

# Agenda

## Sixties Scoop

- Important dates
- Interim payments
- Letters from Collectiva
- Contacts

## Federal Indian Day Schools

- The claim form
- Drafting the narrative
- Witness statements
- Trauma-informed interviewing
- Update on the claims process



SIXTIES  
SCOOP

Summary of  
Claims as of  
June 25,  
2020:

Total filed -  
34, 767


Total  
processed –  
12, 551

Dates:

- Final deadline to apply was **August 30, 2019**.
- Late claims were being accepted up until **December 2, 2019**.

Letters claimants may receive:

- Notice of Intent to Reject (prior to an Official Rejection)
- Request for Additional Documents (Supplementary Claim Form)
- Notice of Eligible Class Member



Contact Collectiva:  
1-844-287-4270  
sixtiesscoop@collectiva.ca

Contact Class Counsel:  
Klein Lawyers  
604-874-7171

Interim Payments:

- The total compensation that will be issued depends on the number of claimants found eligible.
- Interim payments of \$21, 000 are being made to eligible claimants as the total is being determined.


FEDERAL INDIAN DAY SCHOOLS

The claim  
s deadline is **July 13, 2022**  
(However, a 6-month extension is  
available upon request due to COVID-19)

In 2009, Garry McLean launched a class action lawsuit against Canada to seek compensation for the harms suffered by Indigenous students forced to attend Federal Indian Day Schools and Federal Day Schools across Canada.

On August 19, 2019, the Federal Court approved a nation-wide Class Action Settlement to compensate Claimants for harms suffered while attending federally established, operated, maintained, and controlled Day Schools.

To be **eligible for compensation**, an individual must have attended one of the identified Federal Indian Day Schools or Federal Day Schools listed on the List of Federal Day Schools and experienced harm.



2

## Who’s who?

**The Claims Administrator - Deloitte**  
The Claims Administrator assesses each claim to approve the level of compensation in accordance with the Harms Assessment Grid.

Deloitte Claims Administrator Call Centre  
**1-888-221-2898**

**The Third Party Assessor**  
If a claimant disagrees with the Claims Administrator’s assessment of a lower level of compensation they have the option of having their claim reviewed by a Third-Party Assessor. The decision of the Third-Party Assessor is final. In unique and specific situations, the Third-Party Assessor may refer a Claim to the Exceptions Committee for consideration.

**Class Counsel – Gowling WLG**  
1-844-539-3815  
dayschools@gowlingwlg.com

**The Exceptions Committee**  
The Third Party Assessor will refer an Application to the Exceptions Committee where the harms described in the Application are not contemplated in the Harms Grid, and where the Third Party Assessor is of the opinion that the circumstances described by the claimant are exceptional and should be considered for compensation. The decision of the Exceptions Committee on such a Claim will be final and not subject to review.

## THE CLAIM FORM

## Basic Information (required for all claims)

Always include a  
photocopy of the  
claimant's identification  
(BCID, driver's license,  
or status card all  
acceptable)

Part 1: Information of Former Day School Student (Claimant)			
<b>Claimant Name and Last Name (required)</b>			
First Name:		Sally	
Middle Name: (if applicable)			
Last Name:		Smith	
Other name(s) (if applicable) Examples: Name while attending the school, maiden name, adopted name, nickname, or E-Disc/W-Disc name/number (Inuit)			
<b>Claimant's Date of Birth (required)</b>		<b>If Claimant has died, Date of Death</b>	
DD    1   MM    1   YY    60		DD    MM    YY	
Indian Status Card number or Beneficiary number		Social Insurance Number	
1234567890		1   2   3   4   5   6   7   8   9	
<b>Claimant Contact Details (required)</b>			
Street Name and Number 12345 Walnut Street			Unit Number (if applicable)
City/Town/Community Vancouver			
Province/Territory BC		Postal Code V1V 1V1	Country Canada
Home Telephone Number 123-456-7890		Mobile Telephone Number	
Email Address (if available)			
<b>Claimant's current Home Community or Communities (if applicable)</b>			
Examples: Name of First Nation, Town, Hamlet, or Settlement			
Alexis Nakota Sioux Nation			

**Part 2: Where and When did you attend the School(s)?**

To be eligible for compensation, you must have attended an eligible Day School during the period when it was funded, managed and controlled by Canada (Class Period).

Day Schools covered by the Day School Settlement, along with their opening and closing dates, are listed at [www.indiandayschools.com](http://www.indiandayschools.com) (Schedule K of the Settlement). **Identify the Day School you attended and years attended.** If you attended more than one (1) school, please list each separately below.

<b>Name of Day School #1 (required)</b>	Alexis Indian Day School
<b>Reserve, Location or Community</b>	Alexis 113 Reserve
<b>Province or Territory</b>	Alberta
<b>First Year of Attendance</b>	Year attended (yyyy) <u>or</u> Age when attended <div> <div>19</div> <div>66</div> <div>6</div> </div>
<b>Last Year of Attendance</b>	Year attended (yyyy) <u>or</u> Age when attended <div> <div>19</div> <div>72</div> <div>12</div> </div>
<p><b>Add additional details below <u>only</u> if you attended <u>more than one</u> Day School (if applicable)</b></p>	
<b>Name of Day School #2</b>	
<b>Reserve, Location or Community</b>	
<b>Province or Territory</b>	
<b>First Year of Attendance</b>	Year attended (yyyy) <u>or</u> Age when attended <div> <div>19</div> <div></div> <div></div> </div>
<b>Last Year of Attendance</b>	Year attended (yyyy) <u>or</u> Age when attended <div> <div>19</div> <div></div> <div></div> </div>

**2. (BCID, driver's license, or status card may be acceptable)**

**Claims Administrator (Administrator) and/or Claims Assessor (Assessor)** shall be the Administrator and/or Assessor for the following:

- represent the Day Schools or Catholic Schools;
- act as an agent or agent-in-charge for any party, and
- be authorized to have access legal rights and/or to be sued by any party.

