

# **GUIDE** to the Indian Residential Schools Resolution

# Independent Assessment Process

## NOTICE

There is an official document governing the Independent Assessment Process. It is *Schedule D* of the *Indian Residential Schools Settlement Agreement*. It is available on the web at <http://www.iap-pei.ca> or by calling **1-866-879-4913**. If there are differences between this *Guide* and the official document, the official document will govern and take priority over this *Guide*.

**This Guide, and the accompanying Application Form, can only be used by former residents of Kivalliq Hall and non-resident claimants. All Kivalliq Hall applications to the Independent Assessment Process must be postmarked by January 25, 2020.**

### Important phone Numbers and Contacts

#### Information on the Independent Assessment Process (IAP) and Group IAP

<http://www.iap-pei.ca>

1-877-635-2648

#### Information on the Common Experience Payment (CEP), including CEP reconsideration

CEP Help Line

1-866-640-9992

#### Information on Health Supports

<http://www.healthcanada.gc.ca/irs>

Maritime Regions – Nova Scotia, Prince-Edward Island, New Brunswick, Newfoundland and Labrador	1-866-414-8111
Quebec	1-877-583-2965
Ontario	1-888-301-6426
Manitoba	1-866-818-3505
Saskatchewan	1-866-250-1529
Alberta	1-888-495-6588
British Columbia	1-877-477-0775
Northern Regions – Yukon, Northwest Territories and Nunavut	1-866-509-1769

# A INTRODUCTION TO THE INDEPENDENT ASSESSMENT PROCESS

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## What is the IAP?

This Independent Assessment Process (IAP) was created to resolve claims of abuse at Indian Residential Schools. **People who suffered sexual abuse, serious physical abuse, or certain other wrongful acts which caused serious psychological consequences** may receive money through the IAP.

The IAP is one part of a larger agreement. That agreement is called the Indian Residential Schools Settlement Agreement. It was reached to resolve the legacy of Indian Residential Schools.

The IAP is different from another part of the agreement, the Common Experience Payment (CEP). The CEP provides money to any resident of an Indian Residential School. The IAP provides money to people who experienced serious abuse at Indian Residential Schools.

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**This Guide will help you understand if you qualify for the IAP. If you do, it will also help you fill out the Application Form to apply for the IAP.**

For further information about the IAP, please call the IRS Toll-free Line at 1-877-635-2648.

## Do I qualify for the IAP?

**A-** To find out if you qualify for the IAP you **must** answer ‘**yes**’ to one of the following two criteria:

- YES, you experienced:
- Sexual abuse;
  - Serious physical abuse; or
  - Other wrongful acts that caused serious psychological consequences, when you were a resident of Kivalliq Hall, between June 12, 1985 and December 31, 1997.
- OR**
- YES, you are **not a former resident**, but you experienced:
- Sexual abuse;
  - Serious physical abuse; or
  - Other wrongful acts that caused serious psychological consequences, when you were allowed to be on the grounds of **Kivalliq Hall** to take part in an authorized activity (for example, a sports event), and you were under 21 when the abuse happened.

**B-** To qualify for the IAP you **must also** answer ‘**yes**’ to **both** of the following criteria:

- YES, you **have not already received settlement monies** for your abuse claim.
- AND**
- YES**, your abuse claim **was not dismissed** at a trial.

## What is the claim process?

To make an IAP claim, you will have to complete and return the IAP Application Form.

There are three ways the Secretariat deals with IRS abuse claims:

### 1. **Standard track**

The Secretariat deals with most claims in the IAP in what it calls a *standard track*. The usual process is that the Secretariat deals with your claim at a hearing conducted by a neutral decision maker called an Adjudicator. It may be possible, however, for the Secretariat to resolve your claim without a hearing. This type of resolution uses the information you put in your Application Form and sometimes also informal discussions that supplement the information you put in the Form.

### 2. **Complex issues track**

The Secretariat uses what it calls a *complex issues track* if you are:

- making a claim for income loss (see page 22 of this Guide).

**OR**

- making a claim that certain types of wrongful acts (other than sexual abuse or serious physical abuse, as defined) caused you serious psychological consequences (see page 27 of this Guide).

**Hearings, or at least interviews, are necessary for all claims in this track**, and certain claims will require more detailed proof than in the standard track. Expert evidence will almost always be necessary.

### 3. **Court track**

Finally, if your claim is exceptionally serious or complicated, you may ask the Chief Adjudicator to allow you to bring it to the courts. This approach is available when:

- there is enough evidence that you lost more income or opportunity for income than the maximum compensation this IAP allows.

**OR**

- there is enough evidence that the physical harms you experienced were catastrophic and that the compensation available through the courts may be more than the maximum compensation this IAP allows. For example, such a physical harm could be a permanent significantly disabling physical injury.

**OR**

- in an “other wrongful act claim,” the evidence involved in the harms you claim is so complex and extensive that going to the courts is the most appropriate procedure (see page 27 of this Guide).

## **Why Retain a Lawyer?**

**All the parties who developed this Independent Assessment Process believe that claimants should have a lawyer to represent them.** The Secretariat has made every effort to create a process that is easy to use, safe, accommodating, and respectful for all participants. However, the IAP is complex and involves difficult legal concepts and processes.

You may advance your claim without a lawyer, but we strongly recommend that you hire a lawyer to help you.

### **Financial help with legal costs**

If you decide to hire a lawyer to represent you throughout the entire process, and the Adjudicator provides you compensation, the government will help you with your legal bill by adding 15% to your compensation to help you pay your lawyer. This is on top of the compensation you would be entitled to for wrongs you suffered. You will be responsible for paying any additional amount if you have agreed to pay your lawyer more than 15%.

If you hire a lawyer but you don't receive any compensation from the IAP, you will be responsible to pay your own legal bill.

**Also**, the government will reimburse you or your lawyer for reasonable out-of-pocket expenses that were necessary for you to participate in this process. In discussion with you or your lawyer, the government will assess reasonable and necessary amounts. If you or your lawyer disagrees with the amount, an independent Adjudicator, upon a claimant's request or at their own discretion, may review the reasonableness of counsel's legal fees for conducting the IAP claim. Also, to have your expenses paid in this process, you will have to provide receipts for the expenses.

### **Communication with your lawyer**

Please note that if you are represented by a lawyer, the Secretariat will communicate directly with him or her. The Secretariat does this to respect your relationship with your lawyer and to ensure your lawyer's ability to represent your best interests. This is a standard practice across Canada for anyone who has hired a lawyer.

### **Finding a lawyer**

Any certified lawyer can take on your claim. To find one that you feel comfortable with, you can call **1-877-635-2648** to be transferred to a Claimant Support Officer who can provide a list of lawyers accepting referrals for IAP claimants. You may also contact your regional law society or lawyer referral service. Appendix C lists these telephone numbers and websites.

## **Counselling Support**

Completing the Application can be a very emotionally painful process. For that reason, Health Canada and the Adjudication Secretariat have committed to making sure that claimants who are resolving their residential school claims have access to emotional health and wellness support services.

