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# Standing Committee on Veterans Affairs

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Chair: Marie-France Lalonde





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• (1630)

[*Translation*]

**The Chair (Marie-France Lalonde (Orléans, Lib.)):** I call this meeting to order.

Welcome to meeting number 36 of the House of Commons Standing Committee on Veterans Affairs.

Pursuant to Standing Order 108(2) and the motion adopted on Thursday, September 18, 2025, the committee is meeting on its study of the experience of Black veterans.

Before we continue, I'd like to ask all in-person participants to consult the guidelines written on the cards on the table. These measures are in place to help prevent audio incidents and acoustic shocks, and to protect the health and safety of all participants, including our esteemed interpreters.

[*English*]

We have two witnesses with us today.

[*Translation*]

I know we're still waiting for a witness, but I'd like to begin the meeting with the witness who is present.

[*English*]

I would like to welcome Mr. Isaac Bosquet.

[*Translation*]

Mr. Bosquet, you'll have five minutes for your opening remarks. You're participating by video conference, so you can't see me, but I would ask you to try to be mindful of the time. Sometimes I have to cut people off. I apologize in advance, but I have to respect the allotted time, not only to the witnesses, but also to the committee members who will be asking you questions.

Thank you very much for being with us, Mr. Bosquet. You have the floor for five minutes.

**Isaac Bosquet (As an Individual):** Thank you very much, Madam Chair.

Thank you again for the invitation. It's quite an honour for me to be able to be here, and to tell you about my journey in the Canadian Armed Forces and my experience after leaving the forces.

I joined the Canadian Armed Forces in 2018, but in 2020, I had to leave the forces because of COVID-19. I was posted to Trenton, Ontario, and my family was in Quebec City. They couldn't find me an assignment in Quebec City. That's why I was granted a release

during the COVID-19 pandemic. I was able to leave the forces at the end of July 2020 and return to civilian life.

My time in the forces was great. I'm an aviator and aeronautical systems technician. I was trained at Borden as an aeronautical systems technician. I know that's one of the professions that is in high demand in the forces. I wanted to see how I could continue to serve in the forces, even after I left. I wanted to see if I could enlist again, even on a part-time basis. It was an uphill battle. I know that this experience is due to COVID-19. It may have lengthened the entire exit process as much as the re-enrolment process. I did intend to enlist in the forces again, even on a part-time basis, in Quebec, to pursue my military career.

Now, since 2020, that is, since I left the forces—

• (1635)

**The Chair:** Mr. Bosquet, I'm very sorry, but we're having a problem with interpretation. I'm so sorry. I apologize for the inconvenience. Since you're our only witness, we have a bit more flexibility, so maybe I'll ask you, if that would be—

[*English*]

We should be okay.

[*Translation*]

The problem is solved.

Again, I apologize profusely.

You may continue, Mr. Bosquet.

**Isaac Bosquet:** I was going to say that, when I left the forces, it was during COVID-19. It's probably not the best time to use as an example. There was probably some red tape in all the institutions. That's normal, because there were a lot of adjustments to be made during that period.

When I left the forces to return to civilian life, a little support for mental health or career counselling could have helped me. I would also like to tell the committee that, since 2020, I have had no other jobs. After the Canadian military, I had to go into business. It would certainly be desirable to have support in choosing a career or for people like me, who are currently entrepreneurs. I know a lot of people choose to work or go into business. They should receive support from Veterans Affairs Canada.

I left the forces in 2020, but only received my veteran's card this year. Still, I don't really know what resources exist in the organization. I even tried reaching out a few times, but I didn't really get a positive response. I don't want to blame the institution directly, but I'd say quite a bit of information remains inaccessible unless you dig deep. It's increasingly complicated to find information that exists for veterans.

As we always say, among people who have served in the forces, we already know that there are problems, whether it's mental health, psychological isolation or something else. In my case, I have great support from my family and other people. However, as a former military member and as a Black person who served in the forces, we would need support to understand how things work or even to know what resources exist. It's important for us to know how we can redirect our careers. Since we served in the forces, they could at least help us in opening some doors. I didn't have access to all that. I still haven't had the opportunity to benefit from that information as a veteran.

I don't know what questions you'll ask, but I'm at your disposal.

In summary, I joined the forces in 2018. In 2020, I had to leave the forces early. I left in 2020 because I had a posting in Trenton, Ontario, while my family was in Quebec. As you know, during the COVID-19 pandemic, there were many traffic problems because the borders between the provinces were closed. I was able to get a release and leave the forces. After that, I wanted to enlist in the forces again on a part-time basis, but it was an uphill battle for me.

I know there was an interruption in my opening remarks, but that's what I wanted to say in summary.

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

On behalf of our committee, I'd like to thank you for your military service to Canada.

We're still waiting for the second witness. We're trying to reach her. In the meantime, I will open the discussion and allow committee members to ask you questions.

Here's how it will work. There will be a first round, during which speaking time will be six minutes for the Conservative Party, the Liberal Party and the Bloc Québécois. The members of the committee will ask you questions. If their six minutes are up, I'm going to have to cut you off. I'm so sorry about that.

To start, I'll pass it over to Ms. Wagantall.

• (1640)

[*English*]

She will be addressing you in English.

[*Translation*]

Can you hear the interpretation?

[*English*]

Do you hear me in the language of your choice?

**Isaac Bosquet:** Yes.

**The Chair:** That's perfect.

Ms. Wagantall, you have six minutes.

**Cathay Wagantall (Yorkton—Melville, CPC):** Thank you, Madam Chair.

To the member, thank you very much for your service and for your willingness to be here today to share your perspectives on being served by Veterans Affairs. We know that service in the CAF has been a challenge to many individuals for different reasons. I'm so pleased that you are willing to share your perspectives on things with us today.

Can you tell me, please, sir, if you see Veterans Affairs as seeing this as an issue that needs to be dealt with? Have you seen change at all during your time in service and now in your care through Veterans Affairs?

[*Translation*]

**Isaac Bosquet:** I can't tell you that, because I left the military in 2020. However, I can tell you about my experience as a veteran from 2020 to date. I haven't had the opportunity to connect with a Veterans Affairs counsellor who could have guided me or told me what benefits I'm entitled to as a veteran. I don't know what programs are available to support me in civilian life. I haven't had the opportunity to meet with anyone from the Department of Veterans Affairs.

Has there been a change in the department? I can't speak to that. I can speak more about my personal experience. As a Black veteran, I haven't had the opportunity to be in front of a clerk or counsellor who could have told me about Veterans Affairs Canada's services. I probably know there are some, but I'm not familiar with them.

[*English*]

**Cathay Wagantall:** Thank you for that.

I apologize if I'm a little out of sync. My side of the table has been interesting, as far as getting organized today goes. I was not as focused, possibly, as I should have been.

I would like to know this: Since you left in 2020, what was the experience of leaving? I'm just surprised—well, I shouldn't be surprised, maybe—that there was no communication immediately, as you were leaving the forces, to provide you with any information about the potential services you could get from Veterans Affairs. Are you saying that you received no information as you left?

[Translation]

**Isaac Bosquet:** Yes, I didn't have the chance for a counsellor or someone to contact me, but that's still excusable. Just to put things in context, let me remind you that this was during the COVID-19 pandemic in 2020. There was a lot of reorganization, budget cuts and uncertainty, which meant that, just like the economy and society, institutions were paralyzed. However, later on, in 2023 or 2024, for example, no follow-up was done.

[English]

**Cathay Wagantall:** I appreciate what you're saying, especially in regard to COVID as well. However, I've been on this committee since 2015, and we've done a great deal of work to study the transition and make recommendations. One recommendation that the government and National Defence certainly agreed with was that more information needed to be provided to serving members in regard to potential services when they left the forces.

Of course, when you join, you don't see that as being in your future any time soon, and you have plans for a career. However, there needed to be more communication throughout your time serving so that you would have opportunity, when you left, to have a sense of knowing how you could proceed. What I'm hearing from you is that none of that was the case.

As you are a Black veteran—please, if you're comfortable with this—feel free to share what that dynamic was like for you, serving in the armed forces as a Black service member. Is there anything you would like to recommend that we could do, even today, that would make things more fair for those who are from a different background, ethnic background or whatever, to be well cared for, recognized and valued in your service?

[Translation]

**Isaac Bosquet:** Someone who chooses to serve in the armed forces loves their country and is proud to wear the uniform. If, for one reason or another, that person is no longer in the military and becomes a veteran, that person could still serve in the armed forces as an instructor or a reservist, for example. We know there used to be a recruitment problem, but I don't think that's the case anymore. It's a pool of talent, for sure. As I told you, I was trained as an aviation systems technician. It's a profession that requires extensive training. We could utilize those skills and put them to use in the armed forces.

Now, as a Black veteran, I can speak to our reality. When I say “we”, I'm referring to the Black community. I know there have been these systemic issues. We don't engage with the system. Normally, if we aren't called upon for something, most of the time we don't go digging too deep or try to find out what we're entitled to. If you don't bring it up or promote it, we won't know what we're entitled to as veterans. We need to be told not to be afraid to knock on doors or visit a Veterans Affairs Canada office to access these services. I think the department could launch an awareness campaign with veterans to encourage them to knock on doors or make phone calls. I don't know how many there are in the military, but we should at least be able to raise awareness of this.

• (1645)

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

[English]

**Cathay Wagantall:** Thank you very much.

I'm sorry. I'm out of time. You've been very helpful.

[Translation]

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

Once again, as I said, I will have to interrupt people from time to time, because each member's speaking time is limited.

We'll now go to Ms. Auguste for six minutes.

**Tatiana Auguste (Terrebonne, Lib.):** Thank you very much, Madam Chair.

First, Mr. Bosquet, I'd like to thank you not only for your military service, but also for appearing before the committee today to tell us about your experience.

My first question is about camaraderie. On this committee, we've often discussed the importance that some veterans place on camaraderie after their time in the Canadian Armed Forces.

Do you have a network of Black veterans that you can spend time with, with whom you can share camaraderie and talk about your unique experiences in the Canadian Armed Forces?

**Isaac Bosquet:** No, Ms. Auguste, I don't have a network like that. If there is one, which is likely, I'm not aware of it. I haven't really had access to a network of Black veterans where members and I could have helped each other or even shared information. If there is one, it isn't being promoted so that people know it exists and can be part of this camaraderie.

