

**IN THE MATTER OF AN INQUIRY PURSUANT TO S.63(1)
OF THE *JUDGES ACT*
REGARDING THE HONOURABLE JUSTICE ROBIN CAMP**

AFFIDAVIT OF AMANDA DALE
In support of the Motion for Leave to Intervene

I, the undersigned, AMANDA DALE, of the City of Toronto, in the Province of Ontario,
MAKE OATH AND SAY:

1. I am the Executive Director of the Barbra Schlifer Commemorative Clinic (the “**Schlifer Clinic**” or the “**Clinic**”). As such, I have personal knowledge of the matters to which I depose in this affidavit. To the extent that any information contained herein is based on information and belief, I have stated the source of that information and I believe such information to be true.

A. My Background

2. I have over 30 years experience as a manager, program developer, communications expert, policy analyst and law reform advocate on behalf of women’s equality and women victims of violence. I am well acquainted with the criminal justice system's traditionally poor response to sexual violence against women and the resulting impact on women seeking redress through the law.
3. In May 2010, I assumed my current position as Executive Director of the Schlifer Clinic. Prior to this, my professional activities included extensive involvement in a number of law reform and legal education initiatives that addressed women’s legal rights, such as, an initiative that ended the use of religious laws in family dispute arbitration, for the purposes of ensuring women's access to protections under provincial family law; chairing the "Family Law Education for Women" public legal education campaign; and playing a leadership role in the City of Toronto audit following the "Jane Doe" sexual assault case, which provided a series of recommendations relating to the handling of

sexual assault cases by the Toronto Police Service. I have also worked as a consultant on projects relating to violence against women with the Office of the Chief Coroner for Ontario and the RCMP. For other highlights of my work in the field of violence against women (VAW), please see a copy of my curriculum vitae, attached as **Exhibit "A"**.

4. I hold an Honours B.A. in Political Science and Women's Studies from the University of Toronto, a Master's Degree in Social and Political Thought from the University of Sussex, and a Master's Degree in International Human Rights Law, with a specialization in Women's Human Rights, from the University of Oxford. In addition to my full-time position as Executive Director of the Clinic, I am a PhD student at Osgoode Hall Law School. My doctoral work is on the relationship between international standards for intersectional discrimination and the Canadian constitution.

B. The Clinic

i. Background

5. The Schlifer Clinic was established in 1985 to commemorate the life and work of Barbra Schlifer, an Osgoode Hall law student who was sexually assaulted and murdered on the night of her call to the Bar.
6. We are, first and foremost, a multi-disciplinary, front-line service provider to women who have experienced violence, including sexual violence. We provide legal representation, professional counselling, and language interpretation services to women from a broad cross-section of racial, ethno-cultural, and socio-economic backgrounds. As such, we have a deep and integrated understanding of the intersecting and multiple inequalities which exist in women's lives and the impact that sexual offences have on women. Our objective is to support women who have experienced violence by, among other things, offering avenues for redressing the harms they have suffered. Legal representation is one such avenue.
7. We also engage in various public advocacy initiatives, including public legal education, professional development of legal professionals, clinical education for law students, and

law reform. The breadth of services and activities engaged in by the Clinic is unique in Canada amongst social service organizations.

8. The Clinic has been funded by the United Way of Greater Toronto since 1986. It is also funded by four Ministries of the Province of Ontario, the City of Toronto, and various foundations, corporations, and individual donors.

ii. Mandate and Organizational structure

9. The Clinic's institutional objectives are best captured by its Mission Statement:

The Barbra Schlifer Clinic offers legal representation, professional counseling and multilingual interpretation to women who have experienced violence. Our diverse, skilled and compassionate staff accompany women through personal and practical transformation, helping them to build lives free from violence.

We are a centre by, for and about women. We amplify women's voices, and cultivate their skills and resilience. Together with our donors and volunteers, we are active in changing the conditions that threaten women's safety, dignity and equality.

