CHAPTER 2

Prospects for Healing and Reconciliation

What Is Community Healing and Reconciliation?

Almost as soon as I had established my Advisory Panel in July 2006, the Panel reached out to the Cornwall community. Extensive meetings, large and small, gave opportunities to understand the community’s perspective on the task set by the Government of Ontario in respect to Phase 2 of this Inquiry.¹ In starting this work, two questions were consistently asked: “What do you think community healing and reconciliation would look like?” and “What would be needed to foster community healing and reconciliation in Cornwall and Stormont, Dundas and Glengarry?”

In looking at healing, a significant number of people said they thought healing was personal, not something a community could experience. An individual might heal as a result of counselling or group therapy or participation in mentorship. He or she might heal in one-on-one meetings with institutions if an apology was given or there was at least expressions of empathy for past circumstances or regret for certain conduct. A survivor might heal if there was validation and acknowledgement of that individual’s past sufferings and personal accomplishments. A person might heal if given the opportunity to tell of his or her difficult life journey, in a private setting with a group of compassionate listeners. Professionals might heal if given the training and tools to excel at challenging aspects of their work related to sexual abuse or if they were exonerated of wrongdoing. Some people did think that this culmination of individual healing could be part of community healing, reasoning that if the community as a whole saw that those hurt in the past had achieved personal healing, this could have a healing effect on the entire community.

¹. See Appendix B for a list of community meetings; summaries of what was said at each meeting were posted on our website. Ideas discussed in this Chapter are referenced in these meetings.
Others situated community healing more as an outcome of projects or resource infusion. Their argument is that if the community sees itself as resourced to implement activities and actions to sustain a vibrant and caring community, this would be healing. If Cornwall is seen as a place of innovation and leadership, this new identity would heal a community that has felt the sting of notoriety. If there is a sense of momentum, pride, and excitement, if there are interesting and inclusive events to look forward to, this would result in a healed community. Many saw that kind of healing manifest in community renewal—an explosion of positive projects and events re-knitting bonds of cooperation and goodwill.

There is a third sense of community healing, the idea that the harm that has occasioned any need for healing should be identified and then a public apology given. In this vision of healing, community leaders and institutional heads would acknowledge to the community that any shortcomings in the past had hurt not only individuals, but the community as a whole. With this acknowledgement would come undertakings by leaders to make or sustain changes on behalf of the community. For some, this would entail community events with a focus that was both commemorative and forward-looking. Others sought the creation of a symbolic place of remembrance as well as events of acknowledgement. Community events were described variously, from an educational or professional-training day to more joyful events focused around youth, such as an awareness day that could engage students in contributing with appropriately themed music, art, short stories, or poetry. It was suggested that these student creations could be combined with the art or creative writing of adult survivors. Other ideas included a community-wide “open doors” event that would include facilities serving those who were abused in order to welcome and integrate survivors within the community. Creative ideas included a Cornwall-wide garage sale with a percentage of the money raised donated to organizations providing services to adult survivors, as both an enjoyable event and a way to engage a wider population. Last, but not least, there were suggestions that remembering those who have suffered abuse should be woven into community events. This occurred when the Water Garden memorial was dedicated in Walkerton, following the tragedy in that community related to its water supply that led to the Walkerton Public Inquiry, presided over by Commissioner Dennis R. O’Connor.

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2. See, for example, the Phase 2 submissions by Citizens for Community Renewal, p. 2.
3. Governor General Adrienne Clarkson dedicated the memorial on June 16, 2001 before a crowd of 1000 people, saying: “We see you have put on a brave face, especially when heartache and pain are still so close and so widely felt. Yet you are determined to look ahead to the future. And we are all—your fellow citizens—inspired by you.” CBC digital archives.
Creation of symbolic spaces of remembrance was also identified as potentially contributing to community healing. Such spaces were variously described as a community garden or facility, such as a family beach or a basketball court, and as a permanent memorial, but one of value to the whole community. A specific memorial to survivors was also raised as an idea, combined with a day of remembrance or recognition or with some of the community events previously described.

