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Chair

Mrs. Karen Vecchio

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• (1530)

[English]

The Chair (Mrs. Karen Vecchio (Elgin—Middlesex—London, CPC)): I call the meeting to order.

Good afternoon, everybody. Welcome to our first status of women committee for 2018.

Today we have a very special group with us that has come back to join us with more details. To begin, I just want to do a couple of housekeeping notes on a few things.

First of all, I'd like to welcome our new clerk for the committee, Kenza Gamassi. She's our new clerk and she will be with us. As well, Stephanie Kusie, from the Conservative Party, has now joined us. As you can see, she's a very welcoming person.

Today in one hour we have the Correctional Service of Canada, the Parole Board of Canada, the Department of Public Safety and Emergency Preparedness, and the Department of Indian Affairs and Northern Development.

By request, Anne Kelly, the senior deputy commissioner of the Correctional Service of Canada, has requested five minutes to start, and then we'll continue where we left off in 2017.

Anne, you have the floor for five minutes.

Ms. Anne Kelly (Senior Deputy Commissioner, Correctional Service of Canada): Madam Chair, hello again.

I'm Anne Kelly. I'm the senior deputy commissioner of the Correctional Service of Canada, or CSC, a position that includes responsibility for indigenous corrections. I'm pleased to be joined by Dr. Kelley Blanchette, the deputy commissioner for women, who is responsible for the development and oversight of programs for all federally sentenced women.

I would like to thank you and the honourable members of this committee for the opportunity to appear before you again to resume the discussion we began on November 28 with regard to this committee's study on indigenous women in the justice system. Given that I provided my opening remarks when we appeared in November, today I would like to take just a few minutes to share some recent highlights from CSC's mid-year performance results for 2017-18.

[Translation]

As I noted at the November meeting, indigenous women represent a significant and growing proportion of the incarcerated population, representing 39% of all incarcerated women offenders.

I would also reiterate that CSC cannot control the number of indigenous Canadians receiving federal sentences. However, our work and interventions can ultimately have an impact on the length of time offenders remain in custody, their security level, and when they go before the Parole Board of Canada to seek decisions regarding their release to the community.

[English]

It is this latter part that is CSC's *raison d'être*: to encourage and assist offenders in the work of preparing for release so that they safely and successfully return to society. In this regard, I am pleased to note that CSC's mid-year results show that the number of offenders who are managed in the community is continuing to increase for both indigenous and non-indigenous offenders.

In terms of discretionary releases—that is, releases on day and full parole—women have the best results, with about 81% of their releases being discretionary to date. Moreover, increased reintegration success is being achieved, with more indigenous women successfully reaching the end of their sentence in the community. This positive result reflects the concerted efforts by the women and the case management team to ensure risk factors and needs are addressed through appropriate interventions in preparation for a safe and successful return to the community.

[Translation]

I would also like to highlight the results of two studies completed last year.

The first one looked at whether the aboriginal women offender correctional program (AWOCP) met its objectives. The results suggested that AWOCP is successful in improving the women's skills and attitudes and significantly decreases their rates of return to custody.

[English]

The second study focused on indigenous women who have participated in section 84 releases, which is a legislative provision that applies to offenders who express an interest in having an indigenous community collaborate in their release planning. The study found that 41% participated in section 84 releases over the course of the last five years. It also found, among other things, that women who participate in section 84 releases are more likely to be released on discretionary release and to be classified as minimum security prior to release.

[Translation]

While much progress has been made, CSC continues to address gaps and implement initiatives that best meet the needs of offenders and contribute to our mandate of keeping Canadians safe.

•(1535)

[English]

At this point we would be pleased to respond to your questions on the various aspects of CSC's work and on our progress.

Thank you.

The Chair: Thank you so much, Ms. Kelly. This was very brief.

We're going to start our seven-minute rounds with Pam Damoff for seven minutes.

Ms. Pam Damoff (Oakville North—Burlington, Lib.): Thank you, Madam Chair.

Thanks to all of the witnesses for being here.

I want to start by saying that I spent two days last week visiting five corrections facilities in Edmonton. The Edmonton Institute for Women and Buffalo Sage Wellness House were two of them. We can have a discussion as a committee as to the value of doing that. I certainly see it.

First I want to thank CSC for the fine work they are doing, and all of the amazing people who are working there for the work they're doing. I was incredibly impressed, especially at Buffalo Sage, with the work that's being done. I don't think you can possibly visualize a healing lodge without actually seeing it.

We participated in a circle with elder Claire with four of the women who were there. Some of my questions will be from that visit.

I heard repeatedly, over and over again, from everyone we saw, that the cuts made to the correctional service have had a devastating impact on the ability to deliver within whatever institute it was. You may not have this number, but do you know how much was cut from the budget for CSC from 2006 to 2015? If you don't have it, that's fine. Maybe you could provide it to the committee.

Ms. Anne Kelly: Yes, I can certainly do that.

Ms. Pam Damoff: I don't know if you want to speak at all to how you've had to deal with the cuts that were made to the budget, because they have impacted.... Obviously in an operational division such as CSC, you rely on the budget to deliver the programs in the facilities, right?

Ms. Anne Kelly: Yes. What we did, actually, and we did it for men.... When I appeared before, I spoke about what we created, which are called "aboriginal intervention centres". Basically they're intake assessment centres. We do the assessment of the offender, but we also start programming right when they come to us, and we're going to replicate it for women. In essence, we're going to be assessing women. They're going to be starting their program as soon as they come to us.

The other thing is that we have what we call "aboriginal community development officers" who are going to be placed in our intake assessment centres, or aboriginal intervention centres, so that the release planning, especially for those who express an interest in returning to an indigenous community, starts right at the outset. We don't wait until six months before the offender is about to be released.

These are some of the kinds of innovative approaches that we're using.

Ms. Pam Damoff: We heard really good things about those, actually, and being able to get into the indigenous programming right from the beginning and not having to wait.

Something else we heard a lot about, which a number of women have been caught in, were mandatory minimums. I'm going to turn probably more to the Parole Board—no, it's not really you. Would it strictly be the Department of Justice that would make an indigenous...? Can anybody talk about that?

What we found was that there were women who.... One had been in an abusive relationship and had attacked her abuser. She's in prison and is fearful of an attack, but she got caught in a mandatory minimum and she's been sentenced to.... Among the women we spoke to, it seemed to be quite prevalent that they had been caught up in that.

Is there anybody who can comment on the number of women being caught up in that system, or should I wait until we have the Department of Justice here? Okay.

Another one that came up in terms of the Parole Board was challenges in accessing programs because of lockdowns in the prisons. Whenever there's a lockdown, programming stops. I met one woman who should have been eligible for parole but couldn't access programming because of the number of lockdowns. Do you see that a lot, or do you know about it?

Ms. Suzanne Brisebois (Director General, Policy and Operations, Parole Board of Canada): I couldn't comment specifically on that particular case, of course.

We do know that the logistics within institutions can be complicated and complex. Again, from our side, from the board's perspective, board members take into consideration a lot of information as part of their decision-making, programs being one of them, in terms of an offender's participation in programs, their responsiveness, but there are other factors as well.

We work very closely with CSC. I know that CSC has developed a number of modified programs over the years to target offenders, so I think that's probably an area that Anne could speak to.

• (1540)

Ms. Pam Damoff: I don't mean that as a criticism. I understand the logistics—if a prison is on a lockdown, you have to deal with that—but when you have women who are trying to access the basic program that they need in order to go for a parole hearing, and they can't because of the number of lockdowns, it's frustrating.

Go ahead.

Ms. Suzanne Brisebois: I have just one note.

Participation in a program isn't necessarily a requirement to see the Parole Board. For offenders, part of the consideration is whether they were able to participate in the full program or have completed it. It would be up to an offender to decide whether or not they wanted to waive their hearing or their review. It would be on the offender's determination, based on the review. It's just a factor I wanted to bring up.

Ms. Pam Damoff: I think they were a little concerned that there was no sense going if they hadn't completed it.

Sorry, I lost my train of thought there about the parole hearings.

A number of the women are learning to sew. I talked to them about gender-based analysis of careers. The men were learning carpentry and framing. Sewing is a huge thing, which is not really setting them up for success.

Have we done a gender-based analysis on the career training that's happening within the corrections facilities?

The Chair: You have 20 seconds to respond.

Ms. Anne Kelly: Maybe Kelley can speak to that, but what I can say is that certainly with CORCAN, which is our employment centre, even in Okimaw Ohci, if I'm not mistaken, now the women are learning more skills in construction, and not just the sewing. I know that at EIFW as well, they have—and I can't recall what it is—a different type of skill that they're learning.

The Chair: It's time to move on.

For our next seven minutes, we have Stephanie Kusie.

Mrs. Stephanie Kusie (Calgary Midnapore, CPC): Thank you very much, Madam Chair.

It's a pleasure to be here. I'm so proud to be here as a member of the status of women committee at this special time when we're seeing harassment come to light, very much touching our own government and our own cabinet, so it's a very important time to be here. In addition, it's also about the choices that women are making and about the Canadian summer jobs program. I feel it's a very monumental time to be here, and I'm very proud to be here as part of this committee, so thank you very much for having me.

My first question is for Ms. Kelly.

The previous Conservative government increased funding towards rehabilitative programs for prisoners for things such as healing lodges. Have you seen these types of rehabilitative programs benefit prisoners, and specifically aboriginal women?

Ms. Anne Kelly: Yes.

We have a healing lodge. We have the Okimaw Ohci Healing Lodge, which has 60 beds—

Mrs. Stephanie Kusie: As residents?

Ms. Anne Kelly: Yes.