The Resolution Health Support Program provides the following services:

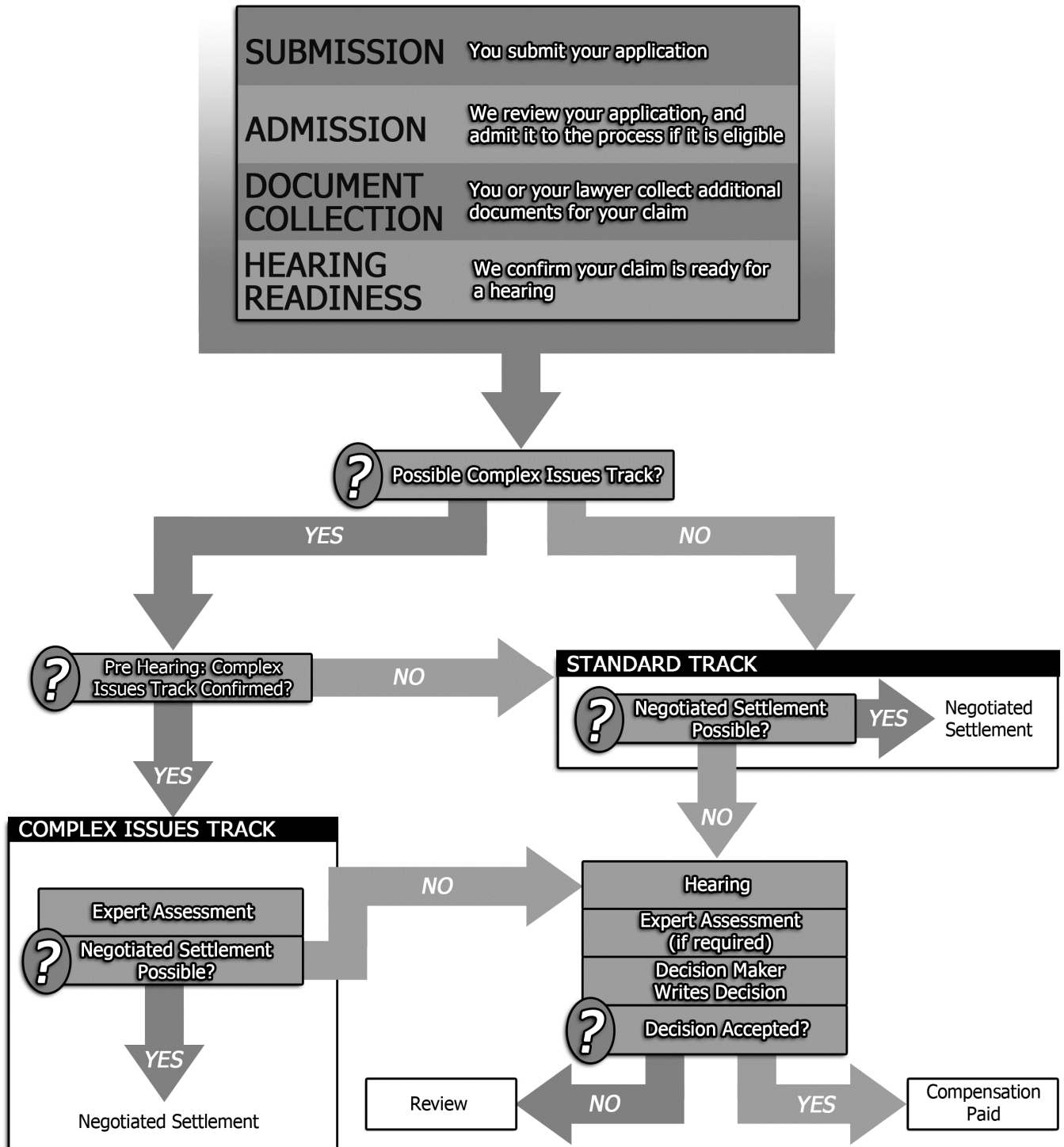
- professional counselling services provided by registered Health Canada service providers;
- emotional support services provided by Resolution Health Support Workers;
- cultural support services provided by Elders; and,
- assistance with the cost of transportation to access counselling and/or Elder services.

Because the *Privacy Act* protects personal information, Health Canada needs your written permission to ask other departments for information about you and your claim. If you need to access professional counselling services, you will have to sign a permission form that will be issued to you by Health Canada.

For more detailed information about the Resolution Health Support Program, please visit the Health Canada Web site at [www.canada.ca/en/indigenous-services-canada/services/first-nations-inuit-health/health-care-services/indian-residential-schools-health-supports](http://www.canada.ca/en/indigenous-services-canada/services/first-nations-inuit-health/health-care-services/indian-residential-schools-health-supports) or call your regional Resolution Health Support Program Coordinator at one of the numbers listed below:

Atlantic Region:	1-866-414-8111
Quebec Region:	1-877-583-2965
Ontario Region:	1-888-301-6426
Manitoba Region:	1-866-818-3505
Saskatchewan Region:	1-866-250-1529
Alberta Region:	1-888-495-6588
British Columbia Region:	1-877-477-0775
Northern Region (Northwest Territories, Yukon and Nunavut):	1-866-509-1769

# B HOW THE INDEPENDENT ASSESSMENT PROCESS WORKS





# C APPLICATION FORM

## GENERAL DIRECTIONS

The purpose of the *Guide* is to inform you about the Independent Assessment Process and help you complete the *Application Form*. There is an official document governing the Independent Assessment Process. It is “Schedule D” of the **Indian Residential Schools Settlement Agreement**. It is available on the web at <http://www.iap-pei.ca> or by calling 1-866-879-4913. If there are differences between this Guide and the official document, the official document will govern and take priority over this Guide.

The Secretariat will use the information you give in the Application Form to:

- decide if your claim fits within this Independent Assessment Process;
- decide which processes and rules apply to your claim;
- research your attendance at the school(s) and to find documents relating to your claim; and,
- help the Adjudicator ask you questions about your residential school abuse and how that abuse has affected your life.

Complete all sections of the Application Form that apply to you by giving as much information and detail as you can. Be sure to read and sign the Declaration at the end of the Application Form. If your Application Form is missing information, the Secretariat may ask you to give more details, which may delay the progress of your claim.

The information you give in your Application Form is a very important part of what the person reviewing your case will consider when deciding whether to provide you compensation and, if you're successful, how much to provide you. If what you say in the Application Form is different from what you say at a hearing, these differences may hurt your claim, unless there is a good reason for them. These differences may delay your hearing. For example, if you've identified a new person who abused you or a more severe level of abuse that requires documents to prove, this may adjourn or delay your hearing. For these reasons, you should take care and time to complete all sections of the Application Form.

If someone other than a lawyer helps you fill out the Application Form, it is important that he or she complete question 11, Section 1, on page 5 of the Application Form.

**Before filling out the *Application Form*, please remember to:**

- **Review** the entire Application Package. Take as long as you need to read the Application Package and to fill out the Application Form.
- **Check** whether you may participate in the Independent Assessment Process (see page 4).
- **Consider** having someone with you or nearby for support, such as a family member, counsellor, traditional healer, Elder or someone else from your community you trust.
- **Consider** hiring a lawyer to represent you in the Independent Assessment Process.