Reconciliation was most consistently described as the restoration of positive relationships. For institutions, this was usually referred to as restoration of trust in the ability of institutions to act in the best interests of clients and the public. Some observers saw reconciliation as also involving increased inter-institutional interactions and cooperation or more collaboration between service providers, demonstrating a willingness to be more flexible to help those needing assistance.

Reconciliation was also described by some as coming to terms with the past. Once an authoritative account of the past is articulated, it was reasoned, the discord associated with having substantially different community histories would dissipate. This could result in greater willingness to work as a community and a stronger consensus on what was needed for the future.

Reconciliation was also seen as being about future progress. In this vision, whatever historical or current disagreements have existed about the interpretation of past events, if there was consensus about what to do in the future, this could constitute an environment of reconciliation. As the community worked together on projects, activities, and processes, there would be opportunity for restoration of frayed relationships and building of new ones. This idea of inspirational projects and shared initiatives was one where the ideas of healing and reconciliation converged most frequently.

Those who saw healing as personal and did not embrace the idea of community healing still saw reconciliation as an independent goal applicable to the community as a whole. Whatever the views on either healing or reconciliation, it was generally seen in the community context as being a process, a journey and not a destination, and a journey that has started but still has some way to go.

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4. See, for example, the ideas set out in the minutes of the neighbourhood meeting held September 13, 2007, p. 3.
5. See, for example, Phase 2 submission of the Victims’ Group, p. 8, and Phase 2 submission of Citizens for Community Renewal, p. 5 and Appendix D.
6. See, for example, the Phase 2 submissions by the Children’s Aid Society of the United Counties of Stormont, Dundas & Glengarry, p. 1.
What Has Been Done to Foster an Environment of Healing and Reconciliation?

The Mandate of This Inquiry

When the Government of Ontario established this Inquiry, it created a unique mandate to “report on processes, services or programs that would encourage community healing and reconciliation.” This was an essential objective for the work of Phase 2. In undertaking this mandate, my Advisory Panel and I had to consider how we could assess for others what could create an environment that would encourage healing and reconciliation. One obvious way was to engage the community in its own definition of what would be helpful. As we started out on this endeavour, it was clear that we could not move immediately to a formulaic list of initiatives that if put together would lead to the desired outcome. This was because work had to be done to reach that stage where those affected were ready to talk to one another about a collective future. My Advisory Panel reported to me initially that many individuals and organizations were not yet at that stage. For example, some survivors indicated they could not attend meetings if representatives of certain institutions were present; at the same time, some institutional representatives indicated they could not meet with those they saw as taking an adversarial position toward them. To identify workable and acceptable recommendations for healing and reconciliation, we first had to foster an environment in which talking about a shared future was even possible.

This reality meant taking a more active approach in Phase 2 and recognizing that creative, sensitive, and reiterative processes for discussing community reconciliation and healing were integral to any well-founded recommendations. As I explained in a statement I made at a town hall meeting on May 2, 2007:

In the course of working out Phase 2 we may “try out” various ideas and approaches. Some may turn out to not be right, and some may not be right immediately but can grow over time. And some ideas may not work out but were really worth talking about or trying. Here is where we take some more chances—with each other, with ideas, with the hard work of building consensus and respecting differences.

Throughout Phase 2 we made efforts to foster a receptive environment for discussion, so that ultimate approaches to healing and reconciliation, as they emerged from the community, would have support and be practical for future

implementation. Our processes were designed to ensure that recommendations for specific initiatives for Cornwall and Stormont, Dundas and Glengarry were not theoretical imports but “made-in-Cornwall” solutions, with “come-from-Cornwall” champions. This was why much of the work of my Advisory Panel involved outreach to various parts of the community—to find and support those solutions and champions.

**Working Toward Community Healing and Reconciliation**

To foster an environment in which people could come together to identify initiatives for community healing and reconciliation, we embarked on a process to begin a necessary community dialogue. In this, the Advisory Panel and I were fortunate in having the advice of Dr. Ben Hoffman, an experienced international peacemaker and member of my Advisory Panel.

