



HOUSE OF COMMONS  
CHAMBRE DES COMMUNES  
CANADA

43rd PARLIAMENT, 2nd SESSION

---

# Standing Committee on Indigenous and Northern Affairs

EVIDENCE

**NUMBER 004**

**PUBLIC PART ONLY - PARTIE PUBLIQUE SEULEMENT**

Tuesday, November 3, 2020

---

Chair: Mr. Bob Bratina





## Standing Committee on Indigenous and Northern Affairs

Tuesday, November 3, 2020

• (1105)

[English]

**The Chair (Mr. Bob Bratina (Hamilton East—Stoney Creek, Lib.)):** I call this meeting to order.

We have quorum.

I'd like to start by acknowledging that we're meeting on the traditional unceded territory of the Algonquin people. The committee is continuing its study of support for indigenous communities through a second wave of COVID-19.

With us today by video conference until 12:30 p.m. are representatives from three national indigenous organizations. We have President Natan Obed of Inuit Tapiriit Kanatami—I apologize if I didn't say that quite right—Regional Chief Marlene Poitras of the Assembly of First Nations Alberta Association, and vice-president and national spokesperson David Chartrand of the Métis National Council.

I invite the witnesses to make their opening statements. We're going to have you speak for six minutes. I'll be tough on the timing because we want to make sure we get our complete round of questioning in.

Mr. Obed, I have you first on my list. Are you prepared to go ahead now for six minutes?

**Mr. Natan Obed (President, Inuit Tapiriit Kanatami):** Yes, absolutely.

**The Chair:** Please go ahead.

**Mr. Natan Obed:** Thank you. It's great to see everyone.

*Tunngasugitti.* Welcome, everyone.

ITK is the national representational organization for approximately 65,000 Inuit in Canada, the majority of whom live in Inuit Nunangat, our homeland, which encompasses 51 communities, nearly one-third of Canada's land mass and over 50% of its coastline.

Our four regions are defined by our land claim agreements: the Inuvialuit region in the Northwest Territories, Nunavut and Nunavut Tunngavik in the jurisdiction now, Nunavik in the northern part of Quebec, and Nunatsiavut in the northern Labrador part of Newfoundland and Labrador.

The status of COVID-19 in Inuit Nunangat sits in stark contrast with the situation seen in the rest of Canada. To date, there have been only approximately 30 confirmed cases of COVID-19 detected within our 51 communities, the majority of which have been re-

lated to travel, with very little community spread after the initial diagnosis.

It has been tough to implement measures like the two-week quarantine in the south for some jurisdictions, and also the change in lifestyle around social distancing has been challenging within communities. However, to date we have been very successful in ensuring that our communities are not overrun with COVID-19.

Prior to COVID-19, we experienced greater adverse socio-economic conditions. We also had up to 300 times the rate of tuberculosis, depending on the region, in our communities. Respiratory disease and viruses have played a very significant role in the way in which public health has functioned in our homeland. Therefore, we knew right away how difficult this might be and took the appropriate measures.

The federal government has helped with the response to COVID-19, with approximately \$90 million of federal Inuit-specific funding through two rounds of indigenous community support funds and a top-up to the Inuit post-secondary education funding. Those types of supports have really helped Inuit communities and Inuit land claim organizations respond to COVID-19 in a meaningful way.

The monies have been spent on things like supporting food programs; getting people out on the land, especially in the summer; the provision of cleaning supplies; in some cases, providing more water—because a lot of our communities are on trucked water—so that people can wash their hands for the appropriate number of times a day and not have to worry about water running out; home heating; purchase of supplies, including technological devices for education purposes and to support families and children in care, making sure that they can connect through the social distancing requirements of their jurisdictions.

We have also done a lot in relation to air transportation, and I'm pleased that the federal government has defined Inuit Nunangat air transportation as an essential service. I think there's a lot we can do moving forward in trying to figure out what that means and how to support it fully. However, the recognition is there that without air transportation, we don't get testing results on time, we don't get people to medical care, and we don't have fly-in, fly-out access to food. We are very fortunate that there has been a response and that there have been subsidies, because our airline industry has been hit just as hard as in the south.

We also have created Inuit-specific communications, making sure that any of the public health messaging is produced in our Inuktitut language and also made available in the community.

We also have taken advantage of the Inuit Child First initiative to help families with children ensure that every child gets the health, social, and educational services and supports they need during the pandemic.

- (1110)

Moving forward, and especially going into this winter, we need to do more on testing. We need to make sure that the gains we've made in access to testing are sustainable, such as the GeneXpert testing platforms that have been mobilized in Inuit regions, and ensure that we have cartridges for them, and make sure that there's funding to ensure that those tests can be administered in Inuit Nunangat, that we can have access to rapid testing when it becomes available and that when testing needs to go to the south, we have a specific stream that those tests can go into so that they don't get lost in provincial or territorial structures.

We also need more data, especially outside of Inuit Nunangat. Provinces and territories need to fill out the appropriate Inuit-specific data to ensure that we have an understanding of any concerns in relation to COVID-19 in the Inuit population outside of Inuit Nunangat, and we need the federal government to help.

We also need to ensure that as the vaccine plans come together, Inuit are considered a highly vulnerable population, especially considering our exposure to TB, our remoteness and the fact that we need fly-in and fly-out support at all times for our communities.

Throughout all of this, we need an Inuit Nunangat approach. We need to do away with the odd, capricious nature of each of the 30-plus federal departments doing their own thing when it comes to indigenous peoples and programming and terms and conditions, and adopt for Inuit an Inuit Nunangat policy approach so that we are treated the same no matter where we live across Inuit Nunangat.

Thank you for the time this morning.

**The Chair:** Thank you very much.

Our next speaker is Regional Chief Marlene Poitras of the Assembly of First Nations Alberta Association.

Please go ahead for six minutes.

**Regional Chief Marlene Poitras (Regional Chief, Assembly of First Nations Alberta Association):** *Tansi. Kinanâskomitinâwâw.*

Thank you all for the invitation to speak with you today.

With the rise in cases of COVID-19 across the country, we have seen a rise in cases among our first nations and with that the concern and fear for our people has also risen. In times like these, it is incumbent upon us to not only focus on the crisis at hand but to look at the steps that brought us to where we are today and to identify the steps we need to take in the future to protect against these situations.

As you are all aware, first nations experience greater health, social and economic inequities than the rest of Canadians, which makes us particularly vulnerable to COVID-19. Our nations face

chronic housing shortages, lack of access to drinking water and poor access to quality health services, as well as many other challenges. The health and well-being of first nations in Canada has been and continues to be affected by colonial governing structures, inconsistent policy schemes and underfunded program allocations. Collectively, these systemic issues impact the daily lives of first nations people both on and off reserve.

Ongoing experiences of racism in the health care system exacerbate these issues. First nations have an inherent and treaty right to health. Our treaties have established our treaty right to health through the obligation of the Crown to provide medicines and protection through the "medicine chest" clause found in Treaty No. 6. Treaty No. 6 also contains the pestilence clause under which the modern context is understood to be for the Crown to provide assistance in times of natural disasters, diseases and pandemics. These treaties speak to the beginning of first nations' relationships with the Crown, and it is these relationships that continue to be at the heart of what needs to be worked on.

This pandemic has highlighted the inequities in this country and exacerbated existing challenges. It has also shown us where the relationships between first nations and federal, provincial and territorial governments require more effort. This is the time when we need to draw on each other's strengths and support one another through transparent and respectful communication and joint decision-making. Leaders across the country were forced to respond to the COVID-19 crisis quickly, with limited information, and make decisions for the well-being of their people rapidly, but too often first nations were the last to receive information and were left out of the decision-making process at the federal, provincial and territorial tables. There is room to be better, and as first nations we look to the Crown to support our relationships with the provinces and territories.

It is particularly important, as we plan for vaccine distribution, to ensure that first nations' needs are considered as per the National Advisory Committee on Immunizations' recommendations. Throughout the pandemic, first nations have done much with very little. We have been innovative and creative and stretched our human and economic resources to respond to this threat. However, with the second wave of the pandemic and with the threat of the third in the future, first nations' capacities to respond are dwindling. Had more been done earlier to support our technological infrastructure and human capacity, first nations would not be as vulnerable to the impacts of COVID-19 as they are now.