**Tatiana Auguste:** When you were in the Canadian Armed Forces, were you the only person of colour? That could explain why you haven't been part of such a network, or is it more likely because members lose touch with one another after leaving the armed forces?

**Isaac Bosquet:** During my training in Trenton, or even during my basic military training, I was pretty much the only person of colour, yes. Yes, I have kept in touch with a few people I trained with in the military. Some of them are still in the military. However, I haven't really had a network like that.

**Tatiana Auguste:** Now you're the CEO and co-founder of DameSara, a Montreal-based multicultural wholesale retail company. So you're now an entrepreneur. We did a really great study on veterans' entrepreneurship.

I'd like you to tell me about the things you may have learned in the Canadian Armed Forces that have helped you and continue to help you in your role as an entrepreneur.

**Isaac Bosquet:** In the military, when we talk about the military ethos, we talk about loyalty, discipline, courage and bravery. These qualities help me in my entrepreneurial journey and mean that, when we have a project, we try to drive it forward and build a team around it. As former service members, we know that you have to have several corps, several units, several battalions to be able to carry out a mission or engage in combat or war. Within the Dame-Sara organization, as you mentioned, Ms. Auguste, we're trying to foster this sense of camaraderie within Black communities so they can come together. Through this venture, I've been able to attract about a hundred investors who have joined this movement. My experience as a former military officer has also helped me attract these people and establish a structure to keep them motivated.

• (1650)

**Tatiana Auguste:** For my next question, I'm going to go back to something you said, namely, that you didn't really have any support or anything like that. You also spoke of an almost systemic problem affecting Black communities: Resources seem so out of reach that almost no one knows where to turn.

Do you have any recommendations on how we can help not only Black veterans, but all veterans, learn about the services available to them through Veterans Affairs Canada, so that they can access the resources they need?

**Isaac Bosquet:** As I said, it would be important for the department to launch a campaign, if possible, to highlight these people's commitment. They are resources that could be also benefit the department. As veterans, we have a background, a wealth of experience and training. This is a resource that could be called upon for Canada at any time. If we are seen as much more closely connected with the Canadian Armed Forces, there could be some kind of benefit as well. Once we wear the uniform, it's for life. I'm proud to have worn that uniform. At any time, it would be an honour for me to wear the uniform again.

That's what I would encourage the department to do—a promotional campaign, like the ones we see for recruitment. When the armed forces want to recruit, they try to launch promotional campaigns to raise awareness and encourage people to enlist. There could also be a promotional campaign targeting veterans, especially in Black communities. People who have served could then relate to it and try to build a small network to identify their needs. I'm an entrepreneur. I imagine that the Department of Veterans Affairs has resources for people who have served in the military, but there may also be other resources for someone who is an entrepreneur.

In short, a promotional campaign would be a good idea.

**Tatiana Auguste:** Next, I want to talk about your transition. In your case, it took place during the COVID-19 pandemic. I'd like to know exactly how this departure—albeit a hasty one—from the Canadian Armed Forces went for you. How did you and your family experience it?

**The Chair:** There are 40 seconds remaining.

**Isaac Bosquet:** Up until now, my wife has been telling me that I should have kept my job in the military. I just want to let you know that this wasn't a family decision. I had to leave the regular force. I wanted to enlist in the part-time forces as a reservist, but the re-en-

listment process to join as a reservist was very long, even discouraging.

**Tatiana Auguste:** Thank you very much, Mr. Bosquet.

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

I will now give the floor to Ms. Gaudreau for six minutes.

**Marie-Hélène Gaudreau (Laurentides—Labelle, BQ):** Thank you, Madam Chair.

Thank you for being with us, Mr. Bosquet.

My questions are really going to focus more on the culture within the Canadian Armed Forces. We've looked at interpersonal relationships and treatment. For example, we've looked at how things were for women as well as for indigenous people.

Was there anything in the process or in your interactions during your time in the military that might have signalled different treatment because you are Black?

**Isaac Bosquet:** Honestly, I can't make that argument.

Of course, within the Canadian Armed Forces, there's a system that promotes discipline and competence. In my case, I was nearly at the top of my class in all my training programs within the forces, and I didn't notice any such difference. Was there discrimination within the forces? I don't really know, I couldn't say. During the time I joined, in 2018, there were certainly a lot of prevention campaigns regarding psychological harassment, and so on. That did help. When you first join, during basic military training, a sergeant or corporal will be careful what they say so as not to hurt someone's feelings.

I couldn't say that within the forces there's a system that marginalizes people from the Black community. As I said, in almost all my assignments, I was the only person of colour, but I'd say there was always camaraderie. Everything is done in pairs. I sleep in a room with a white person, and we share the room. This camaraderie is somewhat forced. When you spend six months in training with someone, you become like brothers in the military.

So I can't make that argument, Ms. Gaudreau.

• (1655)

**Marie-Hélène Gaudreau:** That's interesting. The important thing is to look at the changes that have taken place over the past few decades in terms of discrimination throughout the system, in civilian life, and to compare that with the Canadian Armed Forces. I'm glad to hear that, especially since—given that you weren't part of a group, but appeared to be the only Black person specifically in the field of aviation systems—the situation could have led to mistreatment. If that had been the case, we could have shed light on the matter.

Thank you for the recommendations you've shared with us.

Are there other things that come to mind in hindsight? Are there any changes that Veterans Affairs should implement to ensure a smooth transition from your time in the military to your return to civilian life? Is there anything else you'd like to add?

**Isaac Bosquet:** Since we are talking about culture within the armed forces, there is perhaps one thing I could add regarding food. They wanted to try to ensure that the food was diversified. That was going to be interesting. I know that the military is a microcosm of society. They should try to see if they can diversify the content of the dishes. I know that they can't please everyone, but that could also help. Someone who is used to eating a certain type of food might be happy to have that.

As for veterans—

**Marie-Hélène Gaudreau:** When it comes to diversity, we understand that, when there are food intolerances or allergies, we have to make adjustments, but I understand that, if people have specific tastes because of their culture or habits, there is no openness to the idea of offering menus like the ones we have here in Parliament—in other words, a diversified menu throughout the year.

**Isaac Bosquet:** No.

**Marie-Hélène Gaudreau:** That's something you'd like to see, though, isn't it?

**Isaac Bosquet:** Yes. That could attract a lot more people. Even in our case, as former military members who are now entrepreneurs, it could give us other opportunities to serve the military, at least in that way.

I know that the department is conducting studies, in which I have participated, to see how the menu can be diversified, but this isn't in effect yet.

As for services to veterans, I mentioned this, but I'll try to clarify my point. As I was saying, veterans have left the forces either because of a disability or voluntarily. They are already allies. Work could be done to strengthen this bond between veterans and the army. It should be much stronger. Besides, there aren't many of us. So that's what I could encourage the department to do.

**Marie-Hélène Gaudreau:** Madam Chair, I know I have some time left, but I think we can also include the next witness in the discussion.

**The Chair:** Thank you very much for that very thoughtful comment, Ms. Gaudreau.

[*English*]

We are welcoming our second witness.

I want to give you a moment to breathe. I know that you just arrived, so if you need a bit of time, we can suspend to get you settled. I don't want to rush you. That's not the intent of this committee. We are at your discretion, madame.

**Door L. Gibson (Captain (Retired) and Activist, As an Individual):** Thank you very much, Chair. I apologize for being late. If I can have more than five minutes so that I can be clear and get through this, then there is no need to suspend.

**The Chair:** You will have five minutes for your testimony, if that's all right. I usually allow a few seconds more, but I'm really

strict. Everybody around the table will know that I try to be fair to everyone.

Ms. Gibson, we're just very happy that you're able to join us. I will give you the floor for five minutes.

**Door L. Gibson:** Thank you, Chair.

Good afternoon, distinguished members of Parliament, chair and all who are associated with today's activities on the experience of Black veterans.

This is a historic moment for me. I apologize in advance to all, because the notes I submitted are not the notes I'm reading. They took a little longer.

My name is Doreen Louise Gibson. I go by the nickname "Door", as in a door of opportunity, and today I have the opportunity and honour to be here.

I'm the daughter of the late Danny Edson Gibson, also a veteran and a strong Black man. My late mother, Hannah Louise Romans, was an equally strong white woman. I'm proud to be a product of their love. I am a life partner to Shirley Avril; sister to Jean, June, Larry and Trevor; and aunt, great-aunt, great-great-aunt, cousin and sister-in-law to several beautiful souls of my mosaic family.

I volunteer as vice-president of the BC Black History Awareness Society, and I'm honoured to be project manager for No. 2 Construction Battalion legacy in B.C. and beyond. Since 2010, I have volunteered with the Last Post Fund, and for the last three years I've been the vice-president of the B.C.-Yukon branch. I volunteer with the poppy office in Victoria, and after 44-plus years of service in the Canadian Army Reserves, I am a veteran and retired captain, which is the purpose of my day today.

I currently reside on the Salish Sea in the coastal and traditional territories of the Halkomelem-speaking people. I'd like to acknowledge my Black ancestors. Some of them were bound by chains and persecution; others were of free will and came to the shores of Mi'kma'ki, also known as Halifax, Nova Scotia, where I grew up. Together, side by side, we stand as treaty people.

I acknowledge the Black veterans who have paved the path, in particular, No. 2 Construction Battalion's soldiers, family and descendants, for the resolve and fight for equality and justice in order to serve our beautiful country, Canada. It is upon their shoulders that I am grateful.

Growing up in Halifax, Nova Scotia, I faced racism at an early age. I experienced devastation and the total destruction of Africville. When I joined the military summer youth employment program in 1973, I mistook racist behaviour as the military way of life.

In the early days, it was difficult to distinguish the combination of leadership and alcohol mixed with the abuse of authority. I witnessed an RSM do nothing about one of my male soldiers when he reported being a victim of a blanket party. The same RSM was later charged in a gang rape. I witnessed an MWO on a major charge for financial fraud.

In 1975, in the junior leadership course, I was first on the course, but was told that a woman had never been nor would ever be a platoon commander, so I stood in the back as the platoon warrant officer.