10. The Clinic's Vision, Value and Belief Statements are attached as **Exhibit "B"**.
11. The Clinic is overseen by a volunteer Board of Directors consisting of 13 members, and employs 37 full time staff members. The legal department of the Clinic has a staff of ten full-time employees, made up of four lawyers, one intake counsellor, two administrative staff and three Family Court Support Workers who facilitate women survivors' greater participation in the family law system and who advocate on behalf of clients to other justice system professionals, including the Victim Witness Assistance Program, Crown Attorneys and the police. Our Director of Legal Services and Staff Lawyers have extensive experience providing services to women survivors of violence who are from highly marginalized communities. The regular duties of the lawyers at the Clinic include providing legal advice and representation to women who have been or are being sexually assaulted or abused.
12. In 2016, the Province of Ontario selected us as a pilot site for the introduction of a program for independent legal advice to sexual assault survivors. The Province also

contracted the Clinic to train the private bar lawyers whom the province is funding to provide this advice on a voucher system, in addition to the pilot site at the Clinic.

C. The Schlifer Clinic's Clients and Expertise in Service Delivery

13. In 2015-2016, the Clinic's legal department assisted 1,360 clients, the counselling department assisted 1,616 women and the Language Interpretation Service assisted 1,358 clients. Since 1985, the Clinic has provided services to over 60,000 women in the Greater Toronto area.
14. In 2015-2016, and in particular following the media attention to the *R. v. Ghomeshi* trials, the Clinic experienced a 30% increase in calls from sexual assault survivors seeking legal information and advice.
15. The Clinic serves women from diverse backgrounds and highly marginalized communities. Our clients experience multiple social inequalities, including poverty, homelessness, racism, and discrimination on the basis of mental health or disability. They frequently have a heightened involvement with immigration authorities, child welfare agencies, the police and other service providers, as a result of current or historical abuse.
16. The Schlifer Clinic provides legal representation and advocacy services in the areas of refugee protection and immigration, family, criminal and administrative law. These services are designed to assist women in seeking meaningful legal remedies and ensuring their access to justice in order to acquire legal protections and redress from violence.
17. The women who seek the Clinic's assistance rely on the Clinic to advise them about legal processes and how they can obtain redress for incidents of violence they have suffered, including sexual violence. Clients often ask our legal intake worker and lawyers about the consequences of contacting the police, including: what the likelihood of a charge or prosecution is in the circumstances; what is the likelihood of them being believed by the actors in the criminal justice process; what personal information about them will be made available to the accused; whether they will have to testify in a

criminal proceeding; how traumatizing the questioning by lawyers in the proceeding may be; whether and how the criminal law and procedure can protect them from invasive questions and discriminatory assumptions; and whether the criminal justice system can protect them from offenders in the future.

18. In addition to the legal services delivered, the Clinic provides a variety of group-based and individual counselling programs, employing diverse therapeutic and psycho-educational methodologies. The Clinic also offers language interpretation service, which provides language interpreters, in over 90 languages, to social service agencies and hospitals that deliver services to women survivors of violence, as well as the four Domestic Violence Courts serving Toronto.
19. The Clinic also offers specialized programs to specific groups of women. One recent example is Outburst!, a program for young Muslim women in Toronto who experience violence and are building their leadership to develop responses. The Clinic's service guided by young Muslim women themselves. The program includes **Individual Counseling**: safety planning, short term counselling, and transitional housing support for young Muslim women facing family violence, including forced marriage, family conflict, sexual assault, and stalking and harassment.

D. The Schlifer Clinic's Expertise in Advocacy

20. The Schlifer Clinic has significant expertise in public policy and law reform advocacy. The Clinic regularly works with governmental policy-makers and legislators, justice system professionals, and others, as well as the public, to raise awareness about violence against women, and to promote legal system reforms that address women's experiences of violence. Engaging in the development of public policy and law reform has historically been an essential part of our activities.
21. Our expertise in this area is extensive, and includes:

- (a) being a member of Attorney General Ian Scott's Access to Civil Justice Advisory Committee, 1987-88;