We also have the Buffalo Sage Wellness House. We just increased its capacity from 12 to 28 beds. Definitely for women who decide to follow a healing path who are interested in their culture, in teachings, in circles, in ceremonies, the healing lodge is a good place to be.

Mrs. Stephanie Kusie: I'm glad to hear that.

Would you say that there are benefits involved in including aboriginal elders and community members as well in the rehabilitative process?

Ms. Anne Kelly: Absolutely.

In our healing lodge and in our institutions, we contract with elders from the community, so the offenders get to know them. If they go back to their community, the elders can continue to work with them.

It's very important as well that our elders provide teaching and counselling, but they're also part of our program delivery. For women, they are there 100% of the time for the program delivery. Absolutely, it's very beneficial.

Mrs. Stephanie Kusie: That's lovely.

What investments in the last decade have you made to improve programs specifically for indigenous inmates? You're talking about these incredible results that you've seen, like the 81% reintegration, and the 39%....

To what do you attribute these specifically?

• (1545)

Ms. Anne Kelly: Definitely, some of it is our programs.

Just recently, the OAG asked us to do an assessment of our programs, and we did. What it showed is that it improves the skills and attitudes of women as well as their motivation. They're more likely to get discretionary release, full parole.

In terms of a program for women, we have what we call the circle of care. There's a self-engagement program that's for everybody. There's also a moderate and high-intensity program. Then there's what we call a maintenance program both for women who are in the institution and in the community.

Mrs. Stephanie Kusie: Thank you very much.

[Translation]

My next question is for Ms. Brisebois.

[English]

In your experience, does involving the victim in parole hearings benefit the victim and give them more ownership of the process?

Ms. Suzanne Brisebois: I would agree with that. I think victims are an integral part of the criminal justice process and conditional release.

For the board itself, board members consider information that's provided by victims. We've had victims observing at our hearings, and even predating the introduction of the Victims Bill of Rights in 2015 the board had, by way of policy, enabled victims to present at its hearings. This enables victims to identify any concerns they have with respect to the offender's conditional release and also to identify the impacts of the offence on themselves and their families and to identify, if it's applicable, whether or not they would recommend to the board the imposition of any special conditions.

Mrs. Stephanie Kusie: Thank you very much. I appreciate that.

With regard to safety and emergency preparedness, in many aboriginal communities there is little access to the justice system or to the police force, and this can make it difficult for victims to bring forward their accusations against offenders.

As well, if offenders are brought to trial and convicted, their sentences are often short. The perpetrators are then brought back into their communities as soon as they've served their time, with little to no protection being offered to the original victim. So continues the cycle of violence and abuse in these communities.

In your opinion, how could we prevent the victimization of these young women and improve their access to the justice system?

Ms. Angela Connidis (Director General, Crime Prevention, Corrections and Criminal Justice Directorate, Department of Public Safety and Emergency Preparedness): In many indigenous communities there are a lot of community safety issues that go beyond just focusing on women and focusing on men. There are problems that communities need to look at themselves, so rather than going into communities and saying, "Here's what we will do to help you", Public Safety has a community safety planning process whereby we engage with communities to help them form a council. We provide a facilitator to coach them through a community safety planning process through which they will take a hard look at their community, at what some of the safety risks are for victims, and at what some of the risks are that lead people into criminal activity, and they will identify how their community can address those and what other supports they need from the federal government, provincial governments, and municipal governments to meet their other community safety needs.

Once they have a plan developed, our next step is working with them to engage other partners across the federal government or in other provincial or territorial governments and in cities to help with that implementation. To date we've worked with over 100 communities to develop a community safety plan. Twenty-eight have finished the plans, and we're working with three as pilot

projects for this implementation process through which we engage across jurisdictions to help with the implementation.

The sense is that there are many elements of a safe community. They include not just the policing—and as you may know, we've increased funding for first nations policing programs, so that will help—but also things like proper youth centres, addictions programs, schools, child care, and work programs so that communities are able to identify what they need to help create a safer community and reduce engagement in the criminal justice system.

We've also just launched another initiative, the indigenous community corrections initiative, to help with the reintegration of offenders. Kelley talked about section 84 programs. Communities actually need something in place so that they can work with the offenders when they re-enter the community, including the dynamics between the victims and the—

● (1550)

The Chair: I'm sorry, but we have to wrap it up.

Ms. Angela Connidis: I'll stop there.

The Chair: Thank you so much.

We're now going to move to Sheila Malcolmson for seven minutes.

Ms. Sheila Malcolmson (Nanaimo—Ladysmith, NDP): Thank you, Chair. Thank you to the witnesses for being here.

My first series of questions is for Indigenous Services.

Last summer, we had a pretty discouraging report. This was the annual report of the Office of the Correctional Investigator, and he flagged the area of mental health. Because we have so many indigenous women in the prison system, I think this fits completely with our study. He flagged a lack of appropriate capacity, resources, and infrastructure to manage serious mental health conditions.

He said:

The issue is especially problematic in women's corrections as there is no dedicated, stand-alone treatment facility for women in federal corrections.

He flagged particularly the Pacific region, which is where I'm elected. He said:

...women in need of emergency health care...are...transferred to...a unit at the all-male regional psychiatric facility...managed in segregation-like conditions.... This practice systematically discriminates against women struggling with mental health problems; it is totally unacceptable and contrary to international human rights standards....

In the responsibility for Indigenous Services to ensure that there's a whole-of-government approach and make sure we're not siloing treatment of women and indigenous women, can you talk about the extent this is on the radar of your minister, and the ways, from indigenous women's perspective, you're identifying to improve that service delivery?

Ms. Margaret Buist (Director General, Children and Families Branch, Education and Social Development Programs and Partnerships Sector, Department of Indigenous Services, Department of Indian Affairs and Northern Development): I think Indigenous Services can talk about the mental health issues, but in terms of the corrections system, that would be the Correctional Service of Canada. My colleague Mary Kapelus will speak to the mental health issue.

Ms. Mary-Luisa Kapelus (Director General, Strategic Policy, Planning and Information, First Nations and Inuit Health Branch, Department of Indigenous Services, Department of Indian Affairs and Northern Development): In the community, before the individuals leave the community, we have a number of community-based programs on reserve. There's a first nations mental wellness continuum framework that has been put in place. As you've seen, in the last couple of years there have been additional investments to deal with suicide crises in the communities, and a number of general mental wellness crisis teams have been put in place across the country.

We have a network of approximately 45 addiction treatment centres in communities, as well as drug and alcohol prevention services. We also have our resolution health support program that deals with the intergenerational impacts of residential schools. Again, as my colleague is alluding to, most of our community-based programming, which is culturally based and culturally relevant, meets the needs of both men and women in our communities and is focused for the on-reserve population, but not so much once they're in the corrections facility.

At the same time, we do work with our colleagues at the Correctional Service and with others so that when offenders do come back out, these community-based programs are ready and adaptable to integrate them back into their communities. We also have supplemental programming through the first nations non-insured health benefits program. Individuals can get counselling through that as well.

As I said, the programming that we at Indigenous Services Canada focus on is mostly for those individuals living in the community at that time.

Ms. Sheila Malcolmson: Following on that, what are you observing about the interruption in community care when indigenous women do leave their community, their reserve, and in some cases end up in completely different parts of the country, and then gravitate back into the community upon release, without having had consistent access to culturally informed mental health care and, certainly as the investigator has identified, appropriate mental health supports for women?

Ms. Mary-Luisa Kapelus: That's the part that depends on, as you're alluding to, where they are in the country. I can't speak to what they're experiencing when they're in the corrections facilities or that programming and how they're able to access it at that point in time, because we're not usually privy to that information.

As I say, when they come back into the community, what we are able to do is work from a community standpoint on reintegrating them by working with the families and working with elders in the community. We heard earlier references to healing lodges and things

like that. Our experience at first nations and Inuit health branch is that these culturally based healing methods are definitely a positive influence on the individuals when they have access to them.

We're seeing more and more evidence in provincial jurisdictions of acceptance of these models and application of these models. Our whole mandate at the branch has been to integrate our system with the provincial systems and other systems, whereby we try to align and try to make it as seamless as we possibly can, notwithstanding jurisdictional challenges that come in, of course. They're there, but again I can't speak to the corrections situation. I apologize for that.

• (1555)

Ms. Sheila Malcolmson: Well, I would urge them.... This is probably why we're doing this study: it's so that we can, as a committee, identify, consistent with the government's promise around a whole-of-government approach and indigenous services, a straight commitment to identify ways to improve delivery that doesn't create a separation between what happens when women end up in a federal institution and what happens when they're at home.

We'd love to reflect any recommendations that any of the witnesses have on how to better knit that together in our final report, I hope.

The Chair: We have 30 seconds.

Ms. Sheila Malcolmson: We have 30 seconds. I'm going to ask if I can get a second one again on the interim recommendation from the murdered and missing indigenous women inquiry to establish a special committee, a police task force. I'm not going to get a chance for everybody to answer that, but I'll sow the seed, and if I get another minute, I'll come back for an answer. Thank you.

Thanks, chair.

The Chair: Thank you very much. We'll go on now to Sean Fraser for seven minutes.

Mr. Sean Fraser (Central Nova, Lib.): Thank you very much to each of our witnesses for being here. I have a number of questions I hope to get through, although I'm sure I won't. To the extent that you can keep your answers concise, it would be greatly appreciated.

The first is to Public Safety. My understanding is there are two kinds of agreements in the first nations policing program: community-based agreements and self-administered agreements. I'm wondering if there's a difference in either the impact on safety or in the rates of incarceration in the first place, depending on which kind of policing agreement is used.

Ms. Angela Connidis: I'll have to get back to you with that data.