Back at my home unit, two members who were of the same course got promoted to master corporal, and I spent the next six months fighting for what I had earned. The experience changed the trajectory of my military career.

I experienced racism, discrimination, sexism, harassment and several incidents of systemic barriers over 44-plus years of service. I grew up in the ranks, inspired by the early leadership not to be like them. I was firm. I was fair. I believed in and encouraged individuals' potential. I led with the intention of respect.

I retired at the compulsory age in 2017. I did not receive my reserve pension until 2020. I believe the CAF are going to have a class action right now, on delayed pension, and I will be submitting a claim.

I missed the opportunity, as a reservist, to be recognized as part of the purge settlement and to submit a claim for the military sexual and misconduct class action. I was part of a Black federal employees class action that was denied.

Last year, CAF admitted to the racism and discrimination in the Canadian Armed Forces, and the CDS apologized. For that particular event, I paid my own money to come down, because I felt that I needed it for my self-healing. When I was there, I couldn't believe how much I broke down. I bawled my eyes out. However, I thanked her for doing that.

In closing, I'll share two highlights from my career: when I was appointed the RSM of the Victoria Medical Company and when I received my member of military merit from Her Excellency the Right Honourable Michaëlle Jean, the former governor general of Canada.

In 2021, I got called back to service by the former minister of national defence, Harjit Sajjan, to work on the minister's advisory panel on systemic racism and discrimination, with a focus on anti-indigenous and anti-Black racism, LGBTQ2+ prejudice, gender bias and white supremacy. The report was released in 2022 by the former minister of national defence, the Honourable Anita Anand.

● (1700)

Today, you ask me what the experience of Black veterans is. The Black experience in the military was traumatic for me, and I have never been able to share it. There has never been a place I could trust to get support to heal. I truly appreciate that Veterans Affairs is trying to pick up the slack in terms of past injustice. I will do what I can to support their efforts in the restorative engagement on systemic racism, as well as the efforts of the Black and racialized veterans engagement team. Unless immediate action is taken, faith

will be limited, leaving little room for hope and committed participation. The first time I benefited, as a veteran, was when I took a "Lifeshop" at the Pepper Pod, a retreat for women, in 2023.

Thank you, my sister Sandra Perron.

I regret that I cannot provide recommendations in advance. However, by the end of this conversation and your questioning, I hope to do so. Chair and members of Parliament, I look forward to the conversation. Respectfully, I was there too—or was I really?

Thank you.

● (1705)

**The Chair:** Mrs. Gibson, we've been working very hard to bring Black veterans to this committee. Today you're validating the efforts we've made, so I say, on everyone's behalf, thank you for coming in front of our committee today.

We've started—just to let you know. Therefore, we will start our second round of questions. Each member of Parliament will have five minutes or two and a half minutes. As I said to Mr. Bosquet, sometimes I have to interrupt, if either you or the member of Parliament goes above that amount of time.

I will open the floor to Mr. Richards for five minutes.

**Blake Richards (Airdrie—Cochrane, CPC):** Chair, thank you.

First, to both witnesses with us today, thank you for your service.

I will apologize to Mr. Bosquet. I had another veterans-related meeting that was finishing, so I didn't get to hear your opening testimony. I hope I'm not going to ask any questions that you already covered. If I do, just consider it a chance to reinforce your point.

I'd like to start by asking both of you about what you experienced in your dealings with Veterans Affairs—if you had any dealings with Veterans Affairs. Were they positive or negative? What was the biggest challenge you faced in dealing with Veterans Affairs?

Let's start with you, Mr. Bosquet. I'll then go to Ms. Gibson.

[*Translation*]

**Isaac Bosquet:** As I explained earlier, based on my experience with Veterans Affairs Canada, information is lacking. Not enough effort has been made to provide us with information that is relevant enough for us to know what we are entitled to or what we might be entitled to as veterans, especially within the Black community. We know that there is systemic racism in the institutions, and so on. When we leave the army, we know that we are sort of cast out, but there is certainly a system in place that could support us when it comes to mental health or professional integration. I'm thinking of people who, like me, are entrepreneurs. Even support along the entrepreneurial journey could make things easier for us as veterans.

However, I haven't had the opportunity to speak with a Veterans Affairs Canada representative or even receive an invitation to a veterans' event. We haven't had anything since 2020.

[*English*]

**Blake Richards:** Thank you.

I'd like to give Ms. Gibson a chance to respond to that first question as well, but I would like to return, I hope, and get your suggestions on how those things could be better. You mentioned a couple of things that you think could be better. I'd like to hear your thoughts on how that could work.

Ms. Gibson, do you want to fill us in? Have you had interactions with Veterans Affairs? What did you find were some of the challenges you faced in any dealings you had there?

**Door L. Gibson:** First of all, I have not had any dealings with them, because I was a reservist. There was no area of benefits or support for reservists that I knew of to help me.

On October 30, when I was here for the CDS's apology, I met a gentleman. The name escapes me at the moment. Three months later—because I had something to say about reservists and because I care about them, not just myself—I got a phone call from an individual two levels down from him. He was told to get in touch with me. He shared the process with me and I'm building a relationship with him. Medical people may be there to help support me—because I'm doing this not just for others but also for myself—but I have to make sure it's okay to trust before I move forward with this.

I've had very few dealings on this journey.

• (1710)

**Blake Richards:** Okay.

Let me ask a couple of questions more to follow up on that. You may have shared this, but can you remind me of when you left the reserves?

**Door L. Gibson:** It was 2017, sir.

**Blake Richards:** It really was almost nine years before you were aware that there might be something there that could be available to you.

Would you say that, first of all, this in itself is a problem and that more may need to be done to make sure that someone is aware when they leave service, whether it be the regular forces, the reserves or otherwise, of what's available to them?

**Door L. Gibson:** Of course there does, if you don't mind my saying. I was a regimental sergeant major, so I looked after the troops. There was nothing at the time. However, we were trying to build up a relationship, especially with those who were deployed and especially at the time of the Afghanistan war. I mean, the simple solution was to keep them on the class C contract so they could get the regular force benefits that the class A reservists do not.

I'm also talking about the fact that there is a movement afoot to make that happen. I've been privy to the women's veterans group and what they're trying to do. Two years ago, that was the first acknowledgement of that.

You're correct, sir, that here we are today, and the first time I heard it was in January.

**Blake Richards:** I had a couple of questions more, but I'm told that time flies by very quickly, apparently.

Thank you very much for your contributions.

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

We'll go to Mr. Clark for five minutes.

**Braedon Clark (Sackville—Bedford—Preston, Lib.):** Thank you very much, Madam Chair.

Thank you to our witnesses for being here this afternoon.

Ms. Gibson, it's great to see you. Like you, I am a very proud Haligonian. It's great to have you here. I represent Sackville—Bedford—Preston. That includes many historic Black communities that you would know very well, of course, such as North Preston, East Preston, Cherry Brook, Loon Lake and so on.

Thank you for being here. Thank you for sharing your story and your service. Did you mention it was 44 years?

**Door L. Gibson:** It was 44 plus, sir.

**Braedon Clark:** Exactly. We'll give you every day that you deserve.

We often assume that things get better over time naturally. Sometimes they do, and sometimes they don't. In some areas they do and in some areas they don't. If you look back at the sweep of 44-plus years of service, how would you compare the evolution of your experience over time? In what ways did you see it improving? In what ways did you see maybe not as much progress as we would like to see?

**Door L. Gibson:** Basically, my experience is that I survived. I'm healthy and happy. I see that the military has also done a lot of changing. I came in at a very rough time. Reservists were not even paid. I didn't get paid for the first nine months. Now they have some comparable pay. I worked with the medical organization. When the health services left all of the other elements and became part of their own health services group, their credentials started to matter. It took a couple of years, but the paramedics, nurses, etc., were already qualified. There has been large improvement.

I did spend 2020 working with the defence visible minority advisory group. I was the national co-chair. Some changes were happening then, but of late, with the 2022 advisory panel that I was on, we were still dealing with some of the old stuff, with employment equity and those kinds of things. It's improved, but at a snail's pace. You're going to lose your people, and you're going to lose the Canadian citizens unless it feels like an act of urgency. People are out there hurting.

Before me there was a woman named Master Warrant Officer Sarah Hayward from Nova Scotia—she was from Cape Breton, by the way—who was the only Black woman I saw of any rank. There was nothing—nothing—for her, ever, but if there was something to help her out at this particular time, I would do the volunteer time. I keep doing the volunteer time, because nobody else is lifting it up.

Just talk to the people. I'll see you at the No. 2 celebration.

**Braedon Clark:** Yes, you will. It's a wonderful, amazing place. However, I won't go down that rabbit hole. We'll talk about it later.

I'm curious about your experience with the advisory panel in 2021-22. You've mentioned that a couple of times. How did that come about? What was that work like, and how do we make sure that those kinds of efforts bear fruit?

**Door L. Gibson:** It was at the particular time that the former minister, Harjit Sajjan.... I served with him, years ago, with 39th Brigade, when he was in uniform. He was also part of the defence visible minority advisory group.

He called me. I asked him why, and he said it was because I don't give him any BS. I tell the truth. I thought about it, and I did.... Then I realized how important it was, because Justice Fish had just done his review of the National Defence Act. Our new up-and-coming Governor General also did the report on sexual misconduct. I'm very proud to be part of that.

However, it was during COVID, and there were the testimonies, the people, the abuse and the racism that existed and still exist today. We see things like \$500 million put towards Black mental health. I don't see it. Where is it? Who has it? I travel across the country. I don't hear any stories about that, so I speak up.

Is it improving? Yes, it has to, but sometimes it goes to the extremes. We fought hard for certain things that we needed to have for the employment equity groups, and others seem to take over some of these benefits. Let's just keep it on a clean playing field. Ambassadors need to speak on behalf of some of these people who can't speak for themselves, and there are people who are serving and do not want retribution.

There are some failures, but there seems to be, only because I'm a veteran and I'm more aware.... Off the street, you're not going to get someone who will say, "Let's go, army." It's a different world, for sure, so we have to make a few more changes that way, reaching out....

I see the chair.

I'm sorry.

• (1715)

**Braedon Clark:** No apologies.... You're right on time. It's perfect.

Thank you.

