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Chair

Mr. Greg Kerr

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• (1530)

[English]

The Chair (Mr. Greg Kerr (West Nova, CPC)): Okay, folks, we're now going to begin the session.

I want to invite the mobile cameras to move on, if they will. Thank you very much.

We are obviously being taped here today so everyone on the committee is well aware of that.

As you know we're continuing with the study and review of the enhancements to the new Veterans Charter Act.

We're very pleased today to have with us somebody who knows quite a bit about the business and as I said to him earlier, we've shared an occasion or two together and I know how committed he is to it.

Senator Dallaire, we're very pleased to have you here today. I think you know enough about committees to know that we look forward to your presentation and you then have to put up with the questions that come around from the committee and we'll proceed that way. Are you ready, sir?

Senator Roméo Dallaire (Quebec, Lib.): I am ready.

The Chair: Okay, we are pleased to have you here. We'll begin with your presentation, please.

Senator Roméo Dallaire: Thank you very much, Chair.

Thank you, ladies and gentlemen, of this committee of enormous significance to so many people. Thank you for having the patience of inviting an older vet, a retired general who is busy at times on the other side of this Hill.

I am here very much to speak as a veteran, as a retired general officer, and a bit in my duties as a senator.

In so doing if I may I wish to give a bit of history. I'll go a little further than CNN history, though—which is last week—and then bring you into certain points that I would like to raise. Hopefully I will not overstep the bounds of how long I should speak, although brevity is not the strength of retired generals, so I'll work on that.

[Translation]

Ladies and gentlemen, I am appearing before you as a veteran to raise some issues surrounding the New Veterans Charter. I will provide you with some background and also put into perspective this charter you are studying in detail.

I congratulate you for undertaking this study and for taking the time to hear from many witnesses. When he appeared before your committee, the minister instructed you, I think, not to go on the ground, not to meet with veterans and their families in their communities. That decision should have perhaps been reconsidered, although we are often told that this type of initiative is expensive and time consuming.

As they say, once a veteran, always a veteran. For us, this is not a matter of time—on the contrary. It is a matter of having our needs met.

[English]

I would like to give this brief intro in the sense of telling you about this charter and some of its genesis. I know in reading the blues that General Semianiw gave you an extensive presentation on how it came about.

I wish only to bring out a couple of points on its genesis. The first point is that the charter did not appear because all of a sudden a bunch of bureaucrats decided that it was a way of solving a problem. The charter came about because of a fundamental need that was articulated by a multidisciplinary committee created originally by Admiral Murray, who was a deputy minister at the turn of the century, about 2000; and under the chairmanship of Dr. Neary, who wrote an extensive book on the 1943 original charter.

The multidisciplinary committee was advising the deputy minister and of course by extension, the minister, on the problematics of trying to apply the new Pension Act to a new generation of veterans. In so doing there were problems in its application, but also problems in being able to meet the demands of these young people versus the octogenarians whom the department had been more focused on.

So we were looking at a radical shifting of a government department into an area that they hadn't touched since 1940, 1950, where at that time the bulk of the veterans were 18, 19, 20, 23-year-olds, and of that age. That in itself was a significant trauma.

So that multidisciplinary team from different government departments, of different players, and also stakeholders provided significant input and produced the report called the Neary report in March of 2004.

I was able to participate in that as the representative of the ex-Canadian Forces veterans as we were articulating the gang since the end of the Cold War, and with Dr. Neary presented it here in this building in March of 2004 for consumption by the department, by veterans, and in support of reform.

•(1535)

The result of that was not necessarily what the Neary report was providing but was a sort of amalgam, a mixture of both some of the elements of the Neary report and extensive internal reviews and reorganizations being done by the department itself as it tried to cope with the problems and was looking at how to handle this influx since the early 1990s of a new generation of veterans.

What ended up, of course, is this bill. I am the one who squired it through the Senate, Bill C-45. I was three weeks on the job, but that was longer than the amount of time we spent studying it, which was 24 hours, and in so doing, the charter is an essential document of our time but it had a very significant caveat to it. It had to be a living document because we knew that we didn't have all the parameters of what the needs of the new generation of veterans would require, and also the needs of their families, which was instrumental in the argumentation behind the Neary report. You were not just now deploying members of the forces, you were essentially deploying their families also.

A quick anecdote is when I came back from Rwanda 20 years ago, my mother-in-law, who was still alive at the time, said she would have never survived World War II if she had had to go through what my family went through. My father-in-law commanded an infantry regiment in World War II. The whole country was at war. Information technology was very limited, but also censorship kept people pretty well away and separated from the actual war, from the conflict area, and so they knew very little.

However, with the revolution of communications that's been going on, and the ability of getting real-time reports, what we see now is the families continuously clicking on different channels as they are looking for what channel is going to report first who has been killed, injured, taken prisoner, or whatever, and so by the time we come back from those missions, we see a family who has also lived the missions. The families are now living the missions with the members. It is not a separated exercise. It is a marriage.

It's a communion between the two, and so any policy that doesn't reflect that communion is a policy that will have a fundamental flaw in it, and the fundamental flaw is you can't help the member and let the families be taken care of by somebody else, by another body, and hopefully they might even have a priority in their support. That dimension, which was supposed to be intrinsic in what we were hoping the legislation would be, is not there. You have a hard time finding "family" in this legislation.

However, with the legislation, it did give the government that came into power in January 2006 the ability to implement a whole new generation of tools that it felt was going to meet the requirement as per what the legislation was calling for. Just as a side point, both Dr. Neary and I were brought into P.E.I. three months before the legislation was presented, and we were informed about a series of recommendations on how the legislation would be changing things.

A number of those had absolutely nothing to do with what we had done before. The lump sum solution was never, ever raised in all the deliberations of the multidisciplinary committee that was advising the deputy minister, and there were a number of these things that were thrown in there that caught us by surprise, but we never got a

chance to amend, to debate, to discuss, because it was too far down the road, and so it was simply implemented, but the caveat, which I come back to, was that it is a living document and the minister would be able to work with it.

Over the last years, we have seen one major intervention, which is Bill C-55.

•(1540)

I say "major" because it's the only one in significance as legislation—but it is not major, it's sort of that big to the demand. Even in that, there were elements of the legislation that the minister could have, by convincing his Treasury Board colleagues, implemented without having to go to legislation. But there are a few elements of legislation, which is the second component that I wish to mention about this charter.

We had recommended strongly that this charter has got to give power to the minister to amend the programs, to amend the directives, to not be hamstrung by enormous scales and volumes of regulations that require legislation. The aim was, as a living document, to give that minister, as long as he convinced his buddies at Treasury Board for the financial requirement and it was not offending any other act, the ability to get in there and change things in order to meet in a timely fashion the demands of the troops and their families. This legislation does not give him or her that much leeway. On the contrary, due to the scale of regulations in there, it is quite restrictive on the minister, which makes it very difficult for him or her to be able to bring about some of the changes that many committees have proposed.

You are aware that over five committees subsequently sat and hundreds of recommendations were produced. In fact, your committee, if I'm not mistaken, about a year and a half ago, if not two, looked at PTSD, or the mental health, and punched out a whole whack of these recommendations. These recommendations coming from these committees were essentially single-focused. Very few if any of those recommendations ever made it into the staffing of the bureaucracy, I'm afraid. In fact, the five leads of these committees never got a real response from the department as to their final recommendations as such. It was sort of given and then left there.

All this is to say that I'm trying to give a more strategic perspective to this document—and I am speaking here, I gather you picked up, not on the nuts and bolts of so many of the different programs and projects and directives. My strategic perspective is the fact that we absolutely need this charter amended. Not a new one, and not necessarily the Pension Act, but a charter that meets the requirement, as the requirement has evolved over the years, remembering, ladies and gentlemen, that we're covering now 25 years, 25 years more than since 2005, when it was brought in.... The whole new era of veterans started with the end of the Cold War and with the Gulf War. The Gulf War syndrome, and how we treated those people, is the perfect example of why we need a whole new set of tools as we really did not help those people. There are still walking wounded out there.

We're covering not Afghanistan alone. That's the culminating point of the last 25 years, in which the forces have been in the field, in operational theatres, hoping to come home on occasion to lick their wounds. We need that legislation to cover the full spectrum and to take care now of those forces that are back in garrison and are licking their wounds. In so doing, the scale of demand will continue to increase, not decrease—*increase*. The veterans of Afghanistan, Yugoslavia, and Somalia are hitting their 60s and 65s and 70s. There is no long-term care significantly in the new charter, so you've got to cover the full spectrum. The covenant, which we proposed in 2004, said, "We inculcate loyalty into you, that uniform comes off, but that loyalty remains for a lifetime, for we have changed you culturally, and in so doing have a responsibility thereof".

I have spoken already too long, and I didn't want to get into nuts and bolts, but I'm more than prepared to respond as best I can, Mr. Chair, to whatever questions you may have.

• (1545)

The Chair: Thank you very much, General Dallaire. I don't think anybody is going to suggest you spoke too long at all. I'm sure you'll get a chance to detail some stuff as we get to the rounds of questions.

We will begin with Mr. Chicoine for six minutes, please.

[*Translation*]

Mr. Sylvain Chicoine (Châteauguay—Saint-Constant, NDP): Thank you, Mr. Chair.

Senator Dallaire, it is a pleasure to have you with us today. I want to thank you not only for your services to the country, but also for your participation in this study on the New Veterans Charter.

Last year, as Chair of the Senate Subcommittee on Veterans Affairs, you headed a study on the New Veterans Charter. The first three recommendations of that study concerned the social contract. You said that the government should submit a document in order to provide information and raise awareness about the social contract.

I would like you to tell us what shape this would take. Would it be part of the preamble to the New Veterans Charter or constitute a separate document?

Senator Roméo Dallaire: In 1997, when I was assistant to the assistant deputy minister, we carried out a study on the condition of the troops, in terms of their morale and their quality of life. Two of the five pre-eminent scholars who were involved in this study recommended, as the best solution, that the Canadian Armed Forces establish a union. The need was critical.

That started off the debate that lasted until I had to leave the Canadian Armed Forces for medical reasons. An argument was being made that a social contract should be concluded between veterans and the Canadian population through the government. I thought this idea could have at least been introduced through a motion in the House, or even through a bill.

Whether through a motion or a bill, an informed position had to be adopted. In that context, we could have established guidelines, a philosophy regarding veterans that would apply indefinitely and would require the whole government to respect the spirit, if not the letter, of that social contract.

Over the years, I have come to the realization that establishing a social contract would involve certain delimitations. Signing a contract implies that the two parties agree on the scope of that contract.

When I left for Africa, and my colleagues dispersed around the world, no one told me that there was a limit to the danger I should expose myself to in order to accomplish my mission. There was no limit. I was operating under a voluntary contract. It was actually voluntary the day I signed it, but not after that. I joined an organization that asked us to be ready and to follow the government's orders. We had no choice in the matter. Since we had no union, we had no right to refuse to participate in an operation. We were putting our lives on the line, and we were expected to be prepared for that.

If a nearly biblical state is established with regard to what an individual is asked to do, how can a contract be signed?

What I am suggesting is not a contract, but what is called a covenant.

• (1550)

[*English*]

But a covenant that has power to it, meaning that it has to go through the House of Commons, and potentially the Senate, in a such a way that it's recognized as a philosophical framework in which the people of the country and the veterans have come to an agreement that if you commit yourself to unlimited liability, then the country will commit itself to doing the best it can to meet that same challenge of unlimited liability for you, and those who are affected by it, meaning your family.

I'm afraid that's my short answer on that one.

[*Translation*]

Mr. Sylvain Chicoine: Thank you. That's very similar to the British approach with the armed forces covenant.

Senator Roméo Dallaire: Yes, the terms are very similar. This helps guide parliamentarians, as it eliminates the debate to determine whether we are responsible and whether something should be done or not.

Facts need to be faced: the individual was deployed, affected, injured or killed. They put their life on the line and their family went through that experience. There are no options in that approach.

Of course, what is reasonable in terms of financial cost is always a consideration. That's established based on the country's mores.

Mr. Sylvain Chicoine: I would like to come back to the report you produced, which does not contain any recommendations on the lump sum.

What's your opinion on lump sums? What approach do you recommend in that area?

Senator Roméo Dallaire: I think that measure is extremely detrimental. It does not fit the needs of the individual and their family. It's said that this amount is supposed to help an individual recover, but it's insufficient for that purpose. Someone may have purchased a first home or made investments and, after 2008, lost two-thirds of their investments, so nothing would remain of that amount. I don't think this measure can enable an individual to achieve a stability of spirit they can build on, instead of creating a dependence. A bunch of money is being thrown at them in the hope that this approach will work.

Moreover, owing to the complex and ambiguous nature of the conflicts most injured veterans find themselves in, they are faced with ethical and moral, even legal, dilemmas in the field. That leads to traumatic experiences and, ultimately, to depressions and other psychological issues.

When you are dealing with such problems and when, away from everyone, you have suicidal thoughts, you are not in a position to make decisions of this nature, despite the advice you receive. I have personally experienced these types of issues. The family is affected by our state of mind and is probably not familiar with the system. In such a case, any decisions about the family's future are made based on very limited information, and they are almost harmful for the family.

[English]

The Chair: Thank you very much.

Now we'll go to Mr. Hawn, please, for six minutes.

• (1555)

Hon. Laurie Hawn (Edmonton Centre, CPC): Thank you, Mr. Chair, and General Dallaire, thank you so much for being here. It's always a pleasure to chat with you and spend time.

You and I are covered under the Pension Act for our time and service. Was everything smooth under the Pension Act? Were there any complaints under the Pension Act from veterans?

Senator Roméo Dallaire: In fact, I could give you the Neary report here, and that's the shortened version of it. We went into it because there were requirements that were changing. The requirements of the Pension Act were reflecting our NATO status of essentially a peacetime military versus a military that was committed to war.

The Pension Act came in about 1952 or 1953, I think, but it covered post-Korea. So it covered a military that, although it was caught up in the Cold War, was essentially at peace. We had guys in the Congo in the sixties, we had Cyprus in the seventies, but apart from that, we were a peacetime force, training to be deployed ultimately to war. The Pension Act covered a lot of that. So we needed new angles for particularly the heavily injured ones.

