, at the same time that he was charged with the first-degree murder of Paula LeClair, a neighbour in his high rise building whose apartment he took over. Cleroux told neighbours he had kicked Rock out because she was having an affair but paid one neighbour to write fake letters to her family with her signature. Cleroux would not tell police Roy's location and claimed he didn't know where Rock was. In November, 2011, human remains were discovered by construction workers in the backyard of a home where Cleroux reportedly lived at the time of Roy's disappearance. Neighbours described Cleroux as a loner who was aggressive to women. In a jailhouse interview with a reporter, Cleroux said of the LeClair murder, "I just lost it. I burned a fuse, that's all." (Months unknown, 1990 and 2003)

Karissa Grandine, 30. Toronto. In October 2011, Karissa was rushed to hospital after police were called by her husband reporting that his pregnant wife was in medical distress. Police found Karissa in the bathtub but she later died in hospital. The cause of death was listed as drowning. Over six months later, in May of 2012, her 25-year-old husband Philip Grandine was charged with first-degree murder. The couple had been married for three years and Karissa was expecting her first child. Karissa was described in online condolences as a “beautiful person” and a “pure and gentle soul.” Philip Grandine had been a pastor at a local Baptist Church prior to the drowning but had recently resigned. No reasons were reported for the resignation. Karissa graduated from the University of Toronto in 2006 with an honours bachelor of science in human biology and archeology and had worked for Berkley Canada as a casualty underwriter. She had moved with her family from the Philippines to Canada in 1994. (October 2011)

Responses to DVDRC Recommendations

Aboriginal Affairs and Northern Development Canada

#7-2007 *We recommend that First Nation communities be prioritized by government to address the enormous lack of resources available to them, including making available culturally appropriate service providers that would be adequately trained in providing an effective response to the complex issues facing Aboriginal families. These issues include the impact of intergenerational trauma on families with the consequence of high rates of mental health issues, addictions, domestic violence, unemployment and living in chronic states of poverty. (Similar to recommendation #28/2004)*

Status Update:

The Department's Family Violence Prevention Program is one component of Aboriginal Affairs and Northern Development Canada's priority for women, children and families. The Program assists First Nations in providing access to culturally appropriate family violence shelter services and prevention activities to women, children and families ordinarily resident on reserve.

Since 2007-2008, the number of shelters funded through the Family Violence Prevention Program has grown from 35 to 41 as a result of the addition of an existing shelter in the Atlantic Region in 2008-2009, and the construction of five new shelters (British Columbia, Alberta, Manitoba, Ontario and Quebec) in 2009-2010. The construction of these five new shelters was announced in June 2007, as part of the Government of Canada's five-year investment totalling \$55.65 million to support the network of First Nations shelters.

Economic Action Plan 2013 further committed \$24 million over two years for this program; allowing the total annual funding to remain at \$30.4 million for each of the next two years. More specifically, this allows the Department to continue to provide funding to operate the 41 shelters; to support proposal-based prevention services; to reimburse Alberta and Yukon for services provided to women and children considered ordinarily resident on reserve accessing shelters off reserve; and, to provide core funding to the National Aboriginal Circle Against Family Violence to build better shelter capacity.

Of these 41 shelters, the Department currently supports 9 in Ontario. As for proposal-based prevention projects in Ontario, Aboriginal Affairs and Northern Development Canada provided funding to implement a total of 18 projects in the 2011-2012 fiscal year.

The Department also works with stakeholders such as the Assembly of First Nations, as well as the provinces and territories, and other government departments/agencies, such as the Department of Justice Canada, Status of Women Canada, Health Canada, the Public Health Agency of Canada and the Canada Mortgage and Housing Corporation on the co-ordination of family violence prevention programming.

Furthermore, *the Family Homes on Reserves and Matrimonial Interests or Rights Act*, which received Royal Assent on June 19, 2013, provides the basic rights and protections to individuals on reserve during a relationship, in the event of a relationship breakdown, and on the death of a spouse or common-law partner regarding the family home and other matrimonial interests or rights. The Act sets out provisions for the enactment of First Nations laws respecting on-reserve matrimonial real property, as well as provisional federal rules to fill the legislative gap in the absence of a First Nation's own laws. It will also provide protection for individuals living on reserves in situations of family violence.

In partnership with Canada's Aboriginal peoples, the Government of Canada continues to make ongoing significant investments in addressing the complex and interconnected root causes of additional vulnerability to violence of Aboriginal women and girls. Budget 2010 committed \$25 million over five years to a seven-step strategy which includes supporting culturally appropriate victim services for Aboriginal peoples to

improve community safety and to ensure that justice system and law enforcement agencies can better respond to cases of missing and murdered Aboriginal women.

In addition to these programs and initiatives, the First Nations Child and Family Services Program provides funding to assist in ensuring the safety and well-being of First Nation children on reserve by supporting culturally appropriate prevention and protection services for First Nation children and families. These services are provided in accordance with the legislation and standards of the province or territory of residence, and in a manner that is reasonably comparable to those available to other provincial residents in similar circumstances within Aboriginal Affairs and Northern Development Canada's program authorities.

Funding under the First Nations Child and Family Services Program is provided according to several funding models across the country. Each model provides for the delivery of protection and prevention services to support services that may help families to stay together and to improve the safety and well-being of First Nations children on reserve. Aboriginal Affairs and Northern Development Canada's expenditures on First Nations Child and Family Services for fiscal year 1996-1997 was \$193 million; in fiscal year 2011-2012, it was approximately \$618 million.

As provinces have shifted to a greater emphasis on enhanced prevention in their own approaches, the Department has moved forward with willing partners in taking concrete actions to implementing an enhanced prevention approach to funding child and family services on reserve. The new approach is designed to ensure that funding support is in place to enable service providers to focus on increased prevention activities, as well as protection activities in child welfare. Additionally, the new approach is intended to provide individual First Nation agencies with more flexibility to shift their resources to priority areas that match their needs. To date, six tripartite frameworks under the Enhanced Prevention Focused Approach have been agreed upon in Alberta, Saskatchewan, Nova Scotia, Quebec, Prince Edward Island and Manitoba.

Collectively, this means that 68 per cent of First Nations children and families on reserve across Canada now benefit from the enhanced prevention approach with more than \$100 million per year in additional investments being provided in these jurisdictions.

In Ontario, pursuant to the Memorandum of Agreement Respecting Welfare Programs for Indians of 1965, the Department reimburses the province for the cost of delivering child and family services to First Nations children and families on reserve according to a cost-sharing formula. With respect to prevention services, provincial delegation in Ontario to a First Nations Child and Family Services agency may be full (full range of prevention and protection services) or partial (prevention services only). A number of First Nation communities in Ontario receive prevention services from one agency and protection services from another (often a Children's Aid with a mandate to provide services to both non-Aboriginal clients and First Nations clients on reserve within a certain geographic location).

The Enhanced Prevention Focused Approach for First Nations child and family services represents a significant investment toward better futures for children and their families. In addition, the Department provides over half a billion dollars in other ongoing program funding on an annual basis.

Comments:

It is noteworthy that the Native Women's Association of Canada is not among the stakeholders the federal government works with.

Indigenous women are the experts on their own lives. The call for an Inquiry into the Missing and Murdered Aboriginal Women must be answered immediately under the direction of Indigenous women and with adequate resources so that meaningful outcomes can be generated

Status Update - Health Canada response, on behalf of Health Canada's First Nations and Inuit Health Branch:

Health Canada is investing approximately \$263.5M in 2013-14 to support First Nations and Inuit mental health and addictions programs. Programming includes mental health promotion, addictions and suicide prevention, counselling and other crisis response services, treatment and after-care services, and support to eligible former students of Indian Residential Schools and their families.

Through the National Native Alcohol and Drug Abuse Program and the National Youth Solvent Abuse Program, Health Canada supports a national network of 55 treatment centres, as well as drug and alcohol prevention services in over 550 First Nations and Inuit Communities. These efforts are enhanced by funding through the National Anti-Drug Strategy to improve access to quality addictions services for First Nations and Inuit.

Health Canada is continuing to invest in the National Aboriginal Youth Suicide prevention Strategy. The Strategy supports approximately 150 community-based suicide prevention projects in First Nations and Inuit communities across Canada. Funded activities are designed to meet the specific needs of the communities they serve, and are intended to reduce risk factors and promote protective factors through prevention, outreach, education, and crisis response. Results indicate that the Strategy has led to measurable successes, such as a decrease in youth delinquency and substance abuse, and increase in youth participation in school and community, and general improvements in youth leadership skills.

Health Canada is also supporting eligible former students of Indian Residential Schools (IRS) and their families through the implementation of the Indian Residential Schools Settlement Agreement. Through the Indian Residential Schools Resolution Health Support Program (IRS-RHSP), Health Canada provides access to important mental health and emotional support services so that they can safely address emotional health and wellness issues related to the disclosure of childhood abuse. Economic Action Plan 2012 renewed Health Canada's IRS-RHSP to continue meeting the demand for services throughout the ongoing implementation of the IRS Settlement Agreement.

Addressing mental wellness and addictions among First Nations on reserve and Inuit communities is also supported through investments in programs and services that promote healthy pregnancies, healthy births and healthy childhood development. For example, the Maternal Child Health (MCH) Program provides a coordinated approach to maternal and child health services with strong links to Elders, nursing and other community-based programs. The program supports families in approximately 225 First Nations communities across Canada.

Additionally, Health Canada works collaboratively with other government departments and provinces to prevent violence against women. Health Canada, for example, is among 15 federal departments, agencies and crown corporations that are working to end family violence through the Family Violence Initiative. The Initiative helps to make sure that relevant federal departments and agencies consider the issue of family violence in their ongoing programming. For more information on the Family Violence Initiative, please follow the link below: [not provided]

Together with willing partners, Health Canada will continue to invest in culturally relevant programs and services that support First Nations on-reserve and Inuit communities to address the root causes of family violence, including substance use, intergenerational trauma, loss of traditional culture and mental illness.

Comments:

It is noteworthy that the Native Women's Association of Canada and Pauktuutit are not among the stakeholders the federal government works with. It is also noteworthy that substance use and mental illness have long been discredited as "root causes" of family violence.

Association of College and University Security Administrators

#7-2010/4 *The OACUSA should develop a consistent and comprehensive plan, in collaboration with health and counselling services available on campus, to educate students on the nature and risks of violence in dating relationships through public education campaigns and outreach programs to students dealing with intimate violence.*

Status Update:

No response.

Canadian Psychiatric Associations, Psychiatrists, and Other Mental Health Workers

#15-2007 There must be more public education regarding the risk that suicidality poses, not only to the suicidal person but also to others involved with him/her. Within the Health Care system, men who are in relationships and who threaten or attempt suicide should consistently be screened for abusive behaviour in their relationships. Part of this screening process must involve some contact with the female partner to offer information and support regarding disclosure of abuse, services and supports available, etc.

Status Update:

No response.

#7-2011/1 Psychiatrists and other mental health workers are reminded that documentation about suicidal and homicidal ideation are important components of assessing a patient for either involuntary admission or suitability for release from hospital.

Status Update:

No response.

#7-2011/2 When assessing patients either for involuntary admission or release from hospital, a variety of sources of information should routinely be sought, including family members.

Status Update:

No response.

#31-2011/1 It is recommended that all marriage and family therapists receive specialized training about victim vulnerability and perpetrator risk in cases of domestic violence.

Status Update:

No response.

Citizenship and Immigration Canada (CIC) and Canadian Border Services Agency (CBSA)

#2-2009/1 *In order to assist Citizenship and Immigration Canada (CIC) and the Canadian Border Services Agency (CBSA) in fulfilling their duties and responsibilities, information pertaining to any domestic violence occurrence involving immigration applicants and/or their families or sponsors, should be communicated between local law enforcement or social service agencies and the federal immigration authorities.*

Status Update:

CIC: No response.

CBSA's reply:

The issue of domestic violence is primarily within the mandate of local law enforcement and social service agencies. Citizenship and Immigration Canada (CIC), our partner in the delivery of immigration-related services, has put in place a number of safeguards to ensure that Canada's immigration policies, such as the rules pertaining to family class sponsorship, do not leave individuals, spouses and children vulnerable to abuse or exploitation.

In recognition that newcomers to Canada may be reticent to avail themselves of social supports or may be unfamiliar with the services available to assist them, the CBSA trains frontline officers to recognize and assist persons and families who may be exploited or in vulnerable situations. The CBSA works closely with local law enforcement agencies, social services agencies, CIC and other partners where these situations arise.

Further, the CBSA has a key role to play in locating, investigating, and reporting on persons convicted of domestic violence or who may be reportable and whose criminal activity may ultimately result in the individual's removal from Canada. The CBSA has set up a 24/7, confidential Border Watch toll-free line where individuals may report persons and/or illegal activities related to the CBSA mandate. All information is researched for potential enforcement action. The CBSA has been active in pursuing cases where foreign nationals are exploiting Canadian residents and citizens for the sole purpose of gaining access to Canada. We also work closely with key partners, such as the Royal Canadian Mounted Police, to combat the trafficking of persons.

#2-2009/2 *Citizenship and Immigration Canada (CIC) should develop training programs in the dynamics of domestic violence for all its agents and officers. Such training should emphasize that withdrawal of sponsorship or denial of immigration applications/claims may result in a volatile situation that could lead to violence. It should prepare agents and officers who may be adjudicating claims from remote locations to consider making appropriate local referrals to law enforcement and social service agencies when dealing with applicants, their families and/or sponsors where there is a history or reported threats of domestic violence.*

Status Update:

See response at **#2-2009/1** above.

Comment:

Particular attention must be paid to issues related to migrant workers, women seeking safe shelter, issues related to children born in Canada and those born outside of Canada and the response of border services as it relates to women's safety.

College of Family Physicians of Canada

#2-2007 *It is recommended that organizations involved in educating health professionals, such as the College of Family Physicians of Canada, Canadian Pediatric Society, the Society of Obstetricians and Gynecologists, and the College of Midwifery of Ontario, promote educational programs that explore the dynamics and/or warning signs of domestic violence and the potential for lethality, especially when working with patients who have depression and/or anxiety. In addition, such programs need to highlight for practitioners caring for women and/or their children that IPV can lead to and/or exacerbate an underlying depression. (Similar to recommendation #12/2004 & #12/2006 & #15/2006)*

Status Update:

Process is to respond to the Committee directly, with an indication of what recommendations we may be able to implement. With respect to the DVDRC, the College has published articles and reminders in our publication called Dialogue. This is sent to all registered physicians in Ontario

http://www.cpso.on.ca/uploadedfiles/members/resources/practicepartner/patientsafety/patientsafetyarticles/patient-safety_Iss1-13.pdf?terms=domestic

#5-2007 *It is recommended that healthcare providers be taught to be mindful of the dynamics of domestic violence and the potential for lethality, especially when working with patients who have a history of drug abuse, depression, anxiety, and suicidal ideation, particularly when there is high conflict in their marriage and a history of numerous separations. (Similar to recommendations #12/2004 & #12/2006)*

Status Update:

As above.

#15-2007 *There must be more public education regarding the risk that suicidality poses, not only to the suicidal person but also to others involved with him/her. Within the Health Care system, men who are in relationships and who threaten or attempt suicide should consistently be screened for abusive behaviour in their relationships. Part of this screening process must involve some contact with the female partner to offer information and support regarding disclosure of abuse, services and supports available, etc.*

Status Update:

As above.

#17-2007 *It is recommended that all agencies ensure adequate training and supervision in assessing domestic violence within same-sex relationships in cases where children are involved. It is also recommended that Children's Aid Societies follow-up on a referral with all parties involved with the child or children.*

Status Update:

#18-2007 *It is recommended that social service providers, including police, physicians, and child protection services receive proper training regarding the dynamics of domestic violence in same-sex relationships.*

Status Update:

#27-2007 As with Case # 2004-2221 above, it is recommended that all healthcare providers must be mindful of the dynamics of domestic violence and the potential for lethality. Where concerns may be raised for the patient's safety, an appropriate screening tool must be considered, as it may assist both the healthcare provider and the patient to better understand the lethality risks, and proactively plan appropriately for safety (i.e. calling the police, going to a shelter or safe place, meeting with a specialist in safety planning). If the patient is reluctant to take these steps on her own, she may need to be accompanied. (Similar to recommendations #2/2006, #12/2004, #7/2004)

Status Update:

As above.

#26-2011/1 Health care providers are reminded to inquire about thoughts of homicide, in addition to suicide, when interacting with elderly patients suffering from depression.

Status Update:

As above.

#26-2011/2 Health care providers are encouraged to interview couples separately, particularly when mental health issues may be present.

Status Update:

As above.

http://www.cpsso.on.ca/uploadedFiles/members/resources/practicepartner/patientsafety/Patient-safety_I-2012.pdf

First Nations Police

#6-2007 *Recognizing the critical role that police play in responding to domestic violence calls, particularly in rural and remote communities where frequently they are the only resource available to families in trouble, police officers require ongoing training in the dynamics of domestic violence especially when faced with reluctant and ambivalent victims and perpetrators who have a history of past domestic violence, suicidal behaviour and addictions. (Similar to recommendations #7/2002, #5/2002, #4/2002, #8/2004 & #28/2006)*

Status Update:

No response.

#14-2008/2 *It is recommended that all First Nation police services reinforce with their members the requirements of the Domestic Violence Occurrences (LE24) and Firearms Occurrences (LE029) of the Provincial Adequacy Standard Guidelines regarding mandatory charge, completion of the Domestic Violence Supplementary Report (DVSR) and the seizure of firearms during the course of domestic violence occurrences. This training should be conducted on an annual basis placing an emphasis on ensuring officers are appropriately educated on their authorities to conduct weapons seizures with and without a warrant.*

Status Update:

No response.

Healthcare Providers

#9-2007 *It is suggested that healthcare providers take a more proactive stance, particularly when working with patients in crisis situations, to ask those patients if there are any safety concerns in their intimate relationships. If the provider senses there are concerns, we recommend they use such a danger assessment tool, which will assist both the healthcare provider and the patient to better understand if there is a risk of lethality. www.dangerassessment.org.*

Status Update:

The Centre for Research & Education on Violence Against Women and Children has been funded to hold provincial forums for justice and community service providers to learn more about promising practices for high-risk teams, share challenges and identify training gaps. This work has continued over the past three years with the development and implementation of online threat assessment/risk management training for community service providers. This training is helping front-line workers recognize the risk of serious harm and lethal violence as well as the need to collaborate and communicate with service providers in other sectors. (See CREVAW response to **#4-2007** under OWD above for an almost identical answer. See also under OWD at **#29-2007**, **#2-2008/1**, **#15-2008/2**, **#14-2010/1** and under MHLTC at **#2-2008/2**, **#2-2008/3**, **#15-2008/2**, **#15-2008/3**.)