**Privacy:** I understand that it may be necessary:

- for the Administrator to disclose information provided in this Claim for verification to: Canada, the Index, the Insurance, the Education Committee (if applicable), and the Claims Court; and
- for Canada to disclose information in its possession to the Administrator, the Claims Court, and Independent Assessors (if applicable), and the Claims Court.

**Information: Claim Form:** I confirm that all original information provided in this Claim Form is true to the best of my knowledge. Where someone is not completing this Claim Form, that person has read to me everything they wrote and included with this Claim Form.

**Class Counsel and legal advice:** I understand that free legal advice is available from Gowing WLG by contacting [dgc@wlg.com](mailto:dgc@wlg.com) or 1-844-539-3535.

**Consent:** I understand that by signing this Claim Form and submitting it to the Claims Administrator, I am consenting to the above, and to the disclosure of my personal information to be used and disclosed with the Settlement.

**Other/Prior Settlement (required):**

Please check YES or NO to this question: have you <u>already</u> received money from Canada for the same abuse/neglect at a Federal (Inday Day School(s)) or Federal Day School(s) as described in this Claim? <u>Do not check include Indian Residential Schools payments.</u> (If you are unsure, contact Claims Court).	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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**Signature of Claimant (required)** Date

*Sally Smith*

DD: 17 MM 11 YY 20

DD: 17 MM 11 YY 20

**The Witness must only see the Claimant sign this page. They are not required to read the Claim Form or to verify the accuracy of the events.**

**Signature of Witness (required)** Date

*Cathy Gaeke*

DD: 17 MM 11 YY 20

DD: 17 MM 11 YY 20

Witness Full Name - First Last  
Cathy Goerke

Witness Address: Street Name and Number. Unit Number  
101 E Cordova Street  
City/Town/Community  
Vancouver

Province/Territory Postal Code Country  
BC V6A 1K7 Canada

Witness Telephone Number  
778 837 0646

Witness Email Address (if available)

## Compensation Levels (Level 1 vs. Levels 2-5)

## CLAIM FORM

The Settlement provides for compensation to former Day School students who **both**:

- a) **attended** Federal Indian Day School(s) and Federal Day School(s) funded, managed and controlled by Canada **AND**
- b) **suffered abuse or harm** from teaching staff, officials, students and other third parties at the school.

To be eligible for compensation, students must not have already received a settlement from Canada for the same or related incident(s) at a Federal Indian Day School or Federal Day School as identified in this Claim Form.

Former Day School students are collectively identified as Survivor Class Members.

If you believe you are a Member of the Class, please complete this Claim Form to the best of your ability.

<b>Part 1</b>	Your name, contact details and date of birth	page 3
<b>Part 2</b>	Day School(s) and the years you attended	page 4
<b>Part 3</b>	<b>Consent and Signature Page</b>	<b>page 5</b>
<b>Part 4</b>	<b>If claiming Level 1 Verbal / Physical Harm</b>	<b>page 6</b>
<b>Part 5</b>	<b>If claiming Level 2, 3, 4, 5 Sexual / Physical Harm</b>	<b>pages 7-11</b>
<b>Part 6</b>	<b>Complete <u>boxes</u> you are missing regularly/occasionally</b>	<b>page 12</b>
<b>Part 7</b>	<b>Complete <u>only</u> if you are a legal representative of a Claimant</b>	<b>page 13</b>

Before sending, please review the Retention Policy and Submission Process on pages 14 and 15

***Please make sure to keep a copy of your Claim Form and any attached documents for your personal records.***

***\* Do not send original documents, identification or records – clear photocopies will be accepted.***

## Part 4: Claim for Level 1 Harm – Verbal/Physical Abuse

If the abuse/harm described in Level 1 (\$10,000) represents the most serious abuse/harm(s) that you experienced while attending the Day School, please complete this section by placing a mark in the **box** below.

Abuse/harm may have been from teachers, officials, students, and/or other third parties.

If the abuse/harm in Level 1 does not represent the most serious harm(s)/abuse you experienced, please skip this section and complete a higher Claim Level (Levels 2 to 5) in Part 5, as appropriate.

### LEVEL 1 – Description of Verbal / Physical Abuse or Harm

#### Verbal Abuse or Harm, including:

- Mocking, or denigration (e.g. belittling or abusive language), or humiliation (e.g. shaming) by reason of Indigenous identity or culture; or
- Threats of violence or intimidating statements; or
- Sexual comments or provocations.


OR

#### Physical Abuse or Harm, including:

- Unreasonable or disproportionate acts of discipline or punishment.

### LEVEL 1 – Selection

If the description of abuse/harm above represents the most serious abuse/harm(s) that you experienced, please select Level 1 by placing a mark in this box.



### NEXT STEPS

If you selected Level 1 above, no further description is required.

Please submit your claim form along with a photocopy of government issued piece of identification (e.g. Indian Status Card, Driver's License, Social Insurance Card, etc.).

