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Chair: Mr. Sean Casey

Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities

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• (1710)

[English]

The Chair (Mr. Sean Casey (Charlottetown, Lib.)): Thank you, Madam Clerk. I call this meeting to order.

Welcome to meeting number eight of the House of Commons Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities. Pursuant to the orders of reference of March 24, April 11 and April 20, 2020, the committee is meeting for the purpose of receiving evidence concerning matters related to the government's response to the COVID-19 pandemic.

Today's meeting is taking place by video conference and the proceedings will be made available via the House of Commons website. The webcast will always show the person speaking rather than the entirety of the committee. In order to facilitate the work of our interpreters and ensure an orderly meeting, I would like to outline a few rules to follow.

First, interpretation in this video conference will work very much like in a regular committee meeting. You have the choice at the bottom of your screen of either "floor", "English" or "French". In order to resolve sound issues, please ensure that you are on the English channel when speaking English, and on the French channel when speaking French. I would specifically ask for the witnesses to take note of that. If you plan to alternate from one language to the other, please also switch the interpretation channel so it aligns with the language you are speaking.

Before speaking, please wait until I recognize you by name, and when you are ready to speak, please click on the microphone icon to activate your mike. I remind you that all comments by members and witnesses should be addressed through the chair.

It's the same rules with respect to points of order. Members, if you have a point of order, please indicate so by unmuting your mike and identifying yourself. If you wish to speak on a point of order that has been raised by someone else, please use the "raise hand" function.

When speaking, please speak slowly and clearly. When not speaking, your mike should be on mute. As you've heard during the sound check, the use of headsets is strongly encouraged. If you have a microphone on your headset that hangs down, please make sure it's not rubbing on your shirt while you are speaking.

If any technical challenges arise, for example in relation to interpretation or if you are accidentally disconnected, please advise the chair or clerk immediately, and the technical team will work to re-

solve them. Please note that we may need to suspend during these times as we need to ensure that all members are able to participate fully.

Before we get started, can you all click on your screen in the top right-hand corner and ensure that you are in gallery view? With this view you'll be able to see all of the participants in a grid view and it will ensure that all video participants can see one another.

With that by way of preliminaries, I would now like to thank the witnesses for joining us today. From the Foreign Agricultural Resource Management Services, F.A.R.M.S., we have Ken Forth, president. From the International Longevity Centre Canada, we have Margaret Gillis, president; and Kiran Rabheru, chair of the board. Also, from the Migrant Workers Centre, we have Juliana Dalley, staff lawyer.

I understand that our witnesses have some opening remarks.

Mr. Forth, please proceed. You have the floor for 10 minutes.

Mrs. Stephanie Kusie (Calgary Midnapore, CPC): On a point of order, Chair, before we begin—and it just wouldn't be one of our meetings if I didn't start with a point of order—I would make just a quick note that certainly while we understand that the Minister for Seniors has a very busy schedule and we appreciate her correspondence, we are of course very disappointed that she couldn't be here today. We've had all of the other ministers appear before us, and we're eager and anxious to see her as well, so I would ask, please, that we continue to work to get her here as soon as possible.

Thank you very much, Mr. Chair.

The Chair: We will do so. We've been assured that your disappointment won't last long, so we'll continue to persist.

Mr. Adam Vaughan (Spadina—Fort York, Lib.): Just on that note, the House of Commons, as a point of information and I guess a point of order, asked us to respond as quickly as possible. While we do so, we have to be a cabinet and have to be in front of the policy processes as parliamentary secretaries, as well as cabinet ministers, and that's what's delaying her appearance in front of the committee. She's trying to respond to the House's request to get the legislation and the package for seniors prepared as quickly as possible, and she doesn't want to miss another day of doing that.

She'll be attending as soon as she can, but she also takes the charge from the House of Commons very seriously.

The Chair: Thank you.

Mr. Forth, you have the floor for 10 minutes, sir. Please go ahead.

You need to unmute your microphone, Mr. Forth.

We're going to move to Ms. Gillis from the International Longevity Centre Canada, and we'll come back to Mr. Forth once we get the technical issues resolved.

Ms. Gillis, you have 10 minutes. Please go ahead.

Ms. Margaret Gillis (President, International Longevity Centre Canada): Thank you for this opportunity to speak with you.

I'm Margaret Gillis, president of International Longevity Centre Canada, which I'm going to refer to as ILC Canada. It's an organization that advocates for the human rights of older people, and we are part of a 16-country global alliance and are partnered with the LIFE research institute at the University of Ottawa.

Attending with me today is Dr. Kiran Rabheru, chair of the board of ILC Canada. He's a professor of psychiatry at the University of Ottawa and a geriatric psychiatrist at the Ottawa Hospital.

We are here today to study our government's response to the COVID-19 pandemic. Like many Canadians, I am grateful for the unprecedented teamwork we have seen across party lines here in Parliament, and between the federal, provincial and territorial governments, placing the needs of Canadians before partisan and jurisdictional politics. We are also grateful to have HUMA pause to reflect and seek some initial views from Canadians in response to the COVID-19 crisis; however, this is but a first step in what we believe should be a longer process.

We all know that older people have been the most severely impacted group worldwide in this crisis. We know that the rights and contributions of older people are often overlooked, both in politics and in practice. Canada needs to take a leadership role in rectifying the horrible treatment of seniors during the pandemic through, among other actions, the sponsorship of the United Nations convention on the rights of older persons, which would work towards ensuring that older persons' rights are not ignored.

While it is vital to be vigilant right now, it's premature to think that narrowly focusing on Canada's response in the middle of an evolving crisis will provide us with a full assessment. There will be a need for meaningful and lasting change, and it is probably like trying to build an airplane mid-flight, so we need to continue this and keep it going. We will need a comprehensive process to identify lessons learned, and this process must involve looking at all aspects of the COVID-19 crisis. We're talking here about prevention, preparedness, response, where we are now and recovery.

The challenges we are facing, as illustrated by the systemic problems in long-term care, the rise in elder abuse and the patronizing ageist attitudes towards older people in the press and in our society, have become more visible and urgent during the pandemic. We must embrace this unprecedented reality and boldly move forward to support human rights. We must be jointly accountable for results for Canadians. Instead of pointing fingers, we must all own part of the situation and move quickly to fix it.

We were encouraged by the words of Prime Minister Trudeau when he said, "We need to do better. Because we are failing our parents, our grandparents, our elders—the greatest generation, who built this country. We need to care for them properly."

Indeed, we do need to do better, and we must find a way forward that reinstates and reinforces Canadian values. It is time to be bold. It is time to embrace the new post-COVID-19 era. Canadians want answers, Canadians need leadership, and Canadians must demand accountability for seniors. Time is everything, and the stars are aligned at this moment for Canada to make the difference.

I would like to use today's discussion to advance ways we can strengthen the rights of older persons to ensure that their lives, health and well-being are not overlooked during and after the pandemic.

As I mentioned, there is no comprehensive, binding international human rights convention for older persons as currently exists for women, children and persons with disabilities. ILC firmly believes that a binding international convention would provide stronger protection for older persons—protections that have been so lacking during the pandemic. We should discuss how a convention could help by examining two important examples of rights: the right to health and the right to affordable, accessible long-term care.

Think for a moment about what we've seen in the last few weeks: older people left to die in their beds without medical assistance, dealing with a virus that results in tremendous suffering; or older people dying of dehydration or malnutrition, or being left in filthy beds. How can this cruel and unthinkable treatment be happening in Canada?

● (1715)

Who can forget the images of family members standing outside long-term care facilities, hoping to get a glimpse of a loved one whom they have not heard about for days, only to hear that they have been abandoned and left to die, unaided, in this most horrific manner?

Is Canada a country that leaves its most vulnerable to die, a country that has left a system so incapable of handling a crisis that it has to rely on the army to rescue vulnerable people? Where are the human rights of those people?

Ask yourself also if we would allow this to happen in our schools, our day cares, our hospitals or any other institution. There's a very basic lesson here, and it is that human rights cannot be an afterthought in a pandemic, or ever. Human rights need to be front and centre in all that we do.

According to the latest data, 79% of the deaths in Canada during the pandemic have occurred in long-term care. We need to call this for what it is: a human rights violation, which is reflective of systemic ageism and the devaluing of importance in contributions of older Canadians. While we can all claim to be saddened over the loss of lives, not many of us can say we are surprised by what's taken place.

You would have to be living in a bubble to miss the multiple reports of abuse in long-term care: the blind 94-year-old woman locked for two weeks in a room full of bedbugs; the sickening murder of eight residents in Ontario, which would have gone on had the murderer not told her pastor; or the multiple reports of choking, beating and neglect that have, in some cases, led to deaths. All these clear human rights abuses took place before the pandemic.

The treatment of older people in Canada is nothing less than a failure of human rights in our own backyard. It is heartbreaking to see how front-line workers have struggled in the most impossible of situations. We need to take steps now to ensure that never happens again.

ILC Canada encourages the Canadian government and all parliamentarians to work together to protect the rights of older citizens by leading the movement for a convention on the rights of older persons. Acting in this manner would go a long way to re-establishing our reputation as a country that values the lives of all citizens. Why? Because a convention would see older persons as rights holders. It would combat ageism. It would allow the public to hold governments accountable for human rights abuses by giving them access to the UN Human Rights Council, and it would educate the public and empower older persons.

A convention would also help to promote and protect the rights and dignity of older persons. The impact of the pandemic has made it crystal clear that policies and mechanisms currently in place are inadequate and insufficient from a human rights perspective. Such actions have had a severe impact on the lives of older people.

We have all observed the changes in attitudes towards people with disabilities, and in the actions taken by countries that have resulted from the Convention on the Rights of Persons with Disabilities, which I'm assuming this committee is very familiar with. We are certain that a UN convention on the rights of older persons would have the same positive influence and impact. We call on Canada to lead the convention in order to foster a better understanding of the scope and meaning of human rights for all people.

This move would be in keeping with the long, proud history Canada has in protecting rights at the United Nations. ILC Canada has been at the forefront of the movement for a UN convention. For the past six years we have been working actively at the UN open-ended working group on aging. In doing so we have continually encouraged Canada to act decisively. In 2018, ILC Canada brought forward a petition to the UN to have Canada lead and support the convention. We were very encouraged when the Canadian delegate to the United Nations announced that the door was open to Canadian support, but unfortunately, there's been no movement since. The door's open, and we're hoping that you will step through.