Hon. Laurie Hawn: At the risk of cutting off a general officer—

Senator Roméo Dallaire: Sorry.

Hon. Laurie Hawn: No, that's okay. I've just got six minutes and I'm trying to get more questions in.

My only point was, no system is perfect. The Pension Act had complaints too, which generated these changes. This one isn't perfect, obviously, and that's why we're here.

There are a host of benefits and services under the Veterans Charter. But from my point of view the real difficulty is access, burden of proof, and communications. Access and burden of proof, meaning we just make guys and gals jump through too many hoops to get what's there. Burden of proof means that we set the bar too high for what's reasonable to get the thing going. And comms, meaning difficulty in communicating information from DND to VAC, when a member becomes a client of VAC.

This is kind of a general statement, but if we could deal with those issues of access and communications, how far would that go to solving a problem? I know there are levels, numbers, that we do need to change, but it seems to me that would go an awfully long way to solving a big part of the problem.

Senator Roméo Dallaire: All the three points you've raised there are points that are internal to DND. They were looking at how to reach the troops, the families, and meet their requirements, and so on.

So DND in itself is a very paternalistic outfit, we know that. That's how we build our loyalty and our capacity. It has been looking at that, it has established the skill of taking care of their troops, which is much higher than the one at VAC. And you'll notice that many of the troops don't want to move to VAC. That's because of the benefits, but also because they're still within the family.

So the question is, can you make VAC as responsive as DND even though, starting in 1997-98, we created the committee at the ADM level, and in fact they still meet? I can go as far as to say, you've got to maybe wonder whether or not we need two departments.

Hon. Laurie Hawn: I'm glad you said that.

Senator Roméo Dallaire: I'm not talking about moving anybody, I'm just talking about does it make sense to hand off somebody who really is still intrinsically part of another organization, even though the uniform's not there?

Hon. Laurie Hawn: I guess one of the things I'm trying to work on, we all are, is a private member's bill that takes the Privacy Act out of the way between DND and back, so the information passes. But maybe it would be a solution worth looking at to have a minister of National Defence and an associate minister of Veterans Affairs in the same department.

Senator Roméo Dallaire: They have their budget and they can protect that. There are all kinds of means. Having been an ADM myself, you can work those details out. But the handover and the whole sense of being put into a scenario where now you have to start begging or asking and God knows what other means, and not knowing which has an outreach.... You read *Salute!* It is not an effective communications tool by a department that has what, 200,000-plus clients.

Hon. Laurie Hawn: Now, Corporal Fuchko was in a couple of days ago and he had lump sums of \$566,000 between VAC and SISIP and of course, there are other benefits, the earnings loss benefit, and permanent impairment allowance.

If we had called it the earnings loss pension instead of the earnings loss benefit, and called the permanent impairment allowance the permanent impairment pension, would that make it more acceptable? The money's there and it's a matter of accessing it and we don't make it easy enough to access that, but some of it is just perception. Is that a fair statement?

• (1600)

Senator Roméo Dallaire: It's a very interesting point, because the smell that came out of this was...we just built an insurance policy program based on SISIP. SISIP was a peacetime tool to take care of troops when they injured themselves essentially in training. That's why we brought it in.

To build a veterans program based on that type of philosophy just didn't make any sense, remembering that everything nearly that comes out of this thing is taxable. The old program was not. It didn't end at 65. You didn't fall off the program. Long-term care was there.

Hon. Laurie Hawn: PIA goes for life.

Senator Roméo Dallaire: Yes.

I think the terminology could certainly be something, but I would strongly recommend that the nature of the beast and why it needs reform is you have to change its philosophical framework in not only the covenant, but get it out of being workmen's compensation and make it a Veterans Charter.

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

Now, Mr. Valeriote, please, for six minutes.

Mr. Frank Valeriote (Guelph, Lib.): Thank you, Senator Dallaire, for your service to our country, not only in the forces, but as a senator and thank you for appearing before us today.

You have been quite candid with the country, really, in relation to your PTSD, your post-traumatic stress disorder. Many who have appeared before the committee and other veterans we've talked to are quite open about it, some are not open, some leave the forces unaware of the consequences of what they've seen and how they may suffer from it later.

Just this morning, I had the benefit of a briefing from the ministry and I asked them what goes on at the end of their term of duty with the force? Well, they have an exit review. I was trying to be probative. How probing are you of any evidence of PTSD? Well, they're not sure that they're that probing, frankly; ask a few questions and hope that a person is candid and honest with them. I recommended some things, a checklist, maybe even a written test

of some sort. Are you having nightmares? Are you angry all the time? Or whatever the signs might be. Some blame the forces for not reaching out enough, some blame the veteran for not being aware.

How do you think Veterans Affairs should be dealing with the issue and should they deal with it before the person leaves and becomes a veteran or wait until something's happening?

Senator Roméo Dallaire: First of all, the injury happens when they're still serving. Once they're injured and are declared to be veterans because they've served at least one year, then they get a file from Veterans Affairs.

So coming back a bit for a second, the reason I talked about one ministry is that while a soldier is serving he also has a file at Veterans Affairs, which is providing resources there, and sometimes you have friction. You have two departments feeding the same problem, which is not necessarily coordinated.

The scale, because it's of great significance to your question.... The only country that reinforced me during the genocide was this country, with a couple of Hercs. Of the 11 officers who were with me in Rwanda, 7 out of the 12 of us have suffered significantly with PTSD. One committed suicide 15 years afterward, and he was under treatment. Families have busted up because of the pressures and the strains on family life from someone who is injured with this. The scale of the requirement is often underestimated, both by those who are injured and also by people around them.

Coming specifically to how we've been handling it, I think that pre-deployment awareness and training have achieved a very high level of capability. In-theatre requirements—although I was surprised the other day about not having services in French, though I'd be interested to know whether there are any psychiatrists who want to deploy in a war zone.... But putting that aside, contract it.

In the field we have found that the requirements—both the troops who are there and the way that amongst themselves they have been trained to take care of their own, plus the professional therapy there—have been quite effective. The transition back, with the four or five days in Cyprus or wherever to decompress, has been crucial. Even though it's a strain on the family, it's crucial.

You can't walk out of a firefight and within 24 hours walk the street downtown. We saw what happened with Vietnam. When I went to the Americans to get help in 1997 because we had no capability at all, they said they didn't want us to do what they had to live through. They said they had lost 58,000 or so, many identified on that monument in Washington, but by 1997, 22 years after the end of the Vietnam War, they had had more than 102,000 suicides directly related to Vietnam that they knew of.

So the follow-on is the crux. Is the follow-on as rigorous, as developed, as it should be? I mean not only for the regular force guys, whom you can take by the scruff to make sure they parade to get help—even though they're not volunteering, but are at least seeing a therapist who can do some assessment, hopefully—but also for the reservist who is in Matane, who has nothing around him, and a reserve unit that has no assets to help him, no special training days or money or capabilities locally to influence the situation.

I would argue that the follow-through is still weak, and the follow-through is very much dominated by the psychiatrist—which is no problem: they give you the pills. I take nine pills a day, and that keeps me sort of like this—reasonable. I need that.

But what I do need, however, is the psychologist who is making me live with this and is trying to bring me to a level at which I can be functional. I think this is the area in which the program is still very weak; it's why we still are seeing the casualty rates, not only in the military but in their families, continue to rise. The follow-through, the demand that they go through a rigorous review, every one of them.... They put them through a rigorous review to deploy them. So they come back, and all of a sudden we don't have to have that same rigour?

When I commanded my brigade, the dentist had more power than commanding officers, because he would come in and he'd have a list of those who were red-tagged. Anybody who was red-tagged—meaning that he was not deployable—we could put on charge for not having followed the rules by going to get good dental care. I don't see that for this injury. I would argue that maybe it has to go to that extent.

•(1605)

The therapists have told me, oh yes, but they have to volunteer to come in. Somebody even stupidly told me, oh yes, but they're stigmatizing themselves. I haven't heard bullshit like that in years. You don't self-stigmatize yourself; you're injured. That creates the isolation, and so it's a non-existent entity.

And the fact that the individual is not seeking help voluntarily is maybe due to the therapists' not being forthcoming enough. People don't like to go to a therapist. They're not all Woody Allen, who thought that having a psychiatrist or a psychologist was “in”. He thought that in his movies, although you don't want to imitate him in other stuff. The therapists have to sell their product and go much closer to the units and become more intimately engaged.

How do you hand all that over to Veterans Affairs? It just doesn't happen that often. You nearly have to start from scratch. I have had the same therapist for 13 years. If somebody walked in one day and told me I needed another therapist, we'd be in serious trouble.

The Chair: Thank you very much.

Now we'll go to Mr. Hayes, please, for six minutes.

Mr. Bryan Hayes (Sault Ste. Marie, CPC): Thank you, Mr. Chair.

General, it was really nice chatting with you earlier, before the meeting. I expect strongly that your path and my Dad's have crossed somewhere along the way. I hope we have a chance to share that history a little bit more.

I want to bring one quote out of the subcommittee's report; it was good. It says, “Overall we found that...Veterans Affairs Canada and the...new Veterans Charter serve the majority of...Canadian Forces personnel and veterans well.” It is important that this not be lost as we undertake the study.

I want to pick up a little bit where Mr. Chicoine started, with reference to the absence of a clear, universally agreed social contract between the people of Canada represented by their government, obviously, on one hand, and Canadian Forces members and veterans on the other hand. I believe you mentioned, in terms of the process for such a social contract, that you thought it is something that should be perhaps negotiated, but ultimately should probably go through the House.

I want to get a sense of the process by which that would develop. Who would we include in that development? Maybe you can elaborate a bit.

Obviously, this wasn't included in the Veterans Charter in 2005, so I guess the question is why it wasn't included then. What role do you see this committee playing in the development of the new social contract? I think we're all committed to it.

Thank you, sir.

•(1610)

Senator Roméo Dallaire: Thank you very much.

In fact, in the Neary report we use the term “social covenant”, remembering that this was not just some sort of fly-by-night thing; that this was feeding continuously the DM and ADMs on the reforms that we thought were required. But much of it got overtaken by the bureaucratic analysis of the problem rather than the actual requirement.

Before I mention process, let me, if I may, go back to your point about the charter's meeting the majority of the requirement.

When I was assistant deputy minister of personnel at National Defence, we had 80,000 military, and I had 31,000 civilians also at the time. I would go to the Armed Forces Council on which the three-star generals sit to make all the decisions with the CDS, and at least 75% of all the agenda points were on personnel things: quality of life and God knows what—postings, promotions, and everything else.

I would watch how all these capital projects would go through—buying trucks, buying this, buying that—and how they were managed, and I was seeing that the personnel problem was being managed the same way, as if it were a project like a truck project. So you brought in a personnel solution, a policy, and they'd say, okay, we've resolved that. Then it was as if they were saying, don't come back with that for the next 20 years, because that's how long we get with our trucks, 20 years, so we don't want to hear of this problem again.

But then, when the people would defend their capital projects, something I was involved with for four years, if I got a truck that provided me 90% efficiency on the road, I was pretty happy with that. But when I went into the personnel world it became obvious that the only percentage I was allowed to go to or go below was 100%, because every one of the personnel counts.

If you have something working to 75% or 80%—VRAB is great at statistics, pull out whatever statistics you want—but you ain't hitting 100%, then you still have a flaw and a problem.

That's the aim of the exercise that I hope we're looking at, the margin that is there: they served, they're hurting, they have different problems, and it can be complex, and it can be.... God knows how they're fiddling, sometimes, or whatever, but they are also just as much a part of how to be handled as the vast majority.

The system must move to that level.

With regard to process for the covenant, I am most heartwarmed by the fact that you are querying me on that dimension.

We're seeing from one side people saying that we don't want a paternalistic system, we don't want people to be dependent, we want people to become normal civilians and do their thing and go back to civvy street.

That was fine after World War II, when people joined up for the war and after the war didn't want to make a career but wanted to go off and do whatever they were doing—go back to school and so on. But the people you're working with now are people who joined because they have an option and an interest maybe in making it a career. They're joining with that in mind, a commitment for the long term.

When your program doesn't reflect that you are recognizing that we wanted to keep them for 30 or 35 years but lost them because they are injured, then it's not because we're just Pontius Pilating ourselves away from them; it's that we're keeping that individual still focused on becoming a good citizen. But we haven't abandoned him. We haven't dropped them; we haven't dumped them out there; we are continuously following them. That paternalistic sense remains.

Going to that level with the covenant, as distinct from a social contract, is a philosophical framework that has to be articulated. It's not a capital program, it's not a budgetary program, it's not legislation that money can be put into, because you cannot determine that. We know what's going on right now with the lawsuit out of B. C., trying to look at numbers and so on. It has nothing to do with numbers; it is all to do with a philosophical framework for the way we see these people. We have committed them and now we have to bring them in.

I think that a framework of legislation that is a philosophy of... We often hear about and use the term "our values"—"these are our values: we want to be ethical and transparent" and so on....

•(1615)

Well, this is values legislation, and I think you can pull something off like this, which then makes it so much easier for those who are given the mandate to implement it to at least sense that they're working within a ballpark that is responsible and are not always wondering whether we cut too much or didn't cut enough and so on. They'll sense that responsibility.

The Chair: Thank you very much for that.

We now go to Mr. Rafferty, please, for six minutes.

Mr. John Rafferty (Thunder Bay—Rainy River, NDP): Thank you, Mr. Chair.

Could you tell me when we get to the last couple of minutes so that Ms. Mathysen could ask a question?

The Chair: You're going to do single questions, then.

Mr. John Rafferty: Yes.

The Chair: Unlike some others, we're going to do single questions. I wish more people would do that.

Mr. John Rafferty: Well—single questions?—we shall see.

General Dallaire, thank you very much for being here. I'm very pleased that you're here and I too, as others have done, thank you for your service to Canadians and to the country.

You mentioned something right at the top of your comments, something that I think almost every other witness has talked about. That is that families are given short shrift in this charter. I liked how you put it—"deploy members and you're deploying families", that it's exactly the same thing.

I don't want to put you on the spot, and you can maybe get back to us later, but I'm wondering whether there is language that you'd like to see in the charter that would reflect this very same thing?