The Advisory Panel members started by holding a series of smaller convening meetings across the Cornwall area. They met separately with institutional representatives, service organizations, survivors, professionals, municipal representatives, and so on. The idea was to allow people to meet in a private way, where they could feel comfortable saying whatever they wanted, without concern about criticism or having a formal record. The Advisory Panel began to see themes and project ideas emerge.

The next step was to widen the dialogue. One way to do this was by having larger “town hall” meetings. Our first town hall, held May 7, 2007, with the theme of “Building Hope, Trust and Pride,” permitted a focus on Phase 2, since the start of Phase 1 evidentiary hearings had led to an understandable focus on Phase 1. The first town hall featured a presentation by Dr. Peter Jaffe aimed at creating a shared understanding of common responses to sexual abuse of children and young people. This inspired participants to be more open and willing to talk to one another. Dr. Jaffe’s presentation also clearly pointed to a barrier for reconciliation: that some people do not see the need for healing, do not accept that the impact of childhood abuse can be sustained over a lifetime, and do not understand why people do not “just get on with life.” Acknowledgement of this barrier is an important step toward its removal.

From the town hall meetings came a number of ideas that many people were interested in pursuing to see if consensus could be developed. A group called PrévAction arose from that interest. I understand that the group’s name is intended to communicate the members’ primary interest in taking action on prevention of the sexual abuse of children and young people. PrévAction members aspire to

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9. See Appendix B, Cornwall Public Inquiry Events, Phase 2 Convening Meetings with the Advisory Panel.
be catalysts for change—to take ideas to reality. Members of PrévAction made a significant five-year commitment to working as catalysts for community renewal, education, and caring initiatives in their community.

By the time PrévAction had emerged, we had already found that people were saying that dialogue was good but that Phase 2 should not be “all talk and no action.” This was reinforced at neighbourhood meetings held in various locales in Cornwall. While many people saw that talking had value in itself because it could start to change relationships and develop consensus, there began to be a sense that more was needed in advancing ideas identified by the community.

One of the outcomes of neighbourhood meetings was that the Cornwall community was developing its own parameters for Phase 2 initiatives. For example, many were concerned that there be recognition that made-in-Cornwall solutions had to work for a smaller centre. This theme was reflected in the minutes of a neighbourhood meeting held at Viscount Alexander School:10

> It was emphasized that we find solutions for healing and reconciliation that fit the small-town reality of Cornwall. For example, in smaller communities we have to think more of multi-purpose centres rather than single-purpose ones. Cornwall is not able to support single-purpose centres. It was proposed that groups and services share resources better.

Interestingly, by the time neighbourhood meetings were held, many of the individuals who had indicated in the past that they were not comfortable in meetings with certain “others” were attending meetings together. In many cases, they found some common ground, or found they could disagree or listen respectfully to the views of others. As part of the process of expanding community discussion, Advisory Panel member Gail Kaneb briefed Cornwall City Council on Phase 2 on August 13, 2007.

At the same time as momentum was beginning to build regarding projects or services to support healing and reconciliation, the Advisory Panel gave me advice, which I accepted, regarding the need for greater support for survivors. Unlike institutions or service organizations, survivors do not have the infrastructure to support their efforts; they do not have meeting space, computer equipment, or staff. This meant that survivors felt disadvantaged in putting their case to this Inquiry for Phase 2 programs or services or in talking as equals to institutions or service organizations. It was essential to address this to ensure that solutions for community healing and reconciliation would integrate survivor perspectives.

10. Minutes of the neighbourhood meeting held September 13, 2007, p. 4.
One initiative was the funding of a pilot mentorship program in Cornwall. The training was provided by The Gatehouse®, a respected Toronto organization with many years of experience in mentorship activities. Survivors in the Cornwall area were trained to provide friendship and support to other survivors of sexual abuse. The mentors benefited from structured training to expand their understanding of the life journey after sexual abuse and to strengthen their skills in helping others while operating within appropriate boundaries and with necessary safeguards. Today there are eight men and women volunteering as mentors in Cornwall. In addition to the mentorship program, I authorized funding of leadership training for survivors. This training gave participants skills in working with other survivors to advance the interests of survivors as a group. Those involved in mentorship and leadership training benefited from working with Advisory Panel member Janet Handy, whose professional and personal experiences provide an exemplary role model and advanced survivor leadership in Cornwall. In all these activities, I wanted to give survivors the tools to work with institutions, community groups, and service organizations.

