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**Thursday, November 17, 2005**

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**Chair**

**Mr. John Cannis**

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## Standing Committee on National Defence and Veterans Affairs

Thursday, November 17, 2005

• (1635)

[English]

**The Chair (Mr. John Cannis (Scarborough Centre, Lib.)):** Colleagues, I'll call this meeting to order.

Before introducing our guests, I'd just like to say to everybody that, as requested through a motion put forth by the committee, this meeting is a follow-up to the meeting we had in June with the Departments of National Defence and Veterans Affairs at that time.

We all recall, Ms. Ellis, that you were with us at that time. Certainly it's an issue that has been discussed since then, and it continues to be discussed. We have received communiqués from various individuals, including Mr. Connolly as well, with another article.

With that, I'd like to open up this special meeting of the Standing Committee on National Defence and Veterans Affairs. Pursuant to Standing Order 108(2), this is a briefing session on Agent Orange. We have witnesses with us from the Department of National Defence. To start, we have Ms. Karen Ellis, the assistant deputy minister for infrastructure and environment.

We'll follow the same procedures as at a normal meeting. That is, no more than ten minutes for a presentation, Ms. Ellis, and then we'll go into questioning from the members.

The first order, I'll remind everybody again, is seven minutes between questions and answers. This committee, I must say, has been noted to be very flexible in terms of its time to members, but with your indulgence, I will try to be not as flexible today, so that we give everybody an opportunity. I hope colleagues will respect that. You normally hear a little signal that we have here when the time is reached. So if I'm a little bit strict today, you know the reasons why.

With that, Ms. Ellis, the floor is yours.

**Ms. Karen Ellis (Assistant Deputy Minister, Infrastructure and Environment, Department of National Defence):** Thank you very much, Chair.

[Translation]

Thank you, ladies and gentlemen. I am very pleased to have the opportunity to return to the Standing Committee on National Defence and Veteran Affairs to provide you with an update of the work we have advanced regarding the herbicide spray program at Canadian Forces Base Gagetown.

[English]

I would like to emphasize that the work we have undertaken does not only cover the testing of Agent Orange, Agent Purple, and other herbicides that took place over four days in May 1966 and three days in June 1967. We have in fact gone far beyond those test periods in our work. We are looking at researching all the herbicides used at Camp Gagetown for defoliation between 1952, when the base was established, and the present day.

When I came to the committee in June, the focus was to talk about the testing, and as I'm sure you're all well aware, we listened immediately to the concerns raised about overall spraying and we have responded to them.

The primary issue is the public concern regarding human health and environmental impacts of herbicide use at CFB Gagetown over those 53 years. Resolving this issue is a priority for the Government of Canada, and that is why we have developed a comprehensive, credible, and responsible plan of action and a timetable that will determine the facts, based on strong and objective science and credible evidence.

That being said, we have to face timeframe realities, and our fact-finding approach is going to take at least eighteen months to do properly. We are committed to doing this work well, so that it can stand scrutiny and so that the policy advice we formulate from this work will be solid.

[Translation]

Transparency and citizen engagement will be critical. And we must take into account the various stakeholders, the decades of historical documentation and the developments in our understanding of the effects on human health and the environment.

[English]

As I said, the first step of our plan is to establish the facts surrounding the use of herbicides at CFB Gagetown over this 53-year period. Independent third-party experts will conduct the research for this step of the plan. At the very same time, people who have concerns are able to contact the external fact-finding and outreach coordinator. And I'm sure you are aware that a new coordinator was named yesterday, Dr. Dennis Furlong, down in Gagetown.

[*Translation*]

On June 21, 2005, I appeared before this committee. That appearance was followed two days later by a public meeting in Gagetown. Based on the concerns expressed by the public, and the requirement to address the issues that came to light, the following work has been initiated.

[*English*]

I'm now going to outline the progress we have made and the action plan that we have. A government-wide approach was developed cooperatively with all participating departments, including the central agencies. This group includes the Department of National Defence, the lead department for overall coordination of the plan and for certain sections of contracts related to the tasks; Veterans Affairs Canada, whose role is primarily assessing service-related disability claims; and Human Resources and Skills Development Canada, which works with provincial bodies responsible for workers' compensation—in other words, the civilian employees work through that avenue.

We also work with Health Canada and the Public Health Agency. They are responsible for science and regulatory issues related to herbicides and their contaminants, including dioxins.

Environment Canada is part of our group. It looks at the science related to environmental impacts of dioxin and other contaminants.

We also work with Justice Canada on legal and litigation issues, and Library and Archives Canada, keepers of historical records and documentation.

The approach articulates details for three fact-finding tasks. The first one is the identification of Canadian and foreign military personnel and civilian employees who may have been present during herbicide spraying at CFB Gagetown. This task was posted competitively on MERX, the government procurement system, in October, and we anticipate contract award in December of this year, with work beginning then.

The second fact-finding task is the review of the science and history of herbicide spraying at CFB Gagetown, the conduct of environmental sampling, and a search for possible barrel disposal sites. Some of this work has already been going on in the summer in terms of the barrel search and the sampling, but the full task in terms of the review of history of spraying will be awarded under a competitively sourced Public Works and Government Services Canada standing offer in December of this year, and we again expect work to begin on that in December.

The third fact-finding task is the determination of possible health effects and the conduct of an epidemiological study to determine the incidence of illness in the Gagetown area, relative to a reference population. These health studies will involve independent peer review before they are finalized and before they are submitted. A total of three contracts will be awarded under this task, using various competitively sourced Health Canada standing offers and MERX. We anticipate contract awards for these three sub-tasks on health between December 2005 and January 2006.

Turning to other activities and progress, the fact-finding and outreach coordinator position has been established, and the role and

responsibilities for this person have been defined. Mr. Vaughn Blaney was appointed to the position on August 16 of this year. He resigned in October for health reasons. The new outreach coordinator, Dr. Dennis Furlong, was named yesterday.

• (1640)

[*Translation*]

The coordinator will act as the principal conduit of information between concerned citizens and the government.

[*English*]

He ensures that the concerns of people are communicated to the government and to those responsible for completing the fact-finding tasks. He is the guardian of the fact-finding process, and he will co-chair, with me, the advisory panels that will guide those tasks.

One panel will oversee the work searching for military members and civilian employees who were present when herbicides were sprayed at CFB Gagetown. This advisory panel—and members have not been selected yet—will have an ethicist, an archivist or library expert, and a representative from one of the legions.

The second advisory panel will provide oversight for the work on tasks two and three, i.e., the environmental work and the health work. We will be selecting and inviting members to this panel; the co-chair and I will do that together. This panel will have a provincial representative, a dean of science from a university in New Brunswick, a layperson from the local area, a veteran, a civilian employee representative, a representative from the aboriginal community, and an ethicist.

As co-chair of the advisory panels, the outreach coordinator will be able to influence and inform the work of the external contractors. Further, the coordinator will present the findings of all final reports from the fact-finding tasks to the public, accompanied by scientific and medical experts, as appropriate.

The coordinator and the minister will receive these reports at exactly the same time. This is a major effort to show the transparency of the process and to show that the coordinator will be sharing those results. They will not come in advance to the minister or to the department.

Under another action, a contractor was hired through a standing offer process to conduct soil, vegetation, and water sampling for all areas where herbicides have been sprayed over the years at CFB Gagetown. The sampling began in October, it was completed in early November, and the samples have been sent for laboratory testing. Results are to be expected by late winter or early spring 2005. Again, those results will be made public.

Veterans approached the base commander at CFB Gagetown to indicate that they remembered burying barrels and that they had information about where things were buried at the base. They were invited to accompany the environmental officer on the search for those sites. Those inspection areas were marked, and base files were also searched to ascertain where spraying had occurred over the years.

The base hired a contractor through a standing offer process to conduct a scientific search of the identified areas to see if there were any anomalies underground that could have been buried barrels. I must say that nothing of concern was found, but I'll tell you what was found. There were a few anomalies that turned out to be items such as shell casings, batteries, and, most recently, a septic tank.

Finally, as was announced in August 2005—and which generated some interest yesterday at the press conference announcing Dr. Furlong's role—in a parallel and longer-term initiative, National Defence will undertake a two- to three-year due diligence project, and research will be conducted to determine whether Agent Orange and Agent Purple or any other herbicides tested in 1966-67.... I want to very explicitly say "tested", because those were the batches with the U.S. military. We have no records right now that indicate that testing happened on any other bases, but this study will enable us to validate and confirm that. Secondly, that study will review herbicide use in general at all of the other bases in Canada. There will likely be some variations. Gagetown is very heavily forested, which will require a lot of training, but we're going to do that thorough work so that we're able to answer questions.

We expect that project to be launched and tendered sometime in January or February 2006. It will be a public tender call, and we would likely be awarding the contract for that project in March 2006.

Given the number of files that will have to be reviewed to compile this information, the consultant will be expected to deliver the final report within two to three years following contract award. It's important to appreciate how many years we're looking at, how many files we need to look at, and how much research needs to be done.

•(1645)

In conclusion, the government has an obligation to make responsible and informed decisions based on rigorous research and science. The facts will help us find the right solution.

[Translation]

We also understand that the uncertainty of this situation is a cause for concern for some Canadians. That is why we are committed to talking to them directly and keeping them informed of the progress on a regular basis. Thank you very much.

[English]

Thank you. I would be happy to take any questions.

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

We will begin with Mr. O'Connor. And I'll again remind colleagues that because there are many people on the list, we'll just stick to our timeline as best we can today.

**Mr. Gordon O'Connor (Carleton—Mississippi Mills, CPC):** Thank you very much, Mr. Chairman.

Ms. Ellis, I listened to your briefing, and I don't have any problem with your effort to search for victims and to sample the soils. You have studies going on, but my basic problem is the philosophy underlying all this. Basically, it's risk management to try to figure out basically the minimum payout.

From our party's point of view, we'd want the government to take an approach more like that of the Americans. That is, if an

individual, military or civilian—and we'll stay with Agent Orange for the moment—was in the Gagetown area at the time when Agent Orange was used, and if they have symptoms and the symptoms are documented—the Americans have done extensive studies—then we would presume that they were subjected to Agent Orange and are entitled to compensation, rather than having these poor individuals going through the courts for years and years or going through all these long processes.

I don't think it's very difficult once a person confirms that they were in Gagetown, whether they're military or civilian. If they were there at that time and if they have those kinds of ailments, whether the ratio in the standard population is different from what they have, we believe these people should be compensated.

In the bigger picture, on herbicide use throughout the military at all our bases or nearly all our bases, we again think the weight of the effort should be on the individual. That is, if an individual was working at one of our bases where there was heavy herbicide use, and if they have ailments or they claim to have ailments related to herbicides, then they should be offered access to laboratory tests, physical exams, etc., to confirm that they have these ailments. From our point of view, they should then be eligible for compensation.

What we're saying is that all this effort is fine and necessary, etc., but instead of working on risk management, we should be flipping the thing around. If a person was put in harm's way at that time and they now have the ailments, we shouldn't be fighting them in courts or through the processes to prevent them from receiving compensation.

I'd just like your opinion, please.

•(1650)

**The Chair:** Keep it general.

**Ms. Karen Ellis:** You've raised a question around the U.S. system and policy, and I think you heard Veterans Affairs when they were here with me in June. They are the ones who can really speak about that policy of the U.S. and compare it to the one we have here.

What I would say and what I can say is some of the key message that I know they've shared with us and shared publicly: Any claimant who does have a medical condition identified by the Institute of Medicine in the States, I think you're referring to—which has documented this and researched this very well, you're quite right—may well qualify for a pension if they can identify a condition that has an association with Agent Orange.

Veterans Affairs has been awarding pensions. I have the statistics showing that they've done 14 out of 57 claims that meet those IOM criteria. So the criteria used by Veterans Affairs are the criteria from the United States to which you referred, but the people have to show that they have direct evidence of direct exposure in the VAC process. I can't say a lot more than that, but I know they use the criteria you're talking about.

**Mr. Gordon O'Connor:** As you may or may not know, this isn't a theoretical thing for me. I was in Gagetown at the time. In fact, I remember Colonel Sellar as the battalion commander of the Black Watch.

It seems to me that it would be very difficult for an individual to confirm that they were in the direct spray of the Agent Orange or whatever. Again, it would seem to me that the government should weight the evidence basically on the side of the individual in this case. There can't be a large number. If we stay with Agent Orange, there cannot be a large number of people who were in Gagetown at that time and who have ailments related to Agent Orange. It can't amount to a whole lot of money from the federal government's point of view, so I just wonder why we're making it so difficult for individuals to get compensation.

**Ms. Karen Ellis:** The key message that I would reinforce from what I said in my opening statement is that we have to go beyond the Agent Orange from 1966 and 1967. We've responded to that very strong cry that we indeed look at all of the herbicide spraying. People have talked not just about those two years; they have shared many stories and concerns about many years on the base and the spraying. So we are not limiting it just to that.

In order to be able to make some sound assessments of what kinds of situations may have arisen and what they might mean for future policy, we do have to do the work to find out who, and what role they played in relation to the program. There are a whole lot of issues around where they were in relation to the spraying that took place, and we have to build the data. This is not something that has been done in the past that we can just update. We're trying to find all of the original records and information, and it is a lot of work.

**Mr. Gordon O'Connor:** But we're talking about theoretically two groups of people. There's the group of people who were there at the time of the Agent Orange use, and they may have ailments directed related to Agent Orange, as I said. And then there are people who were there and subject to other herbicides.

I remember Gagetown. I did four tours there. Every summer, the planes came over and they sprayed and they sprayed and they sprayed. As a young officer, I was in there cutting the bush.

So I think you're dealing with two groups. I'm certainly saying the Agent Orange people should be cut and dried. If they were there at that time and if they have the ailments related to Agent Orange, we should actively give them compensation. For the rest of us, if we were subject to toxic chemicals like dioxin at other bases or even at Gagetown, and if we have ailments, then as I said, we should offer the possibility to these people who claim they have ailments to have tests to confirm medically that they have them, confirm that they were on the bases at that time, and make sure there's a linkage between them and the dioxin or the other herbicides. At least they would then be on a list to be considered for compensation. But I think there are two groups here.

• (1655)

**Ms. Karen Ellis:** There may well be, and the work that we're doing is going to give us the building blocks to know whether other kinds of testing like what you referred to—biological testing for people—might be appropriate at a certain time. But we don't know

yet what that group would be or when the appropriate time would be to do it.

As I said, the approach we've worked out here has been with a lot of experts from Health and other departments who really are doctors, people who know about this kind of issue in terms of how you check for it and how you research it. What I can say is that we are open as we go through the building blocks. If a certain chunk of our work tells us that we should do something else, that could include things like blood testing for people. We're open to that if it makes sense at the time.

Right now we don't know when that would be needed, but we're certainly not closing the door on the possibility of doing some of the things you say once we have enough information to know that would be a good next step.

**The Chair:** And I'm sure you're plugging that into Veterans Affairs as well.

**Ms. Karen Ellis:** Absolutely, because many of the issues raised here are very directly related to Veterans Affairs.

I have to be careful. I don't work there, so I don't want to speak about their program in detail, but I do confirm that when Mr. O'Connor talks about the Institute of Medicine, he's absolutely right. I know those are the criteria they are using at Veterans Affairs, and they have been using them since 1995 on this issue.

**The Chair:** We will move on to Monsieur Bachand.

[*Translation*]

**Mr. Claude Bachand (Saint-Jean, BQ):** Thank you, Mr. Chairman.

Good afternoon, Ms. Ellis. Although my colleague and I are wearing an orange ribbon today, it isn't for the Orange Revolution in the Ukraine, as you will have guessed, but out of solidarity with the people who are dealing with the problem of Agent Orange.

Ms. Ellis, you'll remember that I was hard on you last time because I accused you of being an excellent spokesperson for the Department of National Defence. I also crossed swords with my colleague the parliamentary secretary. I was told that was nothing compared to what you experienced the next day in Gagetown.

Many people feel that the government now knows it's responsible and is not really getting involved so as not to make its responsibility too obvious. So what's it doing? Every good government always does the same thing: it makes a public relations plan. That's what you've just presented us, in point form. To reassure people, we tell them that we're going to do this and that. Ms. Ellis, I wonder whether you're the witness who should be asked these questions. Shouldn't we put these questions more particularly to the Department of Veterans Affairs or perhaps to Messrs. Blaney and Furlong? I believe they have duties to perform.

In November, there were 216 requests. Decisions were rendered for 159 of them. Thirteen were approved, only four of which for the use of the defoliant. There's a problem. The U.S. department grants the presumption of illness with a causal link, and provides compensation to people who have been in contact with Agent Orange for one day and who are suffering from the following diseases: CLL, chloracne, type-2 diabetes, Hodgkin's disease, multiple myeloma, non-Hodgkin's lymphoma, acute and sub-acute peripheral neuropathies, late-onset cutaneous Porphyria, prostate cancer, respiratory cancers and soft tissue sarcoma. The situation is completely the opposite in Canada. We prepare a public relations program to tell people that we have the situation under control. The main Gagetown victims suffering from these diseases must prove beyond a doubt that there is a causal link between their presence in Gagetown and Agent Orange.

Mr. Chairman, I'm not convinced that we have the witness we need before us. To continue our study of Agent Orange, I'm going to insist that the Department of Veterans Affairs appear before us again, as well as Messrs. Blaney and Furlong, since they have a role to play.

We won't solve the problems of these people with a public relations plan. The Department of National Defence is protecting itself with that plan. Instead we should focus on the victims of what happened at the time. We must stop pushing back the deadline by asking scientists to prove to us that there's a causal relationship. We must assume that these people are sick. They were there at the time, and, if they're suffering from these diseases, we should pay them compensation. We'll look for scientific proof later.

I'm not sure you're in a position to react to what I just said. Perhaps you prefer to wait for the Department of Veterans Affairs and Messrs. Blaney and Furlong to appear.

• (1700)

**Ms. Karen Ellis:** I think the idea of inviting the Department of Veterans Affairs is a good one. The diseases you named are really those described by Mr. O'Connor. The Department of Veterans Affairs uses that list. You're right: there is a procedure. People must describe their case, give their history and so on. It's not up to me to validate or invalidate those files. I think it's important that we and the experts understand each other clearly.

For us, this is about much more than complaints affecting public relations. We did a lot of work in the summer, together with a number of departments. The team has been cut, and we're a bit tired, but it's important to ask the right questions. How can we identify people, the impact of the use of herbicides and their health effects without conducting studies? We shouldn't draw hasty conclusions if we don't have the necessary information. This work has to be done in a disciplined way.

**Mr. Claude Bachand:** That's where I don't agree with you. The U.S. government automatically grants compensation to people suffering from the diseases we've listed. In Canada, with this public relations operation, we're forced to wait. The figures I gave earlier are dramatic. Two hundred and sixteen people believe they are affected, and, out of 159 decisions rendered, we only recognize four. That's not a high average. With four hits in 159 at-bats, you spend a lot of time on the bench in the National Baseball League. Right now,

it's 25 to zero for the Department of Veterans Affairs against ordinary people.

**Ms. Karen Ellis:** I want to add one important point. You gave some figures on people who've received compensation to date. I assure you that the Department of Veterans Affairs is showing some openness: if new information emerges during our studies, the department will review the cases that have already been settled. That's important, sir. If there's more and different information, they'll reconsider certain cases. That offers hope, and, if we don't do the work planned, that hope will disappear.

[*English*]

**The Chair:** That was a very short question and a very quick response, because I know you're very long-winded.

Before we go to our next question and member, I would like to read the motion into the record, only because something came up. Just so we clearly understand what was requested, it was the motion put forth by the vice-chair, Mr. Rick Casson, and it reads as follows:

That the Committee schedule a meeting for the week of November 14 to examine and discuss the ongoing investigation into the use of Agent Orange and other defoliants on Canadian Forces bases.

Because we're bringing in Veterans Affairs, I very much appreciate and respect what is happening here. Unfortunately, the good intent with which this motion was meant maybe should have gone a step further. This committee—let me point this out to the audience as well—has been more than receptive to allocating time beyond the norm to address this issue.

For the benefit of my good friend Monsieur Bachand, who is a very experienced parliamentarian, he knows very well what the motion states. We're bringing in Veterans Affairs, and rightfully so, but I can sense here that we should focus on what the department is doing, as has been outlined—and, colleagues, this is another suggestion—and maybe address any other issues with Veterans Affairs.

With that, I'll go to Monsieur Perron.

• (1705)

[*Translation*]

**Mr. Gilles-A. Perron (Rivière-des-Mille-Îles, BQ):** It's not just what the department has done that's important; it's also what it should have done in the past 29 years.

[*English*]

**The Chair:** I agree with you. That's why we have the department here: to listen to our views and recommendations as well, no question.