Mr. Sean Fraser: Okay. I'd greatly appreciate it. Perhaps doing that through the clerk would be the easiest.

Next, on the issue of job training skills, I think this question would be best placed with CSC. My colleague Ms. Damoff was finishing her questioning when you pointed to an example of some training programs in construction. She's witnessed some examples of women doing nails, for example, which would typically lead to lower-wage, more menial types of jobs. Is there any effort to ensure that the job programming matches labour market needs, either in the area where a person is from or perhaps where the person is incarcerated?

Dr. Kelley Blanchette (Deputy Commissioner for Women, Correctional Service of Canada): We have a number of local-level initiatives, so they vary depending on the site. In response to the Auditor General's report on the reintegration of women offenders, we have made a commitment to increase the ability for women to earn a living wage upon release. That will be both through CORCAN initiatives and then again through local-level initiatives at the site.

Mr. Sean Fraser: Building on that, one of the pieces of testimony, if my memory serves me accurately, that we heard at the beginning of this study was that indigenous women in maximum security institutions are essentially made worse during their experience in those maximum security institutions. Is there a difference between the programming that exists in minimum and maximum security institutions for the purpose of job training, skills development, and reintegration?

Dr. Kelley Blanchette: Our institutions are all multi-level institutions, so actually it's minimum, medium, and maximum security. That said, the environment within the perimeter of the institution is a little different for maximum security versus medium and minimum. There are some differences with respect to job opportunities—for example, work releases. Women would more likely be granted work releases at lower security levels. The maximum security women wouldn't have those opportunities, but they do have opportunities for work within the institution.

• (1600)

Ms. Anne Kelly: In terms of the program for the women who are on the secure unit—maximum security women—there's a modular program that exists so they at least can get programming as well.

Mr. Sean Fraser: Is there any effort to ensure that the programming they receive in maximum security institutions is mirrored to opportunities that will exist for them upon their release?

Ms. Anne Kelly: Well, it's a program continuum, and I want to correct something I said.

I said the programming was 100% elder-assisted in the delivery. Just for the record, it's 100% for the engagement program, which is the first program to motivate the women, and it's 80% for the actual program. However, it's a continuum, so we have the engagement to motivate the women, and then we have the moderate and high intensity, and then we have what we call the maintenance. The maintenance is available in both the institution and the community, so they can continue in the community with the skills they acquired while they were in custody.

Mr. Sean Fraser: On the same topic but moving to Indigenous Services, we heard of some really interesting programming. I'm wondering if there's any that's designed specifically for offenders who are no longer part of the corrections or parole system but who are within the community. We know that people who've served time in institutions typically don't have the same social outcomes as the general public. I'm wondering if there is any specific programming for women who have experienced time in a corrections facility to help them so they aren't left high and dry after completing their experience in the corrections system.

Ms. Margaret Buist: A broad range of educational and social programming is available to first nations women on reserve. It's not specifically targeted to women who have experienced incarceration.

There's programming for family violence prevention. A whole suite of educational programming is designed, in part, for indigenous women. Whether it's early education, high school, or post-secondary education, a huge funding envelope has been developed for the funding of education on reserve over the last two years. There's income assistance programming, child care—

Mr. Sean Fraser: Certainly, but if I can jump in, I fully accept that the bump in funding for these programs is a wonderful thing. I think it's great that they exist. I'm just wondering if there are efforts we are making or perhaps could be making that would essentially target people who might be at the greatest risk of recidivism, so we could improve the social outcomes for people who have the highest risk of running into problems. Could we be doing something to encourage that?

Ms. Margaret Buist: It's a really good point. Many of our programs are proposal-based—for example, our urban indigenous program. There are proposals for job skills training that are specifically targeted to men and women who have been incarcerated. It's the same with our other programming. When we get proposals for family violence prevention projects, they can be specifically targeted to the population of women who have been incarcerated.

Mr. Sean Fraser: That's excellent.

I have 40 seconds left.

We heard about two really great things, section 84 releases and healing lodges, both of which have positive social outcomes. How can we expand each of those initiatives so that more indigenous women in the corrections system are benefiting from these features of our justice system?

Ms. Anne Kelly: Communities that expressed an interest in a section 81 agreement have to go through a process, but we're always open to that.

As I mentioned at the beginning, we've expanded the capacity at Buffalo Sage Wellness House, so yes. Right now we're reviewing a proposal for potentially another healing lodge.

Mr. Sean Fraser: Thank you very much.

The Chair: That's excellent. Thank you very much.

We're now going to start our second round with five minutes, starting with Stephanie Kusie.

[Translation]

Mrs. Stephanie Kusie: Thank you, Madam Chair.

I would like first to thank Ms. Connidis for her answer. Before I became an MP, I was a consular official. That is why I like planning so much.

[English]

Thank you very much for that.

Ms. Kapelus, what factors lead to the lack of access to the justice system that many aboriginal women victims experience? What has been done to address these barriers to justice, please?

• (1605)

Ms. Mary-Luisa Kapelus: I'm with the first nations and Inuit health branch, so I'm sorry, but I'm not—

Ms. Margaret Buist: I can talk to you a little bit about our family violence prevention programming.

We have significant family violence prevention programming, and we also have shelter funding on reserve for both the construction and the operation of shelters. As I said earlier, the family violence prevention programming is proposal-based. We fund about 300 proposals across the country annually, to the tune of about \$38 million. We also fund the operation of 41 shelters, and we're funding the building of five more shelters. Around those shelters there's also prevention programming and operations and counselling, and a suite of services are available for women and their children who've experienced violence.

Mrs. Stephanie Kusie: Thank you very much.

Ms. Kelly, this is a very selfish question. I always want to know the reason things occur. I was very interested when in your opening statement you said women have had the best results. This is very exciting for me as a woman. I would like to know what you attribute that to. Is it something within our character? Is it a comparison of the systems? Why is that so, in your opinion? To me, it's just extraordinary; it's outstanding.

Ms. Anne Kelly: Maybe I can take just a couple of minutes to tell you about the results—

Mrs. Stephanie Kusie: Okay.

Ms. Anne Kelly: —because I am very happy about them.

Very quickly, in terms of education, we were at 84.3% at the end of December, versus 71% in 2015-16. For the average number of days from admission to first program, we're at 32 days, and for non-indigenous women it's 31.5 days, so it's about the same. In 2016-17 we've had the highest number of women released on day and full parole, as well as the greatest number of women successfully reaching the end of their sentence. Basically, the average percentage of time served before they get their first release has gone from 43%, which was longer, to 36%, which is good.

In terms of percentage released on day and full parole, we were at 75% at the end of October, and we were at 65% in 2016-17. In the percentage who have reached their warrant expiry date—meaning the end of their sentence—without being readmitted to custody, again we've seen an increase.

I would say it's a combination of things. For both men and women, we're seeing a higher number of them in the community, under supervision. I think it's also because of the programs we have.

I think you've witnessed the work of the staff who work with the offenders, and you'll find that if you visit our institutions or go to our community parole offices, staff are dedicated. They're committed to what they do. They believe in the mandate of the mission, which is actively assisting and encouraging offenders.

What we want and what we believe is that we want them to be better than they were when they came to us. That's why we work with them. We offer them programs and we have elders and chaplains in our institutions. Also, in terms of the review of employment, we're doing that so we can provide them with opportunities so that when they are released, they can get decent

pay and can maintain themselves in the community. It's a combination of factors.

Mrs. Stephanie Kusie: It's a combination.

I was looking for—

The Chair: Excellent. We love you, but you're done.

Carrying on, we're moving on for five minutes to Eva.

Eva, you have five minutes.

[Translation]

Mrs. Eva Nassif (Vimy, Lib.): Thank you, Madam Chair.

In a previous study, the Disabled Women's Network Canada stated that the prevalence of traumatic brain injuries among women inmates is often a result of domestic violence. The study also stated that these injuries were largely undiagnosed or that these women were simply left unsupervised, which made it more difficult to look after and treat them while incarcerated. This can be a contributing factor in the case of persons who reoffend and return to the system.

We heard that evidence over a year ago, so I do not have the statistics any more and do not remember the figures, but I would like you to comment on this. I recall that the number was truly shocking.

• (1610)

Ms. Anne Kelly: I think you are referring to rate of fetal alcohol syndrome, which is about 17%. It is 10% among men and 17% among women.

[English]

Mrs. Eva Nassif: Sorry, it's not this. I'm talking about traumatic brain injury.

Ms. Anne Kelly: Oh, okay.

Dr. Kelley Blanchette: We don't have the specific data on traumatic brain injury. At intake we do a screening, so we're able to identify any men or women with cognitive impairment. We do follow-up assessments after that to determine the cause and course of action, but we don't have data we can point to that would say how many have traumatic brain injury.

That said, we've just recently implemented an electronic health records system, so there is a good possibility that in the future we'll be able to do that. It was implemented just last year.

[Translation]

Mrs. Eva Nassif: Thank you. I think you have answered some of my questions.

I wonder whether the system includes mechanisms or special programs that are culturally tailored specifically for women offenders to foster their social and community reintegration.

Ms. Anne Kelly: Our correctional programs for women include one such program, known as the adapted correctional program model.

[English]

It is for offenders with cognitive impairment.

[Translation]

Mrs. Eva Nassif: Those programs are offered in prisons, but are there other programs to help these women after their release?

[English]

Ms. Anne Kelly: In CSC, as long as they're still serving their sentence, yes, we have a maintenance program in the community. I would have to turn to my colleague to speak to the programs that they have in the community once they've reached their warrant expiry date.

[Translation]

Ms. Mary-Luisa Kapelus: As I said earlier, it is a community program that supports all family members, including women and children, and that helps them be good parents and develop certain skills. This supports the reintegration of women after their release.