**When filling out the *Application Form*, remember to:**

- **Read first**  
Read all questions and requests for information carefully before answering.
- **Use Black Ink**  
Please type black ink or use a black ink pen.
- **Be complete**  
To the best of your ability, answer all the sections of the Application Form that apply to you. If you can't remember an exact date, you may give an approximate time period. If a section or question does not apply to you or if you don't know an answer, please write "not applicable" or "don't know." Do not guess the answers, but provide as much detail as you remember. If your Application Form is incomplete, the Secretariat may contact you or your lawyer (if you have one) for more details. This may delay the decision about whether the Secretariat will accept your Application into the Independent Assessment Process.
- **Use extra paper if necessary**  
Use as many extra sheets of paper as you need to write complete information about your claim. You may also write notes or draw diagrams or pictures if that helps you to explain your claim. For example, you can draw a diagram or map of where the abuse took place at the residential school or a picture of yourself or others to help explain the abuse.

**After filling out the *Application Form*, also remember to:**

- Review all of your answers in the *Application Form* to make sure they are as complete as possible.
- **Make a copy of your *Application Form* for your own records.**
- Send your Application Form to:

**Indian Residential Schools Independent Assessment Process  
Suite 3-505, 133 Weber Street North,  
Waterloo, Ontario  
N2J 3G9**

**Next steps**

- **Gather your required documents**  
Depending on the level of compensation you are claiming, you may have to collect and submit mandatory documents listed in Appendix F of this *Guide*. You do not have to submit the mandatory documents with the *Application Form*; only later in the process, if you are accepted into the IAP.
- **Provide notice of changes**  
If you need to change any information in your *Application Form* after you have sent it, please immediately inform your lawyer or, if you do not have a lawyer, write the Indian Residential Schools IAP at the address on the previous page. Examples of important changes include a change of address, a change of lawyer, new information about your claim.

## Information to help you with each question in the Application Form

This part of the Guide explains the questions in the Application Form and gives you information on how to fill out the Form.

### **SECTION 1 - PERSONAL, FAMILY AND COMMUNITY INFORMATION**

#### **Questions 1 to 9**

We need the information you give here to research your claim and your school attendance records. We will use your contact information to communicate with you or your lawyer. If you have a lawyer, we will communicate directly with him or her.

#### **Question 10: Group Process**

Please read Appendix D on page 31 of this Guide. Appendix D provides you with information on Group IAP.

#### **Question 11:**

This information may help the Adjudicator if he or she has any questions about what you write in your Application.

#### **Questions 12 to 14:**

These questions help us assess whether your Application Form meets the conditions identified for application in the Settlement Agreement and its priority in the IAP. See the Introduction for more information on eligibility. We use the following order of priority to screen Applications and schedule hearings:

- Applicants who submit a doctor's certificate confirming that their health is failing so that waiting any longer may prevent them from taking part in a hearing.
- Applicants older than 70 years.
- Applicants between 60 and 70 years old.
- Applicants who have completed examinations for discovery.

## **SECTION 2 — RESIDENTIAL SCHOOL IDENTIFICATION**

### **Questions 1 and 2:**

The information in this section helps us research your residential school attendance. It also tells us if you were a residential school resident or, if you weren't, why you were on residential school property.

## **SECTION 3 — THE ABUSE**

Here we ask you to describe any sexual abuse, serious physical abuse or other wrongful acts (see chart on page 15 for this Guide).

The information you give us in this section will:

- help us assess whether your claim meets the guidelines of the Independent Assessment Process and, if it does, to determine whether it will be resolved in the standard or complex track.
- help the Adjudicator understand the events or abuses you suffered while at a residential school and the effects those events or abuses had on your life.
- be a very important part of what the person deciding your case will consider when deciding whether to provide you compensation and, if so, how much to provide you.

This part of the *Guide* explains how to complete each section in the chart:

### **Question 1:**

#### **Incident of abuse:**

Briefly state the kind of abuse, for example: "I was fondled," or "I was hit and my arm was broken."

#### **Level of abuse:**

Please consult the chart on page 15 of this Guide and choose the level that best describes the abuse you suffered. For example, if you were fondled over the clothes, write "SL1".

#### **Dates:**

Give the date(s) of the abuse(s). If you don't know the date(s), write down your age(s) or the grade(s) you were in at the time, as close as you can remember.

**Who abused you:**

The IAP applies to abuse committed by fellow students, residential school employees and certain other adults, depending on why they were at the school. If your abuser was not a student or an employee, please tell us as much as you know about why they were at the residential school or what they were doing there.

**This Table asks for brief information about the abuse you suffered. Below is an example of how the table is completed.**

<b>Information about the abuse</b>				
	<b>Incident of abuse</b>	<b>Level of abuse</b> (Page 15 of the <i>Guide</i> )	<b>Approximate date(s) the abuse occurred and how many times</b> (month/year)	<b>Who abused you</b> <b>Tell us:</b> <ul style="list-style-type: none"> <li>• the person's name</li> <li>• whether they were an adult at the time</li> <li>• the person's job or position, if you know it</li> </ul>
1	Touching under clothing	SL1	Many times in 1987	John Doe, Kivalliq Hall resident
2	Hit on wrist with hockey stick, broken wrist	PL	Once in Fall 1988	Miss Smith, adult, dormitory supervisor
3				
4				

**Levels of Abuse**

Level	Description
<b>SL5</b> Sexual abuse level 5	<ul style="list-style-type: none"> <li>• Repeated, persistent incidents of anal or vaginal intercourse.</li> <li>• Repeated, persistent incidents of anal or vaginal penetration with an object.</li> </ul>
<b>SL4</b> Sexual abuse level 4	<ul style="list-style-type: none"> <li>• One or more incidents of anal or vaginal intercourse.</li> <li>• Repeated, persistent incidents of oral intercourse.</li> <li>• One or more incidents of anal or vaginal penetration with an object.</li> </ul>
<b>SL3</b> Sexual abuse level 3	<ul style="list-style-type: none"> <li>• One or more incidents of oral intercourse.</li> <li>• One or more incidents of digital anal or vaginal penetration.</li> <li>• One or more incidents of attempted anal or vaginal penetration (excluding attempted digital penetration).</li> <li>• Repeated, persistent incidents of masturbation.</li> </ul>
<b>PL</b> Physical abuse	<ul style="list-style-type: none"> <li>• One or more physical assaults causing a physical injury that: <ul style="list-style-type: none"> <li>○ led to or should have led to hospitalization or serious medical treatment by a physician</li> <li>○ caused permanent or demonstrated long-term physical injury</li> <li>○ impaired or disfigured</li> <li>○ caused loss of consciousness</li> <li>○ broke bones</li> <li>○ caused serious but temporary incapacitation requiring bed rest or infirmary care for several days. Examples include severe beating, whipping, and second-degree burning.</li> </ul> </li> </ul>
<b>SL2</b> Sexual abuse level 2	<ul style="list-style-type: none"> <li>• One or more incidents of simulated intercourse.</li> <li>• One or more incidents of masturbation.</li> <li>• Repeated, persistent fondling under clothing.</li> </ul>
<b>SL1</b> Sexual abuse level 1	<ul style="list-style-type: none"> <li>• One or more incidents of fondling or kissing.</li> <li>• Nude photographs taken of the Claimant.</li> <li>• The act of an adult employee or other adult lawfully on the premises exposing themselves.</li> <li>• Any touching of a student, including touching with an object, by an adult employee or other adult lawfully on the premises which exceeds recognized parental contact and violates the sexual integrity of the student.</li> </ul>
<b>OWA</b>	<ul style="list-style-type: none"> <li>• Being singled out for physical abuse by an adult employee or other adult lawfully on the premises which was grossly excessive in duration and frequency and which caused psychological consequential harms at the H3 level or higher.</li> <li>• Any other wrongful act committed by an adult employee or other adult lawfully on the premises which is proven to have caused psychological consequential harms at the H4 or H5 level.</li> </ul>

**Question 2:**

Please be as specific and detailed as you can in your description of the abuse you suffered. Use your own words, and describe the abuse from your point of view.