Mr. Blaikie, the floor is yours, sir.

**Hon. Bill Blaikie (Elmwood—Transcona, NDP):** Thank you, Mr. Chairman.

I have a couple of things. First of all, I appreciate that there's work to be done. That point has been made. But there's no work involved except some mental, intellectual, or political work and will in adopting the presumptive model. That's just something you decide to do.

I think the Department of Veterans Affairs and the Department of National Defence should adopt this. In fact, there's some precedent for this, not just in the United States, but in Canada.

Recently the provincial government in Manitoba adopted the presumptive model when it comes to workers' compensation for firefighters, because there are a whole lot of diseases that are associated with firefighting. The firefighters in that province have fought very hard to have the provincial government adopt a presumptive model, so firefighters haven't had to go through what people who have been exposed to Agent Orange are having to do in the federal context, which is prove on an individual basis, all on their own, that there's some connection between the condition they have and a previous exposure either to Agent Orange or, in the case of firefighters, to smoke and the toxic chemicals that people are exposed to as a result of firefighting.

We have that sort of conceptual breakthrough in the country at the provincial level with respect to compensation. I would hope the federal government would look at that and take it as an example.

I wonder if you could perhaps tell us if this is affecting in any way.... Are you doing any research on the current contamination in Camp Gagetown as a result of previous spraying, not just in that one section of time, but obviously with other defoliants? For instance, I've been told that at this point the National Guard in Maine, which used to use Camp Gagetown as a training centre, has declared a moratorium on coming up to Camp Gagetown until such time when they're confident that they're not poisoning their own soldiers. So is part of the program, part of what you're doing, to determine what kind of contamination, residual or otherwise, exists at Camp Gagetown and what kind of exposure people now at Camp Gagetown are being exposed to?

**Ms. Karen Ellis:** The sampling program that I referred to that has just been completed and the samples that have gone to the lab are indeed exactly that. They have been taken at quite a few different spots over the base. At about 25 different spots, quite a lot of extensive sampling has been done to determine exactly what, in recent years, might be residual or might be there right now. As I said, those results will be available in about March of next year.

**Hon. Bill Blaikie:** Do we know of any restrictions other than the self-imposed restrictions of people who don't normally use it? Are there any restrictions on the base as to where people should go or not go, depending on what is known at the moment?

**Ms. Karen Ellis:** I really would have to ask the base commander that. I'm not aware of any particular restrictions at this time, but I would like to take that on notice and get back to you by talking to the commander himself.

**Hon. Bill Blaikie:** The other thing, Mr. Chairman, is that there has been an awful lot of justified talk about identifying the military personnel and civilian employees who may have been exposed to Agent Orange or these other defoliants. I wonder what effort is going into trying to gauge the effect on civilians in general, on people who live in the area. I've certainly had a number of people express concern to me that it's not just those who had the direct exposure either as civilian or military employees, but their families and/or people who lived in the nearby communities.

•(1710)

**Ms. Karen Ellis:** When we had the public meeting in Gagetown, we certainly heard many concerns from people who are not necessarily CF members or vets or civilian employees. One of the main benefits of establishing the external coordinator and outreach office there is that it is an office where people, citizens who would not necessarily be in our records—we have records for military and civilian employees—will be able to go to the outreach coordinator and identify themselves as having had a concern, an issue in the past or in their history, related to herbicides at Gagetown. That's one of the main and primary valuable things about that office and that team there. So there is a place for those people to self-identify and to talk, if that's what they would like to do, and to put other concerns on the record.

We also have the 1-800 line that we set up in June, right after the Gagetown meeting, so that people can call and just at least find out where they might be directed to talk about their concerns. You might find it interesting to note that we've had about 560 calls on the 1-800 line since June.

So those might capture some of the other people you are talking about.

**Hon. Bill Blaikie:** I note that you say you have an ethicist on one of these task forces.

**Ms. Karen Ellis:** We plan to have an ethicist.

**Hon. Bill Blaikie:** What sorts of ethical questions do you think are raised here?

**Ms. Karen Ellis:** It's really to just have somebody on these panels who can ask questions if there are any things related to privacy issues, for example. We're just making sure we have someone who has an outside view and different training and philosophy and who can just bring their expertise to the task.

I know this was suggested to us by Health Canada folks. They have done a number of these panels in health studies, and they found the participation of an ethicist to be very helpful. We thought it was a good idea, and we thought it would be good to include somebody.

**Hon. Bill Blaikie:** I'm not against the idea, Mr. Chairman. I'm just curious as to what the role of the ethicist would be, because it seems to me that there are some questions with respect to privacy.

Just on that, it seems to me that we're somewhat left in the dark as a committee, because you say that so many people have applied and only so many have—

**Ms. Karen Ellis:** That's veterans.

**Hon. Bill Blaikie:** Yes, I agree.

But at some point, Mr. Chairman, it seems to me that we need to know what kinds of conditions people reported and were found to have, yet were turned down. That's the kind of information we're going to need.



We don't have to have names. All we need are some statistics as to how many people had this particular kind of condition that may be recognized in the United States presumptively but isn't in Canada, so that we can compare how many people are being left out as a result of not adopting the presumptive model. The ultimate ethical question here is not a question of privacy or some of the things the ethicist might concern himself or herself with, it's really about how, in the end, we're going to relate to people who have had this kind of exposure. But I suppose that will be up to the ethics of the government and not the ethics of the ethicist.

**Ms. Karen Ellis:** I think the range of people we want to have on those panels will be good, and we'll be looking for people who'll bring a lot of integrity and expertise to that process.

**The Chair:** We've had a buzzer. If it's okay with you, you've gone beyond the seven minutes that I've allowed everybody, only because I'm looking at the clock, Mr. Blaikie. I know you are most respectful of the rules, being our senior here, and I know everybody wants to get in their time.

**Hon. Bill Blaikie:** And I know you are too, Mr. Chairman—

**The Chair:** Thank you kindly.

**Hon. Bill Blaikie:** —as is the government when it suits them.

**Some hon. members:** Oh, oh!

**The Chair:** Mr. Blaikie, the floor is yours, as long as you can respond to the rest of the colleagues.

I'll go to Mr. Rota.

**Mr. Anthony Rota (Nipissing—Timiskaming, Lib.):** Thank you, Mr. Chair.

Ms. Ellis, I'm just reading through some of the notes that you've provided, and I'm listening to your discourse. You're in a fact-finding process. You're trying to find out what has happened and what went where.

The experience that I've had with the military—pretty well any military around the world—is that they keep very fine records. Is this not something that is evident, that would be there on record somewhere, where you could just get it, look through it, find out exactly what you need, what got sprayed where, who was exposed to it as far as the military goes, and by knowing where it was sprayed, find out exactly what area was exposed to it? I'm just curious to find out why the records.... Or do you have the records?

**Ms. Karen Ellis:** Well, we have some records. Since we've been working through the summer, for example, there are some good records from the property and environmental side at Gagetown that have quite a good list of different things that have been sprayed over the years. That will be reviewed and studied in fact-finding task two.

As I mentioned earlier, we want to do a longer-term study for the other bases across Canada. Because we have already had requests for parliamentary papers and access to information requests for that type of information anyway, what we're finding is that we're having to really look right now for what we already have.

We will be getting some material, but a lot of folks are calling from the base and are saying they need to know where to look or who to ask. In some cases we have great corporate knowledge at

Gagetown, because the property officer there happened to be very dedicated to the records-keeping.

As we go through time, we will find out how we will get hold of the other records for other bases, but it's not an instant thing that everybody can just put their hands on. But now that we've said this is a commitment and we have to do it, we're going to put the time and effort into finding them.

On the point you raised about trying to identify people, we think that probably in the range of 200,000 military members have trained at Gagetown over the 50 years. That's a lot of files to research, and a lot of names to find. Through your initial search, you'll get basic information—who the person was, maybe what unit, and when they were there, and sometimes repeat times of going there—but it does take quite a bit of work to find out where they were in relation to the spray program and where the herbicides were sprayed. You have to do each piece and then make the connections between the three tasks in order to put the story together, and that's what we're committed to.

So we do have some records. We're digging them up constantly because we have lots of requests to do so. Do I think we're going to find a lot more over time? Yes, I do, and it's going to take some real time and effort, and we're going to do that.

• (1715)

**Mr. Anthony Rota:** You talk about two levels. You talk about Agent Orange and other herbicides. Is there any priority put on Agent Orange or Agent Purple, which I understand is even worse than Agent Orange? Those seem to be the pressing ones right here. The other ones are just as important, but there seems to be an urgency to the Agent Orange. Is that something we're pushing forward, or are we just sweeping everything and hoping for the best and hoping that the Agent Orange will rise to the top?

**Ms. Karen Ellis:** As I said, we are looking at everything, at all herbicides over 50-plus years, but we are most definitely trying to find records of people who would have been associated with those two test sprays in 1966 and 1967.

**Mr. Anthony Rota:** That's a very small period.

**Ms. Karen Ellis:** Yes, it is.

**Mr. Anthony Rota:** What would prevent us from saying “Boom, there it is”? With these two short periods, it's not a lot of records. It should be fairly evident to find out who was there, when, and who would be associated with it.

**Ms. Karen Ellis:** I think some work has been done on that. I can't tell you right now exactly how many names we have, but I know people have been actively looking for those groupings. I could check with the people in our HR military personnel side and see what the progress has been and get back to you, but that was the focus that we were looking for initially, so effort has gone into that.

Of course, there are a number of people who have gone to Veterans Affairs, through their process, with their records, or who have looked through their own records through Library and Archives Canada. I would mention as well that Library and Archives Canada has received a lot of requests to look for people's personal military records.

So there are a number of avenues that we can look at and are looking at to find out those names. Again, I don't want to go into too much depth on the Veterans Affairs side, because I'm not from there, but people who do have the information about where they were, when they were there, what their linkage might have been with the spraying program, and who feel they have one of those IOM diseases or sicknesses can take that to the Veterans Affairs process. Civilians can do the same through the human resources development department.

**Mr. Anthony Rota:** But it sounds fairly straightforward. Somebody comes up and says they were there. We check their records to see if they were there. They have these symptoms.

**Ms. Karen Ellis:** If those things all match, then their claim should do well at Veterans Affairs.

**Mr. Anthony Rota:** The other question I.... If I can ask my friend across the table to wait his turn, the question I—

**The Chair:** Be respectful, Mr. Thompson.

**Mr. Greg Thompson (New Brunswick Southwest, CPC):** I am. I'm encouraging the member.

**The Chair:** We're just delaying time, sir, and I'm trying to manage it well. So if you'll permit me....

**Mr. Anthony Rota:** Thank you, Mr. Chair. We normally have a very cordial arrangement here. Anyway, we'll invite our new friends here.

I'll get on with a question about the work you're doing out in the field. You're actually going out and you're looking for incidence of agent orange or any other herbicides. In anything I've read on this, it really doesn't have a twenty-year lifespan. Some of it just basically lands and hits the leaves, and as it evaporates through the sunlight, it disappears. What do we expect to find on the ground where it was sprayed? How do we apply that to where we are now, or to helping out veterans? I'm just wondering what the usefulness of going out with a shovel and looking in the ground is.

● (1720)

**Ms. Karen Ellis:** Just to link back, the question that you've just ended on connects to what a couple of the other members had raised, which is what testing we are doing now. The sampling we've done for water, soil, and vegetation in the last couple of months doesn't tell you necessarily what happened forty years ago or thirty years ago, but it will certainly tell you what has happened in recent years and if there's a cumulative effect from the recent spraying program.

That work is being done and those results will be shared, and if there's any need to make any changes in the practices of the program, those will be made if anything out of those tests shows that a change is required.

**Mr. Anthony Rota:** How recent is "recent"?

**Ms. Karen Ellis:** I really don't want to try to speak as a scientist about that, but my understanding is about three or four years back.

Testing now will probably tell you something about the last three or four years. I can certainly confirm that with the testing we've just done.

**Mr. Anthony Rota:** I'm just thinking that our records would be fairly clear for the last three or four years, so is it actually serving anything to go out and do those tests?

**Ms. Karen Ellis:** It is, because the records tell you what was sprayed, but the actual testing and sampling tell you whether or not there's any kind of dioxin residue or other kinds of contaminant residue. That's important to know, so that you can find out what impact it did have on the environment.

**The Chair:** Because we started late, I'm going to be extended beyond 5:30. We have four more people on the list, and I intend to cover each and every person, Ms. Ellis, so I'll ask for your patience.

With that, we'll go to Mr. MacKenzie.

**Mr. Dave MacKenzie (Oxford, CPC):** Thank you, Mr. Chair.

Thank you, Ms. Ellis.

I'm more concerned about the people than the current state of what's in the ground. I understand the concern about what's in the ground, but we're looking at needles in a haystack there.

From the beginning of this whole thing, what has concerned me has been the veil of secrecy and the difficulty for the people to access. You mentioned the 1-800 number, and I wondered where anyone would find that. Yesterday, if you checked on the DND website for defoliant spraying at CFB Gagetown, you got a document that said "Canada and Peacekeeping". I understand it has been corrected today, but that's the kind of thing our people have been suffering through in terms of trying to get the information that seems to be hidden.

I have a document. We've been busy on the access to information files, and we'll do more if that will spur broadening the investigation. A number of them have been relative to other bases in Canada, and we've certainly been waiting to hear from them.

One of the documents that we did obtain was prepared by someone in your group, a Ginger Stones. I believe it's dated June 3 of this year, and it indicates that the Institute of Medicine is considered leading expert in this regard, and that contrary to general public and media perception, the IOM has not found that exposure to Agent Orange is the cause of any illnesses. It then goes on a little bit more and talks about industry and agriculture and Vietnam veterans, and how minimal the spraying was with respect to Canadians.

Suppose we start off with that premise. Does it not make it very hard and very difficult to accept some of the things that our Canadian people are telling us about their injuries if we have the premise that it doesn't cause the illnesses and that it was minimal?

**Ms. Karen Ellis:** Thank you for the opportunity to comment on that.

Again, it sounds so detailed, but on the direct cause versus association, Veterans Affairs uses the association of illnesses. On the illnesses mentioned by two of the other members from the Institute of Medicine, what Veterans Affairs does is look for associations. Certain diseases that are on that list are associated with exposure to Agent Orange.

It sounds just like semantics, but direct cause versus association is actually different from a medical perspective. What I want you to know, though, is that the association is respected by Veterans Affairs for those diseases. The government has recognized that, because they've given pensions in some cases.

**Mr. Dave MacKenzie:** Presumptive on the illnesses?

**Ms. Karen Ellis:** I can't comment on the presumptive policy, because I don't want to make a mistake. It's not my area of expertise. I'm sorry.

**Mr. Dave MacKenzie:** My other comment would be with respect to what we see—at least those of us who have been trying to help some of these people—on the secrecy and the timing of other things. Yesterday's announcement with respect to broadening the whole thing was interesting, although we understand that Mr. Furlong's appointment was a result of something that was unanticipated. But it's ironic that yesterday, the day before this committee was scheduled to look at Agent Orange, we had the expansion of the program and the announcement of Mr. Furlong.

• (1725)

**Ms. Karen Ellis:** I'd like to just correct the record, because we talked about the two- to three-year longer-term project in our announcement on August 16. It's in the press materials.

**Mr. Dave MacKenzie:** Looking at other bases?

**Ms. Karen Ellis:** Yes, that's exactly what seemed to cause so much interest yesterday, and it was in our package on August 16.

**Mr. Dave MacKenzie:** My apologies, then, because we were of the opinion that it only got announced yesterday.

**Ms. Karen Ellis:** I appreciate your asking, because this morning when I saw that so much in the press, I thought, I guess nobody read that in our package in August.

**Hon. Bill Blaikie:** It happens to us all the time.

**Ms. Karen Ellis:** I'm sure it does, but I think it's important, and I thank you for that. That's a really important point that came up even in Gagetown and when I was here in June: What about elsewhere?

We've had other inquiries come in from other members of Parliament about their own areas, so we're trying to respond, and we did respond earlier in the summer. We did have it in the material. It was there, and just yesterday we were asked that question.

**Mr. Dave MacKenzie:** Fair enough. I apologize.

**Ms. Karen Ellis:** No problem. I'm glad to have the chance to say it was in our thinking all along.

**The Chair:** We'll have to move on. I want to extend everybody the courtesy, David.

With that, we'll go to Mr. Martin.

**Hon. Keith Martin (Esquimalt—Juan de Fuca, Lib.):** Thank you very much, Mr. Chair.

Ms. Ellis, thank you for being here today.

I want to get back to why the herbicides were used in the first place. Can you comment on why they actually used the herbicides on Gagetown at all?

**Ms. Karen Ellis:** What I will do is take the comments that were made by military colleagues who work in that area when we came to this committee in June.

Basically, they're used to clear brush for training purposes, and also for safety reasons and fire prevention. The heavy brush areas where there's going to be firing of ammunition are obviously going to be susceptible to fires, so clearing away as much foliage as possible is really an important safety measure. The defoliation, especially on a base where such tremendous amounts of training take place, is an essential operational practice. That's how it has been explained to me, and it makes a lot of sense.

**Hon. Keith Martin:** The absence of doing that would actually cause a problem and put our Canadian Forces members at risk.

**Ms. Karen Ellis:** It would. If you're going to send them in to train somewhere, it's a risk management kind of thing. It's important to plan ahead where you're going to be doing the training, so it is a precaution that's taken.

**Hon. Keith Martin:** Are you aware of any other options to defoliate the area?

**Ms. Karen Ellis:** There are other ways to defoliate that have been used. Mechanical and hand clearing would be one option. I certainly know that over the years the base looks at the places where you would need to do any kind of herbicide spraying and where it would make sense to use other approaches.

**Hon. Keith Martin:** I want to get it clear in my own mind the dates and times when Agent Orange was used. Was it only used for the seven days that you mentioned back in the 1960s?

**Ms. Karen Ellis:** This is another good opportunity to clarify something very important. When I was here in June, we talked about the test batches used for the seven days over those two years. They were an unregistered product that was tested with the U.S. military. That makes it different from all the other products, which were registered products used in Canada by all kinds of people and organizations.

The bottom line—and we've heard from people who've gotten information through access to information—is that some of the component ingredients of Agent Orange appeared in other herbicides. That leads me again to say that it wasn't those sorts of test batches, but there's validity in saying those chemicals were also in other herbicides. Hence, we said we'd look at the entire fifty years, because people have concerns about anything of that nature that was in products.

It's the testing part that I'd like to distinguish, because testing without necessarily knowing the makeup of those is a separate type of thing versus the overall program, and we know people had concerns about both aspects.

**Hon. Keith Martin:** At the end of the day, of course, we all want to make sure that our veterans who were there, if there's any correlation at all in terms of their exposure to Agent Orange or another herbicide that caused an ailment they have, receive the compensation they ought to get. The challenge, of course, that you're dealing with is trying to parse out a population of people who are a lot older, including those people who have diseases either as a result of an exposure to a herbicide or because they are aging. That's a really difficult challenge you're struggling with.

I was looking at some evidence in the United States, which did show an increase in diabetes, but didn't show an increase in any of the cancers. I know this is not your area of expertise, but are you familiar with any other studies that have been done that show any direct correlation between exposure to Agent Orange and other herbicides and the collection of diseases that I think Monsieur Bachand mentioned?

● (1730)

**Ms. Karen Ellis:** Am I aware of any studies? I know there was a famous study done on something called Operation Ranch Hand. I think the study was on people in the U.S. military who had been in Vietnam, and it dealt directly with the spraying in Vietnam. I know there was a study on them. I read something about it this summer. I think one of the findings was that there was maybe something slightly elevated, relating to prostate cancer, but I don't have a lot more detail.

**Hon. Keith Martin:** I saw that study. There were people who were exposed to Agent Orange for nine years in Vietnam. I think about 2,000 people have been looked at over 20 years. It showed a 166% increase in diabetes, but it didn't show an increase in any of the cancers that Monsieur Bachand mentioned.

But the question is for the people who were out there with diseases and who are worried and concerned. I haven't seen any other studies that I'm aware of, and I'm trying to look for them. Have you seen any?

**Ms. Karen Ellis:** I think we're breaking some new ground on this one in Canada, and maybe even more broadly, which is why we need to do this work. I know what you're getting at—whether there is something already.

The health study we're going to do on task three will include a literature review of anything and everything that is relevant to this. So I want to assure people that any other studies that have been done.... I know that when I came here earlier, I think Mr. Thompson had something that he had seen in a study from B.C. So I'm sure that all of those types of things that are relevant to this topic will be looked at in the literature review.