Comments:

The forums that gather experts in various sectors provide excellent opportunities for information sharing and exchange. OWD and other Ministries must ensure that the supports are available so healthcare providers are able to attend.

#27-2007 *As with Case # 2004-2221 above, it is recommended that all healthcare providers must be mindful of the dynamics of domestic violence and the potential for lethality. Where concerns may be raised for the patient's safety, an appropriate screening tool must be considered, as it may assist both the healthcare provider and the patient to better understand the lethality risks, and proactively plan appropriately for safety (i.e. calling the police, going to a shelter or safe place, meeting with a specialist in safety planning). If the patient is reluctant to take these steps on her own, she may need to be accompanied. (Similar to recommendations **#2/2006**, **#12/2004**, **#7/2004**)*

Status Update:

Not addressed in MHLTC response.

#7-2010/6 *It is recommended that health care facilities consider formulating (and/or reviewing and revising as necessary) protocols, policies and procedures to provide specific practice guidelines, in order to ensure an immediate and proactive response to information reported to them of a "No Contact Order" between a patient and a visitor.*

Status Update:

Not addressed in MHLTC response.

#7-2011/2 *When assessing patients either for involuntary admission or release from hospital, a variety of sources of information should routinely be sought, including family members.*

Status Update:

Not addressed in MHLTC response.

#26- 2011/1 *Health care providers are reminded to inquire about thoughts of homicide, in addition to suicide, when interacting with elderly patients suffering from depression.*

Status Update:

Not addressed in MHLTC response.

#26-2011/2 *Health care providers are encouraged to interview couples separately, particularly when mental health issues may be present.*

Status Update:

Not addressed in MHLTC response.

Law Schools

#2-2011/2 Domestic violence and risk assessment should be part of the mandatory Ethics & Professional Responsibility course to be required by law schools for all students starting with the class of 2015.

Status Update:

Dalhousie University—Two of four faculty cover some of this material. Faculty administration acknowledged that this material would be a good fit under the broad umbrella of professional responsibility and legal ethics, and probably a good fit under family law, sexual assault law, criminal law and criminal procedure and so on. However faculty administration expressed the view that academic freedom should be safeguarded at all costs and, even though graduating students should be competent and even talented upon graduation, law schools should not compel the teaching of this content. With respect to core competencies, faculty administration expressed the view that mandating content is a better fit with what law societies do.

McGill University As a Faculty of Law located in the province of Quebec McGill University acknowledged that they are not subject to the recommendations of the Government of Ontario's Domestic Violence Death Review Committee. Nevertheless faculty administration offered assurance that they consider domestic violence to be a very serious issue and expressed gratitude for having been made aware of initiatives taken in Ontario to put an end to it and indicated they would share the information sent to them with interested parties within their Faculty.

Queen's University No response provided.

University of Alberta No response provided.

University of British Columbia Faculty administration expressed gratitude for letting them know about the Death Review Committee recommendations and noted they currently follow the Federation of Law Societies' requirements with respect to the content of their mandatory Ethics & Professional Responsibility course. Faculty administration noted that the incoming Associate Dean for Academic Affairs has taken a lead role in their Faculty's Ethics and Professionalism course and may already be aware of the recommendations but will ensure that is the case as she begins her new administrative role.

University of Calgary Ethical Lawyering is taught at the U of C Law School but domestic violence and risk assessment is not in the curriculum.

University of Manitoba Faculty administration noted that they have a Lawyer present on the legal remedies, safety plans, and how to question for domestic violence for approximately 1.5 hours, a social worker presents on the theories of domestic violence and the counseling for domestic violence for approximately 1.5 hours. The students see an NFB film "Without Fear" on domestic violence for approximately 1 hr. and a Ted talks video "crazy love" for approximately 15 minutes. Students also have an hour of readings on the subject. Safety Plans available on the BC Law Society website are reviewed (<http://www.gov.mb.ca/domesticviolence/>) The exam at the end of the course includes questions on Domestic Violence.

University of New Brunswick No response provided.

University of Ottawa No response provided.

University of Saskatchewan Faculty acknowledged that because their College of Law is located in Saskatchewan, they are not involved in the implementation of recommendations of Ontario provincial committees, however faculty discussed our letter and agree that this issue is a very important one, and will consider ways that they might address this matter in their Professional Responsibility course in Saskatchewan.

University of Toronto Faculty administration noted that they agree that domestic violence and risk assessment are important aspects of professional training but that academic freedom dictates that the

individual course content is determined by the faculty members teaching a course, and this year three different faculty members are teaching the course. One of the mandatory training sessions for this year's first year class will be led by a Family Law professor, and will reference these important subjects.

University of Victoria Faculty administration acknowledged they do address the issue of domestic violence and risk assessment in many courses across our curriculum. They were not able to specifically say what they are doing in their courses is in response to the recommendations of the Death Review Committee but noted that they do take the issues seriously.

University of Western Ontario Faculty administration acknowledged that they recognize the importance of the issues the recommendations raised. Although domestic violence and risk assessment are not part of their Ethics and Professionalism course, they are offering a new course this year called "Gendered Violence and the Law: Responsibilities, Remedies and Rights." They also regularly offer a course in Sex Discrimination, which includes components on domestic violence. They remain open to other means of addressing these issues in our ongoing process of curriculum review.

University of Windsor No response provided.

Osgoode Hall/York University No response provided.

Law Society of Upper Canada

#2-2011/1 *The Law Society of Upper Canada should adopt a policy of ensuring that lawyers who do deal with family clients are aware of the risk and safety issues in domestic violence cases.*

Status Update:

...regulatory policy that requires lawyers to meet the appropriate standard of competent representation is realized in the Law Society's Rules of Professional Conduct, amended and updated in October 2014. The Rules, which all lawyers must observe, articulate this standard as a matter of professional practice. This would include appropriate knowledge for a particular retainer in any area of law. The Rules on competence include the following:

3.1-1 In this rule, "competent lawyer" means a lawyer who has and applies relevant knowledge, skills and attributes in a manner appropriate to each matter undertaken on behalf of a client including

(a) knowledge and general legal principles and procedures and the substantive law and procedure for the areas of law in which the lawyer practices,

(b) investigating facts, identifying issues, ascertaining client objectives, considering possible options, and developing and advising the client on appropriate courses of action,

...(j) pursuing appropriate professional development to maintain and enhance legal knowledge and skills; and

(k) otherwise adapting to changing professional requirements, standards, techniques, and practices.

The commentary on the rule goes on to provide:

...Competence involves more than understanding the legal principles; it involves adequate knowledge of the practice and procedures by which such principles can effectively be applied. To accomplish this, the lawyer should keep abreast of developments in all areas of law in which the lawyer practices.

#2-2011/3 *Domestic violence should be part of the now mandatory CLE requirement for practicing lawyers, at least for those who practice family law.*

Status Update:

CPD, the required minimum of 12 hours of CPD each year was designed as a general requirement rather than a scheme of mandatory subject-matter practice-oriented components (other than the professionalism hours). However, the practice-area programs do provide appropriate focus. The Law Society's programs on family law, as one example, frequently include information on domestic violence and representation of the victims of domestic violence. For example, this topic is covered in the following:

- Family Law Basics program
- 2014 program "Managing High Risk Cases in Family Law and Criminal Law"
- New e-Course on Ethical Issues in Family Law
- Six Minute Family Lawyer program, which will include "Safety Plan for the Client in Danger"
- 2015 Family Law Summit, where it will be the subject of a judges' panel

The topic of domestic violence is covered in our licensing process materials. Further, within the last few years, our Equity Initiatives Department produced an educational guide for lawyers on provision of legal services in cases involving claims of sexual abuse, which is an online resource through the Law Society website.

Comments: The voluntary nature of this training does not ensure that all lawyers take advantage of this training. Those who could benefit most from training on this subject matter may well not avail themselves of it at all.

Ministry of the Attorney General

#31-2007 *It is recommended that in every domestic violence case, there be a requirement that risk be assessed. If a high-risk case is identified, it needs to be specifically red flagged for further follow up. (Similar to recommendations #10/2002, #17/2004, #27/2004)*

Status Update:

Police use a risk assessment tool to assess risk in domestic violence cases. Potential high risk cases can be referred to Domestic Violence High Risk Committees to discuss risk management options and strategies. If police include a domestic violence indicator on an information, or, if Crown counsel advise court staff that a particular case is related to domestic violence, court staff enter the information in ICON (the court information management system.)

Comments:

The Domestic Violence Risk Management Report (DVRM) Officer Guide instructs officers to complete the DVRM **when charges are laid** in a domestic violence occurrence.

There may be a very high level of risk present in a situation in which the police have responded and found no grounds to lay charges. Such situations may provide critical opportunities for intervention, particularly in cases where there has been no other contact with these individuals. Risk assessments should be completed for all calls for assistance with a history of domestic violence. See **#6-2008/4** under MCSCS above.

#32-2007 *It is recommended that once a case has been identified as a high risk case then there must be a systems response so that the case can be actively managed. This would require that the justice partners involved with the case meet to discuss management options and strategies. Such dedicated teams already exist in parts of Ontario and should be the model for other communities to follow. (Similar to recommendations #27/2004, #14/2002)*

Status Update:

As of December 31, 2010 all jurisdictions have a justice-based Domestic Violence High Risk Committee in place.

Comments: High Risk Domestic Violence Committees are composed of the justice partners, excluding community partners that may have important information regarding the potentially dangerous or lethal situation.

#33-2007 *It is recommended that all potential sureties be required to watch an educational videotape on their role as it relates to domestic violence cases (e.g. Huron County Crown video). As well, that each police department assign a police officer to routinely call all sureties in high risk cases to check on bail compliance and the stability of the accused. (Similar to recommendations #19/2004, #20/2004)*

Status Update:

An explanatory, educational video for proposed sureties in domestic violence cases was developed by the Crown Attorney's office in partnership with the Ottawa Police Service. The video sets out the responsibilities of sureties generally, with a focus on those issues that are particularly relevant for sureties in domestic violence cases including major risk factors for domestic violence. The video is available in English and French and a copy of the video was provided to all court jurisdictions across Ontario. The video was featured at the March 2011 meeting involving the Domestic Violence Leads across the province.

Bail safety police officers routinely conduct bail compliance checks, criminal records checks and firearms checks of potential sureties in those jurisdictions where the bail safety program exists.

#1-2008/1 *It is recommended that judges receive continuing education on understanding and recognizing the dynamics of domestic violence and the risk factors for lethality. Judges need to receive and review all the information on a case to make appropriate decisions, for example, in bail hearings. Furthermore, it is recommended that the Ontario Court of Justice consider using high-risk cases where judicial interim releases occurred, as reviewed by the DVDRC, as case scenarios as part of the ongoing educational programs for Justices of the Peace who conducts the majority of bail hearings in the province.*

Status Update:

Judicial education falls within the sole purview of the judiciary. The Offices of the Chief Justices were provided with copies of the Sixth Annual Report of the Domestic Violence Death Review Committee.

#1-2008/2 *It is recommended that a protocol be established between police and Crown Counsel to ensure that persons proposed as surety: 1) be properly investigated as to their suitability to act as surety; 2) be fully informed about their responsibilities as surety, both in writing and on the court record; and 3) be warned, in writing and on the court record, as to their potential liability under estreatment and as party to a criminal offence in the event they breach their duty.*

Status Update:

A pamphlet published by the Ministry of the Attorney General describing the role and responsibilities of a surety is currently available for distribution through Court Services Division to proposed sureties throughout the province. The pamphlet sets out the responsibilities and qualifications of a surety, the manner in which sureties may end their obligations, as well as the consequences of the failure of the accused person to obey the conditions of the release order, including potential liability under estreatment proceedings. This information is also available on the Ministry of the Attorney General website.

As well, as stated above, there is an explanatory, educational video for proposed sureties in domestic violence cases, which sets out the responsibilities for sureties generally, with a focus on those issues that are particularly relevant for sureties in domestic violence cases including major risk factors for domestic violence. The video is available in English and French and a copy of the video was provided to all court jurisdictions across Ontario.

Police do criminal records and weapons checks in domestic violence cases on the proposed sureties as part of the Bail Safety Program in those jurisdictions where the Bail Safety Program exists.

Comments: The protocol aspect of this recommendation is not addressed by this answer.

#2-2008/7 *The province should identify a process to ensure enforcement of attendance at court-mandated programs for batterers. Enforcement should include effective methods of tracking and monitoring offenders, mechanisms for systematically identifying levels of risk and risk management that is inter-disciplinary and inter-sectoral in nature.*

Status Update:

A court order is required to be in place before an offender is accepted into the Partner Assault Response (PAR) Program. Failure to attend the program may result in a charge of a breach of a court order. PAR service providers are required to inform the referral source (Probation, Crown's Office) of an offender's failure to attend a scheduled intake appointment and to notify the referral source when an offender is dismissed from the group for non-attendance. PAR service providers are also required to submit a completion report to the referral source once the offender completes the Program. The ministry continues to work closely with PAR service providers to maximize the program's effectiveness in promoting victim

safety, including examination of the mechanisms for systematically identifying levels of risk and risk management that are intersectoral and inter-disciplinary in nature.

#6-2008/1 *It is recommended that the Ministry of the Attorney General design and implement a public education campaign that explains Restraining Orders in an understandable manner to laypersons.*

Status Update:

The restraining order reforms contained in Bill 133 were proclaimed in force on October 15, 2009. A plain-language guide entitled “Restraining Order, A Self-Help Guide: How to make an application for a restraining order” is available on the Ministry’s website (http://www.attorneygeneral.jus.gov.on.ca/english/family/guides/restraining_order/) to make sure potential applicants understand the process for obtaining restraining order. Hard copies of the guide are also available in English and French at courthouses across the province.

#6-2008/2 *The Ministry of the Attorney General should review current courses and resource materials to ensure that information pertaining to restraining orders is easily available to all lawyers practicing family law.*

Status Update:

The amendments made to restraining orders in 2009 now require that standard form restraining orders be used in order to assist with police enforcement. Macros of these forms are available for use by the public, including counsel, on the Ontario Courts website and include help text to assist in their completion. Training material in an electronic format on the restraining order process has been made available to the bar through Legal Aid Ontario. Ministry officials also delivered several in-person training sessions on changes to the restraining order process to members of the bar, judiciary and other stakeholders. The plain-language guide is currently available on the ministry’s website. Hard copies of the guide are also available to the public, including lawyers, in English and French at courthouses across the province.

At the request of the Ontario Women’s Directorate, the Law Commission of Ontario developed course modules for Ontario law students on issues of Violence Against Women to promote skills development for effective case management of domestic violence cases. Since 2012, the modules have been publicly available on the Law Commission website: <http://www.lco-cdo.org/en/violence-against-women-modules-final-report>

#11-2008/2 *In cases of severe incidents of harm that include death threats and strangulation, even if there is no documented history of domestic violence, there need to be recognition of the severity of a single, but critical assault at a bail hearing and evidence put forward for this incident to be considered a higher risk case and thus managed in that manner.*

Status Update:

Crowns are trained and directed to take a position on bail that ensures, to the fullest extent possible, the protection and safety of the victim and her family and a prevention of further offences. Crowns are trained to recognize and take seriously the factors known to be associated with increased risk of domestic violence and to take a position on bail that addresses the safety issues revealed by these factors.

DV High-Risk Committees are currently operating in all jurisdictions in Ontario. DV High-Risk Committees aim to manage risk and monitor offenders in cases where factors indicate significant increased risk to the victim or other victims are identified. The assessment that a case is high risk can be made on the basis of a single incident.

In addition, through either the Bail Safety Program or the Early Victim Contact Program attempts are made to contact victims prior to bail proceedings to gather information to help identify and address safety issues.

Information revealed indicating elevated risk of future harm is put before the court so that bail decisions can address all identified safety issues.

#14-2008/3 *An enhanced protocol should be established between police services and Crown counsel to ensure that persons proposed as surety:*

- *are properly investigated as to their suitability to act as surety including an assessment of their lawful access to firearms;*
- *can guarantee all possessed and accessible firearms are secured from the accused for the duration of the surety contract;*
- *are fully informed about the totality of the allegations against the accused, including information about risk factors and potential lethality;*
- *are fully informed about their responsibilities as surety, both in writing and on the court record, following required viewing of an educational videotape on their role, specific to domestic violence cases (e.g. Huron County Crown video);*
- *are warned in writing and on the court record as to their potential liability under estreatment and as party to a criminal offence in the event they breach their duty;*
- *can accept that each police department will assign a police officer to routinely call all sureties in high risk cases to verify bail compliance and the stability of the accused.*

Status Update:

See **#1-2008/2** above.

#09-2009/3 *It is recommended that the Ministry of the Attorney General require that Justices of the Peace routinely formally notify the Chief Firearms Officer about any bail conditions that include a prohibition of firearms.*

Status Update:

Whenever a weapons prohibition condition is imposed on a judicial interim release order, court staff scan the order and send a copy to the Chief Firearms Officer for the Province of Ontario and provide a copy to the local police service.

#9-2009/4 *It is recommended that the Ministry of the Attorney General require that Partner Assault Response (PAR) programs should be mandated as part of sentencing for domestic violence perpetrators when there is a documented history that the offence before the courts is not an isolated incident with either the current or prior victim(s).*

Status Update:

Crown policy currently provides that Partner Assault Response (PAR) Programs are the appropriate programs for Crowns to request in sentencing for domestic violence cases. However, decisions as to which offenders should be referred to PAR must be made on a case-by-case basis as there are some offenders for which PAR would not be appropriate, such as those where the offender has a history of non-compliance with the PAR Program.

Judges make sentencing decisions taking into account a broad range of factors and, while Crown attorneys can request that certain programs be utilized, the ministry cannot mandate the judiciary to sentence offenders to the PAR Program.

#7-2010/5 *To the National Judicial Institute, Ministry of the Attorney General, and Faculties of Law in Ontario. The details and facts from this case should be used as a training aid for the education of law students, continuing education for practicing lawyers (e.g. Crown attorneys, family law and criminal law) and the judiciary regarding the issues and concerns facing victims of domestic violence. In particular, this case demonstrates the need for timely and accurate sharing of information not just within the police service itself, but also between the police, judiciary, probation service and health care providers.*

Status Update:

Crown attorneys receive continuing education in domestic violence through annual specialized training and are trained to recognize and take seriously the factors known to be associated with increased risk of domestic violence. Crown policy guides Crowns on bail hearings and sentence positions to ensure that safety issues revealed by risk factors are addressed. Crowns and Victim/Witness Assistance Program Leads have received extensive training on domestic violence risk factors.

At the request of the Ontario Women's Directorate, the Law Commission of Ontario developed course modules for Ontario law students on issues of Violence Against Women to promote skills development for effective case management of domestic violence cases. Since 2012, the modules have been publicly available on the Law Commission website: <http://www.lco-cdo.org/en/violence-against-women-modules-final-report>

Judicial education falls within the sole purview of the judiciary.