Senator Roméo Dallaire: You can simply cut and paste to get the words, if I may suggest that—and not flippantly—the words are there.

I did not throw out the point that if you deploy the individual you deploy their families without considering its impact, remembering that historically we had the concept that if the army wanted you to have a family, they would have issued you with one, and that then we started to realize that it might be nice if the member were able to go home when his wife was having a baby so that they could share that experience together. That was a major thrust. We had people not liking it at all.

Now we have members who can have paternal leave, even. I'm still reeling under that one, but anyway....

The social scenario significantly changed. But with that social scenario, so also has the whole realm of communications changed, meaning that you're no more isolated from your family when you're in operational theatres, because the family can actually see it and live it and stream it and so on.

So they are deployed. They're sitting at home, but they're deployed; they're on standby. Every time somebody mentions somebody injured, they're reacting, all the the time. I had two of my children needing help when I got back. I came back and was nowhere near the same person I had been when I left, but the family wasn't the same either.

So I'll go to the extent of saying that if you deploy a member into an operational theatre, then you take on the responsibility for the family. So whatever deal you work out with the provinces for the member, you had better be working out a deal also for the family.

Mr. John Rafferty: Thank you for that.

I also want to thank you for earlier, with Mr. Hayes' question, defining the difference between a social contract and a social covenant, because they are very different things.

My next question involves reservists. We've heard from almost all the witnesses that reservists, once they've been deployed and come back, are not treated the same as regular members. I wonder what language could go into this charter to ensure that reserve members who see action are treated the same as regular members.

In Thunder Bay we have a large reserve garrison, and many of those reservists fought in Afghanistan. Three of them were killed in Afghanistan. So I think everyone understands that they are no different from regular force members.

What could we put in the charter that would ensure that this is in it?

• (1620)

Senator Roméo Dallaire: I've served with the reserves as a captain helping units, I've served as a lieutenant-colonel at area headquarters, and I commanded the whole province of Quebec, which had all the reserve forces of that province in it. Then, as deputy commander of the army, of course I had all the resource requirements for the reservists.

There is a fundamental problem when you build the system to meet your regular force people and then ask how we adapt it to the reserves. That just has been proven ineffective—from pay to whatever support they get in the units to, in fact, how they're even being treated and analyzed, when they come back from the same operational theatre, having bled the same as everybody else, but don't necessarily have that all-encompassing framework around them, because the reservist in Matane and Valcartier is 300 kilometres away.

I think what you may need to be considering is that the forces perhaps have to look first at how to handle the problem with the reserves. How do we give them the support they need? They are now 20% to 25% of our operational troops.

When I went to the reserves in 1971, they were not allowed to shoot their guns—I'm artillery—unless a regular force guy was there, and they still had Korean War equipment. Now they are out there fighting, commanding, and engaged at all levels like our regular force guys, to the extent of up to 25%. That's not an insignificant number. This is not just a couple of guys here and there; these are significant numbers. As an honorary colonel of a regiment, with 200 guys in my regiment I had 49 deployed in Afghanistan. And we have no capabilities—none—permanently to really do it.

We create honorary colonels. We use our own money to pay for transport for guys to get to different places. I would argue that maybe they should reverse the angle of this for once, because they're doing a major study now, a five-year study on reserve and regular forces, trying to integrate the two—which we were doing in the nineties, too—and ask: what do the reserves need to meet the requirement? You can adjust that to the regular force in a heartbeat.

I think that's the way to look at it.

The Chair: Thank you very much.

Now we go to our last questioner.

Mr. Galipeau, please; you have six minutes.

[*Translation*]

Mr. Royal Galipeau (Ottawa—Orléans, CPC): Thank you, Mr. Chair.

[*English*]

Thank you, Senator, for coming down to talk to a bunch of commoners like us and share your wisdom with us.

[*Translation*]

I want you to know that, before you became a senator and I became a member of Parliament, I was already seeking out your wisdom. I attended some of the lectures you gave at the University of Ottawa. So it was still refreshing to hear from you today.

I did a quick study of the interim report published by your senate committee in March 2013. I would especially like to discuss recommendation 6, which reads as follows:

The Government of Canada consider streamlining the way that veterans are able to access the internal appointment process throughout the federal public service and ensure that veterans are given priority and assistance in the process.

Although the government has not yet tabled its response to your report, I am proud of what the government has done and of the commitment shown by the Minister of Veterans Affairs.

In November, we introduced Bill C-11, Priority Hiring for Injured Veterans Act, which effectively gives priority to injured veterans in the public service hiring process.

• (1625)

[*English*]

Our government has gone a step further with Bill C-27, finally allowing our highly trained soldiers, sailors, and air personnel access to internal federal public service job competitions. Additionally, these remarkable men and women will also be eligible for preferential hiring when competing against an equally qualified Canadian in an externally posted competition.

[*Translation*]

Your recommendation 9 is the following:

Veterans Affairs Canada consider involving more veterans throughout Canada to enhance the relevance of their outreach activities.

[*English*]

Can you clarify “to enhance the relevance of their outreach activities”?

[*Translation*]

Senator Roméo Dallaire: Allow me to use a few English terms.

Mr. Royal Galipeau: I can give you the text in English, if you like.

Senator Roméo Dallaire: I have it here.

[*English*]

In 1993, members of the forces were not allowed to join the public service because, as it was called, it was a “khaki parachute”, and the priorities at the time were to hire women and visible minorities.

The military were coming in too qualified to do the jobs, so they were overwhelming the promotion flow within the public service, and we were cut out. Subsequently, we tried to introduce priority. We have seen the legislation come by, and the minister has been quite vocal about that.

There is a dimension that has to be covered very clearly in this. It has to come in, in the public service act, as a formal directive that all deputy ministers must apply, because for everything that was done previous to this, deputy ministers could decide whether or not they wanted to play. They had the overall authority. Unless this is going to guarantee that every deputy minister is going to play, just like with the Charter of Rights and its four criteria.... In fact, one of those criteria says to hire people who are disabled. Unless this act is going to say "that is an order and that's what you will apply", it will not be very much better than what we had before.

The second side of that is, how does an infantryman compete for a public service job without being a commissionaire or something like that? Part of that legislation has to be an insurance that the individuals are given the opportunity to retrain, under either the Veterans Charter or some alignment thereof, so that they are still competitive. They could be hired, but then they could also be fired, because they're not being hired as indeterminates. They don't get to be indeterminate automatically.

If you don't guarantee a training capability so that, one, they are competitive, and, two, they can feel in their own esteem that they are doing a good job because they're qualified for it, I think the legislation might be weak. I think you have to watch out for those two angles, because they're the ones that permitted departments to get away without it.

[Translation]

To disseminate information to veterans, we suggested that veterans be hired to go speak at units and all over.

[English]

We created—against a lot of the therapists, the professionals—the peer support system. The peer support system is veterans who are helping other veterans, peers, to the extent where we've estimated that peer support has prevented a suicide attempt a day—a day. That's peer support. So what you need is for Veterans Affairs to get a whole bunch of peers under contract to go and just swamp the forces and the places where we know there are veterans and then sell the product. That's really what we were talking about. Because all the other tools are simply not effective.

Mr. Royal Galipeau: Thank you very much, Mr. Chairman.

I had 14 other questions, but I'll let it go.

The Chair: We, by committee, agreed to have an hour with the senator. We know that we could spend a lot longer.

We do have four separate presentations to follow, so I'm going to say, Senator Dallaire, that we really, really appreciate it. And please, if there's anything further you want to send along, any other comments, we'd appreciate getting them, because your time here today is very valuable.

•(1630)

Senator Roméo Dallaire: Mr. Chair, thank you. I only want to say that when those body bags come back, or when our veterans come back injured, that we treat them and their families with dignity and respect...and that they don't have to fight again to live decently as an injured veteran in our country.

The Chair: Thank you very much.

We're going to suspend for a couple of minutes as we change.

•(1630)

(Pause)

•(1635)

The Chair: Let's reconvene.

We are continuing our review of the new Veterans Charter. We will have four presentations, and if you agree, I will follow the order in which I have you here. Then we'll begin the round of questions, which could go to any or all of you. We'll try to keep within the time constraints as best we can.

Today we have Thomas MacEachern; Ray Kokkonen, and with him Joseph Gollner; Daniel O'Connor; and Melynda Jarratt and Don Chapman.

So we'll start in that order. Each will get 10 minutes. We never stop a witness from going a little longer, but given our numbers and time constraints, please use that as a target time, if you will.

Mr. MacEachern, we're very pleased you joined us today, and certainly we look forward to hearing your account. Please begin when you're ready.

•(1640)

Mr. Thomas MacEachern (As an Individual): Thank you, Mr. Chair, honourable members, guests.

I had prepared this statement without knowing the full scope and breadth of the other groups that would be here, including the general at the time, so some of the themes may be repeated. However, you'll certainly be hearing them from the perspective of a surviving family member of a veteran who had some difficulties and had difficulty finding help.

Thank you for the opportunity to speak. I'm here on behalf of not only my own family but also the families of other veterans in similar issues, similar crises, in the last while who may feel as though they don't have a voice.

As I'm sure you all know, I'm the husband of retired Canadian Forces Corporal Leona MacEachern, a formerly proud 23-year veteran. Last Christmas Day, just a few months ago, she drove her car into a truck. She left a note, and by the time we found it, it was too late. She had specifically listed in that note her ongoing problems with the Department of National Defence and Veterans Affairs over the years.

I'll apologize now for any lapses in emotional composure. There are still several parts of this, and it's relatively recent to us all.

I'm also here on behalf of our nine-year-old daughter and Leona's six surviving brothers and sisters and their families. Corporal MacEachern was the youngest in her family. Three of her four sisters, it's notable, were once or are currently married to Canadian Forces veterans.

In my family, I was the only male in three generations not to serve. Both of my grandfathers were in World War I. My father bore physical and emotional scars from the final days of World War II as the Allies marched into Germany. As well, an uncle, my mother's brother Jack, was killed in Camp Borden training for the RCAF. His name is in a book of remembrance. He was 18 years old. His father, Thomas, after whom I was named, worked as a commissioner right here in Centre Block from the late fifties until his retirement.

It seemed somewhat an odd situation for me to marry a soldier in 2001, having not carried on the family traditions. For my ancestors, however, those were different times, of course. People fought together and they healed together collectively as a society.

Corporal MacEachern was a military policewoman in a man's army. Those who served with her during two stints between 1980 and 2007 knew her as "Puggy". This was in reference to her maiden name, Puglak, and a rather prominent genetically influenced proboscis of Polish-Ukrainian origins.

Leona's parents' story is actually quite a unique tale. It begins in Nazi Germany in 1941. Her parents were essentially slave labour co-opted by the Nazis from Ukraine. In Leona's mother's case, she never saw her mother again after she was taken. It would be almost 40 years before Leona was able to get her back into the country to even be able to reunite with any of her remaining family members.

What brought Leona's story to national attention in the first week of January 2014 was not so much her long struggle with a depressive disorder; the reaction was not so pronounced even for the declaration that it was an intentional act as it was for the letter that arrived just a few days after the funeral in Calgary. It offered a simple condolence coupled with a request to send back the unused portion of her temporary earnings loss benefit for the period from December 26 to December 31. There were some worksheets attached showing the meticulous calculations and telling us the collections unit would be in touch shortly.

What is not known, and adds additional aggravation, is that the letter was dated January 9 in Charlottetown. We received it in our regular mail delivery in Calgary the morning of January 10. I'm a strong supporter of Canada Post and home delivery, but I doubt the letter made its way there in under 24 hours. The individual at Veterans Affairs, whose name I won't share but will never soon forget, had postdated that letter. It was likely written and mailed on the day of the funeral.

The disclosure of the facts made public after January 8 were done after consulting with Leona's immediate family, at the funeral in fact. The mere obituary mention that she was a veteran prompted immediate media speculation and phone calls and emails from former serving members who had figured it out.

Originally we were going to let it go and move on, but I received so many stories from both veterans and active members about their

experiences, both personal and anecdotal, that it was clear that this was a problem far worse than was known.

There is even an unqualified rumour in the service right now that the number of PTSD/OSI-related suicides in the past 12 years exceeds the numbers of those killed in action in Afghanistan.

• (1645)

As you may recall, there were five suicides in the month before Corporal MacEachern's, and there have been at least four more since that we know about. I point to the key phrase there being "that we know about". There's a lack of accurate statistics, publicly at least, and while there are numerous unofficial stories on the grapevine about how some service personnel and veterans have met their fate, the surviving families are often just too hurt or too devastated to disclose the actual details.

So it's no real secret that we have a problem. Soldiers are getting hurt physically and mentally, and they always will. The families will always suffer the losses as well, and in the case of children, perhaps more deeply as time wears on.

The question now is, as we seem to be at a crossroads, what are we going to do about it?

Since this happened in my life, I've been extremely touched by the sentiment and words expressed by former fellow soldiers and their families, some who also are victims of PTSD suicides and some who are PTSD sufferers themselves who have reached out, and even by complete strangers who are genuinely concerned at what seems to be happening with the social contract or the social covenant, if you will, with our men and women in uniform. I'm reserving comment today on the DND position as represented through their lawyers, who recently stated that there is no social contract.

I've talked to a lot of people in the past few months who are actively engaged in the betterment of the lot of our veterans, people like Mike Critchley in Can Praxis equine therapy in Alberta and Mike Blais at Veterans Advocacy. I've met Corporal Christian McEachern—no relation—one of the first high-profile PTSD cases in Canada some 22 years ago when he was actually criminally charged for his actions while acting under duress, because at the time he had sunk deeply into the bottle.

You can say and think what you want about some of these people and the dozen or so undertaking some of their programs and adding to the discussion publicly, but at least they're doing something. Sorry to say it, but if we were doing it right all the time, these groups would probably not need to be there for our veterans.

But contrary to the media spin, this does not mean that I count myself among those who are politicizing or otherwise diminishing the efforts of those in the system, including this committee.

