

**THE CORNWALL  
PUBLIC INQUIRY**



**L'ENQUÊTE PUBLIQUE  
SUR CORNWALL**

**Public Hearing**

**Audience publique**

**Commissioner**

**The Honourable Justice /  
L'honorable juge  
G. Normand Glaude**

**Commissaire**

**VOLUME 22**

**Held at :**

Hearings Room  
709 Cotton Mill Street  
Cornwall, Ontario  
K6H 7K7

Tuesday, April 25, 2006

**Tenue à:**

Salle des audiences  
709, rue de la Fabrique  
Cornwall, Ontario  
K6H 7K7

Mardi, le 25 avril 2006

**Appearances/Comparutions**

Mr. Peter Engelmann	Lead Commission Counsel
Ms. Christine Morris	Commission Counsel
Ms. Raija Pulkkinen	Registrar
Ms. Christine Morris	
Mr. Peter Manderville	Cornwall Police Service Board
Ms. Reena Lalji	
Mr. Neil Kozloff	Ontario Provincial Police
Acting Supt. Colleen McQuade	
Ms. G. Saccoccio Brannan, Q.C.	
M <sup>e</sup> Claude Rouleau	Ontario Ministry of Community and Correctional Services and Adult Community Corrections
Mr. Mike Lawless	
Mr. Stephen Scharbach	Attorney General for Ontario
Mr. Peter Chisholm	The Children's Aid Society of the United Counties
Mr. Allan Manson	Citizens for Community Renewal
Mr. Dallas Lee	Victims Group
Mr. David Bennett	The Men's Project
M <sup>e</sup> André Ducasse	Diocese of Alexandria-Cornwall and Bishop Eugene LaRocque
Mr. William Carroll	Ontario Provincial Police Association
Mr. Peter Engelmann	Mr. Robert Fulton

**Table of Contents / Table des matières**

	<b>Page</b>
List of Exhibits :	iv
Opening Remarks	1
<b>ROBERT FULTON, Sworn/Assermenté:</b>	4
Examination in-Chief by/Interrogatoire en-chef par Mr. Peter Engelmann	5
Cross-Examination by/Contre-interrogatoire par Mr. Peter Chisholm	137

**LIST OF EXHIBITS/LISTE D'EXHIBITS**

<b>NO.</b>	<b>DESCRIPTION</b>	<b>PAGE NO</b>
P-32	BOOK OF DOCUMENTS - Robert Fulton	7

1 --- Upon commencing at 10:03 a.m./

2 L'audience débute à 10h03

3 **THE REGISTRAR:** Order; all rise. À l'ordre;  
4 veuillez vous lever. This hearing of the Cornwall Public  
5 Inquiry is now in session. The Honourable Mr. Justice  
6 Normand Glaude presiding.

7 Please be seated. Veuillez vous asseoir.

8 **THE COMMISSIONER:** Thank you.

9 Good morning all.

10 **MS. MORRIS:** Good morning.

11 **THE COMMISSIONER:** Yes, Ms. Morris.

12 **MS. MORRIS:** Good morning, Mr. Commissioner.

13 I understand Mr. Ducasse will be speaking to a matter  
14 raised yesterday at the end of the day.

15 **THE COMMISSIONER:** Thank you.

16 André Ducasse.

17 **MR. DUCASSE:** Good morning, Mr.

18 Commissioner.

19 **THE COMMISSIONER:** Good morning.

20 **MR. DUCASSE:** You'll recall yesterday at the  
21 end of the day, Mr. Commissioner, that I brought to your  
22 attention an agreement which has been reached between the  
23 Victims Group and the Diocese with respect to the redaction  
24 of some names in the affidavits which were filed by the  
25 Victims Group in support of their funding and standing

1 application.

2 This was set out in a letter sent to  
3 Commission counsel on April 21 by Mr. David Sherriff-Scott.  
4 Have you been provided with a copy of that letter, Mr.  
5 Commissioner?

6 **THE COMMISSIONER:** I don't have it here, no.

7 **MR. DUCASSE:** I've got a copy. There were  
8 actually two letters. So I'll provide you with copies of  
9 those letters.

10 The letter which sets out the terms of the  
11 understanding reached between the Victims Group and the  
12 Diocese is the top one, Mr. Commissioner.

13 **MS. MORRIS:** These letters should be marked  
14 as exhibits?

15 **THE COMMISSIONER:** No.

16 **MR. DUCASSE:** I have no objection to the  
17 second one being marked as an exhibit but you'll note that  
18 Mr. Sherriff-Scott has asked that this first letter be  
19 addressed strictly to counsel.

20 **THE COMMISSIONER:** Yes.

21 **MR. DUCASSE:** You'll note, Mr. Commissioner,  
22 that the relief which has been agreed to between the  
23 Victims Group and the Diocese is a very narrow relief.  
24 It's directed to a very specific group of people, and that  
25 is that the names that are to be removed ---

1                   **THE COMMISSIONER:** Well, that you're  
2 suggesting they be removed.

3                   What authority do you have to come before me  
4 now? Have you had consensus from all the parties?

5                   **MR. DUCASSE:** I had an opportunity to speak  
6 to most of the parties, and Mr. Manson and Mr. Bennett have  
7 some reservations about the understanding which has been  
8 reached between the Victims Group and the Diocese.

9                   **THE COMMISSIONER:** Okay. So I would suggest  
10 that you bring a motion ---

11                   **MR. DUCASSE:** Very well, Mr. Commissioner.

12                   **THE COMMISSIONER:** --- that you serve all  
13 the parties and then we'll see where we go with all of  
14 that, but I don't think this is a proper way of doing it.

15                   **MR. DUCASSE:** Well, the reason we did it  
16 this way, Mr. Commissioner, is we proceeded on a consensual  
17 basis in the hopes of avoiding what we thought would be an  
18 unnecessary motion given that it was reached on consensus  
19 and our view at the time was that the relief which is being  
20 sought is not significantly different from the relief which  
21 was agreed to during the motion with respect to the  
22 interpretation of the Terms of Reference.

23                   **THE COMMISSIONER:** M'hm. Thank you.

24                   **MR. DUCASSE:** Thank you, Mr. Commissioner.

25                   **THE COMMISSIONER:** So just for the record,

1 I'm giving you back your letters.

2 **MR. DUCASSE:** Thank you, Mr. Commissioner.

3 **THE COMMISSIONER:** They won't be part of the  
4 record. And follow the rules, bring a motion and we'll  
5 deal with it accordingly.

6 **MR. DUCASSE:** Thank you, Mr. Commissioner.

7 **THE COMMISSIONER:** Thank you.

8 All right.

9 **MR. ENGELMANN:** Good morning, Mr.  
10 Commissioner.

11 **THE COMMISSIONER:** Good morning.

12 **MR. ENGELMANN:** The next witness for the  
13 inquiry will be Robert Fulton.

14 **THE COMMISSIONER:** Yes.

15 **MR. ENGELMANN:** Come forward.

16 If the witness could be sworn?

17 **ROBERT FULTON, Sworn/Assermenté:**

18 **THE COMMISSIONER:** Good morning, sir.

19 **MR. FULTON:** Good morning. Good morning,  
20 Commissioner.

21 **MR. ENGELMANN:** Mr. Commissioner, the  
22 Commission will be seeking to qualify Mr. Fulton as an  
23 expert in social work with a particular emphasis in  
24 community needs assessment, and as I go through  
25 qualifications I will have Mr. Fulton explain what that

1 means, "`community needs assessment".

2 --- EXAMINATION IN-CHIEF BY/INTERROGATOIRE EN-CHEF PAR MR.  
3 ENGELMANN:

4 MR. ENGELMANN: Sir, you should have a Book  
5 of Documents to your right.

6 MR. FULTON: I do.

7 MR. ENGELMANN: And that should be a Book of  
8 Documents that has your name on it.

9 MR. FULTON: Yes.

10 MR. ENGELMANN: All right.

11 And I just want you to identify certain  
12 tabs, if you could.

13 MR. FULTON: Yes.

14 MR. ENGELMANN: Tab 1 is a resumé or a CV?

15 MR. FULTON: Yes.

16 MR. ENGELMANN: And that is accurate and up  
17 to date?

18 MR. FULTON: Yes, it is.

19 MR. ENGELMANN: And that's something you  
20 would have prepared?

21 MR. FULTON: I wrote that.

22 MR. ENGELMANN: And Tab 2 is an outline of  
23 your evidence?

24 MR. FULTON: Yes.

25 MR. ENGELMANN: Is that something you would

1 have prepared?

2 MR. FULTON: Yes, I prepared that.

3 MR. ENGELMANN: And I understand, sir, that  
4 it is, in essence, a summary of Tab 4.

5 MR. FULTON: That is correct.

6 MR. ENGELMANN: And Tab 4 is a report you  
7 prepared for the Stormont, Dundas and Glengarry Children's  
8 Aid Society?

9 MR. FULTON: That is correct.

10 MR. ENGELMANN: Can you tell us what we see  
11 at Tab 3?

12 MR. FULTON: Tab 3 is a paper that I  
13 prepared for the Province of Ontario on social indicators  
14 for child protection agencies in Ontario.

15 MR. ENGELMANN: Okay. And then, sir, we  
16 have a number of tabs at the back and my understanding is  
17 that those are statistical tables and data ---

18 MR. FULTON: Yes.

19 MR. ENGELMANN: --- that you would have  
20 obtained from Statistics Canada?

21 MR. FULTON: That is correct.

22 MR. ENGELMANN: And they refer to various  
23 aspects of your report which is at Tab 4.

24 MR. FULTON: Yes.

25 MR. ENGELMANN: With the exception of one

1 table which is at Tab 5, which involves statistics that  
2 postdate the report you prepared for the CAS?

3 MR. FULTON: Yes, that is correct.

4 MR. ENGELMANN: Okay.

5 Mr. Commissioner, if that Book of Documents  
6 could be the next exhibit for the Commission?

7 THE COMMISSIONER: Exhibit number 32?

8 That's fine.

9 --- EXHIBIT NO./PIÈCE NO P-32:

10 Book of Documents - Robert Fulton

11 MR. ENGELMANN: Now, let's go to Tab 1, sir,  
12 if we can, for a minute.

13 MR. FULTON: Yes.

14 MR. ENGELMANN: And I just want to briefly  
15 run through your background.

16 I understand, sir, that you have a Bachelor  
17 of Arts Degree in Philosophy from Carleton University?

18 MR. FULTON: That is correct.

19 MR. ENGELMANN: That's in 1967?

20 MR. FULTON: Yes.

21 MR. ENGELMANN: And that after that, you  
22 obtained a Master in Social Work from the University of  
23 Toronto in 1972?

24 MR. FULTON: Yes, that is correct.

25 MR. ENGELMANN: And as far as work

1 experience, my understanding, sir, is that you worked for  
2 two Children's Aid Societies in Toronto for approximately  
3 20 years in total.

4 MR. FULTON: Yes.

5 MR. ENGELMANN: And those would be Catholic  
6 CAS and Metro Toronto CAS.

7 MR. FULTON: Yes.

8 MR. ENGELMANN: And we had a previous  
9 witness, John Listen, who worked at both of those agencies.  
10 Did you have occasion to work with him?

11 MR. FULTON: Yes, in both agencies.

12 MR. ENGELMANN: And sir, you were almost 10  
13 years at Toronto Catholic CAS. I understand you worked as  
14 a case worker and then as a supervisor of intake and child  
15 protection?

16 MR. FULTON: Yes.

17 MR. ENGELMANN: That was from -- those are  
18 the first 10 years, sir?

19 MR. FULTON: Yes.

20 MR. ENGELMANN: So that would be  
21 approximately 1968 to '77?

22 MR. FULTON: That is correct.

23 MR. ENGELMANN: And then after that, you  
24 moved on to work for the CAS of Metro Toronto?

25 MR. FULTON: Yes.

1                   MR. ENGELMANN: And there you were a  
2 supervisor of long-term care and placement?

3                   MR. FULTON: Yes.

4                   MR. ENGELMANN: Were you also a manager of  
5 foster care, recruitment and placement?

6                   MR. FULTON: Yes.

7                   MR. ENGELMANN: And so that would've been  
8 from approximately 1977 to 1987?

9                   MR. FULTON: That is correct.

10                  MR. ENGELMANN: All right.

11                  Then in 1986, sir, on your resumé you  
12 indicate that you started to do some work for the Office of  
13 Child Advocacy?

14                  MR. FULTON: Yes.

15                  MR. ENGELMANN: And was that as a secondment  
16 while you were still an employee of CAS Metro Toronto?

17                  MR. FULTON: Yes.

18                  MR. ENGELMANN: Can you tell us a little bit  
19 about what you did there?

20                  MR. FULTON: I reported directly to George  
21 Thompson who was the Deputy Minister at the time and I took  
22 referrals from all over the province of children that were  
23 very difficult to serve and very needy from either a mental  
24 health or a developmental point of view and had great  
25 difficulty obtaining access to needed services. And I

1 acted as a broker trying to negotiate access into various  
2 funded agencies and services on behalf of the Ministry and  
3 I also would bring cases to inter-ministerial placement  
4 action committee that had been formed from several senior  
5 officials from several ministries to facilitate the  
6 administrative law jams that seemed to be in the way of  
7 getting children the service.

8 **MR. ENGELMANN:** And did you report directly,  
9 then, to the deputy minister at that time?

10 **MR. FULTON:** That is correct.

11 **MR. ENGELMANN:** All right.

12 And sir, I understand that since then, since  
13 1987, you have worked as a consultant?

14 **MR. FULTON:** Yes.

15 **MR. ENGELMANN:** And in various fields of  
16 social work?

17 **MR. FULTON:** Yes.

18 **MR. ENGELMANN:** And I see at the top of your  
19 resumé in the top right corner, PRO.FILES, Social Research  
20 and Outcome Evaluation. Is that the name of your  
21 consulting firm?

22 **MR. FULTON:** It is.

23 **MR. ENGELMANN:** Can you give us just a  
24 general description of the type of consulting work you've  
25 done and I'll go into some of the specifics.

1                   **MR. FULTON:** Well, a main part of it is  
2                   doing community needs assessments on behalf of Children's  
3                   Aid Societies, the Ontario government, as well as community  
4                   needs such as mental health centres and agencies serving  
5                   young offenders, that kind of stuff.

6                   **MR. ENGELMANN:** Can you then explain to us  
7                   what is meant by community needs assessment when you're  
8                   doing them for Children's Aid or other governmental bodies?

9                   **MR. FULTON:** Well, community needs  
10                  assessments involves really, from my company, involves  
11                  creating a data repository of Statistics Canada data that  
12                  goes back to 1986 and continue through all of the years in  
13                  which the census was done and purchasing datasets from  
14                  Statistics Canada and the Ontario government and other  
15                  federal ministries to assemble, really, as much hard data  
16                  as we can that describes qualities of the community that  
17                  have tremendous significance to the outcomes for children  
18                  and families and the areas of interest for the Children's  
19                  Aids and my customers.

20                  So it's really assembling and then making  
21                  sense of the dataflow; looking at changes over time and  
22                  making interpretations from a social work point of view  
23                  about how that is likely to cause certain outcomes to occur  
24                  for children in terms of their development or for families  
25                  in terms of the kind of interactions that occur in

1 families.

2 **MR. ENGELMANN:** And do these community needs  
3 assessments then assist agencies like the Children's Aid  
4 Society to respond?

5 **MR. FULTON:** Well, in a number of areas.  
6 One is that it provides them with a rationalization to  
7 explain the tremendous variation that exists across the  
8 province and the amount of money the Children's Aid  
9 Societies spend per population because they are accountable  
10 to that, to the government and they have to somehow  
11 rationalize it.

12 Secondly, it helps them to mobilize the  
13 community. It gives the Children's Aid a chance to get  
14 partnerships and mutual understanding between fellow  
15 agencies such as the police and the school boards and other  
16 community agencies, and so forth.

17 And I think also it provides them with a  
18 means to be able to estimate the true prevalence of child  
19 abuse and neglect in the community. There is a problem and  
20 that is that no one can really count the number of children  
21 that are being maltreated at any given point in time.

22 **MR. ENGELMANN:** And why is that, sir?

23 **MR. FULTON:** Because that's a problem that's  
24 occurring in private. It's highly -- there's a lot of  
25 stigma associated with it and both the victims and the

1 perpetrators are motivated to keep it a secret. So it's  
2 hard for, you know, policing agencies and Children's Aid  
3 Societies to identify the problem and intervene to protect  
4 children.

5 **MR. ENGELMANN:** So how long -- sorry,  
6 perhaps you can tell us where -- you've listed a number of  
7 areas in the province where you've done these community  
8 needs assessments. Where did you start?

9 **MR. FULTON:** I started in the Greater  
10 Toronto Area with the York Region, Simcoe, Halton, Peel and  
11 Durham.

12 **MR. ENGELMANN:** And when would you have done  
13 that work, sir?

14 **MR. FULTON:** Those would be done in around  
15 1988 to 1993-94, in that area.

16 **MR. ENGELMANN:** And then I note you've  
17 listed a number of counties or communities in Eastern  
18 Ontario.

19 **MR. FULTON:** Right.

20 **MR. ENGELMANN:** When did you start doing  
21 work in Eastern Ontario?

22 **MR. FULTON:** Nineteen-ninety-three (1993) I  
23 started with Leeds and Grenville CAS and did a community  
24 profile for them and that was received very well by the  
25 neighbouring CASs as well and they approached me, you know,

1 in about -- around 2001-2002 and asked me to do an updated  
2 one for really eight CASs in Eastern Ontario.

3 MR. ENGELMANN: Okay. So you did the work  
4 for Stormont, Dundas and Glengarry?

5 MR. FULTON: Yes, I did.

6 MR. ENGELMANN: And that's what we see at  
7 Tab 4?

8 MR. FULTON: Yes.

9 MR. ENGELMANN: And you would've also done  
10 work for Northumberland?

11 MR. FULTON: Yes.

12 MR. ENGELMANN: Prescott-Russell?

13 MR. FULTON: Yes.

14 MR. ENGELMANN: Lanark?

15 MR. FULTON: Yes.

16 MR. ENGELMANN: Leeds-Grenville?

17 MR. FULTON: Yes.

18 MR. ENGELMANN: And others?

19 MR. FULTON: Yes.

20 MR. ENGELMANN: Okay.

21 Now, your resumé also says that you provide  
22 support to government on community profiles?

23 MR. FULTON: Yes.

24 MR. ENGELMANN: Can you tell us what that  
25 means and what type of work that is?

1                   **MR. FULTON:** Well, I've conducted literature  
2 reviews and written reports, one of which is attached here,  
3 that helps the government to rationalize the tremendous  
4 variation in both expenditures and service patterns across  
5 the province.

6                   **MR. ENGELMANN:** Okay. So this is similar or  
7 consistent work with the community needs assessments?

8                   **MR. FULTON:** It is. This is more  
9 theoretical work rather than the collection of data. It's  
10 more trying to create a logic model to explain what in fact  
11 -- how one could trace -- how one could figure out what's  
12 going on from community indicators, which are like  
13 statistics data, and, you know, the sort of theoretical  
14 risk factors and the mechanisms by which children are hurt.

15                   **MR. ENGELMANN:** Okay. And then you also  
16 talk about the fact that you've been doing work in the area  
17 of risk screening.

18                   **MR. FULTON:** Yes.

19                   **MR. ENGELMANN:** Can you explain what that  
20 means?

21                   **MR. FULTON:** Well, risk screening is a means  
22 by which an agency that has a case -- you know, once a case  
23 is identified, there's a problem for the Children's Aid and  
24 for agencies serving disturbed children to estimate what  
25 the long-term future is for that case. Is the problem,

1           whatever exists, going to get worse? Are the number of  
2           problems facing the individual or the family going to  
3           generalize or are there going to be new problems sort of  
4           tagged on to the end, as you go through time?

5                       So the purpose of risk screening is to  
6           estimate whether or not the problems are going to get --  
7           are going to multiply and get worse. So I have searched  
8           the literature and found valid instruments that enable  
9           agencies, you know, to look into the future and estimate  
10          that risk.

11                      **MR. ENGELMANN:** You also talk about some of  
12          the social service research work you've been doing.

13                      **MR. FULTON:** Yes, that is correct.

14                      **MR. ENGELMANN:** And that starts on page 2  
15          and rolls on to page 3 of your resume?

16                      **MR. FULTON:** Yes.

17                      **MR. ENGELMANN:** Can you just briefly  
18          describe some of that work for us?

19                      **MR. FULTON:** Well, a number of work -- the  
20          first part is about examining evidence-based treatments for  
21          disturbed children especially in foster care and group care  
22          and finding means to improve the standard of service for  
23          those children. That's largely a question of data  
24          collection, data analysis and literature.