Mrs. Eva Nassif: Thank you.

How often are they assessed for brain injuries or fetal alcohol syndrome?

[English]

Do you have any information to tell us if we are evaluating these kinds of diseases in prison for women?

Ms. Anne Kelly: For FASD, we know that some of the women suffer from that. As Kelley explained, normally we do an initial assessment and then, obviously, if we find something, we can do a follow-up assessment. With our electronic health records we'll be better able to monitor.

Mrs. Eva Nassif: I will pass the questioning to my friend.

The Chair: It's only five minutes. Sorry—next time.

Stephanie Kusie, you're back on for five minutes.

Mrs. Stephanie Kusie: Thank you.

I would pose the same question to Madame Brisebois as I did to Madame Kelly before.

What investments have you made in the last decade to improve programs specifically for indigenous inmates, to improve these outcomes? What improvements do you see from the Parole Board perspective?

• (1615)

Ms. Suzanne Brisebois: The Parole Board of Canada has board members who make decisions with respect to conditional release parole. The implementation of programs directly with offenders is under the purview of the Correctional Service of Canada, but my colleague, Michelle Van De Bogart, who's the acting chief operating officer at the board, could probably speak a bit to the board's involvement with elder-assisted hearings and the various things it does to basically address the cultural aspects of decision-making.

Mrs. Stephanie Kusie: Sure. I guess I would just consider that the Parole Board would be involved in the evaluation of results and outcomes based upon the programs. As you are sort of the participants and determinants of that, I thought you might be able

to have a unique perspective in regard to what you see as working and the outcomes that are being achieved.

Maybe that's incorrect, but that's my....

Ms. Suzanne Brisebois: I think, generally, if you look at the program and the effectiveness, that's.... The Correctional Service of Canada, because they implement the programs, look at accrediting the programs and assessing their validity and effectiveness.

From the board's perspective, board members will take all the information on a case file into perspective, including various programs that the offender may have participated in, either in the institution or in the community. It's part of the information that board members will assess on a case-by-case basis.

Mrs. Stephanie Kusie: Okay.

Ms. Suzanne Brisebois: The board wouldn't necessarily be involved in looking at the program integrity of the Correctional Service programs.

Mrs. Stephanie Kusie: But there must be some consideration of more positive results. If I were an officer, I'd be thinking, "Well, this is interesting. There's more positive retention in the sense that they're keeping parole and exiting on their deadlines" and these types of things. There would be some consideration as to why these more positive results are being achieved and obtained. I thought you might want to comment on that.

Ms. Suzanne Brisebois: Again, the board views programs as very important. I think we understand that programs are an integral part of an offender's success and reintegration. We understand that.

Again, we work with the Correctional Service of Canada so that board members understand the various programs that are being offered and what's available for offenders, so that when they meet an offender at a hearing, they'll understand whether or not an offender would be in a medium-intensity program and that sort of thing. However, a board member's assessment of an offender's risk and the relevance of program participation does vary case by case.

Mrs. Stephanie Kusie: Certainly, and I wouldn't want you to step on Madame Kelly's toes, given the separation of the programs. I was just looking for another perspective, perhaps. I appreciate that.

Ms. Suzanne Brisebois: We think they're very important.

Mrs. Stephanie Kusie: Yes, thank you. That's a good perspective, indeed.

Madame Van De Bogart, would you comment?

Ms. Michelle Van De Bogart (Acting Chief Operating Officer, Parole Board of Canada): Ms. Kelly was speaking about the involvement in indigenous communities in section 84 releases. From a board's perspective, we have a culturally responsive format for hearings. They are elder-assisted hearings. When we last appeared, I spoke a little bit about that. It's a format that involves a ceremonial aspect as well as a risk assessment portion. Oftentimes women who are involved in section 84 preparations for release that involve their community will take part in those types of hearings, which is a way to make them comfortable. There's an elder as part of those hearings. They can bring community members in. That would be something positive that we've seen contribute to the release, from an administrative tribunal perspective, if that adds anything for you.

Mrs. Stephanie Kusie: That certainly does. Thank you very much. That's the type of information I was looking for.

I'll go back to Madam Connidis in regard to the investments you've seen in the last decade that have enabled your programs to improve as a result.

Ms. Angela Connidis: The community safety planning has made a difference in the communities. We had an evaluation a few years ago that showed they were very effective in building the capacity of communities to understand their safety issues.

There have been crime prevention programs that have been engaged. About 48% of the crime prevention programming has engaged indigenous people, but understand that we evaluate the programs for their effectiveness, and they're not long term.

• (1620)

The Chair: Thank you very much. We're going to move on. We have two more questions coming through.

I'm going to switch it over now to Bernadette Jordan for her five minutes, and then Sheila Malcolmson will have five minutes to finish.

Go ahead, Bernadette.

Mrs. Bernadette Jordan (South Shore—St. Margarets, Lib.): Thank you very much, Madam Chair.

Thank you all very much for being here. I have one quick question, and then I'll turn it to Pam.

When you were here last time, we talked about healing lodges. I learned a lot, so I went back and did some research. I understand there's nothing available on the east coast in terms of healing lodges.

Are programs that may have some similarities or abilities available for women incarcerated on the east coast? Is there a way to offer the type of programming that is successful in parts of Canada that is not available in other parts of Canada?

Ms. Anne Kelly: Absolutely. There are obviously a smaller number of aboriginal women on the east coast and in the Quebec region, so there are no healing lodges. What we do have everywhere are our pathways initiatives. I didn't mention it today, but pathways initiatives, in terms of the women's facilities, normally consist of a house or unit. It has a certain number of beds where women who are interested in following more of a healing path—again, women who are interested in their culture, ceremonies, teachings, and circles—

can participate in pathways. That's one thing, and that's available across the country.

The other thing is the programming we have. Aboriginal programming, which is called "circle of care", is also available across the country.

Mrs. Bernadette Jordan: Pam, do you want the rest of the time?

Ms. Pam Damoff: Yes, please.

I want to go back to FASD. We've heard a lot about it being undiagnosed. We've heard repeatedly that there's an issue with undiagnosed FASD, and that therefore, because it's so unique, the proper mental health services and the proper services available....

Is there a plan or should there be additional funding for that specialized diagnosis? The corrections investigator mentioned it as well.

Ms. Anne Kelly: I know that in terms of FASD, we do some triage. The last time I appeared, I know that CSC had completed assessments. If I'm not mistaken, there are seven comprehensive evaluations for offenders who have FASD. It is possible to do them, but again, an initial screening is done, and then depending on what we find, there can be follow-up as well.

Kelley may want to add to that.

Ms. Pam Damoff: We're looking for recommendations, so is that something that you could see being enhanced in order to improve outcomes for people who do end up in corrections?

Dr. Kelley Blanchette: I'll give you something to think about.

Anne referenced the triage we do, but the intent behind it is to identify everyone at intake who may have a cognitive impairment. Then there's a further, more in-depth assessment. It's not necessarily a diagnosis, although we have in the past provided funding to external agencies with expertise to come in and diagnose any cases of suspected FASD.

That said, in terms of our ability to deliver programs, etc., within the institution, as soon as we know that there's a cognitive impairment, a functional assessment is done to determine how we can meet that offender's needs, so really, at the end of the day, I'm not certain that the diagnosis per se is required, as long as we can adapt to meet that offender's needs.

The example that you gave, Anne, was about the adapted program. That's one example.

Ms. Pam Damoff: Something else is the availability 24-7 of medical services. Certainly at the Edmonton Institution for Women it's 9 a.m. to 5 p.m., so if somebody is sick or has mental health issues after those hours, it's quite expensive and cumbersome, and that is a result of trying to deliver programs with a reduced budget.

Do you see the benefit of having 24-7 mental health and general health services within the facilities?

Dr. Kelley Blanchette: Yes. Right now, if there's an urgent need after hours, then we do have on-call service. We also have some partnerships with local hospitals, but of course having someone on site would be beneficial.

•(1625)

Ms. Pam Damoff: Regarding vacancies on the Parole Board, we heard a lot about that when we were out there.

The Chair: You have 10 seconds.

Ms. Pam Damoff: Okay, then I probably don't have time to ask you. Should we fill them as quickly as possible?

Ms. Suzanne Brisebois: The board is actually in the process. A number of board members were recently appointed, and progress is being made by the government, I think, led by PCO, with respect to board member—

The Chair: Excellent. Thank you so much.

We're now going to move over to Sheila for the last three minutes.

Ms. Sheila Malcolmson: Thank you, Chair.

To Public Safety, we don't yet have an answer on the inquiry's request that a national police task force be established to investigate unsolved cases of murdered and missing women.

Ms. Angela Connidis: I'll pass that question to Margaret Buist, who is leading the response on the interim report.

Ms. Margaret Buist: Thanks. I'm leading the response for Minister Bennett under the Crown-Indigenous Relations department.

The government has been reviewing the recommendations since they came out. There were very helpful interim recommendations and very extensive interim recommendations, so we've been taking a good look at those, in particular the one about the national police task force. We're preparing options and we're looking at the recommendations, and the government hopes to have a response to those recommendations very soon.

I also understand the inquiry is intending to have institutional hearings, which will involve asking the government questions around things like policing. We're looking forward to those as well.

Ms. Sheila Malcolmson: Thank you very much.

To Correctional Service of Canada, the annual report that I referred to in my previous round recommended that transferring mentally ill women in the Pacific region to the all-male regional treatment centre be absolutely and explicitly prohibited. Has that recommendation been adopted already, and if not, why not?

Ms. Anne Kelly: I was the regional deputy commissioner in the Pacific region, and it did happen on occasion. It's only in an emergency situation and it's only for short periods of time that we do this.