During the pandemic we began a writing campaign to Ministers Champagne and Schulte, asking that Canada lead and support the convention. Our letter was tabled with the committee today. We have been successfully reaching out to other groups. We have had momentum from public and political support, including from prominent Canadians, such as Major-General Lewis MacKenzie, whose letter of support I've also provided to the committee.

● (1720)

We see the opportunity to speak to all of you today as a great sign that there is an openness to make the needed changes to better the lives of older Canadians. We sincerely and steadfastly hope you will support our call to defend human rights for older Canadians.

Finally, honourable members of HUMA, I would like to leave you with three key takeaways.

One, Canada needs to grow and learn from the treatment of seniors in this pandemic. We need to bring about profound and substantive change to such treatment because there is no best-before date for human rights. They begin at birth and end at death.

Two, Canada needs to lead the development of the United Nations convention on older persons. This convention is about fundamental human rights. It is in perfect alignment with our Canadian values, which we all hold deeply.

Three, time is of the essence. We can't afford to wait to do the right thing for the human rights of older Canadians. We need to act now.

Thank you.

The Chair: Thank you, Ms. Gillis.

Mr. Forth, you have the floor for 10 minutes, sir. Please go ahead.

● (1725)

Mr. Ken Forth (President, Foreign Agricultural Resource Management Services): Thank you, Chair and the HUMA committee, for asking me to appear today.

My name is Ken Forth. I'm a vegetable farmer in Hamilton, Ontario. Our family has been farming for many generations. Currently it's me and my son's family.

I also serve as president of the F.A.R.M.S. operation, the Foreign Agricultural Resource Management Services. We do the administration and logistics for the movement of 25,000 to 30,000 workers to Ontario, Atlantic Canada and Manitoba.

The fruit and vegetable business is very much a hands-on business. As an example, we have been employing people for over 100 years on our farms. Our farm has been involved in SAWP, the seasonal agricultural worker program, for 50 years, having workers from Jamaica.

The workers who work on the farms mean the world to us, much like family. They come here to help farmers, and for that matter, to help Canada to produce food. The result of their work is that they have a better standard of living back home, including education for their children.

The virus that has engulfed the world is most concerning to everyone. I can assure you that all farmers take this very seriously. There is much oversight on our program for the virus, including Service Canada, provincial ministries of labour and the real experts, the local public health officials and departments.

ESDC came out with a protocol just after the April 20 announcement, and the protocol was satisfactory. It was common sense and it worked for everybody. Most of us have been inspected and scrutinized many times this season through the various protocols. Our employees are very pleased with what they have seen, what they have heard and what we're doing on our farms.

Let me be clear: We are very concerned that our foreign or domestic employees remain safe. How else could we think? We isolate new temporary workers for 14 days. When working, we stay apart as much as we can. When there is any way we will be any closer, workers wear masks, glasses or face shields. Farmers have gone to extraordinary lengths, not to mention thousands of dollars, to give confidence to our workers that it is safe. Farmers are very inventive, often going beyond what is required. As an example many have placed barriers in bunkhouses and on farm equipment to ensure a safe working environment.

In closing, the Government of Canada, provinces and local health officials should all be proud of the protocol they have put in place in very short order, and the farm community who responded to it. But here's a final word of caution: This has been very paralyzing for farmers. We have done the things demanded of us and beyond, and if we think we can be even better we do that. But we have five agencies scrutinizing us now. Any further scrutiny or additions will drive farmers away from this industry—some have already left—and make the job impossible: the job of the production of food for Canada.

We've seen the federal government, as an example, have the backs of landlords and multi-billion dollar multinational corporations. We would like them to have the backs of farmers the odd time, and we think we need it now. We are all for the security methods they have put in place to isolate our workers. As an example, on our farms our workers never leave the farm and they don't want to leave it. They tell me they come here to work. They don't want to get infected at a shopping mall or whatever. They put in orders to the local grocery store, and the local grocery store has the order ready every Friday. We pick it up and deliver it to them, and they're very grateful for that. We believe they're really safe and we believe that farmers are doing a better job than they're being given credit for.

That's my presentation to you, Chair.

Thank you very much.

The Chair: Thank you, Mr. Forth, and thank you for being so concise.

Next, from the Migrant Workers Centre, we have Juliana Dalley.

You have the floor for 10 minutes, Ms. Dalley. Go ahead.

Ms. Juliana Dalley (Staff Lawyer, Migrant Workers Centre): Thank you, Chair, and thank you to the committee for the opportunity to appear before you today.

My name is Juliana Dalley. I am a staff lawyer with the Migrant Workers Centre. I'm joining you from Vancouver, on the unceded territory of the Coast Salish peoples. I will be speaking to you today about the impacts of the COVID-19 crisis on some of the most vulnerable workers in Canada—migrant and undocumented workers.

I'm representing the Migrant Workers Centre, a non-profit organization in Vancouver that is dedicated to legal advocacy for migrant workers. Established in 1986, the MWC facilitates access to justice for migrant workers. We provide free legal advice and representation to over a thousand migrant workers each year. We also provide public legal education and do law and policy reform and test case litigation.

Hundreds of thousands of migrants and undocumented workers across the country work in our grocery stores and as cleaners, care workers, truckers, farm workers and in many other occupations. These workers are on the front lines of the COVID-19 pandemic. Migrant workers grow the food we eat and make sure it reaches our shelves. They build our homes, schools and workplaces and keep these spaces clean and safe. They take care of our children, the elderly, those who are sick and those with disabilities. They are some of the heroes that we have been applauding every day.

The COVID-19 crisis has shown how essential these front-line heroes truly are. It has demonstrated the level to which our society depends on migrant workers to perform these low-wage jobs, yet migrant workers are uniquely vulnerable to abuse and exploitation in their employment. Many of them have no means of becoming permanent residents of Canada, as their work is not considered by the government to be skilled enough.

The structure of the temporary foreign worker program renders migrant workers vulnerable to abuse. This is important to understanding the impacts of COVID-19 on migrant workers.

In order to apply for a work permit, a temporary foreign worker must first secure a job offer, employment contract and an approved labour market impact assessment, or LMIA, from a Canadian employer. This process can at times take up to a year. Workers must then apply for a work permit from Immigration, Refugees and Citizenship Canada, or IRCC. The work permit they receive only authorizes them to work for that single employer, in that single job, in that single location. If the worker loses their job, they have to start the process all over again.

It's important to note that migrant workers cannot perform any work to support themselves or their families while waiting for a new work permit to be approved. If they begin working before their work permit is approved, they risk arrest, detention and removal from Canada. This system makes migrant workers uniquely vulnerable. They are unable to speak up about abuse in the workplace or unsafe working conditions for fear of losing their jobs.

Undocumented workers face similar challenges. Many have contributed to the Canadian economy for years, filling labour shortages by working in low-wage and dangerous jobs that are undesirable to Canadians, yet their lapsed immigration status makes them vulnerable to abuse. In addition, they have limited or no access to workers' compensation or publicly funded health care. The COVID-19 pandemic has only exacerbated these vulnerabilities. At the Migrant Workers Centre, we have seen our clients impacted by COVID-19 in numerous ways.

For workers in essential services, including farm workers, they are at a heightened risk of exposure to COVID-19. We have all seen the tragic reports of outbreaks at farms, nurseries and meat processing plants. Many of these workers are migrants or undocumented workers. They are putting their lives on the line so we can eat. Many of them are afraid to go to work, but they can't speak up.

Particularly for farm workers, many of them work in conditions that few Canadians would tolerate. The guidelines published by Employment and Social Development Canada for employing migrant workers during the COVID-19 crisis, in our opinion, do not go far enough to protect these vulnerable workers. I'll return to this point later in my remarks.

On the other hand, many migrant workers are at risk of becoming undocumented because of the COVID-19 crisis. More temporary foreign workers are losing their jobs, and they can't work because they have employer-specific work permits. These workers want to work. We have clients who are health care workers and who want to be on the front lines of this crisis, but they can't. We have clients who want to work on farms, but they can't if they lack the proper work authorization.

Temporary foreign workers who lose their jobs can't renew their work permits easily because they can't secure a new LMIA. Again, the process for applying for LMIA is complex, long and costly, and many employers are unwilling to go through it, particularly in light of the uncertainty we face due to COVID-19.

- (1730)

If a migrant worker has lost their job due to COVID-19 and still has status, they can apply for the CERB, but if their work permit expires and they lose status in Canada, they will become ineligible

for the CERB. If they lose their status, they're in an impossible situation. They can't work to support their families. They can't apply for EI without status. They can't apply for the CERB without a SIN, and they can't leave Canada due to travel restrictions and closed quarters. We have had workers in this situation approach our office, and we have had to tell them that there are no viable legal options for them to work and renew their status or for income support.

We estimate that there are tens of thousands of migrant workers across Canada whose permits may have expired or be expiring since the COVID-19 crisis began. These workers will lose their status through no fault of their own without changes. This will result in many people becoming undocumented. At the same time, we know that employers, particularly in the food supply chain, are facing labour shortages as a result of the crisis. There are solutions. The Government of Canada has the tools to provide relief to the hundreds of thousands of migrant workers in Canada.

I'll now turn to our recommendations.

First, issue open work permits to workers during the COVID-19 crisis. Granting open or unrestricted work permits will allow workers to continue working or return to work in available jobs and to maintain their status in Canada during the COVID-19 pandemic. IRCC should automatically renew work permits to an open work permit during this time or restore workers to an open work permit if they've already lost their status.

Workers with secure status may be less afraid to come forward and report symptoms or to speak up about health and safety concerns in their workplaces. This will reduce the spread of COVID-19. In addition, we know that employers are in desperate need of workers, yet fewer workers are arriving in Canada. Granting open work permits will allow migrant workers who are already here in Canada and who may have lost their jobs to fill these labour shortages quickly and efficiently. This will benefit everyone.