Using your own words, please describe the following:

1. The sexual abuse, serious physical abuse, or other wrongful acts (as the chart on page 15 of this Guide defines) that you suffered. If you were abused more than once, and the abuses were similar or the same, describe the abuse only once.
2. If you were repeatedly abused, please write **how many times and over what period of time** these incidents of abuse occurred.
3. The **events surrounding** the abuse. (For example, what led to the abuse or what happened after the abuse took place?)
4. **When** each incident took place. (For example, how old were you? Which grade were you in? What was the approximate date? Which season was it?)
5. If you attended more than one residential school, at **which school** the abuse occurred.
6. **The location** where the abuse took place. (For example, in the kitchen, an office).
7. **All individuals involved** in the abuse. It is important to connect each individual you describe as having abused you to each incident of abuse they participated in. For example, you might not remember the name of the person who abused you, but enough information about the person can identify them.

You might not remember the name(s) of the person who abused you. However, we will need enough information about the person to identify them. If they were an adult employee of the IRS, we will need at least enough information to identify their role at the school. If we don't receive enough information to reasonably identify the person, we may not be able to accept your Application.

**If the person or people you identify as having abused you wish(es) to participate in the process, please know that you do not have to come face to face with them.**

8. If a fellow student of Kivalliq Hall sexually abused you, whether they were older than you and whether they threatened, forced, or pressured you.
9. Any other important information that will help the Adjudicator understand your abuse.

If you do not know the answers to any of the points above, do not guess. Just provide as much detail as you remember.



**NOTE:** Instead of completing this question, you may attach any transcript of testimony you have given in the past that describes the abuse. Please review the information on the transcript and make sure that it answers all the points above. If it doesn't, you can add the necessary information by writing it on a separate document and attaching it to the transcript.

**Appendix A contains additional information on how Adjudicators will decide if your claim can lead to compensation.**

### **Question 3: Aggravating Factors**

Please indicate which, if any, of the listed aggravating factors made your abuse worse for you. Check all boxes that describe your experience.

### **Question 4: Abuse by a Student: Information about reports**

If you were abused by another student, please give us information on:

- whether this abuse was reported to staff,
- whether you believe staff at Kivalliq Hall knew or should have known that students were being abused by other students.
- the level of supervision at Kivalliq Hall,
- whether the abuse was accompanied by threats, coercion or violence.

This page asks you for information about all reports you made to school, church, or government authorities about your abuse by other students while at the residential school. Please give details of every person you reported the abuse to. If you told someone other than an authority, you may consider asking them to be a witness.

If you did not report the abuse but believe that staff at the residential school should have known that students were abusing other students, please give us details of why you believe this.

## **SECTION 4 – HARMS SUFFERED AND TREATMENT RECEIVED**

### **Question 1:**

In this section, please tell us about the emotional or psychological effects of the abuse you suffered at residential school. Also, try to connect these effects to the abuse you described on pages 9 to 12 of the Application Form (especially for physical abuse). Please refer to the chart on page 19 of this Guide before you complete this section of the Application. It will help you focus your descriptions on harms that can lead to compensation in this IAP.

### **Questions 2:**

In this section, describe the physical injuries you suffered. Also identify who caused your physical injuries.

### **Question 3:**

In this section, describe the treatment you received for your physical injuries.

### **Question 4:**

If you ever:

- received treatment or counselling, or
- visited a traditional healer for emotional or psychological problems resulting from the abuse you described,

please describe the treatment, counselling, or traditional healing you received.

**Question 5:**

Please review the chart below and check the appropriate box in your Application.

Level of Harm	Description of harm that resulted from your abuse
H5	<p><b>Continued harm resulting in serious dysfunction.</b></p> <p><u>Evidenced by:</u></p> <ul style="list-style-type: none"> <li>psychotic disorganization, loss of ego boundaries, personality disorders, pregnancy resulting from a defined sexual assault or the forced termination of such pregnancy or being required to place for adoption a child resulting from such a pregnancy, self-injury, suicidal tendencies, inability to form or maintain personal relationships, chronic post-traumatic state, sexual dysfunction, or eating disorders</li> </ul>
H4	<p><b>Harm resulting in some dysfunction.</b></p> <p><u>Evidenced by:</u></p> <ul style="list-style-type: none"> <li>frequent difficulties with interpersonal relationships, development of obsessive-compulsive and panic states, severe anxiety, occasional suicidal tendencies, permanent significantly disabling physical injury, overwhelming guilt, self-blame, lack of trust in others, severe post-traumatic stress disorder, some sexual dysfunction, or eating disorders.</li> </ul>
H3	<p><b>Continued detrimental impact.</b></p> <p><u>Evidenced by:</u></p> <ul style="list-style-type: none"> <li>difficulties with interpersonal relationships, occasional obsessive-compulsive and panic states, some post-traumatic stress disorder, occasional sexual dysfunction, addiction to drugs, alcohol or substances, a long term significantly disabling physical injury resulting from a defined sexual assault, or lasting and significant anxiety, guilt, self-blame, lack of trust in others, nightmares, bed-wetting, aggression, hyper-vigilance, anger, retaliatory rage and possibly self-inflicted injury.</li> </ul>
H2	<p><b>Some detrimental impact.</b></p> <p><u>Evidenced by:</u></p> <ul style="list-style-type: none"> <li>occasional difficulty with personal relationships, some mild post-traumatic stress disorder, self-blame, lack of trust in others, and low self-esteem; and/or several occasions and several symptoms of: anxiety, guilt, nightmares, bed-wetting, aggression, panic states, hyper-vigilance, retaliatory rage, depression, humiliation, loss of self-esteem.</li> </ul>
H1	<p><b>Modest Detrimental Impact.</b></p> <p><u>Evidenced by:</u></p> <ul style="list-style-type: none"> <li>Occasional short-term, one of: anxiety, nightmares, bed-wetting, aggression, panic states, hyper-vigilance, retaliatory rage, depression, humiliation, loss of self-esteem.</li> </ul>

## **SECTION 5 — EDUCATION AND WORK HISTORY**

### **Question 1:**

Please give details of your **formal education or other training, or both**. Begin with the first school or program you attended. Include any education or training that you started, even if you did not complete it. Also include any courses you applied for but were not accepted into.

### **Question 2:**

Please give details of your work history, including times when you were unemployed and when you were employed. Begin with your first job and end with your most recent job or period of unemployment. If you were ever unemployed, please give the reason(s) why - for each time you were unemployed. For example, tell us if you quit your job, were fired, or became ill (physically, emotionally or psychologically). Also include time spent parenting your children or other children, volunteering, and being self-employed - such as hunting, creating traditional art, or doing other activities.

Please include all income from all sources, including employment, self-employment, social assistance, workers' compensation, disability benefits, (un)employment insurance, and any other money you earned. If you do not know the information, do not guess. Just provide as much detail as possible.