First nations continue to rely heavily on the funding provided through Indigenous Services Canada to support the pandemic response. We were pleased to hear of the additional investments announced on Friday, but more will be needed before this pandemic is over. The investments made by the federal government to support all Canadians during the pandemic have been important and necessary. However, I want to emphasize that this unprecedented level of funding has shown us that first nations have not been a funding priority in the past, even though our people have been living through chronic health, mental health and addiction epidemics for years. Had more meaningful investments been made earlier to address systemic issues and build capacity, our first nations would not be as vulnerable as they are now. These investments are needed so that first nations are better prepared for future pandemics and emergencies. First nations need to be a priority.

- (1115)

We have an opportunity to learn from our experiences with the pandemic to date, to be stronger in our response together as we move forward. First nations need to be afforded equitable opportunities to make it through the next waves of the pandemic with minimal illness and loss of life.

As Dr. Tam stated in her recently released report, no one is protected until everyone is protected. Into the future, first nations need to be provided opportunities to be part of the economic recovery and response. Let us not return to normal. Let us work together to provide a better way forward for first nations and all Canadians.

*Hay-hay. Knanâskomitinâwâw.*

- (1120)

**The Chair:** Thank you very much for your presentation.

Everyone was right on time at six minutes.

We will go now to the vice-president and national spokesperson of the Métis National Council, David Chartrand.

Please go ahead for six minutes, David.

**Mr. David Chartrand (Vice-President and National Spokesperson, Métis National Council):** Thank you, Mr. Chairman, for allowing me to speak.

Natan—of course a very close friend of mine—it's great to see you again.

Marlene, it's been a while since I saw you. It's great to hear your opinion and views.

Natan, you'll see me now reading something, which I'm not typically used to doing. They're structuring me here.

Let me start off again by thanking you for inviting us to speak as the Métis National Council again on the COVID-19 that is gripping our country—we all know that—and, in particular, its impact on the Métis nation.

Since my last appearance, the Métis nation governments have worked hard to provide support for our citizens, family, workers and businesses as they try to cope with the hard impact of COVID-19. The Government of Canada heard our concerns, which I expressed to you in my last appearance, that some of the key sup-

port programs, such as the Canada emergency business account, were not reaching many of our people. However, after many calls and some push forward, it responded quickly and meaningfully and in partnership with us to adjust the program to allow our Métis nation governments and capital corporations to deliver a financial lifeline to our entrepreneurs, which we called a Métis nation CE-BA.

It has also provided additional support to our governing members to ensure food security, income and other supports for many of our more vulnerable citizens, including our seniors, students, early learners and homeless. To give you an example, in the spring the Métis government in Manitoba delivered over 6,000 hampers to our seniors and vulnerable across the province. We're already now moving on our second phase.

There is no doubt that the government's indigenous support programs, in addition to its broader COVID-19 economic response plan, have helped to stave off what truly could have been a devastating and disastrous impact on our communities.

At the same time, COVID had a significant impact on our people even before the onset of the second wave. Métis constitute the largest indigenous labour force in Canada, and the data coming out of Canada's labour market survey shows we have lost jobs at a faster rate than other groups.

In case you have forgotten my last brief, there are an estimated 400,000 Métis in the Métis nation homeland in western Canada. We are the largest indigenous nation in this country. Many of our citizens are employed in the services and construction sectors. Their type of employment does not enable them to work from home.

We are also concerned for the future of many of our businesses. Yesterday, the Métis government announced \$5.5 million, because we're in a red zone in Manitoba, to help any of our businesses that would potentially find themselves near bankruptcy or complete closure. We announced \$5.5 million to be eligible to all Métis businesses in Manitoba. We know that we are a stopgap measure that cannot be relied upon for too long.

The COVID crisis has also exposed the particular vulnerability of our citizens and communities, owing to our long-standing exclusion from the federal health supports available to other indigenous peoples. While the First Nations and Inuit Health Branch of ISC worked with the first nations and Inuit to provide PPE and other forms of medical assistance, the Métis were left to fend for ourselves. As you heard from me last time, we ordered a lot of our stuff from China.

While we are all now focused on the need to contain this second wave, we hope that Canada tries to build resiliency with an equitable and sustainable economic recovery plan. We'll figure out in this plan the impact that COVID is having on our people.

We believe an equitable and sustainable economic recovery plan should incorporate the commitments made to us during the 2019 election campaign. Acting on these commitments will serve to stimulate economic activity and resolve long-standing inequities. These include commitments by Canada to close the infrastructure gap in Métis communities by 2030 through investments in critical health infrastructure such as the Métis nation health hubs; co-develop distinctions-based indigenous health legislation—with which we're in dialogue with Canada right now—to ensure indigenous control over the development and delivery of services; attain a 5% indigenous procurement target in federal spending and establish a major projects benefit framework to ensure Métis communities benefit from major projects.

I should add that passing federal legislation to implement UNDRIP will greatly assist in helping shape this major project framework. The MNC is engaging with the mining, oil and gas, and pipelines industries on UNDRIP, and we are all of like mind in working together to support legislation that can ensure our rights are respected and that certainty is provided for major projects to continue in this country. We will be meeting with many of the executives of the mining sector and the pipeline sector. We're making it very clear from our sector, the Métis nation, that we work hand in hand together and that UNDRIP is not a veto.

I should also add that the federal government's budgets in 2018 and 2019 contained significant allocations for Métis nation-specific programs and services such as housing, early learning, child care and post-secondary education over a 10-year period. That was an essential, very wise investment because, as you know, all universities and most post-secondary institutions are shut down, so they're learning from home, and so are our kids. We've been able to provide supports to them at home.

• (1125)

Accelerating the release of the balance of this funding in a shorter time frame may also help in addressing the long-standing needs and provide economic stimulus in our communities. We hope the money would be released in a much broader context and we can get all of it into our banks so we can make sure we can put our long-term plans into action.

I hope this committee will lend its support to our important work ahead with the government.

Again, thank you for the invitation. Thank you for allowing us to be here and speak. I commend each and every one of you, from all parties, and I hope you're all safe. At the same time, I hope that all parties that are listening today take the time to reflect on where the Métis nation sits on your party's platform; and where you sit on ensuring the Métis government and Métis citizens—who, as I say, are the largest indigenous nation in this country—are well protected and part of your platform, your policy and your think plan.

To end, take care, and again, be safe, everybody. It was a pleasure speaking to you.

**The Chair:** Thank you very much to all of our witnesses. You're right on time.

We go to our first round of questioners now, with six minutes each for Conservatives, Liberals, the Bloc and the NDP.

My list shows Cathy McLeod, Pam Damoff, Sylvie Bérubé and Rachel Blaney.

Cathy McLeod, please go ahead for six minutes.

**Mrs. Cathy McLeod (Kamloops—Thompson—Cariboo, CPC):** Thank you, Chair.

First of all, welcome to the witnesses. I haven't been on this committee for a year, but certainly I was here for a number of years prior. I think I have met everyone who was presenting today, and thank you for that.

I am going to start by looking at some of the issues that were identified previously. In particular, I want to start with the north, and then maybe ask the others if there are issues in their communities.

On the issue of rapid testing, in the north we know there are a lot of transient workers, in health care in particular, who come in. I'm very aware that some workers who go in are essentially placed in quarantine, but they do have to, as an essential service, take care of patients and do their job. I have examples of people being tested when they come into the community, but the results come in 14 days later, so essentially the results are pretty well useless.

Is that getting better, Mr. Obed? Are workers coming into the community with results already available? Can you speak to the issue of the rapid testing of people who are itinerants coming into your communities? Do you have the full capacity that you need?

**Mr. Natan Obed:** Thanks for the question.

Maybe I'll start with the natural resource sector.

In some of the scenarios across Inuit Nunangat, Inuit and all residents of jurisdictions, say, in Nunavut haven't been working at the larger mine sites since the outbreak of the pandemic. It's because there are concerns with remote work camp environments and the possibility of the spread of COVID, and then workers from that mine site bringing it back to communities.

These remote camps have in many cases created testing parameters that are not best practices according to the Government of Canada or jurisdictions, and so there have been false positives and concerns raised around the ability to test, and therefore the ability to create a safe environment for workers from Inuit Nunangat working in Inuit Nunangat natural resources projects. Rapid access testing would help with that scenario greatly. There is only so long that large-scale mining operations can pay for Inuit employees who want to work and are ready to work, but just are not able to work because of the risk associated with these remote camps in relation to the general population.

When it comes to essential workers in Inuit Nunangat, especially in the health care field, each jurisdiction has different protocols and very different barriers to getting the results of testing. The GeneXpert system really is one of the best ways to get relatively rapid access to testing. The cartridges were originally for tuberculosis, but they have been retrofitted to test for COVID-19 as well. However, there are a limited number of cartridges and there is a limited amount of deployment of these machines, which are quite costly, across Inuit Nunangat.