Second, we recommend that ESDC improve its compliance system to prevent abuse of low-wage migrant workers and reinstate in-person inspections. ESDC has a mandate to ensure that employers comply with the regulations imposed on them for hiring migrant workers. However, ESDC has stated that it will not be doing in-person inspections as a result of COVID-19. In our view, this is unacceptable.

It is possible and necessary for ESDC to do in-person and unannounced inspections with appropriate safety precautions. This is a matter of life and death for workers. ESDC has a duty to ensure that workers are kept safe during this pandemic. With no in-person inspection to ensure that employers are complying with the guidelines for hiring temporary foreign workers during COVID-19, we will have a growing public health crisis on our hands. We had seen dozens of cases in our office prior to the pandemic where workers bravely decided to come forward and report abuse to ESDC, only for their complaints to go nowhere. This cannot happen during this crisis. Migrant Workers Centre has endorsed recommendations for improvements to ESDC's guidelines, and we would be happy to share these with the committee.

Third, we recommend that a new permanent residency program for migrant and undocumented workers be created. Even though they are performing essential work that we depend on, many migrant workers such as seasonal agricultural workers, cleaners or grocery store clerks have no way of becoming permanent residents of Canada. They should be allowed to apply for permanent resident status. If they have lost their status, they should be able to regularize it by applying for an open work permit. For too long Canada has relied on migrant workers as a disposal workforce. This needs to change. If migrant workers are good enough to work in Canada, they're good enough to stay as permanent residents. MWC has written to Prime Minister Trudeau and Immigration Minister Mendicino calling on the government to make these changes.

Finally, we recommend that undocumented workers be allowed to access the CERB. During the pandemic, every worker in Canada should have equal access to the CERB. The CERB should be open to people with an expired SIN, or the government can issue a temporary SIN to anyone who applies by suspending the requirement to prove one's status in Canada in order to apply. This will allow undocumented workers to access the financial support that they need and deserve during this crisis.

These are our recommendations for the Canadian government to both respect and value undocumented and migrant workers during this crisis.

Thank you.

• (1735)

The Chair: Thank you, Ms. Dalley. You're right on time.

We'll now proceed with rounds of questions, beginning with the Conservatives.

Go ahead, Ms. Kusie.

Mrs. Stephanie Kusie: Thank you very much, Mr. Chair.

Ms. Gillis, thank you so much for joining us here today. I was actually dumbfounded by the article in *The Globe and Mail* and your words that "human rights don't have a best-before date". Unfortunately, it's the second time we've seen a question of human rights in the handling of this pandemic by this Liberal government.

What the Liberals have attempted to do frequently is to pass things such as care in long-term facilities onto their provincial counterparts, but you have mentioned in the media that the lack of uniform standards for seniors' care at the federal level leaves older

Canadians vulnerable to both elder abuse and tragedies like the COVID-19 pandemic. Would you like to elaborate on this and how you wish to see additional oversight from the federal government?

• (1740)

Ms. Margaret Gillis: To begin with, the issue that's happening in long-term care is a perfect example of where we need federal leadership as well as working together with the provinces and the territories. There has to be quite a reckoning around long-term care as a result of what we've seen during the pandemic. It's really important that something very quickly be struck, perhaps a committee that involves FPT folks, along with experts in the area of long-term care. We really have to look at this from beginning to end. This problem is not simply a case of dealing with long-term care.

We have to look at the whole continuum of care, starting with the issue of home care, how that impacts long-term care and how that impacts the hospital systems. All those things are connected, and if we don't look at them together, we won't have a proper solution. Part of that is the federal role with respect to the Canada Health Act, and part of that work would probably have to involve looking at how we can be more effective and efficient, even in terms of funding.

It's a really important area where we all have to work together at all levels of government.

Mrs. Stephanie Kusie: Thank you for that.

Specific to this, in your opinion, has COVID-19 testing in long-term care facilities been sufficient? What could the federal government have done to improve testing in these centres?

Ms. Margaret Gillis: I think we know there was an issue at the front end of this pandemic in terms of testing. Therefore, "testing, testing, testing" has to be a lesson learned from this, and however we can support the long-term care industry to do that is extremely important.

If you don't mind, might I also flip that question over to my colleague Dr. Rabheru, who is on the front lines?

Mrs. Stephanie Kusie: Certainly.

Dr. Kiran Rabheru (Board Chair, International Longevity Centre Canada): Stephanie, thank you very much for the question.

I just want to set the stage that while this COVID pandemic has really opened up the wounds, or the scabs, shall we say, within our system, we need to go to 40,000 feet and start with the question: Who are we talking about?

If you look around you, I know there's no one sitting with you, but if there were, one out of the three of you will have dementia by the time you're 80 years of age. If you think it's not going to be you, you're in massive denial because it can be anyone. We all know people who have it.

Secondly, we're all getting older. Ageism is very insidious and we are all subject to it, 100% of us. Therefore, we're not talking about someone outside, someone who's from somewhere else, about a virus. It is part of our society.

COVID-19 has just unmasked some of those symptoms that have always been there. Beyond the physical impact of the virus, there has been a substantial increase in non-COVID related issues as well, such as social isolation and the mental and physical disability mortality and morbidity associated with it. There's a lot of work that needs to be done once the pandemic starts to settle, but we really need to look at how we can make our system such that we don't ever have to subject our parents, our grandparents or ourselves in a few years to going through this again. We must do something about this now.

Mrs. Stephanie Kusie: Thank you so much, Doctor.

In addition to that, provincial governments have increased protections for seniors in long-term care homes throughout the pandemic by limiting visitors, providing staff with personal protective equipment and preventing employees from working in multiple homes. Of course, we saw a delay in the closure of borders. Here in my hometown of Calgary, the premier actually had to go to the local airport himself to check out local screening, which was not being implemented by the federal government in good enough time.

Ms. Gillis, should the federal government have intervened so that these steps were taken earlier?

Ms. Margaret Gillis: This has been a very interesting and unusual pandemic in the sense that this virus has acted so differently from other viruses, so I believe the government was following the advice at the time. We have learned since then that there are many asymptomatic persons who are spreading the virus, which is quite different from what has happened in the past.

Again, this is a very important lesson learned, and it is probably a lesson learned all over the world, not just here in Canada. Everyone was caught off guard by that, but I hope we never will be again.

• (1745)

Mrs. Stephanie Kusie: I hope so too.

Do you think the federal government should have provided greater assistance to ensure that all long-term care facilities had enough personal protective equipment at the start of the pandemic?

The Chair: Could we have a short answer, please?

Ms. Margaret Gillis: While they do fall under provincial responsibility, the point we are making broadly is that this needs to be looked at across all levels of government. It has to be looked at also in conjunction with what the federal government does and in the context of looking at the Canada Health Act.

The Chair: Thank you, Ms. Kusie.

Mrs. Stephanie Kusie: Thank you, Ms. Gillis.

Thank you, Dr. Rabheru.

The Chair: Thank you both.

Now we go to Mr. Long, for the Liberals, for six minutes.

Mr. Wayne Long (Saint John—Rothesay, Lib.): Thank you, Mr. Chair.

Good afternoon to our witnesses and to all of my colleagues.

First and foremost, I want to reject the assertion of my colleague who just asked questions regarding how we as the federal government aren't stepping up. I absolutely reject that. We are stepping up. The last time I checked we had Canadian Forces in Quebec. We had Canadian Forces in Ontario. This is not a partisan issue, not one bit. This challenge, with respect to seniors, has been unfolding really over decades. I just want to put that on the table. We all know the challenges that seniors homes are facing.

Ms. Gillis, to your point that 79% of all deaths in Canada are related to long-term facilities, we know we have a major challenge here.

This is my question for you, Ms. Gillis. Seniors are significantly less likely to have access to critical social supports including always having people they can depend on in times of need. Social supports are critical during the COVID-19 crisis as seniors need to self-isolate and are relying on family, friends and neighbours to deliver groceries, medications and other essential items.

Please tell us what the federal government needs to do in the short term and the long term to ensure that low-income seniors are getting the support they need during this period.

Ms. Margaret Gillis: From my perspective, which is as a human rights advocate, having access to the fundamentals of living is a basic right.

We do have old age security and other programs in place. I think what's going to come out of the pandemic, however, are some of the things Dr. Rabheru mentioned with regard to the impact of social isolation and the ability of older people to get access to a lot of the things you just mentioned, such as groceries, when they are socially isolated. Those are some of the lessons that are going to be learned from the pandemic, and we're going to have to look at those and at whether we have those things in place.

Mr. Wayne Long: Thank you.

I'd like to share the rest of my time with MP Vaughan.

The Chair: MP Vaughan, go ahead, please.

Mr. Adam Vaughan: Thanks very much.

I have just a quick follow-up to your questions around seniors. The issue of private care versus public care has been at the heart of many of the challenges we've faced. I'm curious as to what you think about letting more and more private care into the space and having less and less regulation of private care.

Ms. Margaret Gillis: That's one of the problems we are facing right now, and it's one of the pieces that we're really going to have to examine as we go forward.

Once we start to get all of the evidence together about where these real human rights abuses took place and what happened there, that's going to be part of how we respond to this. We are getting to the point where we're kind of in the middle of it. We need to be gathering that data right now and then we'll be able to respond to that.

Mr. Adam Vaughan: I just want to read a quick comment and get your reaction to it. There was a health minister who once said:

Unlike some of our predecessors in Ottawa, who often tried to impose rigid bureaucratic healthcare conformity on the provinces, we have respected their constitutional jurisdiction over healthcare and encouraged their innovations.

This was Stephen Harper's last health minister.

Is that perspective part of what's led to some of this catastrophic failure, the fact that the federal government should step away and only respect provincial jurisdiction and hide behind the Constitution?

• (1750)

Ms. Margaret Gillis: I'm not a big fan of hiding behind the Constitution, and I think this is a time when we all have to work together. That was part of my opening comments.

It's very important for the provinces to work with the federal government to look at this.

Mr. Adam Vaughan: So you would accept a federal role that might step on provincial jurisdiction but make it safer for seniors?

Ms. Margaret Gillis: I probably wouldn't say "step on", but, yes, I would agree.

Mr. Adam Vaughan: Okay.