I was recently made aware of a gap analysis to try to close the abyss between DND and VAC when it comes to passing soldiers from active to veteran status. That's a major step in the right direction, as would be making DND resources and OSI clinics available to veterans as well as active members, reservists, full-time...the full gamut. A recent sitting of this committee heard from the NATO veterans group that what we need are crisis response teams. What a great step that would be in the right direction.

Even though there were issues in Corporal MacEachern's case that we know should have been handled better, we really can't fault specific individuals, necessarily. I'm here to urge, however, that the lessons are learned and real solutions applied to improve the process, and as quickly as possible. As much as some would like to put Afghanistan behind us... I hope I'm wrong, but based on recent past experience with other soldiers in crisis, we could be in for a rude awakening rather quickly.

As a side note, I want to share a comment from a reservist who recently returned from the culture shock that she referred to as Afghanistan. In an offhanded but resigned manner, this member told me, "I know I need to get help. I just don't have the energy to go through all the crap."

This brings us to the three themes identified as the relevant topics for review since Honourable Minister Fantino's direction to the committee on November 19, 2013. The first point was care and support to seriously injured veterans. The second point was support to families. The third was improvements to the way in which the Department of Veterans Affairs delivers programs, services, and benefits as set out in the charter.

Well, from where I sit, this review obviously did not come soon enough, nor did it for all the other families in the past few years who are still wondering what the heck happened. I submit publicly and for the record that the Veterans Charter failed us on all three counts.

There was no proper identification, referral mechanism, or specialized care available. Her issues and appeals had begun over one year earlier. In fact, through the veterans Pensions Advocates appeal process, we are still debating today as to what the diagnosis was, what caused it, and who should be responsible. This is because her application for a pensionable award was denied. I received that notice a month to the day after the funeral.

• (1650)

Regarding support for families, the only immediate support we received was through the Calgary Military Family Resource Centre. For those who do not know, that's an autonomous non-governmental agency tasked primarily with assisting families in regular force and on contract whose spouses are posted away from home or who are requiring assistance on the home front.

I wish to acknowledge for the record the quick and appreciated response of director Marla Ferg and family liaison officer James Knox in Calgary, himself an active member and Afghanistan veteran.

Eventually we communicated via telephone with Minister Fantino and the deputy minister, and have since met the minister in Calgary, and this afternoon, to have discussions similar to what we're having right now. But with all due respect to the ministry, had the incident

not touched the public in the way it did, I question whether that communication would have happened or that I would even be sitting here today, right now, with these esteemed colleagues in our call to action.

As for support, other than having been offered the opportunity to posthumously appeal for a pensionable award, her VIP assistance has been extended until the end of this year. That is very appreciated, this being the longest winter we have ever seen; that includes snow shovelling.

What went wrong? Well, here are the things that went wrong with my wife's case over a period of about 16 months.

I again state that we cannot hold Veterans Affairs solely to blame for the outcome, but I do maintain that the opportunity was there at many touchpoints to make a difference and possibly save a life.

Her initial issues of anxiety were dealt with at a Calgary hospital emergency room. She identified herself as a veteran, but as soon as they determined that she was not in an active battle zone and had been retired for about four years, it was assumed that PTSD could be ruled out. She was in Germany and treated for stress and fatigue during the first Gulf War. Although she never saw combat as a military policewoman, she had attended murders, suicides, and fatal car accidents.

A subsequent visit to an emergency room resulted in a more astute diagnosis, and anti-depressive drugs were prescribed, but the application for a prescription subsidy was denied. It was not on the schedule of accepted medication.

During a career counselling call with a VAC caseworker, when she outlined her anxiety and two other medical issues preventing her from finding work, the counsellor told her, "For God's sake, you're still young. Just get out there and get back at it."

She applied for assistance for psychological care. This was eventually granted with the caveat that this was to address symptoms—although there was no formal acknowledgement of a problem. The third party private practice psychologist who was referred said, after a few sessions, that it was out of her realm of expertise. She referred her to the only public mental health ward available in Calgary, with violent offenders and those awaiting permanent commitment. Her condition worsened when drugs were prescribed, with side effects that included constant headaches, insomnia, paranoia, and claustrophobia.

By this time she had put an application together seeking a pensionable award for PTSD, but she was certainly in no mental state to do this effectively. She was convinced, though, that she would do it alone, as she had with many other requests and redresses while in the Department of National Defence.

On December 12 she received a letter of apology from her VAC caseworker: while travelling between meetings, he had apparently lost her personnel file. It was found in a snowbank by a faculty member at the University of Calgary, who called Veterans Affairs to ask, "Are you missing something?" We have not filed a Privacy Commissioner complaint, although we were encouraged to do so.

On December 18, after a two-month wait, she was finally admitted to Ponoka, Alberta's only remaining specialized mental health care facility, near Edmonton. We had hoped that she would finally get a diagnosis and a treatment plan, but they removed her from the drugs she had been on for eight months prior and two days later sent her home for the Christmas break.

So from the standpoint of a family impacted by the Veterans Affairs charter and the process, from all I have learned about the process during her ordeal and in conversations I've had with many since, I would have to say the following toward the future of helping our mentally and physically fallen.

I'm employed in the hospitality industry. In progressive customer service, you solve the problem and sort out the details later. So is this a department with a culture of compassion or efficiency? We can't deal with people, especially wounded people, using the same processes we use to procure office supplies, or spend time reinventing procedures that require five levels of approval on the way up and five levels on the way down. General Dallaire referred to that earlier, dealing with the same procurement process for trucks as we do for people.

• (1655)

Veterans need immediate access to properly trained medical or social workers who have experience with the military or who are at least sensitive to the unique aspects of service, who in a crisis can help make the connections required between the veterans, and who can help.

Caseworkers need to have sensitivity training regarding how and when to identify a potential larger problem and how to get help right away. Again, get the treatment now, and worry about the process later. At least in the short term, connect with approved third party veteran support groups if required, and refer as required. Some of this is happening now; some is not.

Find places where sufferers can connect and restore together with treatment. Public health care has enough problems already, and they're not equipped, apparently, to deal with cases like this. Doctors and front-line psychologists need help to identify potential problem cases and know where to refer them.

In instances of urgency, can we streamline and modernize communication methods? Currently only faxes, letters, and phone calls are permitted. Can Skype-like technologies and the use of email not be relied upon at least for some routine inquiries if a face-to-face meeting cannot be arranged? After all, it's 2014 now.

I think we can all agree that the military culture, with its lifestyle, is unlike any other. My wife loved it. It was her life, her identity. But along the way, things went wrong; they compounded; and she just could not get over it. She did not know what to do with herself in civilian life. Her situation was different from that of many others. Her operational stressors were from things that happened as part of

the military process and not on the battlefield per se. But once someone is psychologically wounded, the paradox is that only those who understand that culture can help.

I've used this analogy before, and I'll use it again today. Some people resist it, but most of the members I've presented it to have at least gotten it immediately: military life is almost like being in a cult. You're trained. You're programmed. You're told you're part of something bigger than yourself, and you will do what you're told no matter what. In return, we will feed you and we will be your family, and this is your life.

Well, people who leave cults require careful deprogramming, sometimes for months and years afterwards. As we heard earlier today, when you leave the military, if you're lucky, you get a pension on the way out the door. After 23 years of service, Corporal MacEachern was receiving \$172.05 a month.

Mr. Chairman, I thank you for the committee's time today, and I thank all the members and the other groups here today for their continued work on behalf of all veterans. There are so many programs that are done right within Veterans Affairs and that do make a difference. This is one that just needs to be addressed as quickly as possible.

Thank you.

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

Now we go to Ray Kokkonen from the Canadian Peacekeeping Veterans Association.

It's good to have you here. Please, go ahead if you will.

Mr. Ray Kokkonen (National President, Canadian Peacekeeping Veterans Association): Mr. Chair, I should tell you a little story. My brother calls himself KO-kko-nen, and I use Ko-KKO-nen, so go figure.

The Chair: Okay.

Mr. Ray Kokkonen: Mr. Chair, members of this vital committee, good afternoon. Thank you for this opportunity to present to you the views of the Canadian Peacekeeping Veterans Association, or CPVA for short, on the enhanced new Veterans Charter. With me, of course, is Joseph Gollner, our patron.

The CPVA, founded in 1991, is a national all-veteran, all-volunteer, not-for-profit apolitical organization with chapters from Vancouver Island to St. John's, Newfoundland. We receive no public funding. Our mission statement is to be a strong and leading advocate for all veterans and to provide a forum of comradeship for veterans. Our association is open to all veterans. Its membership includes World War II, Korean War, peacekeeping, NATO, Balkan, and Afghanistan campaigns, and RCMP, civilian police, and other veterans, with some international members.

The CPVA has been instrumental in such veterans issues as the start-up of the 1-800 VAC assistance line, the creation of the position of the Veterans Ombudsman, the initiation of the August 9 National Peacekeepers' Day, and the Canadian Peacekeeping Service Medal. CPVA also was active in the workup of the NVC, the Veterans Bill of Rights, and the development of the Office of the Veterans Ombudsman. Our members have served on numerous committees related to the NVC and other VAC committees.

One fundamental issue sets veterans in a unique place in Canadian society. They have served their country under the unlimited liability clause that commits them, if necessary, to lay down their lives as the ultimate sacrifice. They have served under a legal obligation to obey all lawful commands, regardless of consequence to themselves. The significance of this commitment and obligation is something that most Canadian citizens do not fully comprehend.

In return for their service, Canada has a duty to provide adequate and appropriate care for its wounded, injured, and sick veterans and their families so that they can live out their lives with dignity. VAC is the vehicle by which Canada meets its duty to veterans. By and large the department does a reasonable job, although it is seldom given credit for doing so. To that end, CPVA has had an awards program for several years at both national and regional levels to recognize outstanding VAC employees and/or their offices. The last recipient of our award was the Veterans Ombudsman and his staff.

We recognize that you have received numerous presentations from other veterans organizations. For that reason, our intention today is to focus on reinforcing the key or core issues only. In essence, as a member of the veterans consultation group of 20 veterans organizations, the CPVA fully agrees with and strongly supports the three priority issues about the NVC identified by the veterans consultation group. Those priorities were unanimously accepted by the group and were made known to the Minister of Veterans Affairs in May 2013 and October 2013.

The priority issues are as follows: the earnings loss benefit must be improved to provide 100% of pre-release income and be continued for life; the maximum disability award must be increased consistent with what is provided to injured civilian workers who received general damages in law court; and the current inequity with regard to the earnings loss benefit for class A and class B, which is less than 180 days' service, for reserve force members for service-attributable injuries must cease.

Although these are the clearly identified priority issues, as they impact on our most severely wounded, the CPVA has numerous other concerns with the NVC. CPVA had serious doubts leading up to the enactment of the NVC given its content and its shift to an insurance-based philosophy. We have made our concerns known

over both the speedy passage of the NVC and the attendant lack of the usual parliamentary scrutiny during its passage.

Canadians, and especially the veterans community, were assured that the NVC is a living charter. This assurance, often repeated, led us to believe that the deficiencies of the charter would be addressed in a timely manner. Regrettably, our confidence was misplaced, because except for the passage of Bill C-55 in 2010, the many deficiencies in the NVC identified by this committee, the Veterans Ombudsman, various VAC advisory committees, and numerous veterans organizations still remain unresolved.

The three priority corrections to the NVC are the most important elements of progress toward an acceptable level of benefits for our most seriously injured veterans. However, there are related matters that need addressing as well. I have three of those, and I will detail them.

First, this is about the social covenant. In the NVC, the Government of Canada needs to clearly reaffirm to the public and to its veterans that it has a duty to its veterans and their families to look after their needs, with special emphasis on those who have been seriously injured as a result of their service.

● (1700)

Second, to make the NVC a truly living charter, a legislative process involving regular critical reviews of the NVC is required, reviews done with the goal of initiating necessary and timely changes to the NVC as and when required.

Third, much of the confusion, frustration, and animosity surrounding the NVC in the veterans community is caused by veterans not understanding the charter, with its often complicated regulations and attendant policies. It is incumbent on VAC to provide information about the NVC to veterans and their families in a form and with content that they can understand.

Three primary issues in the NVC need immediate corrective action in order to allow our most seriously wounded and injured veterans to live with dignity. The need to correct the ELB, the maximum disability award, and the inequity to injured reservists has been reinforced here today. It is clear from presentations made by most of the veterans organizations that the concerns expressed here today by the CPVA have a real consensus in the veterans community. With such strong collective agreement among veterans about these priorities, we strongly urge this committee, VAC, and the government to heed our call to action.

As well, the three related matters—Canada's duty to its veterans, the living charter, and understandable information about the NVC—cannot be ignored, as they are the basis for the operation of the charter and for ensuring it remains relevant.

The CPVA calls upon this committee, with its mandate, proven competency, and genuine concern for the welfare of Canada's veterans, to vigorously pursue the necessary steps required to bring about the essential changes to the NVC, changes that will allow Canada to fully meet its duty to treat our injured veterans fairly and to enable them to live with the dignity which they so richly deserve and which they have earned.

The CPVA is grateful for this opportunity to present its views on the NVC to this committee. We thank and commend this committee for all of its caring, dedicated, responsible, and extremely important and valuable work on behalf of veterans.

Thank you.

• (1705)

The Chair: Thank you very much. We appreciate the input.

Now we will turn to Mr. Daniel O'Connor, please, of the Last Post Fund.

Col Daniel O'Connor (National President, Last Post Fund): Mr. Chairman, lady and gentleman, members of the committee, I'd like to thank you for this opportunity to speak to you briefly this afternoon concerning the new Veterans Charter, and in particular the Last Post Fund in relation to the new Veterans Charter.

I speak to you in my capacity as the national president of the Last Post Fund, of which I've been a member for the past 20 years, serving first as a director then as president as well of the Quebec branch. The last four years I've been on the national executive and am now completing two years as the national president.

My military career spans 30 years, both in the regular and the reserve forces. I hold a degree in electrical engineering from the Royal Military College in Kingston. I've been a member of the Quebec bar since 1990 and I have an M.B.A. from McGill University in Montreal. I've been privileged through my career and my life in all those ways. There are others who have suffered significantly, as we've heard some of this afternoon.

I'd like to give you a brief history of the Last Post Fund. That's one of our many challenges; most Canadians and indeed most military unfortunately are not aware of exactly what the Last Post Fund is and what we do.