I guess the other point to make is that Gagetown was not Vietnam.  
[Translation]

**Mr. Gilles-A. Perron:** Good afternoon, madam.

I believe you're a very brave football player because you're here alone. I admire your courage. However, if we'd been at Landsdowne

Park with the Renegades, I believe they would have thrown tomatoes at you. I don't think you would have been the only one.

In the fourth paragraph, you're incredibly arrogant. You say: "Transparency and citizen engagement will be critical." You should have said: "Transparency and the commitment of citizens, the Canadian Forces and Veterans Affairs Canada will be critical." If I had been a relative, I would have thrown tomatoes at you, madam. We also have to demand transparency from the Canadian Forces and Veterans Affairs Canada. This works both ways.

In addition, people have been fighting since 1976. Why did we wait until June 21, 2005, when you appeared, to start looking into Agent Orange and Agent Purple? Why all that time?

**Ms. Karen Ellis:** Sir, with regard to your first comment, the members of the Canadian Forces and veterans are the first ones we're committed to. They're included implicitly. We regularly discuss these issues with them.

**Mr. Gilles-A. Perron:** That's not what you said, madam. You said: "Transparency and citizen engagement will be critical."

**Ms. Karen Ellis:** In that case, sir, I would add the words you mentioned in the next version. You're right: the other groups should be named. I agree, and I apologize if I insulted anyone.

**Mr. Gilles-A. Perron:** It insulted me for those people.

**Ms. Karen Ellis:** You asked why we had waited so long. To my knowledge, concerns about Agent Orange were raised in May. From the moment it seemed to be an important issue for members of the Canadian Forces and for veterans, we took a number of measures, and we haven't stopped working since then.

● (1735)

**Mr. Gilles-A. Perron:** I don't doubt your work, madam. I just wonder why it took so much time. You said near the end of your presentation that you thought you'd have that in March 2006. Are you waiting for these people to die?

**Ms. Karen Ellis:** Sir, I can't respond to that kind of comment.

**Mr. Gilles-A. Perron:** How many people died between 1976 and June 21, 2005? We should know that. We have to be human. We shouldn't think just with our heads, but with our hearts as well.

I'm sorry, I have nothing against you personally. You're a good player and I admire you for coming here to fight, alone against all of us. You have courage and will. I tip my hat to you. However, I don't like either Veterans Affairs Canada or the Canadian Forces, which are lined up behind you and are helping you in this case.

I'm finished.

[English]

**The Chair:** Any quick response, Ms. Ellis?

**Ms. Karen Ellis:** No.

**The Chair:** It was just a comment.

Merci, Monsieur Perron, only because you're saving us some time. It will permit us to go to Mr. Thompson.

**Mr. Greg Thompson:** Thank you, Mr. Chairman.

And thanks to members of the committee for allowing me to join you tonight.

Ms. Ellis, going back to your testimony that you presented here on June 21, in my opinion you were either poorly prepared or in a complete state of denial on this issue of Agent Orange, dioxins, and all the other defoliants that have been sprayed on Base Gagetown.

Now, in that testimony that day, you said that the vast majority of Agent Orange would have been absorbed in the forest canopy. One of the members has talked about that this evening, and I was actually encouraging him to continue in that light. You say here, and I'm quoting you directly, "In the absence of deliberate ingestion"—and you use the word "deliberate"—"of large amounts of contaminated material, there is virtually no risk of significant exposure related to the spraying among Canadian Forces members."

Do you still stand by that statement?

**Ms. Karen Ellis:** Mr. Thompson, on June 21 I gave the best information I had at that time.

**Mr. Greg Thompson:** Do you stand by it, yes or no? Yes or no—simple answer.

**Ms. Karen Ellis:** Could you read it again, please?

**Mr. Greg Thompson:** You know what you said. Just don't play that game with me. We have limited time.

Do you stand by the fact that "in the absence of deliberate ingestion"—

**Hon. Keith Martin:** I have a point of order. Mr. Chairman, through you, I warn Mr. Thompson not to berate the witness. Ms. Ellis is here as an assistant deputy minister and is an honourable public servant. She's doing her best to provide the information she has at her fingertips, and what she has had. I would just ask Mr. Thompson to be respectful of Ms. Ellis.

**Mr. Greg Thompson:** Ms. Ellis is a very skilled communicator, and I will put the questions to her that I deem appropriate.

Ms. Ellis, this is you speaking on that date: "In the absence of deliberate"—you use the word "deliberate"—"ingestion of large amounts of contaminated material, there's virtually no risk of significant exposure related to the spraying among CF members."

Do you stand by that statement, yes or no?

**The Chair:** Were those words from the blues of that meeting, Mr. Thompson?

**Mr. Greg Thompson:** No, this is her direct statement that she presented to the committee on that day, Mr. Chairman.

**Ms. Karen Ellis:** Well, Mr. Thompson, I was using information provided to me by the CF Surgeon General, medical experts. I am not a doctor. I researched my remarks to find out the best information I could that day.

Any exposure issues or association with disease is something medical experts have to talk about. I did what I could, having several days to prepare, never having dealt with the issue before, and I got the best information I could from the experts.

**Mr. Greg Thompson:** Okay, Ms. Ellis. So I guess I understand where you're coming from on that one. You came poorly prepared, would be my opinion.

**The Chair:** Listen to the response without comment, please, sir.

**Mr. Greg Thompson:** Now, with respect, you also go back to the U.S. Institute of Medicine. I questioned you quite heavily that day, if you will, and I was very forceful. I'm quoting you again. It says:

It maintains a list of illnesses for which there is sufficient or limited evidence of an association with the exposure of Agent Orange. It has not found that Agent Orange exposure is the cause of any illnesses, and the associations

—that's the key word that you mentioned tonight—

it found were largely based on studies of industrial and agricultural workers with far greater exposure to dioxin-containing chemicals than that experienced by Vietnam veterans.

It appears as if their department has changed their position on that as well, that they're recognizing now this connection, if you will, this association. Is that correct?

• (1740)

**Ms. Karen Ellis:** The connection was recognized even before I appeared on June 21. Mr. Sellar received a pension. That is a direct association and result of respecting that association.

**Mr. Greg Thompson:** Well, I disagree, Ms. Ellis, but I think I have the privilege of doing that without too much disagreement among the members.

You went further on that day and you said, "There is little chance that civilians living outside the base were exposed to the chemicals used in this testing". Do you still believe that as a fact?

**Ms. Karen Ellis:** There is little chance, until we do the research program I've laid out that will tell us whether or not there should be any concerns for those people. That's why we're doing the work program we're doing.

**Mr. Greg Thompson:** Who is setting the terms of reference for the research being done? Are they being done by experts? Are they being done by a committee of cabinet? Who's setting the terms of reference?

**Ms. Karen Ellis:** The terms of reference for the different fact-finding tasks are being developed with all of the other departments, which I mentioned at the beginning of my statement this evening, and with the fact-finding and outreach coordinator.

**Mr. Greg Thompson:** Okay. So basically you're telling me that's code language for it's coming through the political masters. Is that correct?

**Ms. Karen Ellis:** We have been entrusted to work with doctors, scientific and other experts, and government departments to develop terms of reference.

**Mr. Greg Thompson:** Ms. Ellis, that answer is fine with me. I don't believe it's correct, but....

Why don't you test for dioxin levels in those soldiers and those civilians who feel they were exposed? Why not test for dioxin levels, as they do in the United States of America?

**Ms. Karen Ellis:** Mr. Thompson, Veterans Affairs would be able to answer that question, since they do the assessments of soldiers who say that they have any concerns related to this.

**The Chair:** With that, I'm going to have to end it. Sorry. I was respectful to extend. The vice-chair and I have discussed this. I do wish to give our last member an opportunity for a quick comment, and that is Ms. Gallant.

I'm sorry, Mr. Thompson, but we discussed this earlier.

**Mrs. Cheryl Gallant (Renfrew—Nipissing—Pembroke, CPC):** Just further to Mr. Rota's question on the purpose behind doing the soil sample testing, really, what is the purpose? At the end of the day, are we going to take whatever remains might be left in the soil and try to prove cause and effect relationships between the diseases? Isn't it really more of a red herring—or maybe an orange herring—to spend time doing that when it would be much more efficient and waste far less time to just go ahead and compensate these people who have been exposed based on their proximity to the affected area and/or medical testing?

**Ms. Karen Ellis:** As I said—and I really have to reinforce a couple of other points—if people have evidence of their exposure and associated illnesses that are recognized by Veterans Affairs, they have been able to go today, and for any period of time, to Veterans Affairs, make that case, and apply for a pension.

The soil sampling and water sampling were things people called for at the public meeting in Gaagetown. They were concerned about what's there now. We responded by saying we will look at it. We wanted to say to people that we were listening, that we knew they had concerns, and that we were going to test. The value in anything we test now is that any residue or anything of concern over the last three years or four years—and again, I'll confirm that exact timeframe—may indicate to us that maybe we should change something we're doing. Then we could take an appropriate action. But we won't know until we get the results.

So it's not without value. It was also done to respond to concerns raised by people in the community and on the base.

**Mrs. Cheryl Gallant:** They won't be just looking for remnants of Agent Orange; it would be any decomposed—

**Ms. Karen Ellis:** They'll be looking for any...well, it's the herbicides over the last few years that have been sprayed. They'd be looking for any residue of contaminants there.

**Mrs. Cheryl Gallant:** What they would combine to form with other organic solids like trihalomethanes and then the diseases related to that as well.

**Ms. Karen Ellis:** You sound far more expert than I could hope to be. Sorry, I can't comment on chemical compounds.

**The Chair:** Thank you.

As we close, Ms. Ellis, thank you for staying a little bit later.

It seems to me that your responsibilities with Mr. Furlong and what Veterans Affairs is doing are two separate areas

A lot of questions were related to process, Veterans Affairs, and what have you. I don't know if colleagues are aware, but I have this in my office—I don't know if members have it—and it seems to me there are considerable telephone numbers outlining qualifying for

disability pension, IOM, etc., etc. There's a lot of good information here, in both our official languages.

As I said earlier, maybe at a later time we can agree to possibly have Veterans Affairs in here again just to give us an idea of what's happening.

I do want to put on the record that there is access in terms of Veterans Affairs and the allowance.

With that, I'm not going to go into any questions.

I thank you, Ms. Ellis, for being here, and certainly I anticipate that maybe sometime down the road we'll be calling you again.

Colleagues, we'll suspend for a little while.

Thank you.

• (1745)

(Pause)

• (1812)

**The Chair:** We'll reconvene the meeting.

I'd like to introduce our witnesses. We have with us this evening, colleagues, from the Agent Orange Association of Canada, Mr. Kenneth Dobbie, president. We also have with us as individuals Jody Carr, John Chisolm, Wayne H. Cardinal, Gloria Sellar, and Arthur Connolly.

Welcome, ladies and gentlemen. I don't know if everybody's going to speak, so could you give me an idea of who will be speaking, so that we can manage our time well? Will everybody be speaking?

Mr. Chisolm, Mr. Dobbie, and Mr. Carr will be speaking. Mr. Cardinal, will you be speaking, sir? Everybody has a presentation. I have the guests here; I just didn't know if every individual was going to speak.

We're trying to manage our time, as you can appreciate. If we go ten minutes each, we have an hour right there, and then we want to give ample time for the members of the committee to ask questions and receive answers. In your presentations, I'll try to manage the time as well as I can.

First on my list is Mr. Kenneth Dobbie. Would you open up, sir?

**Mr. Kenneth Dobbie (President, Agent Orange Association of Canada):** Yes, I will.

Good evening, Mr. Chairman and committee members. I want to thank the committee for inviting me to testify on behalf of the Agent Orange Association of Canada.

With the committee's permission I will now read my prepared statement, and then I'll answer any questions.

In May of this year I obtained document A-2004-00207 from the freedom of information officer at the Department of National Defence in Ottawa. For brevity, I will refer to document A-2004-00207 as document 207.

Document 207 originally contained 167 pages, but only 82 were actually released; the other pages were withheld. Our government has publicly admitted that from June 14 to June 16, 1966, and from June 21 to June 24, 1967, the American military, in cooperation with DND, sprayed 2,4-D and 2,4,5-T on the training area of CFB Gagetown for a combined total of seven days, covering less than 400 acres. The chemicals 2,4-D and 2,4,5-T were given the names Agent Orange and Agent Purple by the Americans in 1962, when they began their use of these chemicals in Vietnam.

If you will now refer to the pages provided, you will note that pages 83 and 84 of document 207 are entitled "Overview of Herbicide Spray Programme 1956-1984". These two summary pages show that DND sprayed 2,4-D plus 2,4,5-T on almost 49,000 acres in the CFB Gagetown training area from 1956 to 1964. These are the same chemicals the Americans call Agent Orange and Agent Purple.

In 1964 there was a spraying accident that caused the dioxin spray to drift across the Saint John River to farms from Burton to Jemseg, primarily in the Sheffield to Maugerville area, a distance of 29 kilometres. The crops in all these farms were totally destroyed, and the Crown compensated farmers for the loss of their crops by paying them a total of \$250,000 in 1964.

This was not the first time this had happened. According to the August 8, 1964, edition of the Fredericton *Daily Gleaner*, "Meanwhile, Camp Gagetown officials are not too concerned about the situation. One officer said complaints of crop damage were received every year." Mr. Baker, project engineer and local head of Defence Construction Canada, a division of DND, said "Compensation for fair and reasonable crop damage after due investigation has been paid in the past and will be paid in the future." This admission shows that there were similar spraying accidents before 1964. Thus, hundreds and possibly thousands of civilians were exposed and poisoned.

In 1965, for a number of factors, one being the spray accident, DND switched to spraying Tordon 101 for the next 20 years, until 1984. Tordon 101 is what the Americans called Agent White. Tordon 101 is a trademark name of Dow Chemical. It contained a combination of picloram and 2,4-D in a 4:1 ratio. The picloram contained an inert agent called hexachlorobenzene. It has been identified by both the U.S. Agency for Toxic Substances and the World Health Organization as being a persistent bioaccumulative toxin that causes cancer.

The EPA has established that hexachlorobenzene harms the liver, kidneys, blood, and lungs and the nervous, immune, and gastrointestinal systems. Yet for 20 years DND sprayed just over 1.1 million litres of this deadly poison on the training area, where human contact was inevitable.

According to the U.S. Environmental Protection Agency website, "Because Hexachlorobenzene...is persistent and bioaccumulative, it stays in our environment for a long time and contaminates our food chain. Hexachlorobenzene can cause severe health problems for humans...." It damages bones, kidneys, and blood cells. It can harm the immune system. It lowers the survival rate of young children. It can cause abnormal fetal development. It harms the liver and the endocrine and nervous systems, and it may cause cancer.

That's according to the EPA. They're a little soft on that.

•(1815)

Document 207 shows that in 1964 DND invited the Americans to test their chemicals on CFB Gagetown. But because of budget cutbacks, the tests were not carried out until 1966 and 1967.

DND had a spray program in effect for ten years before the Americans came to spray their two and a half barrels, and then DND sprayed for a further 20 years after the Americans had packed their bags and gone home.

So when our government says that the spraying of Agent Orange and Agent Purple only occurred in 1966 and 1967, they are deliberately misleading the public. They are not telling the truth, and their denials are proven untrue by their own documentation.

For 28 years, from 1956 to 1984, DND sprayed more than 1.3 million litres of persistent bioaccumulative toxins—dioxin and hexachlorobenzene—over an area of 181,000 acres of the CFB Gagetown training area.

During the middle to late sixties, the Liberal government started summer jobs across Canada called the Young Canada Works program. Through this program there were hundreds of teenagers employed by the Department of National Defence at CFB Gagetown in the years 1966 to 1969. I was one of them.

One of the main projects in the summer of 1966 was to clear defoliated brush and burn it. In fact, the spraying was ongoing while we were working in the training area. The dead foliage and brush were covered in the deadly dioxin. We worked at this for six weeks. We cut it and we burned it.

We did not have any safety equipment. We were not issued gloves or masks, or any protective clothing. Because of the heat in July and August, while working we usually stripped to the waist. Using our bare hands, we cleared the dead, poisoned brush with machetes and axes. We inhaled the vapours and smoke of the poison when we burned the brush. We absorbed it through our skin. And when it came time to eat, we sat down where we worked and ate our lunches with our bare hands, thus ingesting the dioxin.

I was poisoned, and now many years later my health is very seriously compromised. As a result of my poisoning, I have diabetes, chronic pancreatitis, liver disease, and brain atrophy among other diseases. In late 1966, just four months after I was poisoned, I was diagnosed with peptic ulcers and have had stomach disorders since then. In 1977 I became very ill and was hospitalized and diagnosed with toxic hepatitis after three liver biopsies.

Two liver specialists told me a toxic chemical had poisoned my liver, and I have been ill with liver dysfunction since that time. Throughout the 1980s and 1990s I was ill with various ailments. My health continued to deteriorate, and in 1998 I had my first attack of pancreatitis. I have been hospitalized 17 times in the past seven years, twice this year already, as recently as November 4. I am tested for cancer every three months. My doctors have told me it's not a question of if I develop cancer, it's a question of when. I was in the hospital six times last year and, as I already have alluded to, twice this year already.

Knowing that I had worked with the defoliated brush in 1966, I persisted with my efforts to bring to the government's attention that there were hundreds of other teens I had worked with. I contacted DND in Ottawa, but DND denied categorically that any civilians had ever been exposed.

As a result I became angry, and I decided to make it public that civilians were exposed and poisoned on a massive scale. I contacted the CBC with my story of civilian teenagers being poisoned by Agent Orange. As a result, I have been interviewed many times by the news networks and newspapers across Canada.

People are reporting stories of cancer and debilitating illnesses to the Agent Orange Association of Canada. Because my story and e-mail address were published on Jody Carr's website, I have received e-mails from people all across Canada with horror stories of their families dying of various cancers, organ dysfunctions, neurological disorders, and having miscarriages, birth defects, and so on. The common thread among all these e-mails is that they were all families based at CFB Gagetown during the sixties, seventies, and early eighties.

• (1820)

The training area was not only used for military exercises, as DND would have us believe. It was in fact a recreation area for all the families of military personnel for decades. Families went on picnics, they swam in the lakes, they ate the blueberries, and drank the spring water at the Shirley road. The Camp Gagetown Fish and Game Club had many thousands of members over the years. People hunted the game and ate it. Families ate the trout. Families used to go to the training area and pick bushels of apples at the expropriated farms. Everyone did, because it was an accepted and practised way of life for military families at base Gagetown.

Thousands of children and wives were exposed to and poisoned by dioxin and hexachlorobenzene over a period of almost four decades. Think about that for a moment.

There were boy scout camps in the training area in the summertime. I know, because I took part in two of them, one in 1960 and another in 1961, and the army even issued us with bell tents for our use when we were at the boy scout camps in the training area.

For our government to say that civilians were not exposed to the defoliation chemicals in any way is not only a callous dismissal of fact, but also a heinous lie, and it infuriates and frustrates the people who were there and who are sick.

In conclusion, our government should mirror the Americans' actions and adopt a presumptive clause, including both military and

civilian personnel, awarding compensation to those identified as being at CFB Gagetown during the years of spraying. In addition, our government should establish testing programs, and medical care expenses not covered by medicare, for the sick and dying. Finally, there should be a public inquiry into the poisoning of generations of military and civilian personnel.

I welcome any questions.

• (1825)

**The Chair:** Thank you.

We're going to go to the rest of the witnesses, and then we'll go into questions and answers.

Mr. Carr.

**Mr. Jody Carr (As an Individual):** Thank you very much, Mr. Chairman, and thank you very much to the Standing Committee on National Defence and Veterans Affairs for showing great interest in this issue. It's an issue, of course, of great importance, and we thank you for giving us this time.

My name is Jody Carr, and I'm the member of the legislative assembly for the riding of Oromocto-Gagetown in New Brunswick. I thank you for the invitation to be here today.

Base Gagetown first opened its gates in 1952. The federal government expropriated 20 communities in central southern New Brunswick and created the largest military training base in the Commonwealth. The military is very significant to the local and provincial economy by pouring in over \$500 million per year. We are grateful to have this economic engine. We are proud of our military and the partnership formed over 50 years.

We can no longer, however, stick our heads in the sand and hope the issue of herbicide contamination goes away. The door was opened on the entire spray issue once again at Base Gagetown when it became known in May 2005 that one veteran received approval for compensation from the Department of Veterans Affairs due to exposure to Agent Orange at Base Gagetown. Brigadier-General Sellar and Mrs. Gloria Sellar deserve a great deal of praise for putting up with a long-fought battle of well over a decade before finally getting a disability pension.

