



COMMISSION OF INQUIRY INTO THE CIRCUMSTANCES
SURROUNDING THE DEATH OF PHOENIX SINCLAIR

The Honourable Edward (Ted) Hughes, Q.C.,
Commissioner

Transcript of Proceedings
Public Inquiry Hearing,
held at the Delta Winnipeg Hotel,
350 St. Mary Avenue, Winnipeg, Manitoba

THURSDAY, MAY 30, 2013

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MR. J. GINDIN and **MR. D. IRELAND**, Mr. Nelson Draper Steve Sinclair,
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MR. J. FUNKE, Assembly of Manitoba Chiefs and Southern Chiefs Organization Inc.

MR. W. HAIGHT, Manitoba Métis Federation and Métis Child and Family Services Authority Inc.

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MS. C. DUNN, for Ka Ni Kanichihk Inc.

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1 MAY 30, 2013

2 PROCEEDINGS CONTINUED FROM MAY 29, 2013

3

4 THE COMMISSIONER: Good morning.

5 MS. WALSH: Good morning, Mr. Commissioner.

6 THE COMMISSIONER: All right.

7 MS. WALSH: Our first witness this morning is
8 Ms. Kerry McCuaig.

9 THE CLERK: If you could you just stand for a
10 moment. Is it your choice to swear on the Bible or affirm
11 without the Bible?

12 THE WITNESS: Affirm without the Bible.

13 THE CLERK: Okay. Just state your full name to
14 the court then.

15 THE WITNESS: Kerry Roxanne McCuaig.

16 THE CLERK: And spell me your first name.

17 THE WITNESS: K-E-R-R-Y.

18 THE CLERK: Your middle name, please?

19 THE WITNESS: R-O-X-A-N-N-E.

20 THE CLERK: And your last name?

21 THE WITNESS: M-C-C-U-A-I-G.

22 THE CLERK: Thank you.

23

24 **KERRY ROXANNE MCCUAIG**, affirmed,

25 testified as follows:

1 THE CLERK: Thank you. You may be seated.

2 THE WITNESS: And thank you for the choice.

3 MS. WALSH: We'll start, Mr. Commissioner, by
4 filing the exhibits that will be referred to during the
5 witness's testimony.

6 THE COMMISSIONER: All right.

7 MS. WALSH: Starting with her C.V.

8 THE COMMISSIONER: And that what will be what
9 number, Clerk?

10 THE CLERK: Exhibit 120.

11 THE COMMISSIONER: One twenty.

12

13 **EXHIBIT 120: CURRICULUM VITAE OF**
14 **KERRY MCCUAIG**

15

16 MS. WALSH: Next is the paper that the witness
17 has prepared for the benefit of the Commission, called
18 "Supporting All Children to Reach the Most Vulnerable".

19 THE COMMISSIONER: Yes.

20 MS. WALSH: That will be Exhibit 121.

21 THE CLERK: Exhibit 121.

22

23 **EXHIBIT 121: DOCUMENT ENTITLED**
24 **"SUPPORTING ALL CHILDREN TO REACH**
25 **THE MOST VULNERABLE"**

1 MS. WALSH: Next is the PowerPoint presentation
2 that the witness will be taking us through this morning,
3 also called "Supporting All Children to Reach the Most
4 Vulnerable".

5 THE CLERK: Exhibit 122.

6 THE COMMISSIONER: One twenty-two.

7

8 **EXHIBIT 122: POWERPOINT**
9 **PRESENTATION ON "SUPPORTING ALL**
10 **CHILDREN"**

11

12 MS. WALSH: The next exhibit is called "The Early
13 Years Study 3 - Making Decisions, Taking Action" published
14 by The Honourable Margaret Norrie McCain, Fraser Mustard
15 and Kerry McCuaig.

16 THE CLERK: Exhibit 123.

17 THE COMMISSIONER: One twenty-three.

18

19 **EXHIBIT 123: DOCUMENT ENTITLED**
20 **"THE EARLY YEARS STUDY 3 - MAKING**
21 **DECISIONS, TAKING ACTION"**

22

23 MS. WALSH: Then a document entitled "Manitoba
24 Early Childhood Education Profile November 2011".

25 THE CLERK: Exhibit 124.

1 THE COMMISSIONER: One twenty-four.

2

3 EXHIBIT 124: DOCUMENT ENTITLED
4 "MANITOBA EARLY CHILDHOOD
5 EDUCATION PROFILE NOVEMBER 2011"

6

7 MS. WALSH: And finally a document, it's a
8 PowerPoint presentation entitled, or it's from a, I guess
9 it's a website, "Securing the Future for our Children,
10 Preschool Excellence Initiative" from Prince Edward Island.

11 THE CLERK: Exhibit 125.

12 THE COMMISSIONER: Exhibit 125.

13

14 EXHIBIT 125: POWERPOINT
15 PRESENTATION "SECURING THE FUTURE
16 FOR OUR CHILDREN, PRESCHOOL
17 EXCELLENCE INITIATIVE"

18

19 THE CLERK: Exhibits 120 to 125.

20 THE COMMISSIONER: Thank you.

21 THE CLERK: You're welcome.

22

23 DIRECT EXAMINATION BY MS. WALSH:

24 Q Starting with your background, Ms. McCuaig, you
25 serve as the Atkinson Fellow in Early Childhood Policy at

1 the Atkinson Centre in the Ontario Institute for Studies in
2 Education at the University of Toronto?

3 A Yes.

4 Q What is that institute?

5 A The Atkinson Centre is, has been -- it's one of
6 20 institutes within the Ontario Institute for Studies in
7 Education. Its main role is to bring together the study of
8 research into early childhood, the practice of
9 practitioners, of professionals who work with young
10 children, along with, with bringing that information to, to
11 policy makers so that their decisions are informed both by
12 the, by the research that exists and that they are aware of
13 what their policy decisions had in terms of the impact on
14 the field.

15 Q And what are your duties within the centre?

16 A I am, I am the policy fellow. I am involved in
17 three, in all three areas. I do that through teaching,
18 both a course which is, which is designed specifically to
19 transfer knowledge from research into, into public policy.
20 I do that as an advisor to eight foundations whose main
21 focus of action is early childhood and I am an advisor to
22 five provinces for their early childhood policy.

23 Q So further to that, can you tell us a little bit
24 more about the foundations to which you are an advisor?

25 A The Margaret and McCain -- the Margaret and

1 Wallace McCain Family Foundation, its work is mainly
2 focused in Atlantic Canada. Its main work is around -- it
3 has four agreements now, partnership agreements with, with
4 those four provinces in developing their early childhood
5 policy and I am a main advisor to that work.

6 The Chagnon Foundation in Quebec which is one of
7 the largest foundations in Canada and again its main work
8 is the alleviation of vulnerability in children.

9 In Ontario we have the Atkinson Foundation who's,
10 again the focus is on children, on social justice and the,
11 and the promotion of equity.

12 The Hallman and the Lawson Foundations also in
13 Ontario who are more regionally focused in their areas but
14 again that is their early childhood alleviation of poverty,
15 the promotion of equity is their main concern.

16 And in Alberta we have the Max Bell Foundation
17 and the Muttart Foundation and their work is in Alberta and
18 Saskatchewan doing that same type of work.

19 Q You also have extensive research in the area of
20 early childhood development, education and care. Tell us
21 about some of that research, please.

22 A I worked on, in the last decade I worked on three
23 government commissions. The first was for the, for the
24 City of Toronto where it looked, it examined the way that
25 it was delivering its early childhood services with a view

1 to revamping those, those services. So we -- you know, the
2 commission met with stakeholders and developed a position
3 paper which became a blueprint for the city and reworking
4 its services.

5 The second one was with the senate of Canada when
6 we looked at the, you know, what had happened to early
7 childhood across the country in light of the federal
8 provincial agreements on early childhood being shelved in
9 2007. So we did a cross-country scan of where
10 jurisdictions were, what, what impact that had had on
11 their, on what they were doing with some pleasant surprises
12 which I can talk about later if you like.

13 The third commission was for the, for the
14 province of Ontario where the premier commissioned a study
15 on the, on really asking for a blueprint in putting in
16 place full day learning for all four and five-year-olds in
17 the province.

18 Q You were a principal researcher and coauthor of
19 the publication called the "Early Years Study 3: Making
20 decisions, taking action".

21 A Um-hum.

22 Q Tell us about -- and we have marked that
23 publication as Exhibit, is that 123? Yes, that's Exhibit
24 123. Tell us what that publication was about.

25 A Early Study 3, might be able to tell by its name,

1 is the third in a series of studies where the main
2 co-authors were The Honourable Margaret McCain and the late
3 Dr. Fraser Mustard and I was brought in to, I worked on all
4 three studies but I was brought in as a co-author on this,
5 on this study. And there has been an explosion of research
6 from a number of angles in the area of early childhood, you
7 know, biological, psychological, you know, really big
8 studies on what the economic impacts have been, the social
9 impacts have been. So the purpose of this was really to
10 update the, the research and to provide a rationale to
11 policy makers for why investing in the early years is
12 critical. For many of them if they want to achieve their
13 own stated goals, you know, whether their own stated goals
14 are self sufficiency or bringing their jurisdictions into,
15 into an age where they can compete in a modern economy or
16 to alleviate social difficulties that are faced by the
17 populations. So it was really to provide them with, with
18 the rationale for why this should happen across a variety
19 of sectors. It is intended to provide advocates for
20 children with the, with the evidence that they need in
21 order to do their work. It was also targeted to the, to
22 the academic community to support them in trying to tailor
23 their research in ways that, that can inform public policy
24 in a meaningful way.

25 Q And you're going to be referring to it, I gather,

1 through your presentation?

2 A Yes. One of the, one of the main products --
3 each early years study had a product or a recommendation
4 that there be a product. For example, the first earlier
5 study, one of its main products was the early development
6 instrument was one of its main recommendations. That, that
7 product is now used across Canada very extensively in
8 Manitoba and in many, in many jurisdictions outside of
9 Canada as, as well.

10 In this, in this study we provided something
11 called the early childhood education report and that looked
12 at sort of what goes into good systems. You know, it's one
13 thing to spend on early childhood but are you spending
14 well. So it was intended to provide jurisdictions with a
15 guide about, you know, what are the elements that we have
16 found in our research, both in Canada and what the
17 international evidence says about how you organize early
18 childhood services in order that they are effective and are
19 able to deliver on the goals that they, that they have the
20 capacity to.

21 Q I won't go through all the various publications
22 and presentations that you've been involved in, they're
23 listed in your CV which we've marked as an exhibit. You
24 spoke about not only the Canadian experience but also the
25 international experience and you have consulted on an

1 international basis as well?

2 A Yes, I do some work with the Aga Khan Foundation
3 out of Geneva. In developing the study itself we worked
4 with the Organization for Economic Cooperation and
5 Development, their early childhood branch, and it's really
6 because much of the evidence that we used in the study was
7 developed by the, by the OECD. They undertook an eight
8 year, 20 country examination of the early childhood systems
9 in their member states and they drew, they drew some of the
10 policy lessons which we shaped for Canadian circumstances
11 in order to develop the early childhood index.

12 We've also done some work with the European Union
13 on, you know, really in terms of knowledge exchange, you
14 know, what our experiences are in an Anglo-American
15 situation, what their situation is in an European
16 situation.

17 Q Thank you. I'm going to summarize your expertise
18 for the benefit of the Commission. You tell me if I've got
19 it right. As a researcher writer through three early year
20 studies, three government commissions, examining early
21 childhood service delivery and as an originator and advisor
22 through 15 early years integration projects in Ontario and
23 the Maritimes, you have developed an expertise in effective
24 early years service organization. Your expertise is
25 supplemented by knowledge of Canadian and international

1 evidence documenting the elements of effective public
2 policy in this area and your work is used and relied on by
3 other researchers, foundations, policy makers and various
4 governments. Is that a fair way to summarize your
5 expertise?

6 A Thank you, yes.

7 Q Okay. And because of your expertise and
8 experience, the Commission, we, asked you to prepare a
9 paper to assist the Commissioner and that's Exhibit 121, to
10 assist the Commissioner when he makes his recommendations
11 to better protect Manitoba children, including
12 recommendations which will specifically address many of the
13 issues the Commission has heard over the course of the last
14 many months involve matters that make families vulnerable
15 and ultimately lead them into contact with the child
16 welfare system.

17 A Um-hum, yes.

18 Q Now before we get to the PowerPoint presentation
19 which you prepared which essentially follows the paper,
20 although we will also go through some of the aspects in the
21 paper afterwards that are not covered, the title of both
22 the paper and the PowerPoint, Supporting All Children to
23 Reach the Most Vulnerable, what's the significance of the
24 title that you chose?

25 A If we want to change outcomes on a population

1 level, then we need a universal approach to, to reaching
2 all children with, with services, particularly services
3 which are targeted to supporting the development of the
4 child and that are linked to supporting parents in their
5 roles as both parents and as, as earners. And what we have
6 attended to do, particularly in the Anglo-American context
7 is to identify vulnerable kids and target them for
8 treatment. What we know is that when we do that, we miss
9 all sorts of kids and that we don't see those big
10 population change differences that we need to see if we
11 want to reach our, if we want to reach our social goals. So
12 if our social goals are actually reducing vulnerability
13 amongst children, helping all children to succeed to be the
14 best that they can be, if we want to improve our, our
15 chances for having a knowledge of economy, that can happen
16 by identifying and treating one child at a time. We have
17 to catch children before they fall into a situation where
18 they are made wards of the state.

19 Q Right, thank you. So with that, let's have you
20 take us through your PowerPoint and if, if necessary I may
21 interrupt you with questions and certainly the Commissioner
22 may, may interrupt you.

23 MS. WALSH: Mr. Commissioner, we've turned the
24 screen so that you can follow the PowerPoint on the big
25 screen.

1 THE COMMISSIONER: Yes. This is in a different
2 format than the paper, I take it.

3 MS. WALSH: Yes, they are separate documents. I
4 mean the --

5 THE COMMISSIONER: Yes.

6 MS. WALSH: -- the content of the PowerPoint
7 reflects the content of the paper but they're not
8 identical.

9 THE COMMISSIONER: I read the paper but I'll
10 watch this on the screen. Thank you.

11 MS. WALSH: Good, thank you.

12 THE WITNESS: So I just want to start off by
13 saying that I, that I will be relying a lot on the Early
14 Years, Early Years Study 3 in that we do look at the, at
15 the big picture. We do look at the needs of all children
16 in Canada in that there will be, you can make some
17 inference around children who have been in contact with
18 child welfare authorities, but I want to say that this is
19 not my, this is not my expert, my expertise.

20 The main recommendation which is made by the
21 study is all children from the age of two should have
22 access to good quality early childhood education and if
23 that is to be the most effective -- the way that this
24 should be organized so that it's the most effective that it
25 can be is it should be combined with, it should be

1 organized in a way that also allows parents to work or
2 study as well as support them in their, in their parenting
3 role. And there's an abundance of evidence which I will be
4 taking you through, you know, a tiny, tiny part of it on
5 how, how those opportunities for children can really be
6 life changers for all children but particularly for
7 disadvantaged children.

8 And the -- we base our recommendations in the
9 study on the science and there has been, as I said, an
10 explosion of information, particularly in, in the last
11 decade about how young children learn and develop really
12 from, really from conception on. And, you know, we've
13 probably all been part of debates about, you know, what is
14 the determinants of who you and I are, is it our genes or
15 is it the nurturing that, that we received? Now we know
16 that there is an intricate dance between nature and
17 nurturers, that our genes give us a predisposition to be
18 who we are but it is our experiences that really turn those
19 genes on or off for better or for worse. And in the, in
20 the young child it is the, it is the way that the brain is
21 wired. It is the architecture of the brain and those
22 experiences that the children are, have influenced those
23 neurotransmitters which form the wiring which is our, which
24 becomes our brain and that will determine our capacity for
25 learning health and behaviour throughout our lives.

1 Now one of the things that we know is that
2 children who are in adverse conditions in early childhood
3 are very vulnerable to those, to those circumstances.
4 There's a creation of a high level of the hormone cortisol
5 which is our stress hormone. We all know the bad things it
6 does for us in adulthood. In young children it is
7 particularly problematic because it scrambles those
8 neurotransmitters, it sends them off in ways that they
9 shouldn't go. So we begin to see quite early in childhood,
10 children who are on this high state of alert that they
11 can't focus, they can't, they can't calm down and those are
12 the -- that's the state that you need to be in in order to
13 learn. So when a child is, you know, is parented by
14 someone who is cold, who is harsh, that they, you know that
15 one day, you know, they get away with something, the next
16 day, you know, the next day they don't, where there is
17 abuse, where there is neglect, we also see in those
18 children that their IQ will be lower and then IQ is in
19 itself a risk for other risky behaviour. What we know is
20 that it's those years before, from conception to five, is
21 when the brain is the most plastic. That is really when,
22 when our neuro roots are being set down and that becomes
23 our foundation for who you and I are.

24 If it is a -- and this isn't, you know, it's
25 logical, it's intuitive, you know, you plant a plant in

1 good soil and they lay down good roots and those tend to be
2 plants that are able to take, you know, drought and you
3 know, all the adversity that the environment sends at them
4 later. If they don't have that, then they are more
5 vulnerable to other problems.

6 The other period of plasticity comes in early
7 adolescents and really continues into our twenties and this
8 is when the frontal cortex of our brain develops at that
9 time and that gives us the capacity for, for being able to
10 think ahead, to think about what the consequences of our
11 actions will be for things like impulse control. So it's
12 really why, you know, having children when you yourself are
13 a child, when you yourself are still in your teens is a, is
14 not a good idea. If you can't think ahead, if you can't
15 control your own impulses, it's very difficult for you to
16 be able to regulate and support the development of an
17 infant.

18 Now mistreating our, the mistreatment of children
19 in the early years, you know, reflect themselves very, very
20 quickly. So in a preschool you'll see there seems to be
21 two ways that children respond, one is they become very
22 aggressive, or the other is that they become very
23 withdrawn. You can either reach them -- again that these
24 are not environments that allow children to excel and to
25 develop those foundational skills that we all need to be

1 able to function in society. By the time they reach their
2 teens we see a big correlation between adversity and early
3 childhood and school failure, pregnancies, contact with the
4 justice system. By the time we're in our twenties and
5 thirties, this is when we begin seeing many of the, many of
6 the mental health problems become manifested in those
7 years. We also see the onset of adult obesity. By the
8 time we're in our forties and fifties we're dealing with
9 heart disease and diabetes and by the time we're seniors
10 we're dealing with premature aging. Now all of these come
11 with, and there are, and this is based on a number of
12 longitudinal studies. It's based on brain imaging. There
13 are a number -- there is a number of sources of evidence
14 that show this directly by conditions in early childhood
15 and what we see, and what we see later in, in adulthood.
16 Much of this -- some of this is now done by DNA testing.
17 Why is that some kids are able to have very adverse lives
18 and still remain quite resilient later? Why is it that,
19 you know, other kids sometimes in the same family had those
20 same experiences but end up, you know, as a suicide victim
21 when they're 18. So it's, it's not just conjecture. I
22 would argue here it is, there is a growing body of science
23 which makes these links quite, you know, quite compelling.

24 Now there are many factors which affect early
25 childhood and certainly the home environment outstrips them

1 all. So the health the child is born with, the family that
2 they're born into, the social economic status, mom and
3 dad's education, what the family income is, these are the
4 most important factors in determining, you know, how well
5 we are going to turn out in life. You know, if you want to
6 have a good life be born to parents who love you have the
7 means to, to support you.

8 The two outside influencers, however, the two
9 most important and outside influencers appear to be
10 preschool and primary, and primary school. And I'm showing
11 you this and I'm going to be using this study a lot. It's
12 from the U.K. It is -- and it followed 4,000 children in
13 the U.K. and Northern Ireland from, from the age of three
14 until 16 and this is reporting out at age 11 and this is
15 what they, what the findings are. It was a cross-section
16 of children from various social-economic backgrounds. It
17 looked at their preschool experiences, both whether they
18 were in preschool or not and what the quality of their
19 preschool education was. And I want you to particularly
20 look at the difference in the, in the effect size between
21 the preschool environment and the primary school
22 environment. This is for children at age 11 and on average
23 the children in the study attended preschool for about an
24 average of 18 months. They had already been in primary
25 school for six years. So we're seeing that big difference,

1 you know, we're seeing that correlation of that impact that
2 preschool had, even though it was a short period of time,
3 as compared to what primary school has.

4 Also the study appears to show is that children
5 who have good pre-school experiences tend to do okay even
6 if their primary school experiences, even if the teaching
7 isn't all that great, even if they're in poor schools.
8 It's because essentially children come to school already
9 having learned how to learn and that is the very important,
10 you know, bump in our development that a good preschool
11 program will provide, will provide children with. They
12 come to school knowing how to learn. And so even -- so as
13 long as there is any sort of environment for them in
14 preschool, they're able to adapt and make, and make use of
15 it.

16 THE COMMISSIONER: What do you call preschool?

17 THE WITNESS: Preschool takes, takes many forms,
18 depending on where, on where we are. It may be
19 kindergarten, it may be a child care program, a nursery
20 school. You know, the main definition of it is that it is
21 a place where children attend with our children, because
22 that is very important because children learn off of one
23 another, and that it is taught by trained educators
24 following a prescribed curriculum which children attend
25 regularly.

1 Now one of the things that, again this is the
2 U.K. study, what they, what they found was that there was a
3 big difference in terms of the developmental advantage
4 about whether or not children, the quality of the
5 programming that the child attended, so that although all
6 preschool provided, provided benefits for children, you
7 know high quality, and higher quality programs provided
8 more and it was also the duration of the amount of time
9 that children attended, attended these programs, so that
10 you can see that those who attended for two or more years
11 had a greater advantage than those that attended for one
12 to, for one to two years. And this is taken at age five,
13 so for those -- so you can see there's an eight month
14 developmental advantage for, for children who have attended
15 a pre-school program for two or more years. And when
16 you're five years old, eight months is a lot of time, eight
17 months is a big bump that you're being offered.

18 So in terms of what kind of public policy
19 conclusions we make from this is that jurisdictions that
20 are providing one and two years of preschool opportunities,
21 in our context that's usually called kindergarten, are
22 ahead of those that are offering only one. And those that
23 are offering -- and the tipping point, it's not enough just
24 that you go, you have to go for a concerted amount of time
25 for it to have enduring benefits and the tipping point

1 appears to be about 15 hours. So 15 hours a week regularly
2 attended and you begin to see these kinds of advantage
3 showing up in, in children.

4 So again, it would appear that those
5 jurisdictions that are providing full day kindergarten are
6 ahead of those that are providing half day programs.

7

8 BY MS. WALSH:

9 Q I'm sorry, does this slide show then that there's
10 a greater benefit to starting programs, preschool programs
11 before kindergarten?

12 A Yes. So these would -- so those -- and again
13 these were U.K. examples and it's not uncommon for children
14 as young as three in the U.K. to start school. It's not
15 mandatory but often children do. We also have
16 jurisdictions in, in Canada that provide pre-K programs
17 starting at three as well.

18 THE COMMISSIONER: Do we have an original with
19 the colour or will we be making use of the slide for that
20 purpose when we get to work on this document?

21 MS. WALSH: We, we don't have one currently but
22 could you provide us with a colour version? I guess we
23 could print it out in colour.

24 THE WITNESS: Um-hum.

25 MS. WALSH: We could figure it out.

1 THE COMMISSIONER: If we can print it out in
2 colour.

3 MS. WALSH: Yeah.

4 THE COMMISSIONER: The all black one is not all
5 that helpful --

6 MS. WALSH: No.

7 THE COMMISSIONER: -- in understanding. I
8 certainly understand it on the screen.

9 MS. WALSH: Yes.

10 THE COMMISSIONER: Yeah.

11 MS. WALSH: We can print it in colour.

12 THE COMMISSIONER: Yeah.

13 THE WITNESS: Now in addition to cognitive
14 advantages, what preschool begins to, to provide is also
15 social, pro-social benefits and, you know, and we tend to
16 discount these, these sorts of advantages in children in
17 favour of academic or cognitive capabilities. But we also
18 find, what the research finds is that children who are
19 socially mature and competent are actually ahead of kids
20 who, who excel on the cognitive side. It's because if you
21 can't relate the two, you know, if you can't relate your
22 intelligence you're behind. So there is a benefit in
23 having pro-social behaviour.

24 And what we see here is that even the low quality
25 programs provide, have an effect size on pro-social

1 behaviour and that just comes from being around other kids.
2 I mean other children learn off, you know, they learn off
3 each other and there's a great deal of advantage that you
4 get from being in a, in a group with other kids because
5 they socialize, they socialize with one another. If they
6 are overseen by staff who know how to direct that
7 socialization that's when you get the high effects that
8 you're getting there. But the real big effects come in
9 self, self-regulation and self-regulation is relatively a
10 new concept which is being used in, which is being
11 understood more and more and it really relates to our
12 limbic system. It talks to our ability to be able to, to
13 be able to focus, to be able to block out, you know
14 extraneous noise and events that are going on around us in
15 order to be able to be focus on our task at hand and get
16 them done and follow, and follow them through. And again,
17 this is the environment that anybody needs to learn to
18 master, to master information.

19 So children who are -- and it appears now that
20 self-regulation may be more important than IQ in, in how
21 well children, you know, do in school, if they go to
22 school, whether or not they drop out of school, you know
23 what their, you know what their capacity is or what their
24 tendency would be to become involved in risky behaviour,
25 et cetera. So it's a very important part of how we, how we

1 develop ourselves. And so self-regulation -- so any impact
2 that we can have on self-regulation is quite important in
3 terms of developing future, you know, current and future
4 capacities.

5 And just -- sorry, I'm going to go back one, yes.
6 So this is something, also this is from the U.K. study and
7 something that I wanted to show you in terms of what kind
8 of progress we make. So these are children that were
9 assessed in university at various points between age 3 and
10 grade 6 and, and what we're seeing here, so you know, that
11 zero access, is this is sort of the minimum that you would
12 want a child to be operating at. And so the children were
13 grouped in terms of, in terms of how that they were doing
14 and we see, you know, some kids started off poorly and they
15 continued to do poorly. Others started off, you know,
16 average and began to excel. Others started off above
17 average and dropped. But the real story that I want to
18 show you here is this is preschool, all this activity here
19 takes place in the preschool years. After grade one
20 there's very little activity, there's very little change in
21 what happens to children's capacities. So it's really
22 telling us something, that if we don't intervene in these
23 early years that really we're expecting schools to make
24 these big changes in kids' outcomes when children didn't
25 arrive at schools with the capacity to even get started.

1 This again is from the U.K. study and it's
2 looking at the effect of social class on children who, who
3 attended preschool and those that didn't and this is at age
4 seven and all children in the U.K. are assessed in reading
5 at age seven, not unlike you know we do in, in North
6 America. The expected minimum that children are, that you
7 want children to reach at this stage is, is at the two
8 level here and we really why we assess children at about
9 this age is because this is when children begin to make the
10 crossover between learning to read and reading to learn.
11 So if you never reach the capacity in your vocabulary
12 skills where you actually are able to read to learn, you
13 can see that you're going to be at a disadvantage forever,
14 right.