**The Chair:** Do not apologize. I was gesturing to my colleague to say that there were 20 seconds left and not to question you again, but you were welcome to end your sentence, ma'am. Thank you very much.

Now Madame Gaudreau will be asking questions. She will be addressing both of you in French.

Ms. Gibson, I don't know how comfortable you are with the French language, but I would invite you to put on your little ear-piece.

[Translation]

I will speak in French to make sure you can hear me clearly in English. I want to make sure you can hear the interpretation of what I am saying and what Ms. Gaudreau is saying in the language of your choice.

Everything seems to be working fine, so that's great.

Ms. Gaudreau, you have the floor for two and a half minutes.

**Marie-Hélène Gaudreau:** Thank you very much, Madam Chair.

I thank the witnesses for joining us.

You have a wealth of experience and quite a background. We should hear from you for more than an hour.

Our time is very limited, but if you have additional information or much more detailed testimony, please feel free to share it with us. I have just one question for you before I let my colleagues continue.

We have two witnesses who are Black veterans and who have told us that, in their experience, they had not perceived any different treatment or discrimination.

In your case, in addition to being Black, you are a woman. So my question for you is simple: Are the difficulties you experienced in the Canadian Armed Forces more related to the fact that you are a woman or to the fact that you are Black?

[English]

**Door L. Gibson:** First of all, thank you for the question in French, but...only English.

As a woman, yes, I certainly did. I was the one and only chief warrant officer who was never promoted in the brigade. I was...three years, and for everybody else, it was two years to be a chief warrant officer. That happened, promotion-wise, all along. My career was basically because I couldn't move forward.

I worked at the Atlantic militia area headquarters for decades before they changed to the brigade levels. During that particular time, they weren't going to hire me in a new position because the offices were not of colour. They were different times and different circumstances.

You can invite me any time. I'll have a chat with you about some of the things that are a little deeper, one-on-one, but I understand there are five minutes here.

I hope that answers you.

[*Translation*]

**Marie-Hélène Gaudreau:** That's excellent.

I just want to say thank you. I have actually seen *Out Standing* twice. I haven't met the veteran Sandra Perron from the Pepper Pod, but I hope all my colleagues have seen that film, which is very graphic.

Thank you very much.

• (1720)

**The Chair:** Thank you very much, Ms. Gaudreau.

We will now conclude this round of questions with two more five-minute turns.

[*English*]

We have five minutes for Mr. Tolmie.

Our last round will go to Mrs. Royer.

You have five minutes, Mr. Tolmie.

**Fraser Tolmie (Moose Jaw—Lake Centre—Lanigan, CPC):** Thank you to our witnesses for appearing here today.

Doreen, I just want to say that you blew the doors off here when you walked in. I love it. It is a great name that you have.

**Door L. Gibson:** As in Door, sir?

**Fraser Tolmie:** As in Door, just blowing open the door of opportunity. I love it. I love your passion.

I want to be clear, because I need to frame this in the context of the study that we're doing right now. You have not had any interactions with Veterans Affairs as of yet.

**Door L. Gibson:** Negative, sir. I have. Somebody reached out to me after I chatted with a gentleman at the apology. Two levels down from this gentleman in Nanaimo, a gentleman from Veterans Affairs called me to see how he could help me.

**Fraser Tolmie:** Okay, so have you registered, signed up and gotten a My VAC account?

**Door L. Gibson:** Yes, sir.

**Fraser Tolmie:** Okay.

Before we move on with that, I have a very important question, because I spoke to a reservist recently in my office. Do you think it would be a good idea for this committee to do a study on veteran reservists versus full-time members who have served?

**Door L. Gibson:** Yes. They're distinct organizations. I might invite you to go to your local armouries.

**Fraser Tolmie:** I probably will; actually, I have. I won't tell you why I go there, but it's usually on a Friday afternoon.

Thank you. I think it's very important for us to understand that there are differences for reservists and for full-time members and that this would be a good opportunity for this committee to study that and see the challenges that reservists face.

I want to continue a bit on the journey that you've had now with your interaction with Veterans Affairs. They reached out to you. Why did you not reach out to them? What was the reason behind that?

**Door L. Gibson:** It was lack of trust. I didn't know anybody. I've always been told I'm a reservist, a class A reservist. It doesn't matter that I did class C or class B before. I was class A today, and no, thank you.

**Fraser Tolmie:** Initially you had trust issues with Veterans Affairs. You mentioned that your father was a veteran. Did he deal with Veterans Affairs?

**Door L. Gibson:** I was young when he passed, and the only thing I knew is that there was an income that came to my mother. I knew nothing more than that.

**Fraser Tolmie:** All right. Was part of the reason you signed up because of your—

**Door L. Gibson:** No, sir.

**Fraser Tolmie:** Was it just your own passion and desire?

**Door L. Gibson:** No, sir. I was just influenced by hanging out with friends. Their mother came home. She was a sergeant. It influenced us into going the next day.

**Fraser Tolmie:** Okay. Well, I appreciate it.

How has your interaction with Veterans Affairs been since they reached out to you?

**Door L. Gibson:** Oh, it's been awesome, I have to tell you. We've talked. I wasn't ready to deal with him. He called back. We made an appointment to call back. We had a conversation. He sent me forms. I reviewed the forms. We connected again. He told me about some of the health care practitioners in the area. I reviewed them and looked them up.

I will continue to call him, but I don't have the time and capacity at the moment to bring that up. I need space in my life to deal with it.

**Fraser Tolmie:** Yes, I understand that. I think that's great.

Your service was marred by racism, challenges, sexism and a history, but your interaction with Veterans Affairs has been good.

Have you dealt with racism in Veterans Affairs?

• (1725)

**Door L. Gibson:** Not yet.

What's the new one? The racialized persons vets are starting something. Again, they somehow reached out to me. I must have met them in the elevator or something—I don't know. Anyway, there's another journey starting.

**Fraser Tolmie:** I think they're afraid of you. I like you.

How much more time do I have?

**The Chair:** You have 10 seconds.

**Fraser Tolmie:** Okay.

Thank you so much to our witnesses for coming. I appreciate your service, your candidness and your openness to share.

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

For five minutes, we have Mrs. Royer.

**Zoe Royer (Port Moody—Coquitlam, Lib.):** Welcome, Captain Gibson. I'm so pleased to welcome you here.

I thank both of our witnesses for their incredible service to our country.

I think your background talked about your being at CFB Esquimalt in 2000. My husband was a base engineer in the early nineties at CFB Esquimalt. I don't know that your paths would have crossed, but I just wanted to share that as a bit of background and to recognize your 44 years of service. You received the Member of the Order of Military Merit medal from Michaëlle Jean, a Black woman governor general. That is really incredible and so very impressive.

You talked about having a really good experience with Veterans Affairs, but it's a more recent experience, I would say. Can you talk about some of the parts that you feel have been working really well in that experience? Can you give a bit more detail? What was the transition like from your 44 years to moving through this process with VAC?

**Door L. Gibson:** The experience in the military had its ups and downs. Something that I couldn't rely on, for example, was the medicals we used to have to take all the time. We took a medical for this, that and something else. I never trusted it. I also went to a civilian doctor, my doctor, who gave me the truth. Veterans Affairs... Since I left, I think I became... I never left sergeant major. I continue to ask questions. I continue to advocate for others. I have seen people hurt, and I see them not being successful. They don't get up in the morning, or they don't go too far from drugs or whatever addictions they may have.

You heard my introduction and who I am. Who I am is a daughter, a cousin, a sister and a partner of... That is the spirit that keeps me alive, and that's the spirit that keeps me driving. I, right now, am here because I wanted to be here in person. I wanted to see all your faces and see what you're doing about the business of these folks. We get in the military from recruits to grave. It's not to grave. It's, boom, "You're 60. See you later." I still continue to care. I came here to be in person.

I'm working with the Veterans Affairs commemorative partnership program. It has provided me a grant with the BC Black History Awareness Society on the No. 2 Construction Battalion. I have energy. That's my home; I live in Victoria. That's the energy I have. I have a performance tomorrow afternoon at CFB Esquimalt. I have one on Friday night at the Log Cabin Museum, and I have one over on Salt Spring Island at ArtSpring, talking about these men from before. That's my energy. That's my healing. The other communica-

tion or relationship building will be around how my process will go.

Again, I needed that space for my own healing, but I also need to be sure, and I need to build relations. You need to build relationships. I wish we had more time today, yes, but you can call me. You can call a veteran. You can call a Black one. You can call a woman. You can call a gay person. You can call a lesbian. You can call anybody to tell their story.

We couldn't get benefits for some folks, so the brigade commander organized some money for folks to go to the Tim Hortons. That sergeant took his troops, went to Tim Hortons and started to heal. Eventually, it became part of the brigade to help people through it. It can be done. You just have to talk to the right people to volunteer.

Thank you for paying for my way, by the way; I appreciate it. I really wanted to see you. It's my healing. You may not believe it, but it's my healing—speaking on behalf of others.

Thank you for the question.

• (1730)

**The Chair:** You have 45 seconds.

**Zoe Royer:** Ms. Gibson, you served for 44 years. What was the thing that kept you in?

**Door L. Gibson:** I just wanted to learn. I was doing new things. I would try. I cared for people. I had troops. I loved to organize parades. I cared about the leadership and the people.

**Zoe Royer:** Thank you.

**The Chair:** Thank you very much to both of our witnesses.

[*Translation*]

This concludes our study on the experience of Black veterans.

I want to thank you very much for your testimony and for your service.

With that, I will suspend the meeting before the committee moves on to the second hour and welcomes the next witnesses.

• (1730)

(Pause)

• (1735)

**The Chair:** I call the meeting back to order.

Pursuant to Standing Order 108(2) and the motion adopted on April 13, 2026, the committee is meeting on its study on the monitoring of the rehabilitation services contracts awarded to Partners in Canadian Veterans Rehabilitation Services, or PCVRS.

We are welcoming two witnesses today: Christopher Banks, retired sergeant, and Natalie Gillis, licensed counselling therapist and Canadian certified counsellor.

[English]

Welcome to both of you.

[Translation]

I would now like to invite Mr. Banks—or rather Ms. Gillis—to make her five-minute opening statement.

I'll start with the lady, if I may, Mr. Banks.