I have a final question for Mr. Forth—

Ms. Margaret Gillis: Think of Jordan's principle, where we had to protect children after running into the same issues of the differences between provinces and territories and fighting between the federal government and the provinces.

Mr. Adam Vaughan: I have limited time, so I have one question for Mr. Forth from F.A.R.M.S. Canada.

It's on the notion that anybody who comes from one of the countries we draw foreign workers from for our farm sector is a skilled worker. There has been a position advanced by some in Parliament that effectively you could just put students in the farm fields and the crops would be planted and harvested. Would you classify the workers you choose from Trinidad, Jamaica, the eastern Caribbean or Mexico as skilled workers?

The Chair: Thank you, Mr. Forth.

Thank you, Mr. Vaughan. That's your time.

Mr. Ken Forth: I would. You're absolutely right, but we don't choose them. The ministries of labour in those countries choose them, and usually they have to be farm oriented in one way or another.

They talk about putting in students, and lots of us hire lots of students, but our year starts on April 1, if we're outside growers, and it ends on November 15. I think school is on during most of that period, and we would be desperate without this program.

These guys actually like doing what they do. They really do. They do it at home and they do it here. They earn a lot here and they take it home. To think that they're abused—my gosh. They're a part of my family and always have been for 50 years. I've had people working here for over 35 years straight before they retired. They really are skilled workers because they like to do what they do. What they do is not tough work. On our farm there's no heavy lifting. There's none of that stuff. They just love to produce this stuff, and it works really, really well.

[*Translation*]

The Chair: Ms. Chabot, you have the floor for six minutes.

Ms. Louise Chabot (Thérèse-De Blainville, BQ): Thank you, Mr. Chair.

First of all, on behalf of seniors, I would like to thank the representatives of the three organizations for their presentations.

I would like to come back to the testimony from the International Longevity Centre Canada about our seniors. Given what we are experiencing in the current COVID-19 crisis in each of our provinces, I think everyone is saying that now is the time to take stock and act swiftly regarding seniors' living conditions. Already, before the crisis...

The Chair: I'm sorry to interrupt you, Ms. Chabot, but the interpreters would like you to speak a little closer to the microphone, please.

Ms. Louise Chabot: Okay.

This subject raises all kinds of considerations. Will we be dealing with misconduct or abuse? I also feel that this situation has never happened before and it needs to be addressed.

Coming back to seniors' rights, you spoke less about their financial insecurity, which has become particularly more evident with the COVID-19 pandemic. The Bloc Québécois has made demands in this regard. What is your opinion on the issue?

[*English*]

Ms. Margaret Gillis: I'm sorry. Your question is whether I am concerned about the financial precariousness of older people. Is that correct?

Ms. Louise Chabot: Yes.

Ms. Margaret Gillis: Of course we are. I think we're also very worried about older people and their access to funds, and the financial impact of COVID-19 on them. I think that's another area that we'll have to be watching to make sure that funding gets through to older people.

Generally, we know that older women tend to be the ones who live in poverty in our country, and older women represent the large majority of older people, so we are always supportive of ways in which that's being watched and taken care of.

Thank you for your question.

• (1755)

[Translation]

Ms. Louise Chabot: I do not really agree that certain areas of jurisdiction could be assigned to Ottawa. We must always remember that health and social services fall under provincial jurisdiction. Each province will have to take its own stock of this issue. Another major factor is the health transfer, which gives the provinces the ability to act.

Now I'd like to address Mr. Dalley of the Migrant Workers Centre. Thank you for your presentation. The whole issue of migrant workers is a topical one: we need migrant workers, but we do not have all the workers we should be able to rely on now, especially in the farming sector. How many foreign workers do you feel should theoretically have come back this year, and how could we have facilitated their return?

[English]

Ms. Juliana Dalley: As I understand the question, you're wondering how many workers come and how the process can be better facilitated. To my knowledge, tens of thousands of agricultural workers come to Canada each year, across Canada. In terms of the precise process, there are numerous programs that people can arrive under. I believe the largest proportion come under the seasonal agricultural worker program that we heard about from Mr. Forth. These workers come for a short period of time, usually up to eight months per year, and then they return to their home countries at the end of the season.

As Mr. Forth said, many of these workers have been coming to Canada for many, many years. I do appreciate that some of them may not have experienced abuse, and that is great, but some have—

[Translation]

Ms. Louise Chabot: I will clarify my question.

This year in Quebec, barely half of the 15,000 foreign workers usually employed in agriculture were able to come to work here. Beyond the border issue, how could we have made it easier to welcome them?

[English]

Ms. Juliana Dalley: We are recommending that workers be granted access to permanent residency in Canada. This would allow them to remain in Canada and have the same rights and benefits that we as Canadians expect. They would have the option to change employers if they are experiencing abusive working conditions. This secure status would give them a greater ability to speak up about abusive working conditions. It would allow them to be with their families in Canada. Many of these workers are separated from their families for many, many months of the year.

Overall, this is something we need to do because of COVID-19 but also beyond COVID-19, because we rely on these workers and this workforce. This may in fact lead to a more secure workforce for the future in Canada if these workers are permitted to stay.

The Chair: Thank you, Ms. Dalley.

[Translation]

Thank you, Ms. Chabot.

[English]

Next we have Ms. Kwan for six minutes, please.

Ms. Jenny Kwan (Vancouver East, NDP): Thank you very much, Mr. Chair.

Thank you to all of our witnesses.

Ms. Dalley, on the question of migrant workers and undocumented individuals, one of the issues in the middle of the COVID-19 pandemic is that some of them may have lost their jobs and their status. The timing was such that those two things literally collapsed together in the same time frame.

If you lose your job and your work permit expires, you cannot renew, because your employer-specific status will not allow you to renew. To that end, do you think one way to deal with it would be for the government to allow people who have expired SIN numbers to collect CERB? Is that something you would recommend?

• (1800)

Ms. Juliana Dalley: Yes, certainly. We would recommend that people with expired SINs be able to access benefits.

Many of these workers have been working in Canada. They've been contributing to the labour market. Like many other Canadians, they are in this unprecedented crisis and, having lost their jobs, they deserve access to the same income supports that others can access. Allowing this for workers with expired SINs, or allowing people to apply for a temporary SIN without proof of status, are measures that we would recommend.

We would also recommend that people be able to apply for open work permits, which would also both facilitate access to income support and, even more so, allow people to return to the labour force and actually work in some of these jobs where there are labour shortages.

We would recommend both of those measures.

Ms. Jenny Kwan: Thank you.

In fact, one issue for people who have a work permit that's going to expire is that IRCC is experiencing difficulties in processing, hence there are delays. As a result, people are really left out in the cold.

Would you recommend that IRCC actually automatically extend people's work permits during this period and in fact open it up from an employer-specific work permit to an open work permit?

Ms. Juliana Dalley: We would recommend that measure. This would be an efficient and timely way of allowing workers to maintain their status and to return to work as quickly as possible. The problem, as you've alluded to, is that when a worker is waiting for a change in work permit conditions or an extension of their work permit to process, they cannot work for anyone other than the employer listed on their work permit. If they've lost that job, they have no way of supporting themselves and their families.

Allowing workers to access open work permits, including by automatically renewing expiring work permits to open work permits, would be a quick and efficient way for those workers to return to work in available jobs, maintain their status in Canada and continue to work and support themselves.

Ms. Jenny Kwan: Thank you very much.

I have just one last quick question on this topic. As another way for the government to ensure that undocumented workers are staying safe—and not just for themselves, but in the spirit of flattening the curve for everyone else as well—what about the government utilizing the ITNs so that people can get financial support during this difficult period?

Ms. Juliana Dalley: I think we would support the government making that financial support available to workers, both undocumented and documented workers, by any means necessary. If it's simpler for the government to use the ITN, we don't see an issue with that, as long as workers can access the financial support they deserve.

Ms. Jenny Kwan: Thank you very much.

I'm going to turn to the question of seniors now for a minute. We know that with the care facilities, part of the issue is that there are no national standards, if you will, in long-term care facilities. That happened in B.C. as well, where there were a lot of long-term care facilities privatized. People were forced to work in unsafe conditions and sometimes in multiple facilities.

As a quick question on that, Ms. Gillis, I think I heard you say that we need to actually have national standards for long-term care facilities across the country. Did I hear you correctly on that?

Ms. Margaret Gillis: Yes. I think that's an absolutely excellent idea. For all of these issues, all of the questions you have asked me really link back to the issue of rights and doing what's right and what people need.

National standards are one great example, but I'm going to go back to the point that, honestly, I think we need to start thinking about older people in a whole different way. We need to address ageism. That comes out in all of the ways that long-term care has been handled, with the defunding of it and the problems with workers. They're all connected.

I would take it back to “let's get a convention”. Let's treat these people as rights holders, and let's make everybody think before they make decisions on seniors that lead to problems like those we see today.

• (1805)

Ms. Jenny Kwan: Thank you.

Before my time runs out, I will note that in the interim we have a situation where a lot of seniors are very worried about their GIS. Even though the deadline to file income taxes has been moved to the end of June, people may not be able to get their taxes filed in time. During this period, would you suggest that the government should simply grandfather people for this year for the GIS so that they would not be penalized if they don't get their income taxes filed in time?

The Chair: A short answer, please.

Ms. Margaret Gillis: I don't have a lot of knowledge of the GIS and that whole process, but here's what I'm going to say. I think whatever we can do to help seniors, particularly those living in poverty, we need to assist them in every way that we can.

Ms. Jenny Kwan: Thank you very much.

The Chair: Thank you, Ms. Gillis, and thank you, Ms. Kwan.

This completes our first round. I want to offer a sincere thank you to all of the witnesses for being with us. Your testimony has been extremely helpful.

We're now going to suspend briefly while we do a mike check for the second panel of witnesses.

Have a good evening, everyone, and thanks for joining us.

MPs, we'll be back shortly.

We're suspended.

• (1805)

(Pause)

• (1813)

The Chair: We are now back in session and would like to welcome our second panel.

Appearing as individuals, we have Dr. Jeff Preston from King's University College at Western University and Dr. Jennifer Robson from Carleton University.

[*Translation*]

Finally, we welcome the coordinator of the Mouvement autonome et solidaire des sans-emploi, Sylvain Lafrenière.