25                      Then I've also done outcome evaluation or

1 we've collected data over a thousand children in foster  
2 homes and group homes across Ontario using psychometric  
3 tests, as well as other bodies of information.

4 **MR. ENGELMANN:** Now, you seem to work with  
5 data a lot, data analysis and statistics.

6 **MR. FULTON:** Yes, that's correct.

7 **MR. ENGELMANN:** And from your educational  
8 background and your work over the last 20 years, you have  
9 some experience in data analysis and statistics?

10 **MR. FULTON:** Absolutely, yes. I have a  
11 strong background in data analysis for many years.

12 **MR. ENGELMANN:** Okay. And I note, sir, you  
13 also have clinical supervision and consultation listed ---

14 **MR. FULTON:** Yes.

15 **MR. ENGELMANN:** --- under your consulting  
16 activities.

17 **MR. FULTON:** Yes.

18 **MR. ENGELMANN:** Can you tell us a little bit  
19 about that?

20 **MR. FULTON:** Well, I'm a clinical consultant  
21 to an agency in Toronto called the Centre for Family, Child  
22 and Adolescent Development where the parents have diagnosed  
23 brain injury, either learning disabilities or foetal  
24 alcohol effects or traumatic brain injury, and whereas they  
25 may have had assistance from vocational rehab to be able to

1 walk and climb stairs. They often don't have assistance in  
2 order to be effective parents.

3 So my agency, the agency I'm working for has  
4 parent coaches, and I provide curricula for the parent  
5 coaches and supervise their efforts to be able to teach  
6 these parents with brain injury to be able to learn how to  
7 raise their children and cope with the realities of running  
8 a family, stuff like that.

9 **MR. ENGELMANN:** And I note, sir, you're also  
10 a clinical consultant for the Ontario Association of  
11 Residences Treating Youth.

12 **MR. FULTON:** Yes, that is correct.

13 **MR. ENGELMANN:** Can you tell us what that  
14 work is about?

15 **MR. FULTON:** Well, this is a provincial  
16 association of about 100 agencies serving about 4,000  
17 children in care who are in group homes and treatment  
18 foster care. And what I provide for that company is their  
19 outcome evaluation model and consultation on the use of  
20 psychometric instruments, which instruments, as well as  
21 consultation on evidence-based treatments and standards of  
22 care and accreditation that will allow that association to  
23 support its members to provide better care for kids.

24 **MR. ENGELMANN:** Mr. Commissioner, those are  
25 my questions of Mr. Fulton on his qualifications. So

1 subject to any questions from my friends, I would just ask  
2 that Mr. Fulton be qualified as an expert in social work  
3 with a particular emphasis in community needs assessment.

4 **THE COMMISSIONER:** All right. Any comments  
5 from -- any concerns with respect to the qualifications of  
6 this gentleman?

7 **MR. MANSON:** Can I put one question?

8 **THE COMMISSIONER:** Yes.

9 **MR. MANSON:** Mr. Fulton, you indicated you  
10 had a strong background in data analysis.

11 **MR. FULTON:** Yes.

12 **MR. MANSON:** I think that was the phrase you  
13 used. Can you explain to the Commission what you mean by  
14 that?

15 **MR. FULTON:** Well, I have created a data  
16 repository on my computer that is quite unique in the  
17 province, that, you know, has the census profile data going  
18 back to 1986 and it shows changes over time through all of  
19 the various census years, as well as considerable data on  
20 things like crime rates and accidental death and suicide  
21 and teenage pregnancy, which are separate data files that  
22 you have to purchase and gather from different places. And  
23 I'm continually analysing that data and delivering reports  
24 and providing information to agencies to assist them.

25 That database itself is quite a unique

1 repository. It isn't available anywhere else. You can buy  
2 pieces everywhere, but this is assembled in one place. And  
3 I've done -- I've analysed it through this SPSS, which is a  
4 statistical package to look at correlations between it and  
5 other data that I have such as the number of protection  
6 families opened in each of the Children's Aids over many  
7 years, the number of children admitted to care in each of  
8 the Children's Aid over the years. And so I'm able to then  
9 show correlations between these social indicators and the  
10 internal business performance data of the Children's Aid  
11 Societies.

12 So I guess when I say a strong background in  
13 data analysis plus I've done -- I collect data on  
14 psychometric evaluations over a thousand children in foster  
15 care and group care, and I do outcome evaluations for the  
16 federal government and the provincial government and  
17 individual agencies that involves statistical analysis and  
18 managing data.

19 So I guess that's why I would describe  
20 myself as being very data intensive. I have lots of data  
21 and I trade in that business I guess.

22 **MR. MANSON:** If I could just ask one other,  
23 I have read the material and I think you're right. This  
24 looks like a unique data centre. The collection is likely  
25 unique. My concern wasn't with your experience at

1 collecting specialized data but at analysing it and drawing  
2 inferences about social artefacts from the data.

3 **MR. FULTON:** I agree and that has to do with  
4 background in the theory about how that data can be used to  
5 make interpretations about the -- of a child maltreatment  
6 for example. Now, certainly, I can't look at that data and  
7 analyse like how you can make money from it in terms of,  
8 you know, like where industries are going to grow and  
9 things like that.

10 My field of expertise is in child  
11 protection. It's in child welfare work and my theoretical  
12 expertise is in what are the factors that contribute to  
13 children becoming disturbed or children developing  
14 developmental handicaps, what are the factors that produce  
15 family breakdown and produce harm to children within  
16 families and what are the factors that contribute to  
17 children being able to be successful in school and  
18 successful in life.

19 Now, that background in theory is really  
20 related to my background as a social worker and my  
21 experience in Children's Aid, as well as my experience in  
22 doing literature reviews and analysing it theoretically.  
23 The only thing I can say is look at the results. I mean I  
24 write reports for the province, one of which is attached,  
25 which I -- you know, that's the application of the data in

1 terms of being able to meet the needs of the province and  
2 other people on what does the data mean.

3 **MR. MANSON:** Mr. Commissioner, I'm content  
4 that he be qualified as an expert in exactly the terms that  
5 Mr. Engelmann raised, not these other matters of clinical  
6 expertise.

7 **THE COMMISSIONER:** M'hm. Thank you.

8 **MR. MANSON:** Or social science expertise as  
9 well.

10 **THE COMMISSIONER:** Okay. Thank you. I  
11 understand.

12 Any other comments or questions?

13 All right. Mr. Engelmann?

14 **MR. ENGELMANN:** So then just to be clear,  
15 though we raised some of the backgrounds you had in seeking  
16 to qualify him as an expert in social work with a  
17 particular emphasis in community needs assessment.

18 **THE COMMISSIONER:** Exactly.

19 **MR. ENGELMANN:** Now, I just need a minute.  
20 Mr. Manson has my book.

21 **MR. MANSON:** Oh, I probably have. I almost  
22 had your watch too.

23 (LAUGHTER/RIRES)

24 **THE COMMISSIONER:** What's that commercial,  
25 "Hand in your pocket"?

1                   **MR. ENGELMANN:** Yes. The wallet is on my  
2 left side.

3                   So just to then look at the book and we've  
4 had this marked as Exhibit 32, sir, what I intend to do in  
5 the main is go through your outline of evidence which is at  
6 Tab 2, which, as you've said earlier, is really a summary  
7 of the more lengthy report that you prepared for the  
8 Children's Aid Society of Stormont, Dundas and Glengarry;  
9 correct?

10                  **MR. FULTON:** Yes.

11                  **MR. ENGELMANN:** And can you tell us when you  
12 prepared that report, sir, the report at Tab 4?

13                  **MR. FULTON:** Yes. I prepared that in 2003 I  
14 think, about fall of 2003.

15                  **MR. ENGELMANN:** Okay. And do you know  
16 approximately how long that would have taken? You were  
17 working on other reports for ---

18                  **MR. FULTON:** That's right. I had been  
19 working on reports from about 2002 throughout 2003 and the  
20 timing of those reports depended a lot on the availability  
21 of data from Statistics Canada because Statistics Canada  
22 publishes its 2001 Census in chunks over time, over a two  
23 or three-year period.

24                  **MR. ENGELMANN:** Okay. So when you would  
25 have completed the report in 2003, you would have had all

1 of the census information from the year 2001 census.

2 MR. FULTON: Yes.

3 MR. ENGELMANN: Okay. Now, sir, before we  
4 go into Tabs 2 and 4 again, let's just take a quick look at  
5 Tab 3.

6 MR. FULTON: Yes.

7 MR. ENGELMANN: And that's a report that's  
8 entitled "Social Indicators for Child Protection Program in  
9 Ontario".

10 MR. FULTON: Yes.

11 MR. ENGELMANN: It says "Geographic analysis  
12 of community factors predicting CAS caseloads and costs".

13 MR. FULTON: Yes.

14 MR. ENGELMANN: Would you have prepared this  
15 report before the report at Tab 4 or after?

16 MR. FULTON: I did. I prepared it before  
17 the report on Tab 4.

18 MR. ENGELMANN: All right. And how, if at  
19 all, is it related to the other report?

20 MR. FULTON: Well, it provides a logic model  
21 for making inferences about census data and its impact on  
22 the lives of children and families and it makes it  
23 accountable. I mean it identifies -- instead of simply  
24 giving an opinion, I offer, you know, what's the literature  
25 and what's the logic, the theory upon which one can make

1 that inference, which would then allow any reader to  
2 independently evaluate the inference on his own.

3 MR. ENGELMANN: Okay. I'm looking at the  
4 first page of Tab 2.

5 MR. FULTON: Yes.

6 MR. ENGELMANN: Second bullet and when  
7 you're referring to the purpose of the paper, are you  
8 referring there to the paper at Tab 3?

9 MR. FULTON: Yes.

10 MR. ENGELMANN: And if you could just  
11 elaborate on that briefly then, sir, as to the purpose?

12 MR. FULTON: Well, number one, there  
13 actually is a tremendous variation, you know, in both CAS  
14 usage or CAS caseloads per population and CAS expenditures.  
15 This creates a significant political problem for the  
16 province and accountability problem for the agencies and,  
17 you know, part of it was to try and get an answer to that,  
18 to rationalize that, and as well as to provide a logic  
19 model for identifying what pieces of data agencies should  
20 pay attention to in order to mobilize the community and  
21 direct their resources for the sake of children.

22 MR. ENGELMANN: Okay. Now, you say a little  
23 further down on that same page at bullet five, you say,

24 "The scientific basis for linking  
25 community variables from the census and

1 other databases to social problems such  
2 as crime, child abuse, substance abuse,  
3 psychiatric disorder and family  
4 breakdown, is the theory of social  
5 disorganization."

6 **MR. FULTON:** Yes.

7 **MR. ENGELMANN:** Can you explain just very  
8 briefly what that theory is or what it means?

9 **MR. FULTON:** Well, that theory is that  
10 social processes at the community level such as power  
11 structures, quality of schools, friendship patterns, the  
12 amount of supervision of teenagers, you know, in the  
13 community and community feelings, collective feelings on  
14 the parts of large groups of people, what can be called  
15 cope and anger and concern for neighbours, you know, has a  
16 -- directly affects the outcomes for children and the  
17 outcomes for families. And that sort of belief system if  
18 you will is central to the profession of social work  
19 itself. Social work is in part a community interventionist  
20 discipline, but nevertheless, that's also been studied in  
21 sociology and has been validated as a scientific theory in  
22 which the predictions of it come through.

23 **MR. ENGELMANN:** Is this a recent theory or  
24 is it ---

25 **MR. FULTON:** Well, it was originally

1 developed in the 1930s in Chicago when sociologists  
2 observed that certain neighbourhoods of Chicago had much  
3 higher crime rates than other neighbourhoods. And they saw  
4 that that pattern seemed to continue over many decades even  
5 as the ethnic mix and the racial mix of the neighbourhood  
6 changed.

7 In America, they thought at first, well,  
8 crime was simply partially a function of the fact that  
9 black kids seemed to commit more crimes, but what they  
10 discovered in Chicago was that it wasn't true. Certain  
11 neighbourhoods seemed to produce more crimes, and it didn't  
12 matter what the racial mix was. And so they studied that  
13 theory and thought that it was some function of the  
14 neighbourhood that is contributing separately to the  
15 outcome than the individual contributions that individual  
16 people make to it.

17 The premise of the theory is that if I'm a  
18 high-risk person, if I've got lots of high-risk problems  
19 such as I have emotional disturbances and I've been abused  
20 and I'm angry and neglected and I don't have a secure  
21 family -- so let's say I've got lots of risks, I'm loaded  
22 for bear, if I go into a high-risk neighbourhood, I'm much  
23 more likely to express that risk.

24 If I go into a safe neighbourhood, I'm much  
25 more likely to be protected and I'm much more likely to

1 find a way of not fully expressing it, at least of  
2 recovering to some extent. And conversely, if I'm in a  
3 perfectly okay family, you know, a nice family and I don't  
4 have a lot of personal risks but I'm living in a  
5 neighbourhood that is very troubled. In other words lots  
6 of antisocial conduct; lots of kids dropping out of school;  
7 lots of poverty; lots of hope and despair, if I'm a high --  
8 and they don't have a lot of risk, but I'm living in the  
9 midst of that, my children, for example, or anyone of them  
10 are much more likely to end up having bad outcomes that  
11 wouldn't be otherwise predicted by the family system or the  
12 child's individual factors.

13 In other words, the theory proposes that  
14 neighbourhoods matter, that they produced results.

15 **MR. ENGELMANN:** And when we look at  
16 neighbourhoods, we look at schools and we look at other  
17 institutions within neighbourhoods?

18 **MR. FULTON:** Yes.

19 **MR. ENGELMANN:** Sir, let's take a look at --  
20 I understand you have a table at the back of this that you  
21 then used for your work on the study at Tab 4 and the study  
22 for other CASs.

23 **MR. FULTON:** That table is at the back of  
24 Tab 3.

25 **MR. ENGELMANN:** All right. And we will see

1           that that starts at page 33 of Tab 3.

2                           The table is captioned "Table of Risk  
3           Factors and Census Indicators".

4                           **MR. FULTON:**   Yes.

5                           **MR. ENGELMANN:**  Could you just start by  
6           explaining generally what the table is and what its  
7           significance is for your research?

8                           **MR. FULTON:**  It just shows a logic model for  
9           explaining how certain bad outcomes, which I call social  
10          problems, are in some way linked to a particular risk  
11          factor theme.  And it also shows not just that there is  
12          some sort of correlation with that theme, but rather it  
13          shows what's the process; what's the real life process by  
14          which, I don't know, housing somehow ends up affecting  
15          crime, and it sort of defines that community-based risk  
16          factor is the formal sort of way in which the risk is  
17          conceptualized that is supposed -- it has been demonstrated  
18          in various research studies -- to have an influence over  
19          that bad outcome.

20                           The column at the far right is the Census  
21          barrier or the proxy for the risk factor.

22                           The problem is that the hard data seldom  
23          counts the risk factor exactly.  It sort of counts  
24          something that is correlated with it or a close  
25          approximation of it.  So what you try and -- so in other

1 words, I'll just give you an example ---

2 MR. ENGELMANN: Let me just start you at the  
3 left of the table for a minute, if I could.

4 MR. FULTON: Sure.

5 MR. ENGELMANN: Just so that we are all on  
6 the same page.

7 MR. FULTON: Yes.

8 MR. ENGELMANN: When you say "risk factor  
9 theme", and you set out seven of them; correct?

10 MR. FULTON: Yes.

11 MR. ENGELMANN: Can you tell us what it is  
12 you are assessing about quality of housing, for example, or  
13 quality of schools? What do you mean by "risk factor  
14 theme"?

15 MR. FULTON: Well, what I mean is that if  
16 you search the literature on factors that predict child  
17 abuse and neglect ---

18 MR. ENGELMANN: Right.

19 MR. FULTON: --- what you find is that there  
20 are a number of factors that researchers identify -- and it  
21 is in various textbooks -- that are organized around labels  
22 like housing. Housing contributes to the outcome.

23 MR. ENGELMANN: All right. So it either  
24 helps or hurts?

25 MR. FULTON: That's right; it either helps

1 or hurts. So it's sort of like a general area where the  
2 causative factors seem to be located.

3 **MR. ENGELMANN:** All right. Then when we  
4 move to the next column, "Clinical Process", what is it you  
5 are doing with that risk factor theme then?

6 **MR. FULTON:** That's right. You know the  
7 real question is really what's the process that's causing  
8 the problem? Because it isn't housing per se that causes  
9 problems, it's some bad thing about housing, which can hurt  
10 kids, and it's important to identify exactly what it is.

11 **MR. ENGELMANN:** Is that what you have done  
12 then in that second column?

13 **MR. FULTON:** That's right. That second  
14 column is the result of the literature review in which the  
15 analysis was done describing the bad outcome and what is  
16 linked to it.

17 **MR. ENGELMANN:** All right. So if we have  
18 overcrowding in large apartment complexes that is a  
19 process?

20 **MR. FULTON:** Yes. And that has been  
21 identified, for example, by Dan Offord, the Epidemiologist  
22 at McMaster University who did the Child Health Study, the  
23 Ontario Child Health Study. That's one of the key risk  
24 factors that he identifies in his literature and it is  
25 identified by the province in its structure.

1                   **MR. ENGELMANN:** All right. So we have some  
2 other things under the clinical process.

3                   Maybe just before we go through "Quality of  
4 Housing", you have "Community-Based Risk Factor". What do  
5 you mean by that?

6                   **MR. FULTON:** Well, in other words, it's kind  
7 of like the clinical -- the clinical process is more like  
8 what's the interaction that produces the bad outcome, and  
9 the community-based risk factor is sort of more like the  
10 end result of it. It is sort of like the bad outcome or  
11 the step along the way kind of like the -- for example, the  
12 clinical process is poor supervision of teens.

13                   **MR. ENGELMANN:** Right.

14                   **MR. FULTON:** And the place where it occurs  
15 and which is sort of like the marker ---

16                   **MR. ENGELMANN:** Yes.

17                   **MR. FULTON:** --- where the bad risk factor  
18 is located, is large semi-public areas, like stairwells.

19                   **MR. ENGELMANN:** As opposed to areas that are  
20 public.

21                   **MR. FULTON:** As opposed to public areas.

22                   **MR. ENGELMANN:** Okay.

23                   **MR. FULTON:** Because the teens are much less  
24 likely to be supervised when they hang around if they are  
25 hanging around in stairwells or in parking lots, behind

1 buildings or in large stairwells of apartment blocks. And  
2 so we know, for example -- Michael Rutter has done  
3 extensive studies of this in England -- that semi-public  
4 areas have much higher rates of vandalism and those are  
5 places where they are much more likely to buy and sell  
6 drugs or things like that because they are less likely to  
7 be observed.

8 **MR. ENGELMANN:** So we see the social problem  
9 in the next column for "quality of housing, poor  
10 supervision of teens, intruders, large semi-public areas"  
11 leading to crime?

12 **MR. FULTON:** Exactly.

13 Now, the difficulty is that no one counts  
14 the square footage of semi-public areas anywhere.

15 **MR. ENGELMANN:** Yes.

16 **MR. FULTON:** So it is very hard to actually  
17 see the thing that is the problem from the database. The  
18 proxy for it is the number of large apartment blocks.  
19 Statistics Canada counts the number of apartment blocks  
20 that are over five stories and, in general, that seems to  
21 be indicative. The larger the number of large apartment  
22 blocks, the greater the amount of semi-public areas that is  
23 likely to be in a community. So you can sort of infer if I  
24 see a lot more large apartment blocks, I am probably going  
25 to see a lot more semi-public areas.

1                   **MR. ENGELMANN:** So we could have as quality  
2 of housing our single family homes ---

3                   **MR. FULTON:** Yes.

4                   **MR. ENGELMANN:** --- or condominiums, or  
5 small apartments, right up to the large apartment blocks?

6                   **MR. FULTON:** Yes.

7                   **MR. ENGELMANN:** And you talk about some of  
8 the factors that we see there. For example, support  
9 isolation versus social support.

10                  **MR. FULTON:** Exactly.

11                  **MR. ENGELMANN:** And how do you trace that  
12 through when looking at the density issue?

13                  **MR. FULTON:** Well, especially when you've  
14 got large apartment blocks and you've got a migration of  
15 people moving in and out, what happens is although you've  
16 got things like urban renewal where a neighbourhood gets  
17 raised and new condominiums get built, what happens is that  
18 people move around, they change locations, and this is  
19 migration. So when you've got a lot of migration in a  
20 neighbourhood, what happens is that relationships break  
21 down. Like I have a neighbour for many years and then the  
22 neighbour moves and so that causes social isolation. Now,  
23 if you happen to be a vulnerable person who is very shy,  
24 who's got lots of problems, and you lose your neighbour and  
25 you are moving into a new location, that often takes you

1 longer to make friends and get the support you need, and  
2 that translates for that individual vulnerable family and  
3 an increase in the experience of being isolated and lonely  
4 and that contributes logically, you know, to more family  
5 problems. Because especially if you re poor, you need help  
6 to get along in life.