The reason we do it is that at that point, the woman is seen by a psychologist or a psychiatrist she knows well. She has her case management team and her parole officer and probably her family is there, so to take the woman and transfer her to the the Regional Psychiatric Centre on the Prairies or to Pinel Institute in Quebec is very disruptive.

What we have done now, though, is that in policy, the placement will only be—

Ms. Sheila Malcolmson: Can I just note that the recommendation was also that it could be to a local external or community psychiatric

hospital as required? The investigator did not recommend sending people to another part of the country.

Ms. Anne Kelly: Yes, and we certainly explore options for partnerships to be able to send women to psychiatric centres in the community, absolutely.

Ms. Sheila Malcolmson: So the practice has not been prohibited since that recommendation in June?

Ms. Anne Kelly: Yes.

Ms. Sheila Malcolmson: That's correct?

Ms. Anne Kelly: I don't believe we have any right now.

Dr. Kelley Blanchette: No, the practice hasn't been prohibited. That said, as Anne was saying, I know that our assistant commissioner of health services has been very engaged in trying to carve out those partnerships with provincial psychiatric hospitals, including on the west coast.

The Chair: Excellent. Thank you very much.

This has been an incredible round of questioning, and we've received a lot of great information. I'd really like to thank the Correctional Service of Canada, the Parole Board of Canada, the Department of Public Safety and Emergency Preparedness, and the Department of Indian Affairs and Northern Development.

If I were to identify each of you, we'd be here for another hour, but thank you very much.

We're now going to take a two-minute suspension and return with our next panel.

•(1625)

_____ (Pause) _____

•(1630)

The Chair: We're returning for our next set of panels.

Today I would like to welcome Donald Meikle from the Saskatoon Downtown Youth Centre Inc., Lisa Lalande and Joanne Cave from the Mowat Centre, and, from the MaRS Discovery District, Adam Jagelewski.

Thank you very much for being here. Today we're going to start off with seven-minute presentations from each organization. We'll start with the Saskatoon Downtown Youth Centre.

Mr. Donald Meikle (Executive Director, Saskatoon Downtown Youth Centre Inc.): Thank you.

Like you, I also have many questions on the investment in indigenous women in our correctional institutions, and actually poverty as a whole.

Historically with government, there's no problem investing in highways, infrastructure, health care, or social services, but no one really wants to talk about investing in our most vulnerable population. We are sinking billions of dollars into trying to eliminate an issue such as homelessness, but no one wants to talk about the issue of how we treat young people and prepare them for independence.

A recent study has shown that 60% of homeless people had child and family services involvement, but they make up only 3% of the population. It often reminds me of the story of the two people pulling dead bodies from a river. They stood strong, pulling bodies day after day, until an elder happened to walk by and asked them what they were doing. They explained what they were doing and how hard they were working. The elder looked at them and asked, "Has anyone gone upstream to find out why all these bodies are coming down in the first place?" When we're looking at indigenous women issues, we still continually look downstream.

I've been working with this population for the past 25 years. When I started, we had children as young as seven working in the sex trade. No one tried to assist the families until it would hit the newspaper. Then the Ministry of Social Services would swoop in, remove the child, and put the child in an institution until they turned 16. It is now 2018, and some things have changed, but how government does business and how they treat this population has not.

In our society we have come through and continue to come through some very dark times for indigenous people. There were the residential schools and the sixties scoop, and now they are continuing to place our children in protective services institutions, taking away their liberties, punishing them for being victims of circumstances beyond their control. In Saskatchewan they have resurrected orphanages by putting babies and infants in 14-bed group homes. We are raising yet another generation of children with abandonment issues who will grow up with no ability to form relationships and who will not know how to bond.

These current practices are expensive and damaging to children and their families. These practices create the conduit to a life of dysfunction into further poverty and institution-based care, such as our correctional facilities. The sad truth to this is that assisting them to become contributing citizens is cheaper and has more of a positive impact on the long-term cycle being broken.

I have a couple of theories to share and ask that you come to your own opinions.

Indigenous and poor people are a huge industry. Jobs in helping and correction professions create a large middle-class labour market that is supposed to serve and protect this population. In my 25 years' experience, I have met many dedicated individuals in government who want to create a better life for those less fortunate, but I often shake my head. Looking at it from an indigenous perspective, they see the government doing the same thing over and over even though it isn't working. This often leaves a further sense of mistrust and hopelessness.

Individuals who experience the current system feel if they were to work on solutions to eradicate the issue, the problem would be gone, and so might their jobs. Can it help you to understand how those less fortunate believe nothing is being done or being put into changing cycles for poor people?

When serving this population, community-based organizations and their clients are expected to achieve desired outcomes in a set period of time. Often trauma, previous abuse issues, addictions, and mental health prolong this person's inability to achieve the desired outcome.

For a moment I would like to turn the tables and ask these bureaucrats why they are not sharing their outcomes and possible ramifications if they are not being met. How did the meaning of what is public service become less important than trying not to embarrass the government of the day?

As politicians, are you guys asking the right questions of individuals tasked with making recommendations and bringing them forward to government? May I suggest a few questions?

What are the communities saying? What are the families saying? What are the outcomes you are trying to achieve? Are these outcomes realistic and achievable? How can we support initiatives as government?

I'm here today to speak about our experience as the first organization in Canada to do a social impact bond. This bond was investing in keeping mothers and children together and out of the child welfare system.

• (1635)

The bond was simple, the math was straightforward, the outcomes were achievable, and it provided an opportunity for us to show that with support and guidance, mothers with children can change and desire a better life for themselves and their children.

The idea for this project with the social impact bond didn't come from government. It began a year earlier with Carolyn Schur, who was doing a study on sleep disorders in high school. After completing her studies, she came to the result that young persons didn't have sleep disorder: they just had nowhere to sleep. This lady began with putting \$50,000 of her own money into a solution. We started a small group to work together to look for solutions. What began as a community response blossomed into what we have today.

Our first investors became interested not to make money but because they could see the difference an investment can make and they could see where their money was being spent.

The then Minister of Social Services, June Draude, proposed the bond as a way to invest in our vulnerable population. We've worked hard to create deliverables that in the end benefit those we serve. We provide an extended continuum of care that enables mothers and their families to stay together. We support young mothers to become educated and successfully employed. We foster independence and self-reliance in young women and their children.

The bond strengthened integrated partnerships within the community, as well as with Connexus Credit Union, the Mahs, private and corporate donors, the Government of Saskatchewan, and the Government of Canada.

The expectation of the bond was that in five years, we were going to have 22 children leaving the program and remaining out of care for a minimum of a six-month period. If these outcomes could be achieved, the bond would pay for itself.

Since June 1, 2013, Sweet Dreams has supported 39 high-risk mothers and 54 children; 33 of these mothers maintain custody of their children to date.

Five mothers and nine children currently reside at Sweet Dreams, and two of the mothers are currently attending the University of Saskatchewan.

I know I'm not going to have time to go into some of the stories of the kids who come into the program and their successes, so I did make a couple of copies if anybody is interested.

In addition to this, we've created an additional four bedrooms and an 18-space child care centre attached to Sweet Dreams. The Mahs, one of the initial investors, are donating back their half a million dollars plus interest so that we can do more for the mothers and the children in need.

In closing, I'd like to say a couple of things.

Investment in indigenous women creates hope for the future and will go a long way in helping keep women out of our institutions. We need to begin to create prevention programs that start at birth and work hard to keep family units together.

Child and family programs need to reflect an industry based on people's futures and a life after being in care. We need to ask these women what they need and how government and the communities they live in can make the difference.

The task seems daunting, but so does doing the same thing over and over again, because it isn't working. Let's start by going upstream to tackle the issue.

Thank you.

• (1640)

The Chair: Thank you very much.

We're now going to move over to Lisa and Joanne from the Mowat Centre.

Ms. Lisa Lalande (Executive Lead, Not-for-Profit Research Hub, Mowat Centre): Thank you.

There's some really cool stuff happening in your province. Thanks for sharing that.

Good afternoon, honourable committee members. My name is Lisa Lalande. I'm the executive lead for the Mowat Centre's not-for-profit research hub. I am joined by my colleague, senior policy associate Joanne Cave.

Mowat NFP is a research arm of the Mowat Centre, which is an independent public policy think tank located at the School of Public Policy and Governance at the University of Toronto.

Mowat NFP focuses on applied policy research relevant to systemic issues facing the non-profit and charitable sector, both in Ontario and across Canada. Our research agenda looks at how this sector can be effective in creating thriving communities and improving the well-being of Canadians. We examine issues such as sector labour reform, finance and funding, data, and legislation and regulation from a systems lens, looking at how individual issues are connected to and impacted by each other as a collective whole.

More recently this has translated into research on measuring outcomes and impact, looking at what is needed to better understand and evaluate which interventions are working and which aren't.

Many people participate in programs or services without any significant or lasting impact because those programs fail to address the root causes: violence, trauma, hunger, illness, and poverty. These root causes are historical and complicated and cannot be isolated and tackled individually. Applying a systems lens to the concept of impact recognizes that the social and environmental issues the sector works to address are highly interconnected.

We understand that a social impact bond is one tool being considered to address the proportion of indigenous women in Canada's criminal justice system. While we cannot speak to the experience of indigenous women in the criminal justice system, we will focus on the challenge of understanding impact and how government funding can be used to support the best results possible.

Selecting and measuring outcomes is often the most challenging aspect of a social impact bond contract. Given that, our presentation will advance two key recommendations: the establishment of a Canadian What Works Centre, a unique type of evidence institution that is proven to be successful in the U.K. and the U.S.A., and the creation of a national outcomes fund, a vehicle that could provide capital to invest in proven interventions and explore innovative approaches. Our briefing note complements this presentation by outlining several key considerations for implementing a social impact bond.