- (b) presenting to the Senate Committee on Sentencing Reform for Sexual Offences, 1989;
- (c) being a member of Attorney General Howard Hampton's Advisory Committee on Criminal Injuries Compensation, 1990-91;
- (d) consultation with the Minister of Justice, Kim Campbell, regarding the "rape shield" laws, 1992;
- (e) oral and written submissions to the House of Commons Standing Committee on Citizenship and Immigration on the *Immigration Refugee Protection Act*, 2001;
- (f) submissions to the Office of the Ombudsman of Ontario regarding Criminal Injuries Compensation, 2006;
- (g) consultation on Bill 130, Proposed Family Law Legislation Amendment (Restraining Orders), as part of the Ministry of the Attorney General's Family Law Consultation Group, 2010;
- (h) participation in a deputation to the Quebec General Assembly regarding Bill 94 (relating to Muslim women wearing the niqab), November 2010;
- (i) ongoing consultation with the Department of Foreign Affairs and International Trade (DFAIT) and Department of Justice to assist in the development of possible remedies to violence experienced by young Muslim women; and
- (j) ongoing involvement as a member of the steering committee of the Provincial VAW/and Child Welfare Collaborative Agreement for the Toronto Region.

(k) Member of the Ontario Premiere's Permanent Round Table on Violence Against Women, charged with consulting on the implantation of the Sexual Violence and Harassment Action Plan (SVHAP)

(l) Member of the Canadian Delegation to the United Nations 2016 Committee on the Status of Women meetings

22. In 1988 and 1991, following the enactment of the *Charter of Rights and Freedoms* ("Charter"), the Schlifer Clinic participated in two landmark constitutional cases concerning the *Charter* rights and interests of sexual assault survivors. The Schlifer Clinic was a member of a coalition of interested organizations that intervened at the Supreme Court in *Canadian Newspapers Co v. Canada (Attorney General)* and *R v. Seaboyer; R v. Gayme*.

23. Since that time, the Clinic has been granted standing as an intervener and has participated in numerous proceedings in the federal and Ontario courts and at the Supreme Court of Canada.

24. The Clinic, as the Applicant, initiated a *Charter* challenge to the recent amendments to the *Criminal Code* and *Firearms Act* (eradicating the long-gun registry). The Clinic argued that women's rights to security and gender equality under the *Charter* are violated by destroying the registry and that changes to gun-control law would increase the risk to women in situations of domestic violence. I was one of the affiants in support of the Clinic's challenge.

25. In 2014, the Clinic intervened at the Supreme Court of Canada in *R. v. Quesnelle* 2014 SCC 46 (oral argument granted), on the privacy rights and interests of sexual assault complainants, particularly those most heavily documented as a result of their marginalization and multiple experiences of inequality.

26. The Clinic was also granted standing, including leave to present oral argument, at the Supreme Court of Canada in cases involving sexual assault and/or violence against women, in *R. v. N.S.* 2012 SCC 72 and *Kanthasamay v. Minister of Citizenship and Immigration* 2015 SCC 61. In *Kanthasamay*, the Clinic's submissions focused on the disproportionate impact of the changes to the humanitarian and compassionate application under the *Immigration and Refugee Protection Act*, on vulnerable and marginalized individuals and communities, including survivors of gender-based violence.
27. On behalf of the Clinic, I swore an Affidavit in the Federal Court in support of the application in *Y.Z. and the Canadian Association of Refugee Lawyers v. Minister of Citizenship and Immigration* (Court File IMM-3700-13). In that Affidavit, I described my personal and the Clinic's expertise, experiences and concerns, with respect to the impact of the "Designated Countries of Origin" regime on women survivors of violence.
28. In February 2012, the Clinic made a submission to the United Nations Committee on the Elimination of Racial Discrimination on the citizenship oath policy at issue in this appeal and the discriminatory impact on Muslim women in February 2012, including increasing their vulnerability to violence. The Clinic argued that any Policy requiring an uncovered face in a citizenship ceremony as a precondition to citizenship must be justified in accordance with the *Oakes* or analogous criteria.
29. In addition to our work on legal and policy reforms, the Schlifer Clinic has a long record of grassroots education and collaborations on VAW issues. We have participated in numerous multi-sector committees, coalitions and consultation groups. The Schlifer Clinic also regularly engages in various service-delivery partnerships and consultations with a wide range of service-providers that represent diverse communities in Toronto.