**PLEASE PROCEED TO PARTS 6 & 7, If applicable, on pages 12-13, and review pages 14 and 15**

Part 5: Claims Process for Levels 2, 3, 4, or 5				
STEP 1: Identify the ABUSE or HARM you suffered from teachers, officials, students, and/or other third parties.				
Abuse / Harm	LEVEL 2	LEVEL 3	LEVEL 4	LEVEL 5
	At least one sexual incident of any one of:			Repeated sexual incidents of any one of:
Sexual Abuse/Harm	<ul style="list-style-type: none"> <li>• touching of genitals or private parts;</li> <li>• adult(s) exposing themselves;</li> <li>• fondling/kissing;</li> <li>• nude photos taken</li> </ul>	<ul style="list-style-type: none"> <li>• masturbation;</li> <li>• oral intercourse;</li> <li>• attempted penetration</li> </ul>	<ul style="list-style-type: none"> <li>• penetration;</li> <li>• penetration with an object</li> </ul>	<ul style="list-style-type: none"> <li>• masturbation;</li> <li>• oral intercourse;</li> <li>• penetration;</li> <li>• penetration with an object</li> </ul>
	OR			
Physical Abuse	At least one incident of physical abuse / assault, causing:	At least one incident of physical abuse / assault, causing:	Repeated (at least two) incidents of physical abuse / assault, causing:	During an incident of any one sexual abuse / assault described above at least one incident of physical abuse / assault, causing:
	CAUSING:			
Harm	<u>serious but temporary</u> harm: <ul style="list-style-type: none"> <li>• injury requiring bed rest or infirmity stay (e.g., in school room or hospital); or</li> <li>• loss of consciousness; or</li> <li>• broken bone(s)</li> </ul>	<u>permanent or long-term</u> harm: <ul style="list-style-type: none"> <li>• injury; or</li> <li>• impairment (e.g., physical or mental); or</li> <li>• disfigurement</li> </ul>		
STEP 2: Select your Claim Level, by placing a mark in one box below, for the Level of abuse / harm you suffered as identified above.				
Place a MARK in ONE box:	Level 2 \$50,000	Level 3 \$100,000	Level 4 \$150,000	Level 5 \$200,000



## Upper Level Claims

Part 5: Claims Process for Levels 2, 3, 4, or 5

STEP 3: Provide SUPPORT for the Level selected by completing sections as listed below.

SUPPORT	LEVEL 2	LEVEL 3	LEVEL 4	LEVEL 5
Your Identification	Required* Provide a photocopy of government issued piece of identification (e.g. Indian Status Card, Driver's license, Social Insurance Card, etc.)			
Your Written Narrative of events	Must complete 5A			
List of position/ person(s) who inflicted or caused the abuse/harm	Only if available Complete 5B		Must complete 5B	
Evidence of School attendance	Required* Complete 5C and attach documents			
Family / Friend narratives or other records	Only if available Complete 5D and attach documents		Required* Complete 5D and attach documents	
Medical, Dental, Nursing or Therapy Records	Only if available Complete 5E and attach documents		Required* Complete 5E and attach documents	

\* If you do not have the documents marked above as Required\*, you must complete a Sworn Declaration; see Part 6

Part 5: Claim for Levels 2, 3, 4, 5 only

Part 5A – Your Written Narrative (required)

Please provide in writing, a description of the specific event(s) that led to the abuse/harm that you experienced when attending the Day School, related to your Level 2, 3, 4 or 5 claim above. If you require additional space, please attach pages to your Claim Form and reference this section.

Please include the following:

- Description of events including names, places and dates (to the best of your ability)
- If applicable: describe medical attention required / sought / received at the time and/or currently as directly related to the abuse/harm suffered at the Day School

Part 6: Sworn Declaration

Sworn Declaration if any missing required document(s) (if applicable)

You must complete the following Sworn Declaration only if you are missing one or more of the required documents:

- for Level 2, 3, 4 or 5 documents (see page 8), and/or
- a photocopy of government issued piece of identification

A Sworn Declaration is a statement signed by the claimant and any one of the following Guarantors, with Titles:

☐ Notary Public or Commissioner of Oaths including Northern Villages' Secretary Treasurer

☐ Elected Official or Community leader (e.g. Chief, Councilor, Inuit Community Leader)

☐ Other Professional (e.g. Lawyer, Doctor/Physician, Accountant (CPA), Police Officer)

Sworn Declaration by Claimant:

I declare that the information I have provided is true to the best of my knowledge

Claimant Full Name - First, Last

Signature of Claimant

Date

DD MM YY

Above declaration must be witnessed by a Guarantor.

The Guarantor only needs to sign the Claimant sign this page. As Guarantor, you are not required to read the Form or verify the accuracy of the events described in this Form. Guarantor must complete all fields below.

Guarantor Full Name - First, Last

Guarantor Title

Position

Organization

Guarantor Address: Street Name and Number; Unit Number (if applicable)

City/Town/Community

Province/Territory

Postal Code

Country

Telephone Number

Email Address (if available)

Signature of Guarantor

Date

DD MM YY

## Representative Claims

Part 7: Are you applying as a Representative of a Claimant?

If applicable, a Personal Representative must be either:

Appointed by a Court to manage or make reasonable judgments or decisions in respect of the affairs of the person under disability	OR	The Estate Executor or Administrator, appointed by a Court or the Crown-Indigenous Relations and Northern Affairs Canada (INAC/CIRNAC), on behalf of a Claimant who is deceased on or after July 31, 2007
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To become appointed as a Personal Representative for a deceased Claimant that lived on reserve, please contact INAC/CIRNAC at: 1-800-567-9604. All other appointments are managed by the local Province or Territory.