We have pockets of areas where we can get relatively quick results, but for the most part we're looking at between four and, as you said, 10 to 14 days, depending upon the scenario and depending upon the time. This doesn't help when it comes to ensuring that we get a real-time response to COVID, but each jurisdiction has done as much as it possibly can to ensure that COVID doesn't spread within communities, and they have been very cautious of the interaction between essential workers, especially in the health care field, and citizens in general.

• (1130)

**Mrs. Cathy McLeod:** What would you say the capacity is in terms of cartridges per day in the communities you serve? What is the cost and who is bearing that cost right now?

**Mr. Natan Obed:** These scenarios are changing day to day. It's a U.S. manufacturer that provides this GeneXpert technology. There are, therefore, also some political considerations with regard to the availability of these cartridges in Canada and the number of these cartridges that come to Inuit Nunangat. I don't have the figures for you right here today, but I promise I can get back to the committee on the availability and the quantity of these tests.

We were very pleased with the announcements earlier on regarding the Spartan Cube and the advent of rapid access testing that was home-grown here in Canada. We do look forward to that technology coming online. We also have been placed at relatively the front of the line by the Government of Canada, as a priority population for rapid access testing, and that will be a big breakthrough.

**The Chair:** That brings us to time, Cathy. Thank you very much.

Pam Damoff, you have six minutes. Please go ahead.

**Ms. Pam Damoff (Oakville North—Burlington, Lib.):** Thank you, Mr. Chair.

I want to thank all of our witnesses for taking the time to come back again today and to share their wisdom, knowledge and experience on the ground. It's critical to all of us as we're doing sort of a

second part to our work in looking at where we are and how we come out of this.

One thing that has really become clear, which I want to focus on, is the effects on mental health, in particular opioid addictions. As you know, in B.C. there were more than 100 illicit drug toxicity deaths per month for the six consecutive months from March to August, and more than 175 deaths each month in May, June and July. B.C.'s highest monthly opioid death toll, in June, was 181, up from 76.

We know that indigenous peoples account for a disproportionate number of these deaths. They are six times more likely to die from an overdose than are other B.C. residents. While this report has focused on B.C., we know this is an issue across the country.

I wonder if I could ask each one of you what you feel is the best way for the federal government to deal with these increases in opioid deaths. I'd also be interested in your thoughts on drug decriminalization.

Perhaps we could start with President Obed, then move to Regional Chief Poitras and then—last, but certainly never least—Mr. Chartrand.

Thank you.

**Mr. Natan Obed:** In relation to opioids, Inuit Nunangat has many challenges when it comes to addictions.

The opioids challenge, though, is not as acute as it might be in your jurisdiction of British Columbia. That is not to say that it isn't very important. Also, the pandemic is changing the way in which people access any number of different drugs.

• (1135)

**Ms. Pam Damoff:** If you want to focus on drug addiction in general, that's fine too.

**Mr. Natan Obed:** I think the biggest challenge is the access to supports and services—mental health services and addiction treatment centres.

The decriminalization is something that goes hand in hand with policy across Inuit Nunangat. We still have dry communities in which alcohol isn't permitted. Our relationship with alcohol and drugs is still one that's very different from that in most other places in the country. There is a balance between decriminalization, stigma and the justice system having records of people for drug offences that have huge impacts on the rest of their lives and their ability to live and to access employment.

We don't want to criminalize; we want to help. I think that's the general attitude for the Inuit and Inuit jurisdictions.

**Ms. Pam Damoff:** Thank you.

**The Chair:** Ms. Poitras, go ahead.

**Regional Chief Marlene Poitras:** Through this pandemic, many first nations are supporting their people through two pandemics, as there has been an increase in opioid-related deaths.

The pandemic has brought with it many challenges for mental health, as strict public health protocols have led to isolation. Economic impacts have brought many people deeper financial trouble and greater stress. The anxiety of the pandemic weighs on all of us, and for first nations these stresses have been compounded for many people due to pre-existing mental health concerns, often a result of intergenerational trauma.

We rely on our communities and cultural gatherings to bring us strength and resilience, but many of these practices have been discouraged or put on hold. It will take time to grieve and heal from this period, and our first nations, and first nations mental health organizations, will need resources and supports to lead our healing.

As for drug decriminalization, first nations have to be at the table when those decisions are being made because they are the ones dealing with these issues on the ground, with very little to no resources and capacity.

**The Chair:** Mr. Chartrand, you have 30 seconds.

**Mr. David Chartrand:** It's an open-ended question because you look at the mental health situation, the opioids, and decriminalization at the same time.

First of all, there's not enough space. That's key. There's no question about it. People are waiting right now; sometimes they wait a year or two years to find a place to deal with the issue. For example, one of our citizens who got COVID contacted us the other day, and she was scared. She needed to talk to someone to help her. She said she was going crazy. She didn't know what was going to happen. Her grandchild was in the house; her husband was there. Did she give it to her grandchild? If she did, what would happen to him? If something happened to him, she'd never forgive herself, etc. To get somebody to help them is very hard right now.

One of the positive directions I see Canada going in is the federal legislation on indigenous health. I think that will force the government to react in Parliament, no matter which government is sitting, to report on the status of the development.

I think decriminalization is a no-brainer. I think if you look at all citizens, no matter what race they are, some of these issues.... We look at cannabis, for example. It is a medicinal plant now and it always was a medicinal plant. If you look at society, if they didn't get caught, then they were okay and the record never affected them, but for those who got caught, it affected their future, as Natan said, and affected them throughout their lives.

Again, I think we need investment desperately, and I think this is going to be a good topic for Parliament to debate and put some energy behind.

**The Chair:** Thanks very much, Mr. Chartrand.

• (1140)

[Translation]

Ms. Bérubé, you have the floor for six minutes.

**Ms. Sylvie Bérubé (Abitibi—Baie-James—Nunavik—Eeyou, BQ):** Thank you, Mr. Chair.

I want to start by thanking the witnesses for being here today. It's very important for our committee. I also want to thank the technicians for taking care of the technical component. Otherwise, we wouldn't be able to speak with the witnesses and understand their needs.

My questions are for you, Mr. Chartrand. As you know, November 16 will mark the 135th anniversary of the execution of Louis Riel. To date, the Canadian government has never apologized for the execution. In your opinion, should it do so? Would overturning Louis Riel's conviction and placing a statue on Parliament Hill to commemorate him be enough to bring about reconciliation?

[English]

**Mr. David Chartrand:** I'm not sure the question is posed to me. I do not speak French; I speak Saulteaux. I apologize for that, if the question is posed to me.

I also apologize that my document was not translated before it got here.

If somebody can repeat the question.... I heard "Louis Riel". Is it regarding the recent attempt at pardon and exoneration? Can somebody help me with what that question was, so I can assist the member of Parliament in answering the question? Can anybody on the panel translate the question for me?

**Mr. Arnold Viersen (Peace River—Westlock, CPC):** Mr. Chair, I think we have to get Mr. Chartrand on to the interpretation.

**Mr. David Chartrand:** Yes, thank you. I couldn't understand it. I have very good French translators here, but I don't have them in my office.

**The Chair:** Mr. Chartrand, on the bottom of the screen, there's a little globe and you select your own language, which would be English in this case. Then you will hear the French translation.

**Mr. David Chartrand:** Okay. If I want it in English, I press English.

**The Chair:** You should be listening in English and hearing in English what Madame Bérubé is saying in French.

I'll just add 30 seconds. Madame Bérubé, could you just very quickly repeat that? It's not quite on our topic, but I'll allow it. Go ahead.

[Translation]

**Ms. Sylvie Bérubé:** Mr. Chair, as you know, November 16 will mark the 135th anniversary of the execution of Louis Riel. The Canadian government has never apologized for the execution.

In your opinion, should the Canadian government apologize?

Do you believe that overturning Louis Riel's conviction and placing a statue on Parliament Hill to commemorate him would be a step towards reconciliation?



[English]

**Mr. David Chartrand:** Thank you very much for that question.

Let me start by saying, again, that I do apologize for not having it in French. However, let me say this. I think that Louis Riel.... Of course, we're celebrating the 150th anniversary here in Manitoba of Riel bringing Manitoba into Confederation and bringing western Canada along with him. Definitely, we're still pursuing a statue in Parliament. He is one of the first premiers of western Canada and he should be acknowledged as one of the first ministers of Canada. He's a founder of part of Canada. Along with all the other great leaders we have.... For example, I stand in the belief that the John A. Macdonald statue should remain, and I don't know why people are trying to take it down. From my perspective, he was the first prime minister of this country and we should respect that. Although there were many hardships on his policies and actions, he still was the first prime minister of Canada.