As such, the Schlifer Clinic has gained knowledge and expertise of the systemic barriers faced by members of diverse communities.

E. The Schlifer Clinic's Expertise in the Underreporting of Sexual Crimes and the Risk of Further Victimization

30. Our regular and direct contact with women survivors of sexual violence has given us significant knowledge and a uniquely-informed perspective about how women survivors of sexual violence perceive and interact with the justice system.
31. In recent years, the Clinic has observed a heightened social attentiveness to the issue of sexual violence and "rape culture" in North American society. I was recently consulted as an expert on violence against women, following the heavily reported incidents of "rape chants" at Canadian universities in the fall of 2013. The high profile sexual assault, online bullying and suicide of Rehtaeh Parsons in Nova Scotia, and the aggressive intimidation of a sexual assault victim and indictment of several school officials who obstructed a police investigation in Steubenville, Ohio, are but two notable examples of the continued and pervasive use of victim blaming and stigmatizing rape mythologies, which discourage survivors from coming forward.
32. The Clinic has similarly been involved in recent months in collaborations and discussions at the grassroots level on the impact of the *R. v. Ghomeshi* case on survivors' trust in, and willingness to report to, the criminal justice system.
33. There is little doubt that women who have experienced sexual assault and abuse tend not to report such crimes to the police. Based on the Clinic's over 30 years of experience, our view is that there are a variety of factors that cause or contribute to the underreporting of sexual violence. These include:
 - (a) the highly invasive and personal nature of the alleged crime;
 - (b) social stigmas that are imposed on victims of sexual crime;

- (c) perceptions that the crime, even if reported, will not result in a conviction;
- (d) fear of further victimization through engagement with the criminal justice system;
- (e) concern that prior sexual violence, psychiatric history or other private information contained in records will be disclosed to the accused and potentially used to undermine their credibility; and
- (f) a fear of retribution.

34. In the Clinic's experience, the majority of sexual assault survivors are assaulted by people who know them including friends, professionals, partners or family members. These are the types of relationships where perpetrators may have continued access to the victim, unless contact is somehow terminated or interrupted. Where women are discouraged from seeking state protection or intervention, they are left in dangerous situations that leave them vulnerable to repeat victimization and their psychological and bodily integrity are compromised.

35. The Schlifer Clinic's mandate and the individual services it provides to its clients are designed, among other things, to address the need for legal protection for women vulnerable to violence, the systemic problem of underreporting of sexual violence against women, the ineffectiveness of systemic responses to survivors of sexual violence, and the social exclusion of already marginalized women.

F. Schlifer Clinic's Proposed Intervention

36. The Schlifer Clinic has a genuine interest in the matters at issue in this inquiry into the comments and reasons of Justice Camp in the case of *R. v. Wagar*.

37. More importantly, in our submission, evidence and/or legal argument on the impact of Justice Camp's comments in *R. v. Wagar* on women survivors of sexual violence will be of assistance to the Inquiry Panel. Further, in our submission such evidence and argument is proper, if not necessary, to fully determine the nature and extent of the

alleged misconduct or incapacity and, at a minimum, to determine whether Justice Camp should be removed from office or other action taken if a finding of misconduct is made.

38. As Canada's only legal organization providing exclusive service to women who are survivors of violence, including sexual violence, we are uniquely qualified to provide the Inquiry Committee with evidence and expert legal analysis on the lived experiences of diverse groups of sexual assault complainants and the detrimental and far-reaching impacts on survivors when judges, tasked with enforcing sexual assault law, undermine that law and engage in prejudicial myths and stereotypes and victim-blaming.