15 So across the spectrum, whether, you know,
16 children came from a professional family or from an
17 unskilled family, preschool had a positive benefit, almost
18 a, you know, over a one point, a one point benefit. But
19 for those children who attended no preschool, what we see
20 is they never reach, they're able to catch up, they're
21 never able to make that bounce between, that transition
22 from learning to read to reading to learn. So this can
23 really be, you know, a life changer for kids, particularly
24 for kids from disadvantageded families, kids that don't get
25 read to on a regular basis, kids that aren't in a print

1 rich environment.

2 This is also related to a study which I think I
3 have in the appendix, I can't remember, but it's quite
4 famous and it was done in the, in the U.S. where
5 researchers went into, into families and documented the
6 number of words that were said to preschoolers. And there
7 was, and they found a 30 million word gap by the time a
8 child reaches five years old, between the children who were
9 in disadvantaged families and children who were in affluent
10 families, a 30 million word gap. And it wasn't only the
11 words that were gapped, it was also the type of words that
12 were used. So it's whether you were told you did really
13 well and what do you think about that and should we try
14 this, to being told no, stop it, get out of the way. So
15 those sorts of differences that children experience in
16 their home life, if they don't have the advantage of
17 preschool where they experience something different and
18 again that dose factor makes a, makes a difference here.
19 If you don't get enough, then it doesn't have the effect.
20 And often Canadian jurisdictions, in place of providing
21 preschool we provide, you know, all sorts of kindergarten
22 boot camp type of programs where we provide, you know, a
23 couple of sessions to children and families before they
24 start kindergarten in order to get them ready for school.
25 You know, these are programs. They're quite pervasive

1 across the country but there's no indication that they --
2 they cost money, public money but there's no indication
3 that they have any enduring effect.

4 So there were five areas in terms of this study
5 also backed up by many others about what is it that makes a
6 quality early learning environment and obviously what's
7 really important here are staff, is you need staff who are
8 trained in how children, in how children learn. So that
9 adult child, the verbal interaction, is there a curriculum
10 that's appropriate to children in this age group, how well
11 do the staff know it and are able to apply it? Knowing how
12 young children learn. Young children learn in a different
13 way than you and I do as adults or as a team would.

14 Adults who are skilled in helping children to
15 resolve conflicts. We're always going to have conflicts in
16 our lives. When you learn how to resolve them early in
17 your life, you're usually better off. And this most
18 important thing about helping parents to support their
19 children's learning. What a good early childhood
20 environment does is integrate parents into the program and
21 allow the parents to take learning back into the home.
22 Unlike many of our concepts around school as being places
23 where children are taken from their parents, where they
24 spend, you know, where they spend, you know, those five
25 hours a day in this environment which is, which is -- yes,

1 which really takes them from their parents, takes them from
2 their community, what is seen as being very important about
3 an early childhood education program is that involvement
4 of, of parents, that you're not looking at parents as being
5 the product of their deficits which you rescue kids from
6 for the time that they spend in programs, but you see
7 parents as being partners in their children's education and
8 early learning.

9 One again, and this is, this was found in the
10 U.K. study. It is replicated in study after study after
11 study is that when you take, when you concentrate children
12 from, particularly from disadvantaged families in programs
13 where they're only with other disadvantaged kids, you do
14 not see the same sorts of improvements as you see when you
15 are in a, when you have programs that are, where there's a
16 mixed income and Fraser always used to use the analogy of
17 hockey. You know, like if you don't play with the best you
18 never get to be the best and that this is -- I know nothing
19 about hockey but maybe it resonates someplace, but the same
20 thing applies to children. If you're, if you're with
21 others who don't require you to up your game, then you
22 don't up your game.

23 As I was saying that because we, we know that so
24 many children are doing poorly, we tend to want to target
25 our resources to those kids that are having a rough time

1 and this particular slide is looking at, is looking at
2 vocabulary skills in children age four and five and this is
3 Canadian research. It comes the National Longitudinal
4 Study on Children and Youth, which is a huge study which
5 was financed at one time by the federal government. It no
6 longer -- the federal government isn't continuing with it
7 but we are getting the last cycle of data coming now. This
8 particular information is from cycle eight, which is 2008,
9 2009. And so we're looking here at a group of about 50,000
10 children, over 50,000 children who have, who are studied
11 throughout Canada and this is looking at their vocabulary
12 skills and we can find the same sort of gradient, whether
13 we are looking at numeracy or social, emotional or other
14 skills as well, but you see that kind of nice, nice
15 gradient where, you know, low income kids are more likely,
16 greater percentage of low income kids are more likely to
17 have difficult than kids from affluent families and, you
18 know, this kind of nice bar goes, goes down.

19

20 BY MS. WALSH:

21 Q So the green indicates delayed?

22 A Right. So these are children who would be having
23 vocabulary delays. Again, a very, very important
24 indicator, however, because vocabulary is essential to all
25 forms of cognitive thinking. If you can't -- you know, if

1 you're, if you're delayed in your vocabulary skills then
2 you're also going to be delayed in social skills and a
3 number of other cognitive skills. You can't conceptual
4 thinking without having the vocabulary to do it, for
5 example.

6 THE COMMISSIONER: Well why is that slide
7 different from the page in the written?

8 THE WITNESS: I think it's because it's not
9 picking up the colours, I'll show you this now.

10 THE COMMISSIONER: Oh, okay.

11 THE WITNESS: But although, and this is so
12 important to point out, is that although some kids that
13 although it's true that children from disadvantaged
14 families are more likely to have difficulties, it's not
15 predetermined. What we see here is, is, in the blue slide,
16 these are the kids that are doing okay. You know, they're
17 operating at expectations. So we see that far more kids
18 from low income families are doing okay, right? Not
19 enough, but you know, they're, they're doing just fine.
20 And not only that, the orange is showing you those that are
21 in fact advanced. So income alone is not the only, is not
22 the only factor in terms of looking at the potential for
23 disadvantaged. It is a major risk factor, it's not the
24 only risk factor.

25 So here, just keep in mind, here we're looking at

1 percentages. Here we're looking at the likelihood of
2 having difficulties with your, with vocabulary skills at
3 age four and five, depending on the social economic class
4 of your family. But when we look at the actual numbers --
5 I'm going to -- when we look at the actual numbers, here
6 are the actual numbers of children. So we see that out of
7 the study of over 50,000 we see that there's about 12,000
8 kids from low income families who are, who have vocabulary
9 delays. But when we look at the other kids, these are the
10 kids from the low to moderate income families, these are
11 the kids from the moderate income families and these are
12 the kids from the affluent families. So we have almost
13 three times as many, that's almost 50,000 children, we have
14 almost three times as many children from middle class and
15 affluent families who are having problems as well.

16 So if we want to address, you know, if we want to
17 raise the vocabulary skills of children, if you do it by
18 only looking at the poor kids you're not going to have an
19 across the board advantage. You're not really going to see
20 literacy which is a, which plagues us across the country,
21 literary levels in adults, if you really want to attack
22 that you have to do it in the early years. If you only
23 focus on poor kids, you're not going to, you know you're
24 not going to reach these other kids who are also having,
25 experiencing a disadvantage. And there is a view which

1 says that well these families, they will, you know, they'll
2 work it out amongst themselves, right? That doesn't
3 happen. I mean we know that there is a big, a big
4 correlation between kids who are entering kindergarten with
5 those, with these kind of vulnerabilities and we see the
6 same vulnerabilities at grade 3 testing, at grade 6 testing
7 and in grade 12. It sticks.

8

9 BY MS. WALSH:

10 Q So that's why you're saying programs have to be
11 universal?

12 A That's right. That if you want to, if you want
13 to change outcomes at a population level, if combating
14 adult illiteracy is one of your goals, you're not going to
15 do it just by targeting low income families.

16 Now we talked about early childhood preschool or
17 early childhood education care and I apologize for flipping
18 around with the language but that is because, you know, we
19 haven't really settled on what the proper language is for
20 programming for children in this age group. And you
21 weren't supposed to do that.

22 So as we've seen it creates a number of
23 advantages for children but, you know, preschool also has
24 an advantage for families. It allows parents to work and
25 study. It allows parents who have health issues to address

1 their, their health issues. It has a number of maternal
2 health benefits, for example. It improves parenting
3 because a good early childhood education program as it
4 involves parents should be also providing that parenting
5 education as well. And I want us to stop thinking about
6 parenting education as being a course, you know. We learn
7 -- you know much of parenting is picked up from what we
8 learn, you know, what we learn from others and that having,
9 having families in common spaces, like an early childhood
10 education program, provides those advantages not only for
11 the child but for the parent as well.

12 We'll be going through later about the -- you
13 know, we've already looked at the cost savings that there
14 can be to society and to the community in preventing mental
15 health problems, other social problems, problems with the
16 social justice system down the line if we intervene early,
17 in early childhood. But, and again, as we're going to look
18 at later, it can have big impact on things like family
19 poverty and it can have a big impact on the, on the quality
20 of your growing workforce.

21 So as I was saying, we're all over the place on,
22 on what early education is, what we call it, what we do
23 with it and that is because public policy is all over the
24 place on it. So this is what most families confront when,
25 you know, when they go out to look for an early childhood

1 program. We can see at the top is we've got all sorts of
2 different ministries who are involved in the provision of
3 some aspects of early childhood programming. They are
4 usually, you know, have some sort of relationship, you
5 know, at the local level with other agencies that provide
6 programming as well and then when it gets down to the, to
7 the community, this is what parents have to navigate. And
8 we found this in scans that we have done for the early year
9 studies, in scans that we did for other government
10 commissions that we worked on and that this is very
11 pervasive. It's found in the international literature as
12 well is that when you don't have somebody in charge of what
13 happens with, with the provision of early childhood
14 services, the problems are epidemic and they're the same,
15 is that they cover just sparse, not all families receive
16 the coverage that they're responsible for, location and
17 affordability are barriers for many attending. The
18 services don't, you know, the hours that the services
19 operate don't match the hours that parents need them. They
20 don't fit the parents' work schedule. And this is also a
21 big problem is that as the child ages, the child loses
22 services. So you can, you know, you can be in a service,
23 but oh sorry, this only goes up to age two or age three and
24 now you're out and now there's a big gap between what
25 happens to you now before kindergarten attends.

1 And with all due respect, you know, there are
2 many, many excellent services in Manitoba and with due
3 respect to your, to your political leaders and your very
4 hardworking government officials, I think that you rely
5 very heavy on Healthy Child Manitoba as this --

6 THE COMMISSIONER: Rely on what?

7 THE WITNESS: Healthy Child Manitoba.

8 THE COMMISSIONER: Yes.

9

10 BY MS. WALSH:

11 Q This is the first we've heard of it really in the
12 Commission, so if you want to elaborate on that.

13 A So Manitoba was the first in having a Healthy
14 Child committee of cabinet and I think that there are eight
15 different ministries which come together around the cabinet
16 table to discuss issues of interest to children and, and
17 youth. It is supported by Healthy Childhood coalitions at
18 the, at the local level which, which we see support from
19 the province. And the, again, does some really excellent
20 work but I would venture to say that it's not much
21 different than what other jurisdictions experience in that
22 you have everybody involved and nobody in charge and when
23 you have nobody in charge and everybody involved, this is
24 the kind of thing that you get at the community level.

25 Q So just before we leave this slide what, what

1 you're showing at the community level, I just want to make
2 sure that we understand what this slide shows. You've got
3 at the top the government ministries --

4 A Yes.

5 Q -- would be responsible for delivering the types
6 of services or traditionally have been responsible for
7 delivering the types of services, any one of them or all of
8 them.

9 A Right, um-hum.

10 Q And then the next level shows what?

11 A So these, these would be your local agencies, so
12 you know, your local public health authorities, your parks
13 and recreation play a role in often providing early
14 childhood programs, your cities and towns often take
15 responsibility for, you know, intervening, providing
16 programming as well. You have your community services
17 departments, again they play a role. And of course school
18 boards through the provision of kindergarten and nursery
19 schools play a major role in, in providing programming.

20 Q And then below that what do we see?

21 A And so below that what we have is a collection
22 of, a collection of different programs. So this is where
23 your question comes from, Commissioner. So some of them
24 were child care, some of them were parenting centres, some
25 of them were children mental health, some provide

1 preprimary. There's lots and lots of family resource
2 programs with all sorts of different names. There's pre-K
3 programs and, you know, we could have more here. You know,
4 the list goes on. They, you know, they sort of do the same
5 types of things. They all have the wellbeing of the child
6 at the heart of their mandate. They're all intended to
7 support families and children but they get their -- but
8 their specific mandate, their funding, their legislative
9 framework, et cetera, is all different. So I am a parent,
10 so as a parent my needs change and, you know, when I'm
11 expecting I need, you know, I need prenatal care. After
12 the baby is born I need post-natal care. You know, then I
13 need, you know then I may need some place to be with, you
14 know, with other children and families, you know, mother
15 and tot groups, those, those kind of things and then I need
16 to go back to work and then I need child care and my child
17 needs pre-school. But there is no continuation of services
18 which would, which would make those links for me. At every
19 step that I, you know, that I took I would have to do the
20 research myself. I would have to, I would have to, you
21 know, look around and find what programs there are, hope
22 that I met the criteria, hope that they met, you know, the
23 hours, you know, when I needed them and didn't operate, you
24 know, every Thursday and one Friday a month, which many of
25 these do, right.

1 And so then what we have at the, in the Manitoba
2 context, and Manitoba is not alone, is we have what's
3 called community coalitions of the service providers, so of
4 the folks that provide the family resource programs and the
5 various pre-K and nursery school and child care program and
6 they're, you know, tasked with sitting at the community
7 level trying to, you know, deal with the gaps and the
8 duplications and the chaos which is, which is out there and
9 they don't have the capacity to because they don't control
10 legislation, they don't control funding. They, you know,
11 they are doing the best that they can with what they've
12 got, but they're given a responsibility without being given
13 power and resources in order to in fact create a coherent
14 early childhood system.

15 THE COMMISSIONER: So you're saying that's an
16 imperfect world?

17 THE WITNESS: It's a, it's a very imperfect
18 world. I mean when we think of it, children turn, you
19 know, school age and there is a place for them. You go
20 into every community and there's the school and that's
21 where, you know, children go between the time that they're,
22 you know, five and a half and 16. You're younger than
23 that, where do kids go?

24 THE COMMISSIONER: What would make it a perfect
25 world?

1 THE WITNESS: Well what would make it a perfect
2 world, because you know we're actually spending a great
3 deal of money on these little bits and bump. In fact, I
4 was involved in a, in a meeting earlier this, this month
5 with some folks from Point Douglas --

6

7 BY MS. WALSH:

8 Q In Winnipeg?

9 A In Winnipeg. So a rather small community in the,
10 in the north end, and there's 80 million going into these
11 agencies, you know.

12 Q Eighty million dollars?

13 A Eighty million dollars going into these agencies.
14 Another 120 million is going into, into health and schools
15 through --

16 THE COMMISSIONER: Where? Where?

17 THE WITNESS: In Point Douglas in northern
18 Winnipeg.

19 THE COMMISSIONER: That --

20 THE WITNESS: In north Winnipeg, sorry.

21 THE COMMISSIONER: Who's putting that kind of
22 money in?

23 THE WITNESS: It comes from, a lot of it is, a
24 lot of it is public money, both from these various
25 ministries, you know, provide little pots and grants of

1 money. They'd also get money from, you know, from the
2 municipality and the school board.

3 THE COMMISSIONER: And you're saying it totals
4 200 million dollars?

5 THE WITNESS: Right. And it looks like this on
6 the graph --

7 THE COMMISSIONER: Where do you, where do you get
8 those statistics from?

9 THE WITNESS: Because the, because the community
10 itself did a scan of what programs were available and how
11 much they, and how much money they received.

12 THE COMMISSIONER: On what, over what period of
13 time?

14 THE WITNESS: This is an annual, this is an
15 annual amount that goes into the community.

16 THE COMMISSIONER: Are we going to get more
17 information on that? Or is this the witness that has that
18 information?

19 MS. WALSH: This is something that the witness
20 just told me about based on a meeting that she was just
21 recently at, but ...

22 THE WITNESS: I can get you more information on
23 it if you'd like.

24 THE COMMISSIONER: Is that a meeting that you
25 were at in Winnipeg?

1 THE WITNESS: It was a meeting that I happened to
2 be at in Toronto where there were a number of people from
3 Winnipeg there and it was because they were discussing in
4 fact adding another dot to that, to the bottom of the page
5 there. So I was asked to talk them through.

6 THE COMMISSIONER: So you're saying that kind of
7 money is going into one small geographic area --

8 THE WITNESS: Yes.

9 THE COMMISSIONER: -- within this city?

10 THE WITNESS: That's right.

11 THE COMMISSIONER: On an annual basis?

12 THE WITNESS: Yes.

13

14 BY MS. WALSH:

15 Q In a manner that in your view is not effective?

16 A In a manner that in my view is, is not effective
17 because that community still is experiencing the same
18 problems as we see not only in Winnipeg but elsewhere and
19 parents are still, have the same, have the same challenges.
20 They can't find --

21 THE COMMISSIONER: Do you know who, who the donor
22 is of that money?

23 THE WITNESS: That would be -- yes, every one of
24 those agencies would have, would have contracts, would have
25 relationships with one or more of those ministries, often

1 more than one. They would also have contracts with one or
2 more of the local agencies. And in addition, they all get,
3 they all go after private funding, they all do their own
4 fundraising, et cetera.

5 THE COMMISSIONER: In addition to the 200
6 million?

7 THE WITNESS: Yes.

8 THE COMMISSIONER: And is the 200 million
9 provincial money?

10 THE WITNESS: It would be -- well it's money that
11 comes from governments in Manitoba, so either at the
12 provincial level or at the local level.

13 THE COMMISSIONER: Well we should find out more
14 about that.

15 MS. WALSH: Well, I think, I think that that's
16 reflected -- I mean we can find out more about the specific
17 information that the witness is telling us about, but I
18 think it's, it's just an example of what this slide is
19 demonstrating generally and it has been found to be the
20 case in research across the board that as the model this
21 type of -- I mean the slide that you call chaos, you said
22 first of all from the parent's perspective, in terms of
23 accessibility and outreach, it's a complicated process to
24 maneuver through until you get to the school age system --

25 THE WITNESS: Um-hum.

1 MS. WALSH: -- is that right?

2 THE WITNESS: That's right.

3

4 BY MS. WALSH:

5 Q And then from a cost benefit perspective, it is
6 not cost effective to deliver services on this non-unified
7 basis.

8 A Right. And, and --

9 Q And we're going to see more about this in the
10 presentation.

11 A Yeah. And this is difficult for families with
12 resources, English is their first language, you know, who,
13 who come to the, you know, who come to parenting with, you
14 know, with common resources. If English isn't your first
15 language, if you're disadvantaged, if you have to, you
16 know, literally, and we have examples of parents who take
17 four different buses in order to get to the program that
18 they want to get to, it becomes, it becomes more and more
19 challenging. And what we see is even parents who have been
20 referred to and get into intervention services is their, is
21 their rate of compliance is actually very low and that is
22 because one kid needs the service but I've got two other
23 kids and, you know, what am I supposed to do with the two
24 other kids while this kid is getting speech and language
25 but this kid needs, you know, help with their, with their

1 motor skills. So we, we -- you can look at the case file
2 of these families and think that, oh, they're doing okay,
3 we're providing them with the services that they need, but
4 we never think back to the parent and think about all
5 right, how does the parent manage to get the child to all
6 of these services without, you know, without, without the
7 resources to do so. And this is why I will go on and talk
8 about why I think that the school as platform for
9 delivering both these, what should be universal services
10 like, like pre-school education and care, that the schools
11 make a good place for those to deliver those sorts of
12 universal programs. They're also good platforms for
13 delivering those special intervention programs so that in
14 fact you have the service providers coming to the parents
15 rather than making parents, particularly vulnerable parents
16 run around town looking for what they need for their kids.

17 THE COMMISSIONER: Now before you leave that
18 slide, you introduced it by talking about Healthy Child
19 Manitoba.

20 THE WITNESS: That's right.

21 THE COMMISSIONER: And is that -- are we going to
22 hear from the deputy minister of the department who
23 administers that program, is that right?

24 MS. WALSH: That's correct, a week today.

25 THE COMMISSIONER: All right. You made the

1 statement that with respect to Manitoba, I gather not being
2 different necessarily from other jurisdictions, everybody
3 involved and nobody in charge.

4 THE WITNESS: That's what I would say, yes.

5 THE COMMISSIONER: All right. I want to know on
6 what, on what basis do you reach that conclusion with
7 respect to the situation in Manitoba?

8 THE WITNESS: Because this is the sort of results
9 that you get when you have everybody involved and nobody in
10 charge and this what, this is unfortunately what you have.

11 THE COMMISSIONER: Well is there a way of getting
12 somebody in charge?

13 THE WITNESS: Yes, and I will talk about that
14 later is that what we see, the trend both internationally
15 and in other jurisdictions in Canada is that jurisdictions
16 are merging these functions under a single ministry.

17 THE COMMISSIONER: But at this point in time, if
18 you look at the Manitoba situation, the description
19 everybody involved and nobody in charge is applicable in
20 your judgment.

21 THE WITNESS: Yes.

22 THE COMMISSIONER: Okay. And --

23 THE WITNESS: And I think that if you looked at,
24 if you looked at government, government documents and
25 policy papers which look at some aspect of early childhood

1 programming and don't look at others or exclude others, I
2 think that that would also provide evidence that in fact,
3 even though there's supposed to be this umbrella, you know,
4 encompassing of these services, that in fact that doesn't
5 take place, that there isn't those linkages.

6 THE COMMISSIONER: Well I look forward to hearing
7 your solution.

8 THE WITNESS: Well --

9 THE COMMISSIONER: And I'm not --

10 MS. WALSH: She does come with them.

11 THE COMMISSIONER: I'm not trying to rush you.

12 THE WITNESS: Okay.

13 MS. WALSH: There are definitely solutions in the
14 evidence.

15 THE COMMISSIONER: Okay. I have the patience to
16 wait.

17 MS. WALSH: Thank you. I know you do.

18 THE WITNESS: Okay, so here's, you know, here's
19 the challenge that most of us in the Anglo-American world
20 deal with when we look at early childhood services is that
21 what we've seen is over the, over the years there's almost
22 like a Darwinian split is education went off in one area
23 and all early childhood services, other early childhood
24 services went off in others. They are mainly, they are
25 mainly considered welfare type services, there for

1 disadvantaged families, where education is a universal
2 service for all. But even with under these, these welfare
3 type, type programs they all, they operate under different
4 legislation, they have different funding mechanisms, they
5 have different delivery structures. So it's difficult for
6 the families and the children but it's also difficult for
7 the service providers. They don't have the tools in order
8 to, you know, to meet the needs of the families that
9 approach them. So that we're seeing that internationally
10 and in Canada that jurisdictions, based on the evidence
11 which is common throughout the Anglo-American world, that
12 they're beginning to name a lead ministry that's
13 responsible for the education, care and providing of family
14 supports. And that when this has happened, both at a, you
15 know, both where it's put in place as a, as a mass level
16 and in the many demonstration sites that I personally have
17 been involved in but are also in operation in other
18 jurisdictions like the U.K. and Australia is we find that
19 when we bring all those balls together that we saw on that
20 last slide and deliver them from an integrated stable
21 platform is you not only get more families served and in
22 ways that they want to be served, that the quality of the
23 programming goes up and that it's more cost effective
24 because you're not paying for service gaps and overlaps.

25 THE COMMISSIONER: In that middle dot are you

1 talking about the whole education department?

2 THE WITNESS: Um-hum.

3 THE COMMISSIONER: What, from early childhood to
4 12, grade 12?

5 THE WITNESS: From early childhood to the end of
6 secondary school.

7 THE COMMISSIONER: Yeah, which is grade 12.

8 THE WITNESS: Yes. So here are the, here are the
9 sorts of policy trends that, that we've been seeing happen
10 across the, the country. We've divided them into five
11 areas, sort of what the governance is, what the policy
12 framework is, what they're doing about improving the
13 standards of the workforce, the content of the program and
14 how they involve, involve parents. So number one, and
15 we'll look at it more is you name a lead ministry.
16 Somebody has to be in charge and it's not just about moving
17 everybody under the same roof but they still keep their
18 own, their own little (inaudible) is you actually merge the
19 functions which, which folks are responsible for is where
20 it's been most successful there has been units put in place
21 which focus on, on the needs of young children and families
22 where you put staff who actually have an expertise in that,
23 in your department. You have dedicated funding for, for
24 early childhood because it's, because early childhood is a
25 relatively short span in a child's life. It is easy when

1 you're having difficulties later on to siphon off from
2 young kids in order to intervene, you know, with teens that
3 are having problems. So having dedicated funding for, you
4 know, for our youngest children seems to be an important
5 part of the strategy.

6 When we look at the strategy they are holistic,
7 they are -- you know, we're not only dealing with four or
8 five-year-olds or three-year-olds or two, three, four,
9 five-year-olds, and there are many strategies that just do
10 that, but actually looking at a comprehensive strategy from
11 conception through to about grade 2 or 3, again where
12 children are making that leap from learning to read, to
13 reading to learn. You build quality into it, providing a
14 lot of programs. If they're poor quality are not going to
15 give you the, the outcomes that you want. You build in
16 research and, and evaluation. As much as possible you
17 reduce the transitions for children and families as they
18 age out of one program and move, and move into the next.

19 We see that jurisdictions are paying attention to
20 the people who work with young children and families,
21 ensuring that they are trained in, in early childhood and
22 how to work effectively with, with parents. There's
23 attempts made to narrow the qualification gap. As we know,
24 you know, teachers are unionized and supported and teachers
25 who work in the public education system receive a lot of

1 benefits. We don't see those same benefits for educators
2 who work in the community sector, who work in all those
3 disparate programs that are, are out there that because the
4 field is changing so quickly, ongoing professional
5 development is important. And, you know, when we see
6 countries that are the stars of education, like Finland,
7 there are more people clamoring to get into teacher's
8 college than there are to get into medical and law school
9 and that's because there is a respect for the profession
10 and it's something that we need to, that we need to think
11 about, that if we want, if we want to get the best into the
12 profession then there has to be a respect for it as well.

13 In terms of the content of the program, you know
14 what the actual curriculum framework is doesn't seem to be
15 as important as that you had one. Because when you have
16 one you can adapt it, it becomes a living, it becomes a
17 living dock.

18 And I want to talk here a little bit about what
19 is happening in, what's happened in other jurisdictions
20 where a large percentage of the population are aboriginal
21 children. So we do have a very nice example out of
22 New Zealand where curriculum was developed between the, you
23 know, the colonial population and the aboriginal population
24 and it's used in all early years settings and it combines
25 the values of the first peoples with the, with those who

1 came, who came later and the, and the idea is, is that it's
2 when we address aboriginal education, it's usually
3 something that we provide to aboriginal kids. But
4 aboriginal peoples are so much an important part of who we
5 are as Canadians and we know that as Canadians we have
6 absolutely, we have almost no knowledge across the board of
7 aboriginal history, reality and the way aboriginal culture
8 has, has affected many, many aspects of our, of our life.
9 So it's very important if we're going to have a pluralistic
10 society, if we're going to have social cohesion, if we're
11 not going to have these gaps between for too many people
12 that's living in third world conditions, there has to be a
13 greater understanding between our two, between the two
14 solitudes here.