If you are applying as a Representative, on behalf of a Claimant, check this box: Yes ☐

If you selected Yes, Representative to provide details below

Representative Full Name - First, Last

Representative Address: Street Name and Number; Unit Number

City/Town/Community

Province/Territory

Postal Code

Country

Telephone Number

Email Address (if available)

Relationship to the Claimant:

Documentation Required

Powers of Attorney	Executors / Administrators
<ul style="list-style-type: none"><li>Court Order; or</li><li>Documentation that shows you have Power of Attorney over the Claimant's finances.</li></ul>	<ul style="list-style-type: none"><li>Death Certificate and a Will;</li><li>Revenue Quebec Estate Form; or</li><li>Order or Grant of Administration from a Court; or</li><li>Letters of Administration from INAC/CIRNAC</li></ul>

List the attached documentation you have included:

Representatives of a deceased claimant's estate may make a claim on that person's behalf.

The deceased must have died on or after July 31, 2007.

Retention of Claim Form and Documents

You can choose to have your Claim Form and supporting documents attached to the form:

Please check one:

A) Securely Destroyed; Or

B) Returned to you; Or

C) Delivered to the Legacy Fund\*

Destroy ☐

Return ☐

Legacy\* ☐

\* Under the Settlement Agreement, the McLean Day Schools Settlement Corporation will be established to promote Legacy Projects for commemoration, wellness/healing, and the restoration and preservation of Indigenous languages and culture. The Corporation will be managed by Directors (to be appointed by the Parties to the Agreement), with input from an Advisory Committee (representative of Indigenous survivors and their families). For more information, refer to the Agreement and visit [www.indiandayschools.com].

## The Legacy Fund

The settlement includes a \$200 million Legacy Fund to support commemoration projects, health and wellness programs, "truth-telling" events, and the restoration and preservation of Indigenous languages and culture.

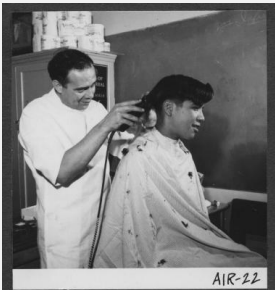
# What does a finished package look like?

Level 2-5

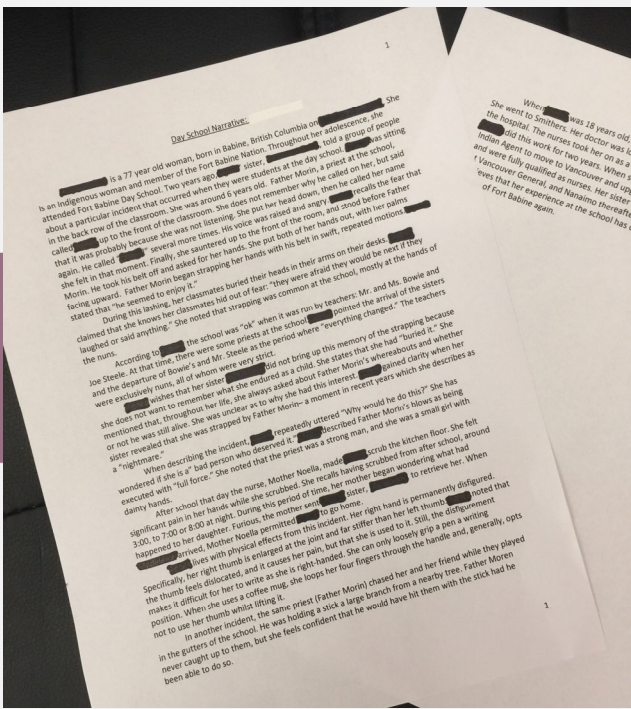
Narrative to attach

Doctor’s notes/Medical records

Pictures from school days/Attendance records



## NARRATIVE



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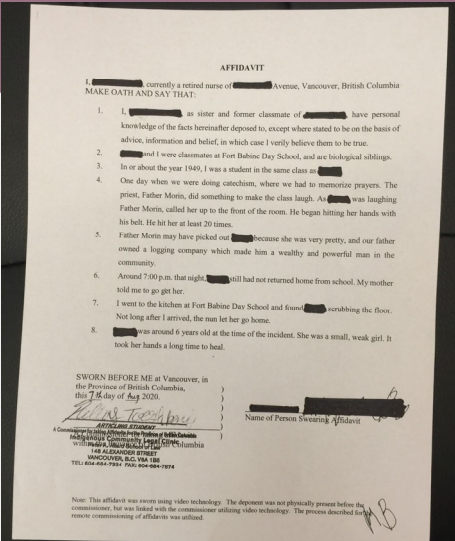
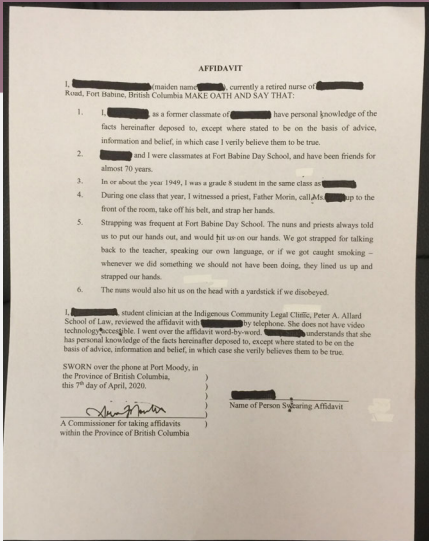
When copying ID we try to do it in colour and to have both sides on one sheet.