SWORN BEFORE ME at the City of
Toronto, on this 1st day of June, 2016



Commissioner of Taking Affidavits

TIFFANY LAU,
BARRISTER



AMANDA DALE

THIS IS EXHIBIT "A" IN THE AFFIDAVIT OF
AMANDA DALE
SWORN BEFORE ME
THIS 1ST DAY OF JUNE, 2016



Tiffany Lau, Barrister

CAREER HIGHLIGHTS

- International Human Rights expert, with specialization in women's human rights
- Recognized spokesperson and expert in women's rights and violence against women
- Inspiring leader of staff teams and multi-sector collaborations
- Multi-sector consensus-builder
- Advanced practitioner and trainer in cultural competency
- Results-oriented strategic planner, evaluator and organizational developer
- Innovative and experienced women's program developer, in international, multicultural, urban and remote contexts
- Leader in research and development of policy reform related to violence against women
- Skilled manager of successful complex projects, community and funder partnerships

ACADEMIC BACKGROUND

- Teaching Assistant, Ethical Lawyering in a Global Context JD class at Osgoode Hall Law School
- PhD student in International Human Rights Law/Women's Rights, Osgoode Hall Law School, expected completion 2017
- Guest lecturer, University of Toronto Faculty of Law, Women's International Human Rights and Violence Against Women [2013, 2014, 2015]
- Masters of International Human Rights Law, *with Distinction, First in Class*, University of Oxford, UK, 2009-2011. [Dissertation Title: "Does the Convention to End All Forms of Discrimination Against Women (CEDAW) require women to choose between gender protection and cultural belonging?"]
- Postgraduate certificate, *with Distinction*, Humber School of Writers, 2007
- Master of Arts, *with Distinction*, Social and Political Thought, University of Sussex, UK, 1991 [Dissertation title: "Hannah Arendt for Feminism? A Speculative Re-Reading"]
- Honours BA, *with High Distinction*, Joint Specialist, Political Science and Women's Studies, University of Toronto, 1988

AWARDS

- Helena Orton Memorial Scholarship, 2015
- Association of Transnational Law Schools (ATLAS), Agora selection recipient, for June 2015
- Fellow, Nathanson Centre on Transnational Human Rights, Crime and Security, 2014
- Judge Hallet Scholarship, Osgoode, 2014

- YWCA Woman of Distinction, Social Justice, 2013
- Morris Law Prize, University of Oxford, 2012
- YWCA Canada Award for Advocacy, 2004 – 2005
- Caring Hands Extended Award, for outstanding patient care, St. Joseph's Women's Health Centre, 1996
- Commonwealth Scholarship, United Kingdom, 1989 – 1991
- City of Toronto, Women's Studies Undergraduate Scholarship, for graduating student most likely to contribute to improving the status of women, 1987 – 1988

PUBLICATIONS/PRESENTATIONS–SELECTED

Peer-reviewed

"Intersectionality in Women's International Human Rights," *Canadian Journal of Women's Studies*, forthcoming, 2016.

Book Review, *Emily Grabham with Didi Herman, Davina Cooper and Jane Krishnadas [Eds], Intersectionality and Beyond: Law, power and the politics of location (Oxon: Routledge, Cavendish, 2009) (WYA)*, forthcoming, Fall 2015

"Seeking Justice Through Section 15: Reflections of the Applicant on Barbra Schlifer Commemorative Clinic v. Canada", *Journal of Law and Equality*, University of Toronto, forthcoming, Fall 2015/Winter 2016

"Seeking Justice Through Section 15: Reflections of the Applicant on Barbra Schlifer Commemorative Clinic v. Canada", accepted for presentation at: Sex, Drugs and Rock and Roll: Subversive Sites in the Law, Osgoode Hall Law School, May 2015

"Protecting Marginalized Groups under Section 7: A Case Study of the Barbra Schlifer Clinic's Challenge to the Repeal of the Long Gun Registry ", with Shaun O'Brien and Nadia Lambek (Cavalluzzo Shilton McIntyre & Cornish LLP) at The Asper Centre for Constitutional rights, conference: "Life, Liberty and Equality - Canadian-Style: The Interplay Between Sections 7 and 15 of the Charter", February 27, 2015