15 I want you to be on the outlook for a new
16 curriculum coming out of the Northwest Territories which I
17 think is going to be a marvelous gift to Canadian
18 educators. It, it combines the, you know, the culture, the
19 knowledge and the practice of the Northwest Territories 11
20 founding peoples, nine aboriginal peoples and the French
21 and the English speaker. So it can be done and that is one
22 of my -- I make three recommendations and I think that this
23 is, and this is one of them that you, that a real effort is
24 made to have a curriculum and a curriculum that
25 incorporates aboriginal knowledge and that is used not only

1 in aboriginal settings but in all early education settings.

2 THE COMMISSIONER: And when is that coming out of
3 the Northwest Territories?

4 THE WITNESS: They are -- I think that you should
5 see it before the end of this year. I mean it's ready,
6 it's being, it's about to be launched. Their launching is
7 part of a whole relook at their early childhood education
8 service delivery.

9 THE COMMISSIONER: Is it confidential at this
10 point?

11 THE WITNESS: I don't think so. I think that
12 they've been actually sharing it. Probably your education,
13 your education folks have seen it because they've been
14 asking for feedback on it, so. I'm sure if the Commission
15 asked for a copy of it they would be able to get it.

16

17 BY MS. WALSH:

18 Q And is that through their Ministry of Education?

19 A It's through their Ministry of Education. They,
20 under their -- they have, their early childhood sector is
21 integrated into their Ministry of Education.

22 We also talk, the trend is also for parents, that
23 if early childhood education is to be available except for
24 a privileged few, that there is various ways that you can
25 go, that jurisdictions can go about to doing that. One is

1 to provide free access, at least for a part of the, of the
2 day. You could lower -- you know since cost is such a
3 barrier to participation, you can lower the school age.
4 You can put ceilings on fees and support, but the most
5 important thing is you have to involve families in the
6 early education of their, of their children. Having, you
7 know, an open door policy where parents are welcome all the
8 time, really begins to change the nature of the program and
9 when these programs are located in school, they tend to
10 change the culture of the schools as well and that's
11 something that research is, is showing.

12 Q Let me ask you something then just on that. Of
13 course in this province we have people who live with the
14 legacy of residential schools.

15 A Um-hum.

16 Q So when you talk about the school being the
17 platform from which these integrated services could be
18 delivered, have you ever addressed any concerns or
19 potential concerns, have you seen any concerns about a
20 reluctance on the part of people who have had that history
21 with residential schools to come to the school?

22 A Certainly I haven't had extensive working
23 directly with First Nations people. I am involved in one
24 integration site at, with Kettle Point First Nations and
25 they are integrating their early education with their, with

1 their education system and, yes, the early childhood
2 educators have, you know, have concerns. But what we hear
3 consistently is I want my child to do well in school,
4 right. They recognize the children are going to go to
5 school, they want their child to do well in school and they
6 want to be involved in, you know, they want that school to
7 be a community place. And what we find is that when you
8 integrate early education with, with education for older
9 children, is because you can't get parents to come into the
10 school with their babies, like I mean babies don't attend
11 on their own, they come with their parents. So that when
12 you have, when you start to see your school halls filled
13 with, you know, parents and babies and toddlers, it takes
14 on a different feel. And parents get used to coming into,
15 into classrooms so that when their children enroll in
16 kindergarten, they don't, they don't accept that they can
17 no longer come into the room, right. They, they begin to
18 insist that they, that they are part of the children's, of
19 their children's learning. And we know that outcomes for
20 kids who do, that kids who do well in school, their parents
21 are involved.

22 THE COMMISSIONER: In what's coming out of the
23 Northwest Territories, is that integration taken into
24 account, do you know?

25 THE WITNESS: Oh yes, it's very -- it's, it's

1 absolutely integrated into it. It's very, very
2 heartwarming to see the way -- the way that parents are
3 talked about, not as something that we need to teach and
4 learn and direct, but as people who bring strengths into
5 the program and expand the capacity of, of the program. I
6 think that they have great children's rights language in
7 their, in the curriculum that should be, that should find a
8 voice elsewhere.

9 MS. WALSH: Thank you.

10 THE WITNESS: So this is what's happened, this
11 was in the early year's study. We updated it in 2013, so
12 that you can see the change that comes. When we did the
13 2007 early years study, not one province had integrated
14 oversight of, of early education and education for older
15 children. So we now see that it's under discussion in
16 Newfoundland, PEI, Nova Scotia just integrated their
17 departments. New Brunswick, Quebec is, is now moving their
18 early, their kindergarten system down. Ontario has merged
19 theirs as has Saskatchewan. And they are picking up on
20 these other recommendations that we're seeing in the
21 international evidence that they have specialized units
22 which are responsible for the oversight of early education
23 and care, that they developed a common policy of
24 frameworks, et cetera.

25 So, you know, we have gone from, from a

1 relatively short period of time, jurisdictions hearing the,
2 hearing the evidence and recognizing the advantages that it
3 can provide and taking the steps to in fact merge those
4 functions. So that we have a holistic look at children and
5 a holistic look at families.

6

7 BY MS. WALSH:

8 Q And you would add to this now the Northwest
9 Territories?

10 A Yes. Sorry, this is only looking at the
11 provinces but both the Yukon and the Northwest Territories
12 have also merged their early education care services.

13 So this is just, again this is from 2007, looking
14 at the changes that have taken place. We now have seven,
15 we now have seven jurisdictions that are offering full day
16 kindergarten for five-year-olds and we also have five, five
17 jurisdictions that are delivering programming for, through
18 the school system for, for younger, younger children,
19 sometimes age three, sometimes age four. Often though that
20 is, that is targeted to, to low income neighbourhoods.
21 Ontario was providing universal preschool for all four-
22 year-olds and Quebec is going to move, is in the process of
23 moving universal pre-K down to include four-year-olds as,
24 as well. And Ministries of Education, Ontario and BC,
25 widely provide parent-child drop-in programs within their

1 school. So these are all school directed programming.

2 You're going to see in a later slide that we've
3 seen a big increase in access to early childhood education.
4 The majority of it has come through, through public
5 education and school boards becoming involved in early
6 education and it's largely because schools know that if
7 they want to change outcomes for kids they have to get them
8 earlier than when they enroll at grade one or in
9 kindergarten.

10 THE COMMISSIONER: Did you say that's 2007 data?

11 THE WITNESS: No, this is the change from 2007.
12 In two thousand --

13 THE COMMISSIONER: From 2000 to 2013.

14 THE WITNESS: In 2007 none of this existed.

15 THE COMMISSIONER: This is current as of two
16 thirteen?

17 THE WITNESS: That's right.

18 Again, this is the changes that we've seen since,
19 since 2007, so that you know, almost all provinces have a
20 curriculum for early childhood, that they're looking at
21 expanding at the, you know, the framework into, into the
22 early grades. And why I'm making a point about this, it's
23 maybe not of interest to this, this Commission, but in the
24 field there's a lot of concern about oh, if the school
25 moves down to encompass younger kids, then we'll see them

1 applying inappropriate academic, you know, challenges and
2 monitoring and testing to, to young kids and in fact that
3 hasn't been the case. It's worked the opposite way, is
4 that early childhood approaches are being extended into the
5 early grades of primary school rather than the other, other
6 way around.

7 There's been steps taken to raise the
8 qualifications of the early childhood workforce. The early
9 development instrument which is something that I mentioned
10 earlier as being one of the recommendations out of the
11 first earlier studies and by the way, is very well used in
12 Manitoba. It gives you -- there's a wealth of, of
13 information that you can get from the, from the EDI which
14 can guide your work here. And there's also been more
15 attention to jurisdictions reporting out to their publics
16 about what they're doing around early childhood and again,
17 Manitoba is rather good at the public reporting.

18 So this is 2010 and we're looking at, at
19 attendance by two to four-year-olds of children who
20 regularly attend an ECE centre. When the OECD did its
21 review of Canada in two thousand and, reported out in 2006,
22 of all of the OECD member states, Canada had the lowest
23 spending on early childhood education programs and our
24 children were least likely to attend an early education
25 program. So this, this -- that was 2006, this is 2010 and

1 so we see that on average about 52 percent of youngsters
2 now regularly attend an ECE program. That average is of
3 course brought out by, by Quebec, that's who has been a
4 leader in this, in this area. It's about 43 percent in
5 Manitoba.

6

7 BY MS. WALSH:

8 Q And seeing Quebec as a leader, you're also, later
9 in your presentation, going to talk about not only the
10 effects on children and families, but the economic benefits
11 that have flowed from these figures?

12 A That's right. When we look at spending, again
13 the 2006 report, Canada came in last in terms of spending
14 on early childhood education programming. This looks at
15 the percentage of provincial budgets in 2011, 2012 that was
16 devoted to public spending on early, on early education.
17 By comparison, provinces spend about a third of their
18 budgets, you know, go to the education of older children,
19 so --

20 Q A third of their budget as opposed to?

21 A As opposed to the percentage that we're,
22 percentage that we're seeing here for children under, under
23 five.

24 Q So that would be money that's directed at
25 kindergarten to grade 12?

1 A That's right.

2 Q And of course the evidence that you showed us
3 this morning is the effects of focusing on children for
4 that age, in terms of their ability to learn --

5 A That's right. In terms --

6 Q -- and succeed.

7 A In terms of changing trajectories for children in
8 learning and social and emotional challenges, it's not that
9 you can't do anything after, after children reach school
10 age. In fact we have huge special education budgets to
11 show the efforts that schools are putting in to changing
12 outcomes for these, for these kids. But if you want to
13 intervene where it's most effective, least damaging for the
14 child, least problematic for the, for the family,
15 intervening in the earliest years is the most effective.

16 So one of the things again Canada was the lowest
17 under, most stingy when it came to spending on, on young
18 children. The OECD and the European Union are recommending
19 about one percent of GDP be devoted to spending on early
20 childhood. That translates into about five percent of our
21 provincial budget. So we see that really no province is
22 making that benchmark yet. But I will say in the defence
23 of Canada is we've reviewed provincial budgets for this
24 year, for 2013 and every jurisdiction is either, even
25 though they're making some deep cuts in other areas of

1 public spending, have either held the line on spending on
2 early childhood or have increased their budgets. So again,
3 we're seeing that provinces, our jurisdictions are hearing
4 the early years message.

5 Q Anybody getting close to that five percent?

6 A Only Quebec so far. Ontario, by the time that
7 full day kindergarten rolls out should be close to it as
8 well.

9 MS. WALSH: Mr. Commissioner, I know that we're
10 just, we're after the time that we normally take the mid-
11 morning break.

12 Ms. McCuaig, would this be an appropriate time
13 for you to take a break? We generally take a 15 minute
14 mid-morning break.

15 THE WITNESS: That's fine with me.

16 MS. WALSH: Works with your presentation?

17 THE WITNESS: Um-hum.

18 MS. WALSH: Okay.

19 THE COMMISSIONER: Yes, I hate to sort of
20 interrupt the way it's flowing, but it has to happen --

21 MS. WALSH: Yes.

22 THE COMMISSIONER: -- so we'll do it now.

23 MS. WALSH: Thank you.

24

25 (BRIEF RECESS)

1 BY MS. WALSH:

2 Q All right. You're ready to continue?

3 A Yes.

4 Q Good. Please go ahead.

5 A So we left at looking at what, what spending is.
6 It's about only Quebec is coming close to meeting the
7 benchmarks that has been advised by the OECD. What we do
8 do quite well on, however, is monitoring and these are
9 jurisdictions that are using population health measuring,
10 monitoring tools using the early development instrument,
11 which is used in schools. It's administered by
12 kindergarten teachers and it looks at the social,
13 emotional, cognitive and physical health of, of children.
14 And as I was saying before, it proves to be a very --
15 really it's not a measure of how well kids are doing in
16 school, but it's measure of how effective the early
17 learning environments of the child was before they came to,
18 to school. It's used by jurisdictions to help in the
19 planning of services and the direction of resources. It is
20 often fed to local communities to make them aware about how
21 well their children are, are doing. But it is important
22 insofar as that it's looking at the health and wellbeing of
23 children as a whole and not, you know, narrow, narrow
24 pockets of children and not only a few, a few defined
25 skills. So it's been, it's, it's been an important tool to

1 inform public policy making. As I said, Manitoba uses it,
2 has a great deal of data and uses it very well and links it
3 across the life cycle.

4 As one of the products of the Early Years Study 3
5 was the early education report and in the early education
6 report we really take a snapshot of emerging early
7 childhood education system across. We were only able to
8 get information for the 10 provinces. Sorry it does not
9 include the territories. But it looks at five categories
10 reflecting the policy lessons that emerge from the
11 OECD's review of early education and care for its member
12 states.

13 So the first category that we looked at was
14 governance. So it'd ask is there, is there -- sorry, sorry
15 it asks is there split governance of early childhood
16 services or do they have coherent direction and sound
17 service management. It looks at funding. It is adequate
18 to support program quality and to provide reasonable
19 access. It looks at access. Is full day kindergarten, is
20 full day kindergarten available? Do at least half of
21 children two to four years old attend an ECE program? Are
22 programs accommodating of children with special needs? It
23 looks at the early learning environment, so how dense is
24 the training of the early childhood educators? Is there
25 professionalism of the, of the workforce? Has a provincial

1 curriculum been, been put in place? And are the salaries
2 of the workforce reflective of the important work that
3 they, that they do?

4 The last category that we looked at was
5 accountability. So are provinces meeting the reporting
6 requirements? One of the agreements in the federal,
7 provincial, early child development initiative and in the
8 framework for early childhood education and care, which are
9 federal, provincial agreement, provinces agree to report
10 regularly on their spending on early childhood in this
11 area.

12 So a full score would be, would be 15. The sort
13 of leader, not surprisingly, I think you'll know is Quebec.
14 PEI came in, in second and this is because PEI, in a very
15 short time, between, starting in 2010, completely revamped
16 the way they provided early childhood services, really
17 moving from being a cottage industry into, into a system.
18 Manitoba hits the halfway mark at, at seven because
19 Manitoba has a good start on managing its services but, but
20 could do better.

21 THE COMMISSIONER: But is still third.

22 THE WITNESS: It's, it's third and it's halfway,
23 so room for improvement.

24 THE COMMISSIONER: Oh I get that.

25

1 BY MS. WALSH:

2 Q And the portion, I mean different -- if you look
3 at, at how they get there, access, the portion relating to
4 access is smaller compared to some of the other
5 provinces --

6 A That's, that's right.

7 Q -- and is that important?

8 A Yeah, access is very important. If you don't
9 attend, you don't get the benefits.

10 Q Right.

11 A Yeah. But it's, you know, it has it's -- it
12 spends a lot of -- you see it does very well on
13 accountability so it's good to measure but you should also
14 be measuring good stuff. It's has paid attention to the,
15 to the learning environment but, and it is one of the
16 provinces that makes access for children with special needs
17 a condition of, of receiving public funding so it has
18 addressed an important equity issue there. It could catch
19 up on governance, on spending and on access are areas that
20 need, that require attention.

21 Q Well I think the evidence we heard from the
22 government a couple of days ago was that as part of their
23 poverty reduction strategy, there is now space in regulated
24 day care for 23 percent of the population, is that --

25 A Right.

1 Q -- am I right on that?

2 A And we're going to look in more depth at the
3 economic analysis of the impact that low cost, early
4 education and care has had on Quebec and you'll see it as
5 being an important driver in reducing incidences of family
6 poverty. So I would say that you cannot have an effective
7 poverty reduction strategy without making a major
8 commitment to early education and care.

9 So the biggest recommendation, or the overall
10 thrust of Early Years Study 3 is, is using our schools more
11 effectively. Instead of -- schools form about a third of
12 provincial spending on schools, spending about, take up
13 about a third of provincial spending but, you know, they
14 operate from 9:00 to 5:00 for 10 months a year. They're
15 really, they really are under utilized, you know, public
16 assets that we have.

17 THE COMMISSIONER: I just missed what you said.
18 Did you say you were coming to the second main
19 recommendation?

20 THE WITNESS: This is our main, main
21 recommendation is to better utilize schools in order to
22 provide holistic programming for, for families.

23 MS. WALSH: And we'll summarize Ms. McCuaig's
24 recommendations at the end, Mr. Commissioner.

25 THE COMMISSIONER: Okay.

1 THE WITNESS: And one thing that we should be,
2 that we should be aware of in Canada is we've done public
3 education rather well. We have the highest rate of our
4 children attending public education of any of the Anglo-
5 American countries. There's still a great deal of faith
6 that parents, even affluent parents have in public
7 education. But we're beginning to, we're beginning to show
8 the cracks which would be an indication that we haven't
9 been keeping up with, with changes in the social economic
10 context that modern families are experiencing.

11 And the, you know the point of using -- you know,
12 schools are in every neighbourhood. They -- you know and
13 schools can either be the center of their community or they
14 can be a place that, you know, sort of grabs and takes
15 children for five or six hours a day. And you can really
16 see in developing, particularly working on the three
17 government commission reports that I did, must have visited
18 300 schools in different parts of the, of the country
19 during that, during that tour, and you could tell right
20 away when you walked into a school whether it was family
21 friendly or not, such as were the parents waiting on the
22 sidewalk to pick up their children or could they come in
23 the door and actually greet them at the, at the classroom
24 door and speak to their teachers. Did you walk in and the
25 first thing that you saw was no parent or visitor past this

1 point or was there, you know, or was there all sorts of
2 information there to welcome families into the, into the
3 school. Did children run up and wrap their arms around the
4 principal and their teachers, or as some educators would
5 tell me, I have a zone of no touch, children are warned not
6 to come any closer than arm's length towards me.

7 So many of this is anecdotal but it doesn't take
8 long and seeing many schools between walking into one and
9 knowing whether or not this is a real asset for the
10 community or this is one whereas some parents would tell us
11 just the look of the red brick made my, sick to my stomach
12 and I felt so horrible having to drop my baby off on their
13 first day of kindergarten.

14 So that when we transform schools into these,
15 these community and family centres we're really, we're
16 really doing all sorts of things. In addition to
17 expending, expanding opportunities for children and
18 families, we're creating a place of social cohesion. We're
19 creating a meeting place in, in neighbourhoods which
20 develops the social cohesion of a community and in the
21 absence of that social cohesion the, what gets left is
22 isolation and when families are isolated, those are
23 breeding grounds for, for neglect. Those are breeding
24 grounds for circumstances like Phoenix.

25

1 BY MS. WALSH:

2 Q Well let me ask you, what a recommendation like
3 the one you're making to transform a school into more than
4 just a school but also a community centre, what effect, if
5 any, does that have on the visibility of these preschool
6 age children?

7 A Well because preschool children are seen as being
8 part of the school, the school community, preschool
9 children and their families, not just their parents,
10 they're extended families are seen as being part of the
11 school community. They are under the eyes of the
12 community. They are -- there are mechanisms to -- I mean
13 really when you think of it we see preschool children at,
14 at maybe three entry points. We see them at birth,
15 sometimes we see them when they go for their, you know, get
16 their immunizations and their baby check-ups, so through
17 those health contacts, and then we don't see them again
18 until, until school. There's no, there's no other, you
19 know, mandated public content, connection between young
20 children and public agencies, exist in no other part of the
21 life cycle. You know, we know where -- we know that kids
22 are in school. When we reach adults, you know, we have our
23 social insurance number. They know whether we're paying
24 our taxes. You know, we are known quantities throughout
25 all other parts of the life cycle. It's only during early

1 -- or the very, very vulnerable period of early childhood
2 that, you know, that there is not this responsibility, I
3 think this public responsibility for how well children are
4 doing that exists.

5 Q Thank you.

6 A What we have seen and, as I've said there have
7 been, you know, 15 ongoing demonstration sites in Canada
8 that I've been part of. There have been -- they have been
9 ongoing in Australia and in the U.K. and they're a strong
10 evaluation, components wrapped around, you know, what
11 happens when you actually begin to use the school as a
12 platform not only for education but for, but for care, for
13 before and after in summer school programming and bringing
14 in, you know, the intervention services, speech and
15 language, parenting programs, et cetera, into the school
16 and providing them as a, as a platform. What we see is we
17 see improvement in communications across the, across the
18 sectors. So speech and language talks to the teacher,
19 talks to the early childhood educator, talks to the family
20 support worker. You begin to get family profiles, right,
21 and are able to, you know, not just look at the problem of
22 the child but actually look at being able to support and
23 bring in the contribution of the entire, of families.

24 In many sectors, and I'm sure Manitoba is not
25 alone, is it provides viability to small schools and

1 particularly in small communities, in rural communities,
2 the school may be the only community centre that there is
3 but if it's only used as a school you can't really justify
4 maintaining it.

5 The other thing is we have this pretty good asset
6 in public education. There has been a long, long demand
7 from the 1968 Royal Commission into the status of women for
8 a, you know, national early learning in child care program.
9 There have been at least, you know, five commissions at the
10 national level which have, at the federal level, but have
11 looked at the viability of providing an early education
12 child care program. But instead of starting a brand new
13 program from scratch, you know, with everything that that
14 involves, attaching to the, to the school system which
15 already has, you know, buildings and assets and
16 infrastructure and research and data collection, is far
17 more cost effective and I think we'd begin to get the
18 results more than we would instead of trying to start
19 something all, all over again. And again, what the
20 research shows, you know, very, very clearly is that when
21 you bring it together you serve more families more
22 effectively. It's more satisfying for, for the family,
23 there's lots of evaluations around how parenting improves
24 when, when this happens. How much more satisfaction there
25 is for the professionals that work with children and

1 families because they don't feel that they're just working
2 with isolated pieces of a whole. And for the public
3 there's some accountability. Like you don't feel that
4 you're spending twice on the, you know, for many things.

5 Q So a couple of things. You mentioned when you
6 talked, described the types of service providers who could
7 be in the school you mentioned a family support worker.

8 A Um-hum.

9 Q And in fact we heard evidence yesterday from an
10 individual who as a front line social worker was housed in
11 a school. So that is something that, that these programs
12 that you've looked at have included?

13 A They all, they all include it. You know, and
14 depending on the community they -- you know, have some a
15 pediatrician on site because she finds it more effective to
16 actually be where, be where her families are than requiring
17 her families to come and visit her in some office some
18 place. So she's actually set up her office there. It
19 includes, includes a wide range of -- really it's what the
20 community has to offer. Instead of scattering out through
21 the community at large is you use the asset that you have
22 in the, in the school. And if you can't get it all into
23 the school under the school's roof, you ensure that there
24 is responsibility that, that the school provides a link and
25 link just isn't a phone number, for you to call and make

1 your appointment but there are actually people who are
2 dedicated to ensuring that families actually get to those
3 services.

4 Q And in the programs that you've looked at, did
5 they include families whose children were in care as well
6 as families whose children were not in care?

7 A Yes. In fact there -- and I'll, maybe I'll go to
8 this now. No, I won't. We'll talk about a study later.
9 It's a longitudinal study coming out of Ontario. One of
10 the things that, that it found and also there's a number of
11 U.S. studies which have found the same thing is that when
12 these programs were available is that there wasn't a need
13 to remove the child from the home. There was less need to
14 remove, to remove the child from the home. They're still
15 under, under a child protection order. But because there
16 was daily monitoring at the child who was attending the
17 early education program whose parents were attending the
18 intervention courses, that the need to in fact remove
19 children from the home was less problematic.

20 The other thing that they found is that many of
21 the courses that are provided to parents who have lost
22 custody of their children are the same courses that are
23 taken by parents who are, you know, confronting, you know,
24 the sort of difficulties we all have in raising, in raising
25 our kids and that when those, when those courses were

1 offered, so something like, you know -- I'm losing it
2 now -- The Incredible Years, I think it's The Incredible
3 Years is one of the courses that were, that have been used
4 quite extensively in the demonstration sites. When they
5 were taken by, by both the parents who had lost custody of
6 their children and parents who had not, is that the -- and
7 we're into year 6 of research not now, there has not been a
8 reoccurrence of the, of difficulties in any of the families
9 that took part in the integrated program.

10 Q Why do you think that is?

11 A Because they develop -- because isolation.
12 Because these sorts of conditions for, you know, for abuse
13 and neglect, you know, results when families are isolated.
14 And bringing -- instead of taking families who are
15 vulnerable and having difficulties and putting them off
16 with others like themselves, you know, who they don't want
17 to be identified with but actually integrating them into
18 the community and allowing them to make friends and to
19 learn from other parents and to know that there's, that
20 there is this place that they can come to on a regular, on
21 a regular basis, and it provides them with respite. You
22 know, here's a place where their children can go. Being a
23 parent 24 hours, seven is, is a hard, hard job.

24 Q I know, I agree.

25 A It becomes doubly, triply, quadruply hard when

1 you don't, when you don't have the resources. So it
2 provides parents with relief. It lets them, it lets them
3 concentrate on addressing their own addictions or health
4 problems or allows them to get a job. You know, maybe the
5 frustration is, you know, I'm poor, I don't have a job. So
6 these sorts of programs allow them to go back to school.
7 So they have some hope, you know, they have some hope,
8 they're not, they're not isolated. Much -- the indications
9 are that it's more effective than taking parents off and
10 giving them a dose of parenting intervention.

11 Q Okay. One more question before you change
12 slides. Do you know whether the kinds of integrated models
13 that you're talking about have been implemented in, for
14 example, a reserve setting?

15 A The only one that I'm aware of is the, is the
16 Kettle Point.

17 Q And was that successful?

18 A It's in, it's in the process and there's an
19 evaluation component that's wrapped, that's wrapped around
20 it. But we have an agreement with the First Nations that
21 we don't report on the results until they're ready to
22 report on them.

23 THE COMMISSIONER: And where is that located?

24 THE WITNESS: It's located in southern Ontario.

25

1 BY MS. WALSH:

2 Q Would there be any reason that you're aware of
3 that these kinds of programs couldn't be delivered in
4 schools on reserves?

5 A I mean when one looks at the challenges for
6 provincially operated programs, then add to that another
7 layer of having federal, the federal government and its
8 various departments that deal with First Nations, layer
9 that on top and then you can begin to imagine what First
10 Nations go through when it comes to try to provide coherent
11 services for their, for their children and families. Not
12 only that is across the board funding for schools on First
13 Nation has not kept pace with the funding that the
14 provinces have provided, so we're seeing this, you know,
15 exodus of qualified educators leaving First Nations to work
16 in provincial schools.

17 THE COMMISSIONER: So what's your answer to the
18 question whether this could work on a reserve?

19 THE WITNESS: Is yes.

20 THE COMMISSIONER: But ...

21 THE WITNESS: No, they have, they have more
22 challenges because there's more, because there's more
23 players which is why we got involved in working, which is
24 why two of the foundations that I'm working with, which
25 also includes former prime minister Paul Martin's

1 aboriginal initiative is involved in this community as
2 well. So, yes, there's more challenges to then providing
3 coherent services but where is aim, there is nowhere is
4 there a greater need for coherent services than on First
5 Nations. So this is, this is us piloting, you know, what
6 can be done to provide some coherence when you have both
7 the federal government and the First Nations governments
8 and provincial policy playing out in small communities.