When this information broke, I immediately called for compensation to be extended to civilian workers on Base Gagetown, and publicly asked for further studies to be done regarding the entire chemical spray program that started in the early 1950s. I have literally heard from hundreds of people in my constituency of Oromocto-Gagetown and from across Canada who were affected by dioxin-contaminated herbicides used at Base Gagetown. I have learned as well a great deal about the issue of Agent Orange, dioxins, 2,4-D, and 2,4,5-T—sometimes more than I care to.



This is underlying the issue when you see the images on television, but people mistrust government—here's a revelation—and are very skeptical of government, especially regarding this issue, which has been around for over 50 years. The issue first came to light in 1981, when two New Democratic members of Parliament obtained a copy of a U.S. Army report regarding testing of Agent Orange at Base Gagetown in 1966 and 1967. The federal government said then, and said again this year, 25 years later, that Agent Orange was tested on two small test sites, secluded and isolated, with very few people being exposed. I believe the government when they say that.

The problem has become not just the two years of testing in 1966 and 1967, but the years well before and well after, when people were exposed to dioxin-contaminated herbicides under the Base Gagetown herbicide spray program. People felt the issue was put on the back burner 25 years ago, and they are not prepared to let it slip away this time.

“Agent Orange” was the label name given by the Americans in the 1960s to the defoliant containing 2,4-D and 2,4,5-T. The manufacturing of this product resulted in high quantities of dioxin, among other contaminants. Exposure to mixtures of 2,4-D and 2,4,5-T and dioxin results in detrimental illness. Mixtures of 2,4-D and 2,4,5-T, under other brand names, were used prior to the testing of Agent Orange at Base Gagetown. Agent Orange was simply a brand name and a label name.

There is information available that will confirm that the manufacturing of these chemicals—2,4,5-T in particular, especially in the 1950s and early 1960s—resulted in higher concentrations of dioxin. There is also information available regarding the label and brand names of the chemicals used at Base Gagetown, registered and approved by the federal government prior to 1966 from the Department of National Defence.

I have attached copies of the documentation from DND—and I'll provide it to the clerk—provided under access to information, showing these dioxin-laced chemicals were indeed used at Base Gagetown prior to 1966. The evidence is there, clearly, from DND's own records.

I must also mention that these same chemicals and brand names were used by the New Brunswick Power Corporation in the 1950s, and caused detrimental illness to their employees. Statistical studies were done that showed this group of employees did indeed have a higher level of illness that is related to dioxin exposure than the rest of the population. NB Power and the Government of New Brunswick later agreed to a compensation settlement for this exposure.

•(1830)

These chemicals used for defoliation on New Brunswick powerlines did not have the label name “Agent Orange”, but had other label names, such as “Brushkill”, registered again through the federal government. However, all of these chemical mixtures had high concentrations of dioxin and 2,4,5-T.

I must compliment and commend Base Gagetown commander Colonel Ryan Jestin for his work on this file. At the public meeting held June 23 at the base theatre, Colonel Jestin showed great

leadership by making the commitment to study the environmental status of the entire training grounds, not just the two test plots affected in 1966 and 1967, but the entire training grounds. He was the only one on stage that day willing to acknowledge the real issue of the concerns of veterans and civilians surrounding the entire herbicide spray program. The problem was much more than in 1966 and 1967 and much more than Agent Orange. He also recognizes that environment testing will help alleviate concerns among current troops. If the environment test shows higher than normal levels of dioxin, then government will know where and how to remediate the grounds. On the other hand, if there is no sign of higher than normal levels of dioxin, then current troops can have full confidence that they are not being exposed on these training grounds.

Colonel Jestin and others have worked extremely hard on the issue of herbicide contamination within the federal government. I believe he truly wants to get to the bottom of this whole issue once and for all, and get it settled. He deserves our full support.

I want to thank the Minister of Defence, as well, for moving on the issue. He went back to 1952 to review the entire spray program, not just Agent Orange, and it includes veterans and civilians, which is very important. The current process under the former fact-finder was a good start. However, the fact-finder was really only the chair of public meetings. He had no real powers to make recommendations, and the work regarding environmental and health studies was designed by internal committees and officials within government.

I am pleased with the appointment of Dr. Dennis Furlong as lead coordinator. He has credibility, is fair, and is reasonable. Although a former minister of the Conservative government in New Brunswick, he is not partisan. He's a family doctor and knows about confidentiality. However, he must be given the tools to do the job. He must have the powers to make recommendations back to government and say it like it is, good or bad. Greg Thompson, southwest New Brunswick MP, and I put forward nine specific recommendations a month ago that we feel would enhance the current process and provide greater transparency, accountability, and independence, which will lead to fair, fast-track compensation for all victims, both veterans and civilians, exposed to all herbicides, including dioxin-contaminated Agent Orange at Base Gagetown.

The biggest improvement, or most important recommendation, member of Parliament Thompson and I put forward that must be implemented is having a technical review committee made up of outside experts chaired by the independent lead investigator. Ms. Ellis said today that DND was in charge of the overall coordination of the plan. That is a problem. She also said the work has been done by experts, for example, in Health Canada. That is a problem. She says there's a large team focusing on this and that the terms of reference are being done internally by government officials. That is a problem.

An independent technical review committee model, as opposed to a judicial inquiry, would be, on the one hand, retroactive in studying the issue of herbicide use at Base Gagetown from 1952 by investigating the facts and doing the research, but at the same time it would be proactive as well. It would be made up of third party arm's-length technical experts outside of government who would support the lead investigator in his work. At the same time, this team would work with government officials in each of the departments.

I can refer you to the organizational chart that is provided in your packages that shows the difference between the existing review process and one that Carr and Thompson proposed for improvement. It would have the power to make recommendations to government as the work proceeds on how to respond to the findings, and all recommendations would not have to wait until the final report, like a judicial inquiry. This will allow for faster and timely action.

The current role of the fact-finder was not seen as a true investigator overseeing all studies and work. He was in charge of public meetings and hearing the public's concerns, but did not seem to have direct oversight into the planning and design of environment and health studies.

• (1835)

There must be more transparency at the beginning stages of the entire work involved, right from the planning of studies, the designing of terms of references, to executing them. There needs to be input from outside government, third party independent experts who will serve as advisors to the lead investigator, while at the same time working with government officials in each department. For example, in the environmental studies that were referred to earlier, the sampling and the analysis will be finished without third party review. The panel that will be named will not have the powers to review those studies, and this is what we're asking for. This will ensure the highest level of confidence by the Canadian public, but at the same time will see results, progress, and action.

Why not have a full-fledged judicial inquiry? I've included a table that lists, from our point of view—that of myself and Mr. Thompson—the difference between a public inquiry and an independent review, as outlined in our recommendations. Because we've had too many in Ottawa in recent years is one answer, and because it is reactive in nature. Victims would have to wait a couple of years before a final report, before action, if any, is taken. The model Greg Thompson and I are promoting is reactive but also proactive and can fast-track results.

The following are the recommendations Greg Thompson and I put forward on October 13, 2005:

That the federal government recognize the need for early and equitable compensation for all parties where medical entitlements and compensation for exposure to herbicides are the same for all affected by the base's herbicide spray program. Currently affected parties must apply to one of three different compensation programs: if you're a veteran, if you're a civilian federal employee, or if you're a civilian employee working for a private contractor. They have different eligibility requirements and entitlements, depending on their employer at the time of the incident.

Number three: to speed up the compensation process, the federal government must accept the 37 health disorders recognized by the U.S. Department of Veterans Affairs related to herbicide exposure. It was stated earlier that Veterans Affairs has recognized the U.S. veterans affairs criteria for compensation—at least the list of illnesses—but further to that, the federal government must make it known to affected parties what health maladies related to Agent Orange herbicide exposure the Canadian government recognizes for compensation purposes. Currently, this is not known to the public.

To speed up the process the government must release to the public the commercial label name, the manufacturer, the batch number, of all 2,4-D and 2,4,5-T herbicide spray products purchased and used on the base, plus the contractors who were engaged to spray the products, and thereafter seek from the manufacturer the extent of dioxin contamination. This information will quickly lead to extending compensation eligibility prior to 1966 and after 1967.

This information is available now. The federal government approves and registers each of these products, and the Department of National Defence, the Canadian military, as base commander Colonel Jestin said at the public meeting, keeps excellent records. I therefore suggest that this information is available. That is, the commercial label name and the manufacturer, and the batch numbers that have been approved by the department in the federal government. It was the agriculture department, I believe.

Then I mentioned the environmental investigative priority on more testing for dioxins. Currently, there are only 17 of 76 dioxins that are being tested. If there were third party input at the beginning of the design and the planning of these studies, there would be more confidence among the Canadian public.

I will also have tabled with you the list of the remaining recommendations that were made earlier, a month ago.

In summary, perhaps harmful things were done in the past. We cannot change that, but we can help those whose health has been negatively impacted because of those actions of days gone by when health and contamination were not as much of a priority as they are today. People are hurting, and people are dying. Let's do it right, but let's do it fast enough so people can get results and see action and get the help and support they so badly need.

Some have suggested I've championed the issue, but I don't agree. The champions are the people who have suffered and who have been hurt by these chemicals, and the ones who are still alive who keep fighting. The champions are people like Mrs. Sellar, Ken Dobbie, John Chisholm, Wayne Cardinal, Art Connolly, and so many others who are not here today.

• (1840)

A fellow I met with this summer after the public meeting was quite sick and told me his illness was related to the exposure to herbicides. Unfortunately, he died three weeks later. I attended his funeral, and at the cemetery after the burial his wife told me to keep her husband's name alive in the Agent Orange issue.

Because of champions like Murray MaGee, we will not let this issue die. I feel we must all work very hard in helping to rectify 50 years of mistrust and inaction. By working together, we will get to the bottom of this and get on with helping all those who need the government's help.

Thank you.

**The Chair:** Thank you, Mr. Carr.

We'll go to Mr. Chisholm.

**Mr. John Chisholm (As an Individual):** I'll make mine quite brief, because I think most of everything here has been covered.

**The Chair:** What we're trying to do, Mr. Chisholm, with all our witnesses, is to try to give as much time to the members as well, so I'll leave that to your discretion, sir.

**Mr. John Chisholm:** As early as 1956, the Department of National Defence sprayed the herbicides all across the Gagetown training area. The combination of chemicals 2,4-D and 2,4,5-T, that's what Agent Orange really is. It's nothing more, nothing less. Agent Orange was the name that was brought up and invented by the Americans, and it was formerly called "the rainbow chemical". That's what it was formerly called. The only thing is that the mixture of the agents 2,4-D and 2,4,5-T in the early fifties and sixties was a lot more potent than what it was from 1967 on back until the time they quit using it.

On behalf of the Agent Orange Association, I would like to thank Colonel Sellar, a brigadier-general who has passed away, and his wife for the work they have done to bring this out into the open. What I would like to know is, they paid him—God bless his heart, it was good for him to get it—but what about the people who were with him? He was not the only one who was on that test strip. There was a whole company of people with him. Where did they all go?

Now his driver, who was with him everywhere he went, is dying of cancer. He made application to Veterans Affairs, and they turned him down flat. What's wrong with him?

**Mr. Rick Casson:** What was his name, sir?

**Mr. John Chisholm:** Jack Weyman. He was turned down flat. They threw it out. They said there was nothing wrong with him, but he was with Colonel Sellar.

The other thing is, what do we do about all the other people who were out there? This has been going on, and on, and on.

We were in that training area every summer from the time the snow went off the ground until it froze in the winter, and then we were back out again in the middle of the winter. All the time they sprayed that training area, we were in it, from 1956 right through until 1970, until I left there. Today, they don't spend near as much time in the training area as we did back then. When we went there, we stayed out for the whole summer long. Rain, shine, spray, whatever came, we got it, because back then, you were out there and you were doing as you were told to do, and don't ask any questions.

This Agent Orange in these two particular areas that everybody is so tight on, they turn around in those two areas there...we surveyed those areas out. We were out there as flagmen for four days in two different years, and that stuff rained down on us just the same as the worst thunderstorm you've ever seen in your life. When we came home from there every night, you could take your clothes and stand them in the corner.

My first wife died the most horrifying death of cancer you could ever imagine. She washed my clothes every night. What about all the other wives of all the other soldiers who were in that training area? How many of them are sick the same way? How many of them have passed effects on to their kids, and their children's children coming up behind them?

Then there is this Agent Purple, one of the most horrifying chemicals there is known to mankind. It was worse than the mustard gas was during the Second World War. They wouldn't use it in Vietnam, they quit. Yet the Canadian government would allow them to take that and spray it on Camp Gagetown and the people who were in it. Where's the justification? Then they say you had better prove that you were there.

There is just no rhyme or reason to it. Where does one get off? You wonder why people get upset. It's absolutely horrifying when you stop to think about it, when you see the people we see and know, and you see the conditions their bodies are in today, after being in that training area. It's absolutely horrifying to stop and think about it.

I have a friend who is sitting out there on Vancouver Island with half his guts sitting in a bag on the side of his hip. He was with me. He may be alive today, he may be dead tonight. I don't know.

• (1845)

I'll pass my time. Thank you very much.

**The Chair:** Thank you, Mr. Chisholm.

We will go to Mr. Cardinal.

**Mr. Wayne H. Cardinal (As an Individual):** Thank you very much.

I am Wayne Cardinal. I have 40 years of service, counting my regular force and reserves, so I've seen a few changes in the military. I am also one of those old veterans, like John there, who assisted the base commander of CFB Gagetown in locating sites.

Since 1956 the Department of National Defence and the Government of Canada lied to the soldiers of the 1st and 2nd Battalions of the Black Watch Regiment. During these years, the artillery regiment and other units trained at CFB Gagetown. We, the few survivors of this dying regiment, are suffering from numerous illnesses related to exposure to dioxins. During the 1980s, former soldiers tried to expose the use of dioxins at CFB Gagetown to the media. High-ranking military officials at the base hushed these statements by saying the soldiers were crazy for suggesting they were in poor health because of dioxin exposure.

As already stated, claims of dioxin-related illnesses were awarded only once, to a high-ranking Black Watch officer who became very ill: Mrs. Sellar's husband, who I served under at one time, and a fine officer he was.

Our commanding officers ordered us to train in the CFB Gagetown training area during the commencement of the spray programs. We had no choice. We were training to fight the Cold War. At the time, we did not know we were being poisoned by the deadly form of dioxins purchased by our own government. We did not know this until we and a few fellow soldiers became ill with dioxin-exposure-related illnesses. We were not told about the dangers of dioxin after the federal government paid settlements to the farmers on the Sheffield, New Brunswick, side of the river for damage to crops.

At the time, our medical records were poorly kept. Signs of dioxin-related illnesses were often not recorded. The Department of National Defence admission to spraying Agent Orange on the test strip in 1966 and 1967 is not good enough. It's not.

We, the surviving Black Watch soldiers and other units, want to be compensated until present for the times we were exposed to dioxins used as part of the yearly spray programs. This compensation, in the form of pension, must also be extended to the widows or dependants, if the widows of deceased Black Watch and other unit soldiers have died of dioxin-related illnesses.

As soldiers, we trained on the ground. Part of our training was digging trenches and latrines in sprayed areas. At the time the base was sprayed, we would patrol throughout the training area on foot. During these training exercises at CFB Gagetown, we cooked our food, ate our meals, filled our canteens from the springs, and slept in improvised shelters throughout the areas that were sprayed by herbicides. There was absolutely no coordination at any time between the spray program and us on the ground. None. If you got caught when they were spraying, so sad, too bad.

While training at CFB Gagetown, we were not issued protective clothing during the spray program, because we were told the herbicides used were not harmful to humans. At times, we trained in the area for many months of the year. The survivors believed that the environment had not absorbed the defoliant in the spray program areas. The herbicides often dripped off the trees onto our clothes. We breathed the air while spraying occurred in other sections of the training area, and we were sprayed while training. The federal government has admitted to the drifting of spray that occurred. As a result, soldiers might have breathed in dioxin sprayed miles away, without knowing we were in danger.

Most veterans I have spoken to—and I have spoken to a lot of veterans in the last year—have totally lost faith and trust in the government on this issue. It's been covered up; it's been lied about. There are more taxpayer dollars being wasted trying to prove us wrong.

These men and women of the Cold War years served you faithfully, with great discipline, honesty, and great pride: an outstanding generation of soldiers. I'm a retired sergeant-major, and you can take my word on that.

**A voice:** And a good one.

**Mr. Wayne H. Cardinal:** Thank you, Madam.

The DVA has made it next to impossible for any claim—narrowing it down to those two little test strips of 1966 and 1967—and their statement saying “prove it”.

• (1850)

You may ask me questions later. I'll tell you how hard it is for us to prove it when they can't even search the archives and find their own information correctly.

I have a very quick and true story about a very good friend of mine. I will not repeat his serial number or file number for security reasons; however, he's given me permission to use his name. This is just one of very many, ladies and gentlemen.

Ernest Simmons is a wartime Korean vet. He joined the Black Watch between 19 and 20 years of age.

He served in your husband's battalion, ma'am, by the way.

In 1965 Ernie re-mustered to the 3 Service Battalion as a truck driver. He picked up and delivered full barrels of herbicide from the Blissville airport, the legendary Agent Orange airport, and the Enniskillen, and delivered them to sites as was the manner in other locations, where the planes and choppers were taking off to do their spraying work. And then he took the empty drums to the dump site or to whatever site they told him to drop them off at.

He has been fighting this claim for 29 years—29 years. His lungs are burnt. His specialist agrees his lungs were burnt by exposure to Agent Orange. The first time the DVA reviewed his case, they agreed with him. It got as far as P.E.I., and they just simply told him there was not enough proof that Agent Orange could have done that to him.

The only reason his file is back on the records now is because of this lady. It's been sitting there for the last four months, and still nothing has been said to Ernest. This man is very, very sick. He's another one of the veterans assisting us, by the way, on the location of barrels. He is one of many who are very sick.

Former soldiers believe it would be in the best interests of both parties that the federal government follow the U.S. government's decision to accept a presumptive policy on dioxin exposure. Former soldiers would have to prove they served in areas at the time of the spraying of dioxin in CFB Gagetown that may have resulted in exposure. The burden of proof would be limited to the circumstances surrounding the exposure sites. As a result, the expense of lengthy pension hearings, appeals, and all the other stuff going on could and would be eliminated.

Just to note, the figures I gave you on this sheet for the regiment that I started out in, in the regular force, the Black Watch regiment, are incorrect. I will give you the correction verbally. In the last two years, we have lost over 200 veterans, most of them with cancer, diabetes, and heart problems.

The DVA seems to be looking at a much different health-related list—which I also gave you—from the one I am in relationship to documents. This list is approved by the IOM, which seems to be the gospel for the present government.

It seems to me, and I was never a politician, because soldiers were not allowed that privilege—I am allowed the privilege to vote—there's a lot of money being spent by the current government in power on a lot of issues, rightly or wrongly, and that's not for me to decide. There are a lot of issues where people are simply sick, not dying.

This chemical has killed thousands of people, and we were never told about it. The veterans are really upset and ugly over this. You can take my word on that.

Thank you very much for hearing my presentation.

•(1855)

**The Chair:** Before we go to Ms. Sellar, I've been advised that she has some documents with respect to her late husband's case that she would like to distribute to the committee members, with your permission, of course.

If I understand correctly, Ms. Sellar, they're in only one of our official languages—English.

**Mrs. Gloria Sellar (As an Individual):** I do apologize that they're only in English. I did not receive my invitation to attend this meeting until last night, and my printer and I worked most of the night doing what we have. Neither he nor I could translate them properly, so I just brought them along, hopefully. I would very much like the members to see them.

Included in this are some protected private papers from the Department of Veterans Affairs. They include his submission to them and doctors' letters. In his submission, I also included a five-page letter, handwritten. This is very important, because the block that Veterans Affairs allows you is not big enough for a soldier to write down all the things that he can.

I was invited by the regiment to speak at the Black Watch reunion in Aldershot, Nova Scotia. There were 900 people attending. They had it in a drill hall because there were so many. I went over all of this procedure with them and explained things that they had to do to sort of push this thing along.

Some of them are incapable of filling these out properly. There is a school teacher in Oromocto and there are several other people who have volunteered their services to help in the writing of these summaries. It's pretty touching business.

**The Chair:** Permit me then to put the question to the committee members. As you can appreciate, we have rules and regulations that I, as the chair, have to abide by.

With the unanimous consent of the committee, I would kindly request that they accept the presentation as is—although we always request that everything be presented in both our official languages. That not being the case, we will be prepared to take the document and have it translated and we will make sure that the members get a copy.

So, colleagues, I put the question to you. Will you permit Mrs. Sellar to pass around the document that she has with her? We understand the circumstances of why it is not translated into our second official language. I am at your pleasure.

Is there unanimous consent?

Monsieur Bachand.

[*Translation*]

**Mr. Claude Bachand:** Mr. Chairman, the situation is so moving that it's impossible for me to deny the lady's request. I agree to circulate the document.