7 MR. ENGELMANN: Let's look at this in the  
8 context of quality of schools.

9 MR. FULTON: Yes.

10 MR. ENGELMANN: I want to ask you if this is  
11 a significant factor and how can this affect outcomes for  
12 children and families?

13 MR. FULTON: It is a tremendously important  
14 factor and the process of it has to do with the hope and  
15 optimism that kids feel for their future because everyone  
16 knows, it has been well established that the longer you  
17 stay in school, the better your chances are to get better  
18 jobs and earn more money and to some extent, kids that stay  
19 in school longer have higher expectations for themselves  
20 and more hopes for the future.

21 Whenever you see a high rate of school  
22 dropouts you've also got a probability that a large number  
23 of those kids don't feel optimistic or don't have the  
24 resources, and don't have hope for the future.

25 Now, I just what to put it on hold for just

1 a second. It's possible that a high number of kids that  
2 are not in school might be functional if there are lots of  
3 jobs available for kids who don't complete grade 12. So in  
4 the city of Cornwall when the mills were operating, it  
5 wasn't really necessary for you to finish high school. You  
6 could get a good job in the mill if you left when you were  
7 in grade 9 or grade 10, and lots of people in Cornwall used  
8 to do that and that wasn't bad. That's not a risk factor.

9 In other words, if you are going -- if the  
10 economy can absorb you with less than grade 12, then fine  
11 it's a choice, but if dropping out of school means that you  
12 have very limited job prospects, the factories that had  
13 hired semi-skilled or low skilled workers have closed down,  
14 and the jobs that are opened here in the service industry  
15 -- and the service industry prefers young kids -- what  
16 happens is that when you're 20 and 25 and 30 and you have  
17 less than grade 12 education, you become far less  
18 marketable on the job market. And that is very toxic  
19 because that translates into no hope for the future.

20 **MR. ENGELMANN:** All right.

21 **MR. FULTON:** That's why that is a very bad  
22 indicator going on. It's not a guarantee to affect every  
23 single individual in it, but on terms of the whole  
24 population, too much kids -- too much dropping out of high  
25 school is very bad for a community and leads to a lot of

1 psychiatric disorder and crime and I can't -- obviously,  
2 you can't point a direct line between that and the high  
3 suicide rate in Stormont, but it is interesting that there  
4 is a high suicide rate in Stormont and there are other  
5 indicators of teenage developmental problems, a high rate  
6 of teenage childbirth.

7 **MR. ENGELMANN:** All right. So our census  
8 variable there, as you have indicated, is low percentage of  
9 young people attending school?

10 **MR. FULTON:** Yes.

11 **MR. ENGELMANN:** All right. And maybe just  
12 one other area here on the risk factor tables, the "low  
13 SES". What do you mean by SES?

14 **MR. FULTON:** Social Economic Status is  
15 really a combination of educational background, job and  
16 having no job at all, is the lowest of all the status. So  
17 it's low educational and it's job status and -- those are -  
18 - that's sort of roughly speaking the ---

19 **MR. ENGELMANN:** Is income a facet of that as  
20 well?

21 **MR. FULTON:** And income.

22 **MR. ENGELMANN:** Yes.

23 **MR. FULTON:** Your income level determines  
24 your status.

25 Now, when you have relatively low SES

1 defined in those ways, in other words, a low paying job,  
2 like a labourer would be low SES or a clerk or a person  
3 unemployed, low income and low educational background,  
4 there have been numerous longitudinal studies in the  
5 literature in which they followed people with low SES and  
6 what they've discovered is that it is highly correlated  
7 with a number of bad outcomes.

8 One of them, I will give you an example, is  
9 parental psychopathy.

10 **MR. ENGELMANN:** What is meant by parental  
11 psychopathy?

12 **MR. FULTON:** What that means -- I'm sorry, I  
13 said paternal psychopathy.

14 **MR. ENGELMANN:** Okay, paternal.

15 **MR. FULTON:** What that means is that the low  
16 SES has been found in longitudinal studies to double the  
17 prevalence of men who are habitual liars engaged in crime,  
18 engaged in community violence, in domestic assault, in  
19 promiscuity and problems like that, which are generally  
20 described as the qualities of psychopathy. The  
21 longitudinal studies have shown an increase that has been  
22 -- in careful studies, that has been shown to be probably  
23 caused by the low SES itself. The increase in the  
24 prevalence can only be explained by the low SES itself.

25 **MR. ENGELMANN:** And so that is going to be

1 -- again, just so we are clear -- underemployment, no  
2 employment, low education ---

3 **MR. FULTON:** --- low education, no  
4 employment, low income. And also another part of low SES  
5 is really stigmatization. You're also not valued by other  
6 people in society and it's reinforced by the social  
7 institutions. A person with no job and low education who  
8 walks into a bank will not be given much credit and will  
9 not be given much support to get that new home or get that  
10 condo that's there either. No one trusts people with low  
11 SES and they tend to be demonized somewhat. And often, of  
12 course, people on low SES are often supported on welfare  
13 and they're further demonized, further stigmatized by that  
14 fact. And all of that contributes to the -- has an impact  
15 on the character of the people.

16 It looks like psychopathy, by the way,  
17 develops over a generation. In other words, it isn't just  
18 being in that spot for a couple of years that creates a  
19 problem. It's being in that spot for decades, being a  
20 child growing up with parents who are low SES, growing up  
21 and being low SES yourself, it takes that long to undermine  
22 the character to that extent that you've got these  
23 problems.

24 **MR. ENGELMANN:** All right. So you've got a  
25 number of other risk factor themes that are set out on the

1 table?

2 MR. FULTON: Yes.

3 MR. ENGELMANN: And then you use this logic  
4 model ---

5 MR. FULTON: Yes.

6 MR. ENGELMANN: --- when you prepare  
7 reports, as I said, similar to the report you prepared at  
8 Tab 4.

9 MR. FULTON: Yes.

10 And the important thing is that each of  
11 those risk factor themes in that mechanism are referenced  
12 to specific literature, specific reports, so that it is  
13 possible to say, "Hey, Fulton, I disagree with this  
14 inference". "Fine, no problem. Here's the article, follow  
15 the logic yourself", you know, "discuss it with other  
16 experts, decide if you think it's going to hold together".  
17 And it's really -- and to be honest with you, the  
18 communities need assessments -- it's the continuity of  
19 indicators over time. In other words, it's not just one  
20 problem that you need to pay attention to is when you get  
21 the convergence of several problems and several issues, all  
22 of them pointing in a negative direction, and what you say  
23 is, "Look, I can't guarantee what's going to happen with  
24 any one indicator, but if I've got five or six of them all  
25 going in the wrong direction, then I know that that's going

1 to translate into a real increase in child maltreatment, a  
2 real increase in disturbance for children".

3 And so it's the preponderance of evidence  
4 that you sort of have to look at and the pattern of it.

5 **MR. ENGELMANN:** And that child maltreatment  
6 or disturbance, that could be physical abuse, sexual abuse,  
7 neglect?

8 **MR. FULTON:** Yes.

9 **MR. ENGELMANN:** All sorts of issues  
10 involving children?

11 **MR. FULTON:** Exactly, exactly.

12 The truth is, with risk-screening issues  
13 that to a great extent it's very hard to -- they are not  
14 very precise as to what is the specific bad outcome. In  
15 other words, "Low SES" can undermine the character of men  
16 in society, in fathers in particular, which could make them  
17 more likely to victimize somebody or other but doesn't  
18 necessarily predict who is going to be a sex offender or  
19 who is going to be a violent man or this kind of stuff, who  
20 is going to be neglectful and uncaring and abandon the  
21 family. So in other words, it doesn't quite -- the program  
22 -- the knowledge base doesn't allow us to exactly predict  
23 the life course for a particular family or a particular  
24 individual. You can't read it that far.

25 **THE COMMISSIONER:** Nor can we say that

1 people in social economic situation are necessarily  
2 exclusively going to do this and we've got sex offenders in  
3 every class of society.

4 **MR. FULTON:** Exactly. That is very true.

5 Actually, sex offenders are more difficult  
6 to tie into this matrix than others because in point of  
7 fact that is true. They do seem to defy this logic model a  
8 little bit.

9 **THE COMMISSIONER:** M'hm.

10 **MR. FULTON:** And that is a problem with sex  
11 offenders per se and, in fact, relative to sex offenders, I  
12 suggest the model works better to identify why there are  
13 victims than to identify the motivation of the offender.

14 **THE COMMISSIONER:** M'hm.

15 **MR. FULTON:** In other words, communities  
16 that have poor supervision of teens or have -- where the  
17 families are under a great deal of stress and there's not  
18 very many community resources to occupy children and  
19 supervise them, they are more likely to be at risk of being  
20 a victim. That's more likely to be predicted by the social  
21 indicators than, let's say, the motivation factors.

22 **THE COMMISSIONER:** Well, just a minute now.  
23 I don't know. That's a big breath right there. I mean, we  
24 also know that there are victims in every class of society.

25 **MR. FULTON:** Well, except that -- well, I'll

1 tell you what. It isn't so much that there aren't victims  
2 in every class of society. Obviously, there are sex  
3 offenders who do exist across all the classes. They are  
4 going to try to find a victim to satisfy their needs but  
5 they will often pick someone in their own sort of immediate  
6 neighbourhood. But it does appear as though there's some  
7 evidence that some children are more vulnerable than  
8 others.

9 For example, there is literature that says  
10 if a woman has been raped, she's eight times more likely to  
11 be raped a second time; in other words, that there does  
12 seem to be a tendency for some children to be more likely  
13 to be a victim than others. I'm not sure that it's as  
14 perfectly tied to Low SES as it is to other factors which  
15 define the overall mental health of children.

16 **THE COMMISSIONER:** Right. Well, I think we  
17 are wandering off field here.

18 **MR. FULTON:** Sorry.

19 **THE COMMISSIONER:** Let's just go back to  
20 risk assessments and stick with that.

21 **MR. ENGELMANN:** Yes. The other thing, sir,  
22 is this table is a matrix; is it not?

23 **MR. FULTON:** It is.

24 **MR. ENGELMANN:** You have to look at these  
25 factors together ---

1 MR. FULTON: Yes.

2 MR. ENGELMANN: --- when you are concerned  
3 about risk factors?

4 MR. FULTON: That's right.

5 MR. ENGELMANN: Okay. So let's just go to  
6 Tab 2, page 2, then, your outline.

7 Sir, I think we've gone through some of this  
8 before, but you talk there about doing reports and doing  
9 eight reports in the year 19 -- I'm sorry, 2003?

10 MR. FULTON: Yes.

11 MR. ENGELMANN: And into 2004. I  
12 understand, sir, that the majority of the data or all of  
13 the data that you've used is data from Statistics Canada?

14 MR. FULTON: Yes, correct.

15 MR. ENGELMANN: And as you set out here, you  
16 completed the project for Leeds-Grenville in 1999?

17 MR. FULTON: Yes.

18 MR. ENGELMANN: And then separate profiles  
19 for several other CIS agencies?

20 MR. FULTON: Yes.

21 MR. ENGELMANN: Okay. Now, under the "Need  
22 for the Report" you say that it's driven by three issues or  
23 problems. The first one you say is the variation issue.

24 MR. FULTON: Yes.

25 MR. ENGELMANN: And just how great a

1 variation are you talking about between caseloads of  
2 different CASs?

3 **MR. FULTON:** Well, the caseloads for the  
4 number of families that are opened as protection cases per  
5 1,000 families in society with children vary by tenfold  
6 across the province. So that it's a tremendous variation  
7 in the business; you know, in the sort of performance, in  
8 the activities of children, they are suddenly identifying  
9 children in need of protection and that is also twinned  
10 with a tenfold variation in the funding per population.  
11 The real expenditures of child welfare per pop, which is  
12 certainly difficult for the directors of CAS to explain and  
13 justify to the funders, as well as it invites questions  
14 such as if you -- you know, if there's such a tremendous  
15 variation, does that imply that the people at the low end  
16 aren't seeing problems? Are they not -- are they failing  
17 to identify kids at risk.

18 **MR. ENGELMANN:** Okay. So one of the issues,  
19 then, and one of the reasons or needs for community needs  
20 assessments is to rationalize that variation for the CASs?

21 **MR. FULTON:** Yes, absolutely.

22 **MR. ENGELMANN:** And your second point is the  
23 true prevalence of physical and sexual abuse in each county  
24 is unknown.

25 **MR. FULTON:** Yes.

1                   **MR. ENGELMANN:** Why is that a need for this  
2 report and how can the report help there?

3                   **MR. FULTON:** Well, the Children's Aid is  
4 charged with protecting children. The difficulty is that  
5 the harm that's done to children from sexual abuse and  
6 physical abuse is done in private and both the offender and  
7 the victim are motivated by stigma and penalties and other  
8 issues to keep it a secret, so that it's hard for a  
9 policing agency or a Children's Aid Society outside the  
10 private household to see what's going on inside.

11                   Therefore, you don't really ever know how  
12 much crime is really going on in private especially of this  
13 type because this is the most hidden of all the various  
14 types of crime. So for a Children's Aid Society who is  
15 trying to examine -- you know, doing it's due diligence and  
16 doing it properly, it needs to find some proxy or some  
17 other way of estimating what the likelihood -- the amount  
18 of harm that's likely to be going on in the community,  
19 which would then energize their efforts at case finding and  
20 setting up sentinels and working with the schools and other  
21 people to create confidence of children to help them to  
22 come forward and be protected.

23                   **MR. ENGELMANN:** Your third issue or problem  
24 that you say justifies the need for these types of  
25 assessments is the dependency on CASs with other community

1 institutions.

2 **MR. FULTON:** Absolutely. So the Children's  
3 Aid can't do this job successfully on its own. It needs  
4 desperately the help of teachers and police officers and  
5 neighbours and grandparents and community agencies in order  
6 to be able to identify the harm that's done in private. We  
7 need to have -- we need to set it up so that children can  
8 find easy access to people to whom they can confide in who  
9 would then pass the information on to the Children's Aid so  
10 it can act.

11 **MR. ENGELMANN:** All right.

12 And then in the next aspect, you talk about  
13 the fact that the report -- and I think you mentioned this  
14 earlier -- is based on an extensive literature review of  
15 research in sociology and in family studies explaining  
16 child abuse and neglect.

17 **MR. FULTON:** That is correct.

18 **MR. ENGELMANN:** And you set out the  
19 theories, the one we've talked about, social  
20 disorganization theory, and then a couple of others dealing  
21 with the matrix or the correlation?

22 **MR. FULTON:** That's right.

23 **MR. ENGELMANN:** Okay. Now, the summary of  
24 the report, sir, that we find on page 4 ---

25 **MR. FULTON:** Yes.

1                   MR. ENGELMANN: --- is that -- the report  
2 was completed, I think you said, in 2003?

3                   MR. FULTON: Yes.

4                   MR. ENGELMANN: Did you say fall, sir? I  
5 can't remember.

6                   MR. FULTON: The fall of 2003.

7                   MR. ENGELMANN: Yes. And there were some  
8 community consultations afterwards?

9                   MR. FULTON: That's correct.

10                  MR. ENGELMANN: All right.

11                  And you're reporting using data from 1991 to  
12 2001.

13                  MR. FULTON: Yes, that's correct.

14                  MR. ENGELMANN: And so ---

15                  MR. FULTON: So even by the time the report  
16 was out, it was a little out of date.

17                  MR. ENGELMANN: All right.

18                  Now, how significant is that? I mean, is  
19 this report still of some value?

20                  MR. FULTON: I believe it still has some  
21 value although updated data is important to CAS as well,  
22 but it has some value because neighbourhoods -- the quality  
23 of neighbourhoods, the quality of schools, the amount of  
24 hope and optimism in a neighbourhood doesn't tend to change  
25 very quickly. It takes a long time for the quality, the

1 real quality of life in a neighbourhood to change. So if  
2 you have a very good picture of it in '91 and 2001, it's  
3 unlikely to have changed dramatically by now. It will  
4 change to some extent but it's unlikely to have changed  
5 dramatically.

6 To some extent, you know, you get positives  
7 and minuses and they tend to rule each other out. There  
8 are more condominiums being built in Cornwall but, you  
9 know, the Domtar plant closed. So there's pluses and  
10 minuses on both sides.

11 And also, an individual accumulates risk  
12 over their lifetime. So if someone has lived in Cornwall  
13 for 40 years and his character has been developed in part  
14 by his interaction with social institutions like schools  
15 and neighbourhoods and jobs, then that quality is not  
16 likely to be changed or corrected, if you will, by better  
17 times if indeed better times do arrive. I mean, I hope  
18 better times do arrive and it will help a little bit, but  
19 to some extent, you know, risk hangs around for a while  
20 before it tends to dissipate.

21 **MR. ENGELMANN:** And in the community  
22 profile, if I'm correct, you not only look at the United  
23 Counties of Stormont, Dundas and Glengarry, but then you  
24 also look at the city of Cornwall as a part of the United  
25 Counties?

1                   **MR. FULTON:** Yes. Yes, and you'll see the  
2 data, you know, separately identifies Cornwall, and I also  
3 try to compare Cornwall not just within a county but to  
4 neighbouring counties as well, and to look at other cities  
5 and how does it compare.

6                   **MR. ENGELMANN:** So some of the positives and  
7 negatives that you look at may be consistent with other  
8 regions of Eastern Ontario?

9                   **MR. FULTON:** Absolutely. There is very  
10 definitely a pattern evident in the data from doing many  
11 different counties, and that is that centuries-old cities  
12 along the Rideau Canal and along the St. Lawrence River  
13 have -- share a number of neighbourhood qualities in common  
14 and one of the worst of which being is that their  
15 population is falling.

16                   **MR. ENGELMANN:** Okay. So without getting  
17 into the specifics right now, what you do then through the  
18 report and in this summary of the report is you look at the  
19 City of Cornwall, you look at the United Counties, you look  
20 at Eastern Ontario, you look at things vis-à-vis a  
21 provincial average?

22                   **MR. FULTON:** Yes, yes.

23                   **MR. ENGELMANN:** And then how different or  
24 not they are from that?

25                   **MR. FULTON:** Yes.

1                   **MR. ENGELMANN:** Okay. And you say in the  
2 third bullet under the "Summary of the Report" that "The  
3 community profile described some known risk factors that  
4 promote child abuse and child behaviour problems", but you  
5 say there are also some positive signs.

6                   **MR. FULTON:** Yes, there are.

7                   **MR. ENGELMANN:** So there's some ---

8                   **MR. FULTON:** It's not -- I cannot say that  
9 Stormont and Cornwall is uniformly negative. There are a  
10 number of positive qualities and, to be honest with you,  
11 for the agent for the Children's Aid to try and mobilize  
12 the community, it needs to work with its positives to  
13 recover from some of the negatives.

14                   **MR. ENGELMANN:** Now, the next portion of  
15 your summary or your outline is captioned "Dominant  
16 Trends".

17                   **MR. FULTON:** Yes.

18                   **MR. ENGELMANN:** And just so we're clear,  
19 when you say pages 5 to 10, what you've done there is  
20 you've summarized what we see at pages 5 through 10 ---

21                   **MR. FULTON:** In the main report, yes.

22                   **MR. ENGELMANN:** In the main report at Tab 4?

23                   **MR. FULTON:** Yes.

24                   **MR. ENGELMANN:** Okay. And when we are  
25 talking about trends, you've looked at statistics over

1 time; is that correct?

2 MR. FULTON: Yes.

3 MR. ENGELMANN: All right.

4 And I think you told us already about what  
5 some of the data reveals about some of the small cities and  
6 towns in Eastern Ontario.

7 MR. FULTON: Yes.

8 MR. ENGELMANN: And you say at the second  
9 paragraph, at the bottom of page 4:

10 "These cities show declining  
11 populations, one of the most serious  
12 risk factors."

13 Why is declining population a risk factor?

14 MR. FULTON: Well, first of all, the decline  
15 in population is the net difference between people moving  
16 in and people moving out of a community and you know there  
17 is a flow in and out of every community all the time. When  
18 you see a population that's declining, what it means is  
19 that the people moving out exceed the people moving in.