### **Question 3:**

In this section, please tell us about the opportunities you may have lost because of the effects of your abuse. Loss of opportunity may include not being able to finish an educational program because of the effect(s) of the abuse you suffered at residential school. The abuse may also have affected the level and type of employment you have achieved to date. Your responses in this section will help the adjudicator understand what income you may have lost because of your abuse.

**Loss of opportunity:**

Loss of opportunity means that you have had fewer chances (less opportunity) to become as educated/trained or as fully employed as you might have been *because* of the effects of the abuse you experienced at Indian residential school. In other words, the effects from the abuse you suffered have kept you from reaching a higher level of education or getting a better job.

For example, you may have achieved a certain level of education (perhaps grade 6 or grade 8 or higher), and this may have allowed you to find a certain type of job. But, it may be that the effects of the abuse you suffered are preventing you from getting better educated or trained to get a better job. This could be because you now have trouble concentrating or listening to authority figures after what happened to you at Indian residential school, or for some other reason.

If the effects of the abuse you suffered reduced your chances of becoming better educated/trained or better employed, you may be eligible for compensation for a loss of opportunity.

You must show a connection between the effects of the abuse you suffered and the educational or employment opportunities that you missed out on. This is sometimes difficult to do because it is hard to predict what level of education or employment you may have reached had you not experienced the residential school abuse.

You may have to collect and submit certain documents to help support your claim for loss of opportunity. Examples include treatment records, workers' compensation records, or income tax records. Since claims for loss of opportunity can be complex, we urge you to hire a lawyer.

If you are claiming Loss of Opportunity, please see the chart below and check the appropriate box in your Application.

<b>Loss of opportunity</b>	
OL5	Chronic inability to get a job
OL4	Chronic inability to keep a job
OL3	Periodic or occasional inability to get or keep a job
OL2	Inability to start or finish education or training, resulting in underemployment or unemployment
OL1	Reduced work capacity – physical strength, or attention span

### Actual income loss:

Actual income loss means that you had a regular paying job but you had to miss work or leave your job *because* of the effects of the abuse you experienced at Indian residential school. As a result, you lost money that you could have earned had you kept working.

For example, assume you had a regular job for several years and you were earning a regular paycheck of \$300 per week. But then, something happened and you began to feel sick or overwhelmed from the effects of your Indian residential school abuse. If you started missing a lot of work because of this, or got fired or had to quit your job because of the effects of the abuse, then the actual income you lost from your job in this example is \$300 per week.

You must show a direct connection between the effects of the abuse you suffered and your inability to keep working. That is, you must show that the effects of the abuse *caused* you to stop working. This is sometimes difficult to do because other things could have made you unable to work.

If you are claiming compensation for actual income loss, your case will go into the complex issues track. In the complex issues track, it may be necessary for you to have an assessment by a doctor or other professional. You will be advised as part of the process if this is necessary in your case. Also, we may require you to collect and submit certain documents to help support your claim. Examples include treatment records, expert assessments, and psychological reports. Since claims for actual income loss can be very complex, we urge you to hire a lawyer.

## **SECTION 6 — FUTURE CARE**

### **Question 1 and 2:**

Your answers in this section will help the Adjudicator decide whether to compensate you for future care costs and, if so, by how much. Think about the abuses you suffered that this IAP compensates for. Please give us information about requirements and plans you have or want for future treatment or counselling to help you live with the results of those abuses.

In deciding whether to provide you compensation to use for future care, the Adjudicator will consider:

- the effects the abuses have had on you;
- treatment you have already had;
- whether you need to travel to obtain treatment;
- whether other funding sources can pay all or part of the cost; and,
- whether you have both (i) a need for the proposed treatment and (ii) a genuine desire to get that treatment.

To demonstrate your need and genuine desire for care you should give the Adjudicator a well-thought-out plan for the treatment you want. This plan should show how the treatment will help you heal or live with the harms that the abuse caused, and why you are committed to following the plan. If you don't already have a treatment plan like this, you may want to talk to your medical or counselling professional before you fill out this section.

## **SECTION 7 – HEARING PREFERENCES AND CHURCH INVOLVEMENT**

### **Questions 1 to 5**

We will do our best to accommodate your preferences.

Church representatives may attend your hearing if you wish in order to witness your evidence and/or provide pastoral support. We will do our best to accommodate your preferences and inform you whether church group(s) will attend your hearing through the Attendance Record before the hearing.

## **SECTION 8 - DECLARATION**

Please read the declaration carefully. It is a legal document that you, the claimant, must sign. Signing it means that you:

- i) give your permission to certain groups to research your case,
- ii) confirm that you understand how people and organizations involved with this process will use your personal information (see Appendix B),
- iii) agree to keep this process confidential, and
- iv) confirm that all information you give in the Application is true.

A witness must watch the claimant sign the declaration and then sign it him or herself. The witness does not have to read the Application in order to sign.

If a lawyer represents you, your lawyer must also sign this declaration. By doing so, the lawyer confirms that he or she reviewed your Application Form with you after you completed it, to make sure it's accurate. The lawyer is not certifying that the information is true. He or she is confirming that they reviewed the Application Form completely with you to confirm that the information you gave truly states your actual experience.



## APPENDIX A: DETAILED INFORMATION

### How Adjudicators decide whether your claim will lead to compensation.

#### A. Physical or sexual abuse committed by an adult

1. If an adult committed a sexual or physical assault on a resident or student of an IRS, you must be able to answer yes to the following questions:
  - a) Was the abuser an adult employee of the government or of a church entity that operated the IRS? If so, it does not matter whether their employment contract was at that IRS.  
  
**Or**, if the abuser was not an adult employee, was he or she an adult who was lawfully on the premises?
  - b) Did the operation of an IRS make the assault possible? Or, was the assault connected to the operation of an IRS? This will be true if the Adjudicator decides that a relationship began at the school that led to the abuse or made it easier to commit. If this is true, the assault does not have to have occurred on the premises.
2. If an adult committed a sexual or physical assault on a non-student or a non-resident, you must be able to answer yes to the following questions:
  - a) Was the abuser an adult employee of the government or of a church entity that operated the IRS in question? If so, it does not matter whether their employment contract was at that IRS.  
  
**Or**, if the abuser was not an adult employee, was he or she an adult who was lawfully on the premises?
  - b) Were you under 21 years old at the time of the assault?
  - c) Did an adult employee give you permission to be on the premises to participate in school activities?
  - d) Did the operation of an IRS make the assault possible? Or, was the assault connected to the operation of an IRS? This will be true if the Adjudicator decides that a relationship began at the school and this relationship led to the abuse or made it easier to commit. If this is true, the assault does not have to have occurred on the premises.

**B. Sexual or physical assaults committed by a student of Kivalliq Hall.**

1. In order for the Adjudicator to decide that another student committed predatory or exploitative sexual abuse at level SL4 or SL5, you must be able to answer yes to the following questions (see below for definitions of *predatory or exploitative*):

- a) Did the assault take place on IRS premises?
- b) Was the sexual assault of an exploitative or predatory nature?
- c) Has the government failed to prove that the school was providing reasonable supervision?

*Predatory or exploitative sexual assault* means either that (1) the abuser was a lot older than the victim or (2) that the abuser used threats, coercion, or violence to commit the assault.

Please note that the fact of a sexual assault taking place at an IRS does not prove that reasonable supervision was not in place.