Now let me go back to Riel.

Mr. Chairman, 30 seconds is quite a short time for such a big topic. Clearly, there are people right now pushing to have a pardon or exoneration, and we do not support that. A pardon means he's guilty and he's being forgiven. Exoneration is you're trying to put him back in a place he was. Well, he's gone now. If there is anything Canada wants to do to really respect Riel and show their respect for him, they should deal with what he was fighting for and try to find the Métis' place in Confederation and deal with the Métis...for example, our land claim. We're negotiating with Canada right now about the Supreme Court decision that came back in 2013. We want to get that land claim settled. We want to get moving forward. That land was stolen from Riel and his people.

These are key things for us, Madame Bérubé, that would really show reconciliation for the Métis people by honouring his vision and his commitment and what he gave his life for.

[Translation]

**Ms. Sylvie Bérubé:** Mr. Chartrand, you spoke of an action plan. During the first wave of the pandemic, we experienced many things.

Were you included in the government's discussions regarding the pandemic?

[English]

**Mr. David Chartrand:** Let me say this. Canada's response to the Métis nation by the Prime Minister has been excellent. Where the problem lies is in the internal policies of government, and those are long-standing policies. For example, on health, the department of FNIHB—the first nations and Inuit health branch—denies that there's any responsibility they have for the Métis, and that's a standing position that's been in existence now for decade upon decade, government after government, no matter what government has been in power.

The Métis have really been discriminated against and the negative effect has been causing us to have worse health care than anybody else in western Canada. A study has been done showing that the Métis have the highest chronic illnesses, surpassing first nations in diabetes and other chronic illnesses that really have affected the

future of a generation. Even though we're the largest nation in this country, we've been hit the hardest because of the policies of Canada.

I know we've been in dialogue with Minister Miller to try to get that corrected. I'm waiting until COVID is finished. I assure you I'll be coming with two arms flying to get this policy revised in FNIHB. The Métis won the Daniels decision at the Supreme Court, which made it very clear that we're a federal responsibility and it should fall under that parameter.

From our perspective, Canada has done extremely well in economics, education, housing and all of those things, but when it comes to health, there's still a struggling policy there that needs to be revised, and it's going to be important that people take it. Right now, for example, the PPE, all the medical supplies, we weren't included in that. I bought ours from China. Again, if it wasn't for federal money, I would never have been able to do it, but it was not part of the pandemic plan by Canada. As indigenous people, we're left out because of a policy that I think is one of the most discriminatory racial policies that exist right now in Canada. It really hinders us and makes people feel the effect. The proof is in the pudding, in the sense that our studies show we have worse health care than anybody else.

As I said, they always find us to pay our taxes, no hesitation. They'll find us in the middle of the bush to pay taxes, but they won't find us when it comes to services under the health file. However, otherwise, without the support of the Prime Minister in the Métis nation messages that he's given loud and clear and the messages he has sent to his ministers, I think we would have been in one hell of a mess right now, and I think we would have seen a lot of death in the Métis communities. Thank God we got the support from Canada on that aspect of it. It saved us on that side.

• (1145)

**The Chair:** You have one minute left.

[Translation]

**Ms. Sylvie Bérubé:** Mr. Chartrand, what resources do you need during the current pandemic?

[English]

**Mr. David Chartrand:** From our perspective, I think it's mental health, as you just heard in the question from Pam. I think these are the key things. For example, if we had a crash in our community... The provinces collect our data right now. If, say, one of our villages had a massive...like Lac La Biche did.... If anybody had it here and it spread out among all the families, we have no nurses, we have no health supports, we have no doctors. We have no place to go to get somebody to come in.

The province has no programs whatsoever for us because they say we're under federal jurisdiction, so we have nowhere to turn. If something ever hits us and spreads like wildfire—we have very big families—we have nowhere to turn. Right now, there is no pandemic plan directly from Canada or from the province for the Métis people.

**The Chair:** Thank you very much, Mr. Chartrand.

Ms. Blaney, you have your six-minute round. Go ahead, please.

**Ms. Rachel Blaney (North Island—Powell River, NDP):** Thank you, Chair.

I thank all the witnesses so much for being here with us today.

If I could, I'll start with you, Regional Chief Poitras. You talked about the second wave and said that the capacity to respond is dwindling. Could you tell us a bit more about what that looks like?

**Regional Chief Marlene Poitras:** Thank you for the question.

The government has made some commitments and provided resources in the first wave, and first nations were very good at utilizing those resources to lock down their communities in terms of following the public health guidelines, but now, with the second wave potentially upon us, the numbers are rising, and there's a need for more resources and the continuation of the resources so that we can respond adequately.

Many first nations are without adequate housing and have inadequate or deteriorating infrastructure, and they need safe drinking water. They simply can't meet the public health guidelines without the tools and the capacity to do so.

Yesterday, I heard the story of a chief in Manitoba who tested positive and considered sleeping in his truck to keep his family safe, because he had nowhere else to turn and nowhere else to go. Overcrowded housing without the ability to isolate is a real concern. One of the communities in northern Alberta was also struggling with an outbreak, and the chief reported that they have up to 30 people living in a three-bedroom house.

First nations need the resources to adequately deal with this and to have alternative ways to keep their communities safe and places where they can self-isolate.

In terms of the infrastructure, I also heard a story yesterday from northern Manitoba. The ambulance couldn't get to the community because the ice bridge was not safe, so the community was attempting to break the ice so they could get a boat to go across, but it was unsuccessful. The patient died within that time frame.

Those issues need to be looked at, because if this pandemic reaches proportional numbers, first nations are going to suffer deeply because of the lack of resources and lack of attention to dealing with their issues adequately.

• (1150)

**Ms. Rachel Blaney:** Thank you.

I think that's really important. I had a first nations community from Alberta reach out to my office. They asked not to be named, but they asked me to ask this question. They asked for about \$250,000 to help with the pandemic support and received only \$50,000. They're very concerned about not being able to support their folks.

I'm just wondering, is this a common occurrence in this area? Do you have any idea if other communities are facing similar realities and are, like this community, feeling very silenced because they don't want to publicly announce it, to be in trouble and lose more resources for their communities?

**Regional Chief Marlene Poitras:** Well, we have over 630 first nations in Canada. The funding that was provided in the first wave was approximately \$650 million. You have to divvy that up. There's always the formula, which is the base and population. The communities with the smaller populations get fewer resources.

In order to deal with this pandemic in a good way, you need adequate resources. To purchase PPE or hire people to provide security for your community, \$50,000 is just not enough. Those resources run thin. What's happening is that even during the first wave, a lot of first nations were utilizing their own-source revenue. It has created a lot of issues because their resources are dwindling. Now, if they have to deal with increased numbers, they're at a loss as to how to deal with it.

Even in terms of the economic stimulus funding that was provided to the nations, they're suffering. It's just not enough. First nations, like I said previously, need to be a priority so they can deal with this pandemic adequately.

**Ms. Rachel Blaney:** You talked about that earlier in your statement to us, that communities need to be part of the economic recovery as well and you need to be included. Could you just talk a little bit about what inclusion looks like for you and what you're asking the federal government to step forward with?

**The Chair:** You have half a minute, Ms. Poitras. Go ahead.

**Regional Chief Marlene Poitras:** Okay.

First nations need to be at the table when decisions are being made. Historically, they haven't been at the table. It's critical that they be part of the decision-making that impacts them. First nations are sovereign nations. They're working towards building their nationhood, so they have to be respected and included.

**The Chair:** Thank you very much.

The next round of questioning will be with Mr. Viersen, for five minutes; two-and-half-minute questions from Madame Bérubé and Ms. Blaney; and then Mr. van Koevorden.

Mr. Viersen, please go ahead for five minutes.

**Mr. Arnold Viersen:** Thank you, Mr. Chair.

I want to thank the witnesses for being here today. It's good to see you all, if only on a Zoom meeting.

I also want to put a plug in for Alberta. It's not often that I get to do this. Alberta is the warmest province, on average, in the country currently. I just want to needle that a little bit. I know my colleagues from B.C. always want to do that as well.

• (1155)

[Translation]

**Ms. Sylvie Bérubé:** Sorry, I don't have any interpretation, because my colleague isn't wearing his headset.

[English]

**Mr. Arnold Viersen:** I'm so sorry. I hope this is better.

Marlene, I just want to talk a little bit about the economic recovery. A lot of the impacts on the economy have not been so much directly resulting from people being sick, but because of our response to COVID. I'm just wondering if you have any stories of particular businesses from northern Alberta that have been significantly affected because they haven't been able to operate due to COVID.