9

10 BY MS. WALSH:

11 Q Thank you.

12 A Now it always comes down to, okay, so what does
13 it cost, right. So great ideas, like it, but you know
14 isn't this, isn't this expensive. So there have been, and
15 in the -- I won't go into them, in the appendix there is a
16 review of the cost benefit literature on public spending on
17 early childhood education. It is, it's quite, it's quite
18 compelling. In fact very recently we asked the chief
19 economist for the Toronto Dominion bank to use his offices
20 to do a review of the economic research and he released his
21 paper back in November 2012, you know, with a strong
22 conclusion that in fact these programs are, are effective,
23 are effective areas for, for spending and there are a
24 number of other folks from the financial side that are
25 taking an interest in this. But most of the, most of the

1 studies are other simulated economic models or particularly
2 from the U.S. you probably heard of the Perry Preschool
3 Study but there are small, random, controlled studies
4 dealing with very specific populations, often, you know,
5 very, very disadvantaged children in inner city U.S.
6 circumstances.

7 But what we have in our own midst is a, is a real
8 life example out of Quebec and Quebec starting in 1999
9 began to provide low cost, early education and care for,
10 for its families and now, as of now about 74 percent of
11 Quebec children regularly attend an early childhood
12 education program. And, and the Quebec government is now,
13 in order to catch all families it's moving its education
14 system down to include four-year-olds and they're doing
15 that specifically because they want, there's a concern that
16 childcare is only seen as something for working parents,
17 where school is seen as being for all kids. And they, and
18 they want to ensure that those children whose parents
19 aren't in the workforce who tend to be the most
20 disadvantaged, have an early education experience as well.

21 This study that I'm going to show you was
22 prepared for the, for our study, for the earlier study. It
23 was done by Pierre Fortin who is a well recognized and
24 decorated economist out of Quebec and his team looked at
25 Quebec system answering, to answer three questions really.

1 It's what's been the change in maternal labour force
2 participation since the program went through and how much
3 are these mothers, you know, spending and giving back in
4 taxes and how much less are they drawing down on social
5 programs that can be attributed to the existence of
6 accessible care.

7 So what we find is 70,000 -- between 2000 and
8 2008, 70,000 more mothers entered the workforce in, in
9 Quebec and we all know that there's been an increase in
10 mothers into the workforce across the, across the country,
11 but these mothers who are identified as the barriers to
12 their workforce participation being so, so great that
13 without low cost early education they would not have been
14 able to participate. So we're looking at the results from
15 these 70,000 more mothers who are working. They pay 1.5
16 billion annually in increased taxes and they draw down less
17 in social transfers. So obviously as you're income grows
18 you become eligible for fewer and fewer social, social
19 transfers for an annual savings to the Quebec, to the
20 province of Quebec of 1.5 billion. They boosted the GDP by
21 five billion dollars.

22 So Quebec mothers have -- Quebec, in 1999 Quebec
23 mothers were least likely to be in the labour force. Today
24 they are the most likely to group of moms to be in the
25 labour force. Poverty rates, family, child poverty rates

1 have been cut in half since the program was put in place.
2 The number of lone parents on social assistance has been
3 halved. It's gone from 90,000 on the rolls to 45,000 on
4 the rolls. Fertility, Quebec moms were once least likely
5 to have, you know, to have had children and now they're
6 having their second, third and more babies. And meanwhile,
7 Quebec student tests scores which had been below the
8 national average are now above the national average.

9 So in total they're thinking that when you
10 combine good early education and deliver it in such a way
11 that parents are able to participate in the workforce or to
12 upgrade their own skills, that for every dollar that Quebec
13 spends on its program it gets back a dollar five in
14 increased taxes and reduced family payments while the
15 federal government gets 44 cents, in the words of the
16 economist, for doing nothing. And actually this has become
17 a very important study in Quebec as the Quebec government
18 negotiates with the federal government for their share of
19 the 44 cents. So it's a -- and what makes this, I think, a
20 very compelling study is because it's not a simulation,
21 it's not based on a random controlled style. This is
22 what's happened when you actually have a critical mass of
23 children participating in a program and where you actually
24 free women to participate in the labour force, you get
25 these kind of results.

1 Q Now would there be anything unique about Quebec
2 that would make these results less likely in a province say
3 like Manitoba?

4 A No, not that I can think of.

5 Q Okay.

6 A I mean Quebec isn't Sweden.

7 Q Right.

8 A Like it's not -- you know, Quebecers, when this
9 program was rolled out, there wasn't a huge demand from the
10 population to give us early education and care. This was
11 the, this was the political will and leadership of, you
12 know, of the government party in Quebec. They made it
13 happen. In fact they made it happen in the face of
14 opposition and now it's a program that they couldn't turn
15 back if they wanted to. So when, when families begin to
16 feel the effect of it, it becomes a very, very popular
17 program, and as close to, you know, one's sense of identity
18 as health care and public education is to the rest of us.

19 Q Thank you.

20 A Oh, okay, so this is, this is a study that I
21 referred to earlier, it's called Better Beginnings, Better
22 Futures. It's one of the longest longitudinal studies that
23 ever happened in Canada. It looked at eight, eight
24 disadvantaged communities. These were all in Ontario and
25 communities were given a small amount of money, 500,000 a

1 year, in order to improve programming for their, for their
2 children. Of the eight sites, three of them focused on the
3 old, what they called the older child group, the four to
4 eight-year-olds, and the others focused on the zero to four
5 group. And what they found was, was surprising and
6 surprising to us all and that was when they looked at these
7 children at age 16, they found no difference for the, for
8 the zero to four group, no changes between, you know, the
9 communities and the controlled, the communities that we see
10 the extra intervention and the controlled communities.
11 They found major benefits to the older child communities
12 when compared with, with controlled groups. So that by
13 grade 12, in special education alone there had been a
14 \$5,000 savings so that many children had been diverted from
15 special education classes. There was less use of emergency
16 rooms. There was less use of child welfare and, and
17 justice, justice services. And when they, you know, when
18 the researchers tried to drill down and find why this
19 happened, you know, and it's all supposed to happen in the
20 early years, is what they found is that a relatively small
21 injection of funding, when it is layered on top of a
22 universal service like school you can have a big impact,
23 right, and we saw that in the older child group. When it's
24 layered on top of a patchwork as exists in early childhood,
25 you don't get any effects. And unfortunately when it comes

1 to public policy, this is what we do again and again. We
2 layer on another new boutique program. It gets to, you
3 know, provide an opening for an official. It gets to have
4 the branding of the current government -- sorry, it drives
5 me -- like it's very frustrating to, to see when there is
6 such need that public spending is used so ineffectively.
7 So that's the lesson from this, this story.

8 This is a -- every, every jurisdiction recognizes
9 that we are going through massive social and economic
10 changes. A lot of attention has been focused on early
11 childhood at improving human capital development. I think
12 that that is one of the benefits of early childhood. It
13 also provides young children with nice places to be and
14 nice places to be happy. But when for any jurisdiction
15 that is looking at improving the quality of their, of their
16 workforce and the quality of their workforce is going to
17 determine whether or not jurisdictions are, you know, make
18 it in the new knowledge economy or don't, then early
19 children is going to play a big role. And I'm just using a
20 quote from the head of the U.S. Reserve who is probably,
21 you know, the second most powerful person in the world, and
22 but we could find many folks of his ilk which will, which
23 have also looked at the evidence and conclude that early
24 childhood is the time to intervene.

25 I'm just going to leave you with this because I

1 think it is a, it's an important factor as it's something
2 important to think about as we, as we become more or less
3 enamored with what governments can, can do and in it we
4 compared social category risk that were at risk of poverty
5 in three groups. The first is families with children and
6 we compared the Nordic countries with Canada, the U.K. and
7 the United States and you see that, you know, the Nordic
8 countries they have a very robust family policy package and
9 poverty is kept quite low in families. Interestingly in
10 the Anglo-American countries, just having child, just the
11 entrance of a child into the family puts the family at risk
12 of poverty. In the Nordic countries we see that lone
13 parent status makes no difference to the wellbeing of the
14 family. It's a big risk factor in the Anglo-American
15 countries. But the interesting thing here is look at the
16 green bar and that's senior poverty. Canada is the world
17 leader in reducing senior poverty. This hasn't always been
18 the case. If you recall back in the sixties we were a, you
19 know, senior poverty was a national disgrace. We took on a
20 public policy package which involved the federal
21 government, the provincial government and we put together
22 something which really changed outcomes for, for seniors.
23 And so it shows that public policy does make a big
24 difference and what Canada did for seniors it now has an
25 opportunity to do for children, for families and children.

1 Thank you.

2 Q That concludes your PowerPoint presentation?

3 A That concludes my PowerPoint, yes.

4 Q Thank you.

5 MS. WALSH: Mr. Commissioner, I have still have
6 probably about 20 minutes worth of questions for this
7 witness. This afternoon's witnesses are not going to take,
8 I don't think, the full afternoon in any event. So I think
9 we're doing all right with time.

10 THE COMMISSIONER: Well are you going to carry on
11 now?

12 MS. WALSH: Yes.

13 THE COMMISSIONER: Yes.

14 MS. WALSH: Yes, absolutely. I just wanted to
15 sort of let you know where we're headed for the day.

16

17 BY MS. WALSH:

18 Q Manitoba is piloting an early childhood education
19 program at the Lord Selkirk Park Housing Corporation, part
20 of the Manidoo program and we're going to hear from their
21 executive director this afternoon, from Carolyn Young. The
22 program is using something called the abecedarian model.
23 You're familiar with that model?

24 A Yes.

25 Q Tell us about, about what it is and how it fits

1 into your presentation today.

2 A Well the abecedarian model is exactly what we've
3 been talking about is that you, is that you have a program
4 that children attend on a regular basis. Their parents
5 are, you involve their parents and that, but it also
6 provides opportunities because it also provides care, is
7 that parents are able to place, place their children in a
8 place where they are receiving the best early intervention
9 possible as they take care of their addiction problems, are
10 able to go back to school or to work. It was modeled in
11 Northern Carolinas, dealing with a very at risk population
12 there. It is a -- I have to say it is -- of the, of the
13 big random control studies that were done in the United
14 States, it is the most expensive because of the level of
15 intervention which, which takes place. I don't think that
16 makes it wrong. Like when you have big problems then you
17 need to, you know, then you need big investments to in fact
18 change things around. If I could venture to say that there
19 are, that what that program offers is what any good early
20 education program should offer. And what you have at
21 Lord Selkirk is, I think, 24 very lucky little kids and
22 their families who have, you know, who are able to take
23 advantage of it and what about the children attending the
24 other 20 child care programs in the north end of Winnipeg
25 and what about all those families that don't get anything.

1 So it's -- again if the, if this program is being used to
2 inform public policy, then it probably has some value. If
3 it's another boutique program then it's in the same state
4 as any other boutique program that has come and gone.

5 THE COMMISSIONER: I follow what you said if it's
6 being used to inform public policy, then what did you say
7 if it's being used to what?

8 MS. WALSH: As a boutique policy. It's just one
9 boutique program.

10 THE COMMISSIONER: Oh just unto itself?

11 THE WITNESS: Right. So --

12 THE COMMISSIONER: Well there wouldn't be much
13 point in that, would there?

14 THE WITNESS: Well there wouldn't be much point.
15 Unfortunately, Commissioner, governments do this again and
16 again. They open up boutique -- you know, they open up one
17 off programs because it's a way of being seen to be doing
18 something but it never gets scaled up so it's available to
19 the population at large.

20 THE COMMISSIONER: But if it's not a pilot to see
21 if it works --

22 THE WITNESS: Right.

23 THE COMMISSIONER: -- what would be the point in
24 investing in it in the first place? Maybe you're not the
25 one to answer that.

1 THE WITNESS: I'm not the one to answer that.

2

3 BY MS. WALSH:

4 Q What do these kinds of programs then, to
5 summarize, need to be effective?

6 A You need, you need qualified educators. You need
7 programs that are properly resourced so that there can be
8 planning and they're able to change the changing needs of
9 the, of the community. You need a policy framework that
10 they, that they operate under and that there needs to be
11 enough of them so that a critical mass of children can
12 participate if you want to get those population health
13 changes to your population.

14 Q And when you're talking about a framework, is
15 that a legislative framework?

16 A Yes. For -- when we look at provinces that are
17 making, that are making those changes that I showed you in
18 those earlier charts is they, they often rolled out the
19 program first and then wrapped the, and then developed
20 legislation and policy, a legislative framework around it
21 as they were informed by, by the rollout. So, for example,
22 full day learning in Ontario required amendments to the
23 Education Act, so there was now a framework there which
24 says that, you know, all children in Ontario are eligible
25 for this program. It designates what the qualifications of

1 the educators must, must be. It talks about the curriculum
2 framework. It talks about things like child-staff ratios,
3 et cetera. If you look at Quebec, at PEI, at New Brunswick
4 who I think are at this point, I haven't yet seen the
5 Northwest Territories' full, full program, but if you look
6 at those, at those jurisdictions making, making this kind
7 of move, of moving from that service patchwork into
8 something coherent, it is wrapped up in, in a legislation.
9 If there's a, a vision it's captured in a policy framework
10 and there's legislation to back it up and there's funding
11 to back it up.

12 Q Now you have referred to the Prince Edward Island
13 program and we've got that in evidence. If you want to
14 walk us through some of the highlights of it. That is
15 Exhibit 125.

16 THE CLERK: Exhibit -- which tab is that?

17 MS. WALSH: It's the PEI study.

18 THE COMMISSIONER: Securing the Future for our
19 Children.

20 THE WITNESS: Yes.

21 MS. WALSH: 46A.

22 THE CLERK: 46A?

23 MS. WALSH: There you go. Thank you.

24 THE WITNESS: Yes, I'm -- I thought I would share
25 PEI with you because it is a jurisdiction which has moved

1 very, very quickly from that patchwork of programming.
2 Probably more patchwork than any other jurisdiction.
3 Kindergarten was actually not offered by the public
4 education system. It was offered, it was offered in
5 community and private, privately operated programs. They
6 had, you know, a collection of other early childhood
7 program all offered by the private sector or the, or the
8 community sector. Very little, very little oversight of
9 these programs. I mean literally I visited them being
10 offered in garages, converted garages. So you can get an
11 idea of what the oversight was like. Very high turnover of
12 staff because, you know, staff were earning the minimum
13 wage. And so somebody might start in that profession when
14 they're young and just out of school and then find that,
15 you know, they can't, as much as they loved their work,
16 they can't eat love, so they moved on to other work.

17 So the -- it was the premier of the, of the
18 province, together with a very savvy minister of education
19 that decided to take this on. They began by having, hiring
20 an expert in the field who drafted them a policy, a
21 blueprint for how it could happen and then they took it out
22 to consultation with the community. And the main
23 recommendation was that kindergarten would become full
24 time, it would be mandatory. It would be offered by the,
25 by the public education system. As you can imagine this

1 caused great consternation amongst all of these providers
2 who had been doing this, that had been their job to provide
3 it, they were suddenly losing all their clients, and the
4 other aspect was is that they were converting all of these
5 one off child care programs and once called early education
6 centres and these early education centres operate under a,
7 under a provincial curriculum and framework. There's a
8 minimum number of trained staff that they have to have.
9 All the staff have to receive a provincially mandated
10 ongoing professional development. There is a provincial
11 wage scale in order to improve the wages and working
12 conditions of the workforce and there's a cap on, and cap
13 on fees that parents pay in order so that they provide more
14 access to these programs.

15 The way that they went about it is they put out
16 what the framework was and then they invited the community
17 to say you can join this --

18 THE COMMISSIONER: The early, the early education
19 centres where the second step following the mandatory
20 kindergarten?

21 THE WITNESS: It happened, it happened --

22 THE COMMISSIONER: Simultaneously?

23 THE WITNESS: Simultaneously, right. So in one
24 year all of the five-year-olds moved into, into public
25 offered education taught by early childhood educators by

1 the way because they determined that these were the people
2 with the best skills for teaching of that age and then for
3 the zero to four, they developed these early childhood
4 education centres often out of what was already existing in
5 the community. So they didn't go out to reinvent. They
6 used the resources that were already in the community and
7 through consolidation, amalgamation and providing
8 additional resources they were able to create these, to
9 create these early childhood centres.

10 Their first round was that they thought that they
11 would end up with 20 in year one. They ended up having
12 twice, twice as many. In fact the community ran to it.
13 Nobody was forced to join. If they didn't want to join
14 they could continue to operate as, as before. Now it
15 wasn't --

16 THE COMMISSIONER: Who's they? Are you talking
17 about parents or communities?

18 THE WITNESS: Yeah, like if -- so if you were a
19 child care centre and you didn't want to be, you know, part
20 of one of these early childhood education centres, you
21 thought you were all right on your own or better off on
22 your own, you were allowed, you weren't forced in.

23

24 BY MS. WALSH:

25 Q The operators then of the centres?

1 A Right, yes. So most of the operators opted to
2 transform into, into these early childhood centres. So it
3 wasn't without its, without it's challenges. Of course the
4 province had to have a discussion with the teachers unions.
5 The teachers unions felt that teaching kindergarten was
6 their area and that they should, they should be able to do
7 it. There was some push back from operators who felt that
8 they weren't going to have the same sort of, you know,
9 access to clients, you know that if the province was out
10 there offering these programs with a flat fee for parents
11 then that would make it less able for them to charge a
12 greater fee, but, you know, they, they worked it through .
13 And, and when you speak to the premier and to particularly
14 the minister of education, he's now the health minister,
15 they get quite irate when they're told, well, you could do
16 that in PEI because you're so small, right. And the
17 premier's response was, yeah, but everybody knows my mom,
18 all right. You know the point was that, that every one of
19 those members of the party, of the government, would have
20 had an aunt, an uncle, a sister or brother who is running a
21 day care, right, and was doing okay. So there was a great
22 -- it took leadership. It took, it took having a
23 conversation with the sector and in fact going over the
24 heads of the sector to talk to parents as whole about the
25 importance of early education. And again, it's only been

1 in place for three years. Very popular. Again, they
2 wouldn't turn back, they're expanding it.

3 Q Was it all rolled out at once or were there
4 pilots?

5 A No.

6 Q Talk a little bit about the kind of
7 implementation that you think is required to be effective.

8 A There were pilots. One of the organizations that
9 -- through the Margaret McCain Family Foundation we
10 established a pilot there in 2008. We did it in
11 partnership with the, with the government of PEI at the
12 time and what that did was to really work with a major
13 child care provider on the, on the island to show, you
14 know, what was required in order to consolidate, or to
15 consolidate these programs. And one of the things that
16 they do in addition to early education and care, they also
17 do family home visiting, right, so these early year centres
18 are also responsible for the home visitors that go into
19 islander's homes, you know, after a baby is born to provide
20 support to new parents.

21 Q In terms of implementation generally of an early
22 childhood strategy under a framework like you're talking
23 about, what needs to be a part of that implementation in
24 terms of timing?

25 A Well this -- they gave, they gave the summer

1 actually. They -- I think this, this document came out in
2 the early spring and the changes took place in September
3 with the opening of full day kindergarten in September. So
4 what was happening with the schools happened very, very
5 quick because schools had the infrastructure to, you know,
6 to be able to make it happen. The transition of the
7 programs into early years centres is, you know, is a little
8 bit more ongoing but by the, by March of 2011 they were
9 able to report that they had 38 early years centres in
10 place.

11 Q Given that childhood is a finite period and early
12 childhood is a brief period --

13 A Yes, it is.

14 Q -- would you say that addressing the issues that
15 you're discussing is somewhat time sensitive?

16 A Yes. I mean there is a period of plasticity in
17 being able to determine, to influence the outcomes for
18 children. We know very sensitive periods are between
19 conception and age, and age five. If we miss that window
20 it's not that kids are, are damaged goods, it just becomes
21 much more difficult to intervene, in many cases much less
22 effective to intervene after. And when no jurisdiction can
23 get a handle its special education budget, but special
24 education budgets exist because there wasn't adequate
25 preschool education in place.

1 THE COMMISSIONER: I want to just intervene here
2 and ask this question. Are there any reserves on Prince
3 Edward Island?

4 THE WITNESS: Yes, there are.

5 THE COMMISSIONER: And what, what arrangement was
6 made for the introduction of this program or the
7 availability of it with respect to schools on that, on
8 those, that or those reserves?

9 THE WITNESS: It was, it was whatever mechanism
10 the province has for its relations with First Nations was
11 put into place and there are early years centres on, that
12 are serving aboriginal families on and off reserve.

13 THE COMMISSIONER: How many reserves are there on
14 Prince Edward Island?

15 THE WITNESS: You know I think there's one but
16 don't quote me on it. I would have to check that out for
17 you.

18 THE COMMISSIONER: And do you know what the
19 involvement was with the feds to put this in place on the
20 reserve?

21 THE WITNESS: The, the federal government plays a
22 big role in Prince Edward Island around the Canada Action
23 for Children program in around prenatal health and they
24 had, as I understand they had very good bureaucrats who
25 smoothed the way.

1 THE COMMISSIONER: But on that one reserve was
2 there an early childhood education centre?

3 THE WITNESS: No, and they created one on the
4 reserve.

5 THE COMMISSIONER: Who's they?

6 THE WITNESS: The province in cooperation with
7 the First Nation created an early childhood centre.

8 THE COMMISSIONER: And did the province put money
9 into it?

10 THE WITNESS: Yes, they did.

11 THE COMMISSIONER: On the reserve?

12 THE WITNESS: And again, and again the rationale
13 was because these children, you know, leave the reserve and
14 they come to our schools.

15 THE COMMISSIONER: Yes, sure.

16 MS. WALSH: Exactly.

17 THE COMMISSIONER: That certainly happens in
18 Manitoba.

19 THE WITNESS: Yeah. So that there was a, that
20 there was a rationale for being able to support that. The
21 actual, the actual mechanism, I'm not, I'm not in a
22 position to comment on the actual mechanism of how that,
23 how that occurred. What I can tell you is that it is a big
24 part of what they looked at was what were those aboriginal
25 families and that I know that one centre was created on, on

1 a reserve.

2 THE COMMISSIONER: Thank you.

3 THE WITNESS: You're welcome.

4 THE COMMISSIONER: Sorry, Ms. Walsh, carry on.

5 MS. WALSH: No, no problem. Thank you.

6

7 BY MS. WALSH:

8 Q Turning to the actual paper that you prepared for
9 us which is Exhibit 121, at page 3 of that document -- you
10 don't really need to bring it up. Okay, and everyone's got
11 a copy of it. I don't know what tab it is. You've got a
12 copy of it?

13 A Um-hum.

14 THE CLERK: It's 45A

15 MS. WALSH: What was it?

16 THE CLERK: 45A.

17 MS. WALSH: 45A.

18 THE COMMISSIONER: This is Exhibit 121.

19 MS. WALSH: Yes.

20 THE COMMISSIONER: Page?

21 MS. WALSH: Three.

22

23 BY MS. WALSH:

24 Q Under the heading "Children's Rights" towards the
25 bottom, you referred to a children's rights agenda. Can

1 you talk a bit about, about what that means in the context
2 of the kind of programming you've been discussing?

3 A Because early childhood programming has largely
4 been looked at as intervention for disadvantaged families
5 that if you look at the, you know, both the language in the
6 legislation and the language in the mandates of the many
7 agencies that serve young children, they're referred, you
8 know, they're referred to as clients of objects for
9 protection of -- you know, they are, they are entities that
10 we, that we transfer things to. So what you don't see in
11 that, often in the language of the agencies are in the
12 legislation as, as children being citizens, as children
13 having their, you know, their rights to humanity on their,
14 on their own, that they're not just chattels of their
15 parents or clients of their agencies. So what a, what a
16 discourse around a children's rights agenda is actually,
17 provides one with something that's very important if you
18 want to work with anyone which is respect for the child, a
19 recognition that you're not only dealing with the child as
20 the child will become, but also have a responsibility to
21 ensure that the child is happy as when they are a child and
22 so that it is -- I think it provides us, it is -- I must
23 say that the welfare model and the way that we look at
24 children now is very, very entrenched and the language is
25 very entrenched in the way we view parents as being

1 problems rather than sources of solutions is very
2 entrenched. So I think introducing a children's right of
3 discourse into how we talk about children and families
4 would begin to change our thinking and help us to in fact
5 model our, model our programs.

6 It's why integrating parents into early childhood
7 settings is so very important, because it's difficult to
8 integrate them, really integrate them into the setting
9 successfully if they're just a problem and you're trying to
10 separate them from their kids to inoculate, you know, the
11 kids from their home life. When you actually bring parents
12 in as if they are part of the solution, you begin to get
13 very different results. Well, the residential schools were
14 an example of taking kids away to inoculate them from their
15 families. So it's the opposite of that.

16 Q Right. So a child focused lens includes parents?

17 A Absolutely.

18 Q At page 5 of the paper, you identify that
19 culturally responsive programming is an important part of
20 quality early childhood education. Can you talk a bit more
21 about that, please?

22 A Part of honouring, part of honouring who children
23 are is, is honouring, you know, the culture, the language.
24 It's what they, what they bring. I mean children are not
25 blank slates. You know, by the time they, you know from

1 the moment they were born they were not blank slates. They
2 come with predispositions and, you know, maximum, you know,
3 this incredible potential for who they are and what they,
4 and what they can become. So if in your, if in your
5 programming you don't recognize cultural differences,
6 gender differences, you know, modern families are just
7 that, they are very, very modern. They are, you know, they
8 are blended, they are made up of all sorts and different
9 sorts of configuration and the configurations often, very
10 few children stay in the same configuration of a family
11 that they were born into and move into adulthood on.

12 Q So if, if the programs that are intended to meet
13 the needs of children and family can't recognize that and
14 can't adapt, can't adapt their programming to not only
15 recognize it but celebrate it, then they, then they can't
16 achieve their goals. You can't, you know, you can't excel
17 in any environment, you know, when you feel that who you
18 are is not appreciated. So it's why, it's why it's
19 essential and I think it's -- and it's not enough. I know
20 I've mentioned this before but I want to say it again.
21 It's not enough, particularly in the Canadian context for
22 aboriginal kids to learn about aboriginal culture and
23 traditions. If we are going to, we pride ourselves on
24 being a diverse society, a pluralistic society but if that
25 is actually going to be maintained and furthered, then

1 knowledge about our, you know, the founding, or the
2 original peoples of Canada is essentially for us all to
3 know.

4 Q So let's look at page 13, the three specific
5 recommendations that you made to the commission.

6 A Um-hum. So the first one is to get control of
7 the chaos that's out there, to use the assets that you have
8 in public education, to rationalize the services that are
9 already out there, to provide them with some coherence and
10 linkages so that families can readily find the programs
11 that they require. Now I must say that doing that on its
12 own will not, will not address, will not serve every
13 family. It will not address all the problems that you
14 have, but what it does is it provides a solid platform so
15 as we saw in the Better Beginnings, Better Futures that
16 when we do add new investments they make a difference
17 rather than layering new investments on top of a patchwork.
18 So getting control of this is, I think is essential to, to
19 moving forward. That doesn't mean that you -- that means
20 that you learn from what you've done before of which I
21 think Healthy Child Manitoba brings a lot to the table, but
22 somebody's got to be in charge and it can't, with all due
23 respect, it can't be, you know, appointing another
24 children's minister. The, the -- our experience in other
25 jurisdictions with having a children's minister is that so

1 this is someone who gets to go out and talk about children
2 but they are often folks that have little clout at the
3 cabinet table. They're often folks that have little clout
4 to really change those other, what happens in those other
5 ministries that are really administering the programs that
6 serve children and, and families and you don't get the, you
7 know, you don't get the sort of change that you expected
8 from having, you know, somebody be champion for children.