[*English*]

We will now proceed with your opening remarks.

Dr. Preston, you have the floor for 10 minutes.

Dr. Jeff Preston (Assistant Professor, King's University College at Western University, As an Individual): Thank you. Good evening.

To start, I would like to thank you for inviting me to provide comments and suggestions to this committee.

A rally cry of the disability rights movement is to say “Nothing about us without us”, and consultations such as this are an important part of giving a voice to a population that historically has been spoken for rather than collaborated with.

My name is Jeff Preston. I'm an assistant professor of disability studies at King's University College at Western University in London, Ontario, which is situated on the traditional lands of the Anishinaabek, Haudenosaunee—

[*Translation*]

Ms. Louise Chabot: Mr. Chair...

[*English*]

The Chair: Just a second, Dr. Preston.

[*Translation*]

Ms. Louise Chabot: I am not hearing the interpretation.

The Chair: Okay.

Can we fix Ms. Chabot's issue?

Mr. Sylvain Lafrenière (Coordinator, Mouvement autonome et solidaire des sans-emploi - réseau québécois): It was the same for me too.

• (1815)

[*English*]

The Chair: Dr. Preston, the floor is yours. I'm sorry for the interruption.

Dr. Jeff Preston: No problem.

As I was saying, I am an assistant professor of disability studies at King's University College at Western University in London, Ontario, which situated on the traditional lands of the Anishinaabek, Haudenosaunee, Lunaapéwak and Attawandaron peoples.

My research and teaching practice at King's seeks to excavate the cultural construction of disabled subjects and the ways that popular culture and policy frameworks naturalize and reinforce sane, masculine and able-bodied supremacy. I am also a person born with a physical impairment, a rare form of muscular dystrophy, who identifies proudly as a disabled person. I have used an electric wheelchair since early childhood to make trouble in our world.

While the global COVID-19 pandemic has only recently been recognized as a world-altering event in need of critical resources and policy redeployment, the virus has been on my mind since it has spread beyond the borders of China. COVID-19 represents a unique, exigent and existential threat for someone like me with muscular dystrophy, a disease that most often proves fatal due to pneumonia. With lungs that function at approximately 30%, it is unlikely that I would survive this virus. It is for this reason that I have been attempting to live in relative isolation since early March. But this attempt has proven uniquely challenging, given the fact that I cannot physically live independently. Significant reduction in muscle mass means that I cannot provide for myself the day-to-day requirements of life, from eating to hygiene to repositioning at night. All of these things require daily care routines, tasks that are all delivered in close proximity.

My PSWs, funded through the self-directed funding program in Ontario, drift in and out of my orbit throughout the day. Many of my PSWs are reliant on public transit, as their low wages can make personal vehicle ownership a luxury out of reach after covering the costs of living. At any moment, my staff could accidentally bring the virus into my home and, because of PPE and sanitizer shortages, I have struggled to erect adequate barriers between me and the outside world. At times, my catching the infection seems like an inevitability.

Aside from the obvious physical and viral challenges of COVID-19, a nagging terror felt by me and many of my friends with impairments revolves around whether or not care will be delivered should we become infected. As the primary fear of imminent death slowly burns away, I, like many others with underlying medical conditions, now fear that the illness is not the only thing that may end our lives during this pandemic. Failing support systems may be just as deadly.

For someone like me, the COVID-19 pandemic draws into focus the feeble and unwinding threads of sociomedical entanglements that struggle, at the best of times, to carry the weight of my disabled existence. Access to technicians able to service my adaptive devices, from my electric wheelchair to my cough-assist machine, becomes fraught in a world of social distancing. Early in the pandemic, the ADP, the assistive devices program in Ontario that funds the purchase and repair of this equipment, was deemed non-essential and shuttered.

If I catch the virus, workplace safety standards will require all of my staff to wear non-existent PPE to continue to safely deliver care in-home. If I'm hospitalized, strict visitation restrictions will mean that I will lose access to my support team, becoming fully dependent on overworked nurses to provide the near 24-7 care that I cannot do for myself.

As we heard several weeks ago, in British Columbia, in the case of Ariis Knight, admission to hospital could mean profound isolation, being cut off not just from social contact but also from the delivery of necessary hour-to-hour care that keeps us safe from a whole host of other comorbid threats to body and mind.

We are told that, depending on our ability to flatten the curve, hard decisions will need to be made about who can and who cannot be saved. We may be asked to debate the value of a person to determine how productive or survivable one must be to merit receiving care. Those of us most at risk, disabled people and seniors, are now facing the cultural and legal pressures of necropolitics, asked to sacrifice ourselves for the benefit of those deemed more valuable. While we may have vilified the word “eugenics” after the Second World War, the ideology remains alive and well in Canada, lurking under the auspices of triage and the way of nature.

• (1820)

In the here and now, what do disabled people in Canada urgently need? The answer to that question is absolutely massive, but I do have several recommendations derived from my own experience and those whom I am in contact with.

First, I think it is vitally important, in overt and unequivocal opposition to eugenic rationalities, that the Canadian government affirm the rights of Canadians with disabilities to fair and equal access to medical care and prohibit any type of value or quality-of-life-based triaging of medical equipment or supplies. These types of policies, I believe, are antithetical to the spirit of the open, diverse and caring country we have tried to build over the past century. Remember, without disabled Canadians, the world would not have marathons of hope, a newscaster turned lieutenant governor, or the *Back to the Future* trilogy.

We must also ensure that, once a vaccine is developed, distribution is prioritized to those most in need, such as front-line workers and those with underlying conditions, and not just based on economic or productive value.

To ensure the safe isolation for those needing in-home care, easy and affordable access to personal protective equipment is critical, including masks, gloves, and alcohol-based sanitation supplies. We also need to consider increasing funding support for the types of increased care that may be needed at this time, as some tasks that were previously able to be done independently may now require help from the outside. I believe that we need to validate in-home care staff and family caregivers as vital members of an individual’s health care team—not as a social visitor—who can provide important additional support in a time when our hospitals struggle with capacity issues.

We must secure our long-term care facilities to prevent the spread of the virus from unit to unit and from facility to facility. Supporting provincial efforts to care for the caregivers is critical, including increasing PSW staffing numbers and providing regular paid time off for recharging of batteries or fighting off sickness. Scaling up the number of people working in these roles, I believe, is critical. This also means, though, a need to re-examine past practice where we warehoused disabled people of all ages in medical facilities, not because they need medical care but because of a lack of affordable accessible housing.

We need to ensure access for those seeking cognitive, intellectual and emotional therapies or services for pre-existing or newly developing mental illness or distress. Many of these services were deemed non-essential in the early days of the pandemic, with hospital resources being redeployed elsewhere, but it is important for us

to get these services back online quickly for those who really do depend on these services and programs.

I think we should also reflect on the federal government’s determination that those without work need about \$2,000 per month plus up to \$1,000 in earnings to weather the storm. Meanwhile, programs like the ODSP in Ontario have long expected disabled people to subsist on a little over \$1,000 a month. Why is the cost of living for those with and without a disability presumed to be so different? What does this tell us about the fairness of these programs that are aimed to provide a life for those unable to labour in a physically or attitudinally inaccessible economy?

When I was young, I loved to play with Lego, but not really the building part. I wasn’t very good at that, but I was really good at tearing things apart. There’s something really special or magical about those moments, not just the wanton destruction, but because of what it signals, that in the ruins of the destroyed project lay the building blocks of the next great edifice.

In confronting this threat, we need to ask ourselves not just how we survive today but how we will live with ourselves once it has passed. COVID-19 may mean that the world we knew several months ago is gone, but maybe that isn’t all bad news.

What if in post-COVID Canada we spent more time enabling people rather than disabling them? What if we reimagine our health care systems to be ones of plenty and not austerity? What if the flexible and digital work arrangements currently offered to non-disabled employees were extended permanently for employees with disabilities who have long been asking for this type of access? What if we provided Canadians with the things they need to thrive, regardless of their cognitive or physical ability?

• (1825)

I look forward to imagining some of these possibilities with all of you today.

Thank you.

The Chair: Thank you, Dr. Preston.

We’ll move to Dr. Robson, please, for 10 minutes.

Professor Jennifer Robson (Associate Professor, Carleton University, As an Individual): Thank you, Mr. Chair and members of the committee, for the opportunity to join you today. I'm Jennifer Robson, an associate professor of political management at Carleton University.

To try to minimize some of the technical problems that I've been aware of in recent meetings, I am going to deliver my remarks today in English only. I do apologize in advance, particularly to Madame Chabot and Monsieur Lafrenière, but I just know that I will make a mess of things if I try to think about what I'm saying and click different languages back and forth. I do apologize.

My remarks today are informed by my research on Canadian social policy and by the countless inquiries that I've received from Canadians about the emergency income supports during the pandemic. Members of the committee may be aware that since March 25 I've been regularly updating a plain-language summary of income benefits. In fact, I just posted an update to that before beginning the testimony today. Finally, I'm also speaking as a mom of three who, like millions of parents, has been trying to figure out how to juggle full-time work and home-schooling at the same time.

I've previously described the economic shutdown due to COVID as a medically induced coma. As a country, we might be slowly starting to come out of that coma, but we're still not able to do much without some kind of life support. As we regain consciousness, there are some important truths that we need to grapple with.

COVID-19 hasn't hit all Canadians equally, whether in health or economic effects. I'm going to focus on four different kinds of inequalities that have mattered in the crisis and will continue to matter during the economic reopening and eventual rebuilding.

The first one is inequalities in information and technical capabilities. There has been uneven information and help for individual Canadians to understand and use government benefits. At the same time, it has been evident that government has not always had adequate data or IT systems to be able to launch or adapt programs as nimbly as policy-makers, or the public, might want.

The second one is inequalities in the financial resources that households have to self-insure against an income interruption and the inevitable need to wait, even a short time, for government help.

The third one is inequalities in how COVID has impacted paid work. There are people whose work has been largely immune to the shutdown, workers who were suddenly deemed essential, too many Canadians who suddenly lost all or most of their paid work, and then there are those whose pre-COVID unemployment has been significantly prolonged.

Finally, the fourth one is inequalities in the responsibility for unpaid care and unequal opportunities to fully participate in the economic reopening and eventual rebuilding.