Allow me to recall the origins of the Last Post Fund.

Our history started in December 1908 when an unconscious man was found and taken to the Montreal General Hospital. He was found on the street. Arthur Hair was the head orderly at the Montreal General Hospital and he found an envelope in the poor man's pocket. It was issued by Britain's war office. The envelope contained the honourable discharge certificate for trooper James Daly, who had served the Empire for 21 years. He was suffering from hypothermia and malnutrition. He died several days later at the age of 53. His remains were to be sent to the morgue for disposal but Mr. Hair raised money privately to give the soldier a dignified funeral. He was

then buried in Notre-Dame-des-Neiges Cemetery on Mount Royal in Montreal. That started the work of the Last Post Fund and its mission, which is to provide a dignified funeral and burial to every military veteran who dies impoverished.

The early work of the fund was exclusively supported by private donations. However, in 1921 when the fund was federally incorporated, the Last Post Fund began to receive regular government financial support, as indeed we believe was entirely appropriate, but as I'll recount in a minute, has suffered somewhat in recent decades.

The organization then expanded its operations in 1921 to cover the entire country, and so it has done. In 1995 it was mandated to deliver the funeral and burial program, as we know it today, that's run by Veteran Affairs Canada. We have an agreement with Veterans Affairs Canada to run that funeral and burial program.

Since 1909 hundreds of dedicated men and women have ensured that deceased veterans receive the respectful recognition they have earned through their service and sacrifices. Consequently, impoverished veterans are guaranteed a dignified burial, as they fully deserve.

The mandate of the Last Post Fund is a non-profit organization, as mentioned, founded in Montreal in 1909. Throughout the course of its history the organization has arranged funerals, and where necessary, burial and grave markers for more than 150,000 veterans from Canada, Britain, Scotland, Ireland, Australia, Belgium, France, Poland, South Africa, and other allied nations.

In addition to delivering the funeral and burial program on behalf of Veteran Affairs, the Last Post Fund supports other initiatives aimed at keeping alive the memory of Canadian veterans. These include our own military cemetery; a beautiful place in Pointe-Claire, Quebec. I would encourage you to stop by there at some point if you've never been. The National Field of Honour in Pointe-Claire was named a National Historic Site about six years ago. I had the privilege of preparing that application and submitting it to Parks Canada, and we're delighted to be recognized as a National Historic Site, as indeed it is. That cemetery has been in operation since approximately 1930.

Our burials include at our own military cemetery in Pointe-Claire, as mentioned, where more than 21,000 burials of veterans have been performed since 1930. The fund also supports other local fields of honour and is present in more than 2,900 cemeteries throughout the country. The Last Post Fund recognizes the importance of honouring those who served our nation.

Every year, the first Sunday in June—June 1 this year—it holds commemorative ceremonies on the St. Lawrence River for those from the naval services who have perished in war. At the Notre-Dame-des-Neiges and Mount Royal cemeteries in Montreal, and in the afternoon on that Sunday, at the National Field of Honour in Pointe-Claire.

•(1710)

Other activities include the grave marking program, through which the Last Post Fund provides military markers for veterans who lie in unmarked graves. We also work in conjunction with the Department of National Defence to provide markers for members of the Canadian Forces.

I'd like to address the recent improvements to the funeral and burial program, which are very significant and have occurred only in the last year or so.

In recent years, Veterans Affairs asked that we reduce our administrative budget by nearly a million dollars. The rationale for this was the decline in "traditional" veterans of the Second World War and Korea; traditional veterans are what they're known as. The fact is that we have more than 600,000 of what are sometimes termed as "modern-day" veterans, who were not covered by this program at all.

We're losing about 10,000 to 15,000 of the traditional veterans every year. There only remain fewer than 100,000 in Canada today. Because of that decline, we were forced to reduce our budget for the funeral and burial program—which had some logic to it—and we closed many of our offices across the country; we have branches in every province.

But the logic was flawed because of the 600,000 modern-day veterans who were not covered, indeed, since beginning of the program. Of those 600,000 modern-day veterans, Veterans Affairs Canada has compiled the statistics and estimates that 400 per year die in impoverished circumstances. They were all ineligible for the funeral and burial program.

All through these tough times, we continued to advocate for changes to the program, namely, on the issue of increasing the maximum allowance payable to funeral homes, which hadn't changed in decades. The amount allowed was \$3,600, whereas the average cost of a funeral in Canada was between \$6,000 and \$8,000. Fortunately, in the federal government's 2013 economic action plan, our advocacy paid off. Last year, the maximum allowance payable to funeral homes was increased to \$7,376, which is much more in line with the realities of the cost of a funeral. This was one of the most significant efforts of the Last Post Fund, but not the most significant.

The big issue was the eligibility for the funeral and burial program, which we wanted to extend to all Canadian Forces veterans in financial need at the time of their death. In 1921, the Government of Canada first recognized its obligation, on behalf of all Canadians, to provide funding for the dignified funeral and burial of all Canadian veterans who pass away with limited or no financial resources. However, in recent decades, the regulations governing the funeral and burial program have stipulated that only Second World War and Korean War veterans, and those in receipt of a disability pension, would be eligible for the program.

In recent years, because of this, and because of the aging population of modern-day veterans, the Last Post Fund publicized the fact that our mission includes those ineligible members. In the last two years, we spent \$98,000 of our approximately \$120,000 in donated funds—that's all we have—to bury 31 veterans, because they were ineligible for the program. Our funds were virtually

depleted, and donations are hard to come by. That's why we were so delighted that in the 2014 economic action plan the government of the day recognized this obligation of all Canadians and made the modern-day veterans eligible for the funeral and burial program. It was an enormous relief to the Last Post Fund. We will continue our mission indefinitely with those funds in support of Veterans Affairs Canada and the program.

There remains a little bit of work to be done—and I say "a little bit" in terms of the enormous benefit of this past budget—but it's not insignificant. In 1995, the estate exemption for eligibility for this program was \$24,000. Because of the fiscal difficulties at that time and the attempt to reach a zero deficit in the federal government program review, that amount was reduced to \$12,000.

•(1715)

Just briefly, the estate exemption means that if a veteran dies and if his estate has more than that amount, then that veteran and that veteran's family are not eligible for the program. I would point out, to be transparent on this, that the eligibility and that threshold exempts the house, the principal residence of the veteran, and the car. So other than the house and the car, if veterans had, in those days, \$24,000 or more, they were not eligible. That's not very much money, particularly if one wants to leave a little bit for the children, etc., in one's will.

That amount was reduced to \$12,000 in 1995 and has not changed since. Today, if a veteran dies with \$12,000 or more, that veteran and that veteran's family are not eligible for the program. I find that a travesty. I find it illogical. If the right number in 1995 was \$24,000, why is that not the right number today? And that number today, according to the inflation calculator of the Bank of Canada, is \$37,000. There's been 42% inflation loss since 1995, so the right number today would be \$37,000 rationally looking at this. That is the biggest problem we have today, and what it means is that many of our veterans who pass away with very limited financial resources are not caught. Their family must come up with the \$7,000 to \$10,000 for the funeral and burial out of the very limited means that remain in the veteran's estate. I don't think, and we don't think, that is right or fair.

The exemption for the estate must be increased to \$37,000, which I think would be fair, and the second element of this is that it should be indexed because we got ourselves into this problem over many years, and \$12,000 hasn't changed since 1995. What a travesty. How can that be supported? In any event, it has to be increased to \$37,000 to be back to where it was in 1995, and indexed from here on so we don't get into that problem again.

To summarize, what the Last Post Fund would like to see is the inclusion of the funeral and burial program in the new Veterans Charter. In a certain sense, administratively or bureaucratically, it doesn't really matter whether it's in the new Veterans Charter or independently legislated, as long as the program gets delivered. That much I grant, but I'm thinking that it falls within the parameters of the new Veterans Charter for benefits to veterans and their families, and that's exactly what it is. For historical reasons that I don't fully understand, it was not exactly relegated but put into the commemorative side of Veterans Affairs, and that's where it is today. Really, it is a service to veterans and should probably be part of the new Veterans Charter and the benefit to families. That should be given good consideration by this committee.

Second, the estate exemption, as I mentioned, should be increased to \$37,000 as of today, and finally, it should be indexed. The state exemption should be indexed from here on forward, but also the benefit that I mentioned of \$7,600 for the funeral itself so that again we don't lose through the erosion of inflation over time.

Mr. Chairman, ladies and gentlemen, I thank you for the opportunity to speak to you today. I commend the committee for its work and I look forward to responding as best I can to any questions you may have concerning the Last Post Fund or the administration of the funeral and burial program.

Thank you, sir.

The Chair: Thank you very much, Mr. O'Connor.

Now we go to Canadian War Brides, Melynda Jarratt, please.

Ms. Melynda Jarratt (Historian, Canadian War Brides): Thank you very much.

I am Melynda Jarratt and I am an historian of the Canadian war brides. I've been doing research, writing, and documenting the Canadian war bride experience for more than 25 years. I'm here today to speak about the Veterans Charter because I believe it is important for you as parliamentarians to understand the similarities between the veterans of the Second World War and the Korean War and the modern-day veterans, for although they may seem very different, they are in fact very similar. These are the veterans of the Afghanistan, Bosnia, Rwanda, and Somalia conflicts.

The pain that the World War II veterans suffered and the lessons that they learned about pensions, services, and the support for physical and mental injuries that they suffered, including undiagnosed post-traumatic stress disorder, are things that I sincerely hope are not lost on this committee as it reviews the Veterans Charter and Bill C-55.

I'm particularly interested in the issue of PTSD because it's something that I have heard a lot about in the course of my research. It's not something I really expected to hear, but it keeps on coming up. Whenever I hear about PTSD, I'm immediately brought back to a war bride who I met a very long time ago—one of the very first war brides I met in my research—who told me about the story of her arrival in Canada in 1946. Her husband had served in England first, and then he was sent over to the Normandy landings, Belgium, Holland, and then into Germany. His service was fraught with unspeakable horrors that no human should have to see or expect to

live through, yet he did. He survived and he was shipped back to Canada.

He was given a prescription for his nerves and expected to return to civilian life, to a job and to his family who were soon coming over; the war bride was coming over with her little baby. Within a year he was dead. He killed himself as the pressure was too much for him. He committed suicide, leaving her a widow with a small child and with no skills really. At that time it was traditional that women did not work. There was no social support system. There was no social welfare system here in Canada at that time. She had no family so she returned to Britain. Here was a family devastated by the legacy of war. His pain was over but hers was just beginning.

She's one of many, many women and children who I have met in the course of the last 25 years as I have worked on the issue of Canadian war brides.

Other Canadian veterans of the Second World War, their wives, and their families suffered in silence with undiagnosed PTSD for years. It was not clinically recognized. I know you've heard this before. So what ended up happening is when you had a problem, they'd ship you off to the psychiatrist, say for example at Lancaster Hospital in Saint John, which was for veterans. They gave you a prescription and sent you back home where you immediately went to the Legion or out in the woods with your buddies and spent a lot of time drinking to dull the pain. It was an all too familiar story for many children of Canadian veterans whose alcoholic fathers spent more time at the Legion with their army buddies than they did at home with their families.

Another war bride tells me of the day her husband arrived from overseas in their tiny village in northern New Brunswick in June 1945. She had arrived about a year before him on an earlier draft of war brides in 1944. She landed in this little town with her 18-month-old daughter, and they happily anticipated the return of her husband, who had been awarded a military medal for bravery; he had saved a comrade in Italy. He had gone on after Italy to Holland and through to Germany until the end of the war and came back. He was a wreck. Of course she didn't know that because she was in Canada, so they happily anticipated the day of his return.

Well, on the day of his return in June 1945, they went to the bus stop to wait for him and he never showed up. Two days later he arrived drunk, dishevelled, and abusive. That was basically the rest of her life in Canada. She's still alive now; she is 92 years old. His drinking continued and worsened. He wasn't the same man that she had met in England and fallen in love with.

● (1720)

He lost his job. He had nightmares, kicking his legs at night. They couldn't sleep together anymore. He was always kicking her and hitting her, screaming, fighting with his friends at the Legion, where he'd get drunk and then get kicked out. He finally got a part-time job working in the woods, and he found peace in the woods. That was the place he really loved, but he never had a full-time job. She had to go to work. He never killed himself either, but he put his family through hell. The wounds went down through the family, through the generations, to her daughter and then their grandchildren.

I could go on and on with cases like this from World War II.

Another fellow, a World War II veteran, in an alcoholic rage threatened to kill all his children with a shotgun. He chased them down a rural road outside of Fredericton, taking potshots at them. He physically abused his wife. He pushed her down when she was seven months pregnant. He knocked out her front teeth. He kicked her in the stomach. He caused her to go into premature labour. I met one of the babies who survived that kicking. She cried, and I cried too, because it was a terrible story.

I also heard of wives who hid from their husbands at their friends' homes, their black eyes covered with glasses and makeup. I heard of wives who left with the children, eking out an existence in poverty in New Brunswick, or who left to go back to Britain, Holland, or France, all of the different countries where the war brides came from, because they just could not stand the abuse.

These are memories that die very, very hard. In fact, they don't die; they live on in the minds of the people who were affected by it.

I am here today to tell you that 75 years after the declaration of the Second World War, which we are commemorating with great fanfare, there are thousands of Canadians whose World War II fathers suffered from undiagnosed PTSD and put their families through hell. These children are still suffering from it. This is quantifiable pain with quantifiable suffering. It can be measured. It is not a fairy tale or an excuse for bad behaviour. It is real, and it is caused by the horrors of the Second World War.

This brings me to today's veterans of the Afghanistan, Bosnia, Rwanda, and Somalia conflicts. I live in Fredericton, next door to Canada's largest military training base in Gagetown. Soldiers have been part of the life of Fredericton for nearly 200 years, and I dare say more than 200 years. I see soldiers in uniform in the city all the time, but it's the ones I don't see who I worry about, the ones who have disappeared into poverty, who have turned to drugs and alcohol, and who have, worse, killed themselves, leaving a crushing void behind.