Survivors certainly responded to opportunities. The Survivor Leadership Team put forward a proposal to do their own research on what survivors needed in Cornwall to support healing and reconciliation. At the same time as they worked on this research project, they held weekly drop-ins at a Cornwall location, welcoming other survivors to evenings of fellowship. Since social isolation is a common experience for those who have a history of abuse, such activities contribute to the healing inherent in breaking down social isolation.

Work was also being pursued by PrévAction. As part of Phase 2 research, this organization was funded to provide research on various possible initiatives identified by the community for community reconciliation and renewal. One of the very helpful activities PrévAction pursued was a series of community consultations involving over fifty organizations at eight separate meetings. This allowed the testing of possible Phase 2 initiatives with those who would have valuable insights and information. As one participant commented, “Love that

11. The Gatehouse is a child abuse investigation site, offering a home-like environment for disclosure of abuse by children to police and child welfare authorities. The Gatehouse also provides support services for adults whose lives have been affected by abuse, building on the resilience of these adults. The Gatehouse is located in a historic building in the Lakeshore area of Toronto, and has been in operation over ten years.
13. PrévAction, “Report to Phase 2 of the Cornwall Public Inquiry,” (Inquiry action research project, September 26, 2008), p. 4; a summary of the Community Leaders Consultation Forums is set out starting at p. 44.
the invitation from PrévAction was launched to service providers. Important to ask people what they think.”

What was interesting to me was that, at this stage, Commission staff were no longer directly involved in these meetings. The community was having its own discussions about the desired outcomes for Phase 2 of the Cornwall Public Inquiry.

Another group of exceptional local individuals had also come forward—Shelter 2015. Under the leadership of Glen Grant, with staff support from Jamie Marsolais, they worked on researching what might be involved in establishing a flexible shelter arrangement in Cornwall. We had reached a stage where the community was starting to define its own Phase 2 vision.

To continue open lines of communication, all research reports were posted on our website, as was a summary of every town hall and neighbourhood meeting. This permitted all those who were interested to know what was being said and done.

While activities were building to get information about possible projects for the Cornwall area as part of the healing and reconciliation mandate, we were aware of an additional impediment that needed to be addressed. In some cases, progress was stalled in developing consensus because certain relationships had been so damaged that necessary conversations were not happening. Some individuals were interested in seeing if repair was possible but lacked a structure or process for this to proceed. As a result, I authorized Advisory Panel members Jan Handy and Ben Hoffman to make themselves available for individual or group facilitation or mediation activities. These included convening conventional meetings but also included healing circles. As well, nine one-on-one mediations were worked on, five of which proceeded. This work added a needed element in fostering an environment in which some consensus was possible on the processes, services, or programs for community healing and reconciliation. It was also part of a cumulative process that led to the development of some partnerships, as individuals and organizations found goals that were inspirational and ways of engaging to make progress on mutual goals.

What Is Needed to Foster an Environment of Healing and Reconciliation?

Some of the foundations for community healing and reconciliation in the Cornwall area are already present. If given further support and time, they can result in a significant difference in community environment and outlook. I would like to

14. Ibid., p. 44.
address both these promising foundations and outline the support and time needed for community healing and reconciliation.

The presence of a group of survivors willing to work with others in the community is essential. Through mentorship and leadership training, and through the efforts of survivors themselves, a group has emerged. They have started a process for supporting survivors and for talking with community organizations and institutions. As I indicated in Chapter 1, no solution will be successful without survivor engagement. No matter how well meaning, others cannot define what survivors need. In addition, there is dignity and healing in contributing to the work of helping others.