"A New Chapter in Feminist Organizing: The Sexual Assault Audit Steering Committee", with Beverly Bain and Jane Doe, *Canadian Journal of Women's Studies [Women Resisting Rape: Feminist Law, Practice, Activism]* (Fall 2009/Winter 2010) Volume 28, No 1, 6-15

Research reports, specialty publications and journalism

"Seeing no Evil", with Jane Doe, Opinion Editorial (Police Responses to Sexual Assault), *Toronto Star*, February 24, 2011

"Shelter from the Storm: barrier-free women's housing offers healing spaces, safe places", *Cross Currents: The Journal of Addiction and Mental Health*, Centre for Addiction and Mental Health (Winter 2010/11) Volume 12, No 2, 11

"Honouring Aboriginal Grandmothers to Promote Safety and Healing", *Cross Currents: The Journal of Addiction and Mental Health*, Centre for Addiction and Mental Health (Autumn 2010) Volume 14, No 1, 3

"Our Men Have Lost Their Place: Aboriginal men's shelter guides men on healing path", *Cross Currents: The Journal of Addiction and Mental Health*, Centre for Addiction and Mental Health (Summer 2010) Volume 13, No 4, 10-12

'No More Running in Circles': best practices and policy initiatives to address violence against women in Canada, Policy Discussion Paper, YWCA Canada, March 2008

'Bad Date' (an article exploring the Federal government's cuts to Status of Women Canada) With Ellen Russell, *This Magazine*, May/June 2007

Beyond Shelter Walls: system change, Best practices and policy initiatives to address violence against women in Canada. Literature Review, YWCA Canada, November 2007

"No Place like Home" (an article exploring successful organizing women's housing advocacy in Ontario) *Women & Environments*, Spring/Summer 2004

"New Perspectives on Shelter for Women", Fred Victor Centre, Toronto, 1996

'A National Test of Will' (political reporting from Sudan)
Maclean's Magazine, April 1986

EMPLOYMENT EXPERIENCE

Executive Director, Barbra Schlifer Commemorative Clinic

May 2010-current

Leader of multi-service legal clinic improving access to justice and freedom from violence for 4,500 women annually; 40 staff and a 3.7 million budget; 14-member Board of Directors.

Leadership Highlights

- Support revitalization and creative engagement with staff, board and community
- Increase organization's media coverage dramatically
- Increase funding by 70%
- Lead organization through complex strategic re-direction and Theory of Change process
- Lead staff and board to identify test cases and garner pro bono legal representation in women's rights cases
 - *R v. NS [sexual assault and the niqab]*;
 - *R v. Quenelle [sexual assault records case]*;
 - *Schlifer v. AG [Gun Registry]*;
 - *Jeyakannan Kanthasamy v. Minister of Citizenship and Immigration [immigration/permanent residency]*
- Canadian lead in partnership with Sudanese Organization for Research and Development (SORD) to establish women's representation through Shari'a personal law legal clinics in Khartoum, Sudan
- Leader in development of women's rights sector capacity building with government, funders, public policy-makers, legal clinics, media, women's organizations and other stakeholders
 - Member, Permanent Round Table on Violence Against Women;
 - Administrative Lead, Trauma-informed Women's Mental Health and Addiction Network;

- Member, Violence Against Women and Children's Welfare Protocol Steering Committee;
- Chair, Premier's Roundtable with the VAW Sector and Cabinet;
- Consultant, Select Committee on Sexual Violence and Harassment;
- Frequent media commentator on women's rights and violence against women

Consulting

October 2009 to May 2010

Communications leadership and member-engagement; Program design, evaluation, development and delivery; Staff leadership; Public legal education innovation; Research; Team leadership

Clients

- **YWCA Canada** (Northern [arctic] Extension Project and Northern Ontario Women's Services Enhancement Project)
- **Community Legal Education Ontario** (Review and Implementation of Public Legal Education)
- **YWCA Hamilton** (Strategic Communications and Member Engagement)
- **Costa Leclerc Design** (Media Relations)
- **Shelternet** (Acting Executive Director)