Let me add a little more detail and offer some recommendations to the committee.

The Government of Canada does not have enough information about Canadians or the computer systems to be able to design and deliver income supports in a way that can nimbly handle big month-over-month changes in employment and income. The fact

that the back-end system that runs EI was able to ramp up from processing an average of five claims a minute to processing 1,000 a minute is nothing short of a public administration miracle.

As you heard from the deputy minister himself, there is much we cannot do as quickly as we should, or even at all, because our IT systems cannot handle rapid changes or fine-grained exceptions to general rules. While many have touted a national basic income as the right answer, the fact is there is no magic list of Canadians to be able to find and send a cheque to everyone, let alone whoever would meet the eligibility criteria that Parliament might set. Therefore, I hope this committee might support a plan to invest significantly, and for the long-term, in the back-end capacity of government so that we are better placed to not only prepare for the next macroshock but to also address the wide range of needs of Canadians who experience microshocks all the time.

Too many Canadians find government programs confusing. They are confusing. Online frequently asked questions and call centres are no substitute for personalized guidance and help. I don't have to tell you as MPs how important it is that Canadians have access to local, accessible and accurate help to use government programs. You and your constituency teams have been playing a vital role in connecting people to the help they need, but you can't do it all. No one network could.

We need to build a properly resourced web of non-profit, no-fee services to answer questions, problem solve and advocate for clients who can't do it themselves. Here I would encourage the committee to look into the Citizens Advice bureaus in the United Kingdom or the Financial Empowerment Centers in the United States as sources of inspiration.

Many Canadians are going to continue to need income support for the next while, and they will need active measures to get them back into the workforce. We have to hope that the emergency wage subsidy will mean that some share of layoffs won't become permanent. However, many sectors that were the hardest hit in job losses, sectors such as accommodation and food services, retail trade and education services, are also lower down the list for reopening in provincial plans. We want to incentivize work, but work that is safe to do.

The emergency programs such as CERB are going to have to be wound down gradually and likely morphed into more nimble designs that can handle a wider range of cases. This is going to be hard to do, in large part because of the same gaps in federal data and IT that I mentioned a moment ago. Work should also be under way now with provinces to adapt and expand active-measure employment programs so that they can be more effective, handle increased demand and work within the constraints imposed by social distancing, which is likely to continue for some time.

One-third of Canadians came into this crisis without enough liquid savings to pay for even a poverty-line standard of living for one month, let alone keeping themselves at their usual level of consumption. A bit of additional liquidity in the form of mortgage and tax deferrals will have helped some, but part of the rebuilding phase is going to have to be rebuilding household finances, and I hope the members of this committee will work with colleagues on the finance committee and others to find better tools to help households reduce debt and build emergency savings.

- (1830)

Finally, too many families with kids are going to face awful and unreasonable choices during the reopening, as they continue to juggle unpaid care and returning to paid work or a job search. By best estimates, two-thirds of the lost employment in March—and we'll get updates on Friday in terms of those lost hours of paid work as well as jobs—was among women, but it is moms who lost the most paid work, more than other women without kids and more than dads.

Provinces are taking a range of approaches to reopening, but it increasingly looks as though most elementary schools will not be able to reopen until September. Child care services that were already unable to meet demand precrisis won't be able to operate at full capacity for some time to come. I worry about the potential loss of child care spaces as operators lose revenue and lay off staff. I worry about mothers being left out of work or job hunting, even as governments lift public health restrictions. I also worry what will happen to household finances if, on average, 40% of the earned income of the family vanishes because mom has to stay home with the kids. This isn't a private problem for families to solve; it's a macroeconomic disaster waiting to happen.

With provincial agreement, federal support should be directed at protecting existing child care spaces when current revenues put a centre's viability at risk. We should also increase the number of child care programs that can work within provincial health guidelines so that parents, and moms in particular, can participate in the economic reopening and eventual recovery.

Thank you. I look forward to your questions.

[*Translation*]

The Chair: We will continue with Sylvain Lafrenière of the Mouvement autonome et solidaire des sans-emploi.

Mr. Lafrenière, you have the floor for 10 minutes.

Mr. Sylvain Lafrenière: Thank you very much, Mr. Chair, committee members.

I feel my comments follow on well from Ms. Robson's.

I speak on behalf of the Mouvement autonome et solidaire des sans-emploi, or MASSE. We are a coalition of around fifteen organizations in Quebec spread across most of the province's regions. Most of our groups are particularly active on the issue of employment insurance, but a few also work in related fields, such as income security, social assistance, and workplace health and safety.

We offer a variety of services: individual support for those involved in a review process or a proceeding before an administrative tribunal, general legal information, and training and information sessions for other stakeholders, particularly in the union movement. Personally, I represent the Mouvement in dealing with political bodies and other stakeholders in the field.

Our network is fighting for a fair and universally accessible unemployment insurance system. Let me remind you that this has been an important goal of ours for a long time. Let me also remind you that the employment insurance program has been under attack since the 1990s and, since then, it has not been substantially improved, despite periods when the unemployment rate was quite low, particularly in recent years.

This background is important because, at the beginning of the crisis, we were very concerned about the government's capacity to meet the demand that was expected to be, and indeed was, very strong. MASSE had already begun to make representations regarding unusual delays in processing claims. Since November, several groups have spoken out about the situation. The 28-day period was being exceeded for an increasing number of files. We were concerned and wondered how Service Canada would manage to meet the high demand that was coming.

We also wondered what happened to claims filed before March 15. Were they processed, or were they late due to the subsequent influx of claims? This is a question we are currently asking the government.

In this context, we appreciated the announcement of the Canada Emergency Response Benefit, or CERB, and more importantly, that it was assigned to the Canada Revenue Agency, which probably allowed for more efficient processing of claims. We applauded...

[*Technical difficulty*]

Pardon me, did someone say something?

• (1835)

Ms. Louise Chabot: There is a problem, Mr. Chair.

The Chair: Yes, clearly something went wrong. Is it fixed?

Ms. Louise Chabot: Yes, it's fixed for me.

[*English*]

The Chair: Mr. Vis, you had your hand up. Did you have a point of order?

Mr. Brad Vis (Mission—Matsqui—Fraser Canyon, CPC): Yes, Chair.

It's already 3:38 p.m. Pacific time, and as all three of these witnesses are excellent, I want to ask all committee members for permission to extend our meeting to ensure two rounds of questioning, to respect all of the witnesses who came forward today.

Thank you.

The Chair: That question should probably be extended to the House of Commons folks. There are significant demands on our resources.

Can we have Mr. Lafrenière complete his statement? That will give the House of Commons folks time to figure out whether that's possible. Then I'll come back to the point of order.

Mr. Brad Vis: Thank you, sir.

[*Translation*]

The Chair: Mr. Lafrenière, you may continue.

Mr. Sylvain Lafrenière: Thank you.

What people particularly appreciated about the CERB is that a great deal of effort went into simplifying the process and that a somewhat unusual eligibility criterion of \$5,000 in income was introduced. The rationale is slightly different from the employment insurance program. It is also a shortcoming in the current employment insurance program to which we have been objecting for a number of years. The criterion has given many part-time workers access to the CERB.

Another positive feature of the CERB is that it has helped the self-employed, who in fact make up more than 15% of Canadians. The vast majority of them would not have been eligible for employment insurance because, in many cases, they do not pay into the plan. Even today, the system is not tailored to them. For us, this is a positive measure, but it also proves quite clearly that the employment insurance system needs a complete overhaul. This is some-

thing that we will have to consider later, because it has still not been done.

On the other hand, we note that some irritants arise from the CERB, including the question of voluntary leaving, which is still not allowed under the law as we understand it. In our opinion, this is a step backwards because it is permitted under certain employment insurance rules, subject to certain conditions, of course. One of the conditions involves health and safety. When health and safety are at risk, voluntary leaving is allowed. It is not allowed in this instance, and in our view, that clearly puts certain employers' workers at a disadvantage.

I know that this is not the case everywhere in Canada, but in Quebec, we are starting to talk more and more about lifting the lockdown. We get the impression that this could give an undue advantage to some workers, especially since, to our knowledge, the wage subsidy rules are not very restrictive for employers when it comes to protecting their employees. They could take advantage of them to chip away at certain working conditions.

In addition, we welcome the subsequent expansion of the CERB. I am thinking specifically of the addition of workers in seasonal industries. I am also thinking of all the people who had suffered significant financial losses, but continued to receive a modest portion of their usual income. We can also add people who recently reached the end of their employment insurance benefits, and were faced with a job market that was almost non-existent in some sectors.

We can only deplore the fact that it took the government a little while to add these people to the original program. This has caused a sense and a period of uncertainty, particularly among people in areas where, of course, seasonal work is important.

We were a little disappointed with the CERB for students, which provides a smaller amount than the CERB. We have been very involved in the debate around this issue. It seems that certain things were not taken into account. For example, given the minimum wage in Quebec, \$1,250 represents, roughly speaking, part-time employment income for three days a week. That is not the kind of job most university students are looking for at this time. These are mostly students with modest incomes who need to earn an income in order to continue their education. We found the rationale that this would be some kind of disincentive a little bizarre. That is not what we see with the majority of these students, who are struggling to study and working hard to get there.

What we also object to with the CERB is that there are still no legal regulations. To give you a concrete example, we still do not know whether there would be any recourse for someone who has been denied the CERB. It really bothers us because we sometimes need to represent people.

• (1840)

We are concerned that we do not know whether or not a recourse mechanism is in place and that, if there is, we are unaware of it.

We also deplore the continued shutdown of Service Canada offices across the country. Of course, we are not asking that the offices reopen completely and normally, but we consider it an essential service that must be provided to the public.

It should be noted that the unemployed who are most likely to turn to this type of service are the most vulnerable groups in society. They include low-income individuals in remote areas with limited Internet access—I must say that in Quebec, we are still experiencing difficulties in that respect—as well as people with little education and seniors who have trouble with digital technology.

I will conclude my presentation by saying that MASSE was also quite disappointed with the government's lack of consultation, particularly with our agencies, both from the Minister's office and from Service Canada. We understand that the situation was urgent and that decisions had to be made quickly. These were major measures that needed to be implemented quickly, and we understand that very well.