Makes it easier to read



WITNESS  
STATEMENTS

Witness Statements are an important way to make the narrative more powerful. At the ICLC we chose to use the “Affidavit” as a way to include the Witness Statement, these can also be done remotely, by following the rules



SCHOOL RECORDS/PHOTOS

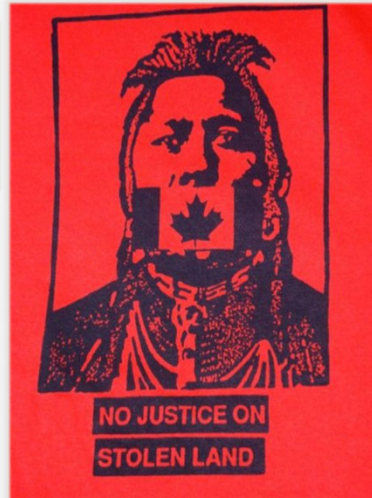


DRAFTING THE NARRATIVE



## Significance of the Narrative

**SPEAK TRUTH  
TO POWER**



- Drafting a narrative should not be bypassed, even when helping a level 1 claimant. Why?
  - You will need to hear as much of their experience as they are willing to divulge to ensure that they will be submitting an appropriate claim
  - On some occasions an individual may not even realize that their claim rises above a level 1 harm
  - There cannot be justice without truth

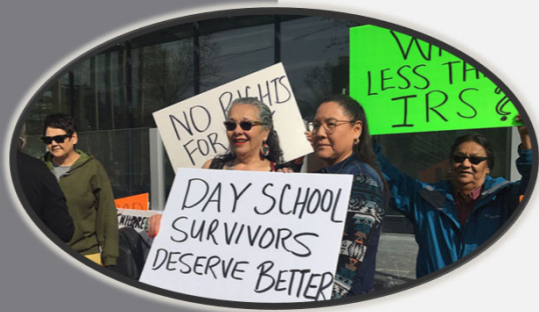
## Indigenizing a Colonial Process

- The narrative component of the Claim Form is an opportunity to engage in truth telling and truth gathering—both of which are vital to healing and reconciliation.
- Even if they are a level 1 claimant, the harms they have suffered have likely left a lifelong impact upon them, and in many cases, they have not relayed their experiences to their own families. Therefore, clients may wish to use the narrative to share their experiences with their families to facilitate the healing process.

From *The Outside Circle*, by Patti LaBoucane-Benson



PRESCRIBED  
PROCESS



- Re-victimization cannot be avoided in assisting survivors with the narrative process
- Bearing this in mind, navigating this portion of the claim form takes considerable skill, patience, and sensitivity
  - Prescribed process:
    1. Take the time to establish a rapport with the survivor
    2. Discuss the availability of therapeutic resources
    3. Advise your client that they have significant control over the process and can take breaks as needed
    4. Send drafts of your narrative to your client so you can clarify and make revisions throughout the process
    5. Advise your client to keep a pen and pad with them to write down their memories—this process will bring up suppressed memories
    6. Although the focus of the assessor is on harms incurred at Day School, expand your narrative to include a greater history of the survivor
    7. Humanize the survivor in your narrative
    8. End your meetings on a light note

WITNESS STATEMENTS

## The Challenge of the Witness Narrative

- This process did not anticipate the ethical challenges associated with obtaining witness narratives
- How to corroborate without ‘spilling the beans’?



## PRESCRIBED PROCESS

1. Consider the relationship between the client and the witness
  - Are they close?
  - Do they have a completely transparent relationship regarding their life experiences?
  - Has the client divulged all personal information to the witness?
2. Do you have your client's permission to discuss deeply personal details?
  - If yes, you are in luck!
  - If no, how does one proceed?

## Prescribed Process Cont'd

3. Ask strategic questions

- Rather than: "Did you see Mr. Nelson sexually assault David?"
- Ask: "Do you remember Mr. Nelson?"; "Did any teachers sexually assault any children at the school?"; "Do you recall if something like this ever happened to David?"

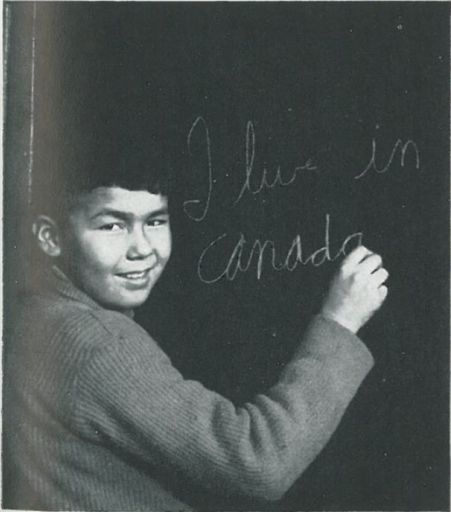
4. Drafting the witness narrative

- Intersperse the witness narrative and the client's narrative into one document
  - This will be easier to draft, and will be more streamlined for the administrator to digest

5. Produce a redacted witness narrative

- Remove all portions of the client's narrative and submit the document to the witness for their review

214. An Indian boy goes to school. There are eight Indian day schools in northern Canada.



**Chester:**

With respect to the sexual abuse Chester sustained while he was at Day School, Chester recalls how Dr. Jack Gifford made unwanted advances towards him when he was age 12-15. As stated by Chester:

"He told all the other kids to leave the class, and then started hugging me, and trying to put his hands on me. He put his hands on my knee, and on my body. I could smell alcohol on his breath, and I sensed it wasn't good and I told him that I had to go. He knew that I wasn't going to put up with it. But I can remember him getting other kids. Sometimes he would get them to go to his house."