DV High-Risk Committees are currently operating in all jurisdictions in Ontario. DV High-Risk Committees aim to manage risk and monitor offenders in cases where factors indicating significant increased risk to the victim or other victims are identified. Information sharing is emphasized on these committees.

In cases where there is a complainant or a victim, court staff provide copies of probation orders, conditional sentence orders and recognizances to the police and the Victim/Witness Assistance Program office. With the new pilot project of e-orders, copies of recognizances will be provided more quickly because they will be prepared in the courtroom and emailed to the police and V/WAP.

Comments:

It is noteworthy that the DV High-Risk Committees in some communities, such as Ottawa, do not have representation of front-line women's anti-violence services such as shelters, even though non-justice based agencies such as child welfare are at the table. This significant omission risks important information regarding risk being missed.

Particular attention must be paid to issues related to firearms in rural communities.

#16-2011/1 *It is recommended that social services/probation examine the potential requirement for an intervention specifically designed for women perpetrators of violence and domestic violence.*

Status Update:

The Partner Assault Response (PAR) Program is one option available for women offenders. Women offenders receive services through women-only PAR groups or one-on-one counselling with PAR service providers. There is flexibility within the PAR Program curriculum to allow service providers to tailor the group to address the specific needs of women offenders.

Comments:

ARC is very concerned about the continuing overrepresentation of women in charging statistics related to domestic violence. More effort must be made to apply the Dominant Aggressor analysis to ensure women coping with violence are not being inappropriately charged instead of or in addition to their abusive partners.

#16-2011/2 *The potential for lethal violence by women perpetrators with substantial violent histories, serious substance abuse problems and emotional instability should be taken seriously and when a high risk case is identified, steps should be taken to refer these women to appropriate treatment and more intensive supervision.*

Status Update:

The ministry takes all cases of domestic violence seriously. There are a variety of different programs that women can be referred to as part of a court order, including substance abuse programs, counselling programs and the Partner Assault Response Program. In many cases, the court leaves it up to the probation officer to determine the appropriate programs that the offender should be referred to as part of probation.

#16-2011/3 *The Victim and Vulnerable Persons Division should consider creating a public education program with information and resources specifically aimed towards assisting male victims of domestic violence.*

Status Update:

The Victims and Vulnerable Persons Division (VVPD) continues to look at ways to increase public awareness and improve services for male victims. In 2011, the division launched its provincial Support Services for Male Survivors of Sexual Abuse, which includes 24 hour crisis and referral services. Male victims of domestic violence can access support through programs funded by VVPD, including the Family Court Support Worker Program, the Victim/Witness Assistance Program and the Victim Quick Response Program. Male victims of domestic violence may also contact the Victim Support Line or access the Victim Service Directory at <http://services.findhelp.ca/ovss> to find services located in their jurisdiction.

#21-2011/3 *The Ministry of the Attorney General, Crown Law Office, should have enhanced vigilance in identifying serial domestic violence offenders and should seek an application to the court to have the offender declared a long-term or dangerous offender, when appropriate.*

Status Update:

Prosecutors consider the applicability of the dangerous offender and long-term offender provisions of the Criminal Code to domestic violence offenders. The starting point for such an application is an application to the Court for an expert assessment that will assist in determining the offender's future risk. Following the completion of the assessment, where it appears that the criteria for a dangerous or long-term offender application are met, the Crown then requests the Attorney General's consent to bring an application. At every stage these applications are given very serious consideration. The ultimate decision as to whether a particular offender should be designated a dangerous or long-term offender is made by the Court.

Prosecutors are assisted in their consideration of this matter by information provided by the National Flagging Program. This program gathers information on violent offenders, including domestic violence offenders, who have been identified as posing an ongoing and serious threat to society, or who might reasonably be declared a dangerous or long-term offender if future offences are committed. Such information can be made available to prosecutors at bail hearings and sentencing proceedings, including dangerous and long-term offender applications.

#21-2011/4 *The Ministry of the Attorney General should implement a policy that requires the consent of the Assistant Deputy Minister for Criminal Law for any reduction of a murder charge to manslaughter by way of plea resolution for cases that involve domestic violence.*

Status Update:

The Crown has an ongoing duty to review cases to ensure there is a reasonable prospect of convictions. The proper administration of justice is the primary concern of resolution discussion.

Ministry of Children and Youth Services -

Child Welfare Secretariat

#25-2007 *It is recommended that the Ministry of Children and Youth Services through the Child Welfare Secretariat be directed to consider requiring child welfare organizations to conduct internal reviews on domestic violence deaths that occur on files open within the past 12 months where domestic violence is known to be present. Lessons learned through this process should be shared provincially for review by the Ministry of Children and Youth Services.*

Status Update:

The Ministry has a joint directive with Office of Chief Coroner (OCC) which governs process for reporting and reviewing deaths of children who are receiving, or have received child protection services in the year preceding their death.

In a situation where it is alleged or verified that there is a serious and immediate threat to a child's safety because of an adult, parent or caregiver has been killed or seriously injured as a result of domestic violence, the CAS would conduct a child protection investigation in accordance with the *Child Protection Standards in Ontario* (2007). The investigation would be undertaken to assess the impact of the death and the domestic violence on the children in order to identify the service needs of the children and their family, and to assess if there are risk factors they may necessitate further protective measures. Depending on the circumstances of the case, the CAS may decide to complete an internal case review. This would be determined by the CAS on a case-by-case basis. Findings, lessons learned and any recommendations rising from the CAS case review could be used to inform and shape future CAS policies and practices. The ministry will continue to comply with the March 31, 2006 Joint Directive on Child Death Reporting and Review (the "Joint Directive") which sets out requirements and procedures that apply when a child dies who was receiving services from a CAS at the time of death or in the 12 months preceding their death.

#1-2008/6 *It is recommended that the Ministry of Children and Youth Services and the Ontario Association of Children's Aid Societies provide enhanced training on a standardized risk/danger assessment tool and enforce the use of this tool in all cases where domestic violence and harassment are present. Once the level of risk has been identified for the victim, an adequate safety plan must be implemented. As well, it is essential that contact be made with the perpetrator to assist in the risk assessment and risk management process.*

Status Update:

The Ministry introduced a new *Ontario Child Protection Tools Manual* in 2007 which includes a standardized Safety Assessment tool and a standardized Family Risk Assessment Tool. CAS staff are required to use these tools for all child protection investigations. Both tools are completed with families, including alleged domestic violence perpetrators, where possible.

Where safety issues are identified in domestic violence situations through the safety assessment tool, child protection workers are required to develop a safety plan to ensure the safety of the child from the perpetrator with the safety planning and treatment intervention for the adult victim considered. If information is obtained during an investigation that the domestic violence perpetrator presents a danger to members of the family, child protection workers are required to alert the police immediately. In addition, the Child Protection Standards require each CAS to have protocols with their local police services that relate to the investigation of allegations that a criminal act has been perpetrated against a child.

The Ministry funds the Ontario Association of Children's Aid Societies (OACAS) on an annual basis to provide an Education Services curriculum to child welfare professionals, managers and resource families in Ontario to support them in making critical decisions about child safety and to improve outcomes for children and

families. The curriculum includes training on the Safety Assessment tool and the Family Risk Assessment tool to provide workers with the necessary tools to perform their core responsibilities and an understanding of the complexities of child abuse, maltreatment and neglect, as well as a Woman Abuse and Child Safety course which focusses on understanding the etiology of woman abuse and best practice interventions with families, and the importance of holding perpetrators accountable for abusive behaviour and engaging them in assessment and treatment.

#12-2008/1 *The Ministry of Children and Youth Services, in consultation with the Ontario Association of Children's Aid Societies, should enhance standards for CAS interventions in DV cases by requesting DV perpetrators be involved in specific provincially approved batterers' programs before allowing unsupervised visits with children or terminating the CAS involvement in a case.*

Status Update:

Regarding the recommendation related to intervention standards, the *Child Protection Standards* and *Ontario Child Protection Tools Manual* provide the framework for consistently high quality assessments, investigations and case management of child protection services, and provides a set of required and supplementary instruments to assist child protection workers in their assessment and screening of situations in which a child is alleged to be in need of protection. In addition, child protection workers use the Ontario Child Welfare Eligibility Spectrum (2006) to assist in making consistent and accurate decisions about eligibility for service at the time of referral. Combined, these tools guide child protection workers in providing quality services to children and their families, including in situations involving domestic violence, with the safety of the child being of paramount importance.

Standards #1 & #2 of the Child Protection Standards outline the procedures for collecting information from the community and assessing the information to determine the most appropriate response to referrals. All referrals are universally screened for the presence of domestic violence. Both of these standards emphasize that the primary focus is to gather information and assess how domestic violence has resulted in, or is raising the risk of abuse and neglect of children as defined by the Child and Family Services Act (CFSA). If the reporter has alleged the child may have suffered or be suffering abuse, a check on the Ontario Child Abuse Registry is also conducted.

In situations where the only allegation is exposure to domestic violence and where the violence has not resulted in a) abuse and/or neglect of a child as defined by the CFSA, or b) risk of abuse or neglect of the child, child protection workers are required to refer families, including domestic violence perpetrators, to community services, and where required, provide assistance in linking families to the community services. Where families are receiving ongoing services and it is identified through an assessment of a family's strengths and needs as required by Standard #9 that partner violence is occurring, the child protection worker is required to develop a service plan that addresses this concern (e.g. through referrals to community resources for perpetrators as appropriate).

In addition, the Ministry, in collaboration with the Ministry of Community and Social Services, has established guidelines for collaboration agreements between CASs and Violence Against Women (VAW) shelters. These local CAS-VAW Collaboration Agreements allow for a coordinated response to achieve their respective safety mandate to protect women who are abused and their children when work of two sectors intersects. The OACAS training on Woman Abuse and Child Safety reinforces child protections workers' skill in safety planning for women and children and the value and importance of interagency collaboration throughout the case management process from safety planning and threat assessment to case planning and treatment interventions.

#12-2008/2 *The MCYS, in consultation with the OACAS, should ensure an internal death review is conducted by the CAS in any case where a parent or child has been a domestic homicide victim and where there has been active CAS involvement within the previous year, or possibly longer.*

Status Update:

See #25-2007 above.

#24-2011/2 *The CAS involved with the family should conduct an internal review to examine its provision of services and assessment of risk for this family prior to the homicide.*

Status Update:

See #25-2007 above.

#24-2011/3 *Children's Aid Societies should be required to conduct internal reviews when a domestic violence death occurs in a family that had received services of the CAS within the last 12 months preceding the death, and where domestic violence issues had been identified.*

Status Update:

See #25-2007 above.

Ministry of Community and Social Services (MCSS) and Family Responsibility Office (FRO)

#8-2007 *We recommend that Ontario Works ensure that all of its employees are well trained in recognizing situations of domestic violence and assisting their clients in obtaining the services they require.*

Status Update:

Ontario Works has established an ongoing case management training program called Supportive Approached through Innovative Learning (SAIL) that includes a module on domestic violence. This module is designed as a resource kit to provide Ontario Works staff with information on domestic abuse and resources to effectively work with victims of domestic violence.

#16-2007 *It is recommended that affordable housing, child care, and income support must be made available so that women trapped in abusive relationships can escape the danger as threats escalate into potentially lethal situations.*

Status Update:

Over the years, significant steps have been taken under the government's broader Domestic Violence Action Plan to better support women and their children fleeing abuse based on the advice of survivors, community partners and other violence against women (VAW) experts such as the Domestic Violence Advisory Council and the Domestic Violence Death Review Committee.

To reduce domestic violence, the Ministry of Community and Social Services (MCSS) provides \$142 million annually through a continuum of VAW programs and services including emergency shelters, counselling, early intervention for child witnesses of abuse, and transitional and housing supports. This represents a 48% increase in funding to VAW agencies since 2003.

These VAW programs provide a range of effective supports for abused women and their children, including assisting women who may have complex needs to access other services and resources such as mental health services.

The government has also made improvements across the broader continuum of services such as income supports and housing options so that women and their children can rebuild their lives free from violence.

In the 2013 Budget, the government increased support by 1% for all people receiving funding from Ontario Works and the Ontario Disability Support Program. This means that rates have increased by 16% per cent since 2003.

The government remains committed to its Special Priority Policy that gives victims of domestic violence priority access to safe, affordable housing. This helps victims of domestic violence and their families escape unsafe and abusive situations.

In recent years, MCSS in collaboration with the Ontario Women's Directorate (OWD) has supported education and training initiatives that build agencies' capacity and skills to address the diverse needs of women seeking supports. These include the Aboriginal public awareness campaign, *Kanawayhitowin*, and a three-year training initiative underway (to March 2015) on the intersection of domestic violence and mental health. With funding support from MCSS and OWD, the Women's College Research Institute and the Centre for Addiction and Mental Health developed training for front-line workers to help address the complexities of caring for women who experience domestic violence and mental health and substance abuse problems.

Ministry Update November 21, 2014: MCSS' investment in Violence Against Women (VAW) programs, since 2003, has grown to \$48.7 million, a 51% funding increase. In response to your question about the breakdown of this funding, here is a summary of key investments made since 2003:

- 2010-2011 - \$0.94 million to enhance the Transitional and Housing Support Program which supports women to access short and long-term housing as well as with developing life transition plans
- 2009-2010 - \$5.45 million
- \$4.6 million to increase base budgets, salaries and wages for VAW agencies
- \$0.85 million for VAW counselling agencies who provide community based counselling, support, and referral services for women and their children
- 2008-2009 - \$20.4 million
- \$18.9 million including:
 - a 5% increase to all shelters to fulfil the governments' commitment to restore the funding levels for shelters to pre-1995 levels
 - the creation of 83 new shelter beds
 - an increase to the minimum ministry funding threshold from \$25,000 to \$30,000 per bed for VAW shelters, and
 - increased funding to second stage housing providers
 - \$1.5 million to support Domestic Violence Community Co-ordinating Committees which included \$800,000 in annualized base funding and \$700,000 in one-time project funding

MCSS is committed to support women who have experienced violence and their children have effective and appropriate services available to them.

On November 14, 2014, MCSS advised VAW-funded agencies of a new investment of \$14.5 million over the next three years to support the continued professionalization of VAW services. This investment will support an increase in the salaries and wages of frontline workers who provide critical services to women and children fleeing violence

Ontario released its 2014 Budget that included increased support by about five percent for single adults without children receiving Ontario Works, and one percent for families receiving Ontario Works and individuals with disabilities who rely on the Ontario Disability Support Program (ODSP). This means that rates have increased rates by 24.4 percent for singles without children relying on Ontario Works and 17.2% for Ontario Works families and individuals with disabilities on ODSP.

In a follow up letter MCSS indicated that a survey completed by Municipal Affairs and Housing showed that in 2013, 4,130 special priority policy households were on the waitlist to receive social housing. ONHPA's 2014 Waitlist Survey did not break down this number by household composition or include the number of special priority policy households that were housed.

While MMAH does not provide dedicated funding to support housing for victims of domestic violence, programs such as the Investment in Affordable Housing Program (IAH) and the Community Homelessness Prevention Initiative (CHPI) provide Service Managers with flexible funding to allow them to better meet the unique housing needs of their community, including addressing the housing needs of people who have experienced domestic violence.

Comments: While the recently announced increase in funds to VAW agencies is a welcome development, it is noteworthy that funding for many agencies has not kept pace with cost of living. For example, funding for second stage shelters was eliminated in 1996. Ten years later the Ministry began "reinvesting" in those second stage shelters that survived by providing core funding. With the most recent funding announcement, one such second stage shelter now has funding that amounts to 99% of funding it had in 1995, prior to the cuts. Factoring cost of living increases in the interim, funding has not kept pace with costs.

"Professionalization" of VAW services is something women's shelters have long resisted. While there is no question that grassroots women's support and advocacy services, such as shelters and rape crisis centres, are experts on violence against women, we have steadfastly resisted credentialization of our work.

#2-2008/6 *When an individual attempts suicide, there should be appropriate follow-up, support and referral to agencies that can explore the issues that resulted in the attempt. Criminal justice responses and interventions are generally not as effective as interventions from social and community based organizations and services.*

Status Update:

No answer provided.

#6-2008/5 *When assessing applications for support, the Family Responsibility Office (FRO) should ask applicants to identify potential safety threats, including violence that may arise from support enforcement activities.*

Status Update:

The Family Responsibility Office worked with its provincial and territorial counterparts and with the federal government to develop a best practices document for cases with a potential for violence, which was completed in 2009.

#14-2008/4 *It is recommended that Aboriginal-focused public awareness programs paralleling the Neighbours, Friends and Families campaign be implemented and made available to all First Nation communities across the province.*

Kanawayhitowin is an example of an Aboriginal public awareness campaign that was launched in the Fall of 2007 to raise awareness about the signs of woman abuse in First Nation communities so that people, who are close to at-risk women, or abusive men, can provide support. This program reflects a traditional and cultural approach to community healing and wellness. Educational materials include brochures, public service announcements, a training video and CD-ROM.

Status Update:

In recent years, MCSS in collaboration with the Ontario Women's Directorate (OWD) has supported education and training initiatives that build agencies' capacity and skills to address the diverse needs of women seeking supports. These include the Aboriginal public awareness campaign, Kanawayhitowin, and a three-year training initiative underway (to March 2015) on the intersection of domestic violence and mental health.

Ministry of Community Safety and Correctional Services

#3-2007 *It is recommended that there be ongoing training for police on the most effective response to domestic violence cases especially where there is a history of homicidal and suicide threats, separations, obsession with the victims, prior incidents of domestic violence and/or child abuse. (Similar to recommendation #4/2002 & #16/2004) The development of a high-risk case management protocol specific to these complicated domestic violence cases needs to be accompanied by additional training focused on addressing the dual goals of victim safety and offender risk reduction.*

Status Update:

Domestic violence is a very serious and complex issue requiring a multi-faceted response. To support police in this area, the MCSCS developed the Model Police Response to Domestic Violence (MPRDV), which provides guidelines and best practices to police for responding to, and investigating, domestic violence incidents. Following this, the ministry initiated evaluations of the MPRDV in order to assess the usefulness and relevance of these guidelines and best practices.

The results of the evaluations indicate that police services adhere to, and incorporate, the guidelines and best practices into their policies and procedures and that, across the province, police services demonstrate a strong commitment to ensuring compliance by police officers with these policies and procedures. Further, all police services have designated a Domestic Violence Coordinator who provides a consistent approach when tracking domestic violence incidents.

Additionally, in 2000, the ministry developed the Domestic Violence Supplementary Report (DVSR) form as a risk indicator checklist to support the investigation of domestic violence occurrences. In 2009, a working group was established to revise the DVSR. The proposed changes aimed to improve the current risk factor portion of the DVSR in order to increase knowledge of risk and suggest appropriate risk management actions. The revised DVSR was renamed Domestic Violence Risk Management Report (DVRM). A resource guide has also been developed providing detailed information on the DVRM report and how it should be used as a tool to assist officers in managing domestic violence investigations. In February, 2013 the ministry distributed the DVRM and its guide to all police services across Ontario.