Moreover, the lady has an excuse: she doesn't belong to a government agency or department. She may have got around to it too late or may not have known that she had to present her document in both official languages. I would simply say to her that it would have been very much appreciated if her document had been in both

official languages. However, in view of the situation, I pardon her because it wasn't my intention to alienate people we want to defend. So I agree to allow the document to circulate.

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

[*English*]

I assume we have unanimous consent, colleagues, to have the document circulated.

**Some hon. members:** Agreed.

**The Chair:** Then we'll ask the clerk to pass the document around.

As that is being passed around, the floor is yours, Mrs. Sellar, to present the committee your testimony.

**Mrs. Gloria Sellar:** All right.

I researched this for 15 years. I went to Veterans Affairs in the United States, Veterans of the Vietnam War, and also to the National Academy of Sciences, who I believe informs the American nation of their welfare and health.

Four months after my husband died, I was diagnosed with breast cancer. Knowing that I might not survive the surgery and that all of my research would go into the shredder, I decided to publish. It was one of my husband's dying wishes that the men under him should receive a pensionable benefit, as he had.

Greg Weston, a family friend, is Sun Media's national political columnist. He came to Kingston and gave me a day of his time, and the groundbreaking result appeared mid-May 2004 in 148 newspapers across Canada. We would have had more coverage, but Belinda Stronach crossed the floor.

**Some hon. members:** Oh, oh!

**Mrs. Gloria Sellar:** And she rather took away all the press people and brought them here to Ottawa.

Forty years after the American military was allowed to test-bomb a New Brunswick army base with deadly Agent Orange herbicide, the Canadian government finally admitted that veterans were dying as a result of being poisoned. The Department of National Defence has confirmed that U.S. forces doused forested areas of the Gagetown base with that infamous chemical defoliant, testing it for clearing jungle during the Vietnam War.

The story tells about Agent Orange being linked to a horrifying array of cancers and to blindness among U.S. veterans, and about children of veterans being born with hopeless deformities. But for decades the Canadian military refused to acknowledge that the Gagetown horror ever happened—much less admit any connection between Agent Orange and sick veterans.

To quote the Sun Media story:

Sun Media has now learned that 10 months ago, for the first time in four decades, the government quietly accepted a medical compensation claim from a retired Canadian brigadier-general stricken with leukemia.

It goes on to say that Gordon Sellar, a decorated officer of foreign wars with the Calgary Highlanders, rose to the top of the Canadian military. But during that storied career, he also commanded the Black Watch at Camp Gagetown at the time the U.S. was poisoning the place with Agent Orange.

In a landmark decision, the Department of Veterans Affairs ruled that Sellar's cancer was caused by his exposure to Agent Orange. The department's confidential memorandum stated, "The department is aware that Agent Orange was used as a herbicide for defoliation on the training grounds of CFB Gagetown".

I have copies of these private and personal papers, which you may read later.

The memorandum continued:

The department accepts the medical opinion (of Sellar's doctors) and the results of published U.S. medical research that establishes a causative relationship between Agent Orange exposure and the development of his chronic lymphocytic leukemia.

The decision was so strong and unequivocal that it provided the maximum possible pension compensation.

More significantly—and this is important, and why I did this—it should open the door to similar claims from potentially thousands of other sick and dying Canadian veterans exposed to Agent Orange at Gagetown.

An official at Veterans Affairs admitted that the department had done nothing to publicize the Sellar decision, nor reach out to help victims of Agent Orange—and that's why I have done this. If so, the Sellar decision will stand as a fitting final salute to a revered general who cared so deeply about the men in his command, a soldier who would have done anything to spare others the medical misery wrought upon their ranks. A decorated war hero who survived the bloody battlefields of Europe and Korea, it was surely beyond cruel that he should be felled on a chemical killing field at his own base.

On October 4, 2004, two weeks after the first compensation appeared in his pension cheque, the general lost his final battle, a 15-year fight with cancer that he had inherited from Agent Orange.

● (1900)

The Sun Media story goes on to say that I was with him through all of this, which I was. We had been married 60 years and were terribly in love with each other.

This is a quote: "If Agent Orange belongs to anyone in this country, it is to this elegant lady of steely tenacity for whom even the indomitable defence bureaucracy was no match".

The first time I saw the chemical drums with their orange stripes was when they were in U.S. Army trucks parked at the Oromocto Hotel next to the Gagetown base. They were also close to the village and beside the married quarters. We were between houses, moving from one to another, so we had one night in the hotel. The American soldiers were staying there too, and would come in in the evening filthy dirty. It was no secret what they were doing, but of course no one realized the potential of what was happening.

My son asked, why are you killing all the trees, and the reply was, "This is one of the most heavily forested areas in North America, and

if we kill the trees it will also make it easier for the tanks to get through." That was the answer he got.

Gordon Sellar began his fighting career overseas in World War II with the Calgary Highlanders. By the time he reached Gagetown in 1963, he was a colonel and commanding officer of the 1st Battalion of the Black Watch, with more than a thousand men under him. They were up to strength. There was also a complete brigade there.

Would there be at least 5,000 in a brigade?

● (1905)

**Mr. Wayne H. Cardinal:** Or more, ma'am.

**Mrs. Gloria Sellar:** Yes, more than that.

**Mr. Wayne H. Cardinal:** There are 12 to 14 in most major exercises.

**Mrs. Gloria Sellar:** Yes, and people constantly coming and going for periods of time.

Like all infantry in training, they probably spent more time on their bellies than on their feet, and little did they know that they were crawling through an invisible swamp of deadly poison. I quote from an official memo that he would write later:

We exercised for lengthy, concentrated periods in the contaminated areas. We lived on the ground in camp and trained both day and night. Our food was prepared there in areas that had been defoliated. We did not know it was Agent Orange.

As always, Gordon kept in top physical shape, until one day early in the 1990s when he began to have dizzy spells. A simple blood test revealed the horrible truth. He had a form of cancer that would go right through his body, and it was definitely a death sentence. By then, the effects of the odious Vietnam herbicide were being loudly debated in the U.S., with hundreds of thousands of vets on a special government health watch.

Before long, I put it all together with the barrels, the soldiers, and the Oromocto Hotel. We were shattered by this. I said to our family doctor that my husband had been exposed to Agent Orange. "Oh," he said—he knew nothing about it.

There's a huge dining room table that's covered with stacks of books, research papers, and correspondence. All of this is my ammunition in my arsenal, a 15-year campaign to bring sense to the unthinkable—my husband's slow decline into a medical hell not of his own making.

The story goes on to describe the pneumonia and the tumours. They started on the exposed parts of his body, which I think is perhaps reasonably common. He was having blood transfusions, and the cancer was so serious that, really, our trips to the cancer centre were almost daily.

When I spoke to these soldiers in Aldershot, they told me the most horrible stories. Some of them were in tears. One—and I had to tell him I had a breast off before he could really open up and talk to me—said his penis is covered with terrible sores that are untreatable and incurable, as is his bottom. When a soldier is on exercise and goes out into the area and has to empty himself, of course he goes into the bush or back into the trees to try to give himself a little privacy, and his pants come down. Now he's being exposed. There are all sorts of other diseases that we know about, but this is a very common thing, and the cause of many masculine disorders that have occurred because of this.

Every time I went to Veterans Affairs I would always ask them about Agent Orange, and they all said that nothing was being done about it at that time. I couldn't understand why it was not being recognized by the Canadian government, the same government that let the Americans spray it all over Gagetown—and what about all the thousands of other men exposed?

I started burying Veterans Affairs in letters and thick files of information. They were actually very good with me. They seemed quite surprised by some of the information I was giving them, but everything moved very slowly—everything except my husband's cancer.

By 2000 he was in a wheelchair, and we had to sell our house and everything and move into the city so that he could be within two blocks of a hospital. In 2003 he entered a chronic care hospital to recover from an emergency hernia operation, and he would never go home.

Despite virtually moving into the hospital with him, I sort of quietly kept up this little crusade. All I wanted was the simple recognition that Agent Orange was killing my husband and many, many others like him. I tracked down members of the Black Watch who had served under him. Many were sick; many more had died. All were afraid to talk about the dirty secret of Gagetown.

The Canadian defence department was not helping. As late as February 2004, the Canadian military posted a stunning health bulletin on its government website. By then, more than 10,000 American veterans of the Vietnam War were in active treatment for cancers and other diseases related to Agent Orange. Another 312,000 were under medical surveillance. Yet the Canadian bulletin stated that extensive research had concluded that Agent Orange was unlikely to be the cause of the Vietnam veterans' symptoms or illnesses.

•(1910)

Only months after the bulletin was issued, I did win my case with Veterans Affairs for my husband. The government finally acknowledged that Agent Orange had indeed given my husband terminal cancer. He died a few weeks later.

Gordon Sellar's funeral attracted some of Canada's finest soldiers. One of them had been a young lieutenant in the Black Watch at Gagetown during the Agent Orange tests. Someone asked him how he was doing. It was my daughter, and he said not too well. He said he had throat cancer and didn't know why he had it because he had never smoked. This man also served as an infantry officer in Vietnam, so he would have been in the field.

Five months ago he submitted his application to Veterans Affairs. It came back yesterday declined, in spite of having a doctor's letter to say that this was a causal factor.

Gordon Sellar lost his youth fighting in the battles across France, Belgium, Holland, and Germany. A hero for the Battle of Walcheren, he has the Dutch medal. Three days after the war ended in Germany he was on a truck bound for the French coast and passage to Canada en route to the U.S. and the war in the Pacific that was still raging. He served in Korea as well and has the Korean medal. He had a brilliant military career, always giving 100% of himself. He retired as an admired and highly respected general who had given his all to the service of his country and the men under him, little knowing that Agent Orange, an unseen enemy, would take his senior years in the worst battle of his life.

**The Chair:** Thank you very much, Mrs. Sellar.

We'll go to Mr. Connolly

**Mrs. Gloria Sellar:** I hope there will be lots of questions.

**Mr. Arthur Connolly (As an Individual):** Mr. Chair and members of the committee, there has been significant media coverage regarding the spraying of defoliants at CFB Gagetown, New Brunswick.

I welcome this opportunity as the webmaster for [www.agentorangealert.com](http://www.agentorangealert.com). First, I will explain how I became involved with this story. Second, I will explain what people affected have experienced and their perceptions of the effort being made by the Department of National Defence and Veterans Affairs. Third, I will make recommendations that may assist in coming to a resolution of this issue.

In May of this year the Canadian media reported that Agent Orange was sprayed at Canadian Forces Base Gagetown during 1966 and 1967. In 1966 I was a 12-year-old boy living at CFB Gagetown. I lived there with my parents and four siblings.

The timing of this story's release was ironic, in that it appeared one week before my father's death. My dad, Master Warrant Officer Owen Connolly, proudly served 26 years in the military.

It had been reported that the herbicide combination of 2,4-D and 2,4,5-T, commonly known as Agent Orange, was sprayed for a total of seven days during 1966 and 1967 at CFB Gagetown. My beautiful baby brother was born August 17, 1966, two months after the spraying in 1966. On September 18, 1973, my brother died at seven years of age of Reye's syndrome. There was at least one theory that there was a connection between Agent Orange and Reye's syndrome. My brother's death was the pivotal point in my family's existence. My family would never be the same. I watched my parents bury their child. No parent should ever have to outlive a child. It's not natural. It is cruel.

In March 1983 my 27-year-old pregnant sister died. We lost the baby as well.

Defoliant chemicals have been associated with circulatory diseases. Another sister suffers from endometriosis, and had a miscarriage—again, both associated with defoliant chemicals.

In 1990 my mother was diagnosed with stomach cancer. Her stomach was removed by a gastrectomy. Defoliant chemicals have been associated with stomach cancer.

My father died on May 24 of this year. In my father's later years his health problems included congestive heart failure, emphysema, and gout. His bone marrow could not produce enough red blood cells, which caused a low hemoglobin count. He suffered from chronic obstructive pulmonary disease. He was restricted to using oxygen and a prescribed litany of medications. All of these symptoms are associated with defoliant chemicals.

After my father's death, I obtained a DND document—which Mr. Dobbie has obtained as well—through access to information. This document proves that over 1.3 million litres of deadly dioxin and hexachlorobenzene-laced defoliant were sprayed at Gagetown between the years of 1956 and 1984.

On June 9, 2005, I created and published the website [www.agentorangealert.com](http://www.agentorangealert.com) with the intention of sharing my knowledge and hoping that others would do the same. The response was overwhelming. There have been over 750,000 hits at this website since June. CBC radio and numerous radio call-in shows have interviewed me, as well as the CBC national news. There have been numerous newspaper interviews, including one interview in Vietnam, featuring my story as well as the website.

This story has an international interest. This is not local to New Brunswick. The world is watching what we as a nation will do. The powerful thing about this website is the hundreds of e-mails I receive with stories of hurt, of anger, of pain, and the feeling of betrayal.

One woman wrote to tell me how her family farm was expropriated for the base. She remembers the soldiers training in her pastures. She remembers walking down the road by the Blissville airport with other children picking the blueberries. She remembers a plane going overhead spraying. But she remembers mostly the day her little sister came into the house crying because all the birds lay in their yard, dead.

●(1915)

One man wrote of how his younger brother contracted a spinal cancer. His doctors were baffled. They couldn't figure it out. He was a young man. Seven years later he died, because he had to have emergency surgery. This man's 15-year-old teenage sister had a massive benign brain tumour. She had to have brain surgery. He said to me, "Art, I can't figure this out". He said, "I have 20 aunts and uncles. All of them are healthy. All of their children are healthy. The only ones that are sick are us here in Gagetown. It just doesn't make sense."

A common trait is what I call the ripple effect. This is the turmoil of trying to understand why things are happening to your family. What did we do wrong? Why is this happening to us? The stories of heartache and despair, along with the stories of drug and alcohol addiction, are heart-wrenching. After nearly 50 years, victims now know that the rumours that were whispered were true: Agent Orange, Agent Purple, and Agent White were sprayed.

This information was not provided freely by DND. If it hadn't been for the Access to Information Act, it is almost certain that it would still remain pretty quiet and secret. People are feeling anger, disgust, disillusionment, and betrayal by the Department of National Defence and government.

When the information became public, DND and the government appeared to go into denial mode. They would speak of 1966 to 1967 only. DND created the base fact-finding mission. People feel that it's merely a public relations exercise. The original coordinator of the project resigned. I was going to say that as of yet, that person has not been replaced, but...timing is everything. That was yesterday. They were replaced. The fact that the fact-finding project is run by the Department of National Defence and not a third party makes us suspect.

Mr. MacKenzie, as a former police officer, how many of the accused were in the investigation? None, I'm sure.

DND is testing soil and water at CFB Gagetown. Before testing was completed, they proudly announced that they were going to build a \$17.2 million single barracks. For the love of God, would you not find out if it's toxic before you start sending more young people there? It makes it appear that they already know what the results of that thing are going to be. You don't build buildings if you're not sure. It would be like your coming to my house and saying, "Art, you have mould all over your house", and my saying, "Great, while you're testing, I'm going to put an addition on it". It just doesn't make sense.

DND and Veterans Affairs along with the federal government are saying that veterans can apply for disability pensions, and civilian employees can apply for workers' compensation. There's no mention of the wives, the children, and the non-employee civilian neighbours. Until recently, Veterans Affairs was asking those veterans who called for a disability pension application, "Would it be all right if we had someone from the Department of National Defence call you?" This was perceived by many as a scare tactic. They sent out 920 applications and got 90 back. What's wrong with that picture? That's a very low return.

The perception is that the Department of National Defence and the Government of Canada are not being truthful and forthright about this tragedy. As we all know, perception is reality. It has been proven that DND sprayed deadly dioxins and hexachlorobenzene-laced defoliant from 1956 to 1984 at Gagetown. DND did not volunteer this information. DND did not take the opportunity to divulge information about the other defoliants when first questioned about Agent Orange. It is the opinion of many that DND was not transparent in any sense of the word.



DND is now asking the world to believe it is being up front. DND's previous actions have spoken much louder than present-day words. Those who are sick and those who have lost loved ones will not believe them, based on those past actions. The public will never believe the effort being put forth to resolve the situation as long as DND is leading that effort. The effort must be carried out by a third party. DND has lost its credibility in the eyes of the sick, the survivors, and the general public.

I would like to recommend to this committee that a public inquiry is in order and that consideration should be given to adopting the American-style presumptive clause for pension determination.

•(1920)

We do not need to reinvent the wheel. There are veterans and people who are very sick. Please don't make them wait. Dioxin testing should be made available for those requesting it.

One compensation plan should be in effect for all. Grief and psychological counselling should be made available. Medical assistance should also be available for those requesting it.

One more thing: an apology would go a long way.

I thank you for the opportunity to speak. I thank you for listening. I pray that you help us do the right thing.

**The Chair:** Thank you, Mr. Connolly.

Thank you, all. This is a very unusual committee meeting. It's normally not typical that we have six presenters all at once, but it's also a very unusual issue, an important issue that we're dealing with.

With the patience of all the members, we're going to go into questions. We'll start with Mr. MacKenzie.

It is our first round, Mr. MacKenzie, and as you know very well, we have seven minutes between questions and answers, but we're going to exercise as much flexibility as we can.

**Mr. Dave MacKenzie:** Thank you, Mr. Chair.

Certainly, thank you to each and every one of you for being here. I know this committee would offer that apology to you and extend that to the people who were there, but I don't think that's enough. I don't think that's exactly what you're talking about.

I guess we have that sense in hearing from you people and what we've heard from other constituents across the country who have talked to us that there's this total culture of secrecy that exists within DND with respect to these types of things. I might say that last week at home, when I heard people who came back from the Second World War who suffered from a variety of things, they ran through the same issues of trying to get through that maze of secrecy: their records were not available to them from people who served time and ended up in prisoner-of-war camps or were subject to chemical things of a different nature. This culture of secrecy certainly seems to have continued.

Mr. Connolly, I'd like to ask you first, because you have indicated that you host the website, have you heard from anyone who's had a good experience in dealing with DND and being able to access the information freely?

•(1925)

**Mr. Arthur Connolly:** No, plain and simple. No. I've received hundreds of e-mails. All of them have been stories of grief, of sadness. I have had no one say "I've had a great experience with DVA or DND".

**Mr. Dave MacKenzie:** I take it that you're also savvy on computers. If you weren't, you wouldn't have.... Have you been able to access the information yourself, Canadian information, posted by the Government of Canada or any of its agencies?

**Mr. Arthur Connolly:** I have gone to some of the sites. I've gone to Health Canada and I've gone to the Department of National Defence. I've also gone to the base fact-finding one. I find the base fact-finding project one to be very amateurish. I believe it's probably put together by a high-school kid. It's outdated, and that's the worst thing about any website. For the most part, the government websites don't really give a lot of information. It's more propaganda, I guess would be the word.

**Mr. Dave MacKenzie:** Mrs. Sellar, I looked at your material very quickly. I haven't had a chance to read it all. It's interesting that most of the information you have attached here comes from American sources.

**Mrs. Gloria Sellar:** Well, that's where a lot of it came from, but I have a box full of other papers that are coming to you. Some of it has come from the CBC. The Americans, of course, are streaks ahead of us in this, but they're also dealing with the same subject.

**Mr. Dave MacKenzie:** That's I guess what my question is, not so much what the press might have out there, but when you started to research for your husband, you had to go to American sources.

**Mrs. Gloria Sellar:** Yes, I did.

**Mr. Dave MacKenzie:** Have you been able to find any of that same information posted on Canadian websites, government websites?

**Mrs. Gloria Sellar:** No, not on government websites at all. Veterans Affairs Canada, to the average soldier, is inaccessible. If you try to phone them, you get Kirkland Lake. You cannot phone your local office of Veterans Affairs Canada. Kirkland Lake will then phone your department and a person there will call you back, maybe today, maybe tomorrow, whatever. If you're a soldier living in some outport in Newfoundland or Cape Breton, your nearest Veterans Affairs Canada office may be 100 miles or 200 miles away.

If they could just be reached on the telephone directly, it would save a great deal of agony. Most people just give up. They say, "I can't do this, I can't get anyone." These people don't own computers.

**Mr. Dave MacKenzie:** No; I think that's fair.

The other issue, and I think Mr. Connolly brought it up, is about the concern and fear in some people's minds, legitimately or otherwise, about DND people being involved when a claim is made.

Mr. Dobbie, I think you have an interesting comment with respect to your telephone after having a conversation with someone.

**Mr. Kenneth Dobbie:** Yes, I met Mrs. Sellar by accident in Kingston. We had been really trying to get in touch with each other over a period of weeks, and we had a very lengthy discussion on our first meeting. It was very productive. We shared a lot of stories.