[English]

Oh, you would like to start. That's perfect.

Then, Mr. Banks, as you requested, you may start your five-minute speech.

**Christopher Banks (Sergeant (Retired), As an Individual):** I'm sorry. We coordinated beforehand.

**The Chair:** That's okay. I didn't want to be impolite to the lady.

**Christopher Banks:** Thank you.

I served in the Canadian Army for 20 years, deployed as a peacekeeper to Bosnia and deployed into combat in Afghanistan. I came home with PTSD and was medically released in 2019. I suffered from hypervigilance, a common symptom of PTSD, meaning that I was unable to let go of the extreme vigilance that kept me alive in combat.

During the decade that followed my return, I was angry, filled with anxiety, experiencing panic attacks and suicidal. Thanks to the efforts of my mental health team in the CAF and my VAC case manager, who arranged programs and connected me to a great psychologist, I was able to overcome my injury and start improving. That was until I enrolled as a participant in the rehabilitation program and was so disrespected and mistreated that it reinjured me and I became suicidal again.

You know my story already. Not only was I a witness at the last ACVA study for the rehabilitation program, not only has my brief been published as part of the study since April, but my story is the same as those of so many other veterans who have told you the same thing.

When I returned home, I used my experiences to help my fellow veterans, and for the last 16 years I have been a peer helper in the veteran community. Of little surprise, one really big recurring problem that keeps coming up is the rehabilitation program. I hear veterans lamenting that their RSSs won't return their calls or they don't understand the military or veterans, that they were told to switch providers, that they were denied the education program of their choice, that they were referred to clinics that retraumatized them during invasive and repetitive assessments and that there was a general lack of humanity.

You've heard this story too, because the same thing has been reported time and time again in the news. It's the same with so many other veterans who've sent briefs to the committee and reached out to MPs. The fact is that despite the dishonesty from the department and the contractor, veterans are complaining through official channels.

This dossier of complaints, discussed at length by VAC, was obtained through ATIP. The contractor bragged about their survey results, but it's already been pointed out in previous meetings that 732 surveyed out of 23,000 enrolments is a pathetic sample size, so even 100% satisfaction would be meaningless. Since their numbers actually indicate a 2% approval, this actually lines up with a social media analysis that I conducted for my brief, and I am very happy to answer questions about that.

Another piece of disinformation I would like to address is the assertion that veterans have a choice. It is presented to veterans as a choice, but it is a Sophie's choice: You either choose to participate on their terms or you are kicked off the entire rehabilitation program, which includes income replacement and other benefits, so it's not a real choice. It's a threat.

They also told you that they support our rehabilitation and vocational goals. They don't. You have already heard testimony that they force people through a meat-grinder towards a quick and cheap solution. Not only this, but they also artificially limit our career and income potential by forcing us into vocational programs and then into career paths based on our rank and salary at the time of our release. For many like me, this was early into my expected career.

“Sergeant” was not the last rank I thought I'd ever hold, but because that's the rank I was released at, that is the salary level they deemed would be good enough for the rest of my life. My injury didn't limit my career advancement nearly as much as the rehabilitation contract did, not to mention that many people view the military as their first career, where advancement isn't the goal—experience is. Absolutely brilliant people who will one day end up as executives serve in the junior ranks. If their injury occurs early in their career, they'll forever be limited to that part of their life.

Finally, they told you they offer rehabilitation services to survivors, but discussions with survivor advocates tell a much different story: They don't.

I beg the committee to see and accept the pattern displayed here. Those with a profit or power motive are telling you that it is a good, effective and supportive program while the veterans, families, case managers and service providers are telling you the truth. Veterans are dying because of this contract, and that's not an exaggeration.

Sadly, given the failure that was the soil turning for the Afghanistan monument and their refusal to meaningfully engage with veterans and the issues we care about, we are expecting that regardless of testimony and this committee's report, the government will ignore us to serve big business. We are all tired of hollow promises, and we are smart enough to see through them. If VAC actually cared, they wouldn't try so hard not to hear us when we speak.

Thank you.

• (1740)

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

You have five minutes, Mrs. Gillis.

**Natalie Gillis (Licensed Counselling Therapist and Canadian Certified Counsellor, Valhalla Visions Counselling Clinic):** Chair and members of the committee, thank you for this opportunity to be here with you this evening as the owner and sole proprietor of Valhalla Visions Counselling Clinic, located in Saint John, New Brunswick.

My name is Natalie Gillis. I'm a licensed counselling therapist and a Canadian certified counsellor, offering individual counselling therapy and industrious case management for military veterans, RCMP, first responders, various health and educational professionals, group home and treatment centre workers, and those who have endured domestic and interpersonal violence.

A grandfather served with Carleton and York during World War II, and a grandmother worked at the air force base in Stephenville, Newfoundland.

I was an air cadet for six years. One barricading factor for me in joining the forces was the multifactorial aftermath of an accident at CFB Borden during my athletic instructor's course, when I hyper-extended my neck after landing on my head. As a result, I've mitigated as an allied affiliate to community for roughly three decades. I'm a member of the Order of St. George, and one role I have as a therapist is assisting clients while they adjust to and mitigate their injuries.

Marie-Hélène Gaudreau, I applaud you for initiating this study.

Zoe Royer, I felt the emotion in your voice as a military spouse when you asked questions.

Mr. Tolmie, you've maintained steadfast composure throughout this process. I don't just hear you; I visibly see the magnitude of the hurt that you harbour. I want you to know that.

I'm here today because it remains to be seen that the PCVRS program facilitates the feasibility, capacity and advanced levels of aptitude to care for this complex section of human health and suffering. I'm declining reimbursement from the government for this trip, and if possible, please use these totals towards counselling therapy for a veteran. Likewise, I'm not making business claims in the future.

I drove here from New Brunswick, to echo previous statements and testimonies, to supply additional context followed by suggestions, because I believe in showing up for the team. For decades, the veteran community has been experiencing a spiritual famine and psychological draught.

My colleague Dr. Alisha Henson and Clea, who presented here last week together, are two of the many individuals I've had an irrefragable pleasure of working with. To substantiate this claim, I note that Alisha completed training and then rushed here to make an appearance. Moreover, Clea declared during their students' video recorded presentation, which has been on McGill's website since last summer, that we are not throwing PCVRS under the bus.

If a veteran throws you the ball to let you into their world, you are Babe Ruth hitting a grand slam. Modern research, ethical practices and informed consent emerged after the barbaric atrocities of World War II, during the Nuremberg trials. As a succession from that, if veterans are being forced to switch clinicians, that is not autonomy, and the system is stripping them of a critical life support while wilfully interfering with someone else's sanctuary. I'm not concerned just about the need for a national standard; I'm worried about other staff who might not be sufficiently trained. I thank previous witnesses for asserting how abrupt termination of a therapeutic relationship is damaging.

I've come with reference material on how ethical closure with clients should be conducted and the instances when immediate cessation of services is to occur. To share the load, others could perhaps supply supplementary research, ethical codes of conduct and standards of care. I have some other topics of interest to share as well, regarding readiness for change and the military culture.

In support of Dr. Henson's call, I say that at heart you need a fearless baseline of maturity, resilience, applied emotional intelligence, critical thinking skills, objectivity, the absence of an adversary lens, the patience of Job and demonstrated life experience to complement the therapeutic alliance with a veteran. Priorities delay my updating my LinkedIn profile and website, but some lines of employment that have developed grit for me over the years were doing human services work, safely cleaning hospitals and clinics, working with some of the most challenging behavioural cases in the province from the Restigouche hospital, cofacilitating narrative therapy to court-mandated clients and, in other capacities, working with those along the spectrum of the sex offender registry.

My grandfather, who served in World War II, and his wife were in the hospital together before they both passed away two weeks apart, three weeks before Christmas in 1992. He had a rare form of blood cancer, and she had suffered from two strokes. I remember being witness to the love he still had on his face when he tried to talk to her. She refused to look at him, out of embarrassment due to her disfigurements and inability to speak. Anyone working with veterans and their families needs a required competency beyond something called “cognitive empathy”.

- (1745)

Sealing the envelope, veterans require retention of connections, tenacity, stamina and insatiable will until the very end from us.

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

We will now start our first round. There will be six minutes for each member.

I believe, Mr. Richards, that you are up for six minutes.

**Blake Richards:** Thank you, both of you, for your contributions today. Thank you for your service to the country and for your service to veterans.

I have a lot of questions for both of you. I'd like to start, though, with Mr. Banks.

You made a brief mention of a concern I've heard from a lot of veterans about the Afghan monument groundbreaking ceremony. I wanted to give you a minute or two to elaborate on that, if you'd like, because I've heard it from a lot of veterans, and I think it's important that this committee hear it.

**Christopher Banks:** Thank you for the question.

A lot of this is insulting because, first, we have not forgotten the selection scandal. We know that this was not the monument that was selected by the selection committee. This was the monument selected by the government, and it's a bad design.

The kit crosses are not significant in military culture. They're two pieces of wood that we slap together to hang our stinky, sweaty gear on at the end of the day. They have the cultural significance of a hockey bag. What that should have been are the rifle, boots, helmet and dog tags, which are symbolic. I understand that the artist went to Afghanistan on a professional development trip, but he didn't understand what he saw, apparently. It's sad, because that's now the monument that's going to represent a war in which thousands died, with 158 Canadians among them.

The soil turning was another scandal on its own. I was there, but it was as though they didn't even want us there. There were no invitations sent to veterans. I found out about it through the families. Most families weren't invited, and we're talking about families of those who had fallen. They weren't invited until two weeks before the soil turning. At that point, only those in the national capital region could attend. For the seating arrangement, we were put at the back.

Yes, there were veterans who were included as part of the ceremony, but they were not in any way the focus. They were tokens. I'm sorry for those veterans, because it should not have been that way. Not one veteran was invited to the microphone to speak, but

three indigenous leaders were, and multiple politicians were invited to speak. Not one veteran was invited to the microphone. Not one veteran was highlighted in the stories that were shared. Not one fallen soldier was recognized by name.

Since then, there's been nothing from the department: no apologies, no acknowledgement and no “we'll do better for the unveiling”, just silence and patting themselves on the back. This is not what veterans deserve.