**Regional Chief Marlene Poitras:** Thank you for the question.

In many first nations, and all of Alberta, the businesses, which are the backbone of most communities, have lost significant resources due to the shutdown. A lot of them are struggling to maintain operations. It's just an impact with all the communities. They want to know, with the second round, what economic stimulus supports are coming, especially for their own businesses.

As the pandemic rages on, nations are using their own-source revenue, which, as I said, is running out. Help is needed now, immediately. There isn't time or capacity to apply for additional rounds of funding. People are getting ill, and more are dying every day. Without immediate action and immediate results, the consequences will be even more dire. The spread of the virus will be out of control. The businesses do provide a lot of the resources to their communities as well. With the impact of the first wave, they are struggling right now.

**Mr. Arnold Viersen:** Mr. Chartrand, I'm just wondering if you have any stories of Métis companies that are particularly struggling at this time. At the beginning of COVID, I worked with a number of indigenous-led organizations that were looking to produce PPE and seemed to be unable to get government contracts for that. I know that in many, many first nations, people are employed in hospitality, an industry that's been devastated. I'm just wondering what your thoughts are and whether you have a particular story for that.

**Mr. David Chartrand:** First, let me go back to your first question about northern Alberta. The Métis communities in northern Alberta are feeling really hard-hit on the pipeline closure and the length of time getting Trans Mountain back into perspective. There's big support, of course, for that economic venture, which had our Métis communities working hand in hand and creating long-term relationships and partnerships with the oil industry. They're clearly being hit and they're feeling it now.

When you have matters like that—no disrespect at all to Alberta—clearly when you have that big elephant that gives you the key fundamental strength economically, and that elephant has gone out of the room, there's really sometimes no industry coming right behind it to replace it, so they're feeling a hit right now. We hope that the pipelines will get back into perspective and that oil will raise its prices because, truly, they're feeling the hit hard. They felt it really hard during the first phase, trying to get some support for hampers and so forth. In fact, the federation gave them \$100,000 from my province to assist them in northern Alberta to get them to ensure that the elders stayed in their houses and that they continue to find some ways of support. They lost their economic engine. It's hurting.

As for Métis businesses, I'll use my province as an example. We have over 500 businesses registered in our government, and we have a really robust plan. In the first phase, we gave all types of support. Federal Canada has a program of \$40,000, which we call

the Métis CEBA, and I want to commend the federal government for that one, because it really is a \$40,000 loan for businesses and a \$10,000 forgivable grant. We have many small, medium and some large Métis businesses in our province.

We just announced yesterday \$5.5 million for the federation—\$3.5 million of that is coming from Canada, and \$2 million is coming from us—to ensure that during the red zone.... As you know, in Manitoba we're in a worst-case scenario right now, worse than anybody else in this country, and tracking worse than many places in the United States, like El Paso or Texas. When you look at the different aspects of it, you see that we're really hurting bad, and now many businesses are nearly in complete shutdown here. We're fearful that they're not going to make it and they'll come out of this bankrupt or finished.

• (1200)

**The Chair:** We're right at time.

**Mr. David Chartrand:** Okay, thank you.

**The Chair:** All right.

We have two and a half minutes now with Madame Bérubé for the Bloc.

Please go ahead.

[*Translation*]

**Ms. Sylvie Bérubé:** Thank you, Mr. Chair.

My question is for you, Mr. Obed. On your website last August, you posted a press release acknowledging the federal government's additional \$305 million in funding for the communities in response to COVID-19. Now that we're in the second wave, which is hitting hard, do you think that this funding has been or is sufficient?

[*English*]

**Mr. Natan Obed:** The funding has allowed Inuit Nunangat communities to respond to COVID-19 considerations, but in the coming months we are going to need different types of funding. As was discussed earlier, the economic fallout is severe within Inuit Nunangat. If you think about how many Inuit are artists who either sell art or perform, all of those scenarios and all of those opportunities have largely been lost. Also lost are any tourism opportunities, as those seasons in our communities have come and gone. We had no season. For our economy, it's definitely going to have some ripple effects over the winter.

Also, we're going into a very different scenario from when we started the first wave. In the first wave across Inuit Nunangat, we were able to help people get out on the land to go outside of the confined spaces of overcrowded housing communities, so many Inuit did that. During the coming three to four months, it will be very, very different, and I think we'll need much more support and capacity for health services, for contact tracing, for the public health structures and then also for economic and transportation stimulus.

**The Chair:** You have just half a minute.

[Translation]

**Ms. Sylvie Bérubé:** Do you have any recommendations for this study?

[English]

**Mr. Natan Obed:** As I said in my opening remarks, applying an Inuit Nunangat policy lens to any of the COVID-19 relief efforts goes a tremendously long way in ensuring that Inuit can benefit from anything the federal government provides in support. A lot of our time over the summer was spent chasing terms and conditions for certain announcements that weren't made with first nations, Inuit and Métis specifically, decided-upon structures for the interventions.

All interventions that come from the federal government should have very specific terminology around first nations, Inuit and Métis, and then also, for Inuit, applying an Inuit Nunangat policy lens.

**The Chair:** Thank you.

Ms. Blaney, you have two and a half minutes. Please go ahead.

**Ms. Rachel Blaney:** Thank you.

Mr. Obed, I will come back to you. In your presentation, you talked about the need for more data and having more ownership of that information. Could you talk a little bit about what that would look like and what benefit that would bring to the community? I think for indigenous communities across Canada that is a continued concern.

**Mr. Natan Obed:** The way in which we make the best possible decisions around a COVID response is with data. Outside of Inuit Nunangat, we do not have any clear understanding of how many Inuit have contracted COVID-19 or the types of services they have received, and very little else about their health condition. We have sizable populations now in cities like Edmonton, Winnipeg, Ottawa, Montreal and St. John's, Newfoundland. We need to know better how those populations are faring in order to provide services.

Provinces and territories should collect and then report on Inuit-specific data so as to allow Inuit to understand how to serve our populations better and allow all public governments to serve Inuit populations better. This is something that can happen right now. On the forms that are filled out in relation to COVID-19 reporting, you have ethnic identifiers within them. It's imperative that all jurisdictions step up and help indigenous peoples understand how to serve our population better.

• (1205)

**Ms. Rachel Blaney:** Thank you.

Another thing you talked about was housing. I know that has been a spectacular disaster for a long time in indigenous communities across Canada. Now there's the pandemic on top of it and isolation, which we've heard from many communities. Could you talk about some of the challenges you're facing in your region and in the communities you represent? That would be extremely helpful.

**The Chair:** You have just 30 seconds. I'm sorry.

**Mr. Natan Obed:** The major considerations are following public health protocols. All of the messaging has reached our communities around how to prevent the spread of COVID-19, but if you have 12 people living in a three-bedroom home, if you have people sleeping in shifts, and if you have limited access to food and also to hygiene products, then you're putting people in an impossible situation. That is one of the biggest challenges we face in keeping our population safe.

**Ms. Rachel Blaney:** Thank you.

**The Chair:** Thanks for meeting my time challenge. I want to make sure everyone gets their full opportunity.

The next questioner is Adam van Koeverden.

Please go ahead. You have five minutes.

**Mr. Adam van Koeverden (Milton, Lib.):** Thank you, Mr. Chair.

Thank you so much to the witnesses for joining us today and for providing us with this incredibly valuable insight and perspective.

My question is for all three. I would like to go from Madame Poitras to Mr. Chartrand, and then to President Natan Obed, if that's okay. It's in two parts. I'm sorry, but I'm going to ask for very brief answers.

The first question is around engagement with officials to gather that really valuable insight, perspective and feedback about the individual problems your communities and nations face and have faced. I'm wondering about the degree to which it has been adequate. I'd like to know whether they've been in touch proactively and whether you've had the opportunity to provide that.

The second half of my question stems from something Madame Poitras said around the case that there is room to be better and that the COVID-19 pandemic has exposed other epidemics and inequities across Canada, from opioid addictions to the tuberculosis referred to by Mr. Obed, to inactivity and sedentariness, which I think is a problem in urban and suburban communities as well. Housing, overcrowding and clean drinking water are just a few others.

We have a well-stated ambition of building back better. I would like to know, from a broad perspective, starting with Madame Poitras, what building back better means to you, your communities, your people and your nations.

Thank you.

**Regional Chief Marlene Poitras:** Thank you for your question.

In the first wave, we had a really good response in terms of the engagement with this government, with Minister Miller, but as I said, there's always room for improvement.