9 Why we recommend education is because the culture
10 in Canada is that education ministers do have clout.
11 Education ministers have big families, or sorry, big
12 ministries, big bureaucracies. They, when they want things
13 to happen they can make them happen.

14 Q Or alternatively, if you have a dynamic minister
15 of children then you give that department what it needs.

16 A Yeah, absolutely, or you, or you move him over to
17 educate him or her, over to education (inaudible). It's,
18 you know, the idea is starting what you have that works
19 well and education works quite well.

20 Q Can I just -- before you go on to the next
21 recommendation, I just want to make sure that I, that I
22 fully understand some of the things you've been saying.
23 The PEI model, for instance, you talked about that.
24 Earlier you talked about integrated centres, sort of hubs.
25 Where does, where do hubs of, you know, integrated service

1 centres in which the school is a platform, how does that
2 fit into the PEI model or is it just something else to
3 consider?

4 A Early childhood children's centres are hubs.

5 Q I see.

6 A They are hubs, but the difference with the PEI
7 children's centre that is, it's not as if it's one place
8 and each one of these individual agencies now, now reside
9 there, that's their home. I mean the difference is is that
10 they merge the functions of those agencies. So now you
11 have one agency, an early childhood, an early education
12 centre or early years centre, sorry, that's now responsible
13 for those functions.

14 Q For delivering services of public health, day
15 care or parenting supports, all of that?

16 A That's right.

17 Q The typical barriers that the government, for
18 instance, might anticipate coming up against in
19 implementing this kind of thing, you talked about the child
20 care operators themselves and the experience in PEI. Other
21 typical barriers and strategies to deal with them?

22 A Where we found significant change happen, the
23 premier had to be behind it, the premier had to want it,
24 they had to lead it and it's because when you go to turn
25 chaos into coherence it goes across ministries. So there

1 has to be leadership at that level which can say make it so
2 in order for it to happen. Obviously you need, you need,
3 you know, a strong, a strong minister and a strong set of
4 officials in order to develop, you know, the kind of change
5 that's required. In terms of who the, you know, who the
6 opposition were or those that had to be stakeholders that
7 had to be, had their concerns addressed, the teacher's
8 unions were certainly, were certainly one, but in all cases
9 I can say that the teacher's unions are now ecstatic about
10 what they're seeing because they're getting the children
11 that are coming out of these early years centres and in
12 Ontario they're getting the children that are coming out of
13 full day, four and five-year-old kindergarten and, you
14 know, they are blown away by the difference in their, in
15 their classrooms in such a short, short year.

16 The child care, the child care operators, I mean
17 they are, they're private businesses and children are their
18 clients and when you, when you move those services into,
19 into the public sphere, they're losing clients, there's no
20 doubt, there's no doubt about that there's disruption
21 there. But also what you, what we've found that is that
22 for those early childhood educators who were afraid of
23 losing their jobs, they found better jobs working in, you
24 know, in the, in the public spheres than they did in the
25 community sector which was always wondering where its next

1 paycheque was going to come from.

2 Provinces had to take on school boards. You had
3 to, you had resource school boards enough so that they
4 thought that this wasn't one more thing that they had to
5 do. And by resourcing I don't mean giving school boards a
6 lot more administrative money. Really the difference that
7 was made was training principals. It was actually you got
8 -- and they all started with the same model, you got a
9 handful of principals who really got it. Often they had
10 been the principals that had had, you know, the
11 demonstration sites in their schools and they became, you
12 know, they became the champions with their peers around
13 this is not more work, this is in fact will make your job
14 easier, you know, that when -- there's many more hands,
15 many more eyes, many more sets of capacity that are in the
16 school which will make your job easier. But I mean that
17 was all work that had to, that had to happen. The other
18 was that you had to have time for the, for staff to meet
19 and to get to know what one another was about. As I've
20 said, whether you're a family support worker, an early
21 education worker or a teacher, you know, you all have, you
22 know, the wellbeing of children and family first but then
23 as soon as you think that somebody is moving into your
24 territory then you get very, hold on to you, you know, to
25 your professionalism, to your standards of practice to, you

1 know, anything which is I don't mind things changing as
2 long as it doesn't me changing. And in fact, when you work
3 in these sorts of, in these integrated environments, your
4 practice does, does change.

5 Again we found, what we found particularly from
6 family support workers, because family support workers in
7 many regions spend more time travelling around from site to
8 site to deliver programming than they actually --

9 Q You're talking about child welfare workers?

10 A Not from -- more like family support, you know,
11 family support workers, not necessarily child welfare
12 workers, but I mean family support, I mean those who offer
13 parenting programs, those that offer, you know, preschool
14 speech and language, occupational therapists, you know,
15 those that deal with families who have, you know, either
16 behavioural challenges or physical challenges in their
17 children or social, emotional challenges, so autism, you
18 know, workers around autism. Because often they don't have
19 a site of their own because their region is so, so spread
20 out, so that they actually find that they get to spend more
21 time with their, with the children that they want to
22 support than they do on the road, right, which is -- and
23 that the other benefit that we got from it is that these
24 specialized staff would then train their, you know, their
25 other peers, so somebody with speech and language training

1 would then work with the early educators and the teachers
2 around, around the techniques that they were, that they
3 were using. So then we were finding that children were
4 staying in these programs for less because they were
5 getting a greater dose, not only from what they got, you
6 know from their hour with the speech and language therapist
7 but now those same techniques were being used in their
8 classroom and being translated to the families as well. So
9 many, many examples of how that, how that works, but that
10 takes time for people to, you know, realize the benefits.

11 Q And so a concerted effort has to be made to, to
12 be able to integrate and implement the services.

13 A Right. You know, being in a -- you know, these
14 are interdisciplinary teams that are working out of, out of
15 an environment that is going to be foreign to, to many of
16 them. So, yes, these are people and you take time and it
17 takes time to build up those people skills.

18 Q The research that you've looked at, has it -- is
19 there any research on the effect of these kinds of early
20 childhood settings and integrated family centres on the
21 incidence of maltreatment and contact with the child
22 welfare system?

23 A There is, there is some, there is some research
24 which indicates that there is less use of, less use of
25 child welfare services, you know, both in incidents of

1 contact with child welfare agencies. There's also some
2 research that says that reoccurrence, that families are
3 able, that children are able to be, either remain in the
4 home under a protection order to be to returned to, to the
5 parent on the condition that they, that the child remain
6 within the, in the program and that the parent partake in
7 the, in what's offered to them at the program. So that
8 there were less -- based on that it shouldn't be surprising
9 there was less reoccurrence of, of abuse because somebody
10 was seeing the child every day, somebody was seeing the
11 parent every day, which a child welfare worker can't
12 replicate. You can't spent eight hours a day with, you
13 know, six to eight hours a day with the family. These are
14 programs that can.

15 Q We've heard a lot of evidence about the risk
16 factors that people, that poverty poses to family, not that
17 there's anything intrinsic and I think your slides --

18 A Yeah.

19 Q -- even showed about, you know, being poor and
20 not necessarily then being a bad parent, but then it does
21 create a vulnerability that leads to, to risk of neglect.
22 What, what's the impact then, I mean I think you've
23 answered it, but the impact of these kinds of programs on
24 poverty reduction?

25 A Is when we look at many of the programs, many of

1 the most popular programs in use, including those that are
2 in use in Manitoba such as home visiting, Triple P
3 Parenting and other intervention services, offering them on
4 their own only reinforces that the deficit is in the child
5 and the parent, right. So here's a parent with a whole
6 whack of deficits that have to, you know, have to be
7 addressed so we'll give them a parenting program. It's one
8 thing to have knowledge about how children learn and
9 develop, it's also about raising children in environments
10 that are conducive to, to raising children.

11 So when you combine parenting supports like those
12 kind of parenting supports about how children learn and
13 develop, with early education programs which are focused on
14 the optimal development of children, and offer them in a
15 way so that parents can work or upgrade their skills so
16 that they can get work, can address their own health
17 issues, addictions, et cetera, then you begin to see the
18 changes that Quebec, I mean we were looking there at eight
19 years of data in Quebec where they halved the child poverty
20 rates, they halved the, you know, they halved the number of
21 children on social assistance. In a very short period of
22 time, those are, those are big results and they can be
23 directly attributed to when you provide programs that meet
24 the needs of children at the same time as they allow
25 parents to, you know, participate in the labour force, you

1 get the, you know, you get those kind of changes. And it's
2 not only the, it's not only the change, but for a mother
3 who is, you know, who is educated or not but who, you know,
4 is, is frustrated with, you know, being all day in
5 inadequate housing and never seeing any way out of it or
6 doesn't get to, you know, to use a skill set that she has
7 because she's a lone parent and there's no grandmother or
8 anyone else around, you know, to provide child care. I
9 mean those, that isolation, that frustration with one's,
10 with one's lives are environments for less than ideal
11 parenting. So sometimes work on its own improves parenting
12 because when you have happier parents they're better able
13 to manage their own behaviour and direct their children's.

14 Q And so providing child care is a means of
15 enabling participation in the workforce or education.

16 A Right.

17 Q One more question on this recommendation before
18 we go to the other two. If we could pull up, please,
19 Exhibit 105, which was, I don't have our reference number
20 but it was from Dr. Trocmé's exhibits, the early childhood
21 development report, the Royal Society of Canada and the
22 Canadian Academy of Health Sciences Expert Panel. That's
23 it. If we go to page 86 of the report, please. I just
24 want to ask you about -- is that the page? It's page 86 at
25 the bottom, so it's the next page. There we go. If you

1 can pull up the graph, please. I want to ask you about,
2 you've talked about universal. I want to ask you about the
3 concept of universal and targeted in implementing the kinds
4 of early intervention programs that you're discussing.

5 A Right.

6 Q Dr. Trocmé talked about this chart and everything
7 that's in the circle was, this was in the context of child
8 maltreatment. So what's in the circle is what he described
9 as early intervention or prevention strategies and they're
10 described as universal and targeted and then beyond that
11 was the contact with the child welfare system and
12 prevention in the sense of recurrence or prevention in the
13 sense of impairment. But going to the strategies that are
14 at the prevention before occurrence stage, can you discuss
15 the concept of universal and targeted? Is that something
16 that you use?

17 A So there are, there are programs that all
18 children need. So what we're recommending is that all
19 children have access to good quality preschool programs.
20 They'd be voluntary, parents could decide whether or not
21 they, they attend. Because the evidence is overwhelming
22 that children benefit, children from disadvantaged and
23 advantaged families benefit from participation in these
24 kinds of programs. But within the child population there
25 are children with, you know, with special needs and they

1 may be their own special health needs or developmental
2 needs or they may be the, you know, the particular
3 circumstances that their, that their family lives in.
4 Maybe English as a second language. So of course for those
5 families you provide those target service. Not every
6 family needs speech and language services, not every family
7 needs occupational therapy, not every child -- every family
8 has an autistic child, but when you do, you definitely need
9 those target services. What we do find, however, is that
10 children with those special needs do better when they are
11 integrated into programs with other children, right.
12 That's, that's social, emotional boost that you get just
13 from being, just from being with other, with other kids.
14 And that's, that's advantage again when we look at the
15 broader scope, you know, around having a pluralistic
16 society. It also helps children overcome -- if I can use
17 this, one of Fraser's sayings, is you know is kittens and
18 puppies that play together grow up to be cats and dogs that
19 get along, right. Well that's, that's true for children.
20 When you're exposed to different cultures and different,
21 and children with special needs, then when you run into
22 that in your adulthood you're not frightened by those,
23 those kind of differences. So it's very important in terms
24 of having a cohesive society. But, no, not every child is
25 going to need that but when you deliver these sorts of

1 programs from a universal platform you get, you get those
2 advantages, reciprocal advantages that take place.

3 So and these are the children that, these are the
4 incidents which lead to, you know, the small number of
5 children who come, where the state needs to, to intervene
6 and then you have, you know, programs that are put and you
7 know these are what child welfare workers use in order to,
8 you know, prevent a reoccurrence of this.

9 Now, and this is where I think that the
10 integration research tells us, you know, has some lessons
11 for us and that is that in most cases, taking both the
12 parent and the child out and treating them in isolation
13 from the rest of the community is not as effective as when
14 you provide these sorts of intervention again from the
15 universal platform. A kid who has been abused wants to
16 feel normal. You don't feel normal when you're taken out
17 and you're put into some, you know, into some facility,
18 special, you know, facility where then you don't see your
19 friends, you don't get to, you know, there's like nothing -
20 - you're in some sort of facility. You know, the best way
21 back to normal is actually being in, you know, in the
22 environments that could make you comfortable is being back
23 in school, being back in your preschool, being with your
24 friends, getting, you know, getting those sorts of comforts
25 happening as well. And again, I talked a little bit about

1 that is, is parents who have been identified by child, by
2 child welfare workers often do better when they're
3 receiving these sorts of intervention programs with other
4 parents who just want to improve their parenting and
5 because of the, how it lessens, how it lessens the
6 isolation, actually gives them examples of what good
7 parenting looks like. I mean most of us who are not great
8 parents aren't great parents because they never experienced
9 it themselves, they've never viewed it.

10 Q Your other two recommendations --

11 THE COMMISSIONER: I'm wondering whether we
12 should break for lunch.

13 MS. WALSH: I don't know how much longer the
14 witness will be on the other two recommendations. They're
15 not as involved.

16 THE WITNESS: Very fast and we talked about them
17 a lot, so ...

18 MS. WALSH: I think we could finish unless
19 there's a lot of questions.

20 THE COMMISSIONER: Well, I want to leave
21 opportunities for questions but we may have to take them
22 after lunch. So if you want to, you can finish with your
23 last two then --

24 MS. WALSH: Yes.

25 THE COMMISSIONER: -- we'll see where we're at.

1 MS. WALSH: Okay, thank you.

2 THE WITNESS: The recommendation two talks about
3 a tracking protocol to provide at least one additional
4 intercept between young children and private agencies. In
5 fact, I think Manitoba is very well set up to be able to do
6 this. One of the things that the research tells us is that
7 children who don't meet their Well Baby appointment which
8 usually comes around 17, 18 months, depending on what the
9 protocol in the province is, it's a very telling sign, and
10 this comes out of Dr. Tremblay's (phonetic) research is
11 that these are, that these are kids that are in difficulty,
12 this is a family in difficulty. If you can't get your
13 children to their Well Baby checkups you can tell that
14 there's problems. And immunization is tied to the, to the
15 identification number that every new infant receives in
16 Manitoba. I'm not an expert in this but I think that it
17 could, that a flag could be, could be sent up if it's found
18 that the child has not received their immunizations or has
19 not received their Well Baby checkup and then there could
20 be some intervention happen at that time. And this has
21 been used very, very successfully and I discuss it more in
22 the report, in Doveton, Australia, which is a very highly,
23 highly disadvantaged community outside of Sydney where they
24 have -- where just employing these kinds of methods has
25 reduced, greatly reduced the incidents of child

1 maltreatment and the workload of child welfare workers by
2 using these sort of flags and then sending intervention
3 teams out to the, out to the families.

4 Q And you've discussed that in the appendix to the
5 paper.

6 A Right, as well. And then my third, my third
7 recommendation, which again we've talked a lot about, is
8 that that Manitoba, as every jurisdiction in Canada would,
9 benefit by having an early education curriculum which,
10 which merged both the dominant culture with, with
11 knowledge, understanding, respect for aboriginal knowledge
12 and practice.

13 Q Thank you.

14 MS. WALSH: Mr. Commissioner, those are my
15 questions for the witness.

16 THE COMMISSIONER: All right. We'll see who has
17 questions and how long and we'll decide whether to take
18 them before or after the break. Who, who would like to ask
19 questions. Mr. McKinnon?

20 MR. MCKINNON: My thought would be I'd like to
21 get some instructions over the break and see if I have any
22 questions.

23 THE COMMISSIONER: All right. Are there others?

24 MR. KHAN: Mr. Commissioner, I would also like to
25 do the same. I just want to speak with my client on a

1 couple of issues.

2 MS. DUNN: And I just have one question,
3 Mr. Commissioner, which I need to discuss with Ms. Walsh,
4 perhaps one or two.

5 THE COMMISSIONER: All right. Well it seems as
6 though the wise thing to do is take the break. Are we
7 going to break till 2:00 or 2:15? 2:15, I guess, and give
8 people time.

9 MS. WALSH: Sure.

10 THE COMMISSIONER: All right. We'll, we'll rise
11 now till 2:15.

12 MS. WALSH: Thank you.

13

14 (LUNCHEON RECESS)

15

16 THE COMMISSIONER: All right. Who is going to
17 come to ask questions? Mr. Khan?

18

19 CROSS-EXAMINATION BY MR. KHAN:

20 Q Good afternoon, Dr. McCuaig. For the record my
21 name is Hafeez Khan. I'm counsel for Intertribal Child and
22 Family Services. I just have a few questions. My
23 understanding of when you were discussing early childhood
24 education is it deals, it's not specifically issues or
25 topics but it's more of promoting intellectual stimulation;

1 is that correct?

2 A That's right.

3 Q As well as socialization amongst the children?

4 A That's right.

5 Q Sorry, if I can just take a look, I may have left
6 my notes at my table.

7 Is the way the curriculum taught, does it matter,
8 does it matter, depending on the group of children that
9 they're teaching?

10 A As you stated an early learning curriculum looks
11 at is not a syllabus, it's not making your way through a
12 number of subjects. It's an approach to learning and child
13 development within an early childhood setting and what it
14 provides you with is a vision and approach and tools in how
15 to respond to, in how to respond to young children. So
16 while a curriculum framework may cover the same sort of
17 areas and ensure that, you know, all the children have good
18 nutrition, are adequate physical exercise, adequate rest,
19 that they are exposed to numeracy, literary, you know,
20 science, et cetera. But how that is done in downtown
21 Winnipeg may be quite different than how that is done in a
22 northern community. So what you need is educators who are
23 knowledgeable enough about how children learn as well as
24 knowledgeable enough about the curriculum so that
25 they can in fact adapt it to the community that they're

1 serving.

2 Q When does a child develop a sense of self in
3 self-awareness, at what age?

4 A Children as, as early as two are very -- and in
5 some cases younger, but usually around age two, children
6 have a sense of I am me, you know. You'll notice with
7 children smaller than that they'll crawl over each other,
8 you know, because they don't have a sense of what they're,
9 where they begin and others, and others happen. So around
10 two children begin to get a sense of their own space, their
11 own human space and the space of others.

12 Q And one's -- and a child's sense of self
13 identity, when would that typically be developed?

14 A At that, absolutely at that time as well. They
15 are very, they are very, very aware of me and what belongs
16 to me.

17 Q In your view would a poor sense of identity, self
18 identity affect or impedes one's educational and
19 intellectual development?

20 A Absolutely.

21 MR. KHAN: Thank you. Those are my questions.
22 Thank you very much.

23 THE COMMISSIONER: All right, Mr. McKinnon?

24 MR. MCKINNON: Thank you, Mr. Commissioner.

25

1 CROSS-EXAMINATION BY MR. MCKINNON:

2 Q For the record, it's Gordon McKinnon. I
3 represent the department and Winnipeg CFS. I just have a
4 couple of questions along one theme for you, Dr. McCuaig.

5 A Could I, for the record, note that I am not a
6 doctor.

7 Q Okay, Ms. McCuaig.

8 A Thank you.

9 Q In terms of your evidence about early childhood
10 education, my understanding is that you're advocating that
11 it be available and that it be accessible but not that it
12 be compulsory; is that correct?

13 A That's right.

14 Q And we heard evidence from Dr. Nico Trocmé, was
15 it yesterday?

16 MS. WALSH: Two days ago.

17 MR. MCKINNON: Two days ago. It seems like --
18 I'm starting to lose track of time here.

19

20 BY MR. MCKINNON:

21 Q But he made the point that with voluntary
22 programs that those most in need are least likely to avail
23 themselves of that type of program. And we also, if we get
24 right to the specifics of the Phoenix Sinclair case, we
25 heard that although Phoenix's mother did enroll her in

1 kindergarten, she never attended.

2 MS. WALSH: Nursery.

3 MR. MCKINNON: Was it pre-nursery?

4 MS. WALSH: Nursery.

5

6 BY MR. MCKINNON:

7 Q Nursery, enrolled her in nursery. She never took
8 her to the school and followed through with the actual
9 attendance. So my question to you is have you addressed
10 the dilemma that's been identified in the other evidence
11 that we've heard in these proceedings that programs that
12 are voluntary may not attract the people who need them the
13 most?

14 A I think we go to a, one feature of making
15 preschool programs voluntary is really that's what the,
16 that's what the public appetite is for. People feel very,
17 very sensitive about requiring parents to put their very
18 young children in to these kind of programs. So we're not
19 trying to set up an environment which makes it difficult
20 for policy makers to follow through on. What we do know is
21 with kindergarten, for example, is kindergarten is an
22 universal program. It's non-stigmatizing, not only the bad
23 and the sad attend it, and when that happens, even though
24 it is voluntary, about 98 percent of children attend. When
25 you combine those, you know, a kindergarten program with

1 the sort of social supports that are really required, then
2 you have the outreach which goes hand in hand to ensure
3 that those families that either don't know about
4 kindergarten, are nervous about bringing a child to school
5 or whatever, are encouraged to come. Then you have the,
6 you know, the next option is that when a child is under
7 mandatory supervision, then attending a program is not an
8 option and that's often made in many of the programs that
9 we work with, that's been a condition of the parent, either
10 maintaining custody of the child or having access to the
11 child as both the child attends the program and that the
12 parent participates as well. We usually like to look at
13 that as a -- and let me say my, my experience is not around
14 child welfare. I'm saying this as looking at programs that
15 are open to the community and how they respond to families
16 with exceptional needs that as much as possible we try not
17 to make that, to make that a requirement because it's more
18 difficult to have a discussion or to influence a parent who
19 is required to do something. But if necessary, that can be
20 made a condition of access.

21 Q And, and we've heard evidence here about three
22 kinds of child protection services: Primary, which would
23 be upstream before coming into contact; secondary which
24 would be the kind of thing you just referred to, which is
25 after there's been some contact with Child and Family

1 Services, some programming or requirements are put in
2 place; and then tertiary which is actual child protection
3 investigation. And I was more aiming at, because I thought
4 your evidence was focusing on primary issues, primary
5 prevention, if I understood your evidence.

6 A That's right, um-hum.

7 Q What you're saying the focus of your evidence is
8 that with early childhood education we get better
9 educational outcomes, we get better -- we have fewer coming
10 into care, et cetera. So you're focusing, if I understand
11 your evidence, on a primary prevention piece.

12 A Yeah, those upstream and on the services, yes, of
13 which really education is key.

14 Q And my question about whether you have any
15 thoughts on this dilemma of the people most likely to need
16 the service being the least likely to enroll, I'm really
17 trying to focus on that primary prevention piece. And it
18 may be that there's no research done on this but sort of
19 anecdotally we've gotten the impression that, that, you
20 know, even if there's a 98 percent pick up rate, the two
21 percent --

22 A That's right.

23 Q -- that aren't may be the same two percent that
24 we're dealing with in the Child and Family Services
25 Department. Are you aware of any research to, to alleviate

1 the concerns that I've raised or has that been done?

2 A Well, it's why some jurisdictions, Quebec, PEI
3 and New Brunswick have made kindergarten a mandatory
4 program. It is to pick up, you know, the two percent that
5 don't, that don't attend. It is why Quebec is going to be
6 looking at a four year program -- four year-old
7 kindergarten as a mandatory program. They're still in
8 discussion around that but it's for the reasons that you've
9 raised while this is still a discussion.

10 One of the, one of the other recommendations that
11 I made is the intervention at the point of when a child
12 should have received their Well Baby check up, you know,
13 for their last phase of their immunizations and the reason
14 for this is that it worked very well. We've got one, one,
15 you know, large example in Australia called the Doveton
16 example, and it's interesting because it is such a
17 disadvantaged population. But by tracking these, these
18 children and flagging if they have not had their
19 immunizations up to date and then, and then providing
20 outreach to those, to those families to find out why, you
21 know, where are they, where are the kids, what's stopping
22 them from, from availing themselves to this service and
23 often when they do that then that's also the time that they
24 can either encourage the family to come into the center and
25 take part in the programs there or when that doesn't

1 happen, they go out to the family. So if the family won't
2 come to them they will go to the family. Over time the
3 family comes, right. And this is one of the reasons they
4 feel that their child welfare referrals have been so
5 drastically reduced.

6 Q And I hear what you're saying about that type of
7 program which, which you would see as being mandatory, I
8 take it.

9 A Um-hum.

10 Q But back to the question of a voluntary program
11 and the concern that I raised about whether the people who
12 don't take it up are the very ones we're most concerned
13 about at this inquiry. Is there any research that you're
14 aware of that addresses that issue, that is, the people who
15 are not taking up these kinds of voluntary programs are the
16 ones that need it the most?

17 A Well absolutely, that's what the research, that's
18 what the research shows us is that the, you know, that the
19 acute isolation which comes from poverty, mental illness,
20 addictions, et cetera, are extremely, are extremely
21 isolating and these families do not connect with anything,
22 right, beyond the underworld that they're engaged in, which
23 is, which is why, you know, having some intersect with them
24 beyond, you know, the baby is born and you seize the child
25 at birth, then the, you know, the second intersection that

1 you would have is the Well Baby check up that is usually
2 about 18 months. And by having that, by having first of
3 all raising a flag is where is this kid, why isn't it
4 receiving this sort of support, and then by having the
5 follow-up outreach, then we begin to contact those
6 families. Now if they're not child welfare, you know,
7 clients, you can't force them and which is why the Doveton
8 example they were encouraged to participate and a great
9 deal of outreach goes to encouraging them to participate
10 and this is particular true of aboriginal families, who,
11 unlike Australian aboriginal peoples have not had much
12 better experiences or comparable experiences to aboriginal
13 families in Canada, but when a child, when there is a child
14 protection order, then the child attending and the parent
15 attending is not an option. But they're not, they're not
16 put out to attend to attend some special program over here,
17 they're made to attend the community's program. Because
18 you want, what you need to do most is to reconnect them
19 with the community. They need to be part of a community if
20 there's not going to be that recidivism that can occur.

21 Q Thank you. I think I, I think I have your
22 answer. Thank you very much.

23 A Thank you.

24 THE COMMISSIONER: Thank you, Mr. McKinnon.

25 Anybody else? Ms. Dunn have a question,

1 Commission Counsel?

2 MS. DUNN: I had discussed one question with
3 Ms. --

4 MS. WALSH: Yes, we can ask it.

5 MS. DUNN: Okay, thank you.

6 MS. WALSH: Oh, I thought I would ask.

7 MS. DUNN: Oh, sure, go ahead.

8 MS. WALSH: Is that all right?

9 MS. DUNN: Yes.

10 MS. WALSH: I tell you what, if I don't get it
11 right you'll let me know.

12 MS. DUNN: No, no, that's fine.

13 MS. WALSH: Thank you.

14 MS. DUNN: Thank you, Mr. Commissioner.

15

16 RE-EXAMINATION BY MS. WALSH:

17 Q The question that Ms. Dunn had related to
18 evidence that we've heard about housing issues in the
19 intercity, housing issues facing people who come into
20 contact with the child welfare system, the difficulty that
21 so many families have when they leave reserves, finding
22 housing, and finding stable housing. And so her question
23 was has, has your research addressed that issue, you know,
24 of a family who has to move several times, so, you know,
25 isn't, isn't able to stay in one place, one program for a

1 whole 12 month period?