Domestic violence is a public safety concern that the Ontario Provincial Police (OPP) treats with the utmost seriousness. The OPP reviews the Domestic Violence Death Review Committee (DVDRC) recommendations annually as well as the outcomes of inquiries and inquests related to domestic violence. Any recommendations are implemented through policy, procedures, and training.

Incidents of domestic violence in OPP jurisdictions are constantly being reviewed to capture best practices and improve response, where able. OPP officers receive initial domestic violence training at the Ontario Police College (OPC). The training includes session on the dynamics of abuse, the details of domestic violence, and practical scenario classes.

When OPP recruits return to the Provincial Police Academy, they are required to complete the Domestic Violence E-learning module. They also receive a half day training session on domestic violence policy and participate in domestic violence simulations. Experienced OPP officers receive domestic violence training through the Domestic Violence Investigator's Course, which is offered several times a year throughout the province. Further, domestic violence training is provided to new call takers and is included as part of the Provincial Communication Centres Professional Development Quarterly program.

Senior correctional services officials at MCSCS take the recommendations brought forward by the DVDRC very seriously and respond to the recommendations provided by the committee.

In October 2012, MCSCS implemented an enhanced Domestic Violence (DV) policy which provides emphasis on identifying and addressing DV-specific criminogenic risks at every stage of supervision. Other specialized policies have also been developed to ensure the appropriate supervision/intervention of offenders who are at imminent risk of reoffending, sex offenders, and offenders with mental health issues. In addition, these

policies provide an emphasis on the safety of victims and their families; increased linkages with victims, police and other stakeholders; clear enforcement expectations; and emphasis on identifying and addressing DV-specific risks throughout supervision.

As per the enhanced DV policy, DV offenders are required to be promptly referred to DV-specific programming and, where appropriate, to MCSCS DV Core Rehabilitative Programs and/or other core rehabilitative programs (such as substance abuse). Attendance and progress is monitored and probation and parole officers (PPO) may proceed with enforcement of the supervision order whenever offenders fail or refuse to comply with a condition to attend DV-specific programming or a general counselling condition without a reasonable excuse. The MCSCS also has fee-for-service contract in several communities to provide additional specialized services (such as psychiatric ones), while in other locations the ministry refers to existing community resources to address offender needs.

Supervision is dynamic and addresses risk, needs, and responsivity issues. A PPO will adapt his/her supervision strategies to address escalating risks and may include case conferences, increased victim contact and safety planning, increased collateral contacts including police, as well as other proactive measures.

The MCSCS continues to work with the Ministry of the Attorney General's (MAG) Ontario Victim Services Secretariat and other jurisdiction partners to improve tracking and monitoring processes that strengthen enforcement of court-mandated attendance at Partner Assault Response (PAR) programs. The MCSCS predominantly refers perpetrators of DV to the PAR programs operated by MAG. The MCSCS is represented on MAG's PAR Advisory Committee.

The Exchange of Information Agreement, 2007 (between the PAR programs, probation and parole, the Victim/Witness Assistance Program, and the Crown) requires PAR program providers and the PPOs to share pertinent offender and victim/current partner information throughout the period the offender is under community supervision and in the PAR program.

The MCSCS provides rehabilitative programs addressing DV, substance abuse, anti-criminal thinking, sexual offending and anger management to offenders in provincial institutions and under supervision in the community, based on a thorough assessment of individual risk/needs, problems, and areas identifies.

Additionally, PPOs refer offenders under community supervision orders to appropriate and available resources in their community. Enforcement action is taken by all PPOs to address offender non-compliance.

Additional responses offered by the Ministry:

The police also utilize the Ontario Sex Offenders Registry (OSOR), established by *Christopher's Law (Sex Offender Registry, 2000)* and which came into force on April 23, 2001. *Christopher's Law* requires a convicted sex offender released into the community to register with the police service that has jurisdiction for the area where the offender will reside. The OSOR was specifically designed to assist police in investigating sex-related crimes and monitoring sex offenders in the community. For that reason, it is only accessible to police services. Section 10 of the *Police Services Act* prohibits the disclosure of information contained in the OSOR to anyone who is not authorized to receive it.

Christopher's Law was also designed to assist the police with crime prevention. The *Police Services Act* permits the Commissioner of the Ontario Provincial Police, the local chief of police, or his/her designate, to make public notification regarding high-risk offenders in the community if the community's safety will be enhanced by the release of the offender's personal information. This type of decision is made when there are reasonable grounds to believe that the individual poses a significant risk of harm to others or property, and the disclosure will reduce the risk posed by the individual. The decision whether to notify the public is left up to the police, as they are in the best position to determine the risk posed by an offender and the law enforcement needs of the community.

The OSOR program balances the rights of an individual with the need to keep communities safe. Many of the sex offender registries used in the United States include public notification of the offender's personal

information. Consequently, offenders tend not to comply in those jurisdictions. The OSOR has sustained a high compliance rate, which translates to greater public safety. In the view of the Ministry of Community Safety and Correctional Services, a significant contributing factor is that members of the public do not have access to the registry and, consequently, offenders are not fearful of vigilante and other inappropriate responses from the public.

Most police services have community services officers assigned to host programs and initiatives that increase public awareness on a variety of safety issues.

Ontario is also leading the way in the battle against human trafficking and child pornography. Since 2003, the Ministry of Community Safety and Correctional Services has provided funding to 11 projects for a total of approximately \$1.4 million under the Proceeds of Crime – Front-Line Policing Grant, to help police services combat human trafficking in Ontario. Since 2006, we have allocated over \$23 million in the Provincial Strategy to Protect Children from Sexual Abuse and Exploitation on the Internet – making it possible for online undercover investigations, supports for victims and their families, and the coordination and training of dedicated crown prosecutors to be put in place.

See also Ontario Police College response at **#3-2007** below.

Comments:

The reduction in the number of weeks that the PAR program runs is a misguided attempt to increase the number of men who can access the program rather than ensuring that the program has the resources necessary to meet the needs. This program, which originated as part of the Duluth Model, was designed to be 26 weeks. The goal is to achieve attitudinal change with the participants in the program. Even with a 26 week program, that change is not always effective. Reducing the number of weeks to 12 (and in some cases, 10) will be even less effective and will do nothing to ensure the safety of women and children. It is noteworthy that the PAR program is not available in all areas of the province, e.g., small, remote, northern communities.

It is critical for cross-sectoral relationships to be maintained and nurtured to ensure open dialogue, consultation and collaboration across recommendations. The Ministry must respond to all recommendations. Tracking, reporting and effective tool development must be informed by survivors of violence and their advocates.

***#6-2007** Recognizing the critical role that police play in responding to domestic violence calls, particularly in rural and remote communities where frequently they are the only resource available to families in trouble, police officers require ongoing training in the dynamics of domestic violence especially when faced with reluctant and ambivalent victims and perpetrators who have a history of past domestic violence, suicidal behaviour and addictions. (Similar to recommendations **#7/2002**, **#5/2002**, **#4/2002**, **#8/2004** & **#28/2006**)*

Status Update:

See **#3-2007** above.

***#12-2007** It is recommended the MCSCS review their current procedures for assessing risks posed by domestic violence perpetrators to assist in case planning and management and that they ensure adequate funding is in place for batterer intervention programs. (Similar to recommendations **#16/2004**, **#17/2004**, **#20/2006**)*

Status Update:

Selected relevant paragraphs from **#3-2007** above:

In 2000, the ministry developed the Domestic Violence Supplementary Report (DVSP) form as a risk indicator checklist to support the investigation of domestic violence occurrences. In 2009, a working group was established to revise the DVSR. The proposed changes aimed to improve the current risk factor portion of the DVSR in order to increase knowledge of risk and suggest appropriate risk management actions. The revised DVSP was renamed Domestic Violence Risk Management Report (DVRM). A resource guide has also been developed providing detailed information on the DVRM report and how it should be used as a tool to assist officers in managing domestic violence investigations. In February, 2013 the ministry distributed the DVRM and its guide to all police services across Ontario.

In October 2012, MCSCS implemented an enhanced Domestic Violence (DV) policy which provides emphasis on identifying and addressing DV-specific criminogenic risks at every stage of supervision. Other specialized policies have also been developed to ensure the appropriate supervision/intervention of offenders who are at imminent risk of reoffending, sex offenders, and offenders with mental health issues. In addition, these policies provide an emphasis on the safety of victims and their families; increased linkages with victims, police and other stakeholders; clear enforcement expectations; and emphasis on identifying and addressing DV-specific risks throughout supervision.

As per the enhanced DV policy, DV offenders are required to be promptly referred to DV-specific programming and, where appropriate, to MCSCS DV Core Rehabilitative Programs and/or other core rehabilitative programs (such as substance abuse). Attendance and progress is monitored and probation and parole officers (PPO) may proceed with enforcement of the supervision order whenever offenders fail or refuse to comply with a condition to attend DV-specific programming or a general counselling condition without a reasonable excuse. The MCSCS also has fee-for-service contract in several communities to provide additional specialized services (such as psychiatric ones), while in other locations the ministry refers to existing community resources to address offender needs.

Supervision is dynamic and addresses risk, needs, and responsivity issues. A PPO will adapt his/her supervision strategies to address escalating risks and may include case conferences, increased victim contact and safety planning, increased collateral contacts including police, as well as other proactive measures.

The MCSCS continues to work with the Ministry of the Attorney General's (MAG) Ontario Victim Services Secretariat and other jurisdiction partners to improve tracking and monitoring processes that strengthen enforcement of court-mandated attendance at Partner Assault Response (PAR) programs. The MCSCS predominantly refers perpetrators of DV to the PAR programs operated by MAG. The MCSCS is represented on MAG's PAR Advisory Committee.

The Exchange of Information Agreement, 2007 (between the PAR programs, probation and parole, the Victim/Witness Assistance Program, and the Crown) requires PAR program providers and the PPOs to share pertinent offender and victim/current partner information throughout the period the offender is under community supervision and in the PAR program.

The MCSCS provides rehabilitative programs addressing DV, substance abuse, anti-criminal thinking, sexual offending and anger management to offenders in provincial institutions and under supervision in the community, based on a thorough assessment of individual risk/needs, problems, and areas identified.

Additionally, PPOs refer offenders under community supervision orders to appropriate and available resources in their community. Enforcement action is taken by all PPOs to address offender non-compliance.

#13-2007 Police services across Ontario should consider implementing procedures that stipulate that when there are grounds to arrest and/or charge a person in relation to a domestic assault, and where there are public safety issues, or a delay in processing the charges, the accused should immediately be placed on the Canadian Police Information Centre (CPIC) as a Special Interest Police (SIP) entry, advising that grounds exist to arrest. (Similar to recommendation #21/2004)

Status Update:

Not addressed in Ministry response.

#17-2007 *It is recommended that all agencies ensure adequate training and supervision in assessing domestic violence within same-sex relationships in cases where children are involved. It is also recommended that Children's Aid Societies follow-up on a referral with all parties involved with the child or children.*

Status Update:

Same sex violence is addressed at the very beginning of the new officer's training. This training acknowledges the central theme of abuse is "power and control." Training identifies that regardless of the type of relationship, age, economic status, education, etc., abuse can occur in any circumstance

#18-2007 *It is recommended that social service providers, including police, physicians, and child protection services, receive proper training regarding the dynamics of domestic violence in same-sex relationships.*

Status Update:

See **#3-2007** above regarding police training.

#20-2007 *It is recommended that there be ongoing training for police on the most effective response to domestic violence cases where there is a history of homicidal and suicidal threats, a recent separation, and where prior history includes domestic violence, serious substance abuse and/or child abuse. (Similar to recommendation #5/2004, #2/2005, #3/2005)*

Status Update:

See **#3-2007** above.

#21-2007 *It is recommended that police services reinforce with their members the requirements of the Domestic Violence Occurrences (LE24) and Firearm Occurrences (LE029) of the Provincial Adequacy Standard Guidelines regarding the seizure of firearms during the course of Domestic Violence Occurrences. This training should be conducted on an annual basis placing emphasis on ensuring officers are appropriately educated on their authorities to conduct weapons seizures with and without a warrant. (Similar to recommendation #15/2002)*

Status Update:

The issue of firearms search and seizure of weapons is covered at almost every level. Search and seizure authorities are addressed at the Basic Constable Training (BCT) level, Advanced Patrol Training (APT) and Domestic Violence Investigator Training. The importance of knowing any known weapon is not available to a potential abuser is critical in this training.

#30-2007 *It is recommended that police officers receive additional/supplemental training, which focuses on the recognition that domestic violence does not always present itself in an obvious way, such as in a domestic violence assault, but may be imbedded in other types of criminal acts. Where domestic violence is at the root of any criminal act, the investigation must be completed within the context and application of the domestic violence policies of the respective services. Victims may be reluctant to disclose violence in their relationship, and this requires a sensitive but thorough intervention. Police must understand that reluctant victims may be at greater risk of continued*

violence and thereby are in greater need of proactive police response. (Similar to recommendations #4/2002, #5/2004, #23/2006, #28/2006 #25/2006)

Status Update:

Not addressed in Ministry response.

See also Ontario Police College response under **#3-2007** blow.

***#31-2007** It is recommended that in every domestic violence case, there be a requirement that risk be assessed. If a high-risk case is identified, it needs to be specifically red flagged for further follow up. (Similar to recommendations #10/2002, #17/2004, #27/2004)*

Status Update:

Selected relevant paragraphs from **#3-2007** above:

In 2000, the ministry developed the Domestic Violence Supplementary Report (DVSP) form as a risk indicator checklist to support the investigation of domestic violence occurrences. In 2009, a working group was established to revise the DVSR. The proposed changes aimed to improve the current risk factor portion of the DVSR in order to increase knowledge of risk and suggest appropriate risk management actions. The revised DVSP was renamed Domestic Violence Risk Management Report (DVRM). A resource guide has also been developed providing detailed information on the DVRM report and how it should be used as a tool to assist officers in managing domestic violence investigations. In February, 2013 the ministry distributed the DVRM and its guide to all police services across Ontario.

In October 2012, MCSCS implemented an enhanced Domestic Violence (DV) policy which provides emphasis on identifying and addressing DV-specific criminogenic risks at every stage of supervision. Other specialized policies have also been developed to ensure the appropriate supervision/intervention of offenders who are at imminent risk of reoffending, sex offenders, and offenders with mental health issues. In addition, these policies provide an emphasis on the safety of victims and their families; increased linkages with victims, police and other stakeholders; clear enforcement expectations; and emphasis on identifying and addressing DV-specific risks throughout supervision.

As per the enhanced DV policy, DV offenders are required to be promptly referred to DV-specific programming and, where appropriate, to MCSCS DV Core Rehabilitative Programs and/or other core rehabilitative programs (such as substance abuse). Attendance and progress is monitored and probation and parole officers (PPO) may proceed with enforcement of the supervision order whenever offenders fail or refuse to comply with a condition to attend DV-specific programming or a general counselling condition without a reasonable excuse. The MCSCS also has fee-for-service contract in several communities to provide additional specialized services (such as psychiatric ones), while in other locations the ministry refers to existing community resources to address offender needs.

Supervision is dynamic and addresses risk, needs, and responsivity issues. A PPO will adapt his/her supervision strategies to address escalating risks and may include case conferences, increased victim contact and safety planning, increased collateral contacts including police, as well as other proactive measures.

See also Ontario Police College response under **#3-2007** blow.

***#32-2007** It is recommended that once a case has been identified as a high risk case then there must be a systems response so that the case can be actively managed. This would require that the justice partners involved with the case meet to discuss management options and strategies. Such dedicated teams already exist in parts of Ontario and should be the model for other communities to follow. (Similar to recommendations #27/2004, #14/2002)*

Status Update:

Selected relevant paragraphs from **#3-2007** above:

In October 2012, MCSCS implemented an enhanced Domestic Violence (DV) policy which provides emphasis on identifying and addressing DV-specific criminogenic risks at every stage of supervision. Other specialized policies have also been developed to ensure the appropriate supervision/intervention of offenders who are at imminent risk of reoffending, sex offenders, and offenders with mental health issues. In addition, these policies provide an emphasis on the safety of victims and their families; increased linkages with victims, police and other stakeholders; clear enforcement expectations; and emphasis on identifying and addressing DV-specific risks throughout supervision.

As per the enhanced DV policy, DV offenders are required to be promptly referred to DV-specific programming and, where appropriate, to MCSCS DV Core Rehabilitative Programs and/or other core rehabilitative programs (such as substance abuse). Attendance and progress is monitored and probation and parole officers (PPO) may proceed with enforcement of the supervision order whenever offenders fail or refuse to comply with a condition to attend DV-specific programming or a general counselling condition without a reasonable excuse. The MCSCS also has fee-for-service contract in several communities to provide additional specialized services (such as psychiatric ones), while in other locations the ministry refers to existing community resources to address offender needs.

Supervision is dynamic and addresses risk, needs, and responsivity issues. A PPO will adapt his/her supervision strategies to address escalating risks and may include case conferences, increased victim contact and safety planning, increased collateral contacts including police, as well as other proactive measures.

The MCSCS continues to work with the Ministry of the Attorney General's (MAG) Ontario Victim Services Secretariat and other jurisdiction partners to improve tracking and monitoring processes that strengthen enforcement of court-mandated attendance at Partner Assault Response (PAR) programs. The MCSCS predominantly refers perpetrators of DV to the PAR programs operated by MAG. The MCSCS is represented on MAG's PAR Advisory Committee.

The Exchange of Information Agreement, 2007 (between the PAR programs, probation and parole, the Victim/Witness Assistance Program, and the Crown) requires PAR program providers and the PPOs to share pertinent offender and victim/current partner information throughout the period the offender is under community supervision and in the PAR program.

The MCSCS provides rehabilitative programs addressing DV, substance abuse, anti-criminal thinking, sexual offending and anger management to offenders in provincial institutions and under supervision in the community, based on a thorough assessment of individual risk/needs, problems, and areas identifies.

Additionally, PPOs refer offenders under community supervision orders to appropriate and available resources in their community. Enforcement action is taken by all PPOs to address offender non-compliance.

#33-2007 *It is recommended that all potential sureties be required to watch an educational videotape on their role as it relates to domestic violence cases (e.g. Huron County Crown video). As well, that each police department assign a police officer to routinely call all sureties in high risk cases to check on bail compliance and the stability of the accused. (Similar to recommendations #19/2004, #20/2004)*

Status Update:

Not addressed in Ministry response. See MAG below at **#33-2007**.