That said, although Chester was able to avoid Dr. Jack Gifford's sexual advances for the most part, Chester has stated that many other students, including his brother, Nigel, were not so lucky, and he recalls Nigel spending time at Dr. Gifford's residence and notes that "there are many witnesses who know about it [Dr. Gifford's sexual abuse]." "I knew my brother spent time with him, where he lived," says Chester, "But, I never told my mother and my dad anything about that. I kept it to myself." To this day, this is one of Chester's biggest regrets.

**Frasier:**

Frasier substantiates Chester's allegations against Dr. Jack Gifford, and notes that it is well-known in their community that Dr. Gifford preyed upon children at the Day School. That said, Frasier recalls one occasion in which Nigel detailed the abuse he suffered at the hands of Dr. Gifford, and other staff at the Day School. Frasier recounts Nigel's story as follows:

"He [Dr. Jack Gifford] caused a great amount of damage to the community; not just to the sexuality of young men, but to their psyche. We played basketball together [Frasier and Nigel], and I knew he was a homosexual, and one day he told me how it started with him—the genesis of it all, before he could think critically and make decisions of his own. He told me, 'I stood there while the people abused me. They [Day School staff onlookers] laughed at me and the blood running down my legs.' He did not tell me how old he was when it happened."

With respect to the relationships between Chester and Nigel, Frasier recalls that Nigel's homosexuality was a source of contention between Nigel and his siblings. In fact, . . .





# Prescribed Process Cont'd

6. Request that the witness narrative be destroyed rather than returned to the client or submitted to the legacy fund

- Do not worry about this step if your client and the witness have a completely transparent relationship with respect to their life experiences
- NB: Since this conundrum has not been anticipated within this settlement, you will have to draft and submit this request along with the rest of the claim form



## TRAUMA-INFORMED INTERVIEWING

## General tips for trauma-informed interviewing

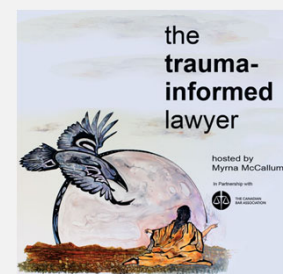


1. Listen
2. Be patient and comfortable with silences
3. Ask open ended questions
4. Always let the interviewee sit in the driver's seat
5. Trust is earned – build rapport!
6. Set aside as much time and flexibility as possible
7. See the whole person, not discrete legal issues
8. Be mindful of body language
9. Be self-aware
10. Talk about self care and support (and make referrals when appropriate)
11. Always be transparent about the process
12. Vicarious trauma is real – take care of yourself when you need to

## Day Schools Interviews

- Understand the historic context of Indian Day Schools:  
<https://vimeo.com/434944936>
- Learn about intergenerational trauma:  
<http://nctr.ca/reports.php>
- Be aware of your own positionality
- Even though the class action doesn't ask for this information, take time to talk about **healing and resistance**. Mainstream narratives often frame Indigenous people as victims – counter this by focusing on strength and survival.
- For some claimants, deciding to do a Level 1 claim in order to avoid having to provide a narrative may truly be the best decision for their mental and emotional health. Create a safe space for someone to share their story, but respect and honour their decision not to if they determine that is the right path for them.

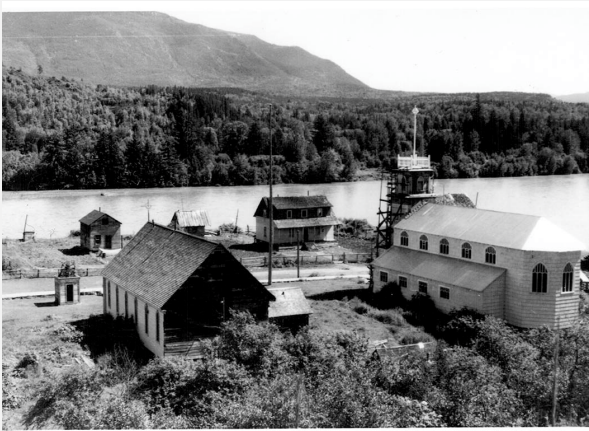
Check out Métis-Cree lawyer, Myna McCallum's podcast, [The Trauma-Informed Lawyer](#)



# MISSING INFORMATION

If you have already submitted a claim you may receive a letter asking for more information.

- Read the letter.
- Review what is asked for.
- Complete the "Missing Information" Form, sign and send it to the Claims Administrator.



# TIME ESTIMATES

## Level 1


- Can take up to six months
- You will receive a payment letter to confirm a claim has been approved.

## Level 2 - 5


- Can take up to 12 months for the review process to be complete
- These claims are also sent to the Government of Canada

ADDITIONAL NOTICES

- Additional information – which accompanies the Missing Information Form



- A Letter advising that your Level 2-5 Claim is being sent to the Government of Canada





- You claimed Level 1, but the Administrator feels that you qualify for a higher level, or you have been reclassified at a higher level



- Your Claim is being sent to the exceptions committee to determine eligibility based on attendance at a Non-Schedule K school and/or year attended.