20 Generally speaking, movers are -- whether  
21 they're moving in or out -- are healthier and stronger and  
22 more a resource than people that stay behind, and that's  
23 because it takes resources to move and it takes optimism to  
24 move. If you want to move, you've got to spend money.  
25 You've got to have a credit card and you've got to be able

1 to secure housing at the next place. Often, you have to go  
2 to a bank and borrow and buy a house and go get credit or  
3 you have to -- even to rent an apartment you've got to get  
4 a credit check and you have to have first and last month's  
5 rent and you've got to have a reason to move. You've got  
6 to have a job prospect and this kind of stuff.

7 So really, what happens is that the people  
8 that are the strongest people -- and that's very evident  
9 from the data. You'll see that very clearly, the people  
10 that are in the best resource families with the most income  
11 or the most reason to be hopeful, the kids that are in  
12 school, the kids that have jobs, are the ones that are  
13 moving. The people that stay behind are the people that  
14 have no jobs, are the people that are dropping out of  
15 school, the people that are from very poor families that  
16 are living in rental accommodations.

17 **MR. ENGELMANN:** Okay. Well, we'll take a  
18 look at some of those specifics as we come to them. But  
19 what you've captured here, then, are just some of those  
20 issues in summary form; right?

21 **MR. FULTON:** Yes.

22 **MR. ENGELMANN:** Where you say there is a  
23 large sub-group of very poor families with little hope of  
24 improved economic status?

25 **MR. FULTON:** Yes.

1                   **MR. ENGLEMANN:** And when you're saying  
2 "these communities", you're talking about communities  
3 throughout eastern Ontario?

4                   **MR. FULTON:** I am indeed.

5                   **MR. ENGLEMANN:** Does that include ---

6                   **MR. FULTON:** Eastern Ontario has a pattern.  
7 It's poorer on average than the rest of the province.

8                   **MR. ENGELMANN:** Would you include the City  
9 of Ottawa and environs in eastern Ontario for this purpose?

10                   **MR. FULTON:** No. Actually Ottawa tends to  
11 be somewhat separate of the other counties. There is kind  
12 of like rural -- just sort of rural older counties along  
13 the riverbank here that are socially and economically in  
14 much worse shape than the City of Ottawa.

15                   **MR. ENGELMANN:** And you talk about a  
16 substantial increase -- I'm looking at paragraph 5 -- in  
17 the number of youth dropping out of school.

18                   **MR. FULTON:** Yes.

19                   **MR. ENGELMANN:** All right. And we'll  
20 examine that as a risk factor.

21                   **MR. FULTON:** Yes.

22                   **MR. ENGELMANN:** And you also talk a little  
23 bit about family incomes and how they've changed.

24                   **MR. FULTON:** Yes.

25                   **MR. ENGELMANN:** And as I understand it and

1 we'll come to this, to some extent the poor are poorer and  
2 the rich or richer, and you've got more of a gap.

3 MR. FULTON: Yes.

4 MR. ENGELMANN: All right.

5 MR. FULTON: And the polarization is itself  
6 a separate risk factor because it's experienced in the  
7 schoolyards and it's experienced at a real visceral level  
8 by children. It produces anger, resentment and  
9 disappointment.

10 MR. ENGELMANN: And you also -- you talk  
11 about the fact that the extent of unemployment or  
12 underemployment is one.

13 MR. FULTON: Yes.

14 MR. ENGELMANN: So let's go first to the  
15 percentage shifts and population density.

16 MR. FULTON: Yes.

17 MR. ENGELMANN: This is a summary of pages  
18 14 and 15 of your report.

19 MR. FULTON: Yes.

20 MR. ENGELMANN: This is where you talk about  
21 Cornwall and Stormont actually having a declining  
22 population.

23 MR. FULTON: Yes.

24 MR. ENGELMANN: All right. And that issue,  
25 and I think you've elaborated on it a little bit, is set

1 out in the first bullet?

2 MR. FULTON: Yes.

3 MR. ENGELMANN: Okay. Is there anything  
4 more you wanted to add on that, sir? I note you talk about  
5 -- you've talked about this already -- economic drives  
6 population growth or decline.

7 MR. FULTON: Yes.

8 MR. ENGELMANN: And you talk about female  
9 lone parents here and people with mental health  
10 difficulties.

11 MR. FULTON: Yes.

12 MR. ENGELMANN: And what's the point there?

13 MR. FULTON: Well, the point is that if you  
14 have mental health difficulties or substance abuse, or  
15 you're from a poor family like a female lone parent who's  
16 generally very poor on average than other types of family  
17 structures, or where the young person doesn't have a job or  
18 isn't in school, these are the people that are least likely  
19 to move out of a community.

20 So when you've got the people that are more  
21 resourced moving out and having a net decline, what you  
22 have is the distillation effect in the community so that  
23 you might have the same number of people who are not in  
24 school in '96 as in 2001, but by 2001 it comes through --  
25 it's a much higher percentage of young people.

1                   **MR. ENGELMANN:** Okay. Well, we'll ---

2                   **MR. FULTON:** Because the whole number of  
3 young people has gone down.

4                   **MR. ENGELMANN:** Okay. We'll take a look at  
5 those tables.

6                   I'm just looking -- you say not only that  
7 declining population is a risk factor, in the second bullet  
8 you mention the fact that population density can be a risk  
9 factor. Why is that, sir?

10                  **MR. FULTON:** Well, the reason why is partly  
11 because within -- population density produces a competition  
12 for resources. So if you've got a large number of people  
13 living in an area then there's going to be more interaction  
14 over things like having -- being able to see a doctor or a  
15 specialist, and if you happen to -- and also there's as  
16 much likelihood for conflict between neighbours in a town  
17 of 5,000 as there is in a town of 4,600. So the size of  
18 the town doesn't seem to make a lot of difference. It's  
19 more how well resourced is an area in terms of medical  
20 support, social supports, economic supports, activities,  
21 things for people to do. And if you are in a fairly dense  
22 area you're going to have some of the same interactions  
23 that you have in a big city, but if you're a long way from  
24 the city you don't have any of the positives of a big city  
25 to help you out. And also, you've got less infrastructure,

1 less transportation. So if you're in a small town it's not  
2 so easy to get on public transit and get you on your way to  
3 Ottawa to see a doctor or to get some help for whatever  
4 problems you have.

5 **MR. ENGELMANN:** All right. I'd like to take  
6 you then to page 6 of your outline and the caption "Family  
7 Structure by Category".

8 **MR. FULTON:** Yes.

9 **MR. ENGELMANN:** I note in this you say  
10 married couples with children have declined by 11.7 per  
11 cent ---

12 **MR. FULTON:** Yes.

13 **MR. ENGELMANN:** --- in Cornwall.

14 So is this significant as a risk factor and  
15 if so, why?

16 **MR. FULTON:** Well, I took a close look at  
17 that because what I was curious about was whether or not  
18 marriages were breaking down and there was an increase in  
19 female led lone parents, which is itself a risk factor, but  
20 the good news in Cornwall is that that isn't actually  
21 happening. The number -- the percentage of lone parents  
22 isn't actually increasing at all and it's still relatively  
23 low compared to its neighbours.

24 The real problem is that the adult children  
25 who are counted by statistics Canada in 1996 who are living

1 in married couples and living in female lone parents have  
2 moved out and so there's empty nesters going on. So  
3 overall the number of female led lone parents has gone down  
4 by 13 per cent. Overall the number of married couples with  
5 children has gone down by 11 per cent. So that's a loss of  
6 about 500 children in the married couples and about 200  
7 children in the female lone parents. So you can see in  
8 fact that the young people that have left town are largely  
9 coming out of married couples by the way.

10 **MR. ENGELMANN:** All right. So these are --  
11 when you say the "young people", these would be people that  
12 are in their late teens?

13 **MR. FULTON:** Yes, or their early twenties  
14 who were living at home and were counted in 1996 as being  
15 in the family. By 2001 they're no longer counted because  
16 they've gotten out of town.

17 **MR. ENGELMANN:** So ---

18 **MR. FULTON:** That seems to be what's  
19 happening in driving the lowering percentages of married  
20 couples and female led lone parents.

21 There's been a small increase in common-law  
22 unions with children of about 80 families.

23 **MR. ENGELMANN:** All right. Well, let's just  
24 actually take a look at that, and that would be, I think,  
25 the first tab at that back.

1                   MR. FULTON: That'll be under "POPCOM",  
2                   Table number 3.

3                   MR. ENGELMANN: And what does "POPCOM" mean?

4                   MR. FULTON: Population comparisons.

5                   MR. ENGELMANN: All right.

6                   MR. FULTON: And it's Table number 3.

7                   So as you can see on that table ---

8                   MR. ENGELMANN: So that should have the  
9                   caption "Table 3" on the left?

10                  MR. FULTON: Yes.

11                  MR. ENGELMANN: "Family Structure - by  
12                  category of household"?

13                  MR. FULTON: That's right.

14                  So if you look at page 2 of Table 3 -- well,  
15                  actually page 1 of Table 3. I'm sorry. If you look at  
16                  page 1 you can see in terms of the married couples there's  
17                  been an 11 per cent decline of married couples with  
18                  children at home.

19                  MR. ENGELMANN: Just stop for a second.  
20                  Where are you on the graph?

21                  MR. FULTON: Okay.

22                  MR. ENGELMANN: You're in the middle ---

23                  MR. FULTON: I'm actually looking at the  
24                  City of Cornwall, okay.

25                  MR. ENGELMANN: Yes.

1                   **MR. FULTON:** If you look in the middle of  
2 the column, what you will notice is that ---

3                   **THE COMMISSIONER:** Hold on. Hold on.

4                   **MR. FULTON:** City of Cornwall?

5                   **MR. ENGELMANN:** Okay. So what we do on the  
6 left is we look under Stormont, Dundas, Glengarry.

7                   **THE COMMISSIONER:** Oh, yes. Okay. Sure.

8                   **MR. ENGELMANN:** And then we have a number of  
9 segments of the united counties, and one says "Cornwall,  
10 C".

11                   **MR. FULTON:** Yes.

12                   **MR. ENGELMANN:** Is that the column we should  
13 be looking in going across?

14                   **MR. FULTON:** Yes.

15                   **MR. ENGELMANN:** And how far across do you  
16 want us to go?

17                   **MR. FULTON:** Well, if you just go across you  
18 can see that between '96 and 2001 there are fewer married  
19 couples overall, which is what you'd expect from a  
20 declining population.

21                   **MR. ENGELMANN:** All right.

22                   **MR. FULTON:** However ---

23                   **MR. ENGELMANN:** So we drop about 400?

24                   **MR. FULTON:** Yes.

25                   **MR. ENGELMANN:** All right.

1                   **MR. FULTON:** However, the number of married  
2 couples without children at home, the childless married  
3 couples actually goes up, and that happens by the way when  
4 formally -- when there's empty nesters, when the children  
5 move out, they become classified as a couple with no  
6 children.

7                   **MR. ENGELMANN:** So we have older parents?

8                   **MR. FULTON:** We have older parents, or it  
9 could be new couples as well.

10                  **MR. ENGELMANN:** All right.

11                  **MR. FULTON:** But then you also see in -- so  
12 then you can see, if you look at the married couples with  
13 children at home, a decline of about 500 children.

14                  **MR. ENGELMANN:** From 5,130 to 4,530. So  
15 600.

16                  **MR. FULTON:** Yes, that's right.

17                  **MR. ENGELMANN:** All right.

18                  **MR. FULTON:** You've got 600 married couples  
19 with children at home. There's less of them between '96  
20 and 2001.

21                               Now, if you go to the next page you'll see  
22 the picture with common-law couples. And if you look at  
23 the bottom line which is sort of in the middle of the  
24 column ---

25                  **MR. ENGELMANN:** Again we're looking at

1 Cornwall?

2 MR. FULTON: Cornwall. Look at the City of  
3 Cornwall.

4 MR. ENGELMANN: With the children at home?

5 MR. FULTON: With children at home. You're  
6 looking at common-law couples with children at home. You  
7 can see there is an 11 per cent increase or about 80  
8 families.

9 MR. ENGELMANN: From 715 to 795.

10 MR. FULTON: Now, generally speaking that's  
11 not a good sign. It would be bad if the complimentary loss  
12 in married couples was picked up by a complimentary gain in  
13 common-law unions because that implies family instability.  
14 However, you don't see that here. You see a very small  
15 increase in common-law couples. So it doesn't mean that  
16 much. But it's probably good news from the point of view  
17 that it doesn't imply a lot of marital instability in this  
18 region.

19 MR. ENGELMANN: Okay.

20 MR. FULTON: And then if you go to the next  
21 page, what you will see is that in terms of the female led  
22 lone parents as well, a 13 per cent decline. That's in  
23 bold. You can see the decline there.

24 MR. ENGELMANN: M'hm.

25 MR. FULTON: A 13 per cent decline in the

1 number of female lone parents, and unfortunately I don't  
2 show you the number in '96. I just show you the percentage  
3 decline.

4 MR. ENGELMANN: So the number in 2001 is  
5 1,975.

6 MR. FULTON: That's right.

7 MR. ENGELMANN: All right. So the ---

8 MR. FULTON: It's probably a couple of  
9 hundred more in ---

10 MR. ENGELMANN: In 2000. So in 1996 there  
11 would have been over 2,000?

12 MR. FULTON: That's right.

13 But in any event, that decline is actually  
14 good news, I mean, on some level. I mean, it means that  
15 there's fewer families that are in that class, which is a  
16 very hard class to live in, and it also doesn't suggest  
17 that the decline in married couples with children was due  
18 to their changing status into female led lone parents, as  
19 much. I mean, in terms of preponderance of numbers.

20 MR. ENGELMANN: So this doesn't show an  
21 increase in marriage breakdown?

22 MR. FULTON: Yes.

23 MR. ENGELMANN: What it shows is an increase  
24 in ---

25 MR. FULTON: In older children leaving the

1 family.

2 MR. ENGELMANN: And leaving the Cornwall  
3 area?

4 MR. FULTON: And leaving the Cornwall area  
5 altogether.

6 MR. ENGELMANN: All right.

7 MR. FULTON: So that's what that shows  
8 basically. So it's a good news/bad news story.

9 MR. ENGELMANN: All right.

10 So let's go back then to your outline ---

11 THE COMMISSIONER: So let's do one more  
12 section and then we'll take a break.

13 MR. ENGELMANN: Sure.

14 Sir, we just looked at family structure by  
15 category. I'd like to look at families by income bracket  
16 then, if I could, briefly.

17 MR. FULTON: Yes.

18 MR. ENGELMANN: And here you talk about --  
19 well, you start by saying:

20 "...growing divide between the *poorest-*  
21 *of-the-poor* and the number of families  
22 with more than \$80,000 in annual  
23 income."

24 MR. FULTON: Yes.

25 MR. ENGELMANN: Now, what is the

1           significance of the \$80,000 and what is the significance of  
2           \$30,000? Because those are numbers you talk about in your  
3           report.

4                   **MR. FULTON:** Yes. Well, for one thing, I've  
5           got comparative data for everybody over \$80,000 over many  
6           years. So \$80,000 was the top quadrant or the top dollar  
7           figure in '96 and '91. So it's a little bit easier for me  
8           to spot trends over time just by picking that as my  
9           demarcation point.

10                   **MR. ENGELMANN:** All right.

11                   **MR. FULTON:** Because it's over \$80,000, it  
12           could be considerably over \$80,000 or maybe just \$85,000,  
13           but nevertheless it's a fairly good family income. And  
14           then ---

15                   **MR. ENGELMANN:** All right.

16                   **MR. FULTON:** And the part below \$30,000 is  
17           also easy to count and compare over time, and it's  
18           generally a demarcation point for cause for concern just  
19           because it's at the low end of the continuum and that's  
20           sort of where -- so I just compare the two extremes, I  
21           guess.

22                   **MR. ENGELMANN:** Let's just talk about some  
23           of the points you make. You say that -- and again, we're  
24           always looking '96 to 2001; correct?

25                   **MR. FULTON:** Yes.

1                   MR. ENGELMANN: You say that actually there  
2 are more families below \$30,000 in 2001 in Ontario ---

3                   MR. FULTON: Yes.

4                   MR. ENGELMANN: --- than there were in '96.

5                   MR. FULTON: Yes.

6                   MR. ENGELMANN: So that's a negative.

7                   MR. FULTON: That's a negative.

8                   MR. ENGELMANN: All right. Then you talk  
9 about, for example, in Stormont -- and when you say  
10 Stormont you mean the united counties; correct?

11                   MR. FULTON: Yes.

12                   MR. ENGELMANN: That the actual percentage  
13 of the poorest-of-the-poor has gone down ---

14                   MR. FULTON: Yes.

15                   MR. ENGELMANN: --- by 2.1 per cent.

16                   MR. FULTON: Yes.

17                   MR. ENGELMANN: So that's positive, I would  
18 think.

19                   MR. FULTON: Yes, it is. It's positive.

20                   MR. ENGELMANN: But then you say even though  
21 the absolute number of these families, 7,790, has actually  
22 increased.

23                   MR. FULTON: Yes.

24                   MR. ENGELMANN: Okay. And then the fourth  
25 point, you say that plurality of the poorest-of-the-poor

1 live in Cornwall.

2 MR. FULTON: Yes.

3 MR. ENGELMANN: Now, just so I'm clear  
4 there, what you're saying is that 31.3 per cent of those  
5 that are under \$30,000 ---

6 MR. FULTON: Yes.

7 MR. ENGELMANN: --- live in the City of  
8 Cornwall?

9 MR. FULTON: Yes.

10 MR. ENGELMANN: And that's within Stormont,  
11 Dundas, Glengarry. Is that how I should read that?

12 MR. FULTON: I'm sorry, I missed that.

13 MR. ENGELMANN: At paragraph 4.

14 MR. FULTON: Paragraph 4. Sorry.

15 Well, actually, what that ---

16 MR. ENGELMANN: What is that saying?

17 MR. FULTON: I think that refers to -- I'm  
18 trying to figure out what that 31 per cent -- just hang on  
19 a minute. I'm going to look up a number there.

20 Yes, the number of families -- let's see,  
21 what is that 31 per cent. The 31 per cent refers to the  
22 total number of census families ---

23 MR. ENGELMANN: Okay.

24 MR. FULTON: --- in the City of Cornwall.

25 So what I'm saying is that 31 per cent of all the

1 households ---

2 MR. ENGELMANN: M'hm.

3 MR. FULTON: And that includes, you know  
4 married couples or people living together, or even two  
5 sisters living together in the sense that it's family. So  
6 31 per cent of all the families in Cornwall are living on  
7 incomes of less than \$30,000. So you've got a pretty  
8 sizable chunk of the community who is living with less than  
9 \$30,000, and ---

10 MR. ENGELMANN: All right.

11 MR. FULTON: And that represents a fairly  
12 large percentage of all the families in Stormont that are  
13 living on less than \$30,000.

14 MR. ENGELMANN: And you say that there's  
15 been a significant or tremendous increase in families that  
16 have incomes of over \$80,000?

17 MR. FULTON: Yes, that's right.

18 MR. ENGELMANN: Now, I assume that's a  
19 positive, an increase there?

20 MR. FULTON: Well, it is a positive,  
21 especially for those families, for sure.

22 MR. ENGELMANN: Yes.

23 MR. FULTON: The negative comes in that if  
24 you're still in the poorest-of-the-poor category and you're  
25 a kid in that family and you're going to school, then

1       you're going to feel the difference between your family  
2       income and the other kids in the class. We're going to see  
3       more of that difference there because they're going to see  
4       more families with more resources.

5                   **MR. ENGELMANN:** And that's what your point  
6       is in the bullet on page 7, the first bullet?

7                   And when you're saying "these communities",  
8       you're talking about communities throughout eastern  
9       Ontario?

10                  **MR. FULTON:** I am indeed.

11                  **MR. ENGELMANN:** Does that include ---

12                  **MR. FULTON:** Eastern Ontario has a pattern.  
13       It's poorer on average than the rest of the province.

14                  **MR. ENGELMANN:** Would you include the City  
15       of Ottawa and environs in eastern Ontario for this purpose?

16                  **MR. FULTON:** No. Actually Ottawa tends to  
17       be somewhat separate of the other counties. There is kind  
18       of like rural -- just sort of rural older counties along  
19       the riverbank here that are socially and economically in  
20       much worse shape than the City of Ottawa.

21                  **MR. ENGELMANN:** And you talk about a  
22       substantial increase -- I'm looking at paragraph 5 -- in  
23       the number of youth dropping out of school.

24                  **MR. FULTON:** Yes.

25                  **MR. ENGELMANN:** All right. And we'll

1 examine that as a risk factor.

2 MR. FULTON: Yes.

3 MR. ENGELMANN: And you also talk a little  
4 bit about family incomes and how they've changed.

5 MR. FULTON: Yes.

6 MR. ENGELMANN: And as I understand it and  
7 we'll come to this, to some extent the poor are poorer and  
8 the rich or richer, and you've got more of a gap.