2 A Yes, there are many programs where the turnover
3 rate might be as much as 80 or 90 percent over the course
4 of a year. And although we haven't done, although there
5 isn't evaluation which has tracked these families and where
6 they go, I think intuitively we can, we can conclude that
7 if these, if schools are transformed into community centres
8 which meet the needs of families, then whenever the family
9 moves there's a school, you know, that offers these sorts
10 of programs that they, that their children can attend. And
11 that should be available to preschool age children the same
12 way as, you know, school age kids, they're parents move
13 around all the time too but there's always the school,
14 right, and they always have a right to attend that school
15 and they don't have to go on a waiting list before they get
16 to, you know, into a school. They do not face the sorts of
17 barriers that families with young children face.

18 Q Waiting lists, is that a typical feature of, of
19 early childhood programs?

20 A That is the feature or early childhood
21 programming is it's almost impossible to find one that
22 doesn't have a waiting list and the better it is, the
23 longer the waiting list.

24 Q I think earlier today you talked about the lucky
25 few --

1 A That's right.

2 Q -- when you were talking about children who got
3 access to good programming. Then I have one more question.
4 Further to something that Mr. McKinnon was getting at and
5 also to, for instance, in the case where somebody is new to
6 the community, what kind outreach is necessary for these
7 kinds of centres you're describing to be effective, whether
8 because a parent is new or a family is new to a community
9 or because they are reluctant or resistant for any reason?

10 A Well they have to exist and they have to have a
11 presence. So, you know, for example if you walk around
12 downtown Montreal or practically anywhere in Quebec, you
13 see early childhood learning centres. They are a feature
14 of, you know they are a feature of the community. Not so
15 walking around Winnipeg that I've seen. So it's, one thing
16 is they have to exist so they have to have a presence and
17 when they have a presence then there begins to be a common
18 knowledge about them and what they do. When we interviewed
19 parents about, you know, what sort of programming do you
20 use for your children, you know, it really, it really
21 varied and then we'd say well do you know that there's this
22 program and that program and, you know, this other list of
23 programs that are in there. And the response from the
24 parents, the first one, if it wasn't the first question, it
25 was the second question, is well what does that program do,

1 right. So I mean we've had this alphabet soup of terms
2 just in our conversation today, what is preschool? Is it
3 early education? is it child care? is it day care? What's
4 a family support program? Is a family support worker a
5 welfare worker or is she somebody that, you know, provides
6 a parenting program? The language alone reflects the chaos
7 that there is out there. So it's a bit much, I think, to
8 blame parents for not availing themselves to, you know,
9 what the community offers when it's offered in such a
10 dysfunctional way.

11 Q But then is outreach an important part of, of
12 what a centre has to do?

13 A Well, no, I think an important part of our
14 outreach is ensuring that the services are available, that
15 they're visible and that there's common knowledge about
16 what happens when you walk in the, in the door of this
17 facility. I mean that's the first outreach. Then, yes, of
18 course there is, you know, there is special outreach as
19 there is, even in mandatory programs like school, you know,
20 when children don't attend school on a regular basis
21 somebody follows up, you know somebody finds out why. And,
22 and of course that would be a feature of an early childhood
23 program as well.

24 Q Thank you.

25 MS. WALSH: I have no further questions,

1 Mr. Commissioner.

2 THE COMMISSIONER: All right. Everyone is
3 finished, I think.

4 Counsel, or Witness, rather, thank you very much.
5 You've completed your tour. We appreciate you coming and
6 giving us the benefit of your advice.

7 THE WITNESS: Thank you.

8 MS. WALSH: Thank you very much.

9

10 (WITNESS EXCUSED)

11

12 THE COMMISSIONER: All right, the next witness?

13 MR. OLSON: Yes, Mr. Commissioner, the next
14 witness is Carolyn Young.

15 THE CLERK: Please stand for a moment. Is it
16 your choice to swear on the Bible or affirm without the
17 Bible?

18 THE WITNESS: The Bible's fine.

19 THE CLERK: Okay. Just take the Bible in your
20 right hand. State your full name to the court.

21 THE WITNESS: Carolyn Young.

22 THE CLERK: And spell us your first name.

23 THE WITNESS: C-A-R-O-L-Y-N.

24 THE CLERK: And your last name?

25 THE WITNESS: Y-O-U-N-G.

1 THE CLERK: Thank you.

2

3 **CAROLYN YOUNG**, sworn, testified as
4 follows:

5

6 THE CLERK: Thank you. You may be seated.

7

8 DIRECT EXAMINATION BY MR. OLSON:

9 Q Good afternoon, Ms. Young.

10 A Good afternoon.

11 Q Now you've been the executive director of Manidoo
12 Gi Miini Gonaan since 2004?

13 A Yes.

14 Q And I'll just refer to it as Manidoo, if that's
15 okay with you.

16 A Um-hum.

17 THE COMMISSIONER: What's the full name?

18 MR. OLSON: It's Manidoo, it's M-A-N-I-D-O-O --

19 THE COMMISSIONER: M-A-N?

20 MR. OLSON: I-D ...

21 THE COMMISSIONER: I-D.

22 MR. OLSON: O-O. And then Gi, it's G-I.

23 THE COMMISSIONER: "E"?

24 MR. OLSON: Sorry, "G" as in Gerald.

25 THE COMMISSIONER: Yes.

1 MR. OLSON: "I". And then Miini, it's M-I-I-N-I,
2 Gonaan, G-O-N-A-A-N.

3

4 BY MR. OLSON:

5 Q So you were the ED of Manidoo since 2004 and
6 prior to that you were supervisor since 1991?

7 A That's right.

8 Q In between 1988 and 1991, you were the director
9 of Shaughnessy Park Day Care?

10 A That's right.

11 Q Okay. You received your training in early
12 childhood education in England and have an early childhood
13 educator level 3 qualification?

14 A That's right.

15 Q Okay. You have lived in Winnipeg's north end for
16 more than 21 years?

17 A That's right.

18 Q Is that the area of Winnipeg you currently
19 reside?

20 A I do, yeah.

21 Q Okay. Beginning in 2006 you partnered with
22 Manitoba Housing Authority, North End Community Renewal
23 Corporation, Jim Silver and the Manitoba Government in a
24 multi-year revitalization project for the Lord Selkirk Park
25 community.

1 A That's right.

2 Q That's a community in the north end of Winnipeg?

3 A That's right.

4 Q You've been working with the Manidoo program
5 since 1991. Is that when the program itself opened?

6 A We opened up as an infant centre in R.B. Russell
7 High School, a 16 space centre for children three months to
8 two years old, to support families to be able to complete
9 their high school education.

10 Q So it was a support for families to complete
11 their high school education originally?

12 A Specifically that were attending R.B. Russell.

13 Q I see. R.B. Russell is a high school in the
14 north end of Winnipeg?

15 A That's right.

16 Q Where did the name itself, Manidoo, where did
17 that come from?

18 A When we opened it was, we had a naming ceremony,
19 so it's an aboriginal name. It's an Ojibway name meaning
20 the Great Spirit is giving.

21 Q Okay. And so Manidoo was the, I think you said
22 it was the infant centre for parents who were attending
23 R.B. Russell High School who were obtaining their high
24 school education?

25 A Correct.

1 Q Does that centre continue to operate today?

2 A It does, yes.

3 Q As an infant care centre?

4 A Yes.

5 Q And that's just one aspect, I understand, of
6 Manidoo?

7 A Yes. Manidoo has four locations. We've expanded
8 over the years. So we have a school aged centre, a
9 resource centre and the Lord Selkirk Child Care Centre.

10 Q Okay. So let's first talk about the infant
11 centre.

12 A Okay.

13 Q What ages does an infant encompass?

14 THE COMMISSIONER: This is at the Russell school?
15

16 BY MR. OLSON:

17 Q Is it operating out of the R.B. Russell school?

18 A We have one location at R.B. Russell High School,
19 which is our infant centre.

20 Q Okay.

21 A And then at the location at Lord Selkirk Park, we
22 have children from infant to school age.

23 Q Okay. So the infant centre, is it only at R.B.
24 Russell High School?

25 A We have one infant centre at R.B. Russell --

1 Q Okay.

2 A -- High School and we have another infant centre
3 at the Lord Selkirk Park Child Care Centre.

4 Q So there are two infant centres?

5 A Correct.

6 Q Let's talk about those first. Are they both the
7 same sort of infant centres?

8 A They're licenced through the province and we
9 follow a lot of the licencing that the province provides.
10 They're two unique programs though.

11 Q Okay. Are they each child care, providing child
12 care?

13 A They're each child care.

14 Q And is it for parents so they can attend to
15 obtain their education?

16 A At R.B. Russell it's so that they can obtain
17 their education. At Lord Selkirk Park they're part of the
18 abecedarian study.

19 Q Okay.

20 THE COMMISSIONER: Part of what?

21 THE WITNESS: The abecedarian study that we're, a
22 pilot project that we're doing called the abecedarian.

23 THE COMMISSIONER: What's it called?

24 THE WITNESS: The abecedarian.

25 THE COMMISSIONER: How do you spell that?

1 THE WITNESS: A-B-E-C-I-A-N (sic).

2 MR. OLSON: And, Mr. Commissioner, you'll
3 remember that we heard from Kerry McCuaig earlier today
4 about the Abecedarian project.

5 THE COMMISSIONER: Yes.

6 MR. OLSON: And that's the same method that this
7 witness is speaking of now. And so what I'll do, hopefully
8 to simplify it a bit, is just to talk about first the
9 infant care from out of the R.B. Russell High School --

10 A Sure.

11 Q -- which is non-abecedarian based; is that right?

12 A Right, right.

13 Q And that's -- is that simply infant care?

14 A It's just infant care.

15 Q So like a day care program, in other words?

16 A Yes, yeah.

17 Q And that's where parents would take their kids
18 for day care services while the parents attend high school?

19 A Exactly.

20 Q Okay. How many children attend that?

21 A There are 16 infants.

22 Q Infants.

23 A Ranging from three months to two years old.

24 Q Okay. Is there a waiting list?

25 A Yes.

1 Q How long is the waiting list?

2 A It's hard to say how long it is. Our children
3 usually when they enroll they're there for the duration of
4 their two years usually. So students that are coming into
5 school in September will register in August. It depends
6 on, it really depends on what the age group is. If we have
7 children leaving that opens up spaces.

8 Q Okay. Is it fair to say there are never enough
9 spaces?

10 A Absolutely.

11 Q Okay. Because we always hear that child care is
12 a problem --

13 A Yeah, it is.

14 Q -- getting, getting the space for child care.
15 How is the centre, that centre funded, that part of the
16 centre?

17 A It's funded through the province.

18 Q Okay. Is all provincial funding?

19 A Yes.

20 Q And what type -- is it annual funding or is
21 guaranteed funding?

22 A It's guaranteed funding.

23 Q Okay.

24 A Based on the child's subsidized basis.

25 Q Subsidized basis.

1 A Yeah, and the province operating, operating
2 grant.

3 Q Okay. Now moving on then to the infant care
4 centre at the Manidoo, at the, sorry, Lord, operating out
5 of Lord Selkirk Park --

6 A Right.

7 Q -- that's the abecedarian project?

8 A Right.

9 Q And we'll just break it down into the two parts.
10 There's the age ranges from -- I'm not sure if I have this
11 straight or not -- from, was it two years to five years?

12 A That is the preschool age.

13 Q Preschool age, okay.

14 A And the infant is three months to two years.

15 Q Okay.

16 A And then we have spaces for school age which is
17 six to 12.

18 Q Okay. And that's how it's broken down, we have
19 the three different age groups --

20 A Right.

21 Q -- broken down in those categories?

22 A That's right, yes.

23 Q Okay. And tell us then about what the
24 abecedarian approach is.

25 A The abecedarian approach is exactly what it says,

1 it's an approach to early child education focusing on four
2 elements for children, birth to five. It started, it was
3 founded by Dr. Joe Sparling who did the studies in North
4 Carolina back in the seventies. So it's a curriculum that
5 we follow and it's approach in which we -- it's an approach
6 in how we deliver our curriculum for the children.

7 Q Why was that particular approach adopted?

8 A In the midst of building this day care we were in
9 discussions with Healthy Child Manitoba and they initiated
10 that approach and it sounded like it would be a good fit
11 for Manidoo.

12 Q Okay.

13 A And so it, it initially came from Healthy Child
14 Manitoba.

15 Q So it came from Healthy Child Manitoba. What are
16 some of the known benefits of that particular approach?

17 A So the known benefits are, it's primarily -- when
18 delivered in an area that is dealing with extreme poverty
19 as, as Lord Selkirk Park is, that approach has a lot of
20 evidence showing that if these children have this approach
21 in their early years, they're better ready for school when
22 they start at five in kindergarten. And over the years
23 that study has shown us that people that have been part of
24 that intervention had better outcomes throughout their
25 school experience. The evidence has shown that there were

1 lower teen pregnancies. There was high school completion,
2 was at a high rate. There was less sort of, I guess there
3 was less criminal activity for the participants. They
4 didn't engage in criminal activity as much as those that
5 hadn't been part of the approach. And it's just a general
6 wellbeing of a family or for the participants and their
7 families to, to be successful in life.

8 Q Okay. So it was based on that, this research
9 done initially that the approach was suggested be adopted
10 by Manidoo; is that right?

11 A Right, yes.

12 Q When was the approach -- when, when did Manidoo
13 start using the approach?

14 A So we opened up our new centre, the Lord Selkirk
15 Park Child Care Centre in January of 2012, so we're just
16 fairly new.

17 Q Okay.

18 A And we started developing or using that approach
19 immediately as soon as we opened.

20 Q In terms of how the approach works, we've heard
21 that from Kerry McCuaig that it's fairly expensive and
22 intensive approach. What is it that makes it expensive?

23 A We have higher ratios, ratios of adults per
24 children than the province recommends or pays for. So for
25 example, in our infant space we have one adult to three

1 babies as opposed to the infant, or the infants in other
2 centres is one adult to four babies. In the preschool
3 years we have one adult to six children as opposed to the
4 provincial licencing as of one adult to eight children. So
5 we have higher ratios so that there's more adult-child
6 interactions. And also we have a home visitor that is
7 attached to this approach who works with our families in a
8 very close manner.

9 Q Okay. I'm going to ask you a little more about
10 the home visitor in a second.

11 A Yeah.

12 Q What about in terms of meals for the children,
13 are they provided with meals?

14 A Yeah, so part of our funding does allow us to
15 provide the children with two healthy snacks a day and a
16 hot lunch program. In our, in our program we also
17 implement an omega-3 supplement for the children as well.

18 Q How many children are in the program?

19 A Forty-seven.

20 THE COMMISSIONER: And what stage is that, which
21 of the three groups?

22 THE WITNESS: We have 16 children that are three
23 months to two years old, 16 that are two to five years old,
24 and 15 that are six to 12 years old.

25 THE COMMISSIONER: Thank you.

1 BY MR. OLSON:

2 Q Now I wanted to come back to the home visitor.
3 Tell me a little bit about the home visitor, what's the
4 role of the home visitor first of all?

5 A So the role of the home visitor is to build a
6 relationship with our families. Out of the 47 children we
7 have 19 families. So her job is to build a relationship
8 with these families in a very close way. She sees them on
9 a daily basis, you know, saying hello and goodbye during
10 the day when they drop off their children and pick them up,
11 but she also schedules time to meet with them on a weekly
12 basis at least. So families that are having more crises or
13 situations that are happening in the family, she'll meet
14 with them more often and her role is to help them navigate
15 through their crisis. So she's doing a lot of things like
16 helping them problem solve. She does a lot of advocating
17 and accompanying the families for different appointments
18 they may have with Child and Family Services or lawyers or
19 all different kinds of things. She has a close
20 relationship with them.

21 Ultimately we want her to be able to then share
22 what the children are learning in the child care program,
23 the abecedarian approach. So some families are ready to
24 hear that and learn it and then be able to implement it
25 with their children. That's our ultimately goal. And she

1 works with them closely at different varying degrees of
2 whatever our families are at.

3 Q Are all 47 of these children from the Lord
4 Selkirk community?

5 A Yes. One of the requirements is that they do
6 live in the Lord Selkirk Park housing project. And the
7 reason we made that a requirement is when we initially were
8 building the centre and looking to see, you know, will we
9 be able to fill this up, we did outreach in the community
10 and there were over 150 children or 130 children that
11 people wanted them to have spaces in the centre and we had
12 47 spaces. So there was a high need, so we opened it just
13 to the people living in Lord Selkirk Park.

14 Q I see. Can you tell the Commissioner a little
15 bit about Lord Selkirk Park itself, the profile of the
16 community?

17 A So Lord Selkirk Park is sort of a four block
18 radius from King Street to Dufferin to Robinson to Flora
19 and it's a Manitoba Housing complex. So there's a high
20 rise that has about 200 units that are single dwellings for
21 single people that don't have children. And then there are
22 townhouses. I believe there's about 300 townhouses that
23 families live in that community. Primarily I would say
24 about 70 percent are aboriginal. I'm not sure of the exact
25 percentage but a high level of folks that aren't working

1 who are on social assistance. It's typically, it's
2 typically a community that people don't desire to be in.
3 It's sort of -- it has a high crime rate. It has a lot of
4 needs and issues and it's a very complex community.

5 THE COMMISSIONER: And what kind of a building do
6 you operate in?

7 THE WITNESS: We're in the first floor of the
8 high rise building.

9

10 BY MR. OLSON:

11 Q So in the building itself?

12 A We're in the building itself.

13 Q In terms of your families, is there CFS
14 involvement with many of them?

15 A Yes.

16 Q So it is a common occurrence?

17 A Yes.

18 THE COMMISSIONER: Are there other services
19 occupy first floor space too?

20 THE WITNESS: Yes. One of the programs or
21 organizations that we also manage is the Lord Selkirk Park
22 Resource Centre which is attached to the child care centre.
23 It's in the -- we share the same space and it's operated
24 under the same organization of Manidoo. And then on that
25 same level, Manitoba Housing have their offices. So that

1 whole floor is not for residents.

2

3 BY MR. OLSON:

4 Q Okay. How receptive are the families to the home
5 visitor?

6 A It was a process. When we first started they
7 were very apprehensive. Whenever somebody goes and knocks
8 on a door in Lord Selkirk Park there's fear. People don't
9 want to open their door and often don't open the door. So
10 it's taken -- we're a little over a year into the program.
11 We've been very fortunate to have a home visitor that is
12 very comfortable in the community, she lives in the
13 community and she's, over the course of this year she's
14 built a very good close relationship with the 19 families
15 that we have.

16 Q So there's one --

17 A So it's a process.

18 Q -- one home visitor?

19 A There's one home visitor.

20 Q Serving 19 families?

21 A Nineteen families.

22 Q And you said she sees them at least once a week?

23 A Yes.

24 Q And often on a daily basis?

25 A Often on a daily basis.

1 Q Okay.

2 A And she -- our goal was for her to be able to go
3 into the homes. At the beginning, for probably the first
4 six, eight months, she wasn't invited into the homes. Now
5 she's often invited into the homes and they're very
6 comfortable with her there. She's not seen as a threat.
7 She's seen as an ally and an advocate and a friend.

8 THE COMMISSIONER: Well do the 47 children come
9 from the 19 families?

10 THE WITNESS: Yeah, that's right.

11 THE COMMISSIONER: Yeah.

12

13 BY MR. OLSON:

14 Q What area of the city does she originate? Not
15 necessarily originate from but where does she come from?

16 A She actually grew up in Lord Selkirk Park.

17 Q In terms of your staffing itself, where, where do
18 your staff come from generally?

19 A We, we sort of make a conscious effort to hire
20 most of our staff from the north end so that they're
21 comfortable with the community. We do have some that live
22 outside the community but they have a comfort level in the
23 community.

24 Q Okay. Now the project itself, is it a pilot
25 project?

1 A It is a pilot project.

2 Q And for how long is it to run?

3 A It's a three year pilot that is, I believe will
4 be, I believe it will be renewed but we're continuing
5 evaluating it.

6 Q Okay. So it started, you said, I think in
7 January 2012?

8 A That's right.

9 Q So three years from January 2012 is when it would
10 technically expire unless it's renewed?

11 A Exactly, but I'm sure it will be renewed because
12 we want to follow those children to see what their outcomes
13 are later on.

14 Q Are there any -- is there any preliminary data
15 available or --

16 A We do.

17 Q -- any preliminary results?

18 A So when the children enroll in this program at
19 Lord Selkirk Park, they were all assessed by a child
20 development worker. And then a year after they've been in
21 the program they're re-assessed. Because this is an
22 evidence based program and we are studying it, we keep a
23 lot of data on what the outcomes are. So we do have some
24 preliminary data that has shown that the children that are
25 in the program and receiving the treatment, they have

1 improved I would say a fair amount. It depends on their
2 attendance in the program. So those children that are
3 attending regularly and who are receiving the treatment
4 regularly, and when I say treatment I'm meaning the
5 abecedarian approach, they did very well over the, over the
6 past year. And we compare those findings to our controlled
7 group which is 32 children who are not receiving any
8 abecedarian approach. They may be in other child care
9 centres --

10 Q Okay.

11 A -- or they may be staying at home. But they're
12 not receiving the specific approach.

13 Q So as compared to the controlled group, the
14 children appear to be doing --

15 A Right.

16 Q -- significantly better.

17 A So the evidence is showing us that they are doing
18 better. Anecdotally we can, we see a lot of improvement.
19 We see children that are engaged with adults. We see
20 children that are reaching their milestones on target which
21 is something that we have never seen before in Lord Selkirk
22 Park.

23 Q In terms of feedback you've been receiving, or
24 teachers have been receiving or the home worker has been
25 receiving, what sort of feedback has been --

1 A The feedback is really positive. The families,
2 they're just in awe and amazed at what's happening because
3 they're comparing a lot of the children that are in our
4 program to their older children that have never seen it.
5 And so we're, we're spending a lot of time explaining what
6 it is that we're doing and trying to teach them to do the
7 same thing at home. But some of them don't have a clear
8 understanding of what the approach is, but they're amazed.
9 They'll say, you know, we've had some parents say I don't
10 know what goes on in here but I just know that my children
11 are smart and that is a feedback we get almost on a daily
12 basis, the children here are smart and we can see that as
13 well. They're thriving and, yeah, it's quite an amazing
14 thing to see.

15 Q How about in terms of involvement with Child and
16 Family Services, have you see any effect that the program
17 is having on that, families' involvement with?

18 A Well, yeah. I think a lot of what we're doing
19 is, is a preventative model. We're, we're -- we have such
20 a close relationship with the families that we're seeing
21 and helping the families navigate through their crises
22 before Child and Family would have to be involved. We're
23 trying to educate Child and Family into participating with
24 us, to help, like to help us to be part of the intervention
25 when children are apprehended. We have had some children

1 apprehended and we, we try to work with the social workers
2 to help them to return to the centre so that they're
3 receiving the treatment and come up with a plan.

4 Q Okay. In terms of the approach itself, is it
5 designed in any way to meet the needs of aboriginal
6 children in particular?

7 A No, it's not, it's not an approach that works
8 with any specific culture. It's an issue of poverty. The
9 outcomes of children that live in poverty are different for
10 children that don't live in poverty. It's a poverty issue.

11 Q It's a poverty issue?

12 A It's a poverty issue more than a cultural issue.

13 Q Okay. Before I move on to the family support
14 service that's also provided, is there anything else you
15 want to add about the abecedarian approach or project?

16 A I don't think so. I think, you know, the key is
17 that we have a relationship with the families and we see
18 this as a preventative model. We see this as a treatment
19 for the families and it's an approach that we use and I
20 guess I can't overemphasize that the relationship with the
21 families that we have. That's, that's really the key
22 thing. We wouldn't be able to do any work or teaching if
23 we didn't have the trust of the families and the community.

24 Q Would you like to see the approach expand for
25 more children?

1 A Absolutely, yeah, absolutely. We're still
2 negotiating, you know, how that's going to work, but
3 absolutely. The benefits are tremendous.

4 Q Moving on to the family support program that's
5 offered, can you tell the Commissioner a bit about that,
6 what it is?

7 A With the home visitor or --

8 Q No, with the -- out of the resource centre.

9 A Okay. The Lord, the Lord Selkirk Park Resource
10 Centre has been in existence for seven years now. We've
11 been in the community for that time. It's a drop-in
12 centre. We work with a lot of participants that aren't
13 necessarily ready for a program of any kind. It's sort of
14 a stepping stone, that community.

15 THE COMMISSIONER: Has it always been at that
16 location in the high rise?

17 THE WITNESS: No. The high rise, we moved into
18 there when we, when all the renovations in Lord Selkirk
19 Park were in development. So we, we've always been in Lord
20 Selkirk Park but in different locations within the
21 townhouses.

22 THE COMMISSIONER: And who is it you service?

23 THE WITNESS: We service anybody that lives in
24 the Point Douglas community. We don't have any parameters,
25 anybody is --

1 THE COMMISSIONER: There's no age --

2 THE WITNESS: There's no age --

3 THE COMMISSIONER: No.

4 THE WITNESS: -- or anybody is welcome.

5 THE COMMISSIONER: Anyone that lives in the area?

6 THE WITNESS: Yeah, anybody who can access us.
7 However, we have had participants who have moved out of the
8 community that are still returning, still coming back.
9 Primarily most of the participants that we serve are from
10 Lord Selkirk Park, in sort of the peripheral of Lord
11 Selkirk Park.

12

13 BY MR. OLSON:

14 Q You've described it as a, sort of a drop-in
15 centre. Is it a centre where you connect residents with,
16 residents and people from the area with other services?

17 A Yes. So again, as our home visitor does, the
18 staff in the resource centre, we have three staff. We have
19 a family support worker who provides any kind of assistance
20 as all three of our staff do and then one of our staff also
21 does outreach. So outreach is a huge component of the
22 success of our organization, we do it regularly. And
23 building relationships with the community is a, is a big
24 part and it's very community led. The services and the
25 programs that we provide in the resource centre are led by

1 what the community is saying that they would like to see.
2 Some things we can help with and some things are sort of
3 out of our scope, but we continue to work on it. If we
4 can't meet the needs of the issues that they're coming to
5 us with, we will refer them to other agencies, work with
6 other agencies.

7 Q What are the issues that you hear from the
8 community residents in terms of what they need?

9 A Addictions is a huge issue.

10 Q Okay.

11 A It's sort of the base line of all the issues.

12 Q Um-hum. Just when it comes to addictions, what
13 is it about addictions, is it --

14 A Well we're located a block away from Main Street
15 and Main Street is, it's just a series of bars and hotels.
16 So if you have addictions issues in that community, it's
17 near impossible to get a handle on your addictions or to
18 get treatment for your addictions. So we view our resource
19 centre as, it's sort of a barrier before they get to Main
20 Street. So unfortunately we're only open between 9:00 to
21 5:00, Monday to Friday, but we have a lot of feedback from
22 the community that tells us, you know, they stay and hang
23 out there so that it's a diversion, so that they're not in
24 the bars.