- (1750)

**Blake Richards:** I thank you for your courage to share that, because I know it's not.... I know that many veterans talk about the repercussions they're afraid to face when they speak out about things that have gone wrong. I just really hope that it's heard. I hope it's listened to, and I hope they do better next time. I hope there is an apology, frankly.

What do I have for time?

**The Chair:** You have two minutes, sir.

**Blake Richards:** I'll try to see if I can give you both a chance to answer this question. You talked a lot about some of the issues.

I want to hear from you, Ms. Gillis, from a clinician's perspective. I know that you've worked with other clinicians in terms of mental health. Could you maybe summarize what you see are the on-the-ground realities that are being faced with this PCVRS contract and what should be done about it?

Mr. Banks, from the veteran's perspective, what should be done to improve this situation?

I'm going to start with you, Ms. Gillis.

**Natalie Gillis:** One thing I could probably echo is what my colleague Dr. Henson mentioned last week: a national standard for clinicians. One of the things that I'm concerned about is veterans being stripped from their care providers, which is essentially a rupture, and I have a lot of information for the committee to review that supports how very destructive that is.

Some of the training that's out there right now is fluctuating, and there are different regulations between the provinces. Not every province is regulated, so that's also something that needs to be looked at. Regarding standards of care for psychotherapy in general, the regulated provinces are Ontario, Quebec, Nova Scotia, P.E.I. and New Brunswick. British Columbia and Alberta are trying to make way with regulated practices, and this is very important, because at this point someone could call themselves a counsellor, and if there's no body to follow for regulations, that's a big issue.

Still pertaining to mental health, I want to say something about training and education levels. She spoke of years of supervision needed. You need to have grit to work with this demographic. It's indisputable. When I think about the young people who are graduating with social work degrees at 21 years old in general, and they're going in to take children away from families who have weapons or anything going on there, if they don't have supplementary life experience to deal with the energy that comes with that and the repercussions of direct, indirect or vicarious trauma, I'm worried about those people too.

When we're dealing with people who have a lot of complex health circumstances that may or may not be officially detected yet, a full medical workup should be explored before entering into a rehabilitation program. I don't know why that's not happening, because if people are walking around with traumatic brain injuries or this, that and everything, it's a disservice.

• (1755)

**The Chair:** Thank you very much, Ms. Gillis.

I would now like to invite Madame Auguste to take the floor.

Madame Auguste, you will be asking your questions in French, so I will invite our witnesses to put their earpieces in.

Madame Auguste will be addressing both of you in the French language.

[*Translation*]

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

**Tatiana Auguste:** Thank you very much, Madam Chair.

I'd like to begin by sincerely thanking you, Mr. Banks, for your service and dedication to all veterans. What you are doing is truly admirable. You are very involved with the Royal Canadian Legion. You participate in many activities and events related to veterans.

As a very involved veteran, could you enlighten us and give us a little more detail on the issues with Partners in Canadian Veterans Rehabilitation Services that veterans are telling you about? Can you tell us which issues come up most often in your discussions?

[*English*]

**Christopher Banks:** Part of the biggest problem is that the system is not robust enough to take on such a complicated demographic. Veterans have unique needs, and the RSSs and the contractors seem in no way adequately prepared to deal with the level of trauma that we're bringing in.

I don't want to take up too much of your time, because I know you want to ask other questions, but one of the biggest problems is allowing the contractor to have control over our benefits. They are here to provide rehabilitation services, not to determine a veteran's rehabilitation goals or overrule a medical professional. There is no way that the system can work under those conditions.

Allowing a contractor to make a decision about which direction the rehabilitation should go should not fall on the RSS. It should fall on the medical professionals.

I mentioned in my opening remarks that when I went through the process, they told me what I was going to do, and there were no ifs, ands or buts about it: If I didn't do it, I would be out of the program.

If they have that level of power, then they're not really interested in helping. They're interested in getting us through a system, and there's no accountability. We need to have some level of accountability. If they're going to violate our rights, violate the terms of the contract or outright lie about the conditions of their client base, there need to be real financial and criminal penalties.

[*Translation*]

**Tatiana Auguste:** Thank you very much.

Ms. Gillis, I'd like to ask you a question similar to the one I asked Mr. Banks. Based on your professional experience, what issues related to Partners in Canadian Veterans Rehabilitation Services are really recurring among veterans?

[*English*]

**Natalie Gillis:** I can probably give an example.

Sometimes when I do get referrals, they may request that I do EMDR with them, but if I haven't done my homework to gather further documentation completed by other health clinicians before they enter the program, I could do a lot of damage. Some trauma interventions require emotional regulation before starting a more deeply rooted therapy intervention.

There are all sorts of steps you need to take before implementing trauma therapy. You have to make sure that your veteran is, ideally, situated as comfortably as possible. That includes chronic pain and whether they're sleeping. I am notorious for asking every client, when they first come in, "How are your medications? Are you feeling motivated to take them? Are you drinking?" I don't ask them if they're drinking to accuse them of anything. I just keep encouraging them by saying that it's important for me to know so that we can keep on track, to the best of our ability, and make sure there are no mishaps, and so that I can track their health that way—everything from sleep to retention. If people can't focus, therapy is not going to work. They have to be situated as comfortably as possible. I will beat that to death.

When it comes to PCVRS, it feels very pressured. When they're constantly going to rehab—rehab here, rehab there, driving everywhere.... I had this conversation briefly with Dr. Heather MacKinnon, and she even echoed that there is no time for them to recover, and it doesn't make any sense. They're being run through this PT program, if you want to think about it that way. They're not in the military anymore. They need a break. Realistically, they're not going to heal and go back to school or work if they're being pushed beyond their limits and it's causing further injury. I don't understand where this methodology is coming from, unless there are ulterior motives.

When we think about the statistics of everything, too, we have to be very careful about how much we might be cheerleading the positive numbers, because in general, as ethical providers, we have to remain cautionary. We can be optimistic, but we have to be realistic and objective about how things are being assessed.

The internal validity of the program is still a big question mark over my head. At the same time, I'm not condemning the program, because I have heard of some genuinely good experiences. However, I don't want to have that misconstrued in any way, because there is still a lot that we're seeing that is not representing the best interests of these clients.

• (1800)

[*Translation*]

**Tatiana Auguste:** If I understand you correctly, you think those aspects need to be improved, but you also see that some people have truly had a good experience with that program.

[*English*]

**Natalie Gillis:** With the positive experiences, again, it's still a very small number, from what I'm seeing. I want to clarify that. I don't want anybody thinking this is getting too far ahead of itself, but I will always honour those genuine experiences that people have had, because that's what we want. When the majority is still facing all these catastrophic experiences, I think we're still trying to find that balance.

When we're assessing a program, even in the unpublished manuscript that Dr. Henson and I put out before we did the McGill thing, we have to be very biased and find balance. It's the right thing to do.

[*Translation*]

**Tatiana Auguste:** Thank you very much.

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

[*English*]

Madame Gaudreau will address you in French. I want to make sure you are prepared.

[*Translation*]

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

**Marie-Hélène Gaudreau:** Thank you very much, Madam Chair.

I would like to point out that we are conducting this study not only because it's important, but also because the situation is not perfect. If it were, we wouldn't be here. It doesn't have to affect 10,000 or 75,000 people; even if it's a problem for one person, that's already one person too many who is suffering from this situation. I'm a little tired of hearing claims that things are going pretty well. It's great if that's the case for some people, as that's what we want, but we want things to be good for everyone. You're important.

My question is for Ms. Gillis.

The report we discussed last week states that this therapy may even be harmful to veterans. Is that possible?

[*English*]

**Natalie Gillis:** Can you clarify which therapy?

It's my memory; excuse me.

[*Translation*]

**Marie-Hélène Gaudreau:** I'm talking about the program.

[*English*]

**Natalie Gillis:** It's the program. Okay. I'm sorry.

Therapeutic rehabilitation should be focused around what people are capable of doing. I collaborate with therapeutic clinics to keep on top of our clients' success rates. When you have a teamwork-based set-up, the veteran feels better. If they're having panic attacks before they're going into their sessions or anything....

I've had to do a lot of work with my folks who have astronomically high rates of physical pain. They're scared to walk. They're scared to do anything.

I've worked with vets who've been out for years, and then they start coming to me. I have to first get them used to coming to see me. They're pacing back and forth in the room. Until they get comfortable doing that, you're not going to get therapy done. I'm sorry. I'm just going to call it.

Over time, I build that team with them: physio, massage, chiropractic and everything like that. They can start to settle into things, and they feel more confident, I want to say, doing the movements that they need to do with physical rehab.

If you don't have a team that's there for them, forget it. You're not going to get success or anything. I think that needs to be considered, again, on top of everything else.

They're tired. They're exhausted, and that's not rehabilitative. It's destructive. It causes further injury.

• (1805)

[*Translation*]

**Marie-Hélène Gaudreau:** We need adaptability. We need to humanize and understand others.

I think we need to do some soul-searching, particularly in light of the report we were told about. I was speechless when they even quantified and qualified what it would cost to make a change. As I said last time, it's a matter of political will. It's not because we don't have the money or can't reinvest. We're precisely at the moment when we need to reflect, take action and change course if necessary. There are indeed positive experiences, even as we discuss what's not going so well.

I would like to continue by talking about transparency and trust. I have a question for Mr. Banks on this.

Mr. Banks, you may not have read the report, but it mentions a lack of transparency that undermines trust in the PCVRS program.

You also talk to other veterans. Based on those exchanges, to what extent has veterans' level of trust in the program become a therapeutic issue?

[English]

**Christopher Banks:** I'm sorry. The last bit of the translation came in very quietly. I couldn't hear it.

[Translation]

**The Chair:** Ms. Gaudreau, can you repeat the last part of your question?

**Marie-Hélène Gaudreau:** Yes.

Based on your discussions with veterans, to what extent has trust in Veterans Affairs Canada and in the program become a therapeutic issue in its own right?

[English]

**Christopher Banks:** Part of the trust issue is that this is a contract that has been going on for four years under PCVRS and eight years under the previous contract holder, CVVRS. Everyone has already seen just how well this program isn't going.

Everybody has made the connections among the current contract holders of Lifemark, Loblaws, the bread price-fixing scandal, greedflation and mislabeling Canadian products at the grocery store. Everyone knows who these people are and everyone knows their reputation. It's Canada-wide.