We have read that the emergency programs will only last a few months, but the recession is coming and it will hit hard. However, we hope that, moving forward, the government will set up measures to consult with civil organizations to help it reflect on future programs.

I will simply conclude by thanking you once again for your invitation to appear, on my behalf and on behalf of all our member groups.

Of course, I will be happy to answer any questions about my presentation or other aspects of employment insurance that I did not have time to address today.

• (1845)

The Chair: Thank you very much, Mr. Lafrenière.

[*English*]

Colleagues, we are about 14 minutes from the end of our scheduled time for Mr. Vis's point of order. If we were to do a full round of questions, that would take us about 10 minutes past that time. I don't think that's unreasonable and I have the assurance of the staff that they are okay with that.

I welcome your comments, but two full rounds would take us about 30 to 40 minutes past time, which I think is bordering on unreasonable, but I'm in the committee's hands. My suggestion is that we do one round, which is six minutes for each party, and we wrap up after that.

Very well. I see a few thumbs-up on the screen.

We will start with six minutes, with Mr. Albas for the Conservatives.

You have the floor, Mr. Albas.

Mr. Dan Albas (Central Okanagan—Similkameen—Nicola, CPC): Thank you, Mr. Chair.

Thank you to all of our witnesses for their expertise and for being in front of this committee today.

I'd like to start my line of questioning with Dr. Robson.

One topic I have repeatedly canvassed for here at this committee is the tragic case of pregnant women being denied the CERB by Service Canada. The minister has pledged to fix this, and you argue that it is an IT problem. Our systems are antiquated and plans to fix them are years out.

Could you speak about this issue a bit, please?

Prof. Jennifer Robson: My understanding is that the issue is that pregnant women who are applying for the CERB through Service Canada are of course accurately declaring they are pregnant, and then finding they are being shuffled into maternity benefits. If I understood correctly from the testimony of the deputy minister last week, this is because the back-end system that runs the employment insurance side of the CERB, separate from the CRA-administered side, is not able to distinguish or to handle those exceptional cases.

In normal times it is not uncommon for expectant women who find themselves laid off to take some time of regular EI benefits, and then transition to maternity or parental benefits, sometimes with an adjustment to the number of weeks they will qualify for. I do not have a full sense of, and I was not able to glean from the deputy minister's testimony, exactly the nature of the technical limitations, but I did note that he referred to the antiquated system of COBOL, which is older than me, so that's getting up there in years.

Members may be interested that, on my Twitter feed over the weekend, I posted a brief snapshot of COBOL code, which does only one thing: It prints records from one file onto a piece of paper. It struck me that if that is the complexity of the code required to simply print something, then creating exceptions to cases, to tell a long-standing system to do something different, to make an exception that if somebody says she is pregnant she can still receive the CERB, must be rather complicated from an IT perspective.

That said, I am disappointed because it struck me that this is obviously a series of cases that ought to have been expected. I have not heard similar concerns for women who have been applying through the Canada Revenue Agency. I wonder if it might not be worth the committee's time to pursue and understand how the back-end system is different at the CRA relative to Service Canada.

• (1850)

Mr. Dan Albas: You mentioned being local and accessible, and our offices are trying to do that from all sides. We've spoken to other people who have told us it's not a technical issue. They've been told the CERB legislation actually precludes expectant women, and Service Canada staff has cited specific parts of the legislation to justify that.

The minister has said that's not true. Do you think this is just a failure of training? I know you said it could be the back-office COBOL, but to me, we need to get an answer for these expectant mothers.

Prof. Jennifer Robson: I have read the legislation myself and provided some comments to one of the first media reports that broke the story around expectant mothers. My reading of the legislation, Bill C-13 that created the CERB, is that it does not exclude expectant women. It does contain a provision that says you cannot simultaneously claim maternity or parental and CERB benefits, but it also does acknowledge those same benefits as contributing to the minimum \$5,000 of work income to qualify. It seems to me the legislation does anticipate there might be some workers who are in fact pregnant or have had children, and they still require the CERB.

The reports I have heard have included mixed messages from Service Canada personnel when they're called. I think that individual Service Canada officers are no doubt trying to do their best, and that with exceptional cases there is no doubt confusion as to what the exact rules are. To some degree the answer you get might depend on the time of day you call and who happens to be on duty that day. That's why having clarity and having access to additional and local support to problem-solve will always be important in my view, no matter the kinds of programs government is developing.

Mr. Dan Albas: Do you think the fact that the CERB was able to be implemented fairly quickly, and pay people just as fast, shows that a half-decade timetable on fixing an antiquated system like EI is simply unacceptable?

Prof. Jennifer Robson: I'm not an IT expert, so I won't be able to comment, unfortunately, on the acceptability or the accuracy of a timetable for updating software. I do understand—and it's been reported in the media—that several legacy systems within the Government of Canada are mission critical in delivering key employment and income supports to Canadians, and they are all in need of serious updating. It's a long-term project. I do hope that work will be done to ensure not only adequate resources but also public support to be able to sustain the project.

The Chair: Thank you, Dr. Robson.

Thank you, Mr. Albas.

Mr. Vis, I see your hand raised. Do you have a point of order?

Mr. Brad Vis: It was related to the earlier point. You missed it when I raised my hand.

I would ask whether those of us who were not able to ask questions, because I did have a lot for Mr. Preston and Ms. Robson, could receive their email addresses so that we could follow up after the meeting.

Thank you.

The Chair: Thank you, Mr. Vis.

Next we have, from the Liberals, Ms. Young for six minutes.

Go ahead, please.

Ms. Kate Young (London West, Lib.): Thank you very much, Mr. Chair.

Thank you to all the witnesses today.

Dr. Preston, I'd like to talk to you and ask you a few questions if I could. I want to thank you for bringing us the hard truths of this pandemic and the impact on Canadians who have disabilities. You

raised a number of issues, but I'd like to start with a very general question.

How do you think the government has responded, in general terms, to this pandemic?

Dr. Jeff Preston: I have a lot of answers to that question. I would say, right off the top, that personally I have been very appreciative of the way in which the government jumped into action right away, putting out messaging around social distancing and taking it seriously by not trying to carry on as though it was business as usual. I think that was a critical step. That meant not just that I was able to shelter at home safely but also that my support workers, for instance, were also able to keep themselves isolated. I think that was absolutely critical.

I also think that the CERB is a great move if only for the fact that it is going to mean some more money in the pockets of people with disabilities, provided they have been able to work previously. This, I would say, is maybe one limitation. There are a lot of individuals who would be on programs like ODSP who are not able to access it because they haven't earned money. They've only had their support services.

The other issue that we're hearing about now is that this income will be treated as income, meaning that ODSP payments in Ontario will be clawed back for those who do receive the CERB, so you're adding another layer of paperwork now for people with disabilities in terms of reporting and keeping track. They'll actually have to put the money away, and that's a complication.

• (1855)

Ms. Kate Young: I appreciate that and I think it speaks to how we hope the provincial governments will decide not to claw it back.

In your presentation you talked about caring for the caregivers. Last week a motion was passed by unanimous consent for the government to implement measures to provide additional support for persons with disabilities in order to assist with extraordinary expenses incurred as a result of COVID-19 and to examine the best way to do this.

I wonder how you hope this additional support will help you and your PSW.

Dr. Jeff Preston: This additional support is absolutely critical, particularly for those who are using or who need staff to help support them. Already for me—and I'm a university professor and I'm paid well for what I do—the costs are going up. PPE is difficult to get, and the costs of those types of things are rising really quickly.

As I mentioned earlier, people are eating up their savings so quickly. Any sort of financial support that can help to cover some of these costs is going to get us another month further down the road safely. The more we're able to do the better.

More funding for support for caregivers also means that they're not going to be required to work in multiple facilities. This is a huge issue right now for some of my support staff who, in order to make ends meet, had to work at multiple different facilities, including my home. That presents a huge viral risk. Paying people who take care of disabled Canadians what they need to survive is going to help reduce some of that risk.

Ms. Kate Young: Thank you very much. I'm going to share the remaining time I have with MP Vaughan.

The Chair: Mr. Vaughan, go ahead, please.

We're not getting your audio, Mr. Vaughan.

We can hear your household pets now.

Mr. Adam Vaughan: I'm sorry. I'm not sure what happened there.

The Chair: Hold the mike closer, if you would, please, Mr. Vaughan.

Mr. Adam Vaughan: I have birds next to me. I apologize.

The Conservative government in Ontario isn't the only provincial government that has clawed back disability benefits, but would you consider that a human rights violation?

Dr. Jeff Preston: It's certainly a question. I think when we look at the ways in which the federal government has tried to support people without disabilities versus the way that we historically have tried to help disabled people across Canada, we need to take a real serious look at the ways in which we are trying to provide support for people with disabilities, both during and after the COVID pandemic.

Mr. Adam Vaughan: We've also seen some Conservative commentators make the case that if we make the CERB too lucrative we create a disincentive for people to work. Does that hold true for the disability community?

Dr. Jeff Preston: In my experience, most of my friends who have physical or intellectual impairments or mental illness want to work. They want to be productive members of society.

It's actually not because they're receiving support that they're staying home. They're staying home because workplaces are not physically or attitudinally accessible. People see disability on a resumé and you don't even get an interview.

Mr. Adam Vaughan: At this time, work can even be dangerous.

For Dr. Robson, then, on this notion of winding down CERB as opposed to elevating it to a universal basic income, why would you recommend winding it down and phasing it out as opposed to moving to a 100% universal basic income, as some have suggested?

• (1900)

Prof. Jennifer Robson: Thank you for the question.

The policy intent of CERB was to be to give people the economic resources to be able to stay home and to practise social distancing. Given that our employment insurance system did not have adequate coverage for all workers, and also was not able to just logistically handle the kind of demand that it saw, CERB was put in place as a temporary emergency benefit.

The issue of winding down is going to be really difficult. I think I alluded to that in my remarks. What we're trying to do is to think about ways in which we can support workers in returning to the workforce as it's safe for them. The timing of that, the nature of the safety and the constraints they will be facing will be various and varied.