Why build the evidence base? Governments are increasingly facing greater scrutiny about how funds are spent, what outcomes are achieved with those funds, and how evidence of what works is driving the policy-making process. A strong evidence base is an important component of readiness for outcomes-based funding arrangements. This is particularly important for social impact bonds, which rely on proven, tested programs and interventions to attract investors. High-quality evidence is required to assess community needs, select appropriate interventions, define outcomes, and clarify how they will be measured.

Evidence institutions are organizations that possess the technical expertise to review and produce robust policy research as a resource to the public and to policy-makers. While Canada has existing research expertise, we have very few evidence institutions that focus specifically on indigenous criminal justice issues.

What Works Centres emerged in the U.K. and are one type of evidence institution that could be adopted in the Canadian context. What Works Centres are typically independent from government. They are unique from other evidence institutions because they focus on engaging end-users of evidence—for example, front-line staff or beneficiaries. What Works Centres put end-users at the centre of the process, and they often shape how the evidence is collected, interpreted, and used.

For example, the U.K. What Works Centre for Crime Reduction focuses on how front-line police officers understand new evidence about policing and change their own behaviours as a result. Another What Works centre in the U.K., the Centre for Ageing Better, puts the perspectives of seniors first when developing their research agenda. In doing so, centres use citizen input to ensure that the programs and services address what matters to them. This in turn results in cost savings for governments and funders because resources are allocated more effectively.

Our research indicates that a What Works Centre, co-led with existing indigenous organizations and research centres, has the potential to make a significant difference on issues such as this one. Using this model, indigenous stakeholders could co-lead the organization's governance model, co-design the research agenda, and define what outcomes and impacts could look like.

• (1645)

But who pays for this—the exploration of new approaches and the scaling of proven ones?

Ms. Joanne Cave (Senior Policy Associate, Not-for-Profit Research Hub, Mowat Centre): We encourage the committee to also explore the opportunity for a national outcomes fund to identify and scale what works over the long term.

A national outcomes fund is a dedicated fund that offers matching contributions to other orders of government adopting outcomes-based funding models. In the U.K., many outcomes funds draw their resources from dormant bank accounts rather than the federal budget. The Bank of Canada estimates that there are approximately \$678 million in unclaimed assets that the government could potentially draw upon for the outcomes fund and What Works Centre.

In B.C., this approach is used to apply a portion of unclaimed funds to the Vancouver Foundation for philanthropic purposes.

A national outcomes fund could provide capital for outcomes-based funding arrangements like social impact bonds in addition to grants to test and evaluate new, innovative programs. This blended approach to risk allows us to use resources more efficiently and to innovate.

A Canadian What Works Centre could be associated with the outcomes fund to define the measurement approach, agree on common indicators, and inform funding allocations. It could also help organizations build capacity to measure their own impact, making the outcome fund's investments more targeted and effective over time.

We applaud the committee's commitment in addressing this important issue. Social impact bonds and social finance tools are one approach to mobilize the capital needed to achieve a successful outcome. We consider the proposal for a What Works Centre and a national outcomes fund to be preconditions for exploring a social impact bond contract.

Furthermore, we encourage the committee to focus on indigenous-led solutions and invest in the long-term infrastructure that is needed to create meaningful social change. A national outcomes fund, with support from a What Works Centre, could work together to explore

outcomes-based funding arrangements with the existing evidence base and also experiment with new, untested programs and services.

Thank you for your time and attention. My colleague and I welcome any questions you may have.

The Chair: Thank you very much.

Now, for seven minutes, we have Adam Jagelewski from the MaRS Centre.

Mr. Adam Jagelewski (Director, Center for Impact Investing, MaRS Discovery District): Thank you, Chair.

Good afternoon, members and members' staff.

I represent the MaRS Centre for Impact Investing at MaRS Discovery District in Toronto. We partner with governments, non-profits, and investors to direct capital to social problems. We advise governments on how to deliver better outcomes and results for vulnerable populations in Canada.

We cannot speak to the experience of indigenous women in the justice system. I was listening to the questions in the last session and I would have been able to answer none of them. However, what we can speak to is the chance to approach the problem in a new way.

I'd like to make two hypotheses to this committee: an outcomes-focused approach to the issue will enable those working with indigenous women to get better results, and a new tool, called a "social impact bond", can facilitate the transition to an outcomes-focused approach.

Let me explain. Our public and philanthropic funding system spends an extraordinary sum on programs designed to rectify social problems. Governments pay non-profits to deliver many of those programs. How does the government pay for these programs? It writes a list of activities in which the non-profit may engage. The non-profit also has a list of eligible expenses.

The non-profit runs the program, stays within the bounds of the sanctioned activities, and submits its eligible expenses. The government pays those expenses and asks for a report on how many people went through the program, and it may hear something about how the program has helped those people.

Let me give you an example to bring this to light. A homeless shelter is funded based on its activities—namely, the number of clients housed. Shelters take in individuals in need, but do not have the resources to treat the underlying causes of their homelessness, such as illness or chronic depression, for example. Because the system does not focus on making the individuals better, but rather simply on whether the shelter filled its quota, the cycle of homelessness continues.

At the end of projects like these, we know the non-profit spent the public's money on the items on which it promised to spend the money. We can check off that basic accountability box, yet at the end of the project we very often don't know what the project achieved for the people it was meant to serve. We cannot check the accountability box that asks the value the program earned in return for the public's money.

That is way too simple a story, of course. Non-profits sometimes report on outcomes and academics and governments sometimes study social problems, but day-to-day social service delivery rests on what non-profits do, not on what they accomplish. That approach leaves too much potential—community potential, non-profit potential, government potential—on the table.

How else might the government pay for a social problem? The government might pay for social programs based on a program's results. It might pay for a program to the extent the program achieves the result it is set to achieve. Let me give you an example.

Roca Inc., a U.S.-based non-profit, has spent many years keeping young men out of prison. Roca is now delivering some of its services under what it calls a pay-for-success contract, which you may know as a pay-for-performance contract or a results-by-payment contract. Under that contract, Massachusetts agrees to pay Roca on its success in reducing prison days among young men already involved in the justice system. Roca, unlike many non-profits delivering social programs, knows its precise goal: to steer its clients away from prison. At the end of the program, Roca and Massachusetts will know about how to accomplish that goal. This is very similar to what Don was talking about earlier.

Another example is closer to home but is on a different social issue: heart disease and stroke, which kill many in Canada each year. High blood pressure puts people at risk, yet we know the modifiable behaviours that can curb this negative trajectory. In two weeks, the Heart and Stroke Foundation of Canada will kick off a program designed to stabilize and reduce blood pressure among people approaching high blood pressure. The Public Health Agency of Canada has promised to pay for the program depending on how well the program actually helps people stabilize and reduce blood pressure. At the end of the project, the agency and the Heart and Stroke Foundation will know more about how to combat rising blood pressure in an aging society.

Both Roca and the Heart and Stroke Foundation did something unusual. They asked investors—foundations, financial institutions, corporations, individuals—to invest in their programs—not donate, not grant, but invest.

•(1650)

Like most non-profits, Roca and Heart and Stroke cannot take the financial risk that their programs do not work. They need money up front to pay the costs of their programs. They cannot wait a month or a year until they report results, so they ask investors to put up this upfront money.

The investors—and not the non-profits—are taking the risk that the programs do not work. If the programs work, the governments will pay a return; if the programs do not work, the investors will lose their money. This arrangement is called a social impact bond.

Social impact bonds in particular, and paying for outcomes in general, come with their own share of problems. Picking outcomes is not easy. Deciding the metrics to capture the change is difficult. Tracing cause and effect between a program and its results is a nuanced task. These steps are additional to the current grant and contribution process, and yes, when a program works, the

government pays more: the cost of the program, plus a return to investors.

Might the benefits outweigh the costs? That's what we are here to find out. Social impact bonds are a tool devised to reframe how we think about funding social problems. The real value is not in the investment but in putting results first. If we put results first and build our response to a social problem with constant reference to a precise goal, won't we do better by the people we're meant to serve?

We have not answered that question yet, but given the stasis in too many social problems, we think it's a question worth exploring. We believe a focus on outcomes may help communities better serve indigenous women in the justice system.

Thank you.

•(1655)

The Chair: Thank you very much.

We're now going to start our seven-minute rounds, and we're going to start off with Emmanuella Lambropoulos.

Ms. Emmanuella Lambropoulos (Saint-Laurent, Lib.): Thank you.

I would like to thank all of the witnesses for being here with us today.

I'll start off with Mr. Meikle. Thank you for taking the time to talk to us about how your youth centre is working and how many benefits it can have for the kids and their mothers, who are staying together.

I'd like to know a bit more about that. Can you share at least one of the stories with us and maybe talk to us a little about why kids in the system are being taken away from their parents?

Mr. Donald Meikle: With my 25 years' experience, I honestly believe that governments, for years and years and years, just keep doing the same thing, keep doing a lot of the same things over again in looking at social issues. It's not just provincial; it's federal also. They are often scared to ask the tough questions. As was just presented, they don't want to embarrass their minister. They don't want to embarrass anybody. Oftentimes it comes at the expense of young people.

I have a story I'd like to share. It's really quick. One mom who came into Sweet Dreams was gang-involved, and her child was in care with a family member. She had an addiction to crystal meth and suffered from severe anxiety. Today she's a functioning member of the community who has completed treatment, attends school daily, works with counsellors, attends play therapy with her son regularly, and is a mentor to her peers. Since coming into the program, she's acquired her driver's licence, bought a vehicle, and has worked diligently to build trust and to repair damaged relationships with her family and with her community.