ADDITIONAL NOTICES



# Resources:

- [Consolidated Settlement Agreement:](#)
  - Schedule A – the Agreement in Principle
  - Schedule B – the compensation grid and the claims process
  - Schedule C – Amended Statement of Claim, relief claimed, survivor class, family class
  - Schedule K – list of approved schools
- [Federal Indian Day School Class Action website](#)
- Gloria and Jaden’s Courthouse Libraries [webinar](#)
- Gowling WLG (Class Counsel):
  - 1-844-539-3815
  - [dayschools@gowlingwlg.com](mailto:dayschools@gowlingwlg.com)
- Claims Administrator Call Centre
  - 1-888-221-2898



## ANY QUESTIONS?

**Gloria Cardinal**  
604.822.8771  
[cardinal@allard.ubc.ca](mailto:cardinal@allard.ubc.ca)

**Jaden Bourque**  
604.822.8771  
[bourque@allard.ubc.ca](mailto:bourque@allard.ubc.ca)

**Caity Goerke**  
778.837.0846  
[caity@goerkelaw.com](mailto:caity@goerkelaw.com)

# FEDERAL INDIAN DAY SCHOOLS CLASS ACTION

Survivors of Federal Indian Day Schools are now eligible to apply for compensation through the Federal Indian Day Schools Class Action.

**Survivors have until **July 13<sup>th</sup>, 2022** to complete their claim forms.**

If you believe you may be eligible for the class action, have any questions, or would like to speak to someone further about supports and services available to you, reach out to the Legal Advocacy Program at Atira Women's Resource Society.

Atira Women's Resource Society  
101 East Cordova St, Vancouver

E: [volunteer\\_advocate@atira.bc.ca](mailto:volunteer_advocate@atira.bc.ca)  
T: 604 331 1407 ext 114

## Mental Health/Counselling Resources

*All of the following services are free.*

<b>Hope for Wellness Helpline</b>	t: 1.855.242.3310
<p>Experienced and culturally competent counsellors offer immediate mental health support and crisis intervention to all Indigenous peoples across Canada.</p> <p>Available 24/7 in English and French – on request, phone counselling is available in Cree, Ojibway, and Inuktitut.</p> <p>Online counselling is also available at <a href="http://www.hopeforwellness.ca">www.hopeforwellness.ca</a></p>	
<b>KUU-US Crisis Line Society</b>	t: 1.800.588.8717
	e: <a href="mailto:kuu-usexecutivedirector@shaw.ca">kuu-usexecutivedirector@shaw.ca</a>
<p>Crisis line service for Indigenous adults, youth, and elders in BC.</p> <p>Available 24/7.</p> <p>For more information: <a href="http://www.kuu-uscrisisline.ca">www.kuu-uscrisisline.ca</a></p>	
<b>Kilala Lelum: Urban Indigenous Health &amp; Healing Cooperative</b>	t: 604.620.4010
<p>Indigenous Elders work with physicians and allied health professionals to provide physical, mental, emotional, and spiritual care to residents of Vancouver's Downtown Eastside.</p> <p>Located at 626 Powell St, Vancouver.</p> <p>2 to 3 month waitlist for services.</p> <p>For more information: <a href="http://www.kilalalelum.ca">www.kilalalelum.ca</a></p>	
<b>Vancouver Aboriginal Health Society</b>	t: 604.254.9949
	e: <a href="mailto:admin@vahs.life">admin@vahs.life</a>
<p>The All My Relations Elders Program - Mmmoooooooooke Na Sii Yea Yea (MNSYY) - aims to improve patients' wellness, resilience, and sense of positive identity through connection to Indigenous culture, spirituality, and Elders with the goal of addressing intergenerational effects of residential schools and colonialism.</p> <p>Services include one-to-one counselling sessions with Indigenous Elders, cultural teaching circles, access to health care providers, access to Indigenous ceremonies, therapeutic listening, advocacy and referrals.</p>	

Located at 449 East Hastings St, Vancouver.

For more information: [www.vahs.life](http://www.vahs.life)

**Lu'ma Medical Centre**

t: 604.558.8822

e: [Booking@LumaMedical.ca](mailto:Booking@LumaMedical.ca)

Patients of the Lu'ma Medical Centre can access traditional healing with Elders, cultural ceremonies, and one-to-one and family counselling.

Located in East Vancouver.

For more information: [www.lnhs.ca/luma-medical-centre](http://www.lnhs.ca/luma-medical-centre)

**Metro Vancouver  
Indigenous Services Society**

t: 604.255.2394

Culturally diverse support services for Indigenous people including support groups, individual/family counselling and community healing.

Open to Indigenous residents of Vancouver, North Vancouver and Richmond.

Located at #100 – 2732 East Hastings St, Vancouver.

For more information: [www.mviss.ca](http://www.mviss.ca)

**Aboriginal Wellness Program**

t: 604.675.2551

One-to-one counselling, support groups, and cultural support for Indigenous people living in Vancouver and the Lower Mainland.

6 to 8 month waitlist for services.

Located at #288 – 2750 E Hastings St, Vancouver.

For more information: [www.vch.ca](http://www.vch.ca)

**First Nations Health Authority**

t: 1.855.550.5454

One-to-one counselling available for those eligible for FNHA Health Benefits (First Nations people with a Status number, who have Medical Service Plan coverage and who are not otherwise covered by benefits provided by the federal government or a self-governing First Nation).

Indigenous Residential School Resolution Health Support Program and Missing and Murdered Indigenous Women and Girls Health Support Services available for First Nations and non-First Nations individuals.



Available throughout BC.