25 Q At least for that period of time?

1 A For that period of time, yeah.

2 Q What about access to affordable food in terms
3 of --

4 A We have a community cupboard as well. We have a
5 clothing depot and we have computer access. We also offer
6 toast if they can come and grab a coffee and make
7 themselves toast, because poverty and nutrition are huge,
8 huge issue. So addictions and having accessible healthy
9 food is also an issue in the community.

10 Q Okay.

11 THE COMMISSIONER: You talked about running
12 programs that the community want.

13 THE WITNESS: Um-hum.

14 THE COMMISSIONER: Do you run anything with
15 respect to addiction?

16 THE WITNESS: We don't. We've been trying to
17 work with the Addictions Foundation to, you know, even have
18 a counselor come in once a week would be a huge benefit.
19 Funding is usually a barrier to find somebody to do that.
20 We have, for example, an employment counselor who comes in
21 once a week who is well known in the community, who works
22 with the community as far as employment goes. But I would
23 love to see an addiction counselor or somebody come in to
24 help with that. We are in the midst of having a mixed AA
25 group in the resource centre as one, one option. But

1 addictions is a huge problem. Usually the community, when
2 they've come in and have addictions issues, they need
3 something that's accessible immediately and the whole
4 process that they have to go through, they usually give up
5 when they've -- you know, within a couple of weeks they've
6 given up because they have to get on to waiting lists, they
7 have to travel. Travel is a barrier.

8 MR. OLSON: Right.

9 THE WITNESS: It's complex.

10

11 BY MR. OLSON:

12 Q And we've heard about some of the concerns of the
13 community. What do you see as some of the strengths of the
14 community?

15 A We work on an asset based, strength based model.
16 There are a lot of assets in the community. They, they
17 come together, they support each other. We have a few
18 elders in the community that help bring in some culture
19 components to the community and they also bring that
20 cultural aspect into our centre as well with the children
21 and the families. And they know that their voice will be
22 heard through, through the services that we provide through
23 the resource centre and the relationship that we have.
24 It's taken a long time to build that trust but they know
25 that when they have a need or an opinion or a

1 recommendation, that we will hear it and try to actualize
2 it and that's what I see my role as. I listen to what
3 their needs are and I try to remove any barriers and then
4 help them actualize it.

5 Q Just on that topic, in terms of building trust
6 one of the things that the commission has heard is when
7 people are involved with CFS they tend to have an issue of
8 mistrust of CFS.

9 A Yes.

10 Q Is that something you've come across?

11 A Absolutely.

12 Q How do you address that when your, when your
13 families have contact with CFS and you may need to share
14 information, is there -- do you deal with that issue?

15 A When we have to share information with Child and
16 Family Services?

17 Q Right. Or there may be information you want to
18 share with the agency or the agency wants to share
19 information with you.

20 A We really have a policy of anything that we're
21 going to share with anybody, we tell the parents we're
22 going to share it. We have the trust of the parents and
23 they're our primary focus. So if they have issues with
24 CFS, often our home visitor or our staff from the resource
25 centre will accompany them to some of these visits and help

1 navigate everything that is being discussed. Often our
2 families will come out of meetings and they have no idea
3 what has occurred or it's just too overwhelming or they're
4 in crisis and they don't hear everything. So we always
5 have somebody to support them and attend those meetings
6 with them and then decipher the information afterwards.
7 And we're very open about if we need to share any
8 information with the social worker, for example, we'll
9 share it with the family as well so that we always have
10 that trust, we're not doing anything behind their back.

11 Q You maintain a trust relationship?

12 A That's our focus, we maintain that trust all the
13 time. They're our primary concern.

14 Q Have you seen an improvement in terms of the
15 relationship with CFS and clients in the recent past or
16 recently, I guess, in the last year or two years?

17 A Not really.

18 Q Okay.

19 A It's very, it's very dependant on who the CFS
20 worker is. We have some families who have a great CFS
21 worker and have a great relationship and have been able to
22 be open to many opportunities. We have some workers that
23 it's been just very negative experience for the families.

24 Q Okay. Just generally, in terms of child care in
25 Manitoba, who is eligible for subsidized child care?

1 A That's a big issue. In most child care centres
2 you have to be either seeking employment or going to school
3 or have a job and the unique thing about what we've been
4 able to appreciate with the centre in Lord Selkirk Park is
5 we have guaranteed spaces. None of our families when they
6 started were working or going to school.

7 Q So normally --

8 A They were all on social assistance.

9 Q So normally recipients of social assistance would
10 not be eligible for child care?

11 A Yes.

12 Q Okay.

13 A They have to go through a lot of hoops in order
14 to get child care. They have to, they have to prove sort
15 of that there's a need and a social issue. So the, so the
16 children in Lord Selkirk Park we have guaranteed spaces.
17 The parents could be unemployed and not going to school and
18 still access our services.

19 Q Do you know if there are enough spaces, child
20 care spaces available in the inner city for those who want
21 them or need them?

22 A I would say no.

23 Q Okay.

24 THE COMMISSIONER: Child care spaces for, for
25 what?

1 MR. OLSON: For children, for children.

2 THE COMMISSIONER: Oh day care you mean?

3 MR. OLSON: Day care spaces.

4 THE WITNESS: A lot of our families are
5 unemployed in Lord Selkirk Park or in the north end and
6 having child care for the unemployed is key to help them
7 support them to get their life together so that they can go
8 to school or finish their high school education or look for
9 work or just deal with their family crisis which treatment
10 is often involved.

11

12 BY MR. OLSON:

13 Q Right. So it's a bit of a catch-22, I guess, if
14 you can't get a day care space, you can't go to school to
15 get an education --

16 A Exactly.

17 Q -- and so you can't get a job and it's a big
18 cycle.

19 A It's a barrier, absolutely.

20 Q In terms of any recommendations or thoughts you
21 have for improving the situation as, in terms of spaces for
22 day care or early childhood education or those types of
23 things, is there anything you want to tell the commissioner
24 or any final thoughts you have before we conclude?

25 A Well I think overall the program that we're

1 offering, people may say it's an expensive program but it's
2 really a preventative program and I think in the long run
3 the government will save a lot of money because we're
4 dealing with a lot of issues in a preventative manner that
5 in the long run will save money. And having child care
6 accessible to all families, not just families that are
7 needing it for work or because they're going to school
8 which is identifying that families that are living in
9 poverty have such multi-layered needs and issues that
10 sometimes they need child care to navigate and deal with
11 those issues. So I'd love to see that. And at the bottom
12 of every barrier usually is funding, there's never enough.

13 Q Okay.

14 MR. OLSON: Well those are my questions for you.
15 Some of the other counsel may have questions.

16 THE WITNESS: Okay.

17 MR. OLSON: Thank you very much.

18 THE COMMISSIONER: Are there questions from other
19 counsel? It would appear not.

20 So thank you, Witness, I think you're completed
21 and we appreciate you coming and telling us about the
22 program and we'll give due consideration to everything
23 you've said.

24 THE WITNESS: Okay, thank you very much.

25

1 (WITNESS EXCUSED)

2

3 MR. OLSON: This might be a good time for the
4 mid-afternoon break.

5 THE COMMISSIONER: We have two more witnesses to
6 go today?

7 MR. OLSON: Two more. I think they're a little
8 shorter.

9 THE COMMISSIONER: All right. We'll take what, a
10 15 minute break now and try to be back in 15 minutes.

11 MR. OLSON: That sounds perfect.

12 THE COMMISSIONER: Okay.

13

14 (BRIEF RECESS)

15

16 MS. MCCANDLESS: Good afternoon, Mr. Commissioner.

17 THE COMMISSIONER: Welcome. Good afternoon.

18 MS. MCCANDLESS: We have two witnesses remaining
19 for the afternoon.

20 THE CLERK: If you could just stand for a moment
21 and is it your choice to swear on the Bible or without?

22 THE WITNESS: Without.

23 THE CLERK: All right. And just spell me your
24 first name.

25 THE WITNESS: D-E-B-O-R-A-H.

1 THE COMMISSIONER: What is that?

2 THE WITNESS: Deborah.

3 THE COMMISSIONER: Oh, Deborah.

4 THE CLERK: Sorry, and what is your last name?

5 THE WITNESS: Malazdrewicz, it's M-A-L-A-Z-D-R-E-
6 W-I-C-Z.

7 THE CLERK: Thank you.

8

9 **DEBORAH MALAZDREWICZ**, affirmed,

10 testified as follows:

11

12 THE CLERK: Thank you. You may be seated.

13

14 DIRECT EXAMINATION BY MS. MCCANDLESS:

15 Q Good afternoon, Ms. Malazdrewicz.

16 A Good afternoon.

17 Q I understand you're currently employed as the
18 executive director of the Health Information Management
19 Branch?

20 A Yes, I am.

21 Q And that's a branch of the Department of Health
22 of the Government of Manitoba?

23 A Yes.

24 Q How long have you held that position?

25 A I've held that position for five years.

1 Q And before you became executive director, what
2 was your work history?

3 A I've been with the department for 35 years, so I
4 was in the role of manager of the same unit for about 20
5 years before that.

6 Q And what's your educational background?

7 A I have a bachelor of arts.

8 Q What is the mandate of the Health Information
9 Management Branch?

10 A Is to support the collection, analysis and
11 dissemination of information that's collected through our
12 information systems within the health care system.

13 Q And are there a number of information systems?

14 A Yes, there's several. There's probably five to
15 ten key ones and then there's many smaller ones.

16 THE COMMISSIONER: Could you just pull the mic
17 closer to you if you will, please?

18 THE WITNESS: Sure.

19

20 BY MS. MCCANDLESS:

21 Q Perhaps you could just describe what those key
22 information systems are?

23 A Certainly. The most important is our health
24 registry and that's a system that identifies every person
25 in the province who resides here and is insured for health

1 coverage and that system links to all of our other systems
2 that are more about collecting and utilization that the
3 services that people provide, or the services people
4 receive from the health care system, so the hospital care,
5 medical claims, visits to doctors, immunizations and
6 pharmacare, so prescription drugs.

7 Q Okay. And perhaps if I just ask you to speak
8 just a little more slowly that would be helpful.

9 A Okay.

10 Q Now you mentioned there are a number of different
11 areas through which information is provided about health
12 care services that are accessed by people in Manitoba; is
13 that right?

14 A That's correct.

15 Q And those are the key systems that you were
16 speaking about?

17 A Yes.

18 Q And perhaps you could just describe what those
19 key systems are.

20 A Okay. Besides the health registry, which counts
21 the persons in Manitoba, there is the discharge abstract
22 database and that's a system that collects information
23 about people who are admitted into hospital and receive
24 care. It provides information about what their problem
25 was, what kind of care they received, who they received it

1 from and how long they stayed. The immunization system
2 collects information on immunizations to children as well
3 as immunizations to seniors and in some cases immunizations
4 to individuals who are susceptible to other chronic
5 diseases.

6 The pharmacare system or the drug program
7 information network is a system that collects information
8 on prescribed medications that are dispensed from retail
9 pharmacies.

10 Q Okay. And you had, at the outset, mentioned
11 there was the registry that counts people on the system.
12 Does your branch administer that system?

13 A Well we support the information coming out of
14 that system. The insured benefits area actually collects
15 and registers people and then we manage the information
16 coming out of it.

17 Q Okay. Now is there any sort of common thread or
18 link that connects one person through all these information
19 systems?

20 A Yes. When a person is born or moves into the
21 province and is eligible for coverage, we assign a unique
22 number to that person. That number stays with them until
23 they die or leave the province and it's called the personal
24 health identification number.

25 Q And it's also known as the PHIN, or P-H-I-N?

1 A That's correct.

2 Q That number is unique to every person who
3 accesses services through Manitoba Health?

4 A Yes, it is.

5 Q Now who obtains a PHIN?

6 A A person who is considered insurable for health
7 care coverage. So that means a person who has come into
8 the province is going to reside here for a minimum of six
9 months out of a year and a person who, or a person who is
10 born into the province would be covered immediately.

11 Q So that includes minors then?

12 A That's correct.

13 Q Now what information is kept in the registry
14 itself, that's the counting system?

15 A We identify a person's legal name, their date of
16 birth, their gender, the address at which we know that they
17 reside. We identify if they belong to the RCMP because for
18 a time period they were not covered. We identify if
19 they're living in a personal care home and we also identify
20 whether or not they're a ward of the state.

21 Q Now does the registry track usage of health
22 services?

23 A The registry itself does not but the utilization
24 system such as the hospital and the medical and the
25 pharmacare systems do track the utilization.

1 Q And can the registry then access that
2 information?

3 A We can link the utilization information back to
4 the registry at the person level, yes.

5 Q Now apart from within health services, is the
6 information contained within the registry linked to any
7 other government agencies or departments?

8 A I'm aware that family services does collect the
9 PHIN in order to link into special services or programs
10 that are provided by their department. We also would link
11 in with Revenue Canada in the situation of pharmacare
12 claims to identify a person's income in order to process an
13 application.

14 Q Are you familiar with what information Family
15 Services uses the PHIN for? Are you able to speak to that?

16 A No, I'm not.

17 Q Does the registry ultimately link to every time a
18 person in Manitoba accesses health services?

19 A If we an electronic system that collects the
20 information we will collect it at that personal health
21 identification number level and then that allows us to be
22 able to track it back to the registry to the person.

23 Q If, if a person accesses services where there is
24 no electronic system, will that information its way back to
25 the registry?

1 A Generally not, although there are some exceptions
2 such as immunizations that are provided by the federal
3 government on reserve. They do collect that information
4 and then send it in to Manitoba Health and we input it into
5 our immunization system.

6 Q I'll ask you a little bit more about the
7 immunization system in a moment. Does the registry collect
8 demographic information?

9 A Yes.

10 Q And what specific demographic information does it
11 collect?

12 A Just their age, their gender and their place of
13 residence. We don't collect any information on income.

14 Q Can a person avoid being assigned a personal
15 health information number?

16 A For a time period that's probably possible, but
17 eventually when they attend to access services within the
18 health care system, they'll be asked to provide that. If
19 that don't have one then Manitoba Health would be contacted
20 and we would generate one for that person based on some key
21 information.

22 Q Now when a person is born, what's the procedure
23 for obtaining a PHIN?

24 A Well, parents are given the vital statistics
25 registration form if the child is born in the hospital. If

1 they're born at home then it's upon themselves to register
2 their child. Vital Statistics keeps that information and
3 eventually will send it into Manitoba Health to link up.

4 Q So does that automatically get linked to Manitoba
5 Health regardless of whether the parents themselves take
6 steps?

7 A The information is filled out in a form and sent
8 to Vital Stats and we would receive that information. If
9 the parents did not send in the registration form we would
10 use our discharge abstract system to identify the birth and
11 we would create a PHIN and add it to the person's family.

12 Q And is that the case whether a child is born on a
13 reserve or off reserve?

14 A Yes.

15 Q So theoretically would it be possible for a child
16 to be born and not receive a PHIN at some point?

17 A Highly unlikely, although there could be, that
18 could be possible.

19 Q Now is there any distinction between what
20 information is linked to the registry about health
21 services, whether the services were provided on reserve or
22 off reserve?

23 A We have some limited information that's provided
24 by services on reserve. If a person presents to a nursing
25 station with acute injuries or a serious illness and they

1 need to be transported off to a hospital in another area,
2 then we will receive that information. If a person
3 receives ambulatory care where they walk in and they're
4 just seeing someone there, a nurse practitioner or a nurse
5 for some regular care, we would not receive that. That
6 would be collected by the federal government.

7 Q Now who has actual access to your branch's
8 registry?

9 A There are -- all the hospitals in the province
10 are connected to our registry. Some doctor offices do have
11 connectivity and we are continuing to roll it out to more
12 and more physicians' offices.

13 Q And do those places have access or the ability to
14 input information into the registry?

15 A Not at that time, no.

16 Q Who has the ability to input information?

17 A Manitoba Health and the Vital Statistics feeds
18 directly into our system.

19 Q So perhaps just to illustrate, if a person
20 receives services from a nursing station on a reserve,
21 under what circumstances would that information get linked
22 back to their PHIN?

23 A If they were receiving an immunization from a
24 public health care nurse at a nursing station, that
25 information would eventually make its way back to Manitoba

1 Health and be linked into our immunization monitoring
2 system.

3 Q And there are other circumstances where that link
4 would just never occur?

5 A That's correct.

6 THE COMMISSIONER: Unless they're taken off the
7 reserve for medical treatment?

8 THE WITNESS: That's right. If they leave the
9 reserve and they go to the local hospital or to a local
10 community physician's office, then we would pick that up,
11 provided that the physician's office was a fee-for-service
12 office, meaning that they're billing Manitoba Health for
13 the care, not a salaried arrangement with the Regional
14 Health Authority. In those situations we may not get the
15 information.

16

17 BY MS. MCCANDLESS:

18 Q Okay, and perhaps you could just explain for the
19 Commission why that's the case.

20 A Salaried physicians are not required to submit
21 information currently, although we do have some situations
22 where fly-in docs will send in what we call shadow bills
23 and that means they send in the same information as a
24 regular fee-for-service provider but it doesn't generate a
25 payment to the physician but that is not mandatory across

1 the province and it's not well -- it's not very complete.

2 Q Now I would like to ask you some information
3 about the immunization system. I understand that's
4 something that's administered through public health within
5 the province; is that right?

6 A The public health branch within Manitoba Health.

7 Q Do you have some familiarity with how that system
8 works?

9 A Yes, I do.

10 Q Okay. So who keeps track of, of whether a child
11 has received all of his or her immunizations?

12 A It's a communicable disease unit within public
13 health at Manitoba Health, tracks that information through
14 the electronic system that we have.

15 Q Okay. And what happens if a child does not
16 receive scheduled immunizations?

17 A There are automatic notifications that are
18 generated at 15 months of age for the child, at 20 months
19 and again at five and a half years of age. Those letters
20 are generated by the system and go to the last known
21 address of the family head and identifies that the child is
22 incomplete for age and encourages them to either follow up
23 with their doctor or their public health nurse.

24 Q And does that happen whether or not the child or
25 the family live on reserve or off reserve?

1 A Yes, it happens regardless.

2 Q Now if there's no response to those
3 notifications, what further steps can be taken, if any?

4 A There aren't many further steps that are taken at
5 that point. If a letter comes back mail return then the
6 communicable disease unit holds that letter for a couple of
7 months until our database is updated because there is a bit
8 of a lag getting information in and if new information has
9 come in that the child has been subsequently immunized and
10 there's a change of address, then that address information
11 is updated.

12 Q And over how many years did this take place, this
13 immunization program or notification system?

14 A Well the majority of the immunizations occur
15 within the first five years of life. Once a child starts
16 school there aren't many other immunizations, there's a few
17 for girls in grades 4 to 6 and then again for teenagers in
18 high school. So the majority of them are between birth to
19 two years of age.

20 Q So as I understand, you're not aware of any
21 enforcement mechanisms if a family doesn't comply with an
22 immunization schedule?

23 A That's correct.

24 Q Are there any other health systems or checkups or
25 anything of that nature that you're aware that Manitoba

1 Health would track on that sort of systemic basis?

2 A No, there's no other kinds of mandated or
3 publically recommended services.

4 Q Is your branch's system ever used to locate a
5 person?

6 A Occasionally and there's been some recent changes
7 in legislation that will allow the police, with certain
8 warrants or dangerous persons or persons under certain
9 charges, the police can come to Manitoba Health and request
10 us to provide to them the last known address of an
11 individual and we're obligated to provide it.

12 Q Have any other departments or agencies of the
13 government ever sought information from the branch to
14 locate a person or is it just law enforcement?

15 A It's just law enforcement as far as I'm aware.

16 Q Does your branch have any policy about providing
17 information to child welfare?

18 A No, not our branch.

19 Q Pardon?

20 A No.

21 Q Does your branch require access to other
22 government agencies or departments for information
23 purposes?

24 A Only for Revenue Canada for income information to
25 process a pharmacare application.

1 Q So if, as far as you know, today we want you to
2 track where a child was within the system, is there a
3 singular repository for information about where a child has
4 touched various government agencies?

5 A No, there's no one single repository of that.

6 Q Would the branch or insured benefits have the
7 ability to track whether a child, say from birth to age
8 five, has received an annual checkup by a doctor?

9 A We would have the ability to go back and look at
10 that retrospectively, yes.

11 Q Would that equally apply on reserve?

12 A Not if the services were being provided by a
13 salaried physician or a nurse practitioner.

14 Q For those children for whom you are able to
15 access that information, if, for example a year had passed
16 a child had not received a checkup could there be some sort
17 of system implemented similar to the immunization system?

18 A Yes, we could send out a reminder letter similar
19 to the immunization system in that regard.

20 THE COMMISSIONER: You send out a reminder for
21 what?

22 THE WITNESS: For immunizations.

23 THE COMMISSIONER: Yes.

24 THE WITNESS: Childhood immunizations.

25 THE COMMISSIONER: I understand that, but do you

1 have something beyond immunization?

2 MS. MCCANDLESS: Say annual checkup for example.

3 THE COMMISSIONER: Oh. Well do you send you send
4 out?

5 THE WITNESS: We don't but we have the ability to
6 do that.

7

8 BY MS. MCCANDLESS:

9 Q Beyond that, do you have the ability to enforce
10 that?

11 A It would be difficult to enforce. It would be
12 more a notification that something was outstanding.

13 Q Now if a family moved from the city on to a
14 reserve, would the family have any obligation to notify the
15 registry about that move?

16 A The obligation does sit with the Manitoba
17 resident to provide us with more up to date information if
18 they do change their address. However, if they do access
19 services at another point in time after they've moved such
20 as being admitted into hospital and they have provided the
21 more recent information, that will eventually make its way
22 into our registry and we will update the information.

23 Q So if we wanted to determine at a given time
24 where a child was, is the branch's registry able to provide
25 that information?

1 A We would be able to know the last known address
2 of the child.

3 Q Now you have mentioned some sort of disparate
4 record keeping, depending on whether the child is on
5 reserve or off reserve. Do you have any recommendation for
6 how that could be improved so that the information about a
7 child is more consistent across the board?

8 A Well I think if there was more sharing of
9 information between the Federal Department of Health
10 through FNIHB and through Manitoba Health around the
11 delivery of care that's being provided on reserve that we
12 actually captured in a common record or something, that
13 that would be a better way of tracking activity.

14 Q And just in the course of your answer you used an
15 acronym, I think FNIHB, perhaps --

16 A First Nations and Inuit Health Branch.

17 MS. MCCANDLESS: I have no further questions for
18 this witness, Mr. Commissioner. Thank you.

19 THE COMMISSIONER: All right. Any questions from
20 counsel?

21 It would appear not. So, Witness, thank you very
22 much for coming, giving us that information. You're
23 completed.

24 THE WITNESS: Thank you very much.

25

1 (WITNESS EXCUSED)

2

3 THE COMMISSIONER: Mr. Globerman?

4 MR. GLOBERMAN: Good afternoon, Mr. Commissioner.

5 I believe we have one more witness this afternoon --

6 THE COMMISSIONER: Yes.

7 MR. GLOBERMAN: -- Dr. David Yeo.

8 THE COMMISSIONER: All right.

9 THE CLERK: Is it your choice to swear on the
10 Bible or affirm without the Bible?

11 THE WITNESS: I'll affirm.

12 THE CLERK: All right. State your full name for
13 the court, please.

14 THE WITNESS: David Patrick Yeo, Y-E-O.

15 THE CLERK: Can you spell me your first name or
16 is it the usual spelling?

17 THE WITNESS: Usual spelling.

18 THE CLERK: Thank you.

19

20 **DAVID PATRICK YEO,** sworn,

21 testified as follows:

22

23 DIRECT EXAMINATION BY MR. GLOBERMAN:

24 Q Good afternoon, Dr. Yeo. You are currently the
25 director of the Education Administration Services Branch of

1 Manitoba Education for the Province of Manitoba?

2 A That's correct.

3 THE COMMISSIONER: What branch?

4 THE WITNESS: It's called the Education
5 Administration Services Branch.

6 THE COMMISSIONER: Thank you.

7

8 BY MR. GLOBERMAN:

9 Q And I understand that this is a branch of the
10 Department of Education?

11 A Correct. There are multiple branches within the
12 department and I'm the director of this particular branch.

13 Q And you have held this position since 2003?

14 A That's correct.

15 Q And I believe from 1993 to 2003 you were the
16 assistant director of this branch?

17 A Correct.

18 Q You received your Bachelor of Arts Honours Degree
19 in political science from the University of Manitoba in
20 1983?

21 A Right.

22 Q And you received your Master's Degree in
23 political science from the University of Calgary in 1986?

24 A That's right.

25 Q And you received your PhD in education

1 administration from the University of Manitoba in 2008?

2 A That's right.

3 Q And I understand that your doctoral dissertation
4 was entitled "School Division District Amalgamation in
5 Manitoba: A Case Study of a Public Policy Decision"?

6 A That's right.

7 Q I would just like to briefly ask you a few
8 questions about the branch and your role as the director of
9 that branch. What exactly does the Education
10 Administration Services Branch do?

11 A My branch reports directory to the deputy
12 minister of education and therefore kind of discrete or
13 distinct portfolios that fall within our responsibility.
14 First is the teacher certification and student records
15 function which is housed in Russell, Manitoba and we
16 collect, we certify teachers and clinicians for the
17 province and we collect grade 9 to 12 senior years marks
18 and credits.

19 The second area that we have responsibility for
20 is the people transportation unit and that's housed in
21 Winnipeg with a staff person also in Brandon and that
22 office is, and that unit is responsible for regulatory
23 compliance with respect to school bus transportation across
24 the province for school divisions. We also order new
25 school buses. We set the specifications for school buses.

1 We are part of the Canadian Standards Association Technical
2 Committee on school bussing and we do some onsite audits of
3 the number of school divisions every year, just to ensure
4 the transportation services are being provided, in a same
5 way in compliance with regulation.

6 The third area is French language services and
7 translation. We provide translation, in house translation
8 services to advance education and education.

9 And lastly, the area that I'm mostly linked into
10 is the legislation and regulation development. We support
11 the minister and the deputy minister with respect to
12 legislation that comes forward, amendments to legislation,
13 regulation, development and also administrative policy,
14 which supports that legislation, that regulation.

15 Q And as director of the Education Administration
16 branch, do you oversee each of these program areas?

17 A Yes, I do.

18 Q Does the Department of Education or your branch
19 have a data management system that contains information?

20 A The Department of Education has what's called the
21 Education Information System database, EIS for short. It's
22 a database that is accessible by a number of divisions and
23 branches within Manitoba education. A particular reference
24 for us in my branch is that we collect data with respect to
25 teachers, clinicians and also senior years marks and

1 credits, grade 9 to 12 marks and credits, but other areas
2 within Manitoba will access data if it's collected from
3 school divisions and funded independent schools and First
4 Nation schools with respect to assessment information as an
5 example.

6 Q Assessment information of students?

7 A Correct. That may be grade 12 final mark, or
8 sorry, grade 12 provincial examinations in mathematics and
9 English and French language arts. It may also be other
10 assessment instruments that the department administers for
11 children in schools.