In Chapter 3, I make specific recommendations for support for an Adult Community Healing Resource Centre that will create a place and focus for survivors in Cornwall and area. Support for these services is essential for community healing and reconciliation, but not sufficient. Survivors also need to be engaged with others in the community if there is to be community reconciliation. Through the process of working together, relationships can improve. Through the process of observing and experiencing the sincerity of the motives of others, respect and regard can replace distrust.

A second foundation present in the Cornwall community is PrévAction. This group has membership from both local institutions and the broader community. Its goal is to act as a catalyst for change—not necessarily to implement change or to lead change, but to take whatever role is needed to move from vision to reality. In doing this, PrévAction has demonstrated the willingness and ability to work with local institutions and the broader community, but also, most importantly, to work on respectful and constructive relationships with survivors.

In Chapter 3, I make specific recommendations for support for PrévAction to continue its work as a catalyst and as a partner with survivors. Again, support for this process is essential but not sufficient for community healing and reconciliation. The energy and expertise within PrévAction needs to be brought to community priority setting and process management so that the resources available for community healing and reconciliation are judiciously employed and enhanced. Because actions speak for themselves, good example and the demonstration of sincere motivations can build rapport and relationships of mutuality.

A third foundation is present in the Cornwall community: the Cornwall campus of St. Lawrence College. St. Lawrence College has a vision to create a Centre of Excellence in Cornwall, providing education to those serving adult survivors and children and young people who have a history of sexual abuse. They want to train professionals in a post-diploma program, provide summer institute sessions for intensive specialization training, and establish a research capacity. They intend to provide placement opportunities at Cornwall service agencies, benefiting students and agencies. As well, St. Lawrence College plans to include survivors
in designing curriculum and in speaking to students. In this way, perspectives of survivors are, as is necessary, included and honoured. One goal for the College is that survivors who are able to do so may become students themselves, blending professional training and personal experience in service to other survivors. The College could also be a focal point for a special lecture series open to all professionals in the community, continuing some of the education and training done by this Inquiry.

In Chapter 3, I make specific recommendations for support to St. Lawrence College for a Centre of Excellence in Cornwall. Again, I view support for this program as essential to community healing and reconciliation, but not sufficient. Engaging an educational institution committed to working with survivors integrates and expands the impact of community reconciliation. Over time, expectations and understanding shift and the work of catalysts may end, but an education focus in a community sustains change.

A fourth contributor I would identify for community healing and reconciliation is found in the organization Citizens for Community Renewal, a party to this Inquiry for both Phase 1 and Phase 2. I have found the interest in Phase 2 expressed by this organization to be genuine and constructive; I have greatly appreciated this. In any future activities, the perspective and energy of this organization should not be lost to Cornwall and area. While Citizens for Community Renewal made no funding requests for itself, it showed support for several survivor-based and community-based initiatives. Representing another well intentioned and well informed voice from the community, its continued participation will certainly contribute to a future of healing and reconciliation.

It is my conclusion that if these four groups were brought together, they could represent a positive force for community healing and reconciliation. I have specific recommendations for how these groups could work together, while preserving priorities and goals of their own.

The mechanism I see for working together for community healing and reconciliation would entail the provision of a dedicated fund of $5 million from the Government of Ontario. I see this as an informal type of Reconciliation Trust, with the representatives of the organizations mentioned acting as its informal trustees. They would have the ability to draw on a small part of the funds to operate and to report regularly to the broader community. Given past positive experience, I also see the value in permitting this group to retain a facilitator to assist with continued relationship improvements, with the rebuilding of community