#1-2008/2 *It is recommended that a protocol be established between police and Crown Counsel to ensure that persons proposed as a surety: 1) be properly investigated as to their suitability to act as a surety; 2) be fully informed about their responsibilities as a surety, both in writing and on the court*

record; and 3) be warned, in writing and on the court record, as to their personal liability and as a party to the criminal offence in the event they breach their duty.

Status Update:

Not addressed in Ministry response.

#1-2008/3 *It is recommended that police put processes into practice to identify, monitor, and manage high-risk cases, and to vigorously enforce bail conditions arising from a violent offence or threat of violence.*

Status Update:

See **#3-2007** above.

#2-2008/3 *Adequate levels of support and resources should be made available to services that can respond to individuals with multiple problems so that interventions can be organized to meet the particular needs of the individual, as opposed to being organized to meet the needs of a particular agency.*

Status Update:

See **#3-2007** above.

#2-2008/4 *Probation officers should utilize a common risk assessment tool as it relates to woman abuse and lethality. Although probation officers routinely use the LSI tool, often the dynamics and issues related to abusive relationships are not identified or dealt with, in any involvement. The explanation for this is that the focus of the intervention is on 'criminal behaviour'.*

Status Update:

See **#3-2007** above.

#2-2008/5 *Probation officers should receive training on the inter-relationship between substance abuse issues and intimate partner violence so that they can better respond and intervene with individuals who have a multiplicity of issues. This training would assist probation officers to effectively intervene with individuals who are in abusive and high risk relationships.*

Status Update:

Not addressed in Ministry response.

#2-2008/7 *The province should identify a process to ensure enforcement of attendance at court-mandated programs for batterers. Enforcement should include effective methods of tracking and monitoring offenders, mechanisms for systematically identifying levels of risk and risk management that is inter-disciplinary and inter-sectoral in nature.*

Status Update:

See **#3-2007** above.

#6-2008/4 *The Ministry of Community Safety and Correctional Services should expand police standards in domestic violence cases to include risk assessment for all calls for assistance with a history of domestic violence, even when no assaults have taken place.*

Status Update:

Not addressed in Ministry response.

Comments:

The Domestic Violence Risk Management Report (DVRM) Officer Guide instructs officers to complete the DVRM **when charges are laid** in a domestic violence occurrence.

There may be a very high level of risk present in a situation in which the police have responded and found no grounds to lay charges. Such situations may provide critical opportunities for intervention, particularly in cases where there has been no other contact with these individuals. Risk assessments should be completed for all calls for assistance with a history of domestic violence.

***#14-2008/1** It is recommended that the Domestic Violence Supplementary Report (DVSR) be enhanced to require a verbatim narrative response to risk assessment questions where the answer is “yes” or “unknown”. Further, that this enhanced DVSR be mandated, prohibiting any deviation or change in the content, for use by all police services, including First Nation police services.*

Status Update:

Not addressed in Ministry response.

*Note The DVSR is now the DVRM.

***#14-2008/3** An enhanced protocol should be established between police services and Crown counsel to ensure that persons proposed as surety:*

- are properly investigated as to their suitability to act as surety including an assessment of their lawful access to firearms;*
- can guarantee all possessed and accessible firearms are secured from the accused for the duration of the surety contract;*
- are fully informed about the totality of the allegations against the accused, including information about risk factors and potential lethality;*
- are fully informed about their responsibilities as surety, both in writing and on the court record, following required viewing of an educational videotape on their role, specific to domestic violence cases (e.g. Huron County Crown video);*
- are warned in writing and on the court record as to their potential liability under estreatment and as party to a criminal offence in the event they breach their duty;*
- can accept that each police department will assign a police officer to routinely call all sureties in high risk cases to verify bail compliance and the stability of the accused.*

Status Update:

Not addressed in Ministry response. See MAG response **#1-2008/2** below.

***#03-2009/1** It is recommended that Police Services and Police Associations continue to be committed to supporting the mental health and well-being of their members and to collectively enhance their support and promotion of ready access to employee assistance networks.*

Status Update:

Not addressed in Ministry response.

#03-2009/2 Awareness of the unique demands facing female police officers in a male dominated police profession must be recognized and support mechanisms developed.

Status Update:

Not addressed in Ministry response.

#03-2009/3 Progressive initiatives focused on vicarious trauma and stress management for police personnel should be developed and proactively delivered as a means of raising shared awareness. Identification, intervention, and prevention are every member's responsibility.

Status Update:

Not addressed in Ministry response.

#03-2009/4 Police services should enhance supports for the mental health and wellness of their members by building liaisons with community services and introducing innovative models like the Psychological Services Section of the Calgary Police Service. Psychologists who are experts in the complexities of emergency services, vicarious trauma, and the sub-culture of policing are essential to garnering trust and removing barriers to access. Consistency of access to a Police Psychologist or team of psychologists is paramount to achieving early intervention and prevention.

Status Update:

Not addressed in Ministry response.

#03 -2009/5 The suicide and suicide-homicide literature reviews that formed the basis of the "Report to the Police Service and Community on the Deaths of the victim and perpetrator" should be made readily available through the Ministry of Community Safety and Correctional Services – Policing Services Division, the Ontario Association of Chiefs of Police and the Canadian Association of Chiefs of Police. The importance of ensuring ongoing education for all police service personnel and their families on domestic violence, suicide, mental health issues and balanced health and wellness cannot be overstated. To that end, support for provincial and national research and analyses emphasizing these aspects unique to the Canadian police culture, including strengths and stressors, is recommended.

Status Update:

Not addressed in Ministry response.

Comments: ARC is troubled by the Ministry's failure to respond to any of the recommendations dealing with the supports necessary to maintain the well-being of police officers. This area should be promptly addressed.

#9-2009/2 It is recommended that the Ministry of Community Safety and Correctional Services provide public education on the risks involved with online dating sites and other social networking applications. The information should focus on what is considered to be criminal and/or harassing conduct and provide guidance on what safety measures should be undertaken and/or reported to police. Students in Ontario schools receive this type of information as part of the current awareness of cyber-bullying and inappropriate use of the Internet, but many adults may not be aware of Internet safety precautions.

Status Update:

Not specifically addressed in Ministry response.

The Ministry did say this: Most police services have community services officers assigned to host programs and initiatives that increase public awareness on a variety of safety issues.

Ontario is also leading the way in the battle against human trafficking and child pornography. Since 2003, the Ministry of Community Safety and Correctional Services has provided funding to 11 projects for a total of approximately \$1.4 million under the Proceeds of Crime – Front-Line Policing Grant, to help police services combat human trafficking in Ontario. Since 2006, we have allocated over \$23 million in the Provincial Strategy to Protect Children from Sexual Abuse and Exploitation on the Internet – making it possible for online undercover investigations, supports for victims and their families, and the coordination and training of dedicated crown prosecutors to be put in place.

#7-2010/1 *It is recommended that Police Services compel Domestic Violence Coordinators to facilitate the liaison and information sharing between case managers in Domestic Violence occurrences that cross divisional and jurisdictional boundaries within their service.*

Status Update:

Not addressed in Ministry response.

Comments: All police services have a Domestic Violence Coordinator to provide a consistent approach for responding to domestic violence incidents. It is not clear to us that the implementation of this role has resulted in universally consistent approaches to domestic violence incidents across police services or even within them.

#7-2010/2 *Incidents reported to, or investigated by police as domestic violence, regardless of whether a verbal incident only or whether charges are laid, should result in the completion of the Domestic Violence Supplementary Report (DVSR).*

Status Update:

Not addressed in Ministry response.

Comments:

See our comments at **#6-2008/4** above.

*Note: The DVSR is now the DVRM.

#7-2010/3 *The DVSR should be used not only to indicate the presence of risk-enhancing factors towards violence, but also to identify those areas where case management could mitigate the risk for future violence. When risk factors such as substance abuse, mental health concerns, employment issues etc. are identified, efforts should be made to provide appropriate references or involve appropriate services to alleviate those risk factors.*

Status Update:

Revised DVSR was renamed Domestic Violence Risk Management Report (DVRM) and distributed to all police services across Ontario in February, 2013.

See **#3-2007** above.

#16-2010/1 *Police risk assessments should be mandatory for every domestic violence call, regardless of whether there is a prior history of domestic violence, and should not be dependent upon a charge being laid or not.*

Status Update:

Not addressed in Ministry response.

Comments:

See our comments at **#6-2008/4** above.

#16-2010/2 *Police training should include instruction on how to deal with resistant or reluctant victims of domestic violence.*

Status Update:

Not addressed in Ministry response however the DVRM Report Officer Guide says “Every effort should be made to improve relationships and build trust with the victim” and outlines many of challenges survivors of violence may face.

Comments: Police should actively engage with their local women’s shelters for training and ongoing support with regards to understanding the dynamics of abuse and why a woman may be reluctant to cooperate with the Police.

#16-2010/3 *It is recommended that the Working Group co-chaired by the Ministry of Community Safety and Correctional Services and the OPP, expedite the process to distribute a modified Domestic Violence Supplementary Report (DVSR) to police in Ontario.*

Status Update:

Revised DVSR was renamed Domestic Violence Risk Management Report (DVRM) and distributed to all police services across Ontario in February, 2013.

#15-2011/1 *Probation and Parole Officers should be aware of the Partner Abuse Protocol when dealing with cases of partner abuse, and ensure attention to victim safety, recognizing that engagement with the victim is essential for victim safety.*

Status Update:

See **#3-2007** above.

#15-2011/2 *Coordinated safety plans should be developed with the victim and with partner agencies in the community. In cases where the victim is not linked to any community services, the probation officer should do a safety assessment of the victim’s potential risk for violence and refer them to the appropriate community services, paying particular attention to any special needs of the victim.*

Status Update:

Not addressed in either Ministry response.

MCSCS said this:

The Exchange of Information Agreement, 2007 (between the PAR programs, probation and parole, the Victim/Witness Assistance Program, and the Crown) requires PAR program providers and the PPOs to share pertinent offender and victim/current partner information throughout the period the offender is under community supervision and in the PAR program.

MAG said this:

In addition, through either the Bail Safety Program or the Early Victim Contact Program attempts are made to contact victims prior to bail proceedings to gather information to help identify and address safety issues.

Information revealed indicating elevated risk of future harm is put before the court so that bail decisions can address all identified safety issues.

Comments: Notably missing in both responses is the involvement of community agencies that are not criminal justice system-based.

#15-2011/3 Ongoing contact with the victim should occur in order to assess safety concerns and the abuser's compliance with the probation conditions. This should occur on a regular basis, throughout the probation period. The probation officer should not rely solely on the abuser's self report of compliance. Annual audits by area managers, as per established performance measures, should be conducted to "ensure that PPOs are supervising the case in accordance with the Partner Abuse Protocol."

Status Update:

Selected relevant paragraphs from **#3-2007** above:

In October 2012, MCSCS implemented an enhanced Domestic Violence (DV) policy which provides emphasis on identifying and addressing DV-specific criminogenic risks at every stage of supervision. Other specialized policies have also been developed to ensure the appropriate supervision/intervention of offenders who are at imminent risk of reoffending, sex offenders, and offenders with mental health issues. In addition, these policies provide an emphasis on the safety of victims and their families; increased linkages with victims, police and other stakeholders; clear enforcement expectations; and emphasis on identifying and addressing DV-specific risks throughout supervision.

Supervision is dynamic and addresses risk, needs, and responsivity issues. A PPO will adapt his/her supervision strategies to address escalating risks and may include case conferences, increased victim contact and safety planning, increased collateral contacts including police, as well as other proactive measures.

#15-2011/4 Probation and Parole Officers should also notify local law enforcement of any concerns in relation to offender compliance so that formal monitoring programs, (e.g. Crime Abatement Strategy, Bail Enforcement Program, etc.) or informal monitoring of offender compliance, can be conducted by law enforcement. This is particularly important in relation to any orders prohibiting or restricting contact between the offender and the victim.

Status Update:

See also response at **#15-2011/3** above.

Additionally, PPOs refer offenders under community supervision orders to appropriate and available resources in their community. Enforcement action is taken by all PPOs to address offender non-compliance.

#16-2011/1 It is recommended that social services/probation examine the potential requirement for an intervention specifically designed for women perpetrators of violence and domestic violence.

Status Update:

The Partner Assault Response (PAR) Program is one option available for women offenders. Women offenders receive services through women-only PAR groups or one-on-one counselling with PAR service providers. There is flexibility within the PAR Program curriculum to allow service providers to tailor the group to address the specific needs of women offenders.

The ministry takes all cases of domestic violence seriously. There are a variety of different programs that women can be referred to as part of a court order, including substance abuse programs, counselling programs and the Partner Assault Response Program. In many cases, the court leaves it up to the probation officer to determine the appropriate programs that the offender should be referred to as part of probation.

#16-2011/2 *The potential for lethal violence by women perpetrators with substantial violent histories, serious substance abuse problems and emotional instability should be taken seriously and when a high risk case is identified, steps should be taken to refer these women to appropriate treatment and more intensive supervision.*

Status Update:

Not specifically addressed in either Ministry response.

#24-2011/1 *It is recommended that the police service involved with the 911 calls on October 29, 2007 consider an internal review of this case. The police service should review the response of the attending officers to ensure that all policies, procedures and protocols in relation to domestic violence occurrences were followed, particularly as they relate to ensuring that the same policies and procedures are applied to male victims of domestic violence.*

Status Update:

Not addressed in Ministry response.

#24-2011/4 *All police services should receive annual training/education on programs and services offered by Victim Services in order to assist officers in responding more effectively to the criminal and non-criminal issues victims face following an incident of domestic violence. Police should be reminded to immediately refer all victims of domestic violence (male and female) to Victim Services to ensure timely intervention and assistance.*

Status Update:

Not addressed in either Ministry response.

#27-2011/1 *It is recommended that police officers receive additional/supplemental education and training about victim vulnerability in cases of domestic violence, particularly as it relates to victims of domestic violence committed by police officers.*

Status Update:

Not addressed in either Ministry response.

#27-2011/2 *It is recommended that an anonymous helpline be established for all police personnel and their families, similar to what exists for physicians in Ontario, where they would have access to immediate assistance and crisis intervention as well as referral to specialized counseling services.*

Status Update:

Not addressed in either Ministry response.

#28-2011/1 *The MCSCS should consider reviewing its existing training material related to the management of high risk domestic violence cases and Intensive Supervision Offenders (ISOs). Measures should be taken to ensure updated, ongoing training to all probation and parole officers involved with ISOs, emphasizing:*

- *the importance of following the domestic violence protocol;*

- *a focus on the identification of pertinent risk factors related to each case and appropriate evidenced based measures to be taken to mitigate risk;*
- *case reviews conducted by the DVDRC where the offenders were under supervision of MCSCS.*
- *The review should include an audit of participation rates in this specialized training.*

Status Update:

Not addressed in either Ministry response.

#28-2011/2 *It is recognized that the MCSCS has undertaken recent policy reforms to address issues related to high risk (intensive) case supervision for domestic violence perpetrators. It is advised that an internal review should be conducted of all domestic violence homicide cases supervised since the implementation of these policies, where the offender re-offended while under supervision of the MCSCS. Lessons learned from these reviews could be incorporated into staff training and further policy reform.*

Status Update:

Not addressed in either Ministry response.

#28-2011/3 *The Intensive Supervision Unit (ISU) should review its referral criteria and consider expanding its mandate to include offenders with a pattern of recurrent assaults against women and/or a history of choking/strangling their victims. The ISU supervision strategy should be audited to ensure that its services include not only more frequent contact with the offender, but also ancillary wrap-around services (e.g., ongoing communication with the potential victim, referral to, and communication with police and treatment providers).*

Status Update:

Not addressed in either Ministry response.

#28-2011/4 *Communication between treatment providers and between probation services and the victim or potential victims (e.g. new partner), should be a regular and essential component of intensive case supervision. Communication strategies for all treatment providers should be set in policy.*

Status Update:

The Exchange of Information Agreement, 2007 (between the PAR programs, probation and parole, the Victim/Witness Assistance Program, and the Crown) requires PAR program providers and the PPOs to share pertinent offender and victim/current partner information throughout the period the offender is under community supervision and in the PAR program.

#28-2011/5 *Given the high number of risk factors identified in this case, it was deemed by the DVDRC to be very high risk. It is recommended that for similar cases of very high risk, MCSCS should put in place a mandatory referral to local police services for assessment of the appropriateness of placing the offender under High Risk police supervision. This would allow for enhanced safety planning strategies for the potential victim, as well as more aggressive monitoring and potential interventions with the offender when probation and/or parole violations occur.*

Status Update:

Not addressed in either Ministry response.

Ministry of Education

#11-2007 *It is recommended that the Ministry of Education who provides funding for Adult Education, alternative education programs, and regular school programs that may involve young parents, ensure that education and training is provided to individuals who deal with young parents in such programs on how to respond to suspected or known cases of intimate partner violence among their clients.*

Status Update:

The Ministry has not provided targeted funding for education and training for staff in school programs with young parents but the Ministry of Education has put in place a strong legislative and policy framework, has provided significant funding to support training, resources and supports, and strengthened the curriculum related to violence/bullying prevention to support systemic change that fosters a safe, inclusive and accepting school climate for all students.

There are also two new General Family Studies courses on *Dynamics of Human Relationships* and *Families in Canada* that address violence prevention. As well, there are courses in Raising and Caring for Children that address domestic violence and bullying prevention, such as *Working with Infants and Young Children*, and *Working with School-Age Children and Adolescents*. The elementary *Health and Physical Education (2010)* draft curriculum also includes expectations related to domestic violence and bullying prevention.

Comments:

The Ministry does not train school-based individuals who deal with young parents to respond to suspected or known cases of intimate partner violence as recommended. Targeted funding to provide this training should be allocated promptly.

Minister of Justice and Attorney General of Canada

#22-2007 *It is recommended that the Federal Government revisit the Firearms Act to study the feasibility of a legislative amendment to require the registration of crossbows as restricted weapons.*

Status Update:

No response provided.

#11-2008/1 *The term “choking” should be changed to the term “strangulation” in the Criminal Code as that term more accurately reflects a serious, intentional act of harm to a victim. “Choking” is a medical term describing aspiration of food bolus or object and is not appropriate in a domestic violence context, whereas strangulation refers to the application of pressure to the neck.*

In cases of strangulation or head injury, police personnel should consider taking a victim to the hospital to receive immediate medical attention, especially to medical personal who have specialized training in recognizing the repercussions of such serious situations (i.e. DV/SAC nursing teams are currently housed in many emergency departments across the province and are often under-utilized).

Status Update:

Recommendation #11-2008/1 concerns the use of the term “choking” in the *Criminal Code*. Section 246(a) is the only *Criminal Code* offence that specifically addresses the issue of strangulation. This section makes it an indictable offence, punishable by a maximum penalty of life imprisonment to attempt “by any means, to choke, suffocate or strangle another person, or by any means calculated to choke, suffocate or strangle to attempt to render another person insensible, unconscious or incapable of resistance,” with the intent to enable of assist himself or another person to commit an indictable offence.