2. In all other instances, for the Adjudicator to decide you suffered a defined sexual assault or a defined physical assault, you must be able to answer yes to the following questions (this includes those at the SL4 or SL5 level that are not predatory or exploitative):

- a) Did the assault take place on school premises?
- b) Did an adult employee of the IRS know, or should they have known, that abuse of the kind proven was occurring at the IRS at the relevant time period?
- c) Did an adult employee at the IRS fail to take reasonable steps to prevent the assault?

**C. Additional instructions about physical assaults**

1. This IAP only compensates physical assaults that cause a physical injury. Medical attention or hospitalization to find out whether you were injured does not meet the IAP requirement on its own.
2. "Serious medical treatment by a physician" does not include applying salves or ointment or bandages or other similar non-invasive interventions.
3. Loss of consciousness must have been directly caused by a blow or blows and does not include momentary blackouts or fainting.

4. This IAP compensates for physical abuse only if physical force was applied to the claimant's physical body. This IAP may decide that this has occurred if:
- (1) an employee required you to strike a hard object (such as a wall or post) so that the effect on your body was the same as if an employee had struck you, and
  - (2) your claim meets the remaining standards for compensation within this IAP.

#### **D. Other Wrongful Acts (OWA)**

The IAP intends this category to compensate claimants for wrongful acts that don't appear in the compensation rules and that have caused the defined level of psychological harms. If you are making a claim in this category but your claim is based on abuses described in another category, the IAP will apply only to that other category.

The IAP handles these claims only in the complex issues track. This is because:

- (i) these claims are of a novel nature, and
- (ii) the IAP must be satisfied that the acts caused the psychological harms suffered.

For this category, a wrongful act (other than the specified act of physical abuse of grossly excessive duration and frequency), is one which:

- a) was committed by an adult employee or another adult lawfully on the premises,
- b) was outside the usual operational practices of the IRS at the time in question, and
- c) exceeds the recognized parenting or caregiving standards of the time.

Once this IAP decides that an act or series of acts was wrongful and is not described in another part of the compensation rules, the Adjudicator, unless the parties agree otherwise, must order the necessary psychiatric or medical reports. Those reports establish whether the act or acts caused harms at the H4 or H5 levels,

In all OWA claims, the IAP will use the same standards in the compensation rules as Canadian courts use for proving causation and for deciding compensation in similar cases.

## APPENDIX B: PROTECTION OF YOUR PERSONAL INFORMATION

### Definition of personal information

*Personal information* means information about an identifiable person that is recorded in some way. Some examples of personal information include name, age, income, medical records and school attendance.

### **Level of security**

We will treat your *Application Form* with care and confidentiality. This means that security rules are in place to protect your *Application Form*. The Government of Canada uses the “Protected B” security level for sensitive and personal information. Once you submit it, we will treat your *Application Form* as a “Protected B” document.

### **Privacy and information laws**

The *Privacy Act* is the federal law that controls the way the government collects, uses, shares and keeps your personal information. The *Privacy Act* also allows people to access personal information about themselves.

The *Access to Information Act* is the federal law that allows access to government information. However, it protects certain kinds of information, including personal information.

We will deal with personal information about you and other people you identify in your claim privately and confidentially. We will do so in accordance with the *Access to Information Act*, the *Privacy Act*, and any other applicable law, or we will ask your permission to share information.

In certain situations, the government may have to give personal information to certain authorities. For example, in a criminal case before the courts, the government may have to give information to the police if they have a search warrant. Another example is when the government has to give information to child welfare authorities or the police if the government finds out that a child needs protection. The government will also share personal information with people involved in resolving your claim, as we describe in the section “Sharing your personal information with others” on the next page.

You can find more information about these laws on the internet at: [www.priv.gc.ca](http://www.priv.gc.ca) and [www.oic-ci.gc.ca](http://www.oic-ci.gc.ca).

## Collection of personal information

Personal information in your Application Form and all documents we gather for your claim are collected **only** so we can (1) operate and administer this Independent Assessment Process and (2) resolve your residential school claim.

## Use of your personal information

We will review the personal information you give in your Application Form and all documents we gather for your claim. This review lets us find out whether we can process your claim in this Independent Assessment Process. If your Application can be processed in this process, we will use the information to research your attendance at the residential school(s) and to find documents relevant to you and your claim.

## Sharing your personal information with others

If a church organization is participating in the resolution of your claim, we will share some of your personal information confidentially with church representatives.

If you ask for counseling support and you give your permission, we will give Health Canada information about your participation in this Independent Assessment Process so that you can receive counseling support.

If the government finds the person who you claim abused you, we will share some of the personal information you have given us with him or her. This will include details of any claims you've made against them. This is necessary to give the person a chance to answer your claim. We will also share some of your personal information with witnesses participating in the resolution of your claim. In both situations, we will share only information necessary to answer your claim. We will not share information that identifies your address.

The Adjudicator will receive your personal information before the hearing. This will let him or her review your claim, question you and other witnesses, and decide whether to provide you compensation and, if so, how much.

## Keeping your records

The *Privacy Act* requires the government to keep your personal information for at least two years. Currently, the government keeps this information in the National Archives for 30 years, but this practice can change at any time. Only the National Archivist can destroy government records.

## APPENDIX C: LAWYER REFERRAL SERVICES

### Finding a lawyer

If you have any questions about finding a lawyer in your area or how a lawyer represents you, please contact your regional law society or lawyer referral service. The telephone numbers and websites are listed below.

Province or Territory	Law society	Lawyer referral service
Alberta	1-800-661-9003 (AB) (403) 229-4700 <a href="http://www.lawsociety.ab.ca/">www.lawsociety.ab.ca/</a>	1-800-661-1095 (AB) (403) 228-1722
British Columbia	1-800-903-5300 (BC) (604) 669-2533 <a href="http://www.lawsociety.bc.ca/">www.lawsociety.bc.ca/</a>	1-800-663-1919 (BC & USA) (604) 687-3221
Manitoba	(204) 942-5571 <a href="http://www.lawsociety.mb.ca/">www.lawsociety.mb.ca/</a>	1-800-262-8800 (MB) (204) 943-3603
New Brunswick	(506) 458-8540 <a href="http://www.lawsociety-barreau.nb.ca">www.lawsociety-barreau.nb.ca</a>	(506) 458-8540
Newfoundland and Labrador	(709) 722-4740 <a href="http://www.lawsociety.nf.ca">www.lawsociety.nf.ca</a>	(709) 722-2643
Northwest Territories	(867) 873-3828 <a href="http://www.lawsociety.nt.ca">www.lawsociety.nt.ca</a>	(867) 873-3828
Nova Scotia	(902) 455-3135-1491 <a href="http://www.legalinfo.org">www.legalinfo.org</a>	1-800-665-9779 (NS) (902) 455-3135 (Halifax area)
Nunavut	(867) 979-2330 <a href="http://www.lawsociety.nu.ca">www.lawsociety.nu.ca</a>	See "Lawyer" in Yellow Pages
Ontario	1-800-668-7380 (ON) (416) 947-3300 <a href="http://www.lsuc.on.ca">www.lsuc.on.ca</a>	1-800-268-8326 (ON) (416) 947-3330
Prince Edward Island	(902) 566-1666 <a href="http://www.lawsocietypei.ca/">www.lawsocietypei.ca/</a>	(902) 566-1666
Quebec	(514) 954-3411 ou 1 844-954-3411 <a href="http://www.barreau.qc.ca">www.barreau.qc.ca</a>	(514) 866-2490 (Montreal) <a href="mailto:reference@barreaudemontreal.qc.ca">reference@barreaudemontreal.qc.ca</a> (450) 4682609 (Longueuil) (418) 529-0301 ext 21 (Quebec City, the Beauce, Montmagny)
Saskatchewan	(306) 569-8242 <a href="http://www.lawsociety.sk.ca/">http://www.lawsociety.sk.ca/</a>	<b>Note:</b> Referral service not available. See lawyer directory at <a href="https://iss.alinityapp.com/WebClient/registratordirectory.aspx">https://iss.alinityapp.com/WebClient/registratordirectory.aspx</a>
Yukon	(867) 668-4231 <a href="http://www.lawsocietyyukon.com">www.lawsocietyyukon.com</a>	(867) 668-4231