9 MR. FULTON: Yes.

10 MR. ENGELMANN: All right.

11 MR. FULTON: And the polarization is itself  
12 a separate risk factor because it's experienced in the  
13 schoolyards and it's experienced at a real visceral level  
14 by children. It produces anger, resentment and  
15 disappointment.

16 MR. ENGELMANN: And you also -- you talk  
17 about the fact that the extent of unemployment or  
18 underemployment is one.

19 MR. FULTON: Yes.

20 MR. ENGELMANN: So let's go first to the  
21 percentage shifts and population density.

22 MR. FULTON: Yes.

23 MR. ENGELMANN: This is a summary of pages  
24 14 and 15 of your report.

25 MR. FULTON: Yes.

1                   **MR. ENGELMANN:** This is where you talk about  
2 Cornwall and Stormont actually having a declining  
3 population.

4                   **MR. FULTON:** Yes.

5                   **MR. ENGELMANN:** All right. And that issue,  
6 and I think you've elaborated on it a little bit, is set  
7 out in the first bullet?

8                   **MR. FULTON:** Yes.

9                   **MR. ENGELMANN:** Okay. Is there anything  
10 more you wanted to add on that, sir? I note you talk about  
11 -- you've talked about this already -- economic drives  
12 population growth or decline.

13                   **MR. FULTON:** Yes.

14                   **MR. ENGELMANN:** And you talk about female  
15 lone parents here and people with mental health  
16 difficulties.

17                   **MR. FULTON:** Yes.

18                   **MR. ENGELMANN:** And what's the point there?

19                   **MR. FULTON:** Well, the point is that if you  
20 have mental health difficulties or substance abuse, or  
21 you're from a poor family like a female lone parent who's  
22 generally very poor on average than other types of family  
23 structures, or where the young person doesn't have a job or  
24 isn't in school, these are the people that are least likely  
25 to move out of a community.

1                   So when you've got the people that are more  
2                   resourced moving out and having a net decline, what you  
3                   have is the distillation effect in the community so that  
4                   you might have the same number of people who are not in  
5                   school in '96 as in 2001, but by 2001 it comes through --  
6                   it's a much higher percentage of young people.

7                   **MR. ENGELMANN:** Okay. Well, we'll ---

8                   **MR. FULTON:** Because the whole number of  
9                   young people has gone down.

10                  **MR. ENGELMANN:** Okay. We'll take a look at  
11                  those tables.

12                  I'm just looking -- you say not only that  
13                  declining population is a risk factor, in the second bullet  
14                  you mention the fact that population density can be a risk  
15                  factor. Why is that, sir?

16                  **MR. FULTON:** Well, the reason why is partly  
17                  because within -- population density produces a competition  
18                  for resources. So if you've got a large number of people  
19                  living in an area then there's going to be more interaction  
20                  over things like having -- being able to see a doctor or a  
21                  specialist, and if you happen to -- and also there's as  
22                  much likelihood for conflict between neighbours in a town  
23                  of 5,000 as there is in a town of 4,600. So the size of  
24                  the town doesn't seem to make a lot of difference. It's  
25                  more how well resourced is an area in terms of medical

1 support, social supports, economic supports, activities,  
2 things for people to do. And if you are in a fairly dense  
3 area you're going to have some of the same interactions  
4 that you have in a big city, but if you're a long way from  
5 the city you don't have any of the positives of a big city  
6 to help you out. And also, you've got less infrastructure,  
7 less transportation. So if you're in a small town it's not  
8 so easy to get on public transit and get you on your way to  
9 Ottawa to see a doctor or to get some help for whatever  
10 problems you have.

11 **MR. ENGELMANN:** All right. I'd like to take  
12 you then to page 6 of your outline and the caption "Family  
13 Structure by Category".

14 **MR. FULTON:** Yes.

15 **MR. ENGELMANN:** I note in this you say  
16 married couples with children have declined by 11.7 per  
17 cent ---

18 **MR. FULTON:** Yes.

19 **MR. ENGELMANN:** --- in Cornwall.

20 So is this significant as a risk factor and  
21 if so, why?

22 **MR. FULTON:** Well, I took a close look at  
23 that because what I was curious about was whether or not  
24 marriages were breaking down and there was an increase in  
25 female led lone parents, which is itself a risk factor, but

1 the good news in Cornwall is that that isn't actually  
2 happening. The number -- the percentage of lone parents  
3 isn't actually increasing at all and it's still relatively  
4 low compared to its neighbours.

5 The real problem is that the adult children  
6 who are counted by statistics Canada in 1996 who are living  
7 in married couples and living in female lone parents have  
8 moved out and so there's empty nesters going on. So  
9 overall the number of female led lone parents has gone down  
10 by 13 per cent. Overall the number of married couples with  
11 children has gone down by 11 per cent. So that's a loss of  
12 about 500 children in the married couples and about 200  
13 children in the female lone parents. So you can see in  
14 fact that the young people that have left town are largely  
15 coming out of married couples by the way.

16 **MR. ENGELMANN:** All right. So these are --  
17 when you say the "young people", these would be people that  
18 are in their late teens?

19 **MR. FULTON:** Yes, or their early twenties  
20 who were living at home and were counted in 1996 as being  
21 in the family. By 2001 they're no longer counted because  
22 they've gotten out of town.

23 **MR. ENGELMANN:** So ---

24 **MR. FULTON:** That seems to be what's  
25 happening in driving the lowering percentages of married

1 couples and female led lone parents.

2 There's been a small increase in common-law  
3 unions with children of about 80 families.

4 **MR. ENGELMANN:** All right. Well, let's just  
5 actually take a look at that, and that would be, I think,  
6 the first tab at that back.

7 **MR. FULTON:** That'll be under "POPCOM",  
8 Table number 3.

9 **MR. ENGELMANN:** And what does "POPCOM" mean?

10 **MR. FULTON:** Population comparisons.

11 **MR. ENGELMANN:** All right.

12 **MR. FULTON:** And it's Table number 3.

13 So as you can see on that table --- **MR.**

14 **ENGELMANN:** So that should have the caption "Table 3" on  
15 the left?

16 **MR. FULTON:** Yes.

17 **MR. ENGELMANN:** "Family Structure - by  
18 category of household"?

19 **MR. FULTON:** That's right.

20 So if you look at page 2 of Table 3 -- well,  
21 actually page 1 of Table 3. I'm sorry. If you look at  
22 page 1 you can see in terms of the married couples there's  
23 been an 11 per cent decline of married couples with  
24 children at home.

25 **MR. ENGELMANN:** Just stop for a second.

1           Where are you on the graph?

2                       **MR. FULTON:** Okay.

3                       **MR. ENGELMANN:** You're in the middle ---

4                       **MR. FULTON:** I'm actually looking at the  
5           City of Cornwall, okay.

6                       **MR. ENGELMANN:** Yes.

7                       **MR. FULTON:** If you look in the middle of  
8           the column, what you will notice is that ---

9                       **THE COMMISSIONER:** Hold on. Hold on.

10                      **MR. FULTON:** City of Cornwall?

11                      **MR. ENGELMANN:** Okay. So what we do on the  
12           left is we look under Stormont, Dundas, Glengarry.

13                      **THE COMMISSIONER:** Oh, yes. Okay. Sure.

14                      **MR. ENGELMANN:** And then we have a number of  
15           segments of the united counties, and one says "Cornwall,  
16           C".

17                      **MR. FULTON:** Yes.

18                      **MR. ENGELMANN:** Is that the column we should  
19           be looking in going across?

20                      **MR. FULTON:** Yes.

21                      **MR. ENGELMANN:** And how far across do you  
22           want us to go?

23                      **MR. FULTON:** Well, if you just go across you  
24           can see that between '96 and 2001 there are fewer married  
25           couples overall, which is what you'd expect from a

1 declining population.

2 MR. ENGELMANN: All right.

3 MR. FULTON: However ---

4 MR. ENGELMANN: So we drop about 400?

5 MR. FULTON: Yes.

6 MR. ENGELMANN: All right.

7 MR. FULTON: However, the number of married  
8 couples without children at home, the childless married  
9 couples actually goes up, and that happens by the way when  
10 formally -- when there's empty nesters, when the children  
11 move out, they become classified as a couple with no  
12 children.

13 MR. ENGELMANN: So we have older parents?

14 MR. FULTON: We have older parents, or it  
15 could be new couples as well.

16 MR. ENGELMANN: All right.

17 MR. FULTON: But then you also see in -- so  
18 then you can see, if you look at the married couples with  
19 children at home, a decline of about 500 children.

20 MR. ENGELMANN: From 5,130 to 4,530. So  
21 600.

22 MR. FULTON: Yes, that's right.

23 MR. ENGELMANN: All right.

24 MR. FULTON: You've got 600 married couples  
25 with children at home. There's less of them between '96

1 and 2001.

2 Now, if you go to the next page you'll see  
3 the picture with common-law couples. And if you look at  
4 the bottom line which is sort of in the middle of the  
5 column ---

6 **MR. ENGELMANN:** Again we're looking at  
7 Cornwall?

8 **MR. FULTON:** Cornwall. Look at the City of  
9 Cornwall.

10 **MR. ENGELMANN:** With the children at home?

11 **MR. FULTON:** With children at home. You're  
12 looking at common-law couples with children at home. You  
13 can see there is an 11 per cent increase or about 80  
14 families.

15 **MR. ENGELMANN:** From 715 to 795.

16 **MR. FULTON:** Now, generally speaking that's  
17 not a good sign. It would be bad if the complimentary loss  
18 in married couples was picked up by a complimentary gain in  
19 common-law unions because that implies family instability.  
20 However, you don't see that here. You see a very small  
21 increase in common-law couples. So it doesn't mean that  
22 much. But it's probably good news from the point of view  
23 that it doesn't imply a lot of marital instability in this  
24 region.

25 **MR. ENGELMANN:** Okay.

1                   **MR. FULTON:** And then if you go to the next  
2 page, what you will see is that in terms of the female led  
3 lone parents as well, a 13 per cent decline. That's in  
4 bold. You can see the decline there.

5                   **MR. ENGELMANN:** M'hm.

6                   **MR. FULTON:** A 13 per cent decline in the  
7 number of female lone parents, and unfortunately I don't  
8 show you the number in '96. I just show you the percentage  
9 decline.

10                  **MR. ENGELMANN:** So the number in 2001 is  
11 1,975.

12                  **MR. FULTON:** That's right.

13                  **MR. ENGELMANN:** All right. So the ---

14                  **MR. FULTON:** It's probably a couple of  
15 hundred more in ---

16                  **MR. ENGELMANN:** In 2000. So in 1996 there  
17 would have been over 2,000?

18                  **MR. FULTON:** That's right.

19                         But in any event, that decline is actually  
20 good news, I mean, on some level. I mean, it means that  
21 there's fewer families that are in that class, which is a  
22 very hard class to live in, and it also doesn't suggest  
23 that the decline in married couples with children was due  
24 to their changing status into female led lone parents, as  
25 much. I mean, in terms of preponderance of numbers.

1                   **MR. ENGELMANN:** So this doesn't show an  
2                   increase in marriage breakdown?

3                   **MR. FULTON:** Yes.

4                   **MR. ENGELMANN:** What it shows is an increase  
5                   in ---

6                   **MR. FULTON:** In older children leaving the  
7                   family.

8                   **MR. ENGELMANN:** And leaving the Cornwall  
9                   area?

10                  **MR. FULTON:** And leaving the Cornwall area  
11                  altogether.

12                  **MR. ENGELMANN:** All right.

13                  **MR. FULTON:** So that's what that shows  
14                  basically. So it's a good news/bad news story.

15                  **MR. ENGELMANN:** All right.

16                  So let's go back then to your outline ---

17                  **THE COMMISSIONER:** So let's do one more  
18                  section and then we'll take a break.

19                  **MR. ENGELMANN:** Sure.

20                  Sir, we just looked at family structure by  
21                  category. I'd like to look at families by income bracket  
22                  then, if I could, briefly.

23                  **MR. FULTON:** Yes.

24                  **MR. ENGELMANN:** And here you talk about --  
25                  well, you start by saying:

1                                    "...growing divide between the *poorest-*  
2                                    *of-the-poor* and the number of families  
3                                    with more than \$80,000 in annual  
4                                    income."

5                                    **MR. FULTON:** Yes.

6                                    **MR. ENGELMANN:** Now, what is the  
7                                    significance of the \$80,000 and what is the significance of  
8                                    \$30,000? Because those are numbers you talk about in your  
9                                    report.

10                                   **MR. FULTON:** Yes. Well, for one thing, I've  
11                                   got comparative data for everybody over \$80,000 over many  
12                                   years. So \$80,000 was the top quadrant or the top dollar  
13                                   figure in '96 and '91. So it's a little bit easier for me  
14                                   to spot trends over time just by picking that as my  
15                                   demarcation point.

16                                   **MR. ENGELMANN:** All right.

17                                   **MR. FULTON:** Because it's over \$80,000, it  
18                                   could be considerably over \$80,000 or maybe just \$85,000,  
19                                   but nevertheless it's a fairly good family income. And  
20                                   then ---

21                                   **MR. ENGELMANN:** All right.

22                                   **MR. FULTON:** And the part below \$30,000 is  
23                                   also easy to count and compare over time, and it's  
24                                   generally a demarcation point for cause for concern just  
25                                   because it's at the low end of the continuum and that's

1 sort of where -- so I just compare the two extremes, I  
2 guess.

3 MR. ENGELMANN: Let's just talk about some  
4 of the points you make. You say that -- and again, we're  
5 always looking '96 to 2001; correct?

6 MR. FULTON: Yes.

7 MR. ENGELMANN: You say that actually there  
8 are more families below \$30,000 in 2001 in Ontario ---

9 MR. FULTON: Yes.

10 MR. ENGELMANN: --- than there were in '96.

11 MR. FULTON: Yes.

12 MR. ENGELMANN: So that's a negative.

13 MR. FULTON: That's a negative.

14 MR. ENGELMANN: All right. Then you talk  
15 about, for example, in Stormont -- and when you say  
16 Stormont you mean the united counties; correct?

17 MR. FULTON: Yes.

18 MR. ENGELMANN: That the actual percentage  
19 of the poorest-of-the-poor has gone down ---

20 MR. FULTON: Yes.

21 MR. ENGELMANN: --- by 2.1 per cent.

22 MR. FULTON: Yes.

23 MR. ENGELMANN: So that's positive, I would  
24 think.

25 MR. FULTON: Yes, it is. It's positive.

1                   **MR. ENGELMANN:** But then you say even though  
2 the absolute number of these families, 7,790, has actually  
3 increased.

4                   **MR. FULTON:** Yes.

5                   **MR. ENGELMANN:** Okay. And then the fourth  
6 point, you say that plurality of the poorest-of-the-poor  
7 live in Cornwall.

8                   **MR. FULTON:** Yes.

9                   **MR. ENGELMANN:** Now, just so I'm clear  
10 there, what you're saying is that 31.3 per cent of those  
11 that are under \$30,000 ---

12                   **MR. FULTON:** Yes.

13                   **MR. ENGELMANN:** --- live in the City of  
14 Cornwall?

15                   **MR. FULTON:** Yes.

16                   **MR. ENGELMANN:** And that's within Stormont,  
17 Dundas, Glengarry. Is that how I should read that?

18                   **MR. FULTON:** I'm sorry, I missed that.

19                   **MR. ENGELMANN:** At paragraph 4.

20                   **MR. FULTON:** Paragraph 4. Sorry.

21 Well, actually, what that ---

22                   **MR. ENGELMANN:** What is that saying?

23                   **MR. FULTON:** I think that refers to -- I'm  
24 trying to figure out what that 31 per cent -- just hang on  
25 a minute. I'm going to look up a number there.

1                   Yes, the number of families -- let's see,  
2                   what is that 31 per cent. The 31 per cent refers to the  
3                   total number of census families ---

4                   **MR. ENGELMANN:** Okay.

5                   **MR. FULTON:** --- in the City of Cornwall.  
6                   So what I'm saying is that 31 per cent of all the  
7                   households ---

8                   **MR. ENGELMANN:** M'hm.

9                   **MR. FULTON:** And that includes, you know  
10                  married couples or people living together, or even two  
11                  sisters living together in the sense that it's family. So  
12                  31 per cent of all the families in Cornwall are living on  
13                  incomes of less than \$30,000. So you've got a pretty  
14                  sizable chunk of the community who is living with less than  
15                  \$30,000, and ---

16                  **MR. ENGELMANN:** All right.

17                  **MR. FULTON:** And that represents a fairly  
18                  large percentage of all the families in Stormont that are  
19                  living on less than \$30,000.

20                  **MR. ENGELMANN:** And you say that there's  
21                  been a significant or tremendous increase in families that  
22                  have incomes of over \$80,000?

23                  **MR. FULTON:** Yes, that's right.

24                  **MR. ENGELMANN:** Now, I assume that's a  
25                  positive, an increase there?

1                   **MR. FULTON:** Well, it is a positive,  
2 especially for those families, for sure.

3                   **MR. ENGELMANN:** Yes.

4                   **MR. FULTON:** The negative comes in that if  
5 you're still in the poorest-of-the-poor category and you're  
6 a kid in that family and you're going to school, then  
7 you're going to feel the difference between your family  
8 income and the other kids in the class. We're going to see  
9 more of that difference there because they're going to see  
10 more families with more resources.

11                   **MR. ENGELMANN:** And that's what your point  
12 is in the bullet on page 7, the first bullet?

13                   **MR. FULTON:** Yes.

14                   **MR. ENGELMANN:** That you got a separate and  
15 powerful risk factor, accelerating resentment, depression  
16 and anger?

17                   **MR. FULTON:** Yes.

18                   **MR. ENGELMANN:** And its social  
19 manifestations?

20                   **MR. FULTON:** Yes.

21                   **MR. ENGELMANN:** And that's from that  
22 widening gap?

23                   **MR. FULTON:** Yes, from that widening gap  
24 between the rich and the poor.

25                   **MR. ENGELMANN:** All right.

1 Well, sir, I was going to take you to some  
2 tables but they really come under the next caption. So  
3 perhaps we'll that for after the break.

4 **THE COMMISSIONER:** Thank you.

5 Let's take a short break.

6 **MR. ENGELMANN:** Yes.

7 **THE REGISTRAR:** Order; all rise. À l'ordre;  
8 veuillez vous lever.

9 The hearing will reconvene at 11:35.

10 --- Upon recessing at 11:18 a.m./

11 L'audience est suspendue à 11h18

12 --- Upon resuming at 11:41 a.m./

13 L'audience est reprise à 11h41

14 **THE REGISTRAR:** This hearing of the Cornwall  
15 Public Inquiry is now in session. Please be seated;  
16 veuillez vous asseoir.

17 **ROBERT FULTON, Resumed/Sous le même serment:**

18 **THE COMMISSIONER:** Thank you.

19 Yes, sir?

20 **MR. ENGELMANN:** Thank you.

21 --- **EXAMINATION IN-CHIEF BY/INTERROGATOIRE EN-CHEF PAR MR.**  
22 **ENGELMANN (CONT'D):**

23 **MR. ENGELMANN:** Mr. Fulton, when we left off  
24 just before the break we had just gone through talking  
25 about some income data and I'd like you now -- where we we

1 are is on page 7 of your outline.

2 MR. FULTON: Yes.

3 MR. ENGELMANN: Dealing with "Average Income  
4 by Type of Family" and I understand there are some tables  
5 at the back of your Book of Documents that would be of  
6 assistance to us. So if we could turn to the tab marked  
7 "Income" and in particular -- I think it's Table 4.2. Is  
8 that correct, sir?

9 MR. FULTON: That's correct, 4.2. If you  
10 look at page 2 of that table and you look again at the city  
11 of Cornwall over on the far right-hand side, on the far  
12 right-hand side you see the average income in '96 and 2001  
13 of female lone parent families in Cornwall and you can see  
14 two things.

15 One, the average income for that class of  
16 family is much lower in Cornwall than it is in other  
17 neighbouring areas and jurisdictions. It's relatively low.  
18 I mean although there are other areas like Prescott and so  
19 forth and individual towns that have equally low numbers,  
20 it's by and large fairly low, this number; the average  
21 income for female lone parents, and what makes it worse is  
22 that it's going down. See, it's actually gone down by 6.5  
23 per cent between '96 and 2001 and the '96 numbers are  
24 inflated by 9 per cent to account for the standard of  
25 living, the cost of living.

1                   **MR. ENGELMANN:** Okay. So just before you go  
2 further, at the top of the page, the top of the column we  
3 see that the average in Ontario in 1996 was \$33,000?

4                   **MR. FULTON:** Yes.