The following day the telephone system in my house went down completely. I have five phones; none of the jacks were working, and I ascertained that they weren't working. I called Bell Canada for a repair crew. They appeared the next morning, they went through the house, and they said that there was nothing wrong internally, that it was an external problem. They went outside the house and checked the lines, and there was nothing wrong there.

They said then that they had to go to a junction box that was located approximately two kilometres from my home and there were thousands of telephone lines in it. They called me back about half an hour later, and they told me that my telephone line had been disconnected from my jack and put into another one and that particular jack had no number; it was not supposed to be live but was live.

I can only come to the conclusion that someone tampered with my phone line. I can't say who that was, but I found it very suspicious. I asked Bell Canada management to put a trace on my line. They said they would do it over a period of three months with three random tests, so if anybody was recording any conversations I was having on behalf of the Agent Orange Association of Canada or with other people like Mrs. Sellar and Art and so on, they would be caught, but I have not heard anything back.

• (1930)

**Mr. Dave MacKenzie:** Mr. Chisholm, you indicated there were a couple of people you're aware of who served with you and Mrs. Sellar's husband who have applied for pensions. Have you any knowledge of people in the same boat who have received a pension as a result of it?

**Mr. John Chisholm:** Nobody—well, Colonel Sellar is the only one. Everybody else is top secret. Of all the applications that have been sent in, there have only been four who have been proved for Agent Orange. Nobody knows who they are except for the one.

I have prostate cancer. I was operated on ten years ago and it was taken out. This year I went back in and they had to do the same thing all over; I got cancer back. I have lung and heart problems, and now from what I understand I have something else wrong in here because I have dizzy spells and I pass out on the floor. I have a pacemaker in me that's been there since 1977; it's been changed three times. I'm on a breathing machine when I'm home to keep me going. That's what I live with every day.

My application is gone. Nobody knows where it's at.

**Mr. Dave MacKenzie:** You haven't been able to find out where it's at?

**Mr. John Chisolm:** No.

**The Chair:** When was your application submitted, Mr. Chisholm?

**Mr. John Chisolm:** Last June.

**The Chair:** Monsieur Bachand.

**Mr. Claude Bachand:** You'll need your translation device if you don't understand French.

[Translation]

First of all, I congratulate you on your presentations.

The Chair said we rarely hear presentations like that. That's true, but we've taken the time to listen to you because this situation, at least in my view, is a tragedy. You made moving presentations on the way things are in your everyday lives.

We can't all question you. As you know, the first round lasts seven minutes, including questions and answers. We can't speak for very long. I just want to express a few thoughts. Then I'll ask you a question on an action plan that should be prepared.

You mustn't think you're the only ones fighting the big machine of National Defence and Veterans Affairs. I'm speaking on behalf of the Bloc québécois: all Bloc québécois members believe your story and want to help you.

I looked at the main documents, and one of them in particular struck me, and I had it confirmed by Mr. Connolly. It's a document that he sent to us and that is part of an inventory of everything that was done by the Department of National Defence. I liked it very much because it starts with a quotation from Jean Rostand, a great French philosopher. You start by saying: "The obligation to endure gives us the right to know." Jean Rostand previously said: "Freedom of the mind, respect for man, love of the truth..." A lot of people, like you, are looking for the truth.

What really struck me was the difference between the National Defence version and pages 83 and 84 of the document. For everyone's information, Mr. Chairman, here we're talking about various years, from 1956 to 1984. We're talking about the number of acres per year over which the agent was spread, as well as the number of barrels. At the end, Ms. Ellis said that this only occurred in 1966 and 1967, that only 2.5 barrels were spread, and only over a few acres within the perimeter of Goose Bay. However, when you add up everything that was done from 1956 to 1984 — and this is a National Defence document — it comes to 181,000 acres where the agent was spread, 1.3 million litres and 6,500 barrels. The 2.5 barrels were barrels of one million or 100,000 litres. There's really a big difference.

I'm trying to see how we can help you. Some things are very important. As I said earlier, it seems to me we should insist on the presumption of exposure, not only in the case of veterans, soldiers, but also in the case of civilians. I'm troubled about the fate of civilians. A soldier can at least call the Department of Veterans Affairs and say that he was there in a particular year and that he was a victim. Who can the poor civilian call? The Department of Veterans Affairs? No. He'll have trouble finding his way around there. I have something for you, Mr. Carr. So the presumption of exposure should apply to everyone, military and civilians, and there should be compensation.

As regards civilians, Mr. Carr, you could draw on what Mr. Dobbie did with his law firm, Merchant Law Group. In your case, you're filing a class action suit. You're a provincial MLA. Who's currently paying for the health care of civilians who are in trouble, if it's not your government back home? You should tell your provincial government to sue the federal government for all it cost it to assist civilians. Where are they now? They're in your hospitals, without any compensation.

Lastly, Mr. Connolly, there's something else. I think it's too late for the Carr-Thompson plan. The government won't change its plan. However, you say in your brief that a lot of people are reluctant to come forward because they have pensions and are afraid of losing them.

●(1935)

If I were in your shoes, I'd insist that the government change its action plan and include a provision that all those who express their opinion won't suffer reprisals.

So I see a three-point plan: first, the presumption of exposure for everyone; second, I suggest negotiations between the provincial and federal governments on civilian compensation; third, I suggest that the action plan be amended to ensure that all those who express their opinions are not victims of counter-attacks or low blows intended to punish them.

I'd like someone to react to my three-point action plan so we can see where matters stand.

[English]

**The Chair:** He's only left you about two minutes.

**Mr. Claude Bachand:** It's yes or no.

**Some hon. members:** Oh, oh!

**Mr. Claude Bachand:** It's yes for everybody?

**A voice:** Oh, yes.

**Mr. Claude Bachand:** My time is done, sir.

**The Chair:** No, there's a time for a response.

**Mr. Arthur Connolly:** I'd like to point out that one way you could do that is to have the public inquiry. That may eliminate the fear on the part of some of the veterans coming forward, because apparently there are people, as we have heard through the Agent Orange Association of Canada, that there are a lot of veterans out there with information but they will not come forward unless they are protected. There are also government of Canada employees who will not come forward because they are not protected under a public inquiry.

**Mrs. Gloria Sellar:** The government put out a paper to people who were gassed in Suffield, Ottawa, and places like that. My husband was actually part of the biological and chemical testing in Camp Borden, which is highly classified. However, they did send me all the information. I didn't write back or take part in it because on the back page it said—I have it and I should have brought it—that if you did accept the \$22,000 from the government, you would not at any time ever attempt to get anything from them again. Well, for a veteran who's going to need a wheelchair, who may have to be in a chronic care hospital, who may have to have a raised toilet seat or a

walker, and all these things, that would automatically exclude him from those things, do you not think?

●(1940)

**The Chair:** It was a one lump sum payment offer of \$22,000?

**Mrs. Gloria Sellar:** Yes, they were all given a lump sum of \$22,000 or \$24,000, and once they signed for it, then they lost all of their ability to ever ask the government for any assistance again. I thought it was a cheap shot.

**The Chair:** Are there any other comments in response to Mr. Bachand's question?

**Mr. Kenneth Dobbie:** I can tell you as a civilian that there was a process put into place by DND for civilians claiming compensation. One way was to apply to the New Brunswick workers' compensation board, and the other was of course through federal employees' compensation.

I've looked at both as a civilian and I've downloaded the forms, and it's impossible to fill them out because the workers' compensation board of New Brunswick, for instance, has a section 4 that has to be signed by your former supervisor. Forty years ago, who was that, and are they still in the military? It has to be signed by a DND officer in order for you to put in your claim. Are they even still living? If they are still living, they're certainly not a member of DND any more. Therefore, they can't sign it, so it's a total sham.

The same applies to the federal compensation plan for federal employees. I was a federal employee. I worked for the Department of National Defence at CFB Gagetown, clearing the brush and burning it, yet I can't fill out the form because there's no one to sign it. Who is going to sign it 40 years later?

So that process they have put in place for civilians is a total dead end. It's a sham. It's a disgrace, that's what it is.

**The Chair:** We will go to our next questioner, and that's Mr. Blaikie.

**Hon. Bill Blaikie:** Thank you, Mr. Chairman.

I think this is certainly some of the most compelling testimony that I've ever heard in my twenty-six and a half years as a member of Parliament. I remember when my two New Democratic colleagues raised this in 1981—I was here then—and this testimony makes me wish very strongly that we had been able to be more successful at the time in getting the kind of attention paid to the issue.... I know you get that story on the national news, and then a couple of days later the political agenda moves on to something else. Sometimes you never really get the kind of focus that I hope we are now getting on this issue, because I think this committee meeting, Mr. Chairman, if my guess is right, will prove to be a watershed in the treatment of this issue.

I thank the witnesses, and I think a lot of people in months and years to come will thank you for what you did here tonight because, I think this will—I hope—be the beginning of a concerted effort on the part of everyone who is here to really push the government to do the right thing, to have an inquiry so that people can come forward and feel that they're doing so in a protected environment. And also I hope that it will do the right thing by adopting a presumptive model dealing with the claims that people are making, and adopting a process whereby it's easier for people to claim.

This notion of—and this is typical of so many things these days—well, we have a website, or you call and then you have to spell somebody's name and press 1 and press 2 and press 4 or whatever. If you're trying to be user-friendly, or in this case veteran-friendly, you need a human being on the other end of the line who isn't in Kirkland Lake—with all due respect to the people in Kirkland Lake, of course. But this is also so typical. You phone Air Canada baggage and you get somebody in India. So I just hope that the department would see the merit of dealing with this in a much more serious and profound way than it has.

It's so typical that we have to depend on American information. In Canada, we like to feel self-righteous about ourselves in relation to the Americans, that we can do it ourselves; but I can tell you, when it comes to information, I don't know how many times in my parliamentary life it's been the case that the only reason we have any information at all is because we've been able to get it south of the border, because we do have a culture of secrecy here in Canada that is just so embarrassing.

I'm not here to grill you. I think you've come here and given us the kind of information that we need to take this forward, either in this Parliament or the next, because of course it may well be that this Parliament's life is quite short.

Finally, Mr. Chairman, I might say, as someone who's tangentially familiar with the Black Watch, the Black Watch is known never to have retreated in any circumstance. I think the government had better watch out, because when you gather the Black Watch together, whether they be alumni or veterans or current members, if they decide that the Canadian government is going to finally behave properly on this, some day the Canadian government will behave properly on this, whether it likes it or not, and I hope that it will do that with the help of all of us here.

• (1945)

**The Chair:** Mrs. Sellar.

**Mrs. Gloria Sellar:** Could I just add one thing? It seems that all the processes that were offered earlier are so lengthy. They're talking about 2006 and that sort of thing and searching for remnants of toxins in barrels and things. These soldiers are the remnants. They truly are. They're desperately ill. They're dying. If we go too slowly on this, it really isn't going to matter. And they're awfully bitter and unhappy. They feel betrayed.

**The Chair:** Mr. Cardinal.

**Mr. Wayne H. Cardinal:** They talked about testing, blood tests and that, but blood tests do not always show dioxin levels. After so many years they dissipate from your system and may not show at all.

There is an outstanding list of ailments that are related to dioxin poisoning. These tests cost about \$1,000 a piece to conduct. That, again, would be a tremendous cost to the taxpayer. I think a more general approach to the ailments a person has in relation to that would be much more sufficient to determine if it is related to any dioxin poisons, especially where he has served and been exposed in the training area to them. If it looks like a duck, swims like a duck, it's probably a duck. If you were there, you've been contaminated. It's just that simple.

**The Chair:** Are there any other comments from Mr. Blaikie's presentation?

Okay, we will then go to Mr. Martin.

**Hon. Keith Martin:** Thank you all very much for being here today. I think, as all of us said around this table, your poignant testimony certainly affects us deeply.

We're determined, as you've probably heard—and that's why you're here and why we're here—to try to get to the bottom of this very quickly so that you can receive what is required based on the illnesses that have been suffered. We all know that people live, they get sick, they die, and I'm sorry for the tragedies that have befallen your families and loved ones.

We have to, though, establish connections between illness and the effects of being exposed. We have evidence to the best of our knowledge that Agent Orange was used for seven days in the areas that were mentioned before. Some of you have mentioned otherwise, and I'd like to ask some particular questions on that, because it's important to try to make that connection, which is what we're all trying to do.

Mr. Connolly, you mentioned the tragedy that has befallen your family. Sir, do you have evidence that your family was actually exposed to Agent Orange?

**Mr. Arthur Connolly:** My father was in the training area, and just as Mr. Chisholm said, during that time they would be out in the training area for the whole summer.

**Hon. Keith Martin:** That included the seven days the spraying went on, very far away from areas of habitation.

**Mr. Arthur Connolly:** That's correct, and every once in a while they'd be able to get lucky and sneak home. I can remember running and hugging my dad, like every kid did, and he'd be coming home wearing those clothes that he'd been wearing out in the brush.

**Hon. Keith Martin:** You mentioned other family members who got sick or passed away. Were they exposed to Agent Orange?

**Mr. Arthur Connolly:** They were in Gagetown.

**Hon. Keith Martin:** But in Gagetown itself, where people were living, to my knowledge—unless you can correct me—there was no spraying of Agent Orange—

**Mr. Arthur Connolly:** Sure there was, in 1964. If they paid farmers \$250,000, to me, that's an admission of liability, an admission of guilt that they sprayed it. They knew they sprayed it, and that wasn't on any training area.

• (1950)

**Hon. Keith Martin:** I'm trying to determine, sir.... The best of our knowledge that we have is that Agent Orange was sprayed for four days in 1966 and three days in 1967. We're trying to determine if more was sprayed. We'd certainly like to know.

The last point I want to make, if I may, sir—

**Mr. Wayne H. Cardinal:** There were 147 square miles, sir, that they'd sprayed since 1956.

**Hon. Keith Martin:** Do you have any documentation on that?

**Mr. Wayne H. Cardinal:** Sir, it's in the early report—40 years, and I'll show you every inch of the training area sprayed.

Sorry for interrupting.

**Hon. Keith Martin:** It shows that Agent Orange was sprayed.

**Mr. Wayne H. Cardinal:** Herbicides, sir, herbicides.

**Hon. Keith Martin:** Oh, but there are many different types of herbicides, and we have to determine within that complex array of herbicides—I mean, we're talking about Agent Orange—whether that had any effect or whether any of the other herbicides had any effect on your health, which is what we're trying to do.

You brought up much of the information that was done by the United States, and you're quite right. They have done a lot of research on that for a long time because their exposure was much greater than ours. So I went back and looked at some of the research data.

This came from the U.S. Department of Defense. For 20 years they looked at 2,000 veterans who had been exposed for nine years intimately to Agent Orange because they were the ones who sprayed, and they were the ones who were actually on the ground. So for nine years these 2,000 people had significant, constant exposure to Agent Orange—and quite frankly, I thought we would find something. They found that there was an increased risk of insulin-dependent diabetes in these people. They also found that there was no increase in cancer among those people at all.

I'm just stating the facts, because we may want to—

**Mr. Kenneth Dobbie:** If I may say something here, if that's the fact, then why is the U.S. Department of Veterans Affairs paying hundreds of thousands of veterans compensation for cancers after exposure to Agent Orange?

**Hon. Keith Martin:** I'm going by the data that they have here, sir.

**Mr. Kenneth Dobbie:** I'd like to know what you're talking about, because we've been sitting here telling you we were exposed from 1956 to 1984. There's the document right here.

**Hon. Keith Martin:** Mr. Dobbie, if I could—

**Mr. Kenneth Dobbie:** This is a DND document—

**Hon. Keith Martin:** You were exposed—

**Mr. Kenneth Dobbie:** —and you're still talking about 1966 and 1967. You can't get past that.

**Hon. Keith Martin:** Let's talk about—

**Mr. Kenneth Dobbie:** Nobody seems to be able to get past that on your side of the government.

**Hon. Keith Martin:** Sir, I'm trying to find out.... The question I asked, and it's important for us to know, because if you have evidence that Agent Orange was used outside of that, we'd like to know. If you're talking about—

**Mr. Kenneth Dobbie:** Mr. Chair, if I may read something here—

**The Chair:** If we can get the dialogue back and forth—

**Mr. Kenneth Dobbie:** If I may just read something here, we all agreed that 2,4-D and 2,4,5-T are Agent Orange and Agent Purple. In 1956, 3,687 acres were sprayed with 2,4-D and 2,4,5-T on CFB Gagetown. In 1957, 3,879 acres were sprayed with 2,4-D and 2,4,5-T. And it goes on.

Why can't you get that?

**Hon. Keith Martin:** Sir—

**Mr. Jody Carr:** If can try this point, Mr. Chair...

**The Chair:** Panel and members, we'd like to keep a civil exchange where there's a question—

**Mr. Kenneth Dobbie:** I'm sorry. I apologize for my outburst—

**The Chair:** No, not at all, but in order for the rest of the—

**Mr. Kenneth Dobbie:** I get very frustrated with this whole 1966-1967 mess.

**The Chair:** I can appreciate that, but in order for us to be able to stay tuned—all of us together—we want to hear the question and the response, so we can make some sense of it.

I'll go to the point of order—if you will, Mr. Carr.

**Mr. Jody Carr:** Actually it's not a point of order.

**The Chair:** You want to respond?

**Mr. Jody Carr:** I want to respond to his comments and his question

• (1955)

**The Chair:** By all means.

**Mr. Jody Carr:** Mr. Chair, the fact is that Agent Orange didn't become a name until the early 1960s, when the Americans—

**Mr. Kenneth Dobbie:** 1962.

**Mr. Jody Carr:** In 1962 is when the label name Agent Orange was created—when the Americans used this product in Vietnam—because of the orange stripe around the barrel. Prior to that, it had to be called something else besides Agent Orange.

Too many people from across this country have come forward hurting with illnesses, and you've heard the stories here today. Too many people have come forward to make this just a coincidence. It's this type of denial that the federal government continues to put forward in terms of minimizing the issue and limiting it to 1966 and 1967, getting defensive, and asking the victims for evidence—when people in our own government have the information.

It's incumbent upon the federal government to take responsibility. We heard it. Please, say I'm sorry, for starters, and help the people who have been hurt, because there have been too many. It's that confrontation and denial that frustrates and upsets the victims. If we could be open to hearing and looking at their information, and move forward quickly, it would be much better.

**The Chair:** Mr. Carr, I don't believe this was a confrontation here. It was a matter of the exchange of information that party A has and party B has. Part of this type of setting, which the committee suggested in inviting you here, is so we can hear and exchange information. I don't believe it's a confrontation.

But with that, Mr. Martin, you've lost some time, sir. I will extend it for you.

**Hon. Keith Martin:** Thank you, Mr. Cannis.

Mr. Dobbie, this is the information we want to receive. We have some. You're here because we want to listen to you. We want to get the information, so we can make the decisions in a quick and rapid response, to be able to be fair and equitable to our veterans who have served our country so honourably.

Sir, this information you received, I wanted to go through it because I'm going through your document, and you referred to the access to information you have here, and it relates again to that 1966-1967 spraying. Later on, you also quote about spraying that occurred in 1965. Is that from the same access to information?

**Mr. Kenneth Dobbie:** Yes.

**Hon. Keith Martin:** Because what we'll do is go back and take a look at that, and we will dig up that information.

**Mr. Kenneth Dobbie:** The spraying went on from 1956 to 1984. Now, 2,4-D and 2,4,5-T were sprayed from 1956 to 1964, with the exception of two years. I believe those years were 1959 and 1962.

**Mr. Jody Carr:** Yes.

**Mr. Kenneth Dobbie:** So for six out of eight years, 2,4,-D and 2,4,5-T were sprayed.

There was a spray application accident because of a temperature inversion, and the spray drifted across the river and destroyed all the crops.

These are photocopies of the *Fredericton Daily Gleaner* of August 8, 1964, showing what I quoted in my presentation, that these spraying accidents happened frequently—all the time—in previous years.

We know that dioxin has a half-life of greater than ten years in the soil, so I'm wondering what happened to all those market gardens, because those were huge farms. One farmer lost 25,000 tomato plants in one summer. They were huge farms that provided produce for Oromocto, Fredericton, and the rest of New Brunswick—and some of it was exported out of the province. The dioxin in the soil would have been taken up by all the root vegetables that were grown—the tomatoes, the carrots.

It's all mentioned in this document. I have not provided this to the committee, but I will make sure that the clerk receives copies, so that all of you can study it and read it. It was given to me at the CFB Gagetown theatre meeting on June 24, when I spoke there. It was

given to me by one of the survivors, a lady whose name I won't mention, but who gave it to me because she said I would do something with it—and I have. I will give the committee these papers.