## APPENDIX D – GROUP IAP

### What is Group IAP?

The Group IAP Program provides funding to established groups to support healing and reconciliation for group members, their families, and communities. This program provides an opportunity for individuals to come together as they go through their individual IAP Claim and/or shortly thereafter. The objectives are:

- To effect healing by helping former residential school students who have been admitted to the IAP who share similar experiences (school, community, issues) to support each other in their journey towards healing and reconciliation.
- To empower individuals by giving them access to tools and resources to develop, enhance and strengthen relationships between former students, their families, their communities, and with other Canadians in support of healing and reconciliation during the IAP and/or after their IAP hearing.

### How does it work?

If your group's proposal is selected, the money is provided through a contribution agreement to the not-for-profit incorporated organization designated in your proposal. The amount provided is based on your approved budget. It does not go directly to individual group members. The total budget can reach an amount up to \$3,500 per eligible group member. (Eligible group members are those in the group who were admitted to the IAP process and who provided a completed and signed consent form.)

Group IAP offers one-time only funding per eligible group member.

### Examples of Group IAP healing activities

Activities can involve the group, family members of all ages, and the community. Some examples include:

- traditional and cultural activities and events such as star blanket making, canoe quests, sweat lodges, round dances, pow-wows, sharing circles and potlatch ceremonies
- counselling by Elders, nutritionists, therapists and others on topics of mutual interest, such as post-traumatic stress disorder, parenting or other life skills, financial guidance, for example, through workshops on banking, budgeting and investing Settlement funds.

## For more information on Group IAP

You can get more information by contacting a Group Development Consultant about Group IAP by:

- Emailing: [groupiap-peicollectif@irsad-sapi.gc.ca](mailto:groupiap-peicollectif@irsad-sapi.gc.ca)
- calling toll-free 1-877-635-2648
- visiting the Group IAP webpage on the IAP website at <http://www.iap-pe.ca/group-eng.php>
- writing to the Group IAP Unit at:  
Group IAP

Indian Residential Schools Adjudication Secretariat  
900-2010 12<sup>th</sup> Ave,  
Regina, SK  
S4P 0M3



## APPENDIX E – COMPENSABLE ABUSE AND THE COMPENSATION RULES FOR THE IAP

### I: Compensable abuse

The IAP will compensate the following types of claims:

1. Sexual and physical assaults, as described in the Compensation Rules below, if the assaults
  - a. arise from or are connected to the operation of an IRS, whether or not occurring on the premises or during the school year,
  - b. are committed by adult employees of the government or a church entity that operated the IRS in question, or other adults lawfully on the premises, and
  - c. happened when you were a student or resident, or were under 21 and were permitted by an adult employee to be on the premises to take part in authorized school activities.
2. Sexual or physical assaults, as described in the Compensation Rules below, committed by one student against another at an IRS if:
  - a. you prove that an adult employee of the government or church entity that operated the IRS knew or should reasonably have known that such abuse was occurring at the IRS during the relevant period and did not take reasonable steps to prevent that abuse from continuing; or,
  - b. in cases of predatory or exploitative sexual assault at the SL4 or SL5 level, the defendants do not establish on a balance of probabilities that reasonable supervision was in place at the time.
3. Any other wrongful acts committed by adult employees of the government or a church entity that operated the IRS or other adults lawfully on the premises, which caused serious psychological consequences for you, as described in the Compensation Rules below. These claims are referred to as “other wrongful acts.”

The IAP refers collectively to these claims as “continuing claims”.

## II: COMPENSATION RULES

	Acts Proven	Compensation Points
SL5 Sexual Assault Level 5	<ul style="list-style-type: none"> <li>• Repeated, persistent incidents of anal or vaginal intercourse.</li> <li>• Repeated, persistent incidents of anal or vaginal penetration with an object.</li> </ul>	45-60
SL4 Sexual Assault Level 4	<ul style="list-style-type: none"> <li>• One or more incidents of anal or vaginal intercourse.</li> <li>• Repeated, persistent incidents of oral intercourse.</li> <li>• One or more incidents of anal or vaginal penetration with an object.</li> </ul>	36-44
SL3 Sexual Assault Level 3	<ul style="list-style-type: none"> <li>• One or more incidents of oral intercourse.</li> <li>• One or more incidents of digital anal/vaginal penetration.</li> <li>• One or more incidents of attempted anal or vaginal penetration (excluding attempted digital penetration).</li> <li>• Repeated, persistent incidents of masturbation.</li> </ul>	26-35
PL Physical Assault	<ul style="list-style-type: none"> <li>• One or more physical assaults causing a physical injury that: <ul style="list-style-type: none"> <li>○ led to or should have led to hospitalization or serious medical treatment by a physician</li> <li>○ caused permanent or demonstrated long-term physical injury</li> <li>○ impaired or disfigured</li> <li>○ caused loss of consciousness</li> <li>○ broken bones</li> <li>○ caused serious but temporary incapacitation requiring bed rest or infirmary care for several days. Examples include severe beating, whipping, and second-degree burning.</li> </ul> </li> </ul>	11-25
SL2 Sexual Assault Level 2	<ul style="list-style-type: none"> <li>• One or more incidents of simulated intercourse.</li> <li>• One or more incidents of masturbation.</li> <li>• Repeated, persistent fondling under clothing.</li> </ul>	11-25
SL1 Sexual Assault Level 1	<ul style="list-style-type: none"> <li>• One or more incidents of fondling or kissing.</li> <li>• Nude photographs taken of the Claimant.</li> <li>• The act of an adult employee or other adult lawfully on the premises exposing themselves.</li> <li>• Any touching of a student, including touching with an object, by an adult employee or other adult lawfully on the premises which exceeds recognized parental contact and violates the sexual integrity of the student.</li> </ul>	5-10
OWA	<ul style="list-style-type: none"> <li>• Being singled out for physical abuse by an adult employee or other adult lawfully on the premises which was grossly excessive in duration and frequency and which caused psychological consequential harms at the H3 level or higher.</li> <li>• Any other wrongful act committed by an adult employee or other adult lawfully on the premises which is proven to have caused psychological consequential harms at the H4 or H5 level.</li> </ul>	5-25