When veterans see that, they'll say, "These guys?" They're not going to have the trust. They never will.

[Translation]

**Marie-Hélène Gaudreau:** I have one last question. It concerns the professionals working in this program, including therapists.

I heard a bit about this from you, Ms. Gillis, but is specific training required or can anyone who is a qualified therapist work with these individuals?

[English]

**The Chair:** You have 40 seconds.

[Translation]

**Marie-Hélène Gaudreau:** However, you must take into account the 30 seconds I lost owing to the interpretation, Madam Chair.

[English]

**Natalie Gillis:** When it comes to specialized training, I believe there needs to be something much stronger than the modules offered with the PCVRS training.

When I first signed up—back in 2002, I believe it was, before I went out on my own—there were four little modules to get oriented about the military demographic.

When I talk to people or just colleagues in general who are curious about getting involved with this demographic, I say to them that they can't just read things. They can't just study it. They have to go out there, volunteer and get to know them for a minimum of 10 to 15 years. You have to have the steadfastness to deal with the energy these people come with. I'm not kidding.

We have to think about vicarious trauma, direct trauma and everything that can be a result of that. If people who have good hearts are going in there and they're not prepared, if someone is having a bad day, they're going to get traumatized again. This is what I was

speaking to earlier. I'm concerned about anybody working with this demographic who needs a lot of support. I'll put it that way. It can be very damaging to other people. We also have to be considerate about transference and counter-transference. Maybe I can get into that a bit later.

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

I'm on the second round, with Mr. Tolmie for five minutes.

**Fraser Tolmie:** Thank you to our guests.

Ms. Gillis, thank you for the comments in your opening statement that recognized the intent and why we're here.

I'm going to leap off from that to express some disappointment I've had recently. I've seen military members paraded out in front of the media. When it came to the Snowbirds announcement, they were basically told that they're going to lose their jobs next year. We treat our serving military members by telling them that they're losing their jobs, and then we go to the monument—as Mr. Banks recently shared—and we have no recognition.

These guys just get things wrong. Parade our veterans out for the monument, but don't make an announcement that they're cancelling the Snowbirds. They're failing to recognize the importance of what they mean to Canadians. We don't have the monuments here that they have in Europe for spilled blood. Our only touchstone is the Snowbirds.

I'd like to get your thoughts, Mr. Banks, about the monument, about what we could have done better and about how we can treat our military better.

● (1810)

**Christopher Banks:** First, I'd like to speak briefly about the Snowbirds. These things are not happening in isolation. The Snowbirds, the monument, everything that is being pushed with the honours review, mental health for families and all these issues are not happening in isolation.

There is a social erosion happening, in which we're losing the social fabric that keeps us all together. Contract after contract is not going to fix things if we don't have the community to bring us together—the monument, Snowbirds or whatever else is next on the chopping block.

**Fraser Tolmie:** Thank you for your answer.

In your opening testimony, you held up a document. I'd like you to explain a bit more and go in-depth about that document, as well as to share a little about the complaints that are being brought forward but are being ignored.

**Christopher Banks:** Just so I understand, was it the dossier of complaints or the social media analysis? They're both full of complaints.

**Fraser Tolmie:** Let's hit both of them.

**Christopher Banks:** Listening to earlier testimony on this study, it became pretty apparent to me that there is a knowledge gap in what is said and what is expressed within the veteran community. On our own, we don't put it out there. We keep it all to ourselves.

In order to address that, I went online. I ran a query and analyzed the results. There were 1,600 comments and 77 posts. A supermajority of them were negative, even the ones in which someone was organically saying, "I'm asking for help." When you start going through them, at the end of the appeal, people say, "This is bullshit. How can this be happening? Is anybody else going through this?"

There are dozens and hundreds of comments saying, "Yes, me too. Yes, that's exactly what happened to me. Strap in; it's going to get worse." That's one of the comments I received years ago when I was going through this process. I was at the end of the rope, and I reached out on social media, asking for help. One comment I got was, "Strap in; it's going to get worse."

For the social media analysis, these are the sentiments of the veteran community. I've included a lot of the public facing comments, but not one of the private group comments.

The other document—this one was obtained through ATIP—is a four-year period of complaints VAC said it did not receive. It tracks in the dossier email after email discussing, at length, the comments VAC said didn't exist.

**Fraser Tolmie:** Thank you.

Ms. Gillis, I'm going to run out of time, but you talked about the importance of a relationship with veterans. What I hear is that veterans are being forced to have that relationship with their caregiver broken.

What are your thoughts on that?

**Natalie Gillis:** I think it's very inhumane. I'm glad that I stopped off at Staples earlier today. I've supplied the committee with just one of many that's available. There are 119 pages here, describing the standards of practice with the Canadian Counselling and Psychotherapy Association. It goes through professional conduct, saying that we have to take care of ourselves. I also have a termination of psychotherapy. There are many things you can go through here that were published last year.

• (1815)

**Fraser Tolmie:** Are we going to have copies of that?

Thank you so much.

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

Next, we have Mr. Fanjoy for five minutes.

**Bruce Fanjoy (Carleton, Lib.):** Thank you. Sergeant Banks, it's good to see you again. You talked about trust and the lack of trust.

**The Chair:** Mr. Fanjoy, I have to interrupt you, and we'll stop the time.

Can you put your microphone down a bit? There is a sound issue.

We'll suspend very briefly, Mr. Fanjoy, to have someone reach out to you to make sure your sound is okay.

• (1815)

(Pause)

• (1815)

[*Translation*]

**The Chair:** I call the meeting back to order.

[*English*]

I'll ask Mr. Clark to go ahead and start his round of questions for five minutes.

**Braedon Clark:** Thank you to our witnesses for being here this afternoon.

Mr. Banks, thank you for your service and your obvious passion for the veteran community. I think it's truly admirable.

You made a comment during the previous round of questions that so many of the issues you see are around trust. I think you said that trust will never be there under the current model. I'm wondering, as trust is a very.... The saying is that once you lose it, it's hard to get it back in anything in life. From our perspective, you've laid out very well this afternoon what you see as the problems—and pretty entrenched problems, I would summarize.

What things do you think we should be doing, when we start to inform our report? What do we have to do better to help people like yourself and other veterans across the country?

**Christopher Banks:** I'm assuming that we'll go ahead with the program in the future. We're not going to put all the responsibilities back on Veterans Affairs.

In that context, it really needs to be spelled out in the language of the contract what the responsibilities are and what time frames are acceptable, because they're way too tight. What powers will the RSS and the executives over at the contractor have over veterans, over our benefits and over our case management?

There can be no provision that allows VAC to overrule a medical decision, ever, under any circumstances whatsoever. It doesn't matter if continuing the program is going to cost 10 times what it would cost the next veteran. VAC is here to provide rehabilitation services, so either do that or don't.

**Braedon Clark:** Something that's come up in all the studies we've done while I've been on this committee is that the veteran community is incredibly diverse. I don't mean that just from a gender, racial or age standpoint, but from experience.

You have combat experience. You have overseas deployments. Other veterans wouldn't, or maybe they were in a different service.

How do we create a system that is responsive to all of those groups?

That's a big challenge. I know that's a difficult question. How do we do something that is able to effectively help somebody who served tours in Bosnia and Afghanistan, like you, and somebody who perhaps was stationed here at home for the vast majority of their career?

• (1820)

**Christopher Banks:** Honestly, it really shouldn't make any difference whatsoever whether we're talking about a tier-one special forces operator, a combat infantry soldier or somebody who just got hurt in training. That happens thousands of times a year. It doesn't matter what their experience is. What matters is the injury and getting them better. Nothing else matters—nothing else should matter.

**Braedon Clark:** I appreciate that very much. That's a very helpful answer for us when we're thinking about how we craft a system. If we have to create something that's applicable across the board, versus something that might be applicable to 700 different types of people, the latter is more difficult. I appreciate that.

I think there's about one minute and 20 seconds left. I'll hand it over to Ms. Royer to ask a question as well.

**Zoe Royer:** All right, here it goes.

Sergeant, thank you very much for your incredible service.

Ms. Gillis, Sergeant, you both make incredible witnesses. I'm not going to do that justice. I don't want to at all diminish your incredible experiences and your contribution.

I'd like to know, Ms. Gillis, if you were to design the system from the ground up, what you would consider a very effective rehabilitation program. What would it look like?

**Natalie Gillis:** First, have VAC case managers truly assess a veteran to see if they're ready to be rehabilitated. That's not rocket science.

You're not going to expect somebody to jump overseas, back in Afghanistan times, if they're not sufficiently trained. When we're thinking about doing all these other things with people, it doesn't make any sense. The way I describe it to my clients is that when we think about doing the mental health piece, it's almost similar to the medical system. Is somebody ready for a surgery? How much work do they have to do to prepare? Do they need to lose weight? Do we have to do this? Do we have to do that? Are they going to survive the surgery? Is it the right time for it?

It's the same thing with mental health, going back to school or any of those things. I don't know why this isn't being brought to the table that way. I think that would be very effective.

**Zoe Royer:** Is that whole medical workup the first piece? The training and supervision, but....

**Natalie Gillis:** It's part of it.

I'm sorry, but I don't have time.

**Zoe Royer:** I know there will be time for written statements after, so please, if you could....

**Natalie Gillis:** Certainly.

**Zoe Royer:** Thank you.

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

[*Translation*]

We'll go to Ms. Gaudreau for two and a half minutes.

**Marie-Hélène Gaudreau:** Thank you very much, Madam Chair.

I'll quickly address the witnesses.

You have given us many recommendations, and that's what we want to highlight in our report.

My understanding is that it was very easy to implement standardization and centralization and to opt for a model that follows the established guidelines. Adaptability doesn't seem to be a factor. There's also the matter of training. The list is already very long, but I'd still like to know if you have any other recommendations.

For example, I understood that there would be a major change to be made regarding case managers. Could you elaborate on that a bit more, Ms. Gillis?