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16. Citizens for Community Renewal, Phase 2 submissions: “Healing and Reconciliation” (February 20, 2009); the CCR supported a Child Advocacy Centre for Cornwall, a safe house for men, a Survivor’s Memorial, and the creation of a community development corporation with a catalyst for community renewal and promotion of greater inclusion.
trust. Indeed, I would suggest that this should be done, at least for some period, because a facilitator could be a consistent source of information and guidance and a mechanism for exploring responses to requests for meetings, one-on-one discussions, or healing circles, as may be needed or desired in the process of community reconciliation. Others have also suggested some type of facilitator was needed. Variations on this idea were put forward, for example, by Bishop Paul-André Durocher, Bishop of Alexandria-Cornwall,\footnote{Paul-André Durocher, testimony, September 2, 2008, transcript pp. 143–44; he calls it an “ombudsman”.
} and by the Citizens for Community Renewal.\footnote{Citizens for Community Renewal, Phase 2 Submissions, February 20, 2009, pp. 6–9.} However, it should be within the discretion of the group to determine who should be selected as a facilitator. The group would also make decisions, within certain parameters, regarding how money should be allocated to advance community healing and reconciliation. It would establish, in discussion with those providing the funding, an appropriate governance structure, concerning such matters as the number of appointees from each organization, the rules for calling and chairing meetings, and the processes for decision making. The group acting on behalf of the Reconciliation Trust would certainly need to set priorities—whether money should flow to certain services or provide certain needed capital funding for programs. Through making these decisions as a group, any sense of exclusion is lessened and common purpose is built.

I am not being unrealistic in this proposal. Of course, it is not easy to set relative priorities, and $5 million does not represent unlimited largesse. But the alternatives are not desirable: decisions get made outside Cornwall and area, or there is no funding to build healing and reconciliation and, as a result, the work started is not sustained. I identify, in Chapters 3, 6, and 7, recommendations for monies for worthwhile services or programs that would be carried out by local Cornwall organizations. I do, however, view some areas as being more appropriate for community decision making. Whatever my personal views are—and I add I have always felt positive about youth drop-in centres—I see a decision to fund aspects of the Boys and Girls Club as something I would want to empower those in Cornwall to do.

As well, there were numerous proposals put forward in Phase 2 public and Phase 2 party submissions. These ranged from youth symposiums to continuing excellent training and services given by S. D. & G. Developmental Services, and from establishment of a survivors’ memorial to enabling various training and educational opportunities. There were general requests to ensure that more service and program support would be distributed to the rural areas of Stormont, Dundas and Glengarry. Individually, these may all be worthy ideas, but I do want
to emphasize that community healing and reconciliation should be about community choices, and not only my choices. While I hope that the Reconciliation Trust membership will give consideration to ideas in Phase 2 public and Phase 2 party submissions, it should also be free to consider other ideas. An example could be the provision of training on making apologies that meets everyone’s need, an area of education I discuss in Chapter 5. In any event, it is particularly important that there be the flexibility to respond to locally identified needs and to make room for creative approaches that emerge two or three years into the journey of community reconciliation.

I specifically want to address suggestions made in the Phase 2 public submissions that funding be made available for translation into French of protocols or other materials. Since Cornwall is a designated bilingual area, I was surprised to hear that this was an issue. Any materials generated through the work of the Reconciliation Trust should be available in French and there should be bilingual services. Through Phase 1 testimony and my review of informal testimony, I am aware that many individuals affected by abuse in Cornwall are French-speaking. There should be capacity in the funding of initiatives for community reconciliation to ensure that materials are produced in both French and English and that services are bilingual.

In setting out the parameters for initiatives for community healing and reconciliation, I want to focus on direct services but give some limited discretion for capital approvals to support services and contribute to community renewal. Some capital expenditures are needed to create the infrastructure for programs and services, and so should proceed. However, with a limited overall envelope of funds, monies available should not be entirely consumed by capital projects. In addition, capital projects should be directly related to needed services or programs.

One responsibility that I propose for inclusion in the mandate of the Reconciliation Trust is the creation and awarding of Reconciliation Scholarships. These scholarships for survivors would help those whose education was disrupted to obtain the equivalent of a high school diploma or attend St. Lawrence College in Cornwall to get training that could lead to better employment prospects and a sense of personal accomplishment. I would hope that survivors making the effort to change their lives through education would also benefit from mentorship and friendly encouragement from those organizations involved in determining scholarship recipients. I would note that the scholarship program is the only area for which I have supported payments to or on behalf of individuals. Some have suggested that other payments be made to individuals involved with the Inquiry in various capacities; I do not recommend this but have followed the mandate of
Phase 2, which was to consider processes, services, and programs for the community and not individual compensation.