**Hon. Keith Martin:** Certainly what we will do, if I can finish off...

The very good question you asked is why is the U.S. Department of Veterans Affairs actually paying compensation in pensions to those members who have contracted cancer and had exposure to Agent Orange, when their own data show there is no increase in cancer incidents?

**Mr. Kenneth Dobbie:** Only in one little tiny study. You have to remember that the—

**The Chair:** Mr. Dobbie, kindly, sir, the gentleman is trying to finish his comments. I will press that same issue with you when you're responding.

**Mr. Kenneth Dobbie:** I apologize.

**The Chair:** Mr. Martin.

**Hon. Keith Martin:** It's just to say, Mr. Dobbie, that in the 2,000 people they looked at over 20 years who had the heaviest exposure to Agent Orange and dioxin, they didn't find that increase. But we will find out. Maybe there are reasons why; maybe there are other implicating factors. But we will look into the reasons why they are paying money in the U.S. to people who contracted cancer while being members of the U.S. armed forces. We'll look into seeing what that's all about, and hopefully, if it's possible, apply that to what's being learned here.

● (2000)

**The Chair:** The last word goes to you, Mr. Dobbie.

**Mr. Kenneth Dobbie:** I would have to say that it was a very small study. The Department of Veterans Affairs fought the Vietnam veterans' compensation efforts for over 20 years. That study has come up time and time again.

While it may be valid for those 2,000 people, it may also not be, because when was the study done? Are the people dying now?

**Hon. Keith Martin:** It was released in 2005, sir, by the U.S. Department of Defense, covering a 20-year period of time.

**Mr. Kenneth Dobbie:** Okay.

What I've observed, from the thousands of e-mails I've read from across the country, is that not everybody gets cancer from exposure to dioxin. Let me put it another way: different people have different immune systems. For instance, I don't have cancer yet, but I've been told I'm going to get it. I've been sick for 39 years with a litany of diseases and disorders and dysfunctions, because I had multiple exposures. I wasn't only cutting and burning the defoliated brush in 1966, but was also a boy scout in 1960 and 1961 out in the Camp Gagetown training area, located at Dunn's Corner, about eight miles to the back of Camp Petersville Hill, which is one of the most heavily defoliated areas on the base.

In 1967, 1968, 1969, 1970, and 1971, I was a member of the Camp Gagetown Fish and Game Club, and went out into the training area frequently—dozens, hundreds of times—to fish, to hunt. We went out motorcycling, trail riding. We went out camping three nights or four nights in a row. The thing that haunts me the most about all of my times out there was that you never heard birds. You never saw them; they just weren't there. They were all dead.

And I travelled through the defoliated areas. I've seen them with my own eyes. I worked with the stuff. I cut it, I burned it. It was a coppery brown, and it smelled like metal. And we were poisoned by it, hundreds of us.

Right now I have uncovered two other people who worked with me on that project. One died nine years ago of prostate cancer, one of the cancers that is attributed to Agent Orange exposure. He suffered for 15 years before that. His wife approached me at the CFB Gagetown meeting and gave me all the information. I still contact her. Another person has come forward, and that person is very sick. They have cancer. I don't. So it's not a question of everybody getting it, but a question of how your immune system reacts to it.

Now, having said all of that, from 1965 onward, we at DND sprayed almost 1.2 million litres of hexachlorobenzene, which I've given evidence showing that it causes a host of other diseases aside from cancer. And we haven't even begun to scratch the surface of the kinds of diseases that are going to come out of this, because the test group, the people who were exposed and poisoned, are all dying. Once we're dead, there are no more people to study.

**The Chair:** We must move on, Mr. Dobbie. I know you'll have opportunity again to continue on.

**Mr. Kenneth Dobbie:** I'm sorry to take so long.

**The Chair:** No, not at all. It's just that other members are waiting, and I know that Mr. Carr wants to intervene, and you'll do so again within Mr. Thompson's time.

Mr. Thompson.

**Mr. Greg Thompson:** Thank you, Mr. Chairman.

I want to thank the witnesses for their testimony. It was really compelling, very moving, and we really appreciate your coming.

I will probably not be as optimistic as Bill Blaikie. I'm not convinced that this is actually going to move the government in any way towards fairness or compensation. I just feel that based on—

**Hon. Bill Blaikie:** I spoke before I listened to Mr. Martin.

**Mr. Greg Thompson:** Well, there you go. I think you're right, Mr. Blaikie, that it's a mindset. They simply can't accept the fact that—

**The Chair:** You get back on the list, though, Mr. Blaikie.

**Hon. Bill Blaikie:** No, you don't want that.

**Mr. Greg Thompson:** Mr. Chair, I said this from the outset, and I still believe it, that it's nothing more than an elaborate public relations exercise by the government to keep a lid on this Agent Orange issue, this herbicide spray issue, to be more exact, over the course of 50 years or so.

As evidence of that in terms of public relations, Mr. Chairman, I just want to point out that the government spent more time identifying a chairperson or an outreach coordinator than they did in terms of what this coordinator would do. The first person they chose could not have been a better person in terms of public relations—Mr. Vaughn Blaney, who is well respected in New Brunswick.

Mr. Blaney, as you well know, Mr. Chairman, resigned that position because of ill health. Actually, I would suggest that probably some of that ill health was brought on by the extreme pressure the poor man was put under. He went out to hear the same type of testimony we've heard here this evening in some of the villages, with no tools to work with. He was given absolutely no reporting authority in terms of recommendations to the government.

The new outreach coordinator, a gentleman by the name of Dr. Dennis Furlong, who has, again, an impeccable record in the province of New Brunswick, is probably the best choice they could make after the resignation of Mr. Vaughn Blaney. But again, this gentleman has been given no tools to work with. In fact, there was a quote about Mr. Furlong in today's *Telegraph-Journal*, stating that "Dr. Furlong says his job isn't to judge whether compensation is warranted, but to give the federal government the information it needs to make that decision".

From what we've heard here tonight, not only from our witnesses but from members, and some of them former military, at this table, I think the government has those records. The government has those records now and could actually release those in an afternoon. In one afternoon...tomorrow afternoon, let's put it that way, we could have that information.

If the government does one thing well—the military—it's keeping track of its members. That's exactly what the military is all about. It's very important in the military that they know how many members they have, who they are, and where they are. That information is available today.

Why we get emotional on this, Mr. Chairman, is that we have intelligent people like Karen Ellis appearing before us, a spokesperson for the government, and in that state of denial, which she obviously had when she first appeared here on June 21.... Remember, she is just a spokesperson for the government. But I don't think they have moved off of that.

Mr. Carr outlined some recommendations that we came up with after having spent some money on some good research, and doing some of that research over the summer—a plan that we think will work. But the truth is, Mr. Chairman, this whole plan is being exercised and being decided by a group of politicians in Ottawa, namely, the cabinet of the Government of Canada, which is masterminding the plan. There are no experts who are actually laying out a plan that might get to the truth. The truth will never be known if the present plan is followed to the letter by the Government of Canada. We'll never get to it.

• (2005)

Look at the publication called *Salute!*. This is a Veterans Affairs publication that goes out to its members. You have a copy, Mr. Chairman. I would point you to the November flyer, if you will, November 2005. That's today, isn't it? They go on to talk about Agent Orange, forgetting about all those years when herbicide sprays were used, dioxin-laced if you will, and suggesting in this that if you have a claim on Agent Orange only, make your claim.

**The Chair:** They also say if you have one of the medical conditions outlined by the IOM, at the bottom left.... In all fairness, we should read the document as it is stated.

**Mr. Greg Thompson:** Mr. Chairman, I think you're interpreting it quite generously.

**The Chair:** I don't know, I'm just reading from the pamphlets. You're asking me to debate, and I'm not here to get into debate with you, because it's your time.

• (2010)

**Mr. Greg Thompson:** You're violating your own rules, Mr. Chairman.

**The Chair:** You're enticing me.

**Mr. Greg Thompson:** You're being very generous just the same, despite the fact.

The point I'm making here, Mr. Chairman and members of the committee, is they're basically inviting veterans to apply based on those two years only. They do recognize the U.S. Institute of Medicine and some of the maladies associated with exposure, if you will, but if you look at it they've cleverly limited it to two years only. We do know that the spray program took place on the base from 1956 to 1984. This is the point I'm making, Mr. Chairman.

They're still in a mode of either cover-up or complete denial. None of the dots connect. Because when you're looking at the plan they laid out on August 16, this is the headline of the press release they sent out, Mr. Chairman, on August 16, 2005. The headline reads: "Government Announces Approach Regarding Use of Herbicides at CFB Gagetown".

You can go through this document, Mr. Chairman, it's at least 12 or 15 pages in length, and there's no place in that document where the word "compensation" is used. They don't even suggest that if evidence leads us to compensation or if linkages are proven, etc., compensation will be considered. They don't use it. In fact, when the former chairman or coordinator, Mr. Blaney, held his meetings in the village of Upper Gagetown and the village of Gagetown the word "compensation" never crossed his lips, because he was told never to use the word "compensation".

Mr. Chairman, I'm absolutely convinced it's nothing more than a public relations exercise for the Government of Canada, and there will never be compensation delivered to these veterans between now and whenever. It's simply an exercise to get this government through to the next election without offering these people compensation. In fact, Mr. Chairman, if you look again at what they were stating yesterday, the final report on this exercise, called "Approach Regarding Use of Herbicides at CFB Gagetown", that final report is expected to be in the year 2007, without any recommendations for compensation.

Mr. Chairman, I think I've at least convinced my colleague Bill Blaikie that he might have spoken prematurely on that issue of compensation.

**The Chair:** Can you share the information on that date again of when they will report? I missed it.

**Mr. Greg Thompson:** They quote Ms. Karen Ellis in this article in the *Telegraph Journal*. They step through task one, task two, task three, and it states that the final report is expected to be in to the government in the summer of 2007. In other words, we're looking down the road quite a ways before the final report is in, and then obviously the government at that point would have to consider whether or not compensation is warranted at that point.

Mr. Chairman, I'll leave it at that. Maybe some of the witnesses.... I hate to take up their time, but I'm attempting to lay it out for our perspective, in that we don't believe a word the government is saying on this file in terms of getting to the real truth and getting to the issue of compensation. We just don't believe them.

**The Chair:** You've exhausted more than the five minutes, but it's a very special meeting, as I said earlier. There have been statements made and questions put to you, panel. We'll open it up to you, and if you can keep it as tight as possible we'd appreciate it.

We'll start with Mr. Chisholm.

**Mr. John Chisholm:** Thank you, sir.

This is for Mr. Martin. This is a document, "Base Gagetown Summary of Chemical Spray Program, DND Documents, Right to Information"; 1956: 3,687 acres, 24 ounces of 2,4-D and 24 ounces of 2,4,5-T mixed per acre, 24 barrels; 1957: 3,149 acres, 24 ounces of 2,4-D, 24 ounces of 2,4,5-T mixed per barrel, 25 barrels; 1958: 4,469 acres, plus 2,639 acres, plus 500 acres, 32 ounces of 2,4,5-T mixed per acre, 35 barrels; 1959: nil; 1960: 9,000 acres, 32 ounces of 2,4,5-T mixed. This is all Agent Orange. This is all Agent Orange up until 1963, and then they turned around, they mixed the same thing, only they added fuel oil to it. Then in 1964 they sprayed 10,000 acres with 40 ounces of 2,4-D, 40 ounces of 2,4,5-T, plus one gallon of oil in five gallons per hundred acres. In 1964 they quit spraying it.

In 1964 the spray incidents...this is when the accident happened, when they oversprayed, because at that particular time they were using fixed-wing aircraft for spraying. After 1964 they quit using fixed-wing aircraft because they couldn't control the spray. They had no idea where it was going with the fixed-wing aircraft because they were up too high, and it was just sprayed and wherever it went, so be it. Who cares? There are only a bunch of soldiers under there, anyway. They don't care. Use them for guinea pigs.

Then in 1964 they stopped using it altogether because there were no funds. In 1965, that's when they turned around, they brought in that Tordon 101, and they sprayed 4,708 acres. 1966—the test.... Merciful man, what is it with this air test? It was only two strips of ground.



They burnt half of the Black Watch underneath it. We wrote their survey. We put them under the canopy. The idea of it was to see how fast they could find them. As fast as that stuff hit the leaves, it would drop off. "There they are, no problem finding them now." They must have been in the Sahara Desert, because everything's dead.

I rest my case.

● (2015)

**The Chair:** Are there others who wanted a comment?

Mr. Carr.

**Mr. Jody Carr:** Yes, very quickly.

From a previous point as well, concerning the scientific evidence and research in relation to the U.S. that was mentioned earlier, this is part of the frustration that people get as well, because they keep talking about scientific research and evidence, and we have to keep looking at the scientific research and evidence. Well, we would suggest that the scientific evidence and research has been done.

A great precedent set by our own Canadian government is the fact that Brigadier General Sellar was awarded compensation because of exposure to Agent Orange. We don't have to look to the Americans any further with that decision. Our own Canadian government under Veterans Affairs agreed with the scientific evidence and research that had taken place. We have to go no further on that debate.

Now we're up to four. So we're getting there, but we have a long way to go. As well as this denial and foot-dragging that gets people frustrated, fingers were pointed after Mr. Thompson asked questions in Parliament earlier this year. Fingers were pointed back in response to his questions to New Brunswick, saying these chemicals were used everywhere else in this province as well. But the New Brunswick provincial government set a precedent and recognized that these chemicals—even though they weren't called Agent Orange, because the name was only put forward in 1962-1963—were called by other brand names, Brushkill and others. The provincial government provided compensation to NB Power employees because they had come forward.

They made a case to the government. Statistical studies were done, a mortality study that showed this group of employees who were directly exposed to these chemicals, 2,4-D and 2,4,5-T—not called Agent Orange, but called other brand names made by the same chemical companies. It showed that this group had a higher level of incidence of cancer and other related illnesses associated with dioxin exposure. Therefore, they were provided compensation, the last one in 2001. So we don't have to look much farther away.

If you're asking for proof from the victims, they can provide you the information they have. Perhaps one suggestion might be that a committee such as this may ask for all the information the Department of National Defence has regarding this issue. You can get more of the evidence and proof you're looking for from your own government, which has these records. Mr. Thompson mentioned that DND does keep good records. They know the brand names. They know the chemicals and the herbicides that were used, and it should not take six months to provide a list.

● (2020)

**Mr. Arthur Connolly:** I would like to make a couple of comments in regard to Mr. Thompson's comments about us possibly not being paid, or the veterans being paid. That's fine. If there's an election, we'll still be here. We're organizing, we're lobbying, and we're the Agent Orange Association of Canada. That's a name not to be forgotten. With that website, we have one page that's called "Good MP/Bad MP". I think you can understand where I'm going with that.

Those who are with us, "Good MP" and a nice little story. Or "Bad MP" and another little story. I hope to see all of you on the "Good MP".

**Some hon. members:** Oh, oh!

**Mr. Arthur Connolly:** It's very frustrating for us to try to deal with members of Parliament when they will not return e-mails or phone calls.

**The Chair:** Who's your member of Parliament?

**Mr. Arthur Connolly:** It's Pat O'Brien. I haven't heard from him, and I understand he used to be chair of this committee.

**The Chair:** That's quite true, sir.

**Mr. Arthur Connolly:** That's very interesting.

**The Chair:** I've known Mr. O'Brien to be a very meticulous, caring member of Parliament.

**Mr. Arthur Connolly:** He's under "Bad MP".

**The Chair:** I don't think so.

**Mr. Arthur Connolly:** I sent a letter to an MP discussing our plight. I received the response from his office saying "Thank you for sharing your views on same-sex marriage". Close.

**Some hon. members:** Oh, oh!

**Mr. Arthur Connolly:** Another bad MP.

So I just want all politicians to realize we're not going away. They may wait for the veterans to die, but it's not just the veterans. It's the families, it's the children, and it's the people who want to do the right thing.

Thank you.

**Mrs. Gloria Sellar:** I wanted to ask how many people know that this stuff was made in Elmira, Ontario? Interesting, isn't it? It was on CBC quite some time ago, and Mary Lou Finlay was doing the exposé. She closes by saying, "Imagine if American protesters knew then where one of the most deadliest of weapons used during the war actually came from. Imagine if Canadians knew."

**The Chair:** Was the Elmira facility servicing the American needs as well, ma'am, or was it just for Canadian use?

**Mrs. Gloria Sellar:** Well, according to this article it was being used in Vietnam as well as in Canada.

**The Chair:** I was just curious if the Elmira facility was servicing the needs of the United States and Canada as well.

**Mrs. Gloria Sellar:** I'm not privy to that, but according to this article, which was very carefully researched, it was used in the United States. The Americans sprayed themselves; they sprayed their own camps in the United States. Terrible.

**The Chair:** Mr. Blaikie.

**Hon. Bill Blaikie:** I was somewhat concerned by Mr. Thompson's suggestion that somehow I had some confidence in the government in this respect.

**Some hon. members:** Oh, oh!

**Hon. Bill Blaikie:** He should know better. I thought we were on the same side on this.

I expressed confidence in the witnesses and in the power of their testimony to move people's minds on this and to create the kind of motivation in most of us in the room that would someday help to bring a satisfactory resolution to this. That's what I was doing. He might have thought he was being funny, but I didn't really appreciate it.

**The Chair:** I'm glad you had the opportunity to clarify that, Mr. Blaikie.

We will go to Ms. Gallant.

**Mrs. Cheryl Gallant:** Thank you, Mr. Chairman.

To the witnesses, I cannot recall a time when I have felt so ashamed as a Canadian for what this country has done to you and the people you're speaking for.

Mrs. Sellar, as a high-ranking officer, your husband would have been receiving a full retirement pension and back benefits. I'm interested in knowing how he was compensated for his exposure to Agent Orange. Were his medical bills and his medicine covered? How did they arrive at a calculation?

One person here mentioned that they had not undergone testing because it was \$1,000. I'm interested in knowing from the panel if anyone else has undergone testing to prove whether or not they've had exposure to these rainbow herbicides, and if not, why not?

And to the best of your knowledge, were the soldiers and the families of the Black Watch and any other regiments who were exposed to these rainbow herbicides mostly situated in Gagetown, or would they really have been spread across the country?

• (2025)

**Mrs. Gloria Sellar:** Oh, yes, they were all over.

**Mrs. Cheryl Gallant:** I have a great interest in knowing this, having a major military base in my riding. I want to know whether my constituents have been exposed to this and just don't realize what's caused it.

And Jody, I'd like to know whether in your opinion this inquiry that's being set up is really going to be able to accomplish anything. Maybe in addition to just a straight-out compensation package with the presumptive clause Mr. Blaikie mentioned in tandem, a judicial inquiry where you can actually subpoena witnesses and documents might be more useful, so that down the road we can obtain compensation for families who don't have the benefit of being able to go to VAC. That's basically what I'd like to know.

And I'd like to suggest too, Mr. Chairman, based on what I've heard tonight and given our time restraints, that we bring in some of these VAC officers who have adjudicated and refused these applications so we have an understanding of whether or not they're under some constraints. Maybe they're being directed to do so, or there is some shortfall on the part of the applicants in submitting whatever it is the adjudicators need in order to give a positive claim.

**The Chair:** I won't respond to that at this stage, but certainly there have been questions put by Ms. Gallant to Mr. Carr and others.

If you would respond, we've got about two and a half minutes.

**Mrs. Gloria Sellar:** My husband was not tested for dioxin. His testimony was sufficient.

**Mrs. Cheryl Gallant:** How was he compensated? Did he receive extra money? Were some of his medical bills covered? He already had a full pension.

**Mrs. Gloria Sellar:** He already had a full pension, but you have to understand that when the husband dies, you get the full pension for one month and then it is reduced by half. Those were the rules, although it costs as much for one person to live as two: the mortgage, the rent, the food bill, the car, the telephone, the whole thing. With the benefit pension they are awarded a sum, and I believe you get it for a year and then it is reduced by half. I am about to be reduced by half. It's not a lot of money.

**The Chair:** Mr. Carr, I think you were asked a question as well.

**Mr. Jody Carr:** First I was going to say thank you for your comments about your reflection on the travesty.

We, as well as people who live in the communities surrounding Base Gagetown, don't feel good hearing this constantly and on the national news. It does make us feel bad, because we're very proud of our community and we're very proud of our military history. We have good people and we have good communities, like other communities around New Brunswick and throughout Canada, with good, caring, giving people.

A lot of people have sacrificed a lot over the years, though at the same time we are very grateful to have had the military over those 50 years. Of course, as in other relationships, there's give and take. In particular, the federal government expropriated 20 communities when it first moved in, and even now there's still some sediment of bitterness there. But they did the loyal thing for their country and gave up their lands, and not a whole lot was said. I don't know if we could go into an area of Canada now and expropriate 20 communities and be able to get away with it. But at the same time, that relationship has evolved, and it's a good relationship, one we're very proud of.