In terms of some of the decisions that are being made, like the recent release of funding, the question we get is, how do they arrive at those numbers, taking into consideration that we have over 630 first nations in Canada? As I said, it's imperative that we work together in dealing with this crisis, because in the past it hasn't happened. We need that nation-to-nation engagement.

**Mr. Adam van Koeverden:** Thank you, Madame Poitras.

Mr. Chartrand, go ahead, please.

**Mr. David Chartrand:** Thank you very much, Adam.

Let me say this. Engagement with officials is sometimes a massive challenge, especially federally. When they talk about FNIHB, again, that department is keeping an old policy that should have been thrown out with the garbage a long time ago, because it has damaging effects on the Métis people in western Canada. That's a big issue.

When it comes to ministers, that's a different story. They're truly in line with discussions. They're willing to pick up the phone and talk to you to see how we can better align our systems. That's a big difference, when you see politicians wanting to do it differently and you see bureaucrats sometimes pulling back because of some policy that hinders them.

On the other side of it, I think what all of us should learn from this is that one virus has affected the world like that—the entire world. It showed how this virus will attack those citizens who are the most endangered. Right away, it was the chronically ill individuals, and those would usually be the poor, the working poor and seniors—in general, all seniors.

When you look at it in that context, our country and our world needed to react with a quick action plan on all of it. It also shows it can affect anybody in the world. The virus has, I hope, given us a wake-up call in this county, a wake-up call in the world. We need to do better. We need to be more effective. We need to now truly reflect that this is an issue, and we need to be ready for it.

We do know that the most vulnerable will be indigenous people because of the high rates of chronic illnesses. As Marlene has said and as Natan has said, this is a long-standing issue of us struggling to find a place in Canada, where health and costs.... Everybody is afraid to deal with the indigenous people because it costs so much money. But it costs so much money because they have ignored it for so damn long and now we're paying the price for it.

Again, for all of us, I think this should be a wake-up call. We need to put our heads together and sit down now and figure out how we move after this. The next one to come could be worse.

How do we plan for this? We shouldn't say, “We're over it. Let's just keep on living.” I think that's the worst thing we could ever do to ourselves.

• (1210)

**Mr. Adam van Koeverden:** Thank you, Mr. Chartrand.

**The Chair:** You have half a minute.

Go ahead.

**Mr. Natan Obed:** It's been interesting. Personal relationships matter a lot within the federal government, no matter what you might think about the idea of a bureaucracy. We have great relationships with departments like ESDC, Indigenous Services, Infrastructure Canada, the Public Health Agency, Health Canada, and we have other departments where there could be major announcements and we get nothing, as with Agriculture Canada in relation to food security.

Moving forward, I think building back better means recognizing infrastructure deficits and closing those deficits when it comes to health care and education, and also economic considerations to ensure there is one country when it comes to connectivity, infrastructure, a foundation for health care and education that allows for all of us to meet these pandemic realities in the same way.

**The Chair:** Thank you very much.

We're now going to another five-minute round, with Mr. Vidal.

Gary, please go ahead.

**Mr. Gary Vidal (Desnethé—Mississippi—Churchill River, CPC):** Mr. Chair, I think our order has Mr. Melillo up next.

**The Chair:** I apologize for that.

Eric, please go ahead.

**Mr. Eric Melillo (Kenora, CPC):** Thank you very much, Mr. Chair.

I'd like to direct my questions to Mr. Obed.

In my riding, and across northern Ontario, we've seen reductions in air service to many communities, particularly the remote communities that depend on that air service for their prosperity. Of course, many of the air carriers have had difficulties accessing government programs, for a variety of reasons.

Mr. Obed, I'm curious to know if you've seen similar reductions in air service capacity in Nunavut. If so, in your view, how has that impacted food security across the territory?

**Mr. Natan Obed:** Thanks for the question.

The reduction of air travel has been universal across Inuit Nunangat. There are many restrictions now for anybody to travel. There are two-week quarantine isolation requirements for much of the four regions of Inuit Nunangat. Also, a lot of the planes that fly are small planes, where it's very hard to be physically distanced, so the capacity on these planes has been reduced as well.

The end result is that there is a lot less opportunity for goods and services to flow, although through these business services contracts, these freight contracts, airlines have been able to keep going because of some of those very real realities where communities need freight to be flown day in and day out.

There's also the consideration around testing. If you have been tested, but then the flight doesn't come for three days, that has a massive implication on the ability for public health to understand how to respond to particular cases.

I think the sustainability issue is one that we really have to try to address in the long term, especially if this goes on for a lot longer. Because we have different companies and airlines that have serviced the remote regions of this country against all odds for a long, long time, in this particular reality I think there need to be subsidies considered, because these are essential services and we need to keep this infrastructure in place. There are no ways to get to our communities for the vast majority of the year other than through the air. That's just the reality for all of the services that we need during this pandemic.

I do hope that the federal government thinks of air transportation first within its infrastructure in regard to its COVID response.

• (1215)

**Mr. Eric Melillo:** Absolutely. Thank you very much.

Just to go back to the second part, about food security, we know that food security—maybe “food insecurity” is a better way to put it—across the territories is a challenge at the best of times. How has the pandemic impacted some of those challenges? Can you expand on that a little more?

**Mr. Natan Obed:** Yes. Sorry about that.

There have been some unexpected positive consequences of the pandemic. One is that more people have been on the land in the last six to eight months and therefore have been providing to the communities more of their country foods than generally in the most recent history.

There still is a huge reliance on perishable and non-perishable food items that are flown in or cargoed in—sealifted in. For this year, many people would have gone to the south, gathered non-perishable food items and then put them on sealifts. They would have them, then, for the entire year. That sealift season really didn't happen. Some people were able to find alternative ways, but for the most part, we're going into a winter where there will be more emphasis on store-bought foods and less on a stockpile, if you will, that individuals have to ensure that they have food security.

It remains to be seen. We haven't seen massive influxes of food insecurity based on the airlines operating differently, although we have seen delays in perishable items. Because the system has held to this date, we have not seen a wholesale collapse of the way in which non-perishable food items get to our communities, but that is a risk, and if we don't do more to support our airlines, these systems will become imperilled and people will suffer from food insecurity because of it.

**The Chair:** Thank you very much.

That brings us to your time.

It's time for five minutes with Marcus Powlowski.

Please go ahead.

**Mr. Marcus Powlowski (Thunder Bay—Rainy River, Lib.):** Thank you.

Welcome, guests. It seems that MPs from northwestern Ontario are a dime a dozen today, including Eric and me.

The indigenous communities in northwestern Ontario have, I think, done pretty well with the pandemic and haven't been that affected by it. I think they've done a really good job. Certainly, one of the concerns, however, is with the dependence on health care referral centres in more southern places. In northwestern Ontario, that isn't such a problem, because Thunder Bay is on the receiving end and Thunder Bay doesn't have a lot of COVID cases either.

Manitoba, however, used to be really good, but now places like Norway House, where I worked before as a doctor... We used to refer all our cases, including pregnant women, to Winnipeg, which is obviously potentially a big problem now. Similarly to Mr. Obed, I worked in Iqaluit, and the more complicated medical cases there went either to Montreal or to Ottawa. Again, there's a big concern regarding possible source of transmission when people come back from health services.

My question is, what are you doing to ensure that you don't get transmission that way? Are you just getting people to self-isolate for a couple of weeks? Is there enforcement of that? Have you considered possibly changing referral centres so that instead of sending people from Iqaluit to Montreal, you send them to somewhere that has a lower number of cases?

The other concern is that people who are sick have to go to those places, but also.... Say you're in Norway House and you've been having chest pains. You'll want to get a stress test. You may not want to go to Winnipeg, given the concern about COVID in Winnipeg. Similarly, if you need a colonoscopy and you are from.... I guess Iqaluit can do them, but if there are other kinds of testing, you'd have to be sent down. I would think that's a concern, that we're not picking up cases early enough because of people not wanting to go to the referral centres.

I leave those questions to anybody who wants to answer them.

• (1220)

**Mr. David Chartrand:** If you don't mind, Marcus, let me start off with Manitoba. Of course you know we're in red and orange. We're definitely in one hell of a crisis here right now. It's a scary place to be right now. We're at 97% capacity in our hospitals province-wide. There's just no way that anybody can take anybody right now. Over 200 physicians, doctors and experts warned the province that they should never have sat down, rested and taken it for granted that we were in good shape, that everybody else was in bad shape but we were good. There should have been a strategy, and that strategy was not there. Now we're paying the price for that. There's obviously a lesson to be learned, and we should go back and reflect upon it.