For more information: [www.fnha.ca](http://www.fnha.ca)

**YWCA Crabtree Corner:  
Elder in Residence**

t: 778.222.4209

The Elder in Residence at Crabtree Corner provides group and one-to-one support for families with an Indigenous approach, centring Indigenous perspectives and knowledge. Support, healing and wellness for those who are disconnected from family or who are working to reconnect with their Indigeneity.

Available to residents of Vancouver.

Located at 533 E Hastings St, Vancouver.

For more information: [www.ywcavan.org/programs/crabtree-corner](http://www.ywcavan.org/programs/crabtree-corner)

**Saa'ust Centre**

t: 604.684.1178

e: [saa-ust@vancouver.ca](mailto:saa-ust@vancouver.ca)

Support centre for families and survivors affected by the Nation Inquiry into Missing and Murdered Indigenous Women and Girls.

Services include cultural activities, prayer space, drop-in workshops and referrals to counselling.

Located at 44 E Cordova St, Vancouver.

For more information: [www.vancouver.ca/people-programs/saa-ust-centre](http://www.vancouver.ca/people-programs/saa-ust-centre)

**Indian Residential School  
Survivors Society**

t: 1.800.721.0066

e: [reception@irsss.ca](mailto:reception@irsss.ca)

Short-term crisis counselling, emotional support and spiritual healing for survivors of residential schools and their families.

Services available across BC.

For more information: [www.irsss.ca](http://www.irsss.ca)

**Residential Historical Abuse Program**

t: 604-875-4255

e: [rhap@vch.ca](mailto:rhap@vch.ca)

Funding for counselling for adults who were sexually abused while in foster care in BC.

Services available across BC.

t: 604.331.1407 ext. 107

<b>Atira Women's Resource Society</b>	e: <a href="mailto:stv@atira.bc.ca">stv@atira.bc.ca</a>
<p>One-to-one and group counselling to women and transwomen in the Downtown Eastside who have experienced current or past relationship abuse, sexual assault, or physical, emotional or sexual abuse at any age. Services are provided from a strengths-based, feminist, anti-oppressive, and harm reduction perspective.</p> <p>For more information: <a href="http://www.atira.bc.ca">www.atira.bc.ca</a></p>	
<b>Battered Women's Support Services</b>	t: 1.855.687.1868
	e: <a href="mailto:intake@bwss.org">intake@bwss.org</a>
<p>One-to-one and group counselling for women in the Lower Mainland who are currently experiencing violence and/or who are survivors of violence including childhood sexual abuse or adult sexual assault. BWSS also provides support to women survivors of Indian Residential Schools and/or foster care.</p> <p>BWSS offers culturally appropriate services run by Indigenous women for Indigenous women. The Indigenous Women's program offers drum groups, counselling and ceremonies.</p> <p>Crisis &amp; Intake Line available 24/7. Support workers provide emotional support, information and referrals, and help with coping and safety planning.</p> <p>For more information: <a href="http://www.bwss.org">www.bwss.org</a></p>	
<b>WAVAW Rape Crisis Centre</b>	t: 1.877.392.7583
	e: <a href="mailto:admin@wavaw.ca">admin@wavaw.ca</a>
<p>One-to-one and group counselling to survivors of sexualized violence who are of marginalized genders: cis and trans women, Two-Spirit, trans and/or non-binary people.</p> <p>WAVAW also provides phone, one-to-one, group and family counselling as well as traditional healing ceremonies for self-identified family members of Missing and Murdered Indigenous Women.</p> <p>Crisis &amp; Info Line available 24/7. Support workers provide immediate crisis assistance, emotional support, information and referrals.</p> <p>For more information: <a href="http://www.wavaw.ca">www.wavaw.ca</a></p>	
<b>Family Services of Greater Vancouver</b>	t: 604.874.2938 ext. 4141
	e: <a href="mailto:specializedtraumaservices@fsgv.ca">specializedtraumaservices@fsgv.ca</a>
<p>One-to-one counselling for women survivors of adult or childhood physical/sexual abuse, domestic violence, sexual assault, or incest.</p> <p>1.5-year waitlist.</p> <p>Located in Vancouver, Richmond, and New Westminster.</p>	

For more information: <a href="http://www.fsgv.ca">www.fsgv.ca</a>	
<b>VGH Access &amp; Assessment Centre</b>	t: <b>604.675.3700</b>
Mental health services available to all residents of the City of Vancouver age 17 and up.  Call or visit drop-in centre between 7:30 a.m. to 11:00 p.m., 7 days a week.  Located at Vancouver General Hospital.  For more information: <a href="http://www.vch.ca">www.vch.ca</a>	
<b>Crisis Line Association of BC</b>	t: <b>310.6789</b>
	e: <b>info@crisislines.bc.ca</b>
Emotional support, information and resources specific to mental health.  The Crisis Line Association of BC also provides the 1-800 SUICIDE line for anyone who is considering suicide or is concerned about someone who may be. Dial 1.800.784.2433.  For more information: <a href="http://www.crisislines.bc.ca">www.crisislines.bc.ca</a>	
<b>VictimLinkBC</b>	t: <b>1.800.563.0808</b>
	e: <b>VictimLinkBC@bc211.ca</b>
24/7 phone line providing information and referrals to all victims of crime and immediate crisis support to victims of family and sexual violence.  For more information: <a href="http://www.healthlinkbc.ca">www.healthlinkbc.ca</a>	

*Atira acknowledges that the above services take place on the unceded, ancestral and traditional territories of diverse Indigenous peoples across what is commonly referred to as the province of British Columbia.*