12 Q Is this database linked with or connected to any
13 other government databases or information systems?

14 A Not that I'm aware of. It's internal to Manitoba
15 education.

16 Q Are students in Manitoba assigned any kind of
17 identifier or number which tracks their progression through
18 school?

19 A Yes, they are. Students who enter the system at
20 kindergarten or through school divisions, which offer
21 nursery school programming, will every year, as part of the
22 enrollment exercise for school divisions, submit an
23 enrollment file which has the names of all students that
24 are enrolled in the school division and other information
25 which includes gender, date of birth, postal code, school

1 attended and that information is submitted to the
2 department. For those students who at first point of
3 admission do not have an MET number, Manitoba Education and
4 Training number, it's a nine digit identifier, that
5 enrollment file is submitted to the department, it's
6 validated, any duplicates are eliminated and it's submitted
7 back to school divisions and all students who are on that
8 enrollment file will now have an MET number and that number
9 stays with the student throughout the course of their
10 academic career.

11 Q And correct me if I'm wrong, but did you say that
12 the school divisions themselves assign the MET number to
13 the students?

14 A No, they don't. That's submitted in -- the names
15 of the children are submitted on an enrollment file. It's
16 given to the department and the department generates the
17 MET number and that information is provided back to the
18 school division.

19

20 (DIGITAL EQUIPMENT MALFUNCTIONED)

21

22 THE COMMISSIONER: There it goes. It's going.

23 THE CLERK: I just, I can't hear it yet though,
24 so I don't believe it ...

25 THE COMMISSIONER: Well the clock's moving.

1 THE CLERK: Yes. Until I can hear it, I don't, I
2 don't want to believe it.

3 MS. WALSH: We need to hear that.

4 THE CLERK: We need to hear it.

5 MS. WALSH: Is this because of the helpful work
6 that was done on the computer while we were off?

7 THE CLERK: I'm starting to wonder. It tells me
8 that the application has stopped working and collecting
9 information about the problem which might take several
10 minutes.

11 THE COMMISSIONER: Well should we -- so people
12 can move around, maybe we can should adjourn for --

13 THE CLERK: Okay.

14 MS. WALSH: That's fine.

15 THE COMMISSIONER: -- 10 minutes and call us
16 back.

17 THE CLERK: It's back on.

18 THE COMMISSIONER: Wait, it's back on.

19 THE CLERK: It's back on.

20 THE COMMISSIONER: Sorry.

21 THE CLERK: I think you fixed it.

22 THE COMMISSIONER: Not likely. It's working, is
23 it?

24 THE CLERK: It's working.

25 THE COMMISSIONER: All right, Mr. Globerman, you

1 can carry on.

2 MR. GLOBERMAN: Thank you, Mr. Commissioner.

3 THE CLERK: You were just talking about who
4 generates the MET.

5 MR. GLOBERMAN: Okay.

6 THE COMMISSIONER: And you can tell us who it's
7 used by.

8 THE WITNESS: Sorry, could you repeat the
9 question?

10

11 BY MR. GLOBERMAN:

12 Q I believe we were talking about the database
13 system used by the Department of Education and the MET
14 number and how it's assigned to students and I believe you
15 said it was assigned to students when they first enter the
16 school system.

17 A At first point of admission into the school
18 system, that's correct.

19 Q Okay. What other information with respect to
20 students does the education information system contain?

21 A Well as I've already said, it has date of birth,
22 gender, I believe postal code so that we can locate where,
23 generally speaking, they reside because that's important
24 for home school division purposes. There will -- there's
25 also information, I believe, in terms of whether they are

1 students who will be taking French language services
2 programming and this is subsequently as the student enters
3 the system and enters into particular programming because
4 their federal funding elements with respect to French
5 languages services programming, official languages
6 programming so that kind of information is on the database
7 to determine who is eligible, fundable. That would be the
8 type of information that's on EIS.

9 Q And we've heard evidence at this inquiry about
10 the interaction between various government departments and
11 the sharing of information between them, for example,
12 between Child and Family Services and Employment and Income
13 Assistance. Is there a relationship between Child and
14 Family Services and the Department of Education?

15 A Well we will provide, and our student records
16 unit frequently is asked for information from various
17 agencies. When they are conducting an investigation with
18 respect to a child, they will ask for information on last,
19 last school attended, any other information we can provide
20 them that's on the EIS database and once we have a request
21 like that and we're satisfied it's an investigation for the
22 purposes of the Child and Family Services Act, we will
23 provide that information to the agency.

24 Q And is there a policy or protocol in place with
25 respect to your branch or the department's ability to

1 provide information to Child and Family Services?

2 A Well the two -- our database isn't linked to
3 another database if that's, if that's the question. So and
4 that may be a direction that becomes necessary and that we
5 should be looking into, but at this point it's a confined
6 database and so we would be cooperating with an agency or
7 with our colleagues in Child and Family Services on
8 particular issues as they might come up. I mean I can't
9 speculate, I don't know off the top of my head what those
10 issues might be, but we would certainly be cooperative in
11 that respect.

12 Q For example, does Child and Family Services ever
13 contact the branch or the department to ask about a child's
14 whereabouts?

15 A The department doesn't, agencies will. We will
16 provide information to the agencies if it's for the
17 purposes of an investigation. Our interaction with our
18 colleagues in Child and Family Services is more along the
19 lines of a child who may be having some difficulties
20 integrating or being admitted into a school because their
21 parent or guardian doesn't reside in Manitoba and so we
22 have requirements under the Public Schools Act with respect
23 to resident people status and so we will sometimes be asked
24 to become involved in trying to facilitate school
25 enrollment for students in that type of situation.

1 Q Does the Education Administration Services Branch
2 or the Department of Education ever contact Child and
3 Family Services to provide it with information about a
4 child?

5 A It hasn't in my experience. I can't speak for
6 the entire department, but not in my experience has that
7 been the case. Typically if there was something, if
8 something was brought to our attention by somebody
9 anonymously or otherwise, our point of contact might be,
10 might very well be a school division to find out whether or
11 not they can substantiate any kind of concern with respect
12 to a child who might be, who may be in need of protection
13 and whether any actions have been taken by the school in
14 that respect.

15 Q I'd just like to ask you a few questions about
16 student attendance and how the department keeps track of
17 children in Manitoba.

18 A Right.

19 Q At what age is a child required to attend school
20 in Manitoba?

21 A Compulsory school age in Manitoba is seven. They
22 have a right to attend school at age six. So typically age
23 six is grade one, age five for kindergarten.

24 Q Do you know how these numbers compare to other
25 provinces in Canada?

1 A It's, it's consistent.

2 Q Who is ultimately responsible for ensuring that a
3 child attends school in Manitoba?

4 A Well ultimately it's parents are the first folks
5 who are responsible because under the Public Schools Act
6 they can be held liable for the non-attendance of
7 compulsory age school children. But thereafter, school
8 divisions have a responsibility to ensure that those
9 students who are of school age, compulsory school age,
10 resident within that area, are attending school. School
11 divisions are required to designate somebody within their
12 particular jurisdiction as an attendance officer, the old
13 truant officer designation as it used to be called, and so
14 school divisions will be working with families. When it
15 becomes, when they have knowledge or information that a
16 child who is of compulsory school age is not attending or
17 is not attending on a regular basis, they will work with
18 the family to try to get the child to attend. There are
19 different strategies the school divisions will employ to
20 try to get some success in that regard, but ultimately
21 where they fail to get the family to have the child attend
22 at school, the provisions of the act allow for the Crown to
23 be able to take the case forward with respect to non-
24 attendance.

25 Q Aside from the use of truancy officers, how are

1 school divisions in Manitoba able to track where children
2 are at any given point in time?

3 A Well every day attendance is required to be taken
4 at a school and teachers are required to take attendance
5 and that's reported to the school principal. Sometimes
6 it's on a negative reporting basis, in other words the only
7 information that a principal will receive is on children
8 who aren't in school on that particular day. School
9 divisions have a number of ways of trying to find out where
10 students are on a day. Most have automated callback
11 systems. So if, as a parent, I haven't phoned my
12 daughter's school in the morning to let them know why my
13 daughter will not be in school that day, I can expect a
14 phone call at some point later in the day from the school
15 saying where is your child today. And so then if the
16 school is satisfied that my child is away for a legitimate
17 purpose or reason, you know, she's ill, it's a family
18 holiday, some other valid reason, then everything is fine.
19 Now if the principal is unsuccessful in being able to make
20 contact with the family to find out where the child is, and
21 usually that's, you know, there's no panic button that's
22 being pushed after two or three days, but if it's something
23 more prolonged or extensive than that, then they are
24 referring that to the school division and the school
25 division is then making reference or making referral to the

1 attendance officer for the division.

2 Q How do school divisions learn in the first place
3 that a child is of school age?

4 A Well every year, I mean the normal practice is
5 that every year school divisions will advertise rather
6 heavily that kindergarten registrations are beginning and
7 they will place that in all sorts of locations in the
8 community, school newsletters will be going out
9 advertising, it's in local newspapers, that type of thing.
10 So by that kind of written notice or word of mouth most
11 parents who have kindergarten age children, for example,
12 will know that it's time to attend at a school where they
13 wish to have their child attend. But failing that, I'm not
14 exactly sure. It may well be that they're getting some
15 information from local public health, for example, that
16 telling them that they have X number of children or
17 children of this name and age that are residing within the
18 catchment areas of that school division and so they would
19 be able to have an idea in terms of how many kids would be
20 school age ready or eligible to attend.

21 Q And does your branch or the Department of
22 Education work with public health to determine when
23 children in that catchment area are school age?

24 A No, we don't.

25 Q Do school divisions monitor the daily attendance

1 of students?

2 A Yes, they're required to.

3 Q And do they report to the Department of Education
4 with respect to that information?

5 A We don't get individual student attendance. The
6 EIS system is an enrollment monitoring system. It's not a
7 daily attendance monitoring system.

8 Q Can you explain the difference?

9 A Yeah. And attendance monitoring system would be
10 something, I suppose, that at the press of a button on the
11 computer you'd be able to bring up on a screen information
12 on the students who are to be in attendance at a school in
13 any given school on any given day and see who's there and
14 who isn't there. EIS is not that type of instrument. EIS
15 is an enrollment monitoring system. In other words, it was
16 designed to able to count and calculate the number of
17 students who are enrolled in a school division for funding
18 purposes. But if I can just go a little further than that,
19 as early as 2009 and certainly more formerly in 2011, the
20 department has developed an attendance initiative project
21 where we are not monitoring individual student attendance
22 but school divisions are required to report to the
23 department on a school by school basis average attendance
24 in any given school for each month. The purpose of that is
25 that we can -- the school division will be able to see and

1 we will consequently be able to see what the patterns of
2 attendance are in a school. So if the average attendance
3 is something like 75 or 80 percent across a month, that
4 would indicate that there is some issues with respect to
5 regularized attendance for either certain numbers of
6 students or across the board. And in follow up to that,
7 the department has assigned some consultants to support
8 school divisions in developing strategies that might be
9 able to regularize attendance, to increase attendance on a
10 regular basis. Some money has been provided to, I believe,
11 15 school divisions on a two year basis and it may be
12 renewable, I'm not, I'm not certainly but we're in the
13 second year of that project, for school divisions to be
14 able to come up with some projects. It might be one school
15 specific or it may cover more than one school in terms of
16 what some best practices or some localized strategies might
17 be to help bump up attendance across the board in a school.

18 Q Just if I can take you back for a moment. You
19 mentioned monthly attendance reports.

20 A Correct.

21 Q Does the Department of Education or your branch
22 track individual student attendance?

23 A No, we don't.

24 Q Is the system, either EIS or elsewhere in the
25 Department of Education capable of tracking individual

1 student's attendance or daily attendance?

2 A It is not. Right now the snapshot in time in EIS
3 is September 30th.

4 Q And why is that the day?

5 A September 30th is the cutoff point in terms of
6 funding for school divisions and funded independent
7 schools. And so September 30th or they have about a two
8 week window beyond that if they know a student is going to
9 be entering their school after September 30th. That's the
10 point in which enrollment for funding purposes is frozen.

11 THE COMMISSIONER: So enrollment is to be
12 reported to the department by that day, is that what you're
13 saying?

14 THE WITNESS: That's, that's correct.

15

16 BY MR. GLOBERMAN:

17 Q And just briefly, what information is actually
18 reported to the department at that time?

19 A Well, it's the enrollment file that school
20 divisions will submit to us by September 30th and so it's
21 every fundable pupil, every eligible pupil that school
22 divisions will submit. Nursery school pupils in programs
23 that are run by school divisions are not fundable by the
24 department. We do not, the department does not fund
25 nursery school programs. The department funds kindergarten

1 at half time and grade one and up at full time. So that
2 information, all that information is submitted to the
3 department, to the school's finance branch, for enrollment
4 and funding -- support the school's calculation purposes.

5 Q Could there be more than, more reporting periods
6 over the course of the year than just at September 30th of
7 each year?

8 A Well, I think it's certainly conceivable. My
9 understanding from the, from the staff who are responsible
10 for the enrollment collection is that it's a fairly labour
11 intensive process to be able to do this and it may also be
12 an issue of to what degree school division administration
13 systems, their automated administration systems can refresh
14 enrollment because they have to do it at a school level
15 rolled up to the division level and then submitted to the
16 department. To what degree that would pose a staffing or
17 financial burden upon school divisions to be able to do
18 that at multiple points in the year, but conceivably sure.
19 It's a question of resources I think and whether or not the
20 department would be prepared to, to go in that direction.

21 Q Would there be any benefit to having more
22 reporting periods inasmuch as knowing where a child is at
23 any given time?

24 A Well I think if you had more reporting points of
25 time, obviously as long as a student, if they move from

1 school and are registered in another school, you would be
2 able to capture that information in a more regular type of
3 way, but again, it would still be a bit of -- you still
4 have gaps because if it's not a daily attendance reporting
5 system but a periodic reporting system, incrementally of
6 two or three or four points during a school year, you may
7 always get, for example, a student who moves as of December
8 15th and then another reporting period isn't until end of
9 March, for example, you still have that gap in time where
10 you won't know where that student is. So perhaps the
11 benefit of more regularized reporting is that you shrink
12 that gap, but it won't be a perfect fit in all
13 circumstances.

14 Q I just have a few questions to ask you with
15 respect to student mobility and what the department does
16 when they discover that students have switched schools. If
17 a student leaves a particular school division without
18 notifying it, what information will the department have
19 with respect to that student?

20 A Well the information it will have will be on EIS
21 as at September 30th every year. So if the student has
22 left in November and does not re-enroll in another school
23 we won't know where they are. Conversely if -- one way
24 though the system does sort of connect with itself is if a
25 student does leave the school and readmit into another

1 school at some point during the school year, there is a
2 requirement that the old school send the pupil file or the
3 cumulative file to the new school and that's a way of
4 tracking where a student has come from and gone to.

5 Q Can you just explain for the Commission what you
6 mean by a pupil or cumulative file?

7 A Yeah, the --

8 THE COMMISSIONER: Means by what?

9 MR. GLOBERMAN: By a pupil or cumulative file.

10 THE WITNESS: The cumulative file, that's sort of
11 the generic term for any record that's created with respect
12 to the student's existence at the school. So it will house
13 report cards, any kind of student marks that has been
14 created, any records with respect to special needs,
15 clinical assessments, clinical services that have been
16 accessed. It will have information with respect to
17 attendance, it will have information with respect to
18 behaviour or any discipline issues. It's basically a
19 compilation of records or documentation on the student in
20 terms of their life at that particular school. And what
21 happens is that when a student moves from one school and
22 re-enrolls in another school, when a request is made from
23 the receiving school to the old school, they have a week to
24 put the file in the mail or otherwise get it to the new
25 school. Because that cumulative record or that pupil file

1 is important, particularly if there are any issues with
2 respect to programming that may be of assistance to the new
3 school in supporting that student in their new school.

4

5 BY MR. GLOBERMAN:

6 Q Do pupil or cumulative files ever sit unclaimed?

7 A Yes, they do. And what we have done since 2011
8 is set up a process whereby every November school divisions
9 and funded independent schools and First Nation schools are
10 sent a form and they are asked to fill out the form which
11 contains the student's MET number, date of birth and if the
12 school happens to know where that student may have left to.
13 They sent that information to the department and what the
14 department will do is then look on the EIS database to see
15 whether or not that student has re-emerged elsewhere. If
16 that is the case, if we can find that student having re-
17 emerged elsewhere, both schools, the old school and the new
18 school are contacted by the department so that they can
19 make arrangements for the file to be transferred to the new
20 school.

21 Q Can you just explain for the Commission when a
22 file is deemed to be unclaimed?

23 A Well what can happen is if a student has moved
24 out of province or has gone, maybe simply not reregistered
25 in a school, we will have no way of knowing where that

1 student is and so that basically becomes a file that
2 remains unclaimed because we have no place to send that
3 file.

4 Q When there is an unclaimed pupil or cumulative
5 file, will the department or your branch contact Child and
6 Family Services or Employment and Income Assistance to help
7 determine where that child might be?

8 A It's -- to my knowledge that doesn't happen.

9 Q Could that happen?

10 A Presumably.

11 Q Now I believe you mentioned the schools on First
12 Nations earlier. What is the process for what happens when
13 a student leaves a public school in Manitoba or a funded
14 independent school and goes to a school on a First Nation?

15 A Well we hope that when the student goes to the
16 First Nation community and registers in a First Nations
17 school that the principal of that school will be making
18 contact with the child's former school to request the
19 cumulative file or the pupil file. That would be the
20 normal process and, and schools, school divisions and
21 schools, and funded independent schools would transfer that
22 file over to the new school.

23 Q Will your branch or the Department of Education
24 ever contact Aboriginal Affairs and Northern Development
25 Canada?

1 A I'm told that there are, the contact is made with
2 AANDC when we do have a number of files that we believe
3 reside or belong with First Nation students who may have
4 returned to the First Nation community and requests will be
5 made of AANDC if they can confirm for us that that child
6 happens to be a nominal roll that AANDC prepares. And when
7 I say the nominal roll --

8 THE COMMISSIONER: Who's, who's the acronym
9 you're using?

10 THE WITNESS: Sorry, Aboriginal Affairs and
11 Northern Development Canada, the former INAC. AANDC is, as
12 I understand it, has a similar process as we do in the
13 Department of Education inasmuch as they create a nominal
14 role with the listing of all eligible pupils for funding in
15 First Nation schools as of September 30th of a year and so
16 they may have information with respect to where a student
17 who was formerly in the public school system or in the
18 independent school system is now attending school in a
19 First Nation's school.

20

21 BY MR. GLOBERMAN:

22 Q And the Department of Education and your branch
23 does not have any jurisdiction over those schools, correct?

24 A That's correct. We work in a cooperative fashion
25 with First Nation schools. We invite them to submit their

1 students to allow, to submit a demographic to us so that we
2 can create MET numbers for those students because we know
3 some of those students will migrate into a public school
4 system at some point and so it's to their advantage to have
5 a MET number already established. We also are -- we also
6 recognize marks and credits at the senior years level for
7 First Nation students so that when they complete grade 12
8 on a First Nation's school, they can also be awarded the
9 provincial high school diploma. By giving them a MET
10 number, they can also then have generated for them, if they
11 need it at some point down the road, a provincial statement
12 of marks. A provincial statement of marks has on it the
13 provincial seal which is what some educational institutions
14 require for admission purposes.

15 Q I just have a few more questions to ask you about
16 school for very young children.

17 A Sure.

18 Q We know that Phoenix Sinclair attended nursery
19 school in Winnipeg. Do all school divisions in Manitoba
20 offer nursery school?

21 A No, they do not. It's my understanding that
22 there are three school divisions right now that, that will
23 submit nursery school enrollment to the department and
24 that's Winnipeg School Division, Frontier School Division
25 and Swan Valley School Division.

1 THE COMMISSIONER: You say they submit
2 information?

3 THE WITNESS: They submit the names of the
4 students in their nursery school programs to the
5 department.

6 THE COMMISSIONER: Does that mean they don't,
7 others don't have them?

8 THE WITNESS: Well it may mean that others have
9 nursery school programs in their schools but they may not
10 be run by the school division or by the school. In
11 Winnipeg School Division, for example, the nursery school
12 program is funded by Winnipeg School Division.

13

14 BY MR. GLOBERMAN:

15 Q Would children attending nursery school programs
16 under school divisions in Manitoba, be assigned the
17 identifier number you referred to earlier, the MET number?

18 A Yes, they would be, although my staff have told
19 me that Phoenix did not have an MET number.

20 Q I believe you mentioned nursery school programs
21 that may be run by schools that are not part of the school
22 division. Did you mention ...

23 A Well, some schools -- the department of course is
24 encouraging the use of schools as day care and nursery
25 school settings. We provide capital support to expand

1 schools to allow for that because we think there's some
2 logic in terms of having a safe location for students or
3 young children within a school because in many cases that
4 will become their school once they successfully finish the
5 nursery school program and are of an age to come to school.
6 But there are some -- but some of these, many of these day
7 cares are, they're funded by Child and Family Services but
8 they're not run under the auspices of a school division.

9 Q Okay. And, and would children attending those
10 nursery school programs be assigned an MET number?

11 A Not to my knowledge.

12 Q What happens if a student enrolled at a nursery
13 school run by a school division suddenly stops attending?

14 A Well there's no requirement that they continue to
15 attend because it's not part of the K to 12 system. They
16 are not of compulsory school age. I believe it's typically
17 the case that the school or the school or the nursery
18 school program within the school will make inquiries of the
19 family to find out why it is that attendance has stopped.
20 Is there something that's occurred at the nursery school
21 that's of concern, is there a problem with transporting or
22 getting the child there on a regular basis? It may well be
23 that the parents have decided that this isn't a good
24 arrangement for their child, that they want the child at
25 home for a while longer. So it's my understanding that

1 there is some follow up but there is no compulsion for the
2 child to be in regular attendance or to continue to attend
3 a nursery program or even a kindergarten program.

4 Q Do all school divisions in Manitoba offer a
5 kindergarten program?

6 A Yes, they do. Some offer full day kindergarten.
7 All will offer at least half day.

8 Q And again, children enrolled in that program,
9 would they be assigned an MET number?

10 A Yes, they would.

11 Q And will anything happen if a child enrolled in
12 kindergarten suddenly stops attending?

13 A Well, I think as I said earlier there would be
14 follow up from a school to find out why the child has quit
15 attending. There wouldn't be any liability for non-
16 attendance that would come into play because they're not of
17 compulsory school age, but the school will make efforts to
18 find out why the child isn't coming and it may well be that
19 it's a parental decision that they don't want the child to
20 continue for a variety of reasons. But it would be
21 conceivable if there were some issues that were of concern
22 to the school that may raise issues with respect to
23 potentially that the child is in need of protection, that
24 they would be making a referral to the appropriate agency.

25 Q I believe I just have one more question for you.

1 Now we've heard evidence at this inquiry about the
2 difficulties tracking very young children. As you know,
3 Phoenix was a young child. Do you have any comments on how
4 to improve the government's ability to track children of a
5 very young age?

6 A Well, I mean I think whether by deliberate design
7 or because parents are requiring it or requesting it, and,
8 and educators believe that there is a value to having more
9 early childhood education and opportunities available for
10 very young children and having those opportunities within
11 the framework or rubric of the organization called a school
12 division, if those types of things become more expansive,
13 then we will be capturing more of these students within the
14 EIS system. They will get more MET numbers, these students
15 will get MET numbers and taking that piece and perhaps
16 potentially expanding the number of reporting points in a
17 year with respect to where children are in the system, it
18 may be that we are, to some degree, capturing more of these
19 young people within a database and if we were able to
20 update information in terms of where they are, that may be
21 of help to, in terms of being able to track children who
22 are three and four years of age. Short of that, I'm not
23 sure what, what more, at least from the Department of
24 Education angle we would be able to pursue because at age
25 three and age four they're not required to be in school.

1 So it may be that there needs to be some kind of a greater
2 coordinated approach across government but I'm not sure if
3 the Department of Education can take the lead in that
4 respect since these aren't school-aged children.

5 MR. GLOBERMAN: I have no further questions for
6 this witness, Mr. Commissioner.

7 THE COMMISSIONER: All right. Thank you,
8 counsel.

9 Anybody have questions from counsel? Yes.
10 Mr. Phillips?

11 MR. PHILLIPS: I wonder, Mr. Commissioner --

12 THE COMMISSIONER: Yes.

13 MR. PHILLIPS: -- if I might ask just a couple of
14 questions.

15 THE COMMISSIONER: Yes.

16

17 CROSS-EXAMINATION BY MR. PHILLIPS:

18 Q I was looking at the notes that we had been
19 provided with and the indication in here is that the
20 province does not have jurisdiction over First Nations
21 schools; is that correct?

22 A That's correct.

23 Q And First Nation communities do not fall within
24 the Public Schools Act.

25 A That's correct.

1 Q The obligation of children to attend school or
2 for parents to have their children attend school is under
3 the Public Schools Act; am I correct?

4 A For students who reside within, within the school
5 division jurisdiction, that's correct.

6 Q Okay. So the requirement for the Public Schools
7 Act that children attend school or parents have their
8 children attend school, does not apply on First Nations?

9 A The Public Schools Act doesn't apply. It's my
10 understanding that AADNC's requirements are that schools in
11 the First Nations communities have to approximate the
12 system that's in place within the provincial jurisdiction
13 where they are, where they're located. So it's my -- it
14 would seem reasonable to believe that they would require
15 and have judiciary responsibility to provide education for
16 students who are of the same age in First Nation
17 communities.

18 Q That -- my question, I guess, is a little more
19 specific. They're required to provide school. Are the
20 children required to attend as far as you are aware or are
21 the parents required to have their children attend?

22 A I'm not aware -- yeah, I'm not aware of what the
23 requirements are on First Nations communities. If a First
24 Nation student comes off reserve and lives within a school
25 division then the Public Schools Act requirements apply.

1 Q But you're not aware if there's a legal
2 requirement --

3 A Correct.

4 Q -- that they attend on reserve?

5 A Correct.

6 Q Thank you.

7 MR. SCARCELLO: Mr. Commissioner.

8 THE COMMISSIONER: Yes, Mr. Scarcello?

9

10 CROSS-EXAMINATION BY MR. SCARCELLO:

11 Q Good afternoon. My name is Shawn Scarcello. I
12 act for ANCR and Southern Authority and the Northern
13 Authority. Just on that, just to help jog your memory,
14 it's my understanding that the Indian Act requires children
15 to go to school. Does that help you?

16 A You may be correct.

17 Q Okay.

18 A I'm not familiar with federal legislation.

19 Q Okay, thank you.

20 THE COMMISSIONER: Thank you. Anybody else?

21 All right. Anything else from you,
22 Mr. Globerman?

23 MR. GLOBERMAN: No, I have nothing further to
24 add, Mr. Commissioner.

25 THE COMMISSIONER: Witness, so you're completed.

1 Thank you very much for your attendance here.

2 THE WITNESS: Thank you, sir.

3

4 (WITNESS EXCUSED)

5

6 THE COMMISSIONER: All right. We're through till
7 9:30 tomorrow morning, are we?

8 MR. OLSON: That's my understanding, yes.

9 THE COMMISSIONER: All right. We stand
10 adjourned.

11 MR. OLSON: Thank you, sir.

12 (PROCEEDINGS ADJOURNED TO MAY 31, 2013)