I've previously expressed some concerns, or at least some operational issues, with regard to moving to a universal basic income, because, as I said, we don't have a magic list. We don't actually have a list that is in fact universal. We have set up a system that is as simple as possible and has been able to quickly ramp up to meet demand, yet it still isn't actually necessarily reaching everybody who is in need. It isn't, as we have seen, necessarily a magic bullet. We—

The Chair: I'm sorry, Dr. Robson. We're well past the time.

Thank you, Mr. Vaughan.

[*Translation*]

Now we go to Ms. Chabot, for six minutes.

[*English*]

Mrs. Stephanie Kusie: Mr. Chair, on a point of order, quickly, we certainly all have different home environments that we're dealing with here as we go through this difficult virtual sitting environment, but it is very hard to hear some of the questions and the responses if there is some other type of distraction in the background. I would really ask that all of the members and witnesses, as far as possible.... Again, this is, to use an overly used term, an unprecedented time that we are in, but it is very distracting. It's very hard to hear the questioning as well as the responses with any type of distraction in the background.

It's just a note, Chair. Please, if we could do our best, where possible, to have silence within our background. I am not immune from this. I have children running in sometimes. I do my best to inform my family of this, but if we could, let's do the best possible to limit these distractions, please.

The Chair: The House of Commons-issued headsets are a big plus as well, but thank you for that point, Ms. Kusie.

Mrs. Stephanie Kusie: Thank you.

[*Translation*]

The Chair: Ms. Chabot, you have the floor for six minutes.

Ms. Louise Chabot: Good evening.

I would like to start by thanking the last three speakers.

Personally, I also feel it would be a good idea to extend the session for an hour.

Mr. Lafrenière, thank you for your presentation. You spoke about your fears and the difficulties you have encountered. At our offices, we have encountered the same difficulties regarding eligibility for the CERB and the shutdown of Service Canada locations. We asked the officials about Service Canada, and they told us about all the issues related to the fact that services are only available on the Internet or by telephone. How do you see the resumption of in-person services over the short term?

Ms. Robson also spoke about flexibility with respect to the CERB and the CESB, the Canada emergency student benefit. The Bloc Québécois has proposed a measure to ensure that people do not lose all their benefits when they return to work. I would like to hear your comments on this.

Lastly, could you tell us a little about how you envision reopening and what comes next?

Mr. Sylvain Lafrenière: First of all, with respect to the Service Canada locations, I must say that I am not a logistics expert. I know that the locations vary in size, but it is possible to open some, at least in most of the mid-sized cities in Canada, because there is a need.

In terms of the impacts of that, I don't know if it is happening everywhere in the same way, but as I mentioned, right now it is impossible for some people to use the Internet because they don't have access to it at home and they cannot go to the usual community centres where they can use a computer for an hour or two. As for the telephone information line, it is only just starting to calm down. However, in the first few weeks, people were calling us constantly to say that they were simply unable to get an answer, despite many attempts, or that they had been waiting for hours on the telephone. The service is inadequate and that needs to be rectified as soon as possible.

Since the government was unable to meet the demand, our groups had to do it. For instance, in the Saguenay—Lac-Saint-Jean region, we sometimes filled out online applications for people by obtaining their information over the telephone. Those are the kinds of repercussions that have affected our groups in a concrete way. So this situation is not easy, especially for our groups, who, like just about everyone else, are working from home. They have had to reorganize at home. The vast majority of them are not even in their usual workplace.

With regard to the CESB, if I understood your question correctly, I would say that we would prefer a measure similar to the one that was finally introduced for the CERB, that is, to take a small amount into consideration. I don't know if it would be \$1,000 as it is with the CERB, but if they can prove that they have lost or expect to lose income, we feel that students should have access to it. For them, as I said, it's also an income that will allow them to continue their studies. This issue has not been raised much in the debates. Personally, I have not heard much about it. That whole dimension must be considered as well.

As for what happens next, we certainly need to ask ourselves that question. Although we immediately think of the restaurant sector, which is often mentioned, there are entire sectors that will take time to reopen. There are even sectors we do not necessarily think about that export some of their products. When will they be able to start

exporting again? It is all well and good to get people back to work, but will they be able to sell their products?

There may be a long period in which businesses will recall only part of their staff or reduce their work hours. We don't yet know how this will play out, but we need to think about it. I feel employment insurance will play a central role. I do not know how the government will finance the employment insurance fund, but at the rate things are going, if we take the money out of the fund, very soon there will be nothing left. We have to get the program up and running again anyway, and we have to discuss how it will be done. We have to debate it as a society, and we need to invite stakeholders to express their views on it.

• (1905)

The Chair: You only have 10 seconds left, Ms. Chabot. I don't think it is possible to get an answer in that little time.

Thank you, Mr. Lafrenière.

Ms. Louise Chabot: Am I done, Mr. Chair?

The Chair: You only have time for a very brief comment, Ms. Chabot.

Ms. Louise Chabot: Mr. Lafrenière, you mentioned that it has been 40 years since a comprehensive review of the employment insurance system has been done. While keeping transitional measures in place for the reopening, do you agree that this issue needs to be addressed immediately?

The Chair: Mr. Lafrenière, I encourage you to provide a written response to the clerk, please. We are out of time.

• (1910)

Mr. Sylvain Lafrenière: All right, Mr. Chair. I understand.

The Chair: Thank you very much, Mr. Lafrenière.

Thank you, Ms. Chabot.

[*English*]

We'll go to Ms. Kwan, for six minutes, please.

Ms. Jenny Kwan: Thank you very much, Mr. Chair, and thank you to the witnesses.

My first question is for Mr. Preston. The NDP have wanted the government to bring forward a universal direct payment. That way people with disabilities, seniors and all sorts of people would not be left out. We're now trying to plug the holes and the gaps through CERB, the student program and so on.

The government decided not to, and we have CERB. Last week in the House of Commons we were able to get the government to support the unanimous motion to ensure that seniors and people with disabilities get benefits at this time to help get them through COVID-19.

I wonder, to that end, whether you have any specific recommendations as to what the government should do.

Dr. Jeff Preston: Yes. When we're talking about funding specifically, I think it's absolutely critical we get money into people's hands to allow them to be able to direct their own care and to put the money into the places that are important to them. Historically, whenever governments have tried to direct care for people, to direct how or what types of care they require, they often fail at that because disability is simply not a monolith.

I think empowering people to be able to use the funds to get the things they need at the times they need them is absolutely critical. This means not just literally things like masks and gloves, but also being able to hire people to go get groceries and pick up medication from the pharmacy, to do those things that unfortunately many of us took for granted before this happened.

Ms. Jenny Kwan: Thank you.

One of the things that we've also been discussing, of course, is that some provinces are clawing back some of the emergency benefits, so we have an uncoordinated approach across the country.

In order to make sure that people actually get the support they need and not have it clawed back, should we set national standards for this unprecedented situation? I know that normally we don't intervene in terms of provincial or territorial jurisdictions, but there's a question that's going on in my mind. In this unprecedented situation with a national pandemic, is that something the federal government should be entertaining?

Dr. Jeff Preston: Yes. I maybe feel safer saying this when I'm in my own home here in London, Ontario, and not in Ottawa where I can be found out, but the experience of disability in this country is radically different from province to province. Depending on what province you live in, your experience of impairment is completely different. I think in a situation like this, a global pandemic, leadership from the top is absolutely necessary. We need to ensure that people with disabilities are not falling through the cracks, whether they are in P.E.I. or whether they're in British Columbia.

Ms. Jenny Kwan: Thank you very much. I appreciate that.

Ms. Robson, as we head into wanting to think about post-COVID, we're still in a situation where people are still social distancing, still unemployed. I'm not quite sure that by June things will be back to normal, to what "normal" would be in this period.

If it is required, and it may well be required, that the benefits continue until such time as social distancing is not an issue, is there something you would advocate for the government to proceed with?

Prof. Jennifer Robson: Thank you for the question.

I think it's going to be clear that for people who have applied for CERB and have received four payments in a row, by June they will have exhausted the 16 weeks of the maximum entitlement. Some number of CERB recipients, we are hopeful, will have been rehired by an employer using the wage subsidy. There will be many others who won't be and we do need to continue to be able to provide supports for them.

As I've mentioned, mothers will be particularly disadvantaged if child care and education facilities do not reopen fully until September—we hope. They will need continued support.

Ms. Jenny Kwan: Thank you.

In this situation, right now my office is being inundated with emails from people who are falling through the gaps. Take, for example, the small business community. The government has tied the commercial rent subsidy to landlords. Some landlords don't have a mortgage, so they're saying this program doesn't work for them. Others are saying they don't want to deal with the paperwork and don't want to deal with the government, so they're not proceeding. There's no incentive to get landlords to support their tenants with this program.

Should the government be looking at changing the program so that the commercial rental assistance would go to the small business owner as opposed to going through the landlord? Should the requirement that it be tied to a mortgage be waived?

• (1915)

Prof. Jennifer Robson: If I understand correctly, the existing program was designed as the result of bilateral negotiations between the federal government and provincial governments, because of course regulation of rent is a provincial jurisdiction. This is a little outside of my area of expertise, but if I understand correctly, there are other avenues of support that the government has put in place for small businesses. It might be interesting to know whether those who are unable to receive the emergency rent assistance because of the conditions or circumstances you described are able to access the other small business supports, and if so, if there's some avenue there for providing some support.

Ms. Jenny Kwan: I'm just going to cut in.

My constituents—and I literally have thousands of emails from them—are saying they cannot. Sole proprietors, for example, are still struggling. They do not qualify for the loan. This will continue, so I think it is in our best interests that the government help small businesses survive this time, because if they don't, the road to recovery is going to be that much more difficult for all of us collectively, for Canada as a whole. I get it that—

The Chair: Thank you, Ms. Kwan. We're past time.

First of all, to all of the witnesses, thank you so much for being here and thanks for staying on.

To the support staff, thank you for staying on.

I detected some frustration over the amount of questioning time we were able to have with these witnesses. I suggest that if there are any we wish to invite back, they may be willing to come back. That might form one of the topics we will discuss on an informal call with representatives from each of the parties before we meet again on Friday.

With that, thank you to my colleagues. Have a wonderful evening. We are adjourned.

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