[*English*]

**Natalie Gillis:** The changes for which...? I'm sorry, but the translation....

[*Translation*]

**Marie-Hélène Gaudreau:** I'm talking about case managers.

[*English*]

**Natalie Gillis:** Oh, case managers....

It would be beneficial if there were a process. If people are interested and realistically capable of going back to school, that has to be done. You can't tell somebody to go and skate if they don't even know how to put their skates on and tie them. That's setting people up for failure.

When you do that to a veteran...I don't think we need to have a discussion about that.

[*Translation*]

**Marie-Hélène Gaudreau:** What about you, Mr. Banks? I know you have a long list of recommendations that you want to share with us.

[*English*]

**Christopher Banks:** I've said pretty much every recommendation that I have.

One thing that I would like to echo, from Ms. Gillis, is the timing and the assistance part of the process. When I was sat down and put through this process, it was the absolute worst time in my life. I was still very injured. I was very close to killing myself, and here was a stack of paperwork. I was good at administration, but I could barely wrap my head around some of the questions they were asking me. When I asked for help, I was told, "No, get it done. You have until this date."

There's top-down direction happening, and what we need is bottom-up. It should be needs-based, not financial incentive-based.

• (1825)

[*Translation*]

**Marie-Hélène Gaudreau:** Thank you very much. What you're doing is really important. Veterans are watching us.

Thank you.

**The Chair:** Thank you very much, Ms. Gaudreau.

[*English*]

For our last questions, we have Mrs. Wagantall for five minutes.

**Cathay Wagantall:** Thank you so much, Chair.

Retired Master Corporal Natalie Gillis, thank you for being here and for bringing so much heart and knowledge to our study.

You submitted a brief to the committee that was supported by 51 frontline mental health clinicians highlighting the issues with PCVRS. That's what we need to hear.

Can you please summarize the on-the-ground realities for service providers under the current system and why something needs to be done immediately?

**Natalie Gillis:** I'll say this. The first time I met Mr. Banks, we ran through a three-hour coffee session just talking about things, so I can't capture everything in a couple of minutes, unfortunately.

Something we're still seeing is that not everybody's getting referrals per se. I'm an out-of-network provider, and I've had good and bad experiences. I will say that. I can compliment the good experiences. I've given feedback to people's supervisors, I was so impressed with them. However, on the other end of it too, I've seen deplorable behaviour. I've had to do multiple crisis interventions. There's just too much to talk about. We don't have the time today.

**Cathay Wagantall:** If you want to give us more information on that, that would be great. You also said something that really caught my attention when you were talking. You said, "when I do get referrals". What are you referring to there? What does that mean?

**Natalie Gillis:** Something we had talked about in the qualitative data assessment, the unpublished manuscript that was submitted to you folks before we did the McGill publication.... It was focused on how many people.... I have this data here somewhere. There were 94 people who participated, and 51 completed. We're not sure why not everybody completed it. An assumption could be that they don't want to get in trouble. There's a fear for clinicians as well. That's the reality of it.

Out of that little study, 50% were contacted to become an affiliate of PCVRS. There were 24 external providers like myself. I want to say that 62% received referrals; 11 people had two clients, and two clinicians had 16 or more.

There's a really interesting thing going on. I know that one client was sent to me for a referral for therapy, and then I was told by someone that I apparently didn't exist in the system when I do. There's this shifting back and forth kind of thing. Again, I can't say for sure, because maybe I'm registered under my clinic name, and sometimes that gets lost too, but it's another question.

**Cathay Wagantall:** We have heard about this, though. There seems to be a choosing of winners and losers as to who can be part

of the system. Do you think the fact that you have a certain perspective on this whole thing is impacting your ability to get referrals?

**Natalie Gillis:** Personally, I'm not concerned because I have a good caseload. I have some awesome clients. When it comes to people who have a caseload more within the PCVRS program, it's been described to me that their clients are being poached from them. Veterans are saying this. I can't speak on behalf of them, because we have to stay in our lane as clinicians, but I've had managers of clinics volunteer the information that one of their clinicians lost five clients to PCVRS. The veterans are absolutely distressed about that.

**Cathay Wagantall:** I'm going to ask you this, and I would like to ask Christopher as well, if we have time, to give a quick response to this question.

PCVRS is being analyzed. Their money is ending in December, so the decision needs to be made. I've heard that it's already been made. I hope that's not the case. For a true independent review, what is the role of veterans? From my perspective, they should give the majority of the feedback. What's your view on how that should happen? I think you would have a lot to offer as well.

• (1830)

**Natalie Gillis:** It's such a sensitive topic, because, if they were to get involved when they're already dysregulated, that can be troubling. There are many avenues by which people can report grievances, complaints or anything like that. They're retelling their story.

**Cathay Wagantall:** You're saying that there are avenues for them to report grievances. We hear that there aren't. How are they...?

**Natalie Gillis:** Let me clarify. I want to say that there are different departments. If they have issues with PCVRS and/or VAC, they can go to the ombudsman. They can report to VAC or anything like that.

Essentially, a veteran needs to be ready to tell their story.

**Cathay Wagantall:** Okay.

Chris, you have 10 seconds, buddy. I'm sorry.

**The Chair:** Actually, you have two seconds, Mr. Banks.

**Christopher Banks:** VAC and PCVRS need to take a back seat. Veterans need to be a big part of the group. Training for RSS qualifications, survivor benefits and client experience need to be the big things that are talked about. I would like to volunteer.

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

I will offer the last five minutes to Mr. Fanjoy.

Mr. Fanjoy, if our interpreters tell us that it's a no go, I will offer someone on my right those five minutes. Say a few words before you start asking your questions, please, and we'll see if this works.

**Bruce Fanjoy:** Okay.

I want to thank both Sergeant Banks and Ms. Gillis for joining us here today.

[*Translation*]

**The Chair:** I'm being told that it's not working properly.

[*English*]

I would like to invite Mr. Clark to ask questions for five minutes.

**Braedon Clark:** Thank you very much, Madam Chair.

Thank you, again, to the witnesses for their presence here today.

Ms. Gillis, you practise primarily in New Brunswick. Is that right? However, is your client base mostly in New Brunswick, or is it national? What kinds of groups are you dealing with? Are they mostly local or elsewhere?

**Natalie Gillis:** I would say that it's mostly local.

Now, with tele-counselling, you have to make sure you're registered with the province, because there are different bodies and things you have to sign up for, ethically. Most of the crew I deal with right now.... I serve people from the St. Stephen area right to Moncton. Really, it's the base bottom of New Brunswick, where there is, I want to say, a deficit in services.

I've done networking locally for over 20 years and have put together a list of safe places that I've already receded for vets—"This group is good here, and that physiotherapist is good there"—so they don't have to be stressed out as they try to find somebody. Community is important for them.

**Braedon Clark:** We've heard—I can't recall if it was in this study or another one—cases of veterans who.... It's a big country, and services are not distributed equally across it. We've heard of some people from either rural Saskatchewan or rural Alberta having to drive two or three hours to get to their appointments.

Do you see that as well, in your experience? What can we do to avoid this, so people can get services as close to home as they possibly can?

**Natalie Gillis:** The hardest thing, I'll say, is just the literal landscape of New Brunswick. Some of them live in the woods, so they have to travel into town. That's not something we can really change. Again, I have clients who live out of the city, and I'm central and can meet their needs that way. For the ones who are closer to town, it's not as stressful, because it's a hop, skip and jump to where they have to go. Other than that, it's so hard. If we think about where the clinics are with training to work with vets....

I don't like referring my vets to anybody who's not veteran-oriented. They need to be able to read between the lines if somebody is not as forthcoming. Sometimes they're accused of lying when they're actually just masking. No. You have to understand this person's science. You have to sit with every person you're dealing with. What stage of health are they at? How good are they at communication? Do they even know what they're feeling? I do the feel-

ings-wheel workbook thing. We have the six little things in the middle—the basic ones like “angry”, “sad” and all that stuff. I explain it: “Now we're going to learn about extended family with all the other, well, descriptors”—if we want to call it something. When I think about vets advocating for their needs.... If they can't verbalize because they've been shut down for decades due to authoritarianism, let's be realistic. You ain't going to be talking. You're just not.

When it comes to the cognitive empathy I was talking about earlier, you can understand how somebody is feeling, but you have to really internalize that and sit with the veteran. “What's up today?” If they feel they're being pushed to go somewhere against their will, it's not good. That's not healthy. That's not implementing and encouraging healthy communication and relationships. That's not rehabilitative.

● (1835)

**Braedon Clark:** You mentioned, Ms. Gillis, the term “veteran-oriented”. I think you were just touching on those points. That's something we've heard over and over again across the studies and across all the subject areas we study here at this committee. What in your mind is the number one attribute of someone who is veteran-oriented? What is the number one thing that you think is essential to make sure they're actually meeting veterans where they are and helping them in that unique way?

**Natalie Gillis:** I could probably branch off from what I listed earlier. You need to have that baseline maturity and not be egocentric or combative. They've had enough of that. You have to be their safe haven. I have my clinic set up like a modern farmhouse. I have them contribute to it, because it's their space. They're coming to us. It's not about what we want for them.

The Veterans Transition Network training that's available is free. Oliver was here several weeks ago. I was glad he was interviewed, actually. I don't know why this stuff is not being utilized. VTN has been around for 20-plus years. It makes no sense. That's just one of the resources out there.

Atlas has free things. I'm signed up for that. I'm always poking around at different education things. I don't know why this is not being utilized. It's free. We love free things; come on. There's a cost to continuing education in general for keeping your licence. You have to keep up so many hours.

When I'm tasked with crisis management, with everything else going on, I'm the janitor. I do everything. When I work for myself, I'm tired. When I don't have a team working with me, it doesn't work.

**The Chair:** On that note, thank you very much.

**Braedon Clark:** Thank you very much.

**The Chair:** I would like to say thanks to both our witnesses today. Thank you for your service and your continuation of services.

Before we adjourn, the clerk has circulated a budget for the study of the experience of Black veterans for an amount of \$6,750.

Is it the will of the committee to adopt this budget?

**Some hon. members:** Agreed.

**The Chair:** Thank you.

[*Translation*]

Our next meeting will be held on Monday, June 8, from noon to 1 p.m. As the new Governor General will be sworn in earlier that morning, we will meet for one hour to hear from witnesses as part of our monitoring of the rehabilitation services contract awarded to PCVRS.

The meeting is adjourned.

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