Other offences also apply to cases involving strangulation, depending on the facts of the case, such as murder, attempted murder, aggravated assault, assault causing bodily harm, assault and sexual assault. In view of this, I believe that the *Criminal Code* already provides the needed prohibitions against acts that involve strangulation.

#9- 2009/1 *It is recommended to the federal Minister of Public Safety that applications for firearms Possession Acquisition Licence (PAL) should include a medical waiver signed by the applicant. This would allow investigators access to information pertaining to the mental health of the applicant. There should also be higher standards and more restrictions for individuals applying for a firearms PAL when they have had previous licenses revoked or removed.*

Status Update:

No response provided.

#21-2011/1 *The Minister of Justice for Canada should implement legislation that will provide for minimum sentences for domestic violence offences. It is suggested that for a second conviction, the minimum sentence should be at least 6 months in jail. For a third or subsequent offence, the minimum sentence should be at least 12 months in jail.*

Status Update:

The Committee also made recommendations regarding sentencing for domestic violence offences. While there is no specific offence of domestic violence in the *Criminal Code*, there is a wide range of provisions that cover the use of physical and sexual violence within relationships. In addition, under the *Criminal Code*, it is an aggravating factor for sentencing purposes when the offender abused his or her spouse or child.

...conditional sentences are no longer available for indictable offences that are punishable by a maximum term of imprisonment of 10 years or more and involve the use of violence against another person; endangering the life or safety of another person; inflicting severe psychological damage on another person; or for the specific offences of sexual assault, sexual assault with a weapon, threats to a third party or causing bodily harm, or aggravated sexual assault.

#21-2011/2 *It is recommended that legislation be amended so that assault in a domestic context, be listed as an eligible offence for application of long-term offender status.*

Status Update:

In 2008, the Tackling Violent Crime Act targeted the most violent domestic abusers through reforms to the Dangerous and Long-term Offender provisions that made it easier to obtain such designations against these types of offenders. The Act also improved the effectiveness of the peace bond provisions, allowing a court to impose strict conditions to ensure public safety.

In addition to the criminal law, the Government has a long-standing commitment through the federal Family Violence Initiative (FVI) to help keep Canadians safe by addressing violence in relationships of intimacy, kinship, dependency, or trust. This initiative involves 15 federal departments and has the long-term goal of reducing the occurrence of family violence in Canada. The FVI receives permanent annual funding to promote public awareness of the risk factors of family violence and the need for public involvement; to strengthen the criminal justice, housing and health systems; and to support data collection, research, and evaluation efforts to identify effective interventions. For further information on this initiative and the roles of participating departments, please visit www.phac-aspc.gc.ca/ncfv-cnivf/initiative-eng.php

Ministry of Health and Long Term Care

#26-2007 *It is recommended that provincial Mental Health and Addictions Strategies include screening for domestic violence as a best practice. Mental health and addictions professionals who are working with women need to be provided with assessment tools that will allow them to assess and determine the level of risk. (Similar to recommendations #2/2006, #8/2005)*

Status Update:

The Centre for Research & Education on Violence Against Women and Children has been funded to hold provincial forums for justice and community service providers, including professionals and service providers in the health sector, to learn more about promising practices for high-risk teams, share challenges and identify training gaps. This work has continued over the past three years with the development of online threat assessment/risk assessment training for community service providers. This training is helping front-line workers recognize the risk of serious harm and lethal violence as well as the need to collaborate and communicate with service providers in other sectors.

(See response to **#4-2007** under OWD above for an almost identical answer. See also under OWD at **#29-2007, #2-2008/1, #15-2008/2, #14-2010/1** and under MHLTC at **#2-2008/2, #2-2008/3, #15-2008/2, #15-2008/3.**)

#2-2008/1 *Funding and resources should be provided to create joint training opportunities for those working in mental health agencies and those working in violence against women services to ensure a more integrated and holistic response that can more effectively respond to the complexities of individual situations.*

Status Update:

Women's College Hospital (WCH) has received funding to develop and implement training for front-line mental health, addiction and shelter workers on how better to support women with complex needs and promote collaboration among service sectors so that the system responds in a more coordinated manner. WCH has also been funded to develop new service delivery standards for hospital-based Sexual Assault and Domestic Violence Treatment Centres. Service providers will be educated on the implementation of these standards and the expansion of models of care to address emerging issues such as drug-facilitated sexual assault and service provision for women with disabilities.

(See WCH response to **#29-2007** under OWD above for a similar answer. See also at MHLTC at **#2-2008/3.**)

Comments: Adequate resources must be allocated to ensure front-line staff are able to access training opportunities; both to pay for the training and to replace front-line staff so they can attend.

#2-2008/2 *A common risk assessment tool should be developed and mental health practitioners should be trained to effectively and systemically utilize the tool to identify potential risks.*

Status Update:

See **#26-2007** above.

#2-2008/3 *Adequate levels of support and resources should be made available to services that can respond to individuals with multiple problems so that interventions can be organized to meet the particular needs of the individual, as opposed to being organized to meet the needs of a particular agency.*

Status Update:

See **#2-2008/1** above.

The Ontario Association of Interval and Transition Houses has received funding to develop and implement training to enable shelter workers to better advocate and support women and their children who have experienced violence. This initiative addresses the needs of women whose experiences of violence are further complicated by various social and systemic conditions. Training topics include: developing strategies for responding to complex situations, supporting diverse women using substances and working with women with various mental health labels/diagnosis. (See the identical response to **#4-2007** under OWD above. Also found at **#29-2007**, **#14-2010/1** and under MHLTC at **#15-2008/3**.)

#2-2008/6 *When an individual attempts suicide, there should be appropriate follow-up, support and referral to agencies that can explore the issues that resulted in the attempt. Criminal justice responses and interventions are generally not as effective as interventions from social and community based organizations and services.*

Status Update:

No answer provided in Ministry letter.

#6-2008/3 *Training for all mental health professionals should include assessment and intervention strategies dealing with male depression and the link between depression, suicidal ideation and domestic homicide.*

Status Update:

Not specifically addressed in Ministry answer but see **#26-2007** above.

#15-2008/2 *Appropriate risk assessment tools need to be used by mental health professionals when dealing with victims and perpetrators of domestic violence.*

Status Update:

See **#26-2007** above.

#15-2008/3 *Mental health professionals should have training in the dynamics of domestic violence, including high risk case management and intervention strategies, in particular, safety planning.*

Status Update:

See **#26-2007**, **#2-2008/1** and **#2-2008/3** above.

#7-2010/6 *It is recommended that health care facilities consider formulating (and/or reviewing and revising as necessary) protocols, policies and procedures to provide specific practice guidelines, in order to ensure an immediate and proactive response to information reported to them of a "No Contact Order" between a patient and visitor.*

Status Update:

No answer provided in Ministry letter.

#26-2011/1 *Health care providers are reminded to inquire about thoughts of homicide, in addition to suicide, when interacting with elderly patients suffering from depression.*

Status Update:

No answer provided in Ministry letter.

#26-2011/2 *Health care providers are encouraged to interview couples separately, particularly when mental health issues may be present.*

Status Update:

No answer provided in Ministry letter.

Comment:

Despite the lack of ministry updates, a number of the recommendations are addressed in various training sessions. Safety planning is an area of capacity building that could be implemented and done in collaboration with anti- violence agencies.

Ministry of Labour

#1-2008/5 *It is recommended that all workplaces design and implement a policy to address domestic violence as it relates to the workplace. The policy should include:*

- *educating employees about the issue of domestic violence to help them identify an abusive relationship in which they may be involved and about how to reach out to co-workers;*
- *training employers and managers to identify the signs of abuse and respond appropriately to employees who are victims and perpetrators of domestic violence;*
- *providing a resource list of appropriate referral agencies;*
- *providing an organized response to direct threats of domestic violence that occur in the workplace;*
- *developing and implementing a safety plan for the victim to ensure that a number of security measures are in place for their protection.*

Status Update:

The Ministry amended the *Occupational Health and Safety Act (OHSA)*, effective June 2010, to enhance protections against workplace violence and to address workplace harassment. The OHSA defines workplace violence and workplace harassment broadly enough to capture violence and harassment from any person in the workplace (including domestic or intimate partners, strangers, customers, clients, patients and co-workers). All Ontario employers are required to have policies and programs with respect to workplace violence and workplace harassment that:

- include measures and procedures for workers to report incidents of workplace violence or harassment, or threats of violence (including domestic violence) that may occur in the workplace;
- set out how the employer will investigate and deal with such incidents, threats and complaints;
- include measures and procedures for summoning immediate assistance in case of workplace violence.

Employers must also provide information and instruction to workers on the contents of these policies and programs.

Employers who are aware, or who ought to reasonably be aware, that domestic violence may occur in the workplace must take every precaution reasonable in the circumstances to protect a worker who is at risk of physical injury. A reasonable precaution may be the development of a personal safety plan for an individual worker.

The Ministry of Labour's website has information online (at [Ontario.ca/workplace violence](http://Ontario.ca/workplace%20violence)) regarding workplace violence and workplace harassment. It includes resources of appropriate referral agencies for workers who may be victims of domestic violence. In addition, workplace specific information, advice and resources may be available through health and safety associations, such as Workplace Safety North www.workplacesafetynorth.ca.

#13 -2010/1 *All employers in Ontario should be required to develop policies on measures they can take in their workplace(s) to prevent and/or provide effective responses to workplace domestic violence. Employers should also be required to provide training to all employees on recognizing the warning signs of domestic violence, as well as initiating the appropriate responses when they do recognize warning signs or witness incidents. Managers and supervisors should receive additional training in providing appropriate assistance to victims or co-workers who report concerns.*

Status Update:

See #1-2008/5 above.

#13-2010/2 *The Ministry of Labour and the Ontario Women's Directorate is encouraged to work with domestic violence experts, Health and Safety Ontario and the Ontario Federation of Labour to establish a non-profit initiative to engage employers in the work of preventing and responding to domestic violence. The new non-profit initiative should provide workplace specific information, resources and advice for employers.*

Status Update:

Not addressed in Ministry response.

Ontario Association of Chiefs of Police

#3-2007 *It is recommended that there be ongoing training for police on the most effective response to domestic violence cases especially where there is a history of homicidal and suicide threats, separations, obsession with the victim s, prior incidents of domestic violence and/or child abuse. (Similar to recommendation #4/2002 & #16/2004)*

The development of a high-risk case management protocol specific to these complicated domestic violence cases needs to be accompanied by additional training focused on addressing the dual goals of victim safety and offender risk reduction.

Status Update:

No response.

#6-2007 *Recognizing the critical role that police play in responding to domestic violence calls, particularly in rural and remote communities where frequently they are the only resource available to families in trouble, police officers require ongoing training in the dynamics of domestic violence especially when faced with reluctant and ambivalent victims and perpetrators who have a history of past domestic violence, suicidal behaviour and addictions. (Similar to recommendations #7/2002, #5/2002, #4/2002, #8/2004 & #28/2006)*

Status Update:

No response.

#13-2007 *Police services across Ontario should consider implementing procedures that stipulate that when there are grounds to arrest and /or charge a person in relation to a domestic assault, and where there are public safety issues, or a delay in processing the charges, the accused should immediately be placed on the Canadian Police Information Centre (CPIC) as a Special Interest Police (SIP) entry, advising that grounds exist to arrest. (Similar to recommendation #21/2004)*

Status Update:

No response.

#17-2007 *It is recommended that all agencies ensure adequate training and supervision in assessing domestic violence within same-sex relationships in cases where children are involved. It is also recommended that Children's Aid Societies follow-up on a referral with all parties involved with the child or children.*

Status Update:

No response.

#18-2007 *It is recommended that social service providers, including police, physicians, and child protection services receive proper training regarding the dynamics of domestic violence in same-sex relationships.*

Status Update:

No response.

#20-2007 It is recommended that there be ongoing training for police on the most effective response to domestic violence cases where there is a history of homicidal and suicidal threats, a recent separation, and where prior history includes domestic violence, serious substance abuse and/or child abuse. (Similar to recommendation #5/2004, #2/2005, #3/2005)

Status Update:

No response.

#21-2007 It is recommended that police services reinforce with their members the requirements of the Domestic Violence Occurrences (LE24) and Firearm Occurrences (LE029) of the Provincial Adequacy Standard Guidelines regarding the seizure of firearms during the course of Domestic Violence Occurrences. This training should be conducted on an annual basis placing emphasis on ensuring officers are appropriately educated on their authorities to conduct weapons seizures with and without a warrant. (Similar to recommendation #15/2002)

Status Update:

No response.

#30-2007 It is recommended that police officers receive additional/supplemental training, which focuses on the recognition that domestic violence does not always present itself in an obvious way, such as in a domestic violence assault, but may be imbedded in other types of criminal acts. Where domestic violence is at the root of any criminal act, the investigation must be completed within the context and application of the domestic violence policies of the respective services. Victims may be reluctant to disclose violence in their relationship, and this requires a sensitive but thorough intervention. Police must understand that reluctant victims may be at greater risk of continued violence and thereby are in greater need of proactive police response. (Similar to recommendations #4/2002, #5/2004, #23/2006, #28/2006 #25/2006)

Status Update:

No response.

#14-2008/1 It is recommended that the Domestic Violence Supplementary Report (DVSR) be enhanced to require a verbatim narrative response to risk assessment questions where the answer is "yes" or "unknown". Further, that this enhanced DVSR be mandated, prohibiting any deviation or change in the content, for use by all police services, including First Nation police services.

Status Update:

No response.

#03-2009/1 It is recommended that Police Services and Police Associations continue to be committed to supporting the mental health and well being of their members and to collectively enhance their support and promotion of ready access to employee assistance networks.

Status Update:

No response.

#03- 2009/2 Awareness of the unique demands facing female police officers in a male dominated police profession must be recognized and support mechanisms developed.

Status Update:

No response.

#03-2009/3 *Progressive initiatives focused on vicarious trauma and stress management for police personnel should be developed and proactively delivered as a means of raising shared awareness. Identification, intervention, and prevention are every member's responsibility.*

Status Update:

No response.

#03-2009/4 *Police services should enhance supports for the mental health and wellness of their members by building liaisons with community services and introducing innovative models like the Psychological Services Section of the Calgary Police Service. Psychologists who are experts in the complexities of emergency services, vicarious trauma, and the sub-culture of policing are essential to garnering trust and removing barriers to access. Consistency of access to a Police Psychologist or team of psychologists is paramount to achieving early intervention and prevention.*

Status Update:

No response.

#03 -2009/5 *The suicide and suicide-homicide literature reviews that formed the basis of the, "Report to the Police Service and Community on the Deaths of the victim and the perpetrator", should be made readily available through the Ministry of Community Safety and Correctional Services – Policing Services Division, the Ontario Association of Chiefs of Police and the Canadian Association of Chiefs of Police. The importance of ensuring ongoing education for all police service personnel and their families on domestic violence, suicide, mental health issues and balanced health and wellness cannot be overstated. To that end, support for provincial and national research and analyses emphasizing these aspects unique to the Canadian police culture, including strengths and stressors, is recommended.*

Status Update:

No response.

#7-2010/1 *It is recommended that Police Services compel Domestic Violence Coordinators to facilitate the liaison and information sharing between case managers in Domestic Violence occurrences that cross divisional and jurisdictional boundaries within their service.*

Status Update:

No response.

#7-2010/2 *Incidents reported to, or investigated by police as domestic violence, regardless of whether a verbal incident only or whether criminal charges are laid, should result in the completion of the Domestic Violence Supplementary Report (DVSR).*

Status Update:

No response.

#7-2010/3 *The DVSR should be used not only to indicate the presence of risk-enhancing factors towards violence, but also to identify those areas where case management could mitigate the risk for future violence. When risk factors such as substance abuse, mental health concerns, employment issues etc. are identified, efforts should be made to provide appropriate references or involve appropriate services to alleviate those risk factors.*

Status Update:

No response.

#24-2011/1 *It is recommended that the police service involved with the 9-1-1 calls on October 29, 2007 consider an internal review of this case. The police service should review the response of the attending officers to ensure that all policies, procedures and protocols in relation to domestic violence occurrences were followed, particularly as they relate to ensuring that the same policies and procedures are applied to male victims of domestic violence.*

Status Update:

No response.

#27-2011/1 *It is recommended that police officers receive additional/supplemental education and training about victim vulnerability in cases of domestic violence, particularly as it relates to victims of domestic violence committed by police officers.*

Status Update:

No response.

#27-2011/2 *It is recommended that an anonymous helpline be established for all police personnel and their families, similar to what exists for physicians in Ontario, where they would have access to immediate assistance and crisis intervention as well as referral to specialized counseling services.*

Status Update:

No response.

Ontario Association of Children's Aid Societies (OACAS)

#17-2007 *It is recommended that all agencies ensure adequate training and supervision in assessing domestic violence within same-sex relationships in cases where children are involved. It is also recommended that Children's Aid Societies follow-up on a referral with all parties involved with the child or children.*

Status Update:

In 2009, the OACAS convened a multi sector, and multi ministry advisory committee to address the issues highlighted in the Coroner's Report and the following is a list of activities that have taken place.

OACAS has a specialized woman abuse course for child welfare. Between September 2010 and August 2013 62 sessions of *Where Woman Abuse & Child Safety Intersect: Best Practice Interventions for Keeping Children & Women Safe* were delivered to 918 participants.

In 2009-2010 520 participants from the child welfare and violence against women sectors attended the *Critical Connections: Where Woman Abuse and Child Safety Intersect* Symposium.

The following publications were made available:

- in 2009-2010 *Practice Guides* in both French and English;
- in 2011-2012 2170 copies of *CRITICAL CONNECTIONS - WHERE WOMAN ABUSE AND CHILD SAFETY INTERSECT: A Practical Guide for Child Welfare Professionals in Ontario* were disseminated,
- and 820 copies of *Working with First Nations, Inuit and Métis Families Who Have Experienced Family Violence: A Practice Guide for Child Welfare Professionals* were disseminated
- in 2009-2010 Practice Notes available in both French and English along with Woman Abuse Resources in Ontario

Our course and practice guide materials address issues of diversity within in women abuse and address the issues of same sex relationships. Woman abuse is an issue that the OACAS takes very seriously and has formed strong positive relationships with the violence against women sector and the Ontario Women's Directorate.

Comments:

Evaluation of how training and collaborative efforts impact the lived realities of women and children engaged with the system is critical.

#18-2007 *It is recommended that social service providers, including police, physicians, and child protection services receive proper training regarding the dynamics of domestic violence in same-sex relationships.*

Status Update:

See OACAS response at **#17-2007** above and under Ontario Police College Response below.