5                   **MR. ENGELMANN:** And it actually goes up to  
6 \$38,000?

7                   **MR. FULTON:** That's right. It goes up by 15  
8 per cent across the province.

9                   **MR. ENGELMANN:** But in Cornwall we're seeing  
10 it go down by a couple of thousand dollars?

11                   **MR. FULTON:** That's right.

12                   **MR. ENGELMANN:** And in the united counties,  
13 the drop isn't as dramatic but it still goes down?

14                   **MR. FULTON:** It goes down a little bit, yes.

15                   **MR. ENGELMANN:** From \$29,000 to \$28,000.

16                   **MR. FULTON:** That's right.

17                   **MR. ENGELMANN:** Okay. And what else, then,  
18 is significant here, sir?

19                   **MR. FULTON:** Okay. So if you look at the  
20 next page and if you look at ---

21                   **MR. ENGELMANN:** So page 3?

22                   **MR. FULTON:** Page 3. You can see with  
23 married couples, the average income for married couples  
24 generally in the City of Cornwall is also lower than the  
25 average for the province as a whole.

1 MR. ENGELMANN: So that number is ---

2 MR. FULTON: Also fairly low.

3 MR. ENGELMANN: --- \$55,000 ---

4 MR. FULTON: Yes.

5 MR. ENGELMANN: --- in 1996?

6 MR. FULTON: That's right and it goes up to  
7 \$58,900.

8 MR. ENGELMANN: And that compares with  
9 \$70,700 to \$81,200 ---

10 MR. FULTON: That's right.

11 MR. ENGELMANN: --- in the province as a  
12 whole?

13 MR. FULTON: That's right. So you can see  
14 once again that there is -- that the city of Cornwall isn't  
15 gaining as much wealth at the level of the family members.  
16 However, at least for married couples the numbers are going  
17 up by 7 per cent about.

18 MR. ENGELMANN: Okay.

19 MR. FULTON: And if you look over to the far  
20 right on that same line, what you're looking at there is  
21 the difference between married couples and female lone  
22 parents in '96 compared to the difference in 2001.

23 MR. ENGELMANN: All right.

24 So if we're looking at the three columns on  
25 the right ---

1 MR. FULTON: Yes.

2 MR. ENGELMANN: --- what this is indicating  
3 is that the gap between the average for female lone parent  
4 families and married couple families increases from  
5 \$28,000, as the gap in 1996, up to \$34,000 and some in  
6 2001?

7 MR. FULTON: That's right.

8 MR. ENGELMANN: And that's because we've  
9 seen the married couples' average income go up  
10 approximately 7 per cent?

11 MR. FULTON: That's right.

12 MR. ENGELMANN: And we've actually seen a  
13 decrease ---

14 MR. FULTON: Yes.

15 MR. ENGELMANN: --- in the income for the  
16 female lone ---

17 MR. FULTON: That's right.

18 MR. ENGELMANN: --- led parent family.

19 MR. FULTON: And the problem with that gap  
20 is that it's one thing to be poor but it's much harder to  
21 be poor when other people aren't doing as well or things  
22 are getting better. And so that's when, when the gap sort  
23 of widens, there's a build-up of resentment in the  
24 schoolyards and in the community at that level for the  
25 winners and -- you know, between the winners and the

1 losers.

2 **MR. ENGELMANN:** And what percentage, then,  
3 of families in the Cornwall area are led by female lone  
4 parents?

5 **MR. FULTON:** About 25 per cent of all  
6 families are female lone parents and that, by the way, is  
7 fairly positive because it's usually higher in other  
8 places. So it's not a bad number, which is sort of  
9 reflective of the fact that families at least are holding  
10 together in this community, you know, better than average.  
11 So that's a good thing.

12 **MR. ENGELMANN:** About the lone parent  
13 family, we're always talking about the female lone parent -  
14 --

15 **MR. FULTON:** Well, I was talking about the  
16 female lone parent but there are male lone parents.

17 **MR. ENGELMANN:** Yes.

18 **MR. FULTON:** And, you know, they're just a  
19 smaller percentage of the female lone parents. They just  
20 tend to earn a bit more money than the female lone parent,  
21 so they're a little less stressed, but they're also pretty  
22 needy too. I don't want to minimize things for them as  
23 well. I mean it's sometimes harder for a man to be a  
24 parent, to be in the role of a supervisor of children and a  
25 caregiver.

1                   **MR. ENGELMANN:** But the percentages of the  
2 families that are led by female lone parents as opposed to  
3 male lone parents are significantly higher. Is that  
4 correct?

5                   **MR. FULTON:** Yes, the female lone parents  
6 are significantly higher. I'd have to get the numbers for  
7 the males but they're not that high.

8                   **MR. ENGELMANN:** Okay.

9                   **MR. FULTON:** It's more like about 5 per cent  
10 or something.

11                   **MR. ENGELMANN:** All right.

12                   So let's then go back to your outline and  
13 the next issue you deal with is families living below the  
14 low-income cut-offs.

15                   **MR. FULTON:** That's right.

16                   **MR. ENGELMANN:** So let me start with, well,  
17 what are the low-income cut-offs?

18                   **MR. FULTON:** The low income cut-offs are  
19 actually -- it's a moving average that Statistics Canada  
20 uses to calculate the bottom, you know, portal of society  
21 or the bottom of percentage of families in terms of their -  
22 - you know, relative to their income. And what they try  
23 and do is, by making it variable, taking into account that  
24 the cost of living in small towns is different than in big  
25 cities. So they account for some of the variations. So

1 it's a bit of a -- more of a moving target.

2 MR. ENGELMANN: Okay.

3 MR. FULTON: Generally, that number is lower  
4 than \$30,000.

5 MR. ENGELMANN: Okay.

6 MR. FULTON: So it's a bit less -- it's a  
7 bit more -- it's harsher, if you want to put it that way,  
8 to be below that level.

9 MR. ENGELMANN: All right.

10 And it appears that there has been a drop,  
11 at least for the united counties, in people below the low-  
12 income cut-offs. So I assume that's a positive?

13 MR. FULTON: Yes. Yes, it is.

14 MR. ENGELMANN: But the city of Cornwall, I  
15 guess, still has the highest percentage of low-income cut-  
16 offs?

17 MR. FULTON: That's right.

18 MR. ENGELMANN: In the united counties?

19 MR. FULTON: That's right. It's quite high  
20 compared to the overall county.

21 MR. ENGELMANN: All right. And it talks  
22 about some other cities or towns in Eastern Ontario that  
23 also have high numbers of families that are in that low-  
24 income range.

25 MR. FULTON: Yes, that's right. And

1 generally speaking the 20 -- when you get around 20 per  
2 cent of your households that are below the low-income cut-  
3 offs in any given community; that is, you know, quite a bit  
4 higher, 5 per cent higher at least than what you typically  
5 see and that just puts that much more pressure on the  
6 community support systems.

7 **MR. ENGELMANN:** All right.

8 For example, you have Ottawa at 11 per cent.

9 **MR. FULTON:** Yes.

10 **MR. ENGELMANN:** Kingston at 12 and some  
11 other cities that are significantly lower.

12 **MR. FULTON:** That's right.

13 **MR. ENGELMANN:** And you make the point that  
14 Cornwall is right near the top for highest concentration of  
15 poverty here in Eastern Ontario?

16 **MR. FULTON:** That is correct and it  
17 translates into a large number of families. In absolute  
18 terms, 2,400 households, you know, compared to, say,  
19 Kingston which is a much larger community that has only  
20 3,800 households. So you can see how it's a lot of --  
21 there's a lot of humanity in that number.

22 **MR. ENGELMANN:** All right.

23 So then let's turn to the next segment of  
24 your report, sir, and the caption is "Unemployment". And  
25 you start by saying that one of the difficulties in looking

1 at unemployment statistics is that they do not report and  
2 you quote it as the "population with no hope".

3 MR. FULTON: That's right.

4 MR. ENGELMANN: And can you tell us what you  
5 mean by that?

6 MR. FULTON: Well, first of all, it isn't  
7 unemployment per se that causes bad outcomes, you know,  
8 it's how you react to it. And certainly, in various  
9 literatures it's been shown that it's the hopelessness  
10 quality. It's when people feel hopeless about job  
11 prospects that there's a negative impact on family life and  
12 on outcomes for children. And so you don't really see the  
13 hopelessness behind the unemployment because some of --  
14 well, for one thing, because, number one, a lot of  
15 unemployment -- for example, if you don't participate, if  
16 you don't -- if you're not looking for jobs then you're not  
17 counted as unemployed by Statistics Canada.

18 MR. ENGELMANN: All right.

19 So you set out, I see, on your third bullet  
20 some reasons why the degree of job-related hopelessness is  
21 higher or worse ---

22 MR. FULTON: Yes.

23 MR. ENGELMANN: --- in Cornwall than in most  
24 places in Ontario?

25 MR. FULTON: Yes.

1                   **MR. ENGELMANN:** And you set out three  
2 reasons. Could you explain those, sir?

3                   **MR. FULTON:** The three reasons are; one,  
4 there's a very low participation rate which amounts --  
5 which is equivalent to 82 per cent of people that could  
6 theoretically work, taking out seniors and young people in  
7 school from that statistic.

8                   In other words, if I deduct all the kids in  
9 school between 15 and 25 ---

10                  **MR. ENGELMANN:** Yes.

11                  **MR. FULTON:** --- and I deduct all the  
12 seniors, then I'm left with a number that is the maximum  
13 number of people that can conceivably work. And of that  
14 group that can conceivably work, only 82 per cent are in  
15 the labour market, either looking for a job or have a job.  
16 So it looks like 82 per cent of the people that can  
17 conceivably work in Cornwall aren't interested.

18                  **MR. ENGELMANN:** They're not looking?

19                  **MR. FULTON:** They've dropped out of the  
20 labour market, if you want to put it that way, and that's  
21 not a good indicator.

22                  **MR. ENGELMANN:** Okay, and that's not  
23 measured in the unemployment rate?

24                  **MR. FULTON:** That's right; exactly.

25                  **MR. ENGELMANN:** Okay. What else?

1                   **MR. FULTON:** And also within Cornwall there  
2 are jobs, if you look at all the industries combined, for  
3 only about 81 per cent of the people who, in a practical  
4 sense, could work. In other words, practically-speaking,  
5 there's only about 81 per cent of the people who could  
6 work. There's a job for them already in the county or in  
7 the city, let's say in 2001.

8                   **MR. ENGELMANN:** So if everybody wanted to  
9 work, many of these people would have to look for work  
10 elsewhere?

11                   **MR. FULTON:** Exactly. They would have to  
12 commute or they would be unsuccessful. And in fact, for  
13 the people that are actually currently working, it's  
14 probably about 445 people for whom there's no job as such.  
15 They're hunting around for it. So they would either have  
16 to be looking to commute outside of Cornwall ---

17                   **MR. ENGELMANN:** All right.  
18 And the third issue?

19                   **MR. FULTON:** And the third issue is the  
20 unemployment rate itself is higher in Cornwall. The  
21 official rate, even at that, is still higher in Cornwall  
22 than in other jurisdictions and you might have seen in  
23 another report -- another section of the report that it's  
24 higher for youth as well -- and other sections.

25                   **MR. ENGELMANN:** But these numbers will

1 fluctuate from year to year?

2 MR. FULTON: Yes.

3 MR. ENGELMANN: Okay.

4 MR. FULTON: And so what I tried to do is I  
5 tried to say, though, relatively speaking, what does it  
6 mean as far as the sense of hopelessness? I mean there are  
7 other places, lots of places that have similar unemployment  
8 rates but, you know, does it feel worse being unemployed in  
9 Cornwall than in some other place?

10 And what I did is I just basically, you  
11 know, ran a formula to sort of separate out those numbers a  
12 little bit and I just had the -- I just sort of multiplied  
13 the official unemployment rate by the percentage of people  
14 who have no hope of finding a job and the true  
15 participation rate, you know, which is two sort of -- the  
16 two sets of indicators of where there's, objectively  
17 speaking, less hope and it tends to attenuate the problem a  
18 little bit. And when you look at it that way, Cornwall  
19 sort of stands out from its neighbours by quite a bit and  
20 it looks like it's more likely to feel less optimistic  
21 about getting a job. The market conditions are poorer in  
22 this city than they are in other cities.

23 MR. ENGELMANN: You do talk about the fact  
24 that there are a number of other cities in Eastern Ontario,  
25 smaller cities that have poorer labour market conditions.

1                   **MR. FULTON:** Absolutely, yes.

2                   **MR. ENGELMANN:** Okay.

3                   **MR. FULTON:** It's similar to Hawkesbury,  
4 Prescott, Brockville, Gananoque, Smith Falls, Belleville  
5 and Pembroke and also in native reserves. And the  
6 interesting pattern about all of these is that all of these  
7 cities are also on the river basins and all of them have  
8 gone through significant structural changes, you know, in  
9 terms of the factories closing and that kind of stuff. So  
10 that sort of confirms this sort of index that maybe it's  
11 picking something that's real.

12                   **MR. ENGELMANN:** All right.

13                   So then let's a look, then, briefly at the  
14 nature of housing.

15                   **MR. FULTON:** Yes.

16                   **MR. ENGELMANN:** You've talked a little --  
17 you talk a little bit here about the fact that there are  
18 apartment units in buildings over five storeys -- that  
19 there's a significant increase.

20                   **MR. FULTON:** That's right and a  
21 corresponding decrease of the smaller apartment units.

22                   **MR. ENGELMANN:** All right.

23                   And I think you told us about this earlier,  
24 but in your view there is some significance of risk or  
25 negative outcomes?

1                   **MR. FULTON:** Well, yes, the risk is that --  
2                   a couple of things. One is you see a bit more people  
3                   moving in and out ---

4                   **MR. ENGELMANN:** Yes.

5                   **MR. FULTON:** --- and we tend to -- it takes  
6                   longer to make friends and have social relationships and  
7                   keep them. And not only that; the whole process of tearing  
8                   down smaller units or poor housing and building up big  
9                   apartments dislocates lots of people along the way and  
10                  that's hard for these people and it tends to disempower  
11                  them.

12                  **MR. ENGELMANN:** Okay. All right.

13                  And then at the bottom of that page and onto  
14                  the next page you talk about low education achievement and  
15                  school attendance.

16                  **MR. FULTON:** Yes.

17                  **MR. ENGELMANN:** And some of the indicators  
18                  of low SES?

19                  **MR. FULTON:** Yes.

20                  **MR. ENGELMANN:** And you say, for example, at  
21                  the top of page 10, in Cornwall, 36.2 percent of people  
22                  over 20 did not graduate from high school and 43.6 percent  
23                  of young people -- and they are defined as between 15 and  
24                  24 -- are not in school.

25                  **MR. FULTON:** Yes.

1                   **MR. ENGELMANN:** And you say these are both -  
2                   - these are high percentages relative to other small cities  
3                   in Ontario.

4                   **MR. FULTON:** Yes.

5                   **MR. ENGELMANN:** And then you add that  
6                   together with the hopelessness index and you say it's  
7                   indicative of a community with a lower socioeconomic  
8                   status.

9                   **MR. FULTON:** Yes, exactly.

10                  **MR. ENGELMANN:** So maybe we could just take  
11                  a look at some of these issues from a statistical  
12                  perspective; for example, your comments about not  
13                  graduating in schools. There's a tab dealing with this, is  
14                  there not?

15                  **MR. FULTON:** Yes. If you go to the "school"  
16                  tab.

17                  **THE COMMISSIONER:** Tab 7?

18                  **MR. FULTON:** Which is in "School" and ---

19                  **MR. ENGELMANN:** Yes.

20                  **MR. FULTON:** It's got a label "School" and  
21                  then go to Table 7, what you see as "Table 7". It's one  
22                  page behind that tab, and if you look at the City of  
23                  Cornwall you can see -- if you go on the far left-hand side  
24                  ---

25                  **MR. ENGELMANN:** Okay. Let's just start with

1 we've got Ontario, we've got Stormont-Dundas and we have  
2 got Cornwall.

3 **MR. FULTON:** Yes.

4 **MR. ENGELMANN:** We want to look at those  
5 three. So you want to look at the City of Cornwall first?

6 **MR. FULTON:** Yes.

7 So what you can is that, first of all, in  
8 the City of Cornwall there's been a pretty significant drop  
9 in the number of young people, 15 to 24, which suggests  
10 that they're moving out. They're moving out of the city  
11 and that's sort of ---

12 **MR. ENGELMANN:** That's consistent with some  
13 of the other ---

14 **MR. FULTON:** It's consistent with the  
15 business of families, the changing family structure as  
16 well.

17 **MR. ENGELMANN:** All right.

18 So we see a decrease of that population of  
19 about 1,000 people.

20 **MR. FULTON:** That's right.

21 **MR. ENGELMANN:** Between 1996 and 2001?

22 **MR. FULTON:** That's right and as a whole  
23 actually, that population is decreasing and it's not  
24 decreasing much. It's decreasing about the same amount in  
25 Stormont overall.

1 Now, if you look ---

2 MR. ENGELMANN: Just so we -- just before  
3 you leave that point, I guess the City of Cornwall is no  
4 different than Stormont-Dundas-Glengarry in that sense?

5 MR. FULTON: Yes.

6 MR. ENGELMANN: There is an overall decrease  
7 of about 1,000.

8 MR. FULTON: That's right, and almost all of  
9 that is in fact is due to the -- well, a big chunk of that  
10 is due to the drop in the City of Cornwall itself.

11 MR. ENGELMANN: Okay. And how does that  
12 compare with the provincial numbers for people of that age?

13 MR. FULTON: Well, the provincial numbers,  
14 if you notice, the number of people age 15 to 24 has  
15 increased marginally by about 80,000 young people.

16 MR. ENGELMANN: Okay. All right.

17 Now, what about those people -- do you want  
18 to go to people in school or do you want to deal with  
19 graduations?

20 MR. FULTON: Let's look at the people who  
21 are not in school.

22 What you can see is that in the City of  
23 Cornwall the number of people age 15 to 24 that are not in  
24 school has remained pretty stable. It's up about 10, but  
25 when taken as a percentage of the young people in that age

1 group in the city it's a much higher percentage. And so it  
2 looks like the people that -- the kids that essentially  
3 left, the net group that left were the ones in school and  
4 there's a turnover of kids between '96 and 2001. So I'm  
5 just saying that the population of kids not in school is  
6 remaining steady and is now becoming a higher percentage of  
7 the base population that remain because it's shrinking.

8 **MR. ENGELMANN:** It's going up from 38.9 to  
9 43.6?

10 **MR. FULTON:** Exactly. And there's been a  
11 small increase in that percentage when you look at the  
12 county as a whole. It's a much smaller percentage increase  
13 but -- and of course, it's equally much smaller for the  
14 province as a whole as well although it's going up  
15 province-wide too.

16 **MR. ENGELMANN:** All right.

17 So we have a problem of more people not  
18 being in school throughout the province?

19 **MR. FULTON:** Yes, that's right.

20 **MR. ENGELMANN:** But what we're seeing here  
21 is it's slightly ---

22 **MR. FULTON:** It's slightly more attenuated  
23 in the City of Cornwall.

24 **MR. ENGELMANN:** All right.

25 **MR. FULTON:** And the overall percentage is

1 just much higher. This is not a good sign, especially  
2 because it doesn't look like these kids are getting jobs.  
3 It isn't as though they're getting out of school and just  
4 going into work, which would be okay, actually.

5 **MR. ENGELMANN:** M'hm.

6 **MR. FULTON:** The thing is they're not  
7 getting employment either, which means that they're not  
8 supervised very well, they're not structured very well and  
9 they obviously aren't optimistic about their future.

10 **MR. ENGELMANN:** All right.

11 And what about those people who have not  
12 graduated from high school? What kind of numbers are we  
13 seeing there?

14 **MR. FULTON:** Well, when you look at that  
15 number you're looking at the whole population over the age  
16 of 20 who did not graduate from high school, and what you  
17 see is that that's -- that number is going down all over  
18 the province.

19 **MR. ENGELMANN:** So if we look at the right-  
20 hand column ---

21 **MR. FULTON:** Yes.

22 **MR. ENGELMANN:** --- that that number is  
23 shrinking everywhere?

24 **MR. FULTON:** That number is shrinking  
25 everywhere but it's not shrinking as fast ---

1                   **MR. ENGELMANN:** Why is it shrinking  
2 everywhere?

3                   **MR. FULTON:** Well, it's shrinking everywhere  
4 in part because it's driven by older people historically.  
5 You know, the older generation in Cornwall dropped out of  
6 school in grade 9 because they had jobs in the mill and  
7 they had jobs in farming. So all of ---

8                   **MR. ENGELMANN:** But that's the older  
9 population all over the province, is it not?