When I heard the first presentation, I was taken aback. With our program and with these kids, we need that motivation. We spend billions and billions of dollars trying to help those who don't really want help, yet we're scared to help, or we don't want to really invest in, those who need help to help deal with what they need to deal with. They want to become contributing citizens. We're sometimes so often chasing our tails.

We got a lot of flak from government because we used the motivational approach versus an assessment. It was actually one of our investors who said, "You can't use these assessments. They're disrespectful to women." It was all negative and about why they took their children.

To go back to the first presentation, it was kind of interesting when they were talking about knitting classes. I have pictures. I'm sorry that I only made three copies.

The initial investment in the social impact bond was \$1 million, and now the total investment is worth about \$3.5 million with the day care. It's kind of cute. We have an action to employment program that works with young people, and we have young people who provide services to seniors. It gets no government funding, but a lot of these young women went into the homes when we were doing the renovations on the old part, because we didn't have any funding for the old part except for community people like Home Depot. They came in and they ripped out the flooring and they did the painting. That's the thing with a lot of our thinking on women and indigenous women, and I see that all the time: our expectations are really low on what their possibilities are. They should be taking the same thing as men. You know what? We had these kids working in this house for about seven months. Two of them went into trades school. They wanted to be carpenters.

I don't know if I answered your questions. I get off the target sometimes; sorry.

• (1700)

Ms. Emmanuella Lambropoulos: All right. Thank you.

I was just wondering if you can explain, Mr. Jagelewski, a little bit more about the social impact bond. I'm starting to understand what it is. It's the first time I've really heard of it, but I guess it's when regular investors invest in a social problem. Can you explain a little bit more how that works?

Mr. Adam Jagelewski: Sure. I'll try to concisely bring this to life.

A social impact bond is a new partnership agreement between government and a non-profit organization, and this agreement is based on the covenant that the organization will deliver on an outcome that government seeks to achieve. It's a way in which we can start to shift our thinking towards results, or what I'm calling an outcome, versus the activities or the inputs/outputs of a social intervention.

Because non-profit organizations do not want to take the risk of potentially failing and because they don't want to take the operational risk of delivering that program without that funding, they seek out investors to provide that working capital. The social impact bond is just a unique way to classify this new partnership agreement, whereby private investors put up upfront money to deliver a social program that is intended to generate better outcomes.

Ms. Emmanuella Lambropoulos: Thank you. I have one minute left.

The last question I'm going to ask is this: have you seen instances of these types of social bonds, these types of new contracts that you all mentioned, seeming to work a lot better than what was done in the past?

Mr. Adam Jagelewski: It's too early to come to that conclusion. As a sector, as a market, we're trying to figure that out. Don's example in Saskatoon is one that is in the spotlight. Heart and Stroke, as I mentioned, is going to be launching its intervention in a couple of weeks. Canada only has a few of these launched. Globally, we're nearing a hundred. I wouldn't suggest that we can make conclusions on a hundred. I do think that we need to test these more to determine whether the outcomes are better for society.

Just as an anecdotal reference point, there are a few that have failed. Those that have failed stopped their programs early. Taxpayer money stays within the public purse, and investors' money is lost.

The Chair: Thank you very much.

I'm just listening. This is excellent.

We're now going to move over to Rachael Harder for seven minutes.

Ms. Rachael Harder (Lethbridge, CPC): Thank you, Chair.

Thank you to each and every one of you for taking the time to be with us today.

I want to start off by directing my questions to Don.

Don, first off, I want to thank you for your work. Your boots are clearly on the ground and you're working very hard in order to serve a vulnerable population very well. It sounds like you're leading a team of people in a whole community approach to this, which is very much appreciated. Thank you.

Your organization is really the first one to use a social impact bond in order to create a difference within a community. Clearly you've made a very big difference for these women and their children, making sure that they have a vibrant future ahead of them, so I commend that.

Now with that, the question I would have for you is why, in your estimation, has it worked so well to do a social impact bond to approach the situation, the social concerns that we have, in this way?

Mr. Donald Meikle: I believe the social impact bond was more than just a social investment. It was an investment in people, and it mobilized our community. It brought together federal and provincial.... It brought together community, and it continues to answer that whole need.

Our biggest challenge was fighting the bureaucracy. We all make a living off poor people. Researchers come in, they do their research, and they leave. We're there in the community and we stay in our community.

If you really believe.... I think this was the easiest thing we ever did, because we believe in our parents and we believe in indigenous people. We believe in the potential. None of these mothers who have come through the programs since 2013 are in an institution. They're all caring for their children, where they should be.

I think what's made it so successful and what continues to make it successful is.... In meetings I've had with bureaucrats and ministers, the investors aren't these big, bad people who just want to make money off the poor people. They want to see the difference. I've had many conversations with the Mahs. For them, it's about showing that you can make a difference.

I think what happens is—and I've seen it with the people in Ontario trying to do a social impact bond—the bureaucrats got involved, and they just overloaded it instead of looking at what you want to do and what the impact is. All of these other things about people going to university and people being employed are all the extras. That's over and above the cost of the bond. With no disrespect, do I care what the cost saving of that is? No, because that's not what the bond was about. The bond was a contract, and all of these other social....

We talk about whether it's too early to see if these are successes. You're damn right they're successes, and I could have brought 30 women here today to show that they're successes. It's not because somebody studies it or somebody says, "Well, maybe it's too early." No. We kept mothers and children where they belong.

When we start building 14-bed group homes, orphanages for our children, because indigenous people are coming in at such an alarming rate, that's something we need to look at and worry about.

• (1705)

Ms. Rachael Harder: Don, thank you. It sounds like you have enjoyed overwhelming success. I certainly appreciate the hard work you have put into that and the investments that have been made, both by the government and also through private enterprise.

As you were presenting to us, one of the things you said was that politicians need to ask a couple of questions. One of them is what communities are saying, and the other is what families are saying, and we need to respond to that.

As a politician in this room right now, I'm asking you what families are saying and what the communities are saying. What do we need to take into consideration?

Mr. Donald Meikle: Communities are different. Wherever we go, communities are different.

I hear lots of, "Well, we're indigenous-friendly" or we're this-friendly or we're that-friendly. Even with indigenous communities, elders have different ways of doing things. Everybody has different ways of doing things, and the people receiving the service have different ways of doing things, but we need to be asking the kids or the people in those communities.

I'm working with this kid. She's 17. She's involved in a gang, and I'm trying to help her get out of the gang. She has actually been asked not to be involved in the gang because she's working with a white guy who works for a community-based organization, so it brings heat on her. I asked her today what is going to keep her out of

an institution. I said, "I'm going to do this presentation for some nice people today. What do I tell them? What do I tell them to keep you from going into an institution in the future?"

She said, "Don, you have to make sure I have a good place to live and that I'm safe. You need to make sure my mental health issues are dealt with, and you need to continue to fight for me to get proper services"—because she has been diagnosed with PTSD, anxiety, and depression—"and you need to believe in me, and you need to make sure that I have a proper opportunity for an education."

When we're asking the people, why don't we lay off our committees and institutions in asking the women what they need?

Ms. Rachael Harder: Thank you.

Am I out of time?

The Chair: You have 50 seconds.

Ms. Rachael Harder: Don, you're talking a lot about prevention. In my estimation, unfortunately, a lot of the conversation around this table thus far has been about responding to women after they have been incarcerated.

Why is prevention so key?

• (1710)

Mr. Donald Meikle: It's like my fish story I used on some people some time ago. Use fish; don't use dead bodies.

My point in this whole thing is that we have to start looking upstream at the reason, it's like everything. It's like the sixties scoop and the residential schools if we keep doing the same thing.

It's like homelessness. We know that 60% of the people living on the streets have had child and family service involvement, so what are we doing there? We have to do prevention. We can't just keep....

What we're doing is really expensive, and your outcomes aren't always the best, so prevention is where it needs to start. We can't just keep doing the same thing.

The Chair: Thank you so much.

We're now going to move over to Sheila Malcolmson for seven minutes.

Ms. Sheila Malcolmson: Thank you, Chair, and thank you to all the witnesses for reminding us how important it is to invest in families, and in women in particular, and that it pays dividends in every way for the whole country. Thank you for the work you're doing.

To Mr. Meikle from the Saskatoon Downtown Youth Centre, can you draw for us a little bit more of a picture of the impact of interrupting parenting and interrupting families, and how that leads to the two-pronged problem that this committee is studying—not only the rate of incarceration of indigenous women, but also what many of us perceive as indigenous women's unfair treatment in the justice system?

We've been hearing from witnesses about access to legal aid, about the feeling that the police are not a safe place to go to. All of those pieces can end up landing indigenous women in jail, often through no fault of their own. Can you take us back to that family interruption and how that can get us deeper onto a bad path?

Mr. Donald Meikle: If you look at indigenous women—and again, I've worked with them for 25 years—you see they have always been kind of the anchor in the home. They've been the provider. They have made sure they kept the family unit together. If you look at young women and that whole of flow of where we start, you see we often start at birth when we take their children away. We start taking their home away right from birth. We take away any kind of hope that they have for a better life, right at birth.

We kind of do things really backwards. We do things to indigenous people that we would never do to.... I see things on a daily basis that happen to these young women, and there's no way they would treat my daughters the way they treat these indigenous women.

The way we need to really start looking at is that when you talk to indigenous women in institutions—and my God, I've dealt with hundreds of them over my 25 years—often there's that feeling of hopelessness. Often you see that unresolved trauma, that unresolved abuse. Right from childhood they get punished for being victims of abuse and victims of our current system.