We are very fearful of it right now. We don't know where we can go if something does come, if the pandemic hits our villages. For our Métis villages, for example, or the Norway House example—you know that—and next door to them also, if they get hit hard out there, there'll be hell to pay. There's nowhere to go. They have a small facility there that will be fully utilized. I think they're still building their hospital. If you look at it in general terms, you're absolutely right. From anywhere in the north you have to go south. Nobody wants to go to Winnipeg, but you can't anyway. Nobody's going to take you. If you're sick, if you're in the ICU for a heart operation or something, you're in big trouble because they're delaying surgeries now. We're in a very, very dangerous zone right now in our province.

I shouldn't be critical, but our government failed miserably on this one, and it's going to hurt. It's costing lives. We've never seen that. Yesterday we were at 80 deaths altogether already. It's rapidly increasing. As you say, we're worse off than anybody else in this country, and I don't know where we're going to find ourselves when the dust finally settles, when we get some kind of control.

I'm very thankful, as a Métis leader. We have a very strong communication system. As I said, we delivered over 6,000 hampers last year to keep all of our elders inside their houses, and we're doing it again right now. We're in full swing right now across the province and we're trying to make sure that our young generation.... That's another one that all of us in this country need to focus on. We need to tell the younger generation that they, too, have a responsibility to be carrying the value of their grandparents and their parents.

We keep using our communication strategy and we tell them, "Yes, you're strong. Yes, you may survive this COVID, but just imagine for a second that you give it to your grandpa, your grandma, your uncle or your aunt and they die. What are you going to carry on your shoulders for the rest of your life?" We've tried to

scare them on that because it's real. We're not trying to make it up. It is real. We have a very good, robust communication strategy and the numbers are showing that our communication strategy is working. I think, as I said, if it weren't for federal Canada right now, for us, we'd be in a hell of a big trouble in our province, in the Métis nation, and I think among indigenous people in general.

Again, I cross my fingers. I'm a religious man. I pray at night and I pray in the morning. I do pray that we're going to find a way out of this mess, because this is a scary one right now for us in Manitoba.

**The Chair:** Thank you so much, Mr. Chartrand.

Mr. Vidal, I have you up next for a five-minute round. Are you ready to go?

**Mr. Gary Vidal:** I am, Mr. Chair. Thank you very much.

I also want to thank all of our witnesses, as everybody else has today, for their time; I know it's valuable. Your input and remarks are appreciated by all of us.

I want all three of you to have the opportunity to answer this question. I'm going to do this quite quickly.

First nations, Inuit and Métis people have from the beginning of the pandemic acted very quickly to ensure the safety of their people. You've done a great job of that. I want to commend you for that.

On August 12, the second round of the community support fund was announced. Just yesterday, it was announced that the application process is going to be open for a little better than half of that money, while the other half of it is going to be allocated directly to first nations, Inuit and Métis people. I would like you to comment on any concerns or any value that you would see in the application process, which isn't going to close until November 30. Then there's the associated decision on who's going to get that money. I'm guessing there are going to be plenty of applications for the amount of money included.

I would like you all to comment on the timing, the process, how you feel about that and how it's impacting the people you represent.

• (1225)

**The Chair:** Madame Poitras, do you want to start with that?

**Regional Chief Marlene Poitras:** Thank you very much.

When I saw that the \$160 million was open to applications, I was concerned about it because there are some first nations that don't have the capacity at their level to write really good proposals. They're going to be left out again. As I said previously, first nations need resources, but they need them now. This pandemic is rising and it's creating great concern. To institute an application process takes time. There's a big delay in terms of the services that are provided.

Yes, it's a concern for me.

**Mr. Gary Vidal:** Vice-President Chartrand or President Obed, who wants to jump in here first?

**Mr. David Chartrand:** Thank you again for that question, Mr. Vidal.

From our perspective, as I said, I do commend the federal government on this action. If there's a lesson to be learned here, this is a good one.

It is working. The ministers are stepping in behind the scenes and making it clear that even though the policies are being written... For example, if the application process is too cumbersome, they are making revisions to make it clear so that it finds its way to our government so we can get it to our citizens. I do commend the government on that part of it. They are doing an excellent job on that side of it for the Métis nation. I have no complaints coming from our side. Any political party... If you follow that pathway of a distinction-based approach, where it's measurable and accountable, the transparency is there. For example, the Métis nation, the first nations, Inuit, as you heard Natan say, all directly get our own share of the funding. Then we can divvy it up to our systems and let our governments decide what's best for our community.

It's really working, Mr. Vidal. I think it's a good example for anybody. Maybe because you guys pressure a lot to make sure that this money gets to us, it's working. It's working in many ways right now. We're very appreciative of that.

**Mr. Natan Obed:** I agree with Vice-President Chartrand.

In the second round of the community support fund, we would have preferred that more of that portion had gone directly through in the way in which the first allocation of funding did, which was through the self-determination processes among first nations, Inuit and Métis representatives.

I think the challenge for the second round is one of access. In my conversations with the Prime Minister and with Minister Miller, they've always said that this is what we're doing at this point in time. They've always reassured us that there would be more money to meet the needs if the need is identified. I am still hopeful that this is still something we can see as a principle moving forward. Even if this second round is in two different pots, there is more money for the identified need as the need becomes [*Technical difficulty—Editor*].

**The Chair:** You have half a minute left, Gary.

**Mr. Gary Vidal:** Thank you.

Maybe just quickly, a number of you referred to the 5% indigenous procurement and some of the challenges for your businesses. Regional Chief Poitras, could you just comment on the challenges of not meeting those targets of indigenous procurement and the impact it has on your businesses?

**Regional Chief Marlene Poitras:** I'll speak to the issue of casinos in Alberta, for example. They have the first nations development fund, and all first nations in Alberta were able to access those funds. But now because of the shutdown, they had to close down a lot of casinos and they're struggling to maintain the operation to the level they did prior to the shutdown. They require the extra stimulus. When they announce funds for the economic recovery, first nations get significantly less than what's provided to the provinces for economic stimulus. That's a problem.

**The Chair:** Thanks for your short answer.

We're moving along to a two-and-a-half-minute question.

Madame Bérubé, you have two and a half minutes. Please go ahead.

[*Translation*]

**Ms. Sylvie Bérubé:** Thank you, Mr. Chair.

My question is for Mr. Obed.

You said that rapid testing wasn't necessarily faster. What do you think should be done to make testing faster?

• (1230)

[*English*]

**Mr. Natan Obed:** We continue to have ongoing conversations with Health Canada, with the Public Health Agency, Indigenous Services, and the four public governments that service Inuit Nunangat communities.

Around testing, we have a structure called the Inuit public health task group, where chief medical officers of health sit beside senior technical leaders from the Inuit regions, so we have a partnership already. We have a way in which to talk about how to strategically align Inuit-specific considerations and public government considerations.

We aren't at a place yet where there are, number one, the rapid access testing protocols that have been approved by the Government of Canada and by other jurisdictions to employ in Inuit Nunangat. But when we do, it will be a matter of access. As we've seen with every different stage of the pandemic globally, when there is an intervention there is never enough of it based on the population in need. We have been continuing to lobby for Inuit Nunangat to be considered a special consideration and a high priority for things like rapid access testing technology to be employed by the Government of Canada. That goes down to a vaccine as well.

Right now, the biggest consideration is access to these types of rapid access solutions. Also, access to the lab testing that's required [*Inaudible—Editor*]. We have very little capacity or no capacity, depending on the region, to have labs analyze results for a COVID test.

We are behind when it comes to every aspect of testing and identification of COVID. We have been very fortunate so far that we don't have high rates of COVID-19 in our communities. But if that changes, we need to solve these outstanding challenges in regard to access to testing.

**The Chair:** Thank you very much.

Ms. Blaney, you have two and a half minutes. Please go ahead.

**Ms. Rachel Blaney:** Thank you.

I want to start with Mr. Obed. I'm going to ask everybody the same question, but you could start.



The transition to remote education has been a bumpy one for everyone. I'm just wondering if you could speak to some challenges that you have faced in terms of access to the Internet but also access to key equipment like computers and whatnot.

**Mr. Natan Obed:** The access to connectivity is one that is particularly acute during COVID: the ability to hold Zoom meetings or Microsoft Team meetings, any of these sorts of things. We had our AGM and board meeting last week at ITK. We had certain people who couldn't participate because the connection wasn't strong enough or reliable enough. If you have meetings just staggering along, waiting for people to get back online or you can't hear them for certain periods of time, that's just the reality of our connectivity and we are not able to conduct business. We are not able to conduct health care or education in the way in which we need to and in the way in which others in Canada can, because of the lack of connectivity.