There have been several suicides recently of New Brunswick soldiers. Every time I hear about another soldier who has killed themselves, I think of the war brides. I wonder what they think when they read these articles in the newspaper or listen to the television and hear about these suicide stories. I wonder how these women managed with so much suffering in their lives for 30, 40, 50, 60 years. Granted, it was a different time, with a different way of thinking. There were the traditional values and attitudes towards marriage: you made your bed, you had to lie in it; divorce was unacceptable; and marriage was forever, the phrase I often heard.

Today's wives are different. They have a modern way of thinking about relationships. Divorce is not so unthinkable today. They have the Internet, which allows them to explore the resources they have available. There's a social safety net for them. There are also social support services, transition houses where they can go to for their safety, which the war brides of World War II did not have. Our society no longer turns a blind eye to that kind of abuse, shushing it up like they used to.

Most importantly, with all the suicides there has been a greater focus on the causes of PTSD. Canadians have a greater understanding of the issues. Talk to anybody on the streets—anybody—

and you will hear a lot of sympathy for today's veterans. Canadians have connected the dots between modern soldiers' service in conflict zones and the combat injuries such as PTSD. It may be too late for those veterans of World War II and the Korean War, but it is not too late for today's veterans. They need our support, and so do their wives and their children.

• (1725)

Canadian soldiers of the Second World War didn't have everything they needed, especially when it came to undiagnosed PTSD, but they had one thing they could count on and that was a pension. One 91-year-old war bride whose late husband served overseas for nearly six years, from December 1939—so that meant he was with the first troops who landed on December 17, 1939—to June 1945, two of those years as a prisoner of war in Germany, and who suffered undiagnosed PTSD their entire married life, told me the other day that she didn't really have anything to complain about in terms of money, and she felt that she was well taken care of. She did have this to say, and, let me tell you, the wisdom of these old ladies just never fails to amaze me. She said a widow is only as good as her husband's pension, which is precisely the problem.

She has his pension. It is guaranteed.

She has the VIP, of course, and help with assisted devices such as walkers or chairs, and even an adapted potato peeler if she needs it, because many years ago, she applied for and received assistance as a British veteran, when this was offered to Canadian war brides and apparently to males as well who were British veterans. You could get the same types of services that Canadian veterans were getting, not a pension per se but VIP services. So she gets those things. Meanwhile, she has a friend down the street who's also a war bride, who also served in World War II in Kenley. She's a 92-year-old war bride. She's a veteran of the British WAAFs. She survived the bombing of the Kenley air force base in Britain in 1941, during the Battle of Britain. She did not apply for those services before they cut them off, and consequently she does not get them.

These two women live in the same area. One gets perks and the other doesn't. That's not fair, if you ask me. I am sure there are hundreds of other people just like them. It's an example to me of the inequality that is rife across the system because of arbitrary deadlines and decisions that are made in offices by faceless bureaucrats and politicians who have no idea how their actions affect the quality of people's lives. As was the case with the Veterans Charter, decisions affecting the quality of people's lives have been made. I agree with the testimony that has been given here as recently as last week by Canadian veterans advocate Michael Blais, who said that Canadian soldiers, their wives, and their children should have a choice as to whether they want a lump sum payment or a pension.

These war brides, who are 91, 89, 92, or 93 years old, most of them having outlived their husbands, are living proof that these benefits they receive, uneven as they may be, give them a quality of life that others do not have. They can live independently in their homes. They can get a little bit of help with their housekeeping or snow shovelling or lawn mowing. It's the kind of assistance that improves the quality of their lives. That new generation we're talking about, the modern-day veterans, are young and they have their life ahead of them, and I suppose that's what worries the government. It's thinking, "Oh, my God. Look, we have another 75 years ahead of us with these people."

My war bride friend and her husband, who was captured in Sicily and who served two years in a prisoner of war camp, were also young 75 years ago. They had a life ahead of them. They were promised a sacred trust. It is an obligation. What is so different between a human being who gave their youth and their life for their country 75 years ago and the young men and women who are coming up through the Canadian military today? I see no difference whatsoever. The sacred trust cannot be broken. If it is broken, then all the stickers and the buttons and the flag-waving and the mantra about save our troops is meaningless pablum.

If you disagree with supporting our troops, then somehow you are unpatriotic, and you in fact may even be considered treasonous. However, if you talk to some of these people today who have been speaking before you about the treatment they've been receiving, they do feel they have been abandoned. They do not feel that the government supports our troops. So it shouldn't come as any surprise that the Department of Veterans Affairs hasn't always done what was right, and they should be admonished for it.

I recall a story told to me by the daughter of a Japanese prisoner of war who, after having survived the torture, the barbarity, and the malnutrition of four years as a prisoner of war came back to Canada to be reunited with his war bride. The only job he could get—because he had no education and he was just a private when he was captured in Hong Kong—was as an orderly in a mental hospital in Saint John, New Brunswick. That was a tough job for a prisoner of war coming back from four years in a Japanese prisoner of war camp. He was on his feet a lot in the hospital, and he had trouble walking.

• (1730)

That suffering was the result of his torturers taking glee in beating him on the soles of his feet. When he applied for orthotic inserts, he was told that it was not connected to his war service. He was furious. He went into a ballistic rage at the DVA office in Saint John. He could not believe that they would deny him this measly assistance.

He never got his orthotics. It changed him, his daughter told me. He lost faith.

The family suffered because of his father's service. It's an insult that rings loud and clear all the way through to the third generation of that man's family. Talk about Veterans Affairs and that's the story you're going to hear about 75 years after the beginning of the Second World War, about how badly he was treated. They don't have fond memories of their father's treatment by the DVA. When his daughter tells that story I cry, because she cries. It's a terrible thing to hear.

I don't want to cry anymore with veterans' wives and children. I beg of you to do the right thing for veterans and widows and give them a choice as to whether they want the lump sum payment or a pension. It is the right thing to do, and it will restore Canadians' faith in the sacred trust between veterans and government. It is, as Senator Dallaire said, "a philosophical framework", a set of values that will guide how we deal with veterans over the next 75 years.

Thank you very much.

• (1735)

The Chair: Thank you, Ms. Jarratt.

We'll now begin our round of questions.

We'll begin with Mr. Chicoine, please, for six minutes.

[*Translation*]

Mr. Sylvain Chicoine: Thank you, Mr. Chair.

Ladies and gentlemen, thank you for being here. This will definitely help us with our study on the review of the New Veterans Charter.

I would like to thank you in particular, Mr. MacEachern. Just the fact that you are here today and the composure you have shown in your testimony are evidence of a great strength of character, especially since you are probably still in mourning. I want to use this opportunity to express my deepest condolences to you.

Mr. MacEachern, you talked about this briefly in your opening remarks, but especially in the testimony broadcast on television earlier today. You mentioned that your wife submitted claims for benefits and health care that, I assume, were related to her mental health issue. Unless I am mistaken, her two claims were rejected. She did not continue her process because she was swamped in paperwork.

Could you describe the difficulties she faced in obtaining benefits and mental health care, and tell us whether this played a role in her decision to end her life?

[*English*]

Mr. Thomas MacEachern: I believe it was certainly a factor. The issues that were plaguing her over time stemmed back quite a few years, actually, but had been brought to the forefront again as she was having difficulty readjusting to civilian life. After a couple of years, she needed to try to find a career or a way to get income, and she had come to the conclusion that she needed some kind of benefit or help.

The more it spun out of control, the more she felt as though she needed to find something to do. She couldn't grasp what she could do because she only had these skills; she had been a soldier her whole life, and she was too old at that point.... She was a policewoman, originally, but by that time she was in her mid to late forties and was too old to go back to that again. So then she started a process of trying to, initially.... There were other things that are not in the document or in the statement that had to do with medical issues that she had tried to address and get a pension for. These were all summarily denied.

That created the stress and the anxiety situation. Eventually that led to the point where a doctor said, “You know, we think...we're going to call it a delayed PTSD.” But it's such a vague and general term.... That's part of this whole issue that I find problematic. It's that it's such a vague term, and no one can really nail down specifically what it is. It seems to encompass many different things. Certain things can trigger it.

In her case, at the time of her death, the actual appeal was on the table, as it were, for a pensionable award, and we did not receive the denial until after her death. It is now being appealed.

[Translation]

Mr. Sylvain Chicoine: You also mentioned that she made a list of the battles in which she participated. I understand that justice for all was important to her and that she identified some of the issues with Veterans Affairs Canada. Can you tell us whether this is the case?

[English]

Mr. Thomas MacEachern: As I stated in the statement, it outlines certain touchpoints along in the process where she didn't really get too much sympathy, certainly, and there was no direction to.... We always felt as though, at some point, someone might be able to identify and hear what she was saying, and see that there was a problem here a little deeper than just someone applying for a pension, that if someone is applying—and especially when you get to the stage of applying for a pension for a stress disorder—we need to have some kind of specialized care. What they said was that they had a list of approved psychologists, that she should go ahead and see them, and then they would see where things were at and make an assessment from there. They did, in fact, subsidize those sessions. Unfortunately, the person she saw found it to be out of her realm of expertise.

• (1740)

[Translation]

Mr. Sylvain Chicoine: Thank you.

A month ago, veterans' spouses came to testify before the committee. They said that they did not feel very supported, were not receiving any assistance and often had to leave work to take care of their husband.

What is your situation in this regard? Would you have needed help, as well? I assume that you did not have time to ask for it, as you obviously had to obtain a diagnosis in order to be eligible for benefits. Would you have needed assistance to deal with your problems?

[English]

Mr. Thomas MacEachern: That I saw personally, after the fact?

[Translation]

Mr. Sylvain Chicoine: Yes, I am talking about you, personally, after or even during the fact. Some of the women told us that they had to leave their job, that they could not have one anyway. Was that the case for you?

[English]

Mr. Thomas MacEachern: No, I guess I could say I had a fairly stable job and position that I was able to manage. It wasn't easy. This was an ongoing process leading up to her death.

This whole process lasted about a year and a half. At times, you would think things were levelling or getting better, and then there would be crashes again. I have a sympathetic employer.

One of the difficult things—and I've had some discussion with other people about this—and something that's unique about this is, let's face it, that I'm a male. Usually, it's the other way around. It's usually a male soldier, and a female dealing with that and having to take care of the children. I can say that—let's face it—women have more of a maternal instinct than men do. So the mere fact of having to take on now, on top of my job, the responsibility role and the care of our daughter is a completely new challenge.

In that regard, when I referenced in my statement the Military Family Resource Centre, those people have been absolutely fabulous about finding programs, resources, and in one case even some financial assistance to get a day care program so I could continue to work. I would think a lot of people might be in a situation where they might find themselves unable to work, because you can't afford to work and pay day care in some cases, depending on how many children you have. Some women may be in that situation.

The Chair: Thank you very much.

Mr. Lizon, for six minutes.

Mr. Wladyslaw Lizon (Mississauga East—Cooksville, CPC): Thank you very much, Mr. Chair.

Also, thank you very much to all the witnesses for coming here this afternoon, especially Mr. MacEachern. My best condolences, and I understand everything is still very fresh, and I don't think any words can bring any relief to you or your daughter. I can't find words to describe how bad I feel in hearing your story.

I have one request and one question. Down the road, if you would like or if you can, list some recommendations—and I don't want to put you on the spot now—that you think would be useful for us when we complete the study, do a report, and recommend changes to the charter, it would be appreciated.

But the question I want to ask is this. In all of these several years after your wife left the army and was trying to adjust to civilian life, was there any beacon of hope at some point that you or she did get some understanding, or did get some hope that she would be okay?

Mr. Thomas MacEachern: Not really. I should say that initially, after she was out of service for a few years, things were quite good. She was engaged with a home business. She ran a day care in the neighbourhood and took care of other children. But after a while that in itself became quite a stressful situation. She said that running a day care was worse than any duty she'd ever been given in the military.

That said, after she finished that, she said she couldn't do it anymore, that she was tired of changing diapers and running the little gaffers around the house, there was a period from that point—and I want to say it was probably four years from that point to where we ended up last Christmas—in which there would be relapses, if you will, in the positive sense. She would be on a slide, things would get a little better, a little beacon of hope, words of encouragement. She did a lot of volunteering. She'd go out and work at food banks and churches and things just to try to keep engaged and keep active. But whatever that problem was, it just kept coming back.

I have to say as a spouse—and anyone else in the room who has experienced something like this—you feel helpless. I didn't know what to say. I could try to encourage. I could say let's go see the doctor, let's get help. But at the end of the day, you're just left...not knowing. It's a difficult situation.

• (1745)

Mr. Wladyslaw Lizon: Thank you.

I was listening to you, Madam Jarratt. I was born nine years after the war, and I grew up in a community where everybody was affected by war. My relatives were either fighting in the army or forced to go to Germany and work in forced labour camps and farms. My father was in the resistance movement, or as we called it “in the forest”. I grew up among people who were affected not only by the fact that their relatives were in the military or were fighting, but also by the war itself. There were bombings, shellings, and atrocities, because there were armies moving back and forth. I understand very well what you're talking about. This is something that was part of the life of very many people after the war.

I have a general question for everybody, because we hear different witnesses and organizations here talking about the charter. Were any of the organizations here this afternoon part of the consultations pre-2005?

Mr. Ray Kokkonen: We certainly were, the CPVA.

Col Daniel O'Connor: The Last Post Fund, to my knowledge, was not.

Ms. Melynda Jarratt: We weren't either.

Mr. Wladyslaw Lizon: Can you provide the committee with the involvement of your organizations in the consultation with the government of the day? What were your positions? Where were your recommendations? Were they implemented?

Mr. Ray Kokkonen: I'll give a short answer first. The CPVA was one of the organizations that resisted the fast passage of the new Veterans Charter, because it just simply didn't get the scrutiny that we thought it required. Of course, that's all history now.

But for the other parts of this question, I'd like to pass it on to General Gollner, who has lived those times too.

BGen Joseph Gollner (Patron, Canadian Peacekeeping Veterans Association): Mr. Chairman, we don't have the time to go into the evolving new Veterans Charter. As General Dallaire said very succinctly this afternoon, it was an ongoing process, but for reasons—dare I say it here, perhaps political expedience?—the new Veterans Charter was brought forward and it was given swift passage, as we've heard. Even senior members of the Veterans Affairs staff, including the late Jack Stagg, who was the deputy minister, said that it was unfinished legislation and they needed more time. But it was brought before the House and, as we know, passed unanimously in a day.