Director, Advocacy and Communications, YWCA Toronto

September 2001 – September 2009

Initiated, staffed and led YWCA Toronto department advancing strategic growth, community collaboration, communications, public policy and association-wide recognition for excellence in women's rights advocacy and policy development

Leadership highlights

- Leader in successful law reform to Ontario Arbitration Act and four other areas of Ontario law, protecting universal access to women's rights/protection from violence in family law
- Chair, Family Law Education for Women provincial public legal education campaign, reaching out to multicultural women at risk of GBV/DV
- Regular on-air contributor as women's issues expert, CIUT FM, University of Toronto Radio
- Consultant to City of Toronto (Jane Doe) Audit, recommendations and implementation of police response to sexual assault following *Jane Doe v. Metropolitan Police*

Seconded to YWCA Canada to lead

- International partnership on violence against women prevention, The Gender Centre, Sudan (2006)

- Partnership development, research and policy, writing *Beyond Shelter Walls: System Change, Best practices and policy initiatives to address violence against women in Canada* (2007)
- Abantu Centre for Development, Women in Governance/Freedom from Violence project, Ghana (2008/09)
- Qimaavik Women's Shelter, capacity-building in indigenous and isolated communities, Iqaluit, Nunavut (2008/09)

Manager, St. Joseph's Women's Health Centre, St. Joseph's Health Centre

January 1999 – July 2001

Leader, multi-stakeholder community health centre, specializing in violence against women service response, multi-cultural and poverty health, with 22 direct reports and annual budget of \$ 1M; maintaining relations with a wide range of hospital administration, funders and policy makers, regarding women's health and VAW services.

Leadership highlights

- Oversaw successful national research on parenting practices across cultures
- Developed program to train and support universal screening protocol for violence against women in all hospital intakes

Manager of Social Action and Education, YWCA Toronto

June 1997 – January 1999

Coordinated all aspects of social action/public policy for the YWCA across 22 programs with a total of 300 staff; led education and policy development

Project Co-ordinator, St. Joseph's Women's Health Centre, St. Joseph's Health Centre

July 1994 – January 1999

Developed collaborative framework for outreach; delivered direct service to marginalized women; community relations and program development; wrote hospital-wide protocol for cases of elder woman abuse

Project Co-ordinator, Sistering Drop In and St. Joseph's Women's Health Centre

August 1993 – July 1994

Piloted, delivered and promoted women's service model for multi-cultural homeless sexual abuse survivors

Group Facilitator and Volunteer Co-ordinator, Opportunity for Advancement

January 1992 – July 1993

Facilitation and program design for multi-stressed women

Collective Member, Nellie's Emergency Hostel For Women

1985 – 1990, relief; 1990 – 1992, collective member

Co-managed violence against women and homeless women's shelter

Women's Projects Liaison, Band Aid U.K., Khartoum, Sudan

1985 - 1986

Lead on women's projects to emerging international aid organization during Ethiopian and Darfur famine

PRIVATE CONSULTATION – SELECTED

- Course Curriculum Developer, Non-Profit Communications, Bachelor's in Public Relations and Corporate Communications Centennial College, Toronto, 2011
- Training, communications and strategic planning YWCA Yellowknife, NWT, 2007
- Creating cultural competency in the response to violence against women, RCMP Yellowknife, YWCA Yellowknife, NWT, 2007
- Workshop facilitator, 'Developing a Women's Housing Agenda for the United Nations Meetings' WAIRO, United Nations World Urban Forum, Grassroots Academy, Vancouver, 2006
- Toronto Police Services Board, Community Review of Sexual Assault Training, Opportunities for Improvement, 2006
- The Auditor General's Follow-up Review of the 1999 Report entitled "Review of the Investigation of Sexual Assaults – Toronto Police Service", 2005
- Strategic plan, re-branding, repositioning and communications planning, Education Wife Assault/Springtide Resources, Ontario, 2004-2005
- Creating cultural competency, Ministry of the Attorney General, Death Review Committee, Coroner's Office, Ontario, 2004
- [Consultant to] "Review of the Investigation of Sexual Assaults Toronto Police Service – Report by the City of Toronto Auditor General", 1999
- Workplace diversity, cross cultural communications and cultural competency, New Directions, Toronto, 1997-2003