Moving forward, we need an Inuit Nunangat solution. There are many different solutions that are being proposed that might help one region or another, but as the Government of Canada has said, there will be universal broadband connectivity in 2030, I believe, and we need to be on the forefront of that as well. We've always been a number of generations behind when it comes to connectivity in Inuit Nunangat. And the reliance on satellite technology for the entirety of our bandwidth is not acceptable.

**Ms. Rachel Blaney:** Madame Poitras, go ahead.

**The Chair:** You have 30 seconds.

**Regional Chief Marlene Poitras:** Thank you.

One of the biggest concerns I've heard in terms of remote education is the child care aspect for working mothers. It creates a lot of issues, other than the connectivity and the access to technology to provide good-quality education. Those are some concerns that I've heard.

As we go forward, I know Alberta has opened some of the schools. With the rising cases of COVID, that's been an issue. Parents had to apply by a certain date to be able to provide remote education for their children. It's creating some issues.

• (1235)

**The Chair:** We'll have to stop there.

We have one more five-minute question, from Ms. Zann.

Lenore, please go ahead. You'll close with five minutes.

**Ms. Lenore Zann (Cumberland—Colchester, Lib.):** Thank you so much to everybody for your very intelligent and impassioned comments and presentations. I've been listening intently.

One thing that concerns me, and I'm sure it concerns you too, is the twin pandemic of overdoses and addictions, and the rising deaths of our young people, middle-aged people. Many people are getting this disease—it's a disease, and it's very concerning.

The pandemic has cast a grim light on the ongoing crisis we've been facing in Canada for many years, the overdose epidemic. I know that while some cities have significantly higher numbers of overdose deaths than others, the need for harm reduction services

and the calls from advocates for a safe drug supply are continuing to rise across the country.

Also, I notice an increased risk of deaths and overdoses if the substance supply shifts, and especially if newly contaminated substances, including fentanyl or its analogs, are introduced into the communities.

What exactly are your communities doing to prevent or to counterbalance this rise in activity? Madame Poitras, would you mind going first, please?

**Regional Chief Marlene Poitras:** Yes, the mental health concerns have been a real issue that is being dealt with, not only with the increase in suicides and overdoses, but also in domestic abuse. Even having safe places for women and their children to go is an issue. One thing we've tried to do is have our elders...because they're a very important part of the fabric of our society and our ceremonies. As I said, those things have been scaled back because of COVID. Some ways they've tried to deal with them is to go online to have counselling services or somebody to talk to. The issue, of course, is people not having the technology to be able to do that, from elders to young people. It continues to be a concern.

I think the way we need to deal with it is for all of us to put our heads together and address these issues in a good way. With the numbers rising, we have COVID fatigue. One thing I hear people saying is, "Yes, I'm positive, but people are recovering from it, so I'm going to continue to party or do whatever." Those are very concerning issues we're dealing with. I don't think that's only for first nations, but for everybody. We all have to come to the table to deal with it effectively.

Thank you.

**Ms. Lenore Zann:** Mr. Obed, do you know if naloxone kits are available widely? What's happening on that end of things?

**Mr. Natan Obed:** I'm sorry. I don't have a specific response in relation to that question. I can get that information, along with the other promised information, to the committee.

• (1240)

**Ms. Lenore Zann:** Thank you.

**Mr. Natan Obed:** In relation to harm reduction and safe drug supply, in our Inuit Nunangat communities we just don't have the resources for a lot of those types of facilities to exist. There are a lot of challenges from not having harm reduction principles employed within our homeland.

For urban Inuit and for Inuit who are at risk, who are homeless or on the streets in many cases, there needs to be more supports for urban Inuit organizations and for first nations, Inuit and Métis-specific organizations that provide support at the community level in southern Canada. They do amazing work with almost no resources, and there need to be more supports for those institutions.

**The Chair:** We're way past our time now.

**Ms. Lenore Zann:** I'm sorry, Mr. Chartrand.

**The Chair:** Mr. Chartrand, you did make some very pointed comments on this subject earlier, which, of course, were captured by our analysts as part of the testimony.

I also hope that all of our guests, whom we deeply enjoy having, could hear the respectful tone of our committee's questions, which reflects the concern we have for the work we're doing for the people under our charge, according to the way this committee is mandated. We feel that it's very important and should be beyond partisan politics. I hope that feeling came across, because we're pretty

proud of the work we're doing. Of course, we're not proud of the outcomes yet. We need to fix that.

Just before I let you go, I'm going to ask the clerk to advise the committee on what we need to do to get into the last few minutes of the meeting, which is committee business in camera.

Mr. Clerk, what's the process now?

**The Clerk of the Committee (Mr. Naaman Sugrue):** We'll suspend the meeting, which will end this Zoom meeting, and you'll use the information provided to you by email to connect to the in camera portion. It's new meeting info and a new password.

**The Chair:** Okay. Does everyone have that?

Thank you. For just a few minutes now, this meeting is suspended.

*[Proceedings continue in camera]*

---







Published under the authority of the Speaker of  
the House of Commons

---

### SPEAKER'S PERMISSION

---

The proceedings of the House of Commons and its committees are hereby made available to provide greater public access. The parliamentary privilege of the House of Commons to control the publication and broadcast of the proceedings of the House of Commons and its committees is nonetheless reserved. All copyrights therein are also reserved.

Reproduction of the proceedings of the House of Commons and its committees, in whole or in part and in any medium, is hereby permitted provided that the reproduction is accurate and is not presented as official. This permission does not extend to reproduction, distribution or use for commercial purpose of financial gain. Reproduction or use outside this permission or without authorization may be treated as copyright infringement in accordance with the Copyright Act. Authorization may be obtained on written application to the Office of the Speaker of the House of Commons.

Reproduction in accordance with this permission does not constitute publication under the authority of the House of Commons. The absolute privilege that applies to the proceedings of the House of Commons does not extend to these permitted reproductions. Where a reproduction includes briefs to a committee of the House of Commons, authorization for reproduction may be required from the authors in accordance with the Copyright Act.

Nothing in this permission abrogates or derogates from the privileges, powers, immunities and rights of the House of Commons and its committees. For greater certainty, this permission does not affect the prohibition against impeaching or questioning the proceedings of the House of Commons in courts or otherwise. The House of Commons retains the right and privilege to find users in contempt of Parliament if a reproduction or use is not in accordance with this permission.

---

Also available on the House of Commons website at the following address: <https://www.ourcommons.ca>

Publié en conformité de l'autorité  
du Président de la Chambre des communes

---

### PERMISSION DU PRÉSIDENT

---

Les délibérations de la Chambre des communes et de ses comités sont mises à la disposition du public pour mieux le renseigner. La Chambre conserve néanmoins son privilège parlementaire de contrôler la publication et la diffusion des délibérations et elle possède tous les droits d'auteur sur celles-ci.

Il est permis de reproduire les délibérations de la Chambre et de ses comités, en tout ou en partie, sur n'importe quel support, pourvu que la reproduction soit exacte et qu'elle ne soit pas présentée comme version officielle. Il n'est toutefois pas permis de reproduire, de distribuer ou d'utiliser les délibérations à des fins commerciales visant la réalisation d'un profit financier. Toute reproduction ou utilisation non permise ou non formellement autorisée peut être considérée comme une violation du droit d'auteur aux termes de la Loi sur le droit d'auteur. Une autorisation formelle peut être obtenue sur présentation d'une demande écrite au Bureau du Président de la Chambre des communes.

La reproduction conforme à la présente permission ne constitue pas une publication sous l'autorité de la Chambre. Le privilège absolu qui s'applique aux délibérations de la Chambre ne s'étend pas aux reproductions permises. Lorsqu'une reproduction comprend des mémoires présentés à un comité de la Chambre, il peut être nécessaire d'obtenir de leurs auteurs l'autorisation de les reproduire, conformément à la Loi sur le droit d'auteur.

La présente permission ne porte pas atteinte aux privilèges, pouvoirs, immunités et droits de la Chambre et de ses comités. Il est entendu que cette permission ne touche pas l'interdiction de contester ou de mettre en cause les délibérations de la Chambre devant les tribunaux ou autrement. La Chambre conserve le droit et le privilège de déclarer l'utilisateur coupable d'outrage au Parlement lorsque la reproduction ou l'utilisation n'est pas conforme à la présente permission.

---

Aussi disponible sur le site Web de la Chambre des communes à l'adresse suivante :  
<https://www.noscommunes.ca>