Until we start respecting and appreciating that, it's not going to change. They're in these institutions. They're angry and feeling hopeless. Giving them a sewing class is not going to help them once they get out of the institution.

We have a proposal in front of Status of Women right now. We want to get business in our community involved in helping young indigenous women to create and set up businesses and become contributing citizens in that way. We all have this mentality of “Here, have a welfare cheque and everything is going to get better.” It's not.

These kids I work with on a daily basis are no different from my kids. When they get out there and start to work and earn money, they want to earn more. They want the same things that all of our kids want, the same things that all of us wanted growing up. Until we come to that realization and have those expectations.... I'm sorry, but as long as we continue having sewing classes for indigenous women, it's not going to get better. We're not preparing them for life outside of the institution. The sewing classes don't cut it; I'm sorry.

• (1715)

Ms. Sheila Malcolmson: Can you give us examples of how investments in keeping the family together—supporting families that are, as a result of trauma, having difficulties—and making those investments in the intact family prevents both the women and their kids from becoming either victims of crime or perpetrators of crime?

Mr. Donald Meikle: Again, from the social impact bond, we've created external longer-term housing for these young moms. Keeping them together and dealing with all of that crap is....

I have this statistic in my head and I have to spit it out. Then I can refocus.

Putting an infant in a group home now costs \$600 a day. Can you imagine how much support we could parachute to these young women for 600 bucks a day? We could have somebody living with them and supporting them 24 hours a day.

The issues are so complex, but what you need to have is.... We have ongoing 24-hour support for our young moms. When there's an issue and they call and they need help, you need to be there.

We had a video company come. It was called HitPlay Productions. They wanted to bastardize the social impact bond, but after about a week of being there, when she was leaving, she said, “Do you know what? I realize why this bond and why this is working so well.” I looked at her and I said, “Finally, you're going to admit that it's going to work.” She said, “Yes. It's because you guys are there after the cameras are off.”

After the problems and after the issues and once the healing journey begins, because there are challenges, we need to be there after the cameras are off. We need to support women because their issues are so huge. Indigenous women are more likely to be sold on our streets in Canada than any other ethnic individuals. They're vulnerable. I think what we need to do is spend more time and more resources on healing. They don't want to see counsellors all the time, but they want to have better lives. That ability to move ahead is the best healing for any women, or anybody, really.

We need to set up our bonds or whatever we're looking at doing. We need to get our business involved. We need to get our community involved, because this committee that we have set up, if our proposal is accepted, is going to bring business, and they're not getting anything. Their investment is their time and their expertise, so we need to invest.

The Chair: Excellent, all. Thank you so much.

We're now going to move over to Mark Serré for seven minutes.

Mr. Marc Serré (Nickel Belt, Lib.): Thank you, Madam Chair. Thank you to the witnesses for the work you're doing for indigenous women.

Donald, thank you for your honesty and for your 25 years of work and what you've shared with us.

For my first question, I just want to get an understanding, Adam and Donald, when you talk about a social impact bond. On the one hand, I'm looking at this and I want to expand it across the country and see what we can do. On the other hand, there have been some not too good experiences in the U.K. Some of the investors in the social bond have used some of the homeless individuals as commodities, and it has been a bit negative, so I'm cautious.

I want to get your perspective on what we could do here differently to avoid the kind of pitfalls that occurred in the U.K.

Donald, is there a way to expand this in Canada, if needed? I'd like to hear from both sides.

Mr. Adam Jagelewski: Sure. I think the first point I'd like to make is that a social impact bond shouldn't be thought of as a blunt instrument that will solve a social problem. The core principle of a social impact bond is to actually wrap support around individuals and give them the support they need in order to achieve a better life, or to advance them in some way, shape, or form. I think that if a bond is designed without taking into consideration those unintended consequences or seeks to game the system for the betterment of an investor, that's a poorly designed bond or partnership agreement.

I think it's important for us to make sure that the right intentions behind using this instrument are put forth at the outset. If that happens first, then we can think about the social issue and the best approach to tackling it and determine whether or not a social impact bond is one of the tools we want to use. I think we should be very frank when it's not, and not try to just force it down that pathway.

As Don mentioned, I haven't met an investor who's seeking to commoditize anybody for the profit purpose. Don has mentioned his investors are in it for the social impact first, for the betterment of those the project is working for. I hope it stays that way as this tool matures, and if there is more money floating around, maybe that unintended aspect of the investment sediment might creep in, but I'm hoping that it doesn't.

I think it starts in the proper design of the tool.

● (1720)

Mr. Donald Meikle: I think social investment also can be really good, but again here my honesty is going to bite me in the butt. There are some really good community-based organizations out there, but there are also some really bad ones. We call them "pamphlet programs". They come out with a piece of paper and tell you the wonderful things going on in our community, but they do nothing for the people.

If you're honest in what you're looking for in the bond, there's nothing to be scared of. That was one of my biggest questions: are you scared of the bond? Absolutely I was not scared of the bond. The bond and my investors helped me get through the government bureaucracy when they tried to change the contract midstream. We had an agreement with the deputy minister to pay us so much extra for the moms, because we were getting nothing for them. Halfway through, they took that away without an explanation, but our investors stepped in and asked what was going on. We had one of our investors tell the minister at that time, "If you touch one word in this contract, we'll see you in court."

If you always look at the worst, you can always find a reason not to do anything. I think when people are making an investment, investing in people, we should be looking at the reasons for doing it and how we can do it most easily and to the most benefit.

At the end of the day, we shouldn't be here to make a lot of money. We should be here to make a living. When you're looking at your investment, look at who's going to ultimately win. Is it going to be the community-based organization, the investor, or is it going to be our moms and our children in our case?

When we weighed all that, ultimately all this extra that is happening in Saskatoon, because we have a community that cares, far outweighs any risk we have in the bond.

Ms. Lisa Lalande: Often, in our experience, the intervention gets conflated with the financial mechanism of the social impact bond, and they're quite different. If I may, I'll reframe some of the things that Donald mentioned.

Defining impact is the most complicated aspect of a social impact bond. Defining impact means being able to track and measure outcomes. In our view, the most successful examples of impact are ones where the beneficiaries define what impact means for them. Overall, within the sector, the measurements base, the ability to track

and report on outcomes and impact, is extremely nascent. Not many organizations have the capability to do that, and social impact bonds typically rely on an existing evidence base, which means the ability to be able to track and report.

One of the reasons we focused on What Works Centres and an outcomes fund is that it builds the infrastructure required so that more organizations like Don's can participate, and there's an opportunity to identify and scale up new solutions. However, the ecosystem in Canada needs assistance in developing its understanding of impact and end-user focus, which means the beneficiary focus.

● (1725)

Mr. Marc Serré: Donald, when he was first starting—and you won't have a chance to respond—but then Adam with MaRS, and Mowat.... There's a crisis today: 52% of indigenous youth are in foster care, and it's totally unacceptable, so I'm really curious to learn more about a different method of delivering what we're doing now. Thank you for sharing this.

The Chair: That's excellent. We do have a short time. Rachael, you're going for three and a half.

Ms. Rachael Harder: Very quickly, Donald, could you comment on how your organization is able to be more flexible and more effective, perhaps, in the services it's delivering, than perhaps a government-led program would be?

Mr. Donald Meikle: We're not scared of embarrassing government. We're not scared of the ramifications. We're an organization that believes in our kids. When we first started our housing, we started with one home, and it was for young indigenous women who were involved in the sex trade. We now have a total of 15 homes.

It was kind of interesting, and I just have to tell you this story: we had the then justice minister with the NDP come to open two of our homes and talk about our homes. He asked what we wanted these homes for. I said I wanted these homes for young women who were involved in the sex trade, and even those in care from the ages of 17 to 23. He announces that day that these were going to be two homes for young women 17 to 23, with some supported structured independent living.

For years after that, I was ribbed by the bureaucrats. The idea was that legislatively, we can't do that. That makes me think it should be you who do the press release and tell the people that you and our province don't want our indigenous women and our young women looked after. We've just done things because they're the right thing to do.

A lot of times, the bureaucrats are scared to do things because of their jobs. I'll shut the heck up, but I've done many presentations, and a lot of times it seems the politicians get it, but it gets lost after that in the translation down the line. Even when I talk about impact bonds or when I talk about contributing citizens, the politicians get it and the bureaucrats don't. I don't know if they don't want to get it. They're not that stupid. They are just scared of what's going to happen if they make the wrong decision.

Ms. Rachael Harder: Adam, obviously in the Heart and Stroke Foundation you have a good example of the innovation in this approach. Could you comment further on why a social impact bond allows for innovation?

Mr. Adam Jagelewski: The best example of innovation in a social impact bond is the ability to free up a non-profit service deliverer like Sweet Dreams to run their program without having to report on the activities they're doing month by month and year by year. In the construct of a social impact bond, you determine the outcomes up front and let the Dons of the world do their work. To me, that's the biggest innovation that this financial innovation allows.

The Chair: Excellent. This has been an excellent panel. I'd really like to thank the four of you for coming. Thank you, Donald, Lisa, Joanne, and Adam.

Before we finish for the evening, I just have one thing I need consensus on. Two of our organizations who have already appeared have requested.... They have missed the deadline for their submissions. They are the Native Women's Association of Canada and the Prisoners' Legal Services. The Native Women's submission is coming; the Prisoners' Legal Services one is already here. Do we have consensus to receive the reports?

Some hon. members: Agreed.

The Chair: Great. We're moving on with that.

Just for your own scheduling purposes, from 3:30 to 4:30 we'll have regular committee business on Thursday and the subcommittee from 4:30 to 5:30. That's just so you can make your own schedules and we can discuss more.

Today's meeting is adjourned.

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