Level of Harm	Consequential Harm	Compensation Points
H5	<p><b>Continued harm resulting in serious dysfunction.</b>  <u>Evidenced by:</u></p> <ul style="list-style-type: none"> <li>psychotic disorganization, loss of ego boundaries, personality disorders, pregnancy resulting from a defined sexual assault or the forced termination of such pregnancy or being required to place for adoption a child resulting from such a pregnancy, self-injury, suicidal tendencies, inability to form or maintain personal relationships, chronic post-traumatic state, sexual dysfunction, or eating disorders</li> </ul>	20-25
H4	<p><b>Harm resulting in some dysfunction.</b>  <u>Evidenced by:</u></p> <ul style="list-style-type: none"> <li>frequent difficulties with interpersonal relationships, development of obsessive-compulsive and panic states, severe anxiety, occasional suicidal tendencies, permanent significantly disabling physical injury, overwhelming guilt, self-blame, lack of trust in others, severe post-traumatic stress disorder, some sexual dysfunction, or eating disorders.</li> </ul>	16-19
H3	<p><b>Continued detrimental impact.</b>  <u>Evidenced by:</u></p> <ul style="list-style-type: none"> <li>difficulties with interpersonal relationships, occasional obsessive-compulsive and panic states, some post-traumatic stress disorder, occasional sexual dysfunction, addiction to drugs, alcohol or substances, a long term significantly disabling physical injury resulting from a defined sexual assault, or lasting and significant anxiety, guilt, self-blame, lack of trust in others, nightmares, bed-wetting, aggression, hyper-vigilance, anger, retaliatory rage and possibly self-inflicted injury.</li> </ul>	11-15
H2	<p><b>Some detrimental impact.</b>  <u>Evidenced by:</u></p> <ul style="list-style-type: none"> <li>occasional difficulty with personal relationships, some mild post-traumatic stress disorder, self-blame, lack of trust in others, and low self-esteem; and/or several occasions and several symptoms of: anxiety, guilt, nightmares, bed-wetting, aggression, panic states, hyper-vigilance, retaliatory rage, depression, humiliation, loss of self-esteem.</li> </ul>	6-10
H1	<p><b>Modest Detrimental Impact.</b>  <u>Evidenced by:</u></p> <ul style="list-style-type: none"> <li>occasional short-term, one of: anxiety, nightmares, bed-wetting, aggression, panic states, hyper-vigilance, retaliatory rage, depression, humiliation, loss of self-esteem.</li> </ul>	1-5

<b>Aggravating factors</b> <b>Add 5 to 15% of points for Act and Harm combined</b> <b>(rounded up to nearest whole number)</b>
<ul style="list-style-type: none"> <li>• Verbal abuse</li> <li>• Racist acts</li> <li>• Threats</li> <li>• Intimidation or inability to complain; oppression</li> <li>• Humiliation; degradation</li> <li>• Sexual abuse accompanied by violence</li> <li>• Age of the victim or abuse of a particularly vulnerable child</li> <li>• Failure to provide care or emotional support following abuse requiring such care</li> <li>• Witnessing another student being abused</li> <li>• Use of religious doctrine, paraphernalia or authority during or to facilitate the abuse.</li> <li>• Being abused by an adult who had built a particular relationship of trust and caring with the victim (betrayal)</li> </ul>

<b>Future care</b>	<b>Additional compensation</b> <b>(Canadian dollars)</b>
General – medical treatment, counselling	up to \$10,000
If psychiatric treatment required, cumulative total	up to \$15,000

<b>Level</b>	<b>Loss of Opportunity</b>	<b>Additional Compensation</b> <b>(Points)</b>
OL5	Chronic inability to obtain employment	21-25
OL4	Chronic inability to retain employment	16-20
OL3	Periodic inability to obtain or retain employment	11-15
OL2	Inability to undertake/complete education or training resulting in underemployment, and/or unemployment	6-10
OL1	Diminished work capacity – physical strength, attention span	1-5

Compensation Points	Compensation (\$)
1-10	\$5,000-\$10,000
11-20	\$11,000-\$20,000
21-30	\$21,000-\$35,000
31-40	\$36,000-50,000
41-50	\$51,000-\$65,000
51-60	\$66,000-\$85,000
61-70	\$86,000-\$105,000
71-80	\$106,000-\$125,000
81-90	\$126,000-\$150,000
91-100	\$151,000-\$180,000
101-110	\$181,000-\$210,000
111-120	\$211,000 to \$245,000
121 or more	Up to \$275,000

### **Proven actual income loss**

The Adjudicator may decide that you suffered actual income losses (as described by the standards in the complex issues track of this IAP). In that case, an Adjudicator may provide you the amount of those losses up to a maximum of \$250,000. This compensation would be **in addition** to the amount the Adjudicator provides you according to the above “Compensation points” grid. However, this additional compensation can only happen if you **don’t** claim compensation points for loss of opportunity.

To decide the amount you receive for actual income loss, the Adjudicator will use the legal analyses and amounts that court decisions have used for similar claims.

## APPENDIX F: DOCUMENTS YOU MUST PROVIDE TO SUPPORT YOUR CLAIM

Depending on your claim, you may be required to submit certain documents (see below). If you cannot give us these documents, you must explain why.

We do not require you to submit documents to prove the abuse itself. However, you are free to send us documents to support your claim.

### 1. To prove consequential harms

#### Levels 3, 4, and 5

- Treatment records relevant to the harms you have claimed. (These include clinical, hospital, medical or other treatment records. These **don't** include records of counselling you have obtained to help you while you pursue an IRS claim). In the complex issues track, this IAP considers records from general practitioners, clinics, or community health centers as relevant unless the people you claim abused you agree that the records are not relevant.
- Workers' Compensation records, if you're claiming that you suffered a physical injury.
- Corrections records that relate to injuries or harms.

Levels 1 require no supporting documents.

### 2. To prove loss of opportunity

#### Levels 2, 3, 4, and 5

- Workers' Compensation records, if you're claiming that you suffered a physical injury.
- Income tax records (if not available, then Employment Insurance and Canada Pension Plan records)
- Treatment records that are relevant to what you claim caused the opportunity loss. (These include clinical, hospital, medical or other treatment records. These **don't** include records of counselling you obtained to help stay safe while you pursue an IRS claim). In the complex issues track, this IAP considers records from general practitioners, clinics, or community health centers as relevant unless the people you claim abused you agree that the records are not relevant.
- Secondary (non-residential) school and post-secondary school records.

## Level 2

- Workers' Compensation records, if you're claiming that you suffered a physical injury.
- Income tax records, or, if you choose, Employment Insurance and Canada Pension Plan records.
- Secondary (non-residential) school and post-secondary school records.

**Level 1 requires no supporting documents.**

### 3. To establish a need for future care

You don't have to give us any supporting documents to prove that you'll need special care in the future. However, you should submit a treatment plan to support your claim for future care if you can or if a lawyer is representing you.

### 4. Other documents that might help you support your claim

You may submit other documents to support your claim. These might include:

1. Any documents that you have from when you were a student at an Indian residential school. For example:
  - yearbooks;
  - pictures;
  - report cards;
  - diploma;
  - letters;
  - newspaper clippings.
2. Any written statement or testimony you have given about your experience at an Indian residential school or harms you have suffered because of the abuse. For example:
  - information related to drug and alcohol treatment;
  - statements you may have made to the police;
  - previous written statements you have given to a priest, other religious person or employee of the school;
  - previous statements you may have given to medical or counselling professionals (treatment records);
  - personal diary recording information that supports your claim;
  - video statements you have previously made, which were not made for your claim.