#23-2007 *It is recommended that CAS refer cases with multiple risk factors like alleged child abuse, parental alcoholism and domestic violence to high risk case management. (Similar to recommendation #8/2004)*

Status Update:

Not addressed in OACAS response.

#1-2008/6 *It is recommended that the Ministry of Children and Youth Services and the Ontario Association of Children's Aid Societies provide enhanced training on a standardized risk/danger assessment tool and enforce the use of this tool in all cases where domestic violence and harassment are present. Once the level of risk has been identified for the victim, an adequate safety plan must be implemented. As well, it is essential that contact be made with the perpetrator to assist in the risk assessment and risk management process.*

Status Update:

Not addressed in OACAS response.

#12-2008/1 *The Ministry of Children and Youth Services, in consultation with the Ontario Association of Children's Aid Societies, should enhance standards for CAS interventions in DV cases by requesting DV perpetrators be involved in specific provincially approved batterers' programs before allowing unsupervised visits with children or terminating the CAS involvement in a case.*

Status Update:

Not addressed in OACAS response.

Comments: Ongoing funding should be provided to support the work of the local CAS/VAW committees, including joint training initiatives.

#12-2008/2 *The MCYS, in consultation with the OACAS, should ensure an internal death review is conducted by the CAS in any case where a parent or child has been a domestic homicide victim and where there has been active CAS involvement within the previous year, or possibly longer.*

Status Update:

Not addressed in OACAS response.

#24-2011/2 *The CAS involved with the family should conduct an internal review to examine its provision of services and assessment of risk for this family prior to the homicide.*

Status Update:

Not addressed in OACAS response.

#24-2011/3 *Children's Aid Societies should be required to conduct internal reviews when a domestic violence death occurs in a family that had received the services of the CAS within the 12 months preceding the death, and where domestic violence issues had been identified.*

Status Update:

Not addressed in OACAS response.

Comment: A demonstrated commitment to the implementation of all recommendations is critical. Evaluation of progress, ensuring input of families guides future direction, is strongly encouraged. Reports and findings related to abuser accountability seem to be lacking with respect to cross-sectoral sharing, despite collaborative expectations.

Ontario Ministry of Aboriginal Affairs

***#7-2007** We recommend that First Nation communities be prioritized by government to address the enormous lack of resources available to them, including making available culturally appropriate service providers that would be adequately trained in providing an effective response to the complex issues facing Aboriginal families. These issues include the impact of intergenerational trauma on families with the consequence of high rates of mental health issues, addictions, domestic violence, unemployment and living in chronic states of poverty. (Similar to recommendation **#28/2004**)*

Status Update:

Although the Ministry of Aboriginal Affairs does not have its own programs that address all of the concerns mentioned in the recommendation, we work closely with all ministries to address issues that impact Aboriginal peoples in Ontario. The province also engages with Aboriginal communities and organizations in the development and design of programs and services wherever possible.

A list of programs and services that Ontario supports or delivers to Aboriginal peoples living on and off-reserves that help address those issues:

Violence Against Aboriginal Women

The Joint Working Group on Violence Against Aboriginal Women (JWG) was established in 2010 to identify priorities and opportunities to prevent and reduce violence against Aboriginal women. The JWG membership consists of 10 ministries: OWD, Ministry of Aboriginal Affairs, Ministry of the Attorney General, Ministry of Children and Youth Services, Ministry of Education, Ministry of Community and Social Services, Ministry of Community Safety and Correctional Services, Ministry of Health and Long-term Care, Ministry of Municipal Affairs and Housing, Ministry of Training, Colleges and Universities and five Aboriginal partners: the Ontario Native Women's Association, the Ontario Federation of Indian Friendship Centres, the Independent First Nations, the Métis Nation of Ontario and the Chiefs of Ontario.

The JWG presented its second annual report to the Minister Responsible for Women's Issues and the Minister for Aboriginal Affairs, along with the leaders of the Aboriginal member organizations, in October 2013.

Health

Improving the health of Aboriginal peoples in Ontario is a priority for the Ontario government. We are committed to working together with First Nations leadership and federal partners through the Trilateral First Nations Health Senior Officials Committee to close the gap in the health status of First Nations peoples.

The 2013 budget reaffirms our commitment to work in partnership with the federal government and Aboriginal and First Nations partners to improve the health and well-being of Aboriginal peoples and communities in Ontario.

In 2011, Ontario established the Trilateral First Nations Health Senior Officials Committee (the Trilateral Committee). The Trilateral Committee includes senior-level participation from the Ontario government (led by the Ministry of Health and Long-Term Care), the federal government (led by Health Canada), and the Chiefs of Ontario.

The Trilateral Committee is the first-ever tripartite First Nations health process led by Ontario, which oversees activities in the priority areas of mental health and addictions, diabetes, public health and data management. The Ministry of Health and Long-Term Care (MOHLTC) is providing \$1.5M in ongoing annual funding to support the work of the Mental Health and Addictions working group of the Trilateral Committee.

Provincial funding supports the placement of Community Wellness Development Teams to provide mental health and addictions expertise and planning supports to First Nations communities seeking assistance in addressing prescription drug abuse, as well as support for telemedicine equipment to enhance addictions treatment capacity on-reserve

The Aboriginal Healing and Wellness Strategy is a cluster of over 460 community-based health, healing and anti-violence programs across the province in urban and rural Aboriginal communities, both on and off-reserve ... Total budget for 2012-13 was \$37,895,940 and is funded by a number of provincial ministries.

These community-based programs and services are available to Aboriginal peoples living on-reserve and in urban and rural communities. They include:

- Community wellness programs
- Aboriginal Healthy Babies, Healthy Children Program
- Counselling to address mental and emotional issues
- Crisis intervention services
- Healing lodges
- Health care, health promotion and education
- Shelters and safe houses for women escaping domestic violence and their children
- Pre- and post-natal care
- Substance-abuse treatment centres.

In 2012/13, the MOHLTC invested \$7M in diabetes prevention and management programs serving Aboriginal communities. This includes \$3.1M specifically designated for Aboriginal and First Nations diabetes prevention and treatment, and \$3.9M as part of the Diabetes Complication Prevention Strategy, which is allocated to Aboriginal Health Access Centres, Community Health Centres and Family Health Teams.

Ontario's Comprehensive Mental Health and Addictions Strategy is a ten-year strategy aimed to increase access to mental health and addictions services and improve mental health outcomes across various sectors. The first three years (2011/12-2013/14) are focused on children and youth, while years 4-10 will aim to improve health outcomes across the lifespan, from childhood to old age.

This Strategy is a multi-ministry partnership which includes new investments that will grow to \$93M annually by 2013-14 to increase access to mental health and addictions services and improve mental health outcomes across sections.

Ontario's Comprehensive Mental Health and Addictions Strategy includes supports that are targeted specifically for the Aboriginal population. For example, new investments for Aboriginal children and youth in the first 3 years of the Strategy include:

- The Hiring of more than 80 new Aboriginal mental health and addictions workers in high needs communities both on- and off- reserve to provide direct culturally appropriate services to 4,000 more Aboriginal children and youth each year (\$6.25M in annualized funding, at maturity);
- Development and implementation of training supports for Aboriginal mental health and addictions workers to increase the supply of trained workers in Aboriginal communities;
- Expanded and enhanced tele-psychiatry services to provide specialized expertise to serve 800 more children and families in 35 rural, remote and underserved communities identified as having the greatest need (\$1.5M, bringing the total to \$3.9M in annualized funding).

The MOHLTC is currently developing a plan for Years 4-10 of the Strategy, which will use an integrated, whole-government and cost-neutral approach to improve health outcomes across the lifespan, from childhood to old-age.

Education

Many First Nations students are transitioning from schools on reserve and we are committed to exploring strategies to support the successful transition of First Nation students from on-reserve to provincially funded schools. For example, Ontario has been working with Dennis Franklin Cromarty School (DFC) in Thunder Bay to look at what can be done to provide better services and protection for its Aboriginal students.

The Ministry of Tourism, Culture and Sport in coordination with the Multicultural Association of Northwestern Ontario has moved an after-school program into DFC and has committed to providing \$66,000 in funding to DFC for the next three years, starting this year. MAA has provided \$50,000 per year in funding since 2011 to support enhancements to the after-school program including additional programming, extended hours, safe transportation home and meals.

Since 2006, Ontario has invested over \$200 million to improve academic achievement levels for Aboriginal students and increase awareness of Aboriginal cultures for all students.

Since 2013 Ontario Budget, the province committed to provide \$5 million per year to improve student achievement for Aboriginal students. This in addition to reaffirming our commitment to provide over \$45 million in ongoing support for implementation of the First Nation, Metis and Inuit Education Policy Framework in the 2013-14 school year.

Economic Opportunities

Our government is moving forward on many fronts to promote economic sustainability for Aboriginal peoples in Ontario. We are providing new business and partnership opportunities for Aboriginal businesses, and making it easier for Aboriginal businesses to access government procurement opportunities through our Aboriginal Procurement Pilot.

The Ministry of Aboriginal Affairs provides for increased economic development and skills training opportunities, along with capacity building support, through the New Relationship Fund (NRF). Between 2008 and 2013, the NRF has invested \$77.4 million in funding to support over 520 projects in 137 First Nations, 33 Metis communities, and 23 Aboriginal organizations (total of 193 recipients), and creating more than 540 jobs. An additional \$14.5 million in funding has been committed for 2013-2014 to fund 50 new projects.

In addition, our government funds First Nations economic development as one of the funding components of the First Nations Gaming Revenue Sharing Agreement.

The Ministry of Economic Development, Trade and Employment recently announced a \$295M investment in a Youth Jobs Strategy to provide more employment and entrepreneurship training opportunities to Ontario youth, including Aboriginal youth. The Youth Skills Connections Program and the Strategic Community Entrepreneurship Partnership Program are two programs that target vulnerable youth populations, including Aboriginal youth, and can provide youth with entrepreneurship training, mentorship opportunities, micro-financing for starting a business and other supports that are critical to entrepreneurial and employment success.

See also Response of the Federal Minister of Aboriginal Affairs and Northern Development below.

Comments:

Almost half (48.1%) of all children aged 14 and under in foster care were Aboriginal children. Nearly 4% of Aboriginal children were foster children compared to 0.3% of non-Aboriginal children (Statistics Canada National Household Survey 2011). For more information see <http://www.fncaringsociety.com>.

#14-2011/1 *To the Ontario Federation of Indian Friendship Centres; Ministry of Aboriginal Affairs and the OWD: Individuals and organizations providing services and support to Aboriginal communities are reminded that the Kanwayhitowin Campaign (based on Neighbours Friends and Family program) is a valuable resource to provide information and education on addressing the issue of domestic violence involving Aboriginal people in Ontario.*

Comments:

As with the NFF campaign, the reach of the *Kanwayhitowin Campaign* could be expanded and OWD could more actively promote the campaign to expand its reach and impact.

Ontario Police College

***#3-2007** It is recommended that there be ongoing training for police on the most effective response to domestic violence cases especially where there is a history of homicidal and suicide threats, separations, obsession with the victims, prior incidents of domestic violence and/or child abuse. (Similar to recommendation **#4/2002 & #16/2004**) The development of a high-risk case management protocol specific to these complicated domestic violence cases needs to be accompanied by additional training focused on addressing the dual goals of victim safety and offender risk reduction.*

Status Update:

For over 22 years the College has delivered training utilizing front-line agencies such as shelters, advocates and other community agencies. The core of this training has been understanding the nature and dynamics of abuse. This portion of the training has always been delivered by women from front-line agencies.

The Ontario Police College presently delivers training on domestic violence in 4 major areas:

- Basic Constable training (BCT)
- Advanced Patrol Training (APT)
- Front Line Supervisor (FLS)
- Domestic Violence Investigator - Train the Trainer

Training for police begins in the BCT program with seven, ninety minute sessions. The core of this training begins with a foundation of understanding of the nature and dynamics of abuse. This portion is delivered by women from front-line service agencies. The training is finalized with a half-day dynamic simulation, utilizing professional actors, to assess student learning in respect of police intervention in relationship violence.

For the past 22 years, all BCT students have received this training. Domestic Violence training is integrated throughout the subject areas of Interviewing, Arrest, Federal and Provincial Statutes, Officer Safety and Judgment training.

APT for experienced police officers includes a mandatory module on Domestic Violence where topics such as Strangulation and Dual Charging are examined. E-learning is also an option that is now available for APT students in partnership with Canadian Police Knowledge Network.

Beginning in 2004, the FLS course has included a module on the responsibilities and coaching skills required by a supervisor on the topic of Domestic Violence.

Since 2001, the OPC has provided an annual one-week course in “Domestic Violence Investigator – Train the Trainer.” The course provides the mandated training required by a police service to meet their obligations under the Adequacy Standards to design and implement a service-specific training curriculum for a designated “Domestic Violence Investigator” in their home services.

All Domestic Violence Training addresses the following learning objectives:

- Understand and respect the needs of victims;
- Identify appropriate community referrals;
- Identify the procedures for conducting a professional, enhanced investigation;
- Explain the purpose of the Domestic Violence Supplementary Report Form as an investigative checklist and now the use of the Domestic Violence Risk Management Report – that serves as a checklist and a valid risk assessment tool;
- Understand the requirement for risk assessment and safety planning;
- Understand the dynamics of “Relationship Terrorism”.

Additionally, local police Domestic Violence Investigator Trainers have expanded and enhanced training to meet the needs of the communities they serve.

All Domestic Violence training addresses the needs of victims and community partners in consultation with the Domestic Violence Coordinators/Trainers Committee and community organizations.

Each course from BCT to the Domestic Violence Investigator, Train-the-Trainer addresses the level of experience, role and responsibility of the officers who are students in the course design.

Notably, organizations the College engages in the consultation process include:

- Women's Community House – London
- London Family Court Clinic
- Elgin County – Domestic Assault Review Team
- Ms. Marianne Park – Woodstock
- Mr. Dave Franklin – retired RCMP – National Victim Issues Coordinator
- Victim Services Secretariat – MAG
- Family Consultants Unit – London Police
- Crown Law Office
- Office of the Chief Firearms Officer
- Provincial Abuse Coordinator – OPP

Over the past 22 years the College has consulted with many other organizations and persons who work with and for victims of Domestic Violence, including, for example, the work of Deborah Sinclair and Lenore Walker which form the foundation of training in the areas of power and control.

As you know, according to the Death Review reports about one third of domestic homicides indicate no previous police contact. For this reason the OPC encourage all agencies to work collaboratively to share safety concerns and information, where possible.

In response to the recommendation of ongoing training (**#3-2007**) the new Domestic Violence Risk Management Report was introduced to address and identify concerns about homicidal/suicidal threats, recent separation, obsessive jealousy and children exposed to violence.

Since 2009, the working committee for this tool has considered the findings of the DVDRC and incorporated many of the risk factors identified over the past 10 years of research. The new form will serve as an investigative checklist, risk assessment tool, case management guide and identify factors for bail opposition. This tool has the ODARA (Ontario Domestic Assault Risk Assessment) tool embedded within it.

The ODARA portion may be scored, by a qualified police officer, to give a predictive score of recidivism, if the criteria are met. This will be an improvement over the old form and will be used by all parties in the criminal justice system. An e-learning training program is about to be released to assist with the training needed for this tool.

In addition, a new package has been developed on Safety Planning. In collaboration with the Ontario Police Video Training Alliance, a DVD training tool was developed to highlight the importance of an interim safety plan by the investigating officer. The interim plan is supplemented by a more detailed plan through a shelter, Victim Services or other community agency.

High Risk Case Protocols and Teams have existed in some communities for many years. The Ministry of the Attorney General initiated High Risk Review Teams in each of its court jurisdictions a number of years ago. Each team may work differently in each community. This is the jurisdiction of the courts and the local police are part of those teams.

Through training we encourage all police agencies to work with their community partners and have protocols in place to assist the victim and the family. Respect and understanding of each agencies mandate and philosophy is highlighted. Determining risk and how the community can work together when risk is identified continues as an area we can all work together.

The College is presently working with Probation and Parole to develop a best practice protocol and training package for members of a High Risk Review team.

The issue of firearms and the search and seizure of weapons is covered at almost every level. Search and seizure authorities are addressed at the BCT level, APT and Domestic Violence Investigator training. The importance of ensuring any known weapon is not available to a potential abuser is critical in this training.

Same sex violence is addressed at the very beginning of the new officer's training. This training acknowledges the central theme of abuse is "power and control". Training identifies that regardless of the type of relationship, age, economic status, education, etc., abuse can occur in any circumstance.

Comments:

Though training is referenced in the Ontario Police College's response, it is not clear how this training has been made ongoing and how participation is ensured. Increased diversity in community advocates and representation of the various regions of the province, including the north, is encouraged to ensure a more comprehensive understanding of the issues faced by women and children throughout the province.

#17-2007 *It is recommended that all agencies ensure adequate training and supervision in assessing domestic violence within same-sex relationships in cases where children are involved. It is also recommended that Children's Aid Societies follow-up on a referral with all parties involved with the child or children.*

Status Update:

Same sex violence is addressed at the very beginning of the new officer's training. This training acknowledges the central theme of abuse of "power and control." Training identifies that regardless of the type of relationship, age, economic status, education, etc., abuse can occur in any circumstance.

#18-2007 *It is recommended that social service providers, including police, physicians, and child protection services receive proper training regarding the dynamics of domestic violence in same-sex relationships.*

Status Update:

See **#17-2007** above.

#20-2007 *It is recommended that there be ongoing training for police on the most effective response to domestic violence cases where there is a history of homicidal and suicidal threats, a recent separation, and where prior history includes domestic violence, serious substance abuse and/or child abuse. (Similar to recommendation #5/2004, #2/2005, #3/2005)*

Status Update:

See **#3-2007** above.

Comments:

As with **#3-2007** above, though training is referenced in the Ontario Police College's response, it is not clear how this training has been made ongoing and how participation is ensured

The OPC should ensure that they utilize woman abuse experts (women's shelters) from Northern and rural and Aboriginal communities at the OPC as part of their ongoing training plan.

#21-2007 *It is recommended that police services reinforce with their members the requirements of the Domestic Violence Occurrences (LE24) and Firearm Occurrences (LE029) of the Provincial Adequacy Standard Guidelines regarding the seizure of firearms during the course of Domestic Violence Occurrences. This training should be conducted on an annual basis placing emphasis on ensuring officers are appropriately educated on their authorities to conduct weapons seizures with and without a warrant. (Similar to recommendation #15/2002)*

Status Update:

Not addressed in Ontario Police College response.