There were gaps that were identified. The business that was identified, again by General Dallaire, of the lump sum was not part of the discussions. There was Dr. Neary's study, and that was part of it, but there was also ongoing work within Veterans Affairs and the finance committee, probably the Treasury Board also, on how to take this document forward.

We talked about the philosophy of dedication and duty, but that wasn't a topical issue. The underlying sort of premise of the discussions was how they could save money. That was in the time when the government of the day was focused on trying to save money, so there were some adjustments made that surprised all the veterans advisory groups involved in working committees and one thing and another. For literally years those observations and concerns were overridden, and the bill presented.

But I go back to Jack Stagg, who was the deputy minister. He was a key and instrumental player, and he was very concerned when it went through so quickly that, as he said, and I just said now, it was unfinished legislation. We have paid the price of that for the last nine years.

• (1750)

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

We now go to Mr. Valeriote, please, for six minutes.

Mr. Frank Valeriote: Thank you all for taking the time to come up and speak today. If I don't necessarily get to you with a question, it doesn't mean that your ideas haven't been received and will be brought forward.

Mr. MacEachern, condolences certainly aren't enough. Others have expressed them. Frankly, they are hollow if they are not met with some form of reaction to it, and I apologize for what you have been through.

I met with the department today on a briefing to talk about the details of the new Veterans Charter and its application. While I was with them I was thinking about our social covenant, our sacred obligation. Over the weeks and months, I've been thinking about it and trying to define it. What does it really mean? I've come to the conclusion that, because those who go to fight on our behalf when called to go anywhere we send them and are prepared to give up their lives without limited liability, Canadians', not the government's, but Canadians' liability should also be unlimited. It's a reciprocal covenant, not just one-sided, but reciprocal. So what I'm hearing is that we're not carrying our side of the bargain on all of this.

I want to speak specifically to the comments you made—you listened to Senator Dallaire—about a concern that there are a lot of people out there right now suffering, and these events of suicide could very well happen again and again to the point where there will be more victims of this war after their return than before.

I also heard from others before. Just this week I heard from the National Council of Veterans Associations in Canada, Brian Forbes, and last week Canadian Veterans Advocacy through Michael Blais that things have to be done now. I'm concerned, frankly, that by the time this study is over, by the time it's prepared, by the time the minister receives it and responds to it, far worse things are going to happen.

Do you believe that things can be done right now to start changing this? What I'm hearing is there's a wrong culture right now with the bureaucrats. They are more like an insurance company that wants to deny a claim for whiplash in a motor vehicle accident, and it shouldn't be that way. You shouldn't have to prove your claim. You're injured. That's it.

Can you respond to that?

Mr. Thomas MacEachern: I think you've stated it eloquently. Certainly from the position of people on this side of it, that's what it feels like.

One other veteran who prepares these claims for other Afghan vets did seven tours over there and he, himself, became PTSD-diagnosed after seven. He now spends his time preparing pensionable award claims for other veterans who are coming back and he describes it as a battle. He says the battle now is at home and the battle is to get care for these people.

You have to do the paperwork first and it takes a minimum of three months. I was reading a website the other day on the veterans and what they consider to be a successful turnover rate of claims is 80% within 16 weeks or something. It was just a staggering number. How can you even benchmark that as a success or have a benchmark like that when you're dealing with this issue, a life-and-death issue?

The best thing I've read on the subject in the last while was testimony here, I believe it was the March 7 session. I think it was from the NATO veterans association, which said you need crisis response teams.

• (1755)

Mr. Frank Valeriote: And we need it now.

Mr. Thomas MacEachern: Exactly.

Mr. Frank Valeriote: We ought not to wait before this report is submitted.

I'm seeing everyone nod yes.

Mr. Thomas MacEachern: How that happens, I don't know, but...

Mr. Frank Valeriote: Yes, Don.

Mr. Don Chapman (Subject Matter Expert, British Columbia, Canadian War Brides): I come at this in a very different manner. I have been fighting the Canadian government bureaucrats for 40 years. I've written a book on it. I know what's it like to come up against brick walls.

I'm also an airline pilot. If something goes wrong in your cockpit, you don't want to just sit there and talk about it and talk about it and talk about it until you hit the mountain.

This is something that needs to be done now. In essence, these soldiers serve the public, but so do you, and the entire Canadian population is saying, do something about this.

Mr. Frank Valeriote: I thank you for that.

I do have one more question, and it's quick.

When I met with the ministry today, they told me there were a little over 7,000 cases that they're managing and they have caseworkers who each have on average 40 people on their load. I worked that out to about 170 people. I see that as overstrained, underfunded, and underqualified. You said, "It's not my experience". That doesn't help when you're in the middle of this kind of circumstance.

Would you agree, based on your experience with your wife, or any others on the panel, that the caseloads are too high and they're not properly qualified to serve our veterans?

Ms. Melynda Jarratt: I'd say deal with the problem now and we'll work out the details later. I don't think that you can quantify the value of someone's life. It's impossible. After they're gone, we're going to be dealing with a deck of cards that is collapsing into the ground and it's going to be too late. We need to deal with it now. Let's get it over with.

Mr. Frank Valeriote: Yes. Anyone else?

The Chair: I guess everybody's in agreement.

Mr. Frank Valeriote: Thomas, are you in agreement with that?

The Chair: You're not allowed to ask, Frank, you're out of time. But if any of them do want to respond, I enjoyed your question very much, but I assume everybody's finished? Or does anybody else—

Mr. Thomas MacEachern: Just quickly, if I could add, Mr. Chair.

One of the paradoxes of that is a lot of people may bring to the conversation that the last thing we need is more bureaucrats. Yet ironically, yes, I think we need more people in places to be dealing with this. The caseloads are large.

One of the better caseworkers she had indicated that, and apologized. She said she was sorry, but... And it all goes. There's a rotation, right? Everybody waits their turn. There's no prioritizing. So once you come into the queue, you're in the queue until it comes around. Unless it's an exceptional special case, you wait until your turn comes around and wait until the paperwork's done.

Mr. Ray Kokkonen: Mr. Chair, could I comment?

There was an interesting article, actually a bombshell of an article, by the Veterans Ombudsman in *The Hill Times*, I think it was yesterday or the day before, where he actually rebutted a previous proposal by Michel Drapeau and a colleague about changing the organizational structure of VAC. Rather, he said, that the problem is in the front-end application process. By changing that process, we could probably speed up things very much.

Of course, a couple of things he mentioned in there were, first, that even the Canada Revenue Agency accepts certain documents without verification at that time. I think the second comment that stuck in my mind was that Veterans Affairs Canada should assume that most veterans are honest.

Thank you.

The Chair: Thank you very much.

Mr. Gill, please, for six minutes.

Mr. Parm Gill (Brampton—Springdale, CPC): Thank you, Mr. Chair.

I also want to take this opportunity to thank our witnesses for appearing before the committee and helping us with this important study.

I also want to echo the comments made by my colleagues to Mr. MacEachern. We are extremely sorry for your loss, sir. Words can't necessarily replace anything, but we really feel for you and your entire family in your loss. Thank you for having the courage to appear before the committee and share your experience with us so that we might be able to help others.

I understand that your wife served approximately 23 years in the service. Am I right?

• (1800)

Mr. Thomas MacEachern: Yes, 23 years over a period of 27, and part of the reason for that is... She was an exemplary soldier, had extremely good reviews and was listed as promotable. In 1994 while in Germany, she brought forth a case of sexual harassment against her supervisor, and that was the end of her career. She appealed to the Canadian Human Rights Commission and won, and DND was forced to allow her to come back into service.

When she came back into service, she redressed in earnest to get back her position, rank, and pay: denied, denied, and denied. That was part of what led to her ultimate frustration with the service. She had given her entire life and everything to the service. She loved her job. Everything was going very well. It went sideways, and she could never get over that.

Since this happened, I've gone through her personal papers. She had 22 boxes of military documents: her entire career, all the redresses, all the cases, and all the Veterans Affairs studies. There were two large boxes for Veterans Affairs in the last few years. Going over that case of the sexual harassment, I look at it today and I go, "There's no way that this would be allowed to happen today." But it did then. Essentially, they said, "You know what? We're tired of hearing this. Why don't you just go away?" But once that case was presented, Human Rights turned it around in something like three weeks and said, "Yes, you definitely have a case of sexism here."

That was the beginning of her difficulties psychologically, and she sought help in DND for stress and anxiety in Germany at the time. It's documented. It's on record. Her release form lists all the things that she had been treated for by the medical people on base during that period of time in five years—she had a five-year posting there—and under "treated for anxiety and depression" was "resolved with counselling". There was no further follow-up. Then, on her second tour, there was another similar incident while in Kingston. She was based in Kingston at the training school there and had a relapse of depression, essentially. The resolution of that one was to see the padre. There was no further action taken on that later.

Again, those are touchpoints in DND, and this is sort of a separate issue, but those are the points at which, again, early on, there was opportunity, I think, to probably address what was really going on at the back of her mind, although it was pretty obvious to her. She was deeply, deeply hurt by that, and the second phase of her career was all about getting back in and getting restored so that she could get back to where she was. It just...well, it never happened.

Mr. Parm Gill: There's a second question I have, sir. You mentioned that she was receiving a pension of roughly \$172 per month, I understand. Was that the only form of payment she was receiving from the government?

Mr. Thomas MacEachern: Not at the time. To clarify, when she did come forward for the psychological help, she was given the loss benefit allowance as well—lost wages. That was the money the letter came out to claw back after her death. She had been receiving that for...I want to say six or eight months.

Mr. Parm Gill: Can you tell us how much that was?

Mr. Thomas MacEachern: It was a few thousand a month. It was her full pay from her last rank as corporal. The reason for that small amount was that she did not have a full military pension even though she would have qualified. When she was "5(f)ed" the original time, they essentially said, "Here's the paper. Sign here." So she was walking out the door with nothing basically. She signed for her pension and took her pension out. There's a period during which you can buy back into your pension. By the time she got back in and was allowed to rejoin, the period had elapsed.

Her second tours were thus between Class A, Class B, and reserve, so she was never able to fully get back onto a full pension. That's a whole other issue: the difference in pension for reservists versus for regular force members and the problems that brings up, especially, as was mentioned earlier, when you have reservists fighting side by side with regular force people, and these guys get a pension and these ones don't. That's a whole other story.

• (1805)

The Chair: Thank you, Mr. Gill.

Ms. Mathysen go ahead now for six minutes, please.

Ms. Irene Mathysen (London—Fanshawe, NDP): Thank you very much, Mr. Chair.

Thank you to all the witnesses.

It's been a very emotional thing listening to your testimony. I do have a number of questions. I want to preface them with some specific experience of mine as an MP with a veterans hospital in my riding. Parkwood is in my riding.

I meet modern-day vets all the time. The reason I meet them is that they've been denied long-term care. They've been denied support at that veterans hospital.

One in particular—a colonel, a Cold War pilot, one of those people who flew along the Iron Curtain day after day—would have been 80 or 81. He required surgery for his back because of what the surgeon said was a service-related injury. He ended up in a wheelchair. He couldn't go home because there was no facility at home for him. There was no long-term care bed in a provincial nursing home. He was told, "Sorry, you have to leave".

So we fought to allow him to stay at Parkwood, to get a long-term care bed. With a lot of persistence and a lot of good people fighting for him, he was finally given that bed at a cost. He had to pay for the bed, and Veterans Affairs had the audacity to say, “Don't worry, Neil, you're not taking up a bed of a veteran. You're not forcing a veteran from a bed here at Parkwood.”

My concern is that Neil and so many others—and perhaps your spouse, Mr. MacEachern—are not receiving the long-term care they need, whether it's emotional care or physical care, and that's simply wrong. Modern-day veterans should indeed have that long-term care. I've taken this up with the minister, and I've consistently heard the same response, as recently as last night during a debate, that we have provincial health care services and that they should be looking after our veterans.

Can you comment? Do you believe it is the purview of the province to look after our modern-day veterans?

Mr. Thomas MacEachern: No, I think it's a federal responsibility since they are federal employees. Coming back to the covenant, if there were such a thing as the army of Alberta, then perhaps that would be their problem. In this case, it's a federal jurisdiction, and the sad thing is that we seem to be off-loading it to the provinces. If they were able to do it, that would be fine, but they're not, because they're all in financial crisis for various reasons, Alberta notwithstanding, including the way that money has been spent and allocated and the fact that their priorities have changed over the years.

I like to cite the example of how Ralph Klein, when he was premier, closed more hospitals in Alberta, a growing province, than he opened, including psychiatric care facilities. They closed the mental hospitals and turned people out onto the streets. Guess what? We have an issue with mental health in the streets in Calgary. Now social agencies are having to build huge hostels—there are three of them now—downtown that are taking care of people who probably should be in psychiatric facilities.

In her case, there was a two-month waiting list to get into that facility. We had some hope, but somebody dropped the ball. That's not uncommon. Again with workloads and beds...

And it's not only that. They don't have the expertise. They don't have the frame of reference for PTSD issues. In her case—and we still contend that it was service-related because of things that happened in service—it was quite a different case, but that aside, there's no frame of reference for them. Our own family doctor didn't know about this stuff and said we had to go find somebody who knew more about it.

• (1810)

Ms. Irene Mathysen: Senator Dallaire talked about the culture, about the reality, the camaraderie of military life and how important that is in terms of care. I have to say that this level of care is available at Parkwood. The problem is there's not enough. It's one wing, beds are being closed, and the psychological care is not there. People are waiting months and months and months in order to access it. It seems to me that it comes down to dollars and cents.

One of the things that struck me, Mr. O'Connor, when you were talking about the Last Post Fund, was that the reductions in 1995

were because of budget cuts, this need to balance the budget. We're hearing that over and over again. Are we sacrificing our veterans for a balanced budget because we're not willing to pay the financial costs of real care?