As to the dioxin testing, people have contacted me, including family doctors, to say the dioxin testing is not readily available, and when someone could get it done—you mentioned \$1,000—the cost is prohibitive as well. At the June 23 public meeting in Oromocto at Base Gagetown, the doctor from DND, I believe, said blood testing was one way to show your dioxin level. If it's over and above the normal level—because we all have a certain level of dioxin in our system—you can trace it back through half-lives and prove exposure at a certain time.

The cost is one problem, and the other problem is the number of labs that are available, only a handful. However, during our research, in discussions with Mr. Thompson and me Health Canada said their own labs could do this testing. If the government wanted, they could offer these dioxin tests to people, veterans and potential victims.

The other thing I've learned is that doing dioxin tests individually is one thing; you could show your own individual level, depending on the exposure, and it might help. But also blood testing for dioxin could help if you took all of your potentially exposed victims, veterans or civilians, and you tested their blood, and by using the statistics that came back you could show whether there is a higher level of dioxin within this group. That's also where blood testing for dioxin is beneficial.

● (2030)

**The Chair:** [*Inaudible—Editor*].

**Mr. Jody Carr:** Okay. I just wanted to....

On this final point, about whether or not this process the government is undertaking now will be successful, it's anybody's guess. I think there's lots of room for improvement, and that's why Mr. Thompson and I did a series of research and recommendations. I've gotten quite a lot of flak myself from some people who want a judicial inquiry, and they've stated their points very clearly.

I've held out because first and foremost it is up to the federal government. If everyone agrees there should be a judicial inquiry, it's still up to the federal government to launch one. So honestly, I was thinking to myself in our discussions, would the federal government launch one? Rather than pound our fists and try to convince them, we figured they probably wouldn't do it. As a compromise position, we thought we'd put some recommendations forward that would improve the current process.

I'll show you the organizational chart, which was mentioned in my comments earlier, about the departmental involvement of the experts designing and planning the terms of reference. As honourable as those people are, it doesn't give confidence to Canadians, and that's really what this is about after we've heard about all the mistrust.

So if it could be moved outside of government with a lead investigator and a technical review committee made up of experts, which at the same time would work with the internal government officials, they could investigate and do the research needed to get the information from the government departments. Hopefully at the same time, they would have the power to make recommendations back to government.

A judicial inquiry would take the amount of time it would take, which could be a lengthy time, and it's reactive. It does get the research and the investigative part, but there's still no action until the report is finished and the government responds. That's even if they want to respond; they are not forced to.

**The Chair:** Please summarize for us. We're going beyond the time.

**Mr. Jody Carr:** So those are the points why I recommend that progress has been made. There can be more, and those recommendations would help.

**The Chair:** I'll go to Mrs. Sellar, Mr. Carr.

I've got Mrs. Sellar and Mr. Connolly.

**Mrs. Gloria Sellar:** We're losing the whole point of this meeting. We're here to talk about a corporal who gets a retirement pension of \$2,000 a month. When he dies, it's reduced to \$1,000 a month. His wife has four children, a dog, and an old car, and all she can do is go back and live with her family. These are the people we're dealing with. We're not dealing with tests, governments, and commissions, and so on. We're really dealing with these very sick soldiers who gave themselves to their country. Many of them have been in wars, and they're being totally overlooked.

Please, let's forget about all of this and do something for each of them on an individual basis.

● (2035)

**The Chair:** Very good. I'll respond to that after.

**Mrs. Gloria Sellar:** And could we have some people who have had military service to adjudicate? I rather fear that the people in Charlottetown who make these decisions probably don't have very much knowledge about what soldiers do.

**The Chair:** Thank you for that comment.

In closing, I'd like to respond to that answer.

**Mrs. Gloria Sellar:** Thank you.

**Mr. Arthur Connolly:** I would like to point out to Ms. Gallant that yes, the people who were in Gagetown are not there any longer. According to Ms. Ellis earlier, that number is 200,000. Those people don't live in Oromocto, and the population is nowhere near that. What has happened is these people are now across Canada, across the world.

When the base project first went into effect, I called Andy Scott's office. I spoke with Andrew Holland. I said, "What is the base project doing to alert the people across Canada?" And he said, "Well, I spoke with Vaughn Blaney, and Vaughn said he was going to go to the convenience store and put up some flyers on the bulletin board." I could see it now: I lost my puppy, and do you have Agent...? Are you dying?

**Some hon. members:** Oh, oh!

**Mr. Arthur Connolly:** You know, it's ridiculous. The federal government can find out easily where these people are. Send them a letter. It will cost you a buck each.

**The Chair:** I have Mr. Bagnell and Mr. Martin. If I may, I think you were going to share your time.

Mr. Bagnell, we'll start with you, sir.

**Hon. Larry Bagnell (Yukon, Lib.):** I don't have a lot of questions, because, like the others, your testimony is so compelling and thorough. Certainly what was said is a great kickoff for the work that needs to be done, and of course that's why I'm so supportive of finding the people, finding the exposure, finding the effects, finding the links, as you just said.

I think what's really important, and something you've emphasized, but no one has explicitly said, is that something has to be done very soon for the people who are presently elderly or very sick.

**Mrs. Gloria Sellar:** Or they'll all be dead.

**Hon. Larry Bagnell:** Maybe a special category of people.

I thank you on behalf of all the people who you've come to represent as well, because I'm sure the people who aren't here are appreciative and will benefit from this information.

I do have two small questions. You've provided so much information that I don't have to ask that much, but I just want to follow up on a bit of what you've asked. One question is on hexachlorobenzene. I thought that was very interesting, and it sounded like there was so much of that over so many years that it actually might be more of a problem than Agent Orange. Is that correct, volume-wise?

**Mr. Kenneth Dobbie:** I personally believe that the hexachlorobenzene is a far more toxic chemical because of the volume that was sprayed over 20 years. We're talking of almost 1.2 million litres of it.

It's interesting to note that in 1985 Dow Chemical lost its registration for picloram, which contained hexachlorobenzene, because the EPA had discovered that a lot of people using picloram, or Tordon 101, across the United States were reporting illnesses and crop damages well beyond what they should have been.

At that time, the U.S. chemical companies had lobbied Congress so that they wouldn't have to identify the inert agents in their pesticides and herbicides. That changed in 1985, and the EPA forced Congress to pass a law that stated that the chemical companies had to disclose what was in the inert agents in their pesticides and herbicides.

It was found that picloram contained hexachlorobenzene, a deadly, persistent, bioaccumulative pollutant. It's classified as a persistent organic pollutant by the World Health Organization. It's listed as a cancer-causing agent. It also damages the liver, the endocrine system, bones, blood, your circulatory system, your gastrointestinal tract, and so on and so on.

These are issues that have not even been addressed. We are all talking about Agent Orange, and as much as I agree with the Agent Orange aspect of it, I have to say that Agent White, which is what Tordon was and what the Americans called it, has an identical chemical signature. It was used on Base Gagetown from 1965 to 1984, with almost 1.2 million litres of it being sprayed over approximately 132,000 acres, and yet we're to believe that people weren't poisoned by that?

The other thing about hexachlorobenzene, which I've done a lot of research on, is that it has two chemical properties in how it relates to the environment. One is that if it goes into a water supply, it does not change its chemical structure, but becomes a particulate that goes down into the sediment and then down into the groundwater, contaminating the whole environment. The other aspect is that when it comes into contact with soil, it changes its chemical structure immediately to what is called pentachlorophenol—commonly called penta—which is also very toxic to human beings if they disturb the soil, or if they're crawling through it. It's absorbed through the skin just like dioxin is, and it ultimately causes cancer, as the World Health Organization says.

So we're looking at massive poisoning of a very small area.

● (2040)

**The Chair:** You can't even split your time, but we'll give Mr. Martin the opportunity. Mr. Bagnell, I'm sorry, we're trying to manage.

Mr. Martin.

**Hon. Keith Martin:** Thank you, Mr. Chair.

Again, your testimony is poignant and heartfelt, to say the least.

I want to emphasize something that perhaps is not evident, but you know this. The herbicides were used, as you know, to save the lives of the Canadian Forces members who were out there. Without being able to remove that vegetation, accidents occur and people get killed. So that had to happen. That vegetation had to be removed in some way.

Now, our goal, and what we're doing right now, as I said before, is to identify the veterans as quickly as possible, to identify exposure, and to identify illnesses, and then we will deal with it accordingly. But I want to emphasize to all of you that we're trying to work as quickly as possible for our veterans because we care deeply about what happens to them and about their health care.

I wanted to say to you, Mrs. Sellar, in regard to the individual you mentioned, the lady you mentioned, who had lost her spouse, has four children, and whose pension has been cut, that if you could give me her details, I will look into it.

**Mrs. Gloria Sellar:** There are dozens of them. I can give you the name of—

**Hon. Keith Martin:** I want to finish, if I may.

**Mrs. Gloria Sellar:** Okay, sorry.

**Hon. Keith Martin:** That's okay. That person, if you can give me that person's case, I'd be happy to deal with the minister on this.

**Mrs. Gloria Sellar:** It's just everyone.

**Hon. Keith Martin:** We passed a new Veterans Charter and got the input from veterans across the country, in particular in my area, in Victoria, Esquimalt—Juan de Fuca, to get the input from our veterans to build a very solid Veterans Charter. That's the biggest change in 40 years for our veterans. We want to make sure that our veterans have access to those kinds of changes that we've made. That's why we've put those changes in there, to help them and give them the care they require. There's no other reason for doing that.

**The Chair:** Mr. Dobbie.

**Mr. Kenneth Dobbie:** Can I add something? You keep talking about veterans. Did I not make myself clear about the thousands of people who were civilians who were out in the training area on a regular basis and were exposed to this stuff? I obviously haven't made my point with you—

**Hon. Keith Martin:** No, no—

**Mr. Kenneth Dobbie:** —either that or you weren't listening.

• (2045)

**Hon. Keith Martin:** I was just dealing with the veterans, but not to the exclusion of you.

**The Chair:** I believe he was addressing the veterans' side, being cognizant of the civil side as well.

Your time's up, Mr. Martin.

I'm going to give the floor to Mr. Khan, who has been very patient.

**Mr. Wajid Khan (Mississauga—Streetsville, Lib.):** Thank you, Mr. Chair, and all the witnesses here.

I kept quiet because there's not a whole lot I could say for the presentation you've made.

My family has served in the military, in the Commonwealth militaries all over the world. I served in the military as well, but also with the civilians who worked with them, everybody who is affected by it. I've only been elected recently, and I've not become a politician yet, perhaps, but my suggestion is that I think what it needs to do... And I also want to thank Mr. Carr for being here, and Mr. O'Connor. There are no bad MPs here, I can assure you of that.

I think we, as a committee, in whatever time we have now or after, should take up this cause as urgently as we can and do something about it. We've listened to them. They've got evidence over here.

I'm not that thrilled about the Americans either. One-third of the homeless in America are U.S. veterans. I know how they've treated the Agent Orange-affected veterans, from \$101 a month to \$2,000 a month, so I'm not that thrilled with them either.

I think we need to address this issue. I think we need to address it as quickly as possible to the best of our ability. I will definitely do whatever I can, with my colleagues, to move the issue forward.

Thank you.

**The Chair:** Thank you for the comment, Mr. Khan.

Mr. Carr, I think you wanted to add something, sir.

**Mr. Jody Carr:** Thank you very much, Mr. Chair.

First, your time is very valuable. It hasn't gone unnoticed. We thank you very much for what you've given us, this opportunity, and you've also extended your time to have us speak. There has been progress.

Actually, first I wanted to mention that I thought Mr. Martin was going to try to get back onto the good list, but I guess he missed his opportunity.

Mr. Chairman, there has been progress, to give credit where credit is due, but it's moving slowly. It can be done faster. Listen to all the recommendations, and, please, act on them.

**The Chair:** Thank you for that closing statement, which throws the ball in my court.

One of the disadvantages a chair has is that he obviously has to try to control the meetings but is very tempted on odd occasions to intervene. But I do have the privilege in closing the meeting of adding some of my comments.

As we've extended the time, I'll thank the committee, first of all, for their flexibility, and as I thank along, I just want to take this opportunity to say a big thanks to the TV crew back there, members of the House of Commons staff who have gone beyond their normal hours. We can't see them, but I know they can hear us now and see us. Many thanks for helping us out. We appreciate that very much.

And the translators, indeed, who are behind the black window there, thank you. They're waving. They've been a tremendous help. There's our clerk here as well, and there are the staff who have been so kind and everybody here in the room who has been so generous with their time on this most important issue. I see people in the audience who are still sitting there.

I'm going to take this opportunity just to comment on a few things. I know my good friend Mr. Thompson talked about a timeline. Unfortunately—and this is not political—it is out of our hands whether this government continues. If they choose to come and collaborate, maybe we can continue.

The first question I have is to you, Mrs. Sellar. I was reading your data here on the application for your late husband, Mr. Sellar. When did he apply? I'm reading the letter from Dr. Lee, and it is dated March 2, 2004. I'm also reading the response back from Veterans Affairs Canada dated June 14, 2004, in terms of approval. I'm also noticing the initial letter acknowledging the application, dated May 17, 2004. I'm just curious—if you can, please, respond quickly—when was the application put in requesting the benefit, and how long did it take for it to be approved?

**Mrs. Gloria Sellar:** It took quite some time for it to be approved. It moved very slowly. It was approved, but the payments did not start for some time. They did make it retroactive, I believe, for a month or two.

**The Chair:** It was only a month? I'm surprised, because—

**Mrs. Gloria Sellar:** No, it would be longer than that. They did make it retroactive to when it had been approved.

• (2050)

**The Chair:** I worked on Veterans Affairs files in the past for our veterans here and our allied veterans abroad, and it's my understanding that when the application is put in, it's effective the day it's put in, and the moment it's approved it's retroactive a year at the minimum.

**Mrs. Gloria Sellar:** Oh, no, this was not that way. This was approved, and then it was backed up until the time it was approved. This was a first-time thing, you see.

**The Chair:** Yes, a very special issue.

**Mrs. Gloria Sellar:** And I hope it's not going to be the last time.

**The Chair:** On the pension issue, let me just make a quick comment, if I may. My mother is also the widow of a veteran, and I do understand what you're saying. You're absolutely correct when you say to our department that once the veteran passes away, the grass does not stop growing, the snow does not stop coming down, and the payments don't stop, as you've outlined. I know that there was legislation passed a year or so ago in terms of grandfathering these benefits under the VIP program, etc., but we have to go beyond that, and I do agree with you on that.

**Mrs. Gloria Sellar:** Thank you.

**The Chair:** With respect to the final report, I have to go back to this, if I may, because Veterans Affairs is tied in considerably in this exchange, colleagues, and you know that very well. I've just pinpointed something else, because my colleague Mr. Thompson enticed me again. It states here under "What We're Doing to Help", under number 2, "We will work with these Veterans and other applicants"—referring to Mr. Dobbie—"to determine if they were, in fact, exposed. We want to be sure we have all of the available evidence."

That leads me to my question with respect to NB Power. When did that request commence, Mr. Carr, in terms of compensation for the employees?

**Mr. Jody Carr:** I can't say for sure the dates, but I believe it was somewhere in the early nineties.

**The Chair:** So it took approximately ten years for compensation to be awarded.

**Mr. Jody Carr:** It was initiated in 1995, and then—

**The Chair:** In 2001-02, it was—

**Mr. Jody Carr:** No, that was when it was finalized. There were some first payments made between 1995 and 1998, and then the final payments were in 2001.

I know the point you're making, but the point I'm making is why reinvent the wheel? There are precedents out there.

**The Chair:** I wasn't trying to suggest you reinvent the wheel. I'm simply saying they compensate, because I see where Mr. Dobbie's coming from, and I fully respect it, and I see there's merit in that. I'm simply trying to broaden the thought here that they compensated their employees. Am I correct? Is that what you said?

**Mr. Jody Carr:** Yes, they were employees who worked directly with the chemicals, and applied the chemicals to the power lines. They were not applying the chemicals to other employees or...

**The Chair:** Through the application to the lines, would you not then—a possibility—suggest that other members living in and around the community were affected, such as Mr. Dobbie and other families? So do we absolve them of their responsibilities by saying we compensated? I'm just trying to think outside the box here.

**Mr. Jody Carr:** No, and it's been suggested by the Minister of Defence and others in the government. It's very, very difficult, even around Base Gasquetown, to link exposure of the communities surrounding the base with civilians who have not worked on base or went and ate berries and ate deer. So it would be very, very difficult to prove a link.

So when I ask for a health study, it's more or less about looking forward. It's not about necessarily providing compensation to every

community and providing a cheque. If a health study were done, it would talk about the history of the health and perhaps the future. If there is indeed a high incidence of cancer—for years there are just so many people that we always figured there was a high incidence—if there is, then maybe we could put pre-screening and preventative going forward.

**The Chair:** You're talking about the health study, and this is what everybody's trying to undertake at this stage. And I know in saying that that there's also—

**Mr. Jody Carr:** Oh, yes, and I'm very pleased by that, when I mentioned there's been progress, but my big concern with the recommendations, or why we put forward recommendations to improve that, is that we want those studies, including the environmental studies, to be designed by third-party experts. I think there was a commitment by Ms. Ellis earlier that there would be more third-party experts involved.

**The Chair:** It's my understanding—I have my notes here from Ms. Ellis's testimony—that every time they contract out, they're contracting out to an independent third party. I was very pleased to hear that. And what I'm also pleased about from Veterans Affairs—and I'm not here vouching for Veterans Affairs—is they're stating very clearly that if new information is found, all applications for disability pensions related to Agent Orange will automatically be reviewed. So they have made a quantum leap forward, I believe, in trying to address it.

I close by saying that as you notice around the table, Mr. Thompson—

•(2055)

**Mr. Greg Thompson:** You're editorializing, Mr. Chairman. You're stepping way beyond your bounds.

**The Chair:** I'm only picking up, sir—you triggered me on this.

**Mr. Greg Thompson:** And I don't think you should end on that note.

**The Chair:** And I didn't give you the floor. If you had asked for the floor, I'd have been more than happy to give it to you.

**Mr. Greg Thompson:** I think we have a point we would like to make.

**The Chair:** I did not interfere in your presentation. If you wish to have the floor, I'd be more than happy to give it to you.

**Mr. Greg Thompson:** I've never been to a committee meeting where the chairman is allowed to editorialize and put his last word on the record.

I believe Mr. Carr has a point to make with regard to the terms of reference.

**The Chair:** He does, and I've given him the opportunity. I think if I've not been fair chairing the committee this evening, by all means call your complaint, sir. I think I am entitled to, because I care about this issue. I care to the point of giving everybody flexibility. I think the witnesses and the audience who are watching can judge accordingly. But if you, sir, can use this, I believe I have that privilege as well, and I think we gave you the privilege of being on this committee and expressing yourself openly, without any restrictions.

**Mr. Wajid Khan:** Hit the hammer.

**The Chair:** No. Mr. Carr had something to say, and I don't want to take that privilege away.

Mr. Carr.

**Mr. Jody Carr:** I appreciate your comments, Mr. Chair, and I do appreciate your efforts in giving us the time, of course, and the leeway.

In my comments as well, in my opening comments, I did mention the areas the government has moved on. I think I actually thanked the Minister of Defence. It doesn't happen very often with politicians of opposite stripes or colour, but I did give credit where credit was due.

I am pleased that there are independent.... Let me be very clear on this point. When Ms. Ellis mentions that there will be independent

third-party contractors undertaking the work, they only go by what is designed in the terms of reference. The contractor puts in a bid based on the terms of reference. I'm only suggesting, along with Mr. Thompson, that at the very beginning, when the terms of reference are set, it should be done by more than government officials. That design is fundamental. Ask the experts here, they'll tell you that.

I can't remember the other points you made, but....

**The Chair:** Well, we've agreed, I think, on 99.9% in the caring of this committee. And this is not politics, I'll say to my good friend Greg Thompson. This is not a partisan issue. This has no political stripes. This is a matter, as Ms. Ellis said, of doing the right thing, and several of you people have, but to be able to move forward, we need to hear from people like you. We need to hear from the experts. We need to do the right kind of work. I simply outlined certain initiatives that have been undertaken. Are they enough? No, it's never enough. We can do more, and that's what we're hoping to do with this committee.

**Mr. Jody Carr:** Thank you.

**The Chair:** I do want to thank you for your presentations.

Ms. Ellis, thank you very much for your input, your kind presentation. Certainly a lot that you have said, I believe, will go a long way.

With that, I'll adjourn the meeting. Thank you very much.

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