#30-2007 *It is recommended that police officers receive additional/supplemental training, which focuses on the recognition that domestic violence does not always present itself in an obvious way, such as in a domestic violence assault, but may be imbedded in other types of criminal acts. Where domestic violence is at the root of any criminal act, the investigation must be completed within the context and application of the domestic violence policies of the respective services. Victims may be reluctant to disclose violence in their relationship, and this requires a sensitive but thorough intervention. Police must understand that reluctant victims may be at greater risk of continued violence and thereby are in greater need of proactive police response. (Similar to recommendations #4/2002, #5/2004, #23/2006, #28/2006 #25/2006)*

Status Update:

The DVRMR will address many, if not all, of the items. As part of the victim centred response, questions concerning other criminal acts, including for example impaired driving, cruelty to animals, mischief to property, stalking behaviour, misogynistic attitudes, violation of no-contact orders, general violence, substance abuse, as well as any emotional and/or mental disorders are explored.

#18-2007: *Social service providers, police, physicians & child protection services receive proper training re DV in same sex relationships (Same rec made to OACAS, OACP, OPC, MCSCS& College of Fam Phys's)*

Status Update:

The DVRMR will address many, if not all, of the items. As part of the victim centred response, questions concerning other criminal acts, including for example impaired driving, cruelty to animals, mischief to property, stalking behaviour, misogynistic attitudes, violation of no-contact orders, general violence, substance abuse, as well as any emotional and/or mental disorders are explored.

#14-2008/1 *It is recommended that the Domestic Violence Supplementary Report (DVSR) be enhanced to require a verbatim narrative response to risk assessment questions where the answer is "yes" or "unknown". Further, that this enhanced DVSR be mandated, prohibiting any deviation or change in the content, for use by all police services, including First Nation police services.*

Status Update:

Not addressed in Ontario Police College response.

#16-2010/1 *Police risk assessments should be mandatory for every domestic violence call, regardless of whether there is a prior history of domestic violence, and should not be dependent upon a charge being laid or not.*

Status Update:

Not addressed in Ontario Police College response.

Comments:

See our comments at **#6-2008/4** under MCSCS above.

#16-2010/2 *Police training should include instruction on how to deal with resistant or reluctant victims of domestic violence.*

Status Update:

Not addressed in Ontario Police College response however the DVRM Report Officer Guide says “Every effort should be made to improve relationships and build trust with the victim” and outlines a many of challenges survivors of violence may face.

Comments: Police should actively engage with their local women’s shelters for training and ongoing support with regards to understanding the dynamics of abuse and why a woman may be reluctant to cooperate with the Police.

Ontario Women's Directorate

#1-2007 *It is recommended that all Government agencies involved with victims and perpetrators continue to educate the public about domestic violence including information on the dynamics and/or warning signs of domestic violence and an awareness of the risk factors for potential lethality. (Similar to recommendation #1/2002). In addition, such programs should include information on where and how to ask for help, and when to take appropriate action with potential abusers, victims, and their children. These programs should also underscore the fact that Intimate Partner Violence (IPV) and postpartum depression can have a similar negative impact on a woman's functioning and well-being.*

Status Update:

One of the initiatives implemented by the OWD to respond to recommendations in earlier reports is the *Neighbours Friends and Families / Voisin-es, ami-es et familles* campaign. This campaign was developed with the assistance of an Expert Panel and has been funded by OWD over the past several years. It helps those closest to abused women recognize the signs of abuse and understand what they can do to help. This campaign has been adapted for Aboriginal, Francophone and newcomer communities. It includes some information for people in same sex relationships. The campaign provides information to help identify women who may be at a higher risk of violence, how to identify risk factors for potential lethality, and provides resources for safety planning. The campaign also provides resources on how people can talk to abusive men while keeping themselves safe.

The OWD has made a long-term commitment to these campaigns, which are ongoing throughout Ontario. Each year, the reach of the campaigns widens and new material and resources are developed based on the experiences of the community organizations sponsoring the campaigns.

Comments:

This is an excellent campaign with a lot of good information. Its reach could be expanded and OWD could more actively promote the campaign to expand its reach and impact.

Where possible, NFF presentations should be done in partnership with a local women's shelter or women's advocate and resources should be allocated to permit this.

#4-2007 *It is recommended that OWD continue to educate both the public and professionals who come into contact with victims and perpetrators of domestic violence about the dynamics of domestic violence and suicide prevention. Also, OWD should provide information to help the public and professionals understand their role in assisting abusers, victims and their children. (Similar to recommendation #1/2006)*

Status Update:

In response to the Domestic Violence Death Review Committee reports, the OWD has also provided multi-year funding for training of workers in the health, education, justice and social services sectors in order to improve their response to domestic violence situations. Over 30,000 workers have been trained. Examples of training initiatives include:

The Ontario Association of Interval and Transition Houses has been funded to develop and implement training to enable shelter workers to better advocate and support women and their children who have experienced violence. This initiative addresses the needs of women whose experiences of violence are further complicated by various social and systemic conditions. Training topics include: developing strategies for responding to complex situations, supporting diverse women using substances and working with women with various mental health labels/diagnoses. (See the identical OAITH response at **#4-2007**, **#29-2007**, **#14-2010/1** under OWD and under MHLTC at **#2-2008/3**, **#15-2008/3**.)

The Centre for Research & Education on Violence Against Women and Children has been funded to hold provincial forums for justice and community service providers to learn more about promising practices for high-risk teams, share challenges and identify training gaps. This work has continued over the past three years with the development and implementation of online threat assessment/risk management training for community service providers. This training is helping front-line workers recognize the risk of serious harm and lethal violence as well as the need to collaborate and communicate with service providers in other sectors. (See also under OWD at **#29-2007**, **#2-2008/1**, **#15-2008/2**, **#14-2010/1** and under MHLTC at **#26-2007**, **#2-2008/2**, **#2-2008/3**, **#15-2008/2**, **#15-2008/3**.)

Comments:

Since shelters and rape crisis centres are the originators of work to end violence against women, it makes sense that shelters should be supported to continue to innovate and expand knowledge.

The forums that gather experts in various sectors provide excellent opportunities for information sharing and exchange. OWD and other Ministries must ensure that the supports are available so that front-line and grassroots violence against women experts are able to attend.

***#10-2007** Kanawayhitowin is an Aboriginal public awareness campaign that was launched in the fall of 2007 to raise awareness about the signs of woman abuse in First Nations communities, so that people who are close to at-risk women or abusive men can provide support. It reflects a traditional and cultural approach to community healing and wellness.*

Educational materials include brochures, public service announcements, a training video and CD-ROM. We recommend that the OWD consider making this campaign available to all Aboriginal communities across the province.

Status Update:

The *Kanawayhitowin* campaign was developed by a separate Aboriginal Expert Panel, led by the Ontario Federation of Indian Friendship Centres, as an adaptation of the Neighbours, Friends and Families campaign. It is available to Aboriginal communities across the province.

Comments:

As with **#1-2007** this is an excellent campaign with a lot of good information. Its reach could be expanded and OWD could more actively promote the campaign to expand its reach and impact.

***#14-2007** It is recommended that Community agencies in partnership with Government should explore the creation of an easily accessible, non-threatening mechanism for friends and family to get information and consult with a trained individual regarding situations where they have concerns that a woman is at risk from her intimate partner. This resource could provide direction where they are not sure how to intervene and/or how to help protect the victim's safety. (Similar to recommendation **#1/2006**)*

Status Update:

See *Neighbours Friends and Families / Voisin-es, ami-es et familles* campaign at **#1-2007** above.

Comments:

While the *Neighbours Friends and Families* campaign does provide excellent information it does not address the availability of consultation with a trained individual. Crisis lines such as the Assaulted Women's Helpline, Fem'Aide and those operated by shelters throughout the province are excellent resources that should be promoted by the NFF campaign.

#15-2007 *There must be more public education regarding the risk that suicidality poses, not only to the suicidal person but also to others involved with him/her.*

Within the Health Care system, men who are in relationships and who threaten or attempt suicide should consistently be screened for abusive behaviour in their relationships. Part of this screening process must involve some contact with the female partner to offer information and support regarding disclosure of abuse, services and supports available, etc.

Status Update:

Not addressed in OWD's response.

Comments:

Though the Ministry's response does not address this recommendation directly, the NFF campaign does address the risks associated with suicidality and recommends that those who are aware of it take action.

It is recommended that OWD promote screening with suicidal men in healthcare settings for abusive behavior in their relationships.

#16-2007 *It is recommended that affordable housing, child care, and income support must be made available so that women trapped in abusive relationships can escape the danger as threats escalate into potentially lethal situations.*

Status Update:

The government remains committed to its Special Priority Policy that gives victims of domestic violence priority access to safe, affordable housing. This helps victims of domestic violence and their families escape unsafe and abusive situations.

In the 2013 Budget, the government increased support by 1% for all people receiving funding from Ontario Works and the Ontario Disability Support program. This means that rates have increased by 16% since 2003.

Comments:

While we agree that the Special Priority Policy is critical and must be maintained, waits for housing continue to grow because little to no new housing stock is being built. As a result, in many communities women and children are staying in emergency and second stage shelters for far longer than they were designed for, creating unnecessary stress. Building new affordable housing must be an urgent priority.

1% increases to OW and ODSP are far from adequate. According to the Ontario Coalition Against Poverty "[t]he 21.6% that Harris cut from welfare cheques in 1995 is now worth almost 40% today when inflation is included."

According to Raise the Rates "The real value of social assistance payments has fallen by some 55% since 1994 and people have continued to get poorer during the years the Liberals have been in office. The vital Community Start Up benefit that kept people housed has been taken away. The Special Diet benefit that put food on the table for thousands has been slashed. Many people on ODSP are now facing medical reviews that threaten to take away their income." And further that: The OW rate needs to increase by 55%. The Special Diet and Community Start-up Benefit must be restored.

Poverty is a well-documented barrier to women and children escaping violence.

#19-2007 *It is recommended that the public be educated on the dynamics of domestic violence, including in same-sex relationships.*

Status Update:

See *Neighbours Friends and Families / Voisin-es, ami-es et familles* campaign at **#1-2007** above.

#24-2007 It is recommended that OWD continue to educate the members of the public who come into contact with victims and perpetrators of domestic violence about the dynamics of domestic violence and provide information on practical steps that can be taken to reduce the risk for assault and lethality. (Similar to recommendation #1/2006)

Status Update:

See *Neighbours Friends and Families / Voisin-es, ami-es et familles* campaign at **#1-2007** above.

#28-2007 There is a continuing need to better educate family members, friends, and colleagues who come into contact with victims and perpetrators of domestic violence about the dynamics of domestic violence and the need to take appropriate action with potential abusers, victims and their children in particular, this education has to include an awareness of the risk factors for potential lethality. This is particularly important when the couple is going through a separation or the individual is showing signs of depression or suicidal or homicidal thoughts. The risk increases even further if the perpetrator has an addiction problem. (Similar to recommendations #1/2006, #1/2002, #1/2004, #3/2005.)

Status Update:

See *Neighbours Friends and Families / Voisin-es, ami-es et familles* campaign at **#1-2007** above.

#29-2007 Given the high co-occurrence between addictions and domestic violence, we expand on previous recommendations to include more education for counsellors who work with clients with addiction problems who may be perpetrators of domestic violence. We recommend routine screening in every case and where there are indicators of domestic violence, we would recommend a thorough assessment of risk and risk management of the case including contact with the victim to engage in safety planning. We would not expect addiction counsellors to become experts in domestic violence work but we would recommend that they collaborate closely with the VAW sector in their community. (Similar to recommendations #7/2004, #8/2004, #5/2002)

Status Update:

See CREVAW response at **#4-2007** above.

See OAITH response at **#4-2007** above.

Women's College Hospital has been funded to develop and implement training for front-line mental health, addiction and shelter workers on how better to support women with co-occurring problems and promote collaboration among service sectors. Through the training, participants gain new knowledge about co-occurring problems, increasing their capacity to respond to women with complex needs, in an effective and timely manner.

(See WCH response under MHLTC at **#2-2008/1**, **#2-2008/3** for a very similar answer.)

#1-2008/4 There is a need to better educate the public about the dynamics of domestic violence and appropriate responses where such dynamics are recognized in potential abusers or victims.

Status Update:

See *Neighbours Friends and Families / Voisin-es, ami-es et familles* campaign at **#1-2007** above.

#2-2008/1 Funding and resources should be provided to create joint training opportunities for those working in mental health agencies and those working in violence against women services to ensure a

more integrated and holistic response that can more effectively respond to the complexities of individual situations.

Status Update:

See WCH response at **#29-2007** above.

See CREVAW response at **#4-2007** above.

#2-2008/3 *Adequate levels of support and resources should be made available to services that can respond to individuals with multiple problems so that interventions can be organized to meet the particular needs of the individual, as opposed to being organized to meet the needs of a particular agency.*

Status Update:

See OAITH response at **#4-2007** above.

See CREVAW response at **#4-2007** above.

Comments:

The training opportunities addressed in these recommendations do not address the provision of support and resources so services can respond with tailored interventions as recommended.

#4-2008/1 *It is recommended that the Ontario Women's Directorate continue to educate the members of the public who come into contact with victims and perpetrators of domestic violence about the dynamics of domestic violence and provide information on practical steps that can be taken to reduce the risk for assault and lethality at the time of relationship breakdown.*

Status Update:

See *Neighbours Friends and Families / Voisin-es, ami-es et familles* campaign at **#1-2007** above.

#4-2008/2 *It is recommended that criteria used in determining financial grants for the development of all information packages on domestic violence, training packages or any public education announcements should include a mandatory segment on the potential risk of lethal violence at the time of relationship break-down and provide family and friends with recommendations on how to support a "safe" break-up/separation.*

Status Update:

The OWD's grants criteria include a requirement that all domestic violence training and public education programs include information on the potential risk of lethal violence.

#5-2008/1 *There is a continuing need to better educate family members, friends, and colleagues who come into contact with victims and perpetrators of domestic violence about the dynamics of domestic violence. Public education should include action plans for persons who encounter individuals involved in domestic violence, and in particular address the increased risk associated to separation or pending separation and workplace stalking issues. In particular, this education should include a methodology to identify the risk factors for potential lethality and the specific steps to take when they are identified.*

Status Update:

See *Neighbours Friends and Families / Voisin-es, ami-es et familles* campaign at **#1-2007** above.

The Neighbours, Friends and Families campaign has expanded to include the workplace, providing information and resources for employers to develop policies and procedures for domestic violence situations and to support employees at risk. The Make It Our Business campaign outlines how employers, - - supervisors, managers, human resources and safety officers, security personnel, union representatives and co-workers can recognize domestic violence, respond to it and refer victims and abusers to supports that offer help.

The OWD has also developed resources for employees and employers in collaboration with the Occupational Health and Safety Council of Ontario to help them respond to domestic violence in the workplace.

Comments:

As with other aspects of the NFF campaign, its reach could be expanded and OWD could more actively promote the campaign to expand its reach and impact.

#12-2008/3 *There needs to be broader public awareness about the danger of separation with a DV perpetrator directed at DV victims and the risks in maintaining ongoing relationships that jeopardize the safety of women and children.*

Status Update:

See *Neighbours Friends and Families / Voisin-es, ami-es et familles* campaign at **#1-2007** above.

#14-2008/4 *It is recommended that Aboriginal-focused public awareness programs paralleling the Neighbours, Friends and Families campaign be implemented and made available to all First Nation communities across the province.*

Kanawayhitowin is an example of an Aboriginal public awareness campaign that was launched in the Fall of 2007 to raise awareness about the signs of woman abuse in First Nation communities so that people, who are close to at-risk women, or abusive men, can provide support. This program reflects a traditional and cultural approach to community healing and wellness. Educational materials include brochures, public service announcements, a training video and CD-ROM.

Status Update:

See the *Kanawayhitowin* campaign at **#10-2007** above.

#15-2008/1 *Neighbours, friends and family should be educated about the dynamics of domestic violence and the need to take appropriate action.*

Status Update:

See *Neighbours Friends and Families / Voisin-es, ami-es et familles* campaign at **#1-2007** above.

#15-2008/2 *Appropriate risk assessment tools need to be used by mental health professionals when dealing with victims and perpetrators of domestic violence.*

Status Update:

In response to the Domestic Violence Death Review Committee reports, the OWD has also provided multi-year funding for training of workers in the health, education, justice and social services sectors in order to improve their response to domestic violence situations. Over 30,000 workers have been trained. Examples of training initiatives include:

See CREVAW response at **#4-2007** above.

#3-2010/1 *Public education campaigns need to provide information on the co-occurrence of domestic violence and child maltreatment and emphasize to both professionals and community members the importance of notifying Child Protective Services (CPS) if either form of abuse is identified*

Status Update:

Not addressed in OWD's response.

#13-2010/2 *Ministry of Labour & OWD encouraged to work with domestic violence experts, Health and Safety Ontario and the Ontario Federation of Labour to establish a non-profit initiative to engage employers in the work of preventing and responding to domestic violence. The new non-profit initiative should provide workplace specific information, resources and advice for employers.*

Status Update:

The government amended the *Occupational Health and Safety Act (OHSA)*, effective June 2010, to enhance protections against workplace violence and to address workplace harassment. The *Neighbours, Friends and Families* campaign has expanded to include the workplace, providing information and resources for employers to develop policies and procedures for domestic violence situations and to support employees at risk. The *Make It Our Business* campaign outlines how employers, supervisors, managers, human resources and safety officers, security personnel, union representatives and co-workers can recognize domestic violence, respond to it and refer victims and abusers to supports that offer help.

The OWD has also developed resources for employees and employers in collaboration with the Occupational Health and Safety Council of Ontario to help them respond to domestic violence in the workplace.

Comments:

We commend the changes to the OHSA and recommend that OWD more actively promote the campaign to expand its reach and impact and so that more women coping with violence know this potential source of support exists.

#14-2010/1 *Public education campaigns (e.g. Neighbours, Friends, and Families) should address the increased risk for domestic homicide when there co-exists a history of domestic violence and the presence of mental illness in a potential perpetrator. The campaign should stress the seriousness of the risk posed by a mentally ill individual who is threatening to harm his/her partner and/or is threatening self-harm. Specifically, the campaign should outline the steps to be taken when attempting to obtain help for a mentally ill family member, including treatment options and referrals to support services.*

Status Update:

See OAITH response at **#4-2007** above.

See CREVAW response at **#4-2007** above.

#14-2011/1 *Individuals and organizations providing services and support to Aboriginal communities are reminded that the Kanawayhitowin Campaign (based on the Neighbours, Friends and Family program) is a valuable resource to provide information and education on addressing the issue of domestic violence involving Aboriginal people in Ontario.*

Status Update:

See the *Kanawayhitowin* campaign at **#10-2007** above.

Regional Coroner

#8-2010/1 *The Regional Supervising Coroner responsible for the area where this incident took place conduct a Regional Coroner's Review into the death of the victim. In particular, the review should address issues of collaboration between services, CAS, PAR, P&P, CIC, MAG*

Status Update:

No response.

Action - Research - Change



End Violence Against Women
*survivors, advocates & activists
working for change*