Col Daniel O'Connor: It's worse than that. This is an observation, is all it is. I'm not throwing stones at anybody. Not only was it cut in half in 1995 arbitrarily to balance the budget, but one would think, then, a few years later it would have been reinstated because the budget was balanced. That didn't happen. But the worst is that it wasn't indexed after that, and that \$12,000 today is about \$8,000 in today's dollars. It's paltry. Somebody who dies with \$9,000 is ineligible in terms of 1995 dollars, so it's an insult. That's the way I see it. As I said, it's just an observation; it's a rational observation. That's what happened. It was cut in half arbitrarily, never reinstated, and not even indexed. It's an insult.

The Chair: Thank you very much, Ms. Mathysen.

Mr. Hawn, please, for six minutes.

Hon. Laurie Hawn: Thank you very much, Mr. Chair, and thank you all for being here.

Mr. MacEachern, again, my personal condolences.

I just want to clarify one thing. When your wife was 5(f) released, did she get return of contributions? Because the pension thing, there's something on that.

Mr. Thomas MacEachern: Yes, that's what it was. You got the option—

Hon. Laurie Hawn: You got a lump sum return of contributions.

Mr. Thomas MacEachern: You should take it all, yes.

Hon. Laurie Hawn: Okay, that explains it.

One of the issues we just talked about was a federal government responsibility to provide health care for veterans. We transfer billions and billions of dollars to the provinces to provide health care. If we were ever to embark on—and the military got out of certainly veterans' dependent health care many years ago—reinstating that system, it would be countless billions of dollars, and it's just not doable. Maybe we need to do something. I have issues with some of the long-term care in Alberta, where we're not giving priority for beds to modern-day veterans, and I think that's an issue. But I don't think it's practical for us to go back and reinvent a veterans' dependent health care system. That is truly not affordable.

Mr. O'Connor, I totally support your recommendations there with respect to their being reasonable and sensible.

Mr. Kokkonen, and I guess General Gollner, on the insurance company mentality, and I've spoken about this before, the issues to me are not so much what's there, because there's a lot actually there, but we make it too difficult to access. We put the burden of proof too high. The insurance company mentality comes in where you have to come in and prove beyond a shadow of a doubt that you are worthy of getting whatever it is. Do you think it's ever possible for us to reverse that philosophy? If somebody comes in with an injury or whatever, and it's reasonable, just get the benefit going, continue to do the due diligence, and if at the end of the day the person is not reasonably eligible, don't claw it back, but just stop it. Do you think if we just reverse that philosophy, get it going and worry about the fine details later, that we'd have the majority happy, instead of the majority, or a large number, at least, cranky?

Mr. Ray Kokkonen: We've heard to solve the problem and work out the details after, a number of times this afternoon. I'm not exactly sure what you mean by "reversing the philosophy".

Hon. Laurie Hawn: Instead of having to prove beyond a shadow of a doubt, accept the story, because most people are going to be honest. There will be people who game the system and that's just the way it is.

Mr. Ray Kokkonen: This applies to VAC as well as for VRAB—the same concept.

Hon. Laurie Hawn: Yes, that's exactly what I'm talking about.

Mr. Ray Kokkonen: The Veterans Ombudsman had it all solved in this article in the paper two days ago, and that's what it was. It was reversing that particular "prove beyond reasonable doubt everything". Of course, in the same vein, that was the problem with VRAB, too. The benefit of doubt was being exercised in a reverse manner in dealing with the case, and, of course, we dealt with that one previously so...

Hon. Laurie Hawn: General Gollner, is there anything you'd like to add on that?

•(1815)

BGen Joseph Gollner: The Veterans Ombudsman has published a number of really quite thoughtful and well-researched papers over the past year about the problems in the new Veterans Charter. Recently, Mr. Parent came out with his proposal, which I suspect didn't come out by accident, saying, as Ray brought up a few minutes ago, we file our income taxes, you can apply for CPP, you can apply for student loans, and you can apply for a whole bunch of things. You can do it on the computer. Revenue Canada, at least the ones I deal with, are not particularly nice people if you fool around. They will come and audit you. If you file your taxes today, electronically, chances are you will probably get your refund or be told to pay more in three weeks' time.

When you can do it with something as fundamental as income tax, why shouldn't we be able to do it with something like applying for veterans benefits, as opposed to going through this bureaucratic system that they've set up? It's been developed over generations. It's not something that's come to us by accident. It's been built and built and built. I don't know how many people down in P.E.I. handle this paperwork but there must be a legion of them. It is a very complicated, fact-based process, that is difficult to do. We've heard complaints, and routinely hear complaints, of learned medical specialists' input on a veteran's application being turned down by a

nurse. People are asking how that can happen. It's very simple, because the nurse is in the system and she has to look at the medical advice and see if it relates to the individual being on duty, so not necessarily criticizing the medical advice but its relationship to the individual being on duty.

I think we can do better. Ray called the Veterans Ombudsman's article a bombshell. I think it's more than that. If we could bring that about maybe we could get a return of the veteran's application in three weeks like most of us will get a return on our income tax.

The Chair: Make it very brief.

Hon. Laurie Hawn: Okay. Real short. I think it will be a short answer.

Do you have any thoughts on the suggestion of merging DND and VAC?

General Gollner, you may be the best one placed to answer the question.

BGen Joseph Gollner: That's not a new idea.

I think in 1987 or 1988 when I was in National Defence headquarters—and I'll use my common expression for it—or Fort Fumble on the Rideau, there was a green paper that was circulated within both ministries and we were asked to comment. It was being staffed within National Defence headquarters. I don't know whatever happened to that paper other than the fact that it was seriously reviewed. The consideration was that the two departments be legally joined and that there would be an associate minister of Veterans Affairs with the accompanying staff and all the rest of it.

It's not a new idea. It's been out there for a long time.

The Chair: Mr. Hayes, please, for six minutes.

Mr. Bryan Hayes: Thank you, Mr. Chair.

First, Mr. MacEachern, please accept my heartfelt condolences. This isn't intended to soften anything, but I was listening to Global—I'm certain it was Global news—three days ago and I had to listen twice and I'm still not sure I got it right and I haven't downloaded it. It's my understanding that 100,000 U.S. soldiers have taken their own lives. Recently they were saying there are as many as 22 per day. And when you state there's no secret that we have a problem, there is no secret that we have a problem.

One of our fellow members of Parliament, Harold Albrecht, brought forward a piece of legislation as a national framework for suicide prevention. And I'm not sure that had that framework been in place, it would have prevented your tragedy. My hope is when that does unfold it applies to the military of course, first and foremost. I don't really have a question for you, I just wanted to make that comment.

You've been very fortunate with your employer. That's my understanding: that they've been compassionate, understanding. But I hope what you will do for us as a committee is—after the fact, I'm not going to ask you right now—to identify in writing what assistance you feel should be available to you under those circumstances if you didn't have such an employer. I want to leave that thought with you, sir, and I hope you would consider doing that for the committee.

Mr. O'Connor, thank you for acknowledging the work the government has done in your area. You've answered all my questions. You were very comprehensive in what you still feel needs to be done, and there's really not much more I can ask of you. You've done a very good job presenting.

Mr. Kokkonen, I'll say the same. You've done a very good job of presenting, been very clear on things. But I want to put one question to you, sir, and maybe Mr. Gollner as well. It relates to the Veterans Ombudsman's report. Some of our witnesses have stated we should simply accept the recommendations of the Veterans Ombudsman and get on with it and that's it. That's the document, those are the recommendations, that is what this committee and the government should be recommending and moving forward on. Do you agree with that statement, sir?

• (1820)

Mr. Ray Kokkonen: Yes, I think the entire veterans consultation group has agreed on that. They are behind the Veterans Ombudsman's report. Everything doesn't happen at the same time, and I think most rational people recognize that. However in the veterans community, it's gotten to be a bit of a controversy if you use the word "incremental". There's a feeling that we should do these things right now.

So at that end, they've identified the three issues. The government asked us several times for priorities. The consensus was that all these recommendations made by this committee and everybody else are important. But then the veterans community recognized eventually that they can't do that so they've given three top priorities, and those have been presented time and time again by all the organizations.

BGen Joseph Gollner: Mr. Chair and Mr. Hayes, the ombudsman has a unique capacity to do detailed work because he has full access to the Veterans Affairs files and data and statistics. Many other people try to do an analysis of Veterans Affairs, but the Privacy Act and other legislation doesn't permit it.

Consequently, the Veterans Ombudsman has produced very legitimate, well-researched papers, the likes of which we have never seen before, at least in public, setting out in a clear, forthright manner that everybody can read and understand, and he has been consistently supported by the various ministers of Veterans Affairs or else the reports would not be where they are today. And they are used as benchmarks by many people. So we're fortunate to have that position available and have the outcome of the Veterans Ombudsman's office.

Mr. Bryan Hayes: Thank you.

Thank you, Mr. Chair.

The Chair: Thank you very much.

We'll wrap up our questions with Mr. Rafferty. You have six minutes, please.

Mr. John Rafferty: Thank you very much, Chair.

Thank you to everyone for being here today. I'll try to ask everybody a question, if we can fit it in.

Before I begin, I just want to say, Mr. MacEachern, that I think you show an unbelievable amount of courage being here. I'm not sure I could do the same thing. I do congratulate you on that, and I thank you for being here.

To Mr. O'Connor, you have an M.B.A., and it seems to me you've probably heard of the "no go" theory of administration, which is that you keep saying no until people go away. That seems to be what happens a lot in Veterans Affairs, or at least that's the sense that I get. It may happen right across the government spectrum.

But when you talk about the Last Post Fund and making sure that it's enshrined in the Veterans Charter, have you given any thought to the sort of language that would be used to put that into the charter? I'm sure "respect" and "dignity" would be in there somewhere, but have you given any thought to what that might look like?

• (1825)

Col Daniel O'Connor: I haven't given specific thought to that, but the program as such is very well documented within Veterans Affairs Canada. It would not be hard at all to extract a paragraph or a sentence or two from what is essentially the mandate of Veterans Affairs to run the funeral and burial program.

So that language is there, but I haven't given that any thought myself.

Mr. John Rafferty: You're certainly welcome at a later date to send the clerk a note if something does occur to you, some good language that you might think would be appropriate.

Col Daniel O'Connor: Well, I did have a look at it, and I noticed that section 57 deals with the death benefit. It would be a perfect place to put it; that's what I was preparing to offer to the committee. Instead of talking about a "member", one just simply inserts the word "veteran", and puts in the funeral and burial program there as a benefit. It's a death benefit, effectively, for the family members who remain.

At any rate, I will give that some further thought.

Mr. John Rafferty: Okay. Thank you for that.

Mr. Kokkonen, you talked about the new Veterans Charter and making it a truly living charter. You talked about the regular critical reviews.

I wonder if either of you have given any thought to what that timeframe would be in terms of regular reviews.

Mr. Ray Kokkonen: Of course we're aware of what the general recommendation was from some of the other veterans organizations, and that was two years. In fact General Gollner and I discussed that last night, and even this morning, and we decided that we would not give any sort of timeframe to it. I think there are people better qualified to make that type of judgment than we are.

We definitely look for a legislated mandatory critical review of the new Veterans Charter. That's the only way to keep it a living document.

Mr. John Rafferty: Thank you very much.

Mr. MacEachern, we've heard from many other witnesses that the transition between DND and Veterans Affairs has always been a problem and continues to be a problem, even if it's just something as straightforward as having a caseworker follow up from DND through Veterans Affairs, which doesn't happen now.

Considering your experience, I wonder if you would have any suggestions that could make that transition more smooth and appropriate.

Mr. Thomas MacEachern: As mentioned earlier, possibly it would be a merging of the departments, DND and Veterans Affairs. I'm not sure of the history of it, or of why it was set up that way. Probably it was the sheer volume of, at the time, the post-Second World War veterans, or maybe even after the First World War. That would be my guess. But if it were one department, one seamlessly operating under the other...

One of the issues we've had, by the way, in putting these appeals together has been access of information. One department doesn't necessarily allow the other department access to their information either, in this case DND; veterans can't necessarily get access to all the information—in a timely fashion, anyway.

I just want to mention one thing that came to mind, just on the topic of that. I'm sure everyone saw on the news yesterday what happened in the United States at Fort Hood. I don't think it will be a surprise when it probably will come out that it was a soldier who had been acting out under duress and PTSD.

Those are the types of situations that hopefully we don't start to see here. But if the numbers and the volumes, and now that we're out of that conflict zone.... I just wanted to acknowledge that unfortunate incident and bring it to light and top of mind that these are the types of things that could happen.

Mr. John Rafferty: Thank you, Mr. Chapman and Ms. Jarratt.

You talked about war brides accessing Veterans Affairs services. I suppose, in your experience, almost all of them have. I think it was a much more straightforward process then.

Ms. Melynda Jarratt: Yes, it was fairly straightforward. There was very little complication. I'm sure there were some people who didn't agree with what happened following their husbands' deaths, for example, with pensions, but it seems to me they've had generally the same experience.

I think Don would like to speak to that.

Mr. Don Chapman: I would like to mention something, because I have a financial background.

Mr. MacEachern, you're absolutely correct. This is not a zero-sum game. So if you don't spend the money correctly to help these soldiers, somewhere, some way down the line it's going to get very costly, including possibly a Fort Hood incident.

That's all.

• (1830)

Ms. Melynda Jarratt: We were discussing this yesterday, in terms of the lump sum payment versus pension that Don was talking about.

You might want to take that, Don.

Mr. Don Chapman: My adopted father-in-law was a Japanese prisoner of war. If back in 1946 we had given him the value of \$350,000, it would have been about \$22,000 to carry him forward for the next 50 years. Try living on \$22,000 in Vancouver.

The other side of that is very interesting, because he didn't talk about it very much, but finally, just before he died he mentioned that he had nightmares through the 1990s. That was 50 years later.

The Chair: Okay, that's your time, sorry. It's six minutes for everybody.

I want to take the opportunity to thank all our witnesses today for a lot of good information and comments. As you can imagine, some of this we have heard before, which is actually a positive thing. We certainly thank you for taking your time and making a commitment to be here, and we certainly will take your presentations very seriously.

I'll just mention to the committee that on Tuesday we're going to have a short business session after the first round to deal with some issues.

We are now adjourned, with our thanks. Thank you very much.

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