In looking at provision of resources, I also considered the time needed for use of those resources. I have already indicated that community healing and reconciliation is a journey over time and there is no fixed period for it to occur. However, I have chosen a period of five years for the work of what I have termed the Reconciliation Trust because it is long enough to accomplish quite a bit but not so long that the process becomes unwieldy and the connection to this Inquiry too remote. I know that some start-up time will be needed after the release of this Report and any subsequent decisions by the Government of Ontario. Any time period recommended must allow for that start-up. In some cases, expenditures may be of a capital nature; therefore, enough time must be provided for capital projects to be completed. Awarding of scholarships will involve a process of invitation to applicants and assessment of candidates; some time is needed for this to occur. Five years is a reasonable time period, taking all this into account.

In summary, I see the recommendations for community healing and reconciliation as building on existing foundations, facilitating local decision making, and providing reasonable resources and a fixed time to act. Since there is momentum building in the community, I would suggest that decisions be made as soon as possible, so that this momentum is not lost. The time and resources are not unlimited, but I hope the goodwill and commitment to community healing and reconciliation can be.

Recommendations

1. The sum of $5 million should be provided by the Government of Ontario to support community healing and reconciliation in Cornwall and Stormont, Dundas and Glengarry for a period of five years.

2. A specific public servant should be designated by the Government of Ontario to act as a liaison between those accountable for decisions on initiatives to be funded and the Government of Ontario to ensure adherence to reasonable expectations for financial management and accountability for public funds and the establishment of governance mechanisms.

3. Those responsible for making decisions on initiatives to be funded, and for purposes of accountability and reporting to the Government of Ontario and to the people of Cornwall and Stormont, Dundas and Glengarry, should be representatives of the following organizations,
working together: The Survivor Leadership Team; PrévAction; Citizens for Community Renewal; St. Lawrence College, Cornwall campus.

4. The scope of initiatives that can be approved from the $5 million should be those that can be completed by the end of a five-year period and directed to events, activities, or organizations in the Cornwall and Stormont, Dundas and Glengarry area for:
   a. support of adult survivors of sexual abuse that occurred when that adult was a child or young person;
   b. prevention of the sexual abuse of children or young people, including the building of resilience and a sense of inclusion for children and young people;
   c. provision of support and assistance to children, young people, and their families when abuse does occur;
   d. continued education for professionals or employees of local institutions so they may better support or respond to adult survivors or better understand and respond to the impact of sexual abuse of children and young people, providing such education is inclusive and not for only one institution or organization;
   e. public awareness of the impact of sexual abuse and education for students and staff at local schools; and
   f. any space or place of recognition or event of recognition related to sexual abuse of children and young people, current and historical.

5. Expenditures that can be authorized should be able to include costs for provision of French-language materials for any initiative approved.

6. Approvals for capital projects should be limited to $200,000 to any one organization over a five-year period, and the capital must be expended by the end of the five-year period established to support community healing and reconciliation.

7. Among the expenditures that the group may approve are up to five annual Reconciliation Scholarships for adults with a history of sexual abuse experienced in the Cornwall or Stormont, Dundas and Glengarry area who wish to obtain the equivalent of a high school education or to upgrade their education by attending St. Lawrence College, Cornwall campus.

8. In addition to considering and approving specific initiatives in Cornwall and area, the group should retain a facilitator or community-development resource of their choice to assist in relationship building and should have discretion to retain appropriate administrative or management assistance to support their work from the money allocated by the Government of Ontario. The costs of any retentions and overhead
should not exceed 10 percent of the monies set aside for the work of community healing and reconciliation over a five-year period.

9. The group responsible for decisions should provide an annual report in both French and English to the people of Cornwall and Stormont, Dundas and Glengarry to detail the services, programs, and capital expenditures that are proceeding and being planned, and the basis of decisions for expenditures.