VOLUNTEER AND COMMUNITY LEADERSHIP- SELECTED

- Member of the Board of Directors (member of the Executive and Co-Chair Fundraising Committee) of Inter Pares (Canadian Feminist and Global Justice Organization), 2008 – ongoing
- Member, Program Advisory Committee, Centennial College, Corporate Communications Program, 2007-ongoing
- Convocation Speaker, University of Toronto Woodsworth College Graduation, 2014
- Member of the Board of Directors, Woman Abuse Council of Toronto, 2009 - 2014

- Member of the Community Advisory Panel for Women's College Hospital, 2007 – 2010
- Chair, Women's Housing Advocacy Group (WHAG), 2002 – 2007
- Member of the Board of Directors, Woman Abuse Council of Toronto, 2001 – 2006
- Presenter, Integrating on-line and print media, Federated Press, 2005
- Guest lecturer, Centennial College, Corporate Communications postgraduate program, "Non-Profit Communications and Communicating for Social Change", 2002 – 2004
- YWCA representative on the Community Voices of Support Advocacy Campaign, Advisory Group, Community Social Planning Council, 1997 – 1999
- Chair, West End Elder Abuse Network, 1994 – 1997
- Board member and Program Committee Chair, Sistering, 1996 – 1997
- Coalition member, Multicultural Inter Agency Access Group, Peel 1992 – 1993
- Advisory Board Member, Hostel Outreach Programme, 1990 – 1992

LANGUAGES

Fluent in English (first language); Intermediate skills in French; basic skills in Spanish and German; rudimentary Arabic.

THIS IS EXHIBIT "B" IN THE AFFIDAVIT OF
AMANDA DALE
SWORN BEFORE ME
THIS 1ST DAY OF JUNE, 2016



Tiffany Lau, Barrister



Mission, Values and Strategic Priorities

Mission

The Barbra Schlifer Clinic offers legal representation, professional counselling and multilingual interpretation to women who have experienced violence. Our diverse, skilled and compassionate staff accompany women through personal and practical transformation, helping them to build lives free from violence.

We are a centre by, for and about women. We amplify women's voices, and cultivate their skills and resilience. Together with our donors and volunteers, we are active in changing the conditions that threaten women's safety, dignity and equality.

Vision Statement

We envision a world where diverse women:

- Build lives free from violence.
- Work together to create a more just world.
- Live their own lives in respectful communities that provide meaning and belonging.

Belief Statements

We believe:

1. Violence against women means any act of violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering (including financial, structural, institutional or spiritual) to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.
2. Violence against women happens in all cultures. It is based on abuse of power, results in inequality, and affects all relationships through the generations.

3. Women in every culture in the world have ways of working together to stop violence, and our work will honour and value these diverse strengths.
4. Respectful relations and positive social change are possible when women and men work toward them. Each woman who comes to the Clinic and each woman who contributes to the Clinic is participating in that change.

Value Statements

We value:

Feminism and Anti-Oppression

Joyfully, we root our work in the strengths and achievements of feminism and various women's movements, including successes against colonialism, racism and other forms of oppression.

Compassion and Self-Awareness

We are committed to staying rooted in compassion, viewing the world from multiple perspectives.

A Reflective Awareness of Power

We reflect on and learn from shifting power relations. We understand and acknowledge our own power and the change we invite in ourselves, the women we work with and the world we live in.

Community and Connection

We work in community and partnership with local, national and international movements to end violence against women, knowing that individual experience is embedded in systems and structures.

Autonomy and Self-Determination

We respect and broaden women's choices to determine their own lives according to their values, hopes and positive self-regard.

Our Strategic Priorities

1. Increase our effectiveness in underserved communities through service evolution and innovation
2. Broaden our sphere of influence
3. Strengthen our organization