10                  **MR. FULTON:** All over the province. There's  
11 more likelihood that older people will not have graduated  
12 from grade 12 and as this population dies off that  
13 percentage of the base population goes straight down. And  
14 the issue, obviously, for Cornwall is it isn't going down  
15 quite as fast and it's still fairly high compared to the  
16 province as a whole and compared to other sort of areas.

17                  **MR. ENGELMANN:** Okay. So in the province as  
18 a whole, then, in 1996 we had 37.2 per cent of the  
19 population over 20 that did not graduate from high school?

20                  **MR. FULTON:** Yes, that's correct.

21                  **MR. ENGELMANN:** And that drops down to 25.7  
22 per cent by 2001.

23                  **MR. FULTON:** Yes.

24                  **MR. ENGELMANN:** In Stormont-Dundas it was  
25 44.8 dropping to 33.1 and then in the City of Cornwall

1 we're dropping from 47.7 to 36.2?

2 **MR. FULTON:** That's right.

3 **MR. ENGELMANN:** And what you're saying is  
4 that's still significantly above the provincial average?

5 **MR. FULTON:** It is. It's above the  
6 provincial average and it's also sort of slightly worse  
7 because it's a city. You see higher percentages in rural  
8 environments because it's quite common that many of the  
9 members of the farming community don't complete high  
10 school. It's sort of a more normalized kind of behaviour.

11 So to be in a city and to have a high  
12 percentage who aren't graduating from high school is  
13 indicative of low SES; let's put it that way. It's a real  
14 indicator of low socioeconomic status.

15 **MR. ENGELMANN:** And you were saying earlier,  
16 with your comment about the actual numbers not in school  
17 between '96 and 2001 and those percentage changes -- the  
18 comments you can make about who is leaving Cornwall?

19 **MR. FULTON:** Yes, exactly.

20 So what you see is a distillation effect.  
21 The number of kids that are behaving, at least in terms of  
22 school, in a way that is not positive for our economy is  
23 sort of remaining stable in this city. It's going up by  
24 10, but as a percentage of the total group it's going up  
25 quite significantly. So that's not good. You really wan

1 to see that percentage going down as far as -- in terms of  
2 the wellbeing of the community as a whole and in terms of  
3 the percentage of kids that are well supervised and well  
4 structured.

5 **MR. ENGELMANN:** All right.

6 Let's go back to your outline, then.

7 **MR. FULTON:** Yes.

8 **MR. ENGELMANN:** And I think you've really  
9 dealt with the indicators of serious emotional and  
10 behavioural problems in some of those numbers ---

11 **MR. FULTON:** Yes.

12 **MR. ENGELMANN:** --- that we've just talked  
13 about.

14 Migration, I think you've talked about.

15 **MR. FULTON:** Yes.

16 **MR. ENGELMANN:** But you're making that point  
17 again that over time the poorest people and the families  
18 who are less adaptive remain behind, ---

19 **MR. FULTON:** Yes.

20 **MR. ENGELMANN:** --- become a bigger  
21 percentage of the community?

22 **MR. FULTON:** Yes and it's what I call a  
23 "distillation effect" and so as the population decline the  
24 group that's most in need stays behind.

25 **MR. ENGELMANN:** All right.

1                   Let's deal briefly, then, with ethnic  
2                   profile of the county and immigration. You are saying that  
3                   there are some new immigrants.

4                   **MR. FULTON:** Yes.

5                   **MR. ENGELMANN:** And this is about five pages  
6                   of your report, if memory serves me.

7                   **MR. FULTON:** Yes.

8                   **MR. ENGELMANN:** And that you're talking  
9                   about where some of those new immigrants are coming from.

10                  **MR. FULTON:** Yes.

11                  **MR. ENGELMANN:** And what kinds of countries?

12                  **MR. FULTON:** Well, I mean, the largest group  
13                  of immigrants recently setting in Cornwall come from Sri  
14                  Lanka, Pakistan and Egypt and these are -- a much larger  
15                  percentage of them are moving to -- a much larger number of  
16                  them in absolute terms are moving to Ottawa, but their  
17                  input in the Stormont area is it represents a much higher  
18                  percentage -- you know, impact on the base population.

19                  **MR. ENGELMANN:** What do you mean by when  
20                  they settle in some communities it's too small a number to  
21                  be "institutionally complete"? What are you talking about  
22                  there?

23                  **MR. FULTON:** What I'm saying is that when  
24                  new immigrants move into a community, if they move in in  
25                  large enough numbers, then what happens is they recreate

1       their societies and they create institutional supports for  
2       themselves in the form of support groups and neighbourhood  
3       clubs and stores and they can get a critical mass of their  
4       people in schools and in churches. So as a result of being  
5       able to create a critical mass they are less -- they feel  
6       less alone and they have more ready access to people that  
7       speak their language and understand their -- that have  
8       shared memories of their background and are more likely to  
9       share friendships, patterns and stuff like that. They can  
10      get more support.

11                    If the number of the groups that you might  
12      call the "ethnically diverse groups" are too small moving  
13      into an area, there's just not enough critical mass, and so  
14      they have to get their needs met through accessing the  
15      mainstream culture.

16                    **MR. ENGELMANN:** M'hm.

17                    **MR. FULTON:** And it just puts more stress on  
18      them. Plus, if they're coming from a part of the world  
19      that has known a great deal of strife, then there is a much  
20      higher probability that a few of them are going to come in  
21      with loaded -- with personal risk factors of their own.  
22      You know, if they have experienced a lot of tragedy in  
23      their family of origin in Sri Lanka or Egypt or wherever  
24      and they come into this community that pain that they carry  
25      will make them a bit more vulnerable.

1                   **MR. ENGELMANN:** All right.

2                   **MR. FULTON:** Plus, they don't have the  
3 support of their own community. Plus, they're having to  
4 interact with a mainstream culture that can sometimes  
5 stigmatize them. This is an issue the Children's Aid  
6 Society needs to pay attention to because they are much  
7 more likely to need support from the institution.

8                   **MR. ENGELMANN:** You talked to us then again  
9 about religion and you make note of the fact that 57 per  
10 cent of adults in the Stormont-Dundas-Glengarry region  
11 identify themselves as Roman Catholic.

12                   **MR. FULTON:** Yes.

13                   **MR. ENGELMANN:** And that compares with the  
14 province as a whole at 34 per cent.

15                   **MR. FULTON:** Yes.

16                   **MR. ENGELMANN:** Is there any significance to  
17 this?

18                   **MR. FULTON:** One is that this is a fair --  
19 it's a lot more Roman Catholics and it does tend to create  
20 an opportunity for the community to interact on a common --  
21 you know, on a common culture or institution and it  
22 provides a mechanism for leadership, for positive  
23 leadership to happen and affect a larger group of people.  
24 That's the good news of it. It presents a common value  
25 system and stuff like that. The bad news, I suppose, is if

1       you don't share that faith; if, for example, you're from  
2       Sri Lanka or Egypt or wherever, it's another sort of a gulf  
3       between you and the mainstream group. So it can be both a  
4       positive and a negative factor.

5                   **MR. ENGELMANN:** All right.

6                   **MR. FULTON:** But I think, generally  
7       speaking, it's positive when you see something -- when you  
8       see a large social institution like that because it creates  
9       a real avenue to communicate to people and support them.

10                  **MR. ENGELMANN:** All right.

11                  The next area you deal with is "Teenage and  
12       General Childbirth".

13                  **MR. FULTON:** Yes.

14                  **MR. ENGELMANN:** And I believe you have a  
15       table on that at Tab 5.

16                  **MR. FULTON:** It's Table 5 -- that's Tab 5.  
17       It's just simply marked as Tab 5. It's behind the other  
18       white tables.

19                  **MR. ENGELMANN:** As I understand it, sir,  
20       this information was information that became available to  
21       you after you did your report at Tab 4.

22                  **MR. FULTON:** That is correct. I just  
23       produced that information this year from -- or actually,  
24       the previous year ---

25                  **MR. ENGELMANN:** All right.

1                   So what we're looking at then, if we are  
2                   looking at the average fertility and the "teen rate" as  
3                   it's called, for Ontario 13.4?

4                   **MR. FULTON:** Yes, for 100,000 teenage  
5                   children -- for teenage girls 15 to 19.

6                   **MR. ENGELMANN:** So just so I'm clear, what  
7                   does that mean? How many out of 1,000 are having children  
8                   in their teens?

9                   **MR. FULTON:** Well, that means, for example,  
10                  13 per 1,000 -- that means for every 1,000 teenagers 15 to  
11                  19 in the Province of Ontario 13 of them -- which is a  
12                  small number -- are having babies. And in the case of  
13                  Cornwall the number of 29.5 means that 29.5 per 1,000  
14                  children, of 1,000 teenage girls 15 to 19 are having  
15                  babies. Now, that doesn't reveal how many of them might be  
16                  getting pregnant or terminating their pregnancy, which is  
17                  another number, but the fact that they're having babies  
18                  going all the way and there's more than double the  
19                  prevalence for the whole province or the incidence for the  
20                  whole province. What that suggests is that there is more  
21                  risk-taking behaviour going on in teenagers in the City of  
22                  Cornwall. But keep in mind that it's still a small number.

23                  **THE COMMISSIONER:** Well, that's a conclusion  
24                  you're reaching. What happens if somebody might say,  
25                  "Well, no, because there is more of a Catholic upbringing,

1           that they are choosing to keep their children as opposed to  
2           terminating it?"

3                       **MR. FULTON:** Well, actually, that could be  
4           true, for sure.

5                       **THE COMMISSIONER:** M'hm.

6                       **MR. FULTON:** The reason why I just went  
7           ahead and called it -- suggested a risk-taking behaviour is  
8           partly because it is highly correlated with -- teenage  
9           pregnancy itself is highly correlated all over the world  
10          with other bad outcomes such as juvenile crime. So it's  
11          generally speaking accepted as a risk indicator in the  
12          literature but there could be local conditions that would  
13          drive it up and a local condition is that it's just sort of  
14          normal to have babies when you're young and that's  
15          especially true for native reserves.

16                      However -- so I've got to be careful that  
17          it's double. What does it mean? It could mean that there  
18          is more risk-taking behaviour in the City of Cornwall by  
19          young people especially because it takes -- it often is the  
20          teenage boy that gets the teenage girl pregnant and often  
21          there is more things going on besides unsafe or unprotected  
22          sex.

23                      So generally speaking, in our society, you  
24          know -- I mean, unless there is a strong commitment to the  
25          Catholic values, but on the part of young people, normally

1 girls would feel empowered and would delay becoming  
2 pregnant because it's easier for them.

3 **MR. ENGELMANN:** Okay. Now, you talk about  
4 infant mortality next. It appears that in this particular  
5 -- with respect to this particular issue the Stormont-  
6 Dundas-Glengarry numbers are significantly better here than  
7 the provincial average.

8 **MR. FULTON:** Yes.

9 **MR. ENGELMANN:** And so this is a positive  
10 for Cornwall and SDG?

11 **MR. FULTON:** Absolutely.

12 **MR. ENGELMANN:** And what does it mean?

13 **MR. FULTON:** Well, normally, infant  
14 mortality is highly correlated with teenage childbirth and  
15 it is also highly correlated with other bad outcomes such  
16 as accidental death and stuff like that. So when you see  
17 that infant mortality is not very high, actually going down  
18 quite a bit in this area, it is definitely a positive  
19 indicator, definitely running against other indicators,  
20 although generally speaking, nothing ever works perfectly,  
21 positively or negatively. But the good news however is  
22 that it may reflect something positive inside the families  
23 of the communities here in Stormont.

24 It may reflect that there is more support  
25 available to young mothers or to mothers, period, and that

1           they get better access to prenatal care. They are less  
2           stigmatized. They are more -- it could reflect all of  
3           those things because what will increase infant mortality by  
4           the way is if women become pregnant but don't take care of  
5           themselves because they are ashamed of that condition or  
6           also if they're drinking, there's a lot of substance abuse  
7           and things like that.

8                         So the fact that infant mortality is pretty  
9           good is indicative of something positive is going on here,  
10          which is protecting infants or protecting mothers who are  
11          pregnant.

12                        **MR. ENGELMANN:** Now, under "Crime Rates",  
13          you say,

14                                 "Rates of violent crime and crime in  
15                                 general are important risk factors for  
16                                 child abuse and neglect for three  
17                                 reasons."

18                         Can you just briefly tell us what those  
19          three reasons are, sir?

20                        **MR. FULTON:** Well, number one that -- well,  
21          many perpetrators of crime are parents. There's been many  
22          studies of, for example, women in jail showing about 50 per  
23          cent of them have children and many of them, you know,  
24          their children are in the care of CAS when they are in  
25          prison. So basically speaking, many perpetrators of

1 crimes, in fact, are parents and when a parent is in jail,  
2 that has already been established as a serious risk factor  
3 promoting antisocial behaviour by their children.

4 **MR. ENGELMANN:** All right. And then you  
5 talk about some of the studies that have been done in this  
6 sector.

7 **MR. FULTON:** There's also been a number of  
8 studies that have found that children who have died by  
9 child abuse were killed by fathers who had a record of  
10 community violence and little experience in parenting often  
11 because they were in jail or coming out of jail. So that  
12 itself is listed as a risk factor for fatal child abuse.

13 And also a high rate of criminal behaviour  
14 is a symptom that is predicted by a social discrimination  
15 theory of community disintegration, which suggests that  
16 other aspects of the community may be not functioning as  
17 well, which is promoting crime in general.

18 So when you see crime rates a little on the  
19 high side, generally speaking it raises concerns about the  
20 quality of neighbourhoods, the quality of family life.

21 **MR. ENGELMANN:** All right. Then in your  
22 last bullet under this area, you talk about some trends  
23 that you have examined and the fact that during the '90s or  
24 at least from '90 to '97, youth crime rates here in this  
25 area were higher than the provincial average.

1                   **MR. FULTON:** That's right and first of all,  
2                   there's a tab here -- if you look under the tab called  
3                   "Crime" -- sorry, the tab called "Rank of Pops" -- I'm  
4                   sorry, if you look under the tab called "Rank of Pops" and  
5                   then you go to the last tab in that series, which is Table  
6                   13, you'll see ---

7                   **MR. ENGELMANN:** The very last one?

8                   **MR. FULTON:** The very last one, Table 13.  
9                   What you see are the rates per hundred thousand in this  
10                  particular case of violent crime and general crime, county  
11                  by county. And what you can see in there is that Stormont  
12                  is fairly high in overall crime, 14<sup>th</sup> out of the province's  
13                  49 counties, and 12<sup>th</sup> for violent crime. However, it shares  
14                  that position with many of the counties in Eastern Ontario  
15                  and Northern Ontario.

16                  So in other words, Cornwall and Stormont,  
17                  the United Counties, are tending to be somewhat high like  
18                  other places in Eastern Ontario. So it's not -- they're  
19                  not worse than other places in Eastern Ontario terribly.  
20                  So it's not like as bad as, for example, accidental death,  
21                  which seems so much worse, but the crime rates generally  
22                  are a little high here.

23                  **MR. ENGELMANN:** All right. So just ---

24                  **MR. FULTON:** That's what it means.

25                  **MR. ENGELMANN:** --- looking at this table,

1 some counties there is no data.

2 MR. FULTON: Yes.

3 MR. ENGELMANN: So you only have about 41  
4 with data.

5 MR. FULTON: Yes, exactly.

6 MR. ENGELMANN: And then if we're looking at  
7 violent crimes, and this is 1996 ---

8 MR. FULTON: Yes.

9 MR. ENGELMANN: The Stormont, Dundas,  
10 Glengarry was in 12<sup>th</sup> position, the rank order with 1,331.

11 MR. FULTON: Yes.

12 MR. ENGELMANN: And what does 1,331 mean?

13 MR. FULTON: That means there's 1,331  
14 violent events investigated by the police, divided by --  
15 you know, per 100,000 people, 15 to 65, in the county.

16 MR. ENGELMANN: All right. And the Ontario  
17 average at that time was 937.

18 MR. FULTON: That's right.

19 MR. ENGELMANN: But as you say, a number of  
20 the counties in Eastern Ontario had similar statistical  
21 outcomes as Stormont, Dundas.

22 MR. FULTON: That's right. And the other  
23 thing about the data is that it does tend to go up and down  
24 quite a bit from one year to the next and it can be pushed  
25 up because there aren't that many -- I mean of the number,

1       there may be only about -- correspondingly about 1,000  
2       violent events that created that rate, if you want to put  
3       it that way, so that as a result, you know, the rate per  
4       100,000 can move around pretty dramatically by smaller  
5       variations in the absolute number.

6                       So I just want to point out that you have to  
7       look at it as a pattern from one year to the next to the  
8       next, where is it tending to stay, and that's what tells  
9       you the relative harm that may be, you know, available in  
10      that ---

11                      **MR. ENGELMANN:** So you make the point as  
12      well that -- and I'm just looking at page 12 of your  
13      outline, the Statistics Canada's reports or "Statistics  
14      Canada reports that the highest rates of crime were found  
15      in small cities" ---

16                      **MR. FULTON:** Yes.

17                      **MR. ENGELMANN:** "Population of 15 to  
18      50,000".

19                      **MR. FULTON:** Yes.

20                      **MR. ENGELMANN:** Whereas the lowest rates in  
21      cities over 100,000.

22                      **MR. FULTON:** Exactly.

23                      **MR. ENGELMANN:** All right.

24                      **MR. FULTON:** And so this is a common pattern  
25      for this type of city, this type of environment.

1                   **MR. ENGELMANN:** All right. Then on your  
2 next caption "Suicide", you talk about two things there,  
3 sir, that we have a relatively high rate of youth suicide -  
4 --

5                   **MR. FULTON:** Yes.

6                   **MR. ENGELMANN:** --- in the United Counties  
7 and that it has increased.

8                   **MR. FULTON:** And that it has increased over  
9 the '90s, that's right.

10                   **MR. ENGELMANN:** And what is the  
11 significance, if any, of that?

12                   **MR. FULTON:** Well, the significance of that  
13 -- by the way, that's also in the Rank of Pops too, in the  
14 table preceding the one on crime. The significance of it  
15 is that it's quite a bit higher. It's like Stormont's  
16 position is even higher, I think it's 7<sup>th</sup> place in terms of  
17 the overall rates across the province.

18                   The significance of it is that it's -- well,  
19 (a) 10 times as many children attempt suicide or young  
20 people attempt suicide, as actually finally completed. So  
21 behind that statistic is a lot of harm and a lot of  
22 suffering, and it certainly reflects hopelessness to the  
23 greatest possible degree.

24                   **MR. ENGELMANN:** Okay. Then you have some  
25 comments about accidental death.

1                   MR. FULTON: That's right.

2                   MR. ENGELMANN: And do we have a table that  
3 deals with that?

4                   MR. FULTON: Yes, we certainly do. The  
5 table for accidental death is under -- you can see it  
6 there's a tab marked "Accidental Death".

7                   MR. ENGELMANN: M'hm.

8                   MR. FULTON: And if you look, it's called  
9 Table 15 and right on page 1 of that table are the most  
10 important numbers. And once again, the rates that you need  
11 to pay attention to -- if you look at the separate rates  
12 for the age groups, 0 to 4, 5 to 9, 10 to 14, the important  
13 rule for interpreting a table like this is that you need to  
14 have a fairly large city, you know, a community at least  
15 the size of Cornwall to be able to interpret it because  
16 smaller towns, like there's too few numbers and one ---

17                   MR. ENGELMANN: The statistics, the numbers  
18 are ---

19                   MR. FULTON: For your rates.

20                   MR. ENGELMANN: The numbers are too small to  
21 ---

22                   MR. FULTON: That's right.

23                   MR. ENGELMANN: Yes.

24                   MR. FULTON: But Cornwall is still big  
25 enough for you to interpret it, but if you look at

1 Cornwall, consistently from one age group to the next, the  
2 rate of accidental death is two or three times higher than  
3 the provincial average and, you know, it tends to be quite  
4 a bit higher than many of the neighbouring counties.

5 So if you look, for example, at age 0 to 4,  
6 the rate of accidental death per 100,000 population in that  
7 age group is 25.6 and that translates to maybe 15 children  
8 that died in that time period, but the thing is the -- it  
9 was not a lot of children in absolute terms, although  
10 there's a great deal of suffering behind each one of those  
11 stories. I don't want to minimize that. Also, about 10  
12 times that many children are seriously injured and require  
13 hospitalization behind that number.

14 So therefore, it is a bad indicator. It's  
15 an indicator of a great deal of harm to children by way of  
16 accidents, and the important thing is that it's two or  
17 three times higher than the provincial average consistently  
18 across all the age groups.

19 **MR. ENGELMANN:** That's right.

20 **MR. FULTON:** And that's what I mean by a  
21 trend. That's sort of like a pattern that sort of hits  
22 you. You can't deny it. There's something that has to be  
23 dealt with here. There needs to be a harm prevention  
24 strategy in this city for sure.

25 **MR. ENGELMANN:** But just on those numbers,

1 sir, those are older numbers, are they not?

2 MR. FULTON: They are older numbers. Those  
3 are the numbers from '90 to '96.

4 MR. ENGELMANN: Right. So we don't have ---

5 MR. FULTON: I don't have current numbers.  
6 Statistics Canada doesn't have them available.

7 MR. ENGELMANN: All right. So then if we  
8 turn to page 13 of your report, you have summarized there  
9 some of the comments you've made but let's just touch upon  
10 some of them briefly, if we may.

11 MR. FULTON: Yes.

12 MR. ENGELMANN: And these are the  
13 conclusions. You talk about the fact that three of the  
14 four -- of the most critical adverse outcomes correlated  
15 with child abuse are significantly higher in Cornwall.

16 MR. FULTON: Yes.

17 MR. ENGELMANN: And those three of four  
18 include what, sir?

19 MR. FULTON: Accidental death, youth  
20 suicide, crime rates in general.

21 MR. ENGELMANN: And I think you told us  
22 earlier that the crime rates in general, that's consistent  
23 with Eastern Ontario?

24 MR. FULTON: And consistent with small  
25 cities of the size of Cornwall, yes.

1                   **MR. ENGELMANN:** All right. But those other  
2 two risk factors ---

3                   **MR. FULTON:** --- are relatively speaking  
4 higher even in this neighbourhood.

5                   **MR. ENGELMANN:** All right. Then your second  
6 point is a positive one on infant mortality.

7                   **MR. FULTON:** That's right. Infant mortality  
8 is positive and that's a very good sign indicative of  
9 something good going on in the family life.

10                   **MR. ENGELMANN:** And you're saying this is  
11 happening even though there's a high rate of teenage  
12 childbirth?

13                   **MR. FULTON:** That's right, which is normally  
14 -- normally does reflect itself in poor outcomes for  
15 babies.

16                   **MR. ENGELMANN:** All right. And in three and  
17 four, you talk about the ethnic diversity issue.

18                   **MR. FULTON:** That's right. There's not  
19 enough numbers there for the ethnic groups to be protected  
20 from the stresses that are -- that just come with  
21 immigration from these desperate countries.

22                   **MR. ENGELMANN:** On the fifth issue, you talk  
23 a little bit about the migration issue.

24                   **MR. FULTON:** That's right. There is a net  
25 migration out -- a net outflow of people from the City of

1 Cornwall, which generally speaking is bad because it's  
2 usually the people that have the most hope and the most  
3 resources, the most going for them that get up and go to  
4 where the jobs are and where the future is.

5 **MR. ENGELMANN:** In your sixth issue, you  
6 talk about education.

7 **MR. FULTON:** That's right. I point out that  
8 there is a problem which is -- it's almost like an engine  
9 for renewing the level of Low SES in this community. Kids  
10 have got to stay in school to rebuild this community in  
11 terms of educational achievement for everybody and jobs and  
12 income for everybody.

13 **MR. ENGELMANN:** In your seventh point, you  
14 talk about some of the density in the high rise living.

15 **MR. FULTON:** That's right. I can say to you  
16 that it almost doesn't matter, you know, whether you're a  
17 town of 5,000 or a town of 46,000. When you're living in  
18 your apartment block, it pretty well feels the same and,  
19 you know, you've got the same sort of stressors and  
20 competition for resources and conflicts and lack of  
21 support. So generally speaking, it's just you look at  
22 things like the number of apartment blocks and that kind of  
23 stuff to indicate just the density and that sort of  
24 sociological environment, that very micro neighbourhood  
25 level of sociological environment, which several people,

1 including Dan Offord, who did the Ontario Child Health  
2 Study, have identified as a risk factor for antisocial  
3 behaviour by young people.

4 **MR. ENGELMANN:** In the eighth point, you  
5 talk about unemployment and particularly youth  
6 unemployment?

7 **MR. FULTON:** Yes. Youth unemployment is  
8 much higher in Cornwall compared to, you know, other areas,  
9 which is also consistent with the fact that you've got a  
10 lot more kids dropping out of school.

11 **MR. ENGELMANN:** So there are more kids  
12 looking for work?

13 **MR. FULTON:** Well, there's more kids looking  
14 for work, which is going to push the youth unemployment  
15 numbers up, and also there seems to be fewer jobs generally  
16 in this area and when kids are dropping out of school, it  
17 also tends to reflect that they don't have much optimism  
18 about getting ahead in life.

19 **MR. ENGELMANN:** Your ninth point, you talk  
20 about concentration of poverty.

21 **MR. FULTON:** Yes. And certainly there is a  
22 concentration of poverty, you know, in Cornwall. The  
23 percentages of people who are really poor no matter which  
24 cut-off point you use are much higher than other areas,  
25 although it is pretty high among those small cities along

1 river banks.

2 MR. ENGELMANN: Okay.

3 MR. FULTON: But Cornwall is certainly the  
4 largest concentration of human beings in that problem than  
5 any of the other cities I just described. It's the fourth  
6 highest concentration in Eastern Ontario of people who are  
7 very poor.

8 MR. ENGELMANN: And your last point, your  
9 tenth point was although personal wealth has soared in  
10 Ontario, it hasn't in Cornwall. I mean it's increased but  
11 not much.

12 MR. FULTON: That's right.

13 MR. ENGELMANN: And you talk about that  
14 increasing gap between rich and poor ---

15 MR. FULTON: That's right.

16 MR. ENGELMANN: --- and some of the effects  
17 it has on some of our social institutions.

18 MR. FULTON: Exactly, and that is certainly  
19 a -- it's the difference between the rich and the poor that  
20 really -- that's when kids notice it and families notice  
21 it, and that gives them the feeling of anger and resentment  
22 and hopelessness. It's a lot -- you find a lot more  
23 support when everybody is in the same problem.

24 MR. ENGELMANN: Now, sir, when you finished  
25 this report, then you would have turned it over to the

1 Children's Aid Society of Stormont, Dundas and Glengarry.

2 MR. FULTON: Yes.

3 MR. ENGELMANN: Did you also -- that was in  
4 the fall of 2003. Did you have follow-up with respect --  
5 with CAS and/or other officials?

6 MR. FULTON: Yes, absolutely, internally  
7 with the Children's Aid. I met with the managing group to  
8 discuss the findings and what they may mean for families  
9 that they are identifying, what that may mean for families  
10 that they're not identifying and what strategies they can  
11 do to increase their ability to find cases, if you want to  
12 put it that way. And, you know, what about the probability  
13 that there is more to be found out there, and so, we talked  
14 to the managing group. I also spoke with a community group  
15 that the Children's Aid facilitated that included members  
16 of the faith communities and as well as police and other  
17 social agencies in the city and about 100 people in all  
18 attended that larger assembly.

19 MR. ENGELMANN: So as I understand it, some  
20 of those groups included police, school boards.

21 MR. FULTON: Yes.

22 MR. ENGELMANN: The church and the  
23 Children's Aid Society?

24 MR. FULTON: Yes.

25 MR. ENGELMANN: And were these meetings well

1 attended?

2 **MR. FULTON:** Yes, they were very well  
3 attended and they were very interested in the data and it  
4 seemed to mobilize the community and the comment that I  
5 made was that this is a real mandate for these community  
6 agencies to really ban together and try to deal with the  
7 suggestion of harm, the greater level of harm in this  
8 community and what we can do to ameliorate that.

9 **MR. ENGELMANN:** Was the report well  
10 received?

11 **MR. FULTON:** It was well received, yes.

12 **MR. ENGELMANN:** Did you indicate at these  
13 meetings, did you give some indication of some of the  
14 social indicators that you've talked to us about?

15 **MR. FULTON:** Certainly, we discussed all of  
16 those social indicators and what's tied to them, which is  
17 strategies that schools can do to correct the problem that  
18 can be located in schools and things that other people in  
19 the community can do to overcome, you know, counteract the  
20 risk mechanism, if you will. And we also talked about a  
21 couple of other variables that aren't really part of a risk  
22 factor matrix.

23 **MR. ENGELMANN:** What sort of variables or  
24 factors were those?

25 **MR. FULTON:** Well, two of those variables --

1 one of them is shared memories. A big part of every  
2 community's identity is its memory of something, the memory  
3 of a process and certainly there is kind of a shared memory  
4 related to the harm, the child abuse that occurred.

5 There is also memory of course of the  
6 Commission of Inquiry that's happening. It's being created  
7 as we talk here and there is both a possibility of creating  
8 negative thoughts and bad feelings from one part of the  
9 memory but an opportunity to create a sense of optimism and  
10 renewal as well by how the community deals with it.

11 I am just saying at the end of time when the  
12 members of the community pull together their shared memory  
13 of all these events, how it all ends up has a huge impact  
14 on how they cope with future problems down the road.

15 **MR. ENGELMANN:** So one of the community  
16 factors you talked about was shared memory. Did you talk  
17 about other community factors?

18 **MR. FULTON:** I also talked about leadership  
19 and meaning and how important it is for community leaders  
20 like church leaders, as well as opinion leaders, people who  
21 get quoted in the papers and other people, to kind of  
22 interpret painful shared memories and interpret data,  
23 interpret the bad news in some of this report in a way to  
24 mobilize people and correct this sense of hopelessness  
25 about it.

1           In other words, it's up to community leaders  
2           to put messages out about the closure of Domtar in such a  
3           way that it frames it, so that people can feel better about  
4           it even though it's a bad news kind of story.

5           So either we can -- either our leadership  
6           basically talks us down or talks us up and so it's very  
7           important -- that has a huge impact on individual people.  
8           It has a huge impact on kids and a huge impact on parents  
9           and stuff like that. So that is why the leadership is so  
10          important. That was one of the things we talked about in  
11          the meeting. It was what we can do to put out a different  
12          way of thinking about this problem and a different way of  
13          -- obviously, it's promoted a different kind of feeling  
14          about the problem.

15                 **MR. ENGELMANN:** Have you been asked, sir, to  
16                 undertake other work and to do other studies like this to  
17                 look at indicators of child abuse or neglect?

18                 **MR. FULTON:** Yes, the Executive Director of  
19                 Leeds and Grenville called me about a month ago to ask if  
20                 we could renew it for this census coming up. What I  
21                 indicated to him is that I'm not going to see any increase  
22                 in the quantity of data in my data archive until about 2007  
23                 or 2008. So we are going to have to wait until then before  
24                 I can get an updated report on this ---

25                 **MR. ENGELMANN:** So that you be able to take

1 this through the 2006 census.

2 **MR. FULTON:** Yes, we've got to wait for this  
3 census to be completed and for Statistics Canada to publish  
4 the results.

5 **MR. ENGELMANN:** Mr. Fulton, thank you for  
6 answering my questions.

7 And I think this may be an appropriate time  
8 to take the lunch break.

9 **THE COMMISSIONER:** It is.

10 **MR. ENGELMANN:** I will check with counsel  
11 about cross-examination, sir, over the break.

12 **THE COMMISSIONER:** Okay.

13 Thank you very much. We will break and come  
14 back at 2:00.

15 **THE REGISTRAR:** Order; all rise. À l'ordre;  
16 veuillez vous lever.

17 The hearing will reconvene at two o'clock.

18 --- Upon recessing at 12:30 p.m. /

19 L'audience est suspendue à 12h30

20 --- Upon resuming at 2:02 p.m. /

21 L'audience est reprise à 14h02

22 **THE REGISTRAR:** Order; all rise. À l'ordre;  
23 veuillez vous lever.

24 This hearing of the Cornwall Public Inquiry  
25 is now in session. Please be seated; veuillez vous

1       asseoir.

2                       **THE COMMISSIONER:** Yes, sir.

3       **ROBERT FULTON, Resumed/Sous le même serment:**

4       **--- EXAMINATION IN-CHIEF BY/INTERROGATOIRE EN-CHEF PAR MR.**  
5       **ENGELMANN (cont'd/suite):**

6                       **MR. ENGELMANN:** Mr. Commissioner, I thought  
7       I was finished, but one of the counsel in the room, Mr.  
8       Carroll, pointed out to me an obvious error in the reports.  
9       So I would like to go back there with just one or two  
10      questions to Mr. Fulton.

11                      So before there is some cross-examination  
12      and my understanding, sir, is it will be brief, if we could  
13      turn to Tab 2, Mr. Fulton of your report at page 11.

14                      **MR. FULTON:** Yes.

15                      **MR. ENGELMANN:** And I'm going to start with  
16      the comment that you have already told us that as far as  
17      infant mortality goes, Cornwall and Stormont, Dundas,  
18      Glengarry was doing very well.

19                      **MR. FULTON:** Yes.

20                      **MR. ENGELMANN:** Compared to the provincial  
21      average.

22                      **MR. FULTON:** Yes.

23                      **MR. ENGELMANN:** So I want to ask you about  
24      what must be an obvious typo in your report where it says  
25      Stormont went from 35<sup>th</sup> place in the 1980s at 763 deaths per

1 1,000 babies born to 45<sup>th</sup> place at 380. I suspect you might  
2 have a decimal point out of place or I sure hope so.

3 **MR. FULTON:** Yes, yes. Certainly, that  
4 would certainly the drop in population but it's actually  
5 decimal seven, six, three (.763) deaths per thousand  
6 babies.

7 **MR. ENGELMANN:** All right. So in other  
8 words, ---

9 **MR. FULTON:** So it's decimal three. So it's  
10 less than three quarters of one baby per thousand babies  
11 born die or maybe ---

12 **MR. ENGELMANN:** So it's less than one baby  
13 per thousand?

14 **MR. FULTON:** Less than one baby per thousand  
15 babies die and it's quite a bit less in the 1990s. So  
16 that's a very, very positive number in that way.

17 We've got to put decimal points before the  
18 numbers.

19 **MR. ENGELMANN:** All right. So we will just  
20 correct our reports as such.

21 Mr. Commissioner, I am not sure how many of  
22 the parties have some cross-examination. I know Mr.  
23 Chisholm might from the Children's Aid Society, but you may  
24 want to rush through the list and just check.

25 **THE COMMISSIONER:** All right. Thank you.

1 Mr. Manson, do you have any questions?

2 **MR. MANSON:** I have no questions.

3 **THE COMMISSIONER:** Thank you. Mr. Lee?

4 **MR. LEE:** No questions, Mr. Commissioner.

5 **THE COMMISSIONER:** Mr. Bennett? He doesn't  
6 have any questions?

7 Who do we have? Mr. Chisholm?

8 --- CROSS-EXAMINATION BY/CONTRE-INTERROGATOIRE PAR MR.

9 **CHISHOLM:**

10 **MR. CHISHOLM:** Good afternoon, Mr.

11 Commissioner.

12 Mr. Fulton, my name is Peter Chisholm. I am  
13 counsel for the local Children's Aid Society.

14 **MR. FULTON:** Hello.

15 **MR. CHISHOLM:** Just a couple of quick  
16 questions if I could.

17 This morning, you spoke of how  
18 neighbourhoods matter in saying how it's the neighbourhoods  
19 that produce results; an example, a high crime rate, you'd  
20 expect to see that in a particular neighbourhood over time.

21 **MR. FULTON:** Yes.

22 **MR. CHISHOLM:** When you examined the data  
23 from SD&G, do I understand correctly that you never broke  
24 it down into neighbourhoods of Cornwall, for instance, in  
25 terms of the east end versus the west end?

1                   **MR. FULTON:** No, I wasn't able to do  
2                   that. I don't have data that really cease the  
3                   neighbourhood where it's really happening. I sort of have  
4                   to get a little bit outside and look at a proxy that gives  
5                   me a sense of what might be going on in there.

6                   **MR. CHISHOLM:** That's fair. And you spoke  
7                   of the CAS having to work with the positive attributes, and  
8                   you said this in relation to your discussion with respect  
9                   to what the negative factors that you were discussing and  
10                  you said that the Children's Aid Society should be taking  
11                  the positives and working with those in fulfilling its  
12                  mandate.

13                  Can you give us an example of any of the  
14                  positives you were referring to?

15                  **MR. FULTON:** There seems to be something  
16                  positive going on in families because there doesn't seem to  
17                  be the same pattern of marriage breakdowns leading to  
18                  increase in female-led lone-parents that you see in other  
19                  places and the infant mortality is quite positive. So  
20                  there's some sign that family life has something good going  
21                  for it in this community. It is more supportive somehow to  
22                  mothers and that is a very good sign, that's a strength and  
23                  clearly that is an asset that the Children's Aid can work  
24                  with in a collective sense and try and help with some of  
25                  the problems that seem to be carried largely by young

1 people, young adults in a lot of ways.

2 So that is one way in which Children's Aid  
3 could work to build some positives and obviously an area  
4 where the Children's Aid has to work in partnership is with  
5 schools, for example, where some of the bad outcomes seem  
6 to be starting from or building around and that can be some  
7 leverage to doing it, trying to build a stronger community  
8 around the schools and act as a bridge between these  
9 families and the society.

10 **MR. CHISHOLM:** Now, what you told us today,  
11 you generally pulled out some of the risk factors that  
12 would lead you to conclude that children could be at risk  
13 of suffering maltreatment. Is that fair to say?

14 **MR. FULTON:** Yes.

15 **MR. CHISHOLM:** And did I understand your  
16 evidence correctly this morning when you suggested that  
17 sexual offenders were in some way a different kettle of  
18 fish?

19 **MR. FULTON:** Yes, that is correct. We are  
20 less -- you can't really explain the predator for sure with  
21 reference to these community variables. The only thing  
22 that seems to influence it is the availability of victims,  
23 if I can put it that way, because some neighbourhoods are  
24 less able to supervise their children and protect them.  
25 And also, some children are more vulnerable to being

1 targets because of their own emotional problems that are an  
2 outcome of the stress levels in their families and that  
3 kind of stuff.

4 So, yes, that's correct. Sexual predatory  
5 behaviour is more difficult to tie into this model.

6 **MR. CHISHOLM:** So if you were limiting what  
7 you were looking for in terms of limiting it just to child  
8 sexual abuse, some of these factors may not prove overly  
9 useful. Is that fair to say?

10 **MR. FULTON:** I would say that's fair to say,  
11 yes.

12 **MR. CHISHOLM:** Thank you, sir, those are my  
13 questions.

14 **MR. FULTON:** Okay.

15 **THE COMMISSIONER:** Thank you. Probations  
16 and Corrections, Me Rouleau?

17 **MR. ROULEAU:** We have no questions, sir.

18 **THE COMMISSIONER:** Thank you.

19 Mr. Ducasse, do you have any questions from  
20 the Diocese?

21 **MR. DUCASSE:** No questions, Mr.  
22 Commissioner.

23 **THE COMMISSIONER:** Thank you.

24 Cornwall Police, Mr. Manderville.

25 **MR. MANDERVILLE:** No questions, Mr.

1 Commissioner.

2 **THE COMMISSIONER:** Thank you.

3 Mr. Kozloff?

4 **MR. KOZLOFF:** No questions, sir.

5 **THE COMMISSIONER:** Mr. Carroll?

6 **MR. CARROLL:** No questions, sir. Thank you.

7 **THE COMMISSIONER:** You are off the hook

8 fairly easily there sir.

9 **MR. FULTON:** Thank you.

10 **THE COMMISSIONER:** Thank you very much for  
11 coming. We appreciate your evidence.

12 All right. So we are closed for the day, I  
13 suppose?

14 **MR. ENGELMANN:** That's correct, Mr.  
15 Commissioner. As I indicated earlier this week, Detective  
16 Leaver is not available tomorrow but will be with us for  
17 10:00 o'clock Thursday morning.

18 **THE COMMISSIONER:** All right. So we will  
19 adjourn until that time.

20 Thank you.

21 **MR. ENGELMANN:** Thank you.

22 **THE COMMISSIONER:** Have a good day.

23 **THE REGISTRAR:** Order; all rise. À l'ordre;  
24 veuillez vous lever.

25 This hearing is adjourned. L'audience est

1           ajournée.

2           --- Upon adjourning at 2:11 p.m. /

3           L'audience est ajournée à 14h11

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

C E R T I F I C A T I O N

I, Sean Prouse a certified court reporter in the Province of Ontario, hereby certify the foregoing pages to be an accurate transcription of my notes/records to the best of my skill and ability, and I so swear.

Je, Sean Prouse, un sténographe officiel dans la province de l'Ontario, certifie que les pages ci-hautes sont une transcription conforme de mes notes/enregistrements au meilleur de mes capacités, et je le jure.



---

Sean Prouse, CVR-CM