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—
Chair

Mr. Rob Anders

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•(1110)

[English]

The Chair (Mr. Rob Anders (Calgary West, CPC)): Good morning, ladies and gentlemen.

First off the bat, I realize we all have a vote in the chamber coming up at one o'clock, and it's a fairly significant issue in the sense that it's a budget—our budget implementation bill—so we'll probably need to clear out of here with a few minutes to spare, if possible.

To our witness this morning, I apologize. I'm sure many of us were tuned to the testimony in another committee, so some of us may have been late getting here this morning.

Nonetheless, we have with us Mr. Ron Griffis, national president of the Canadian Association of Veterans in United Nations Peacekeeping.

Sir, as you're probably aware, we're undergoing a study of the veterans health care review and the veterans independence program.

Usually the way we work it is we open the floor to you for 10 or 20 minutes. After that we take a rotation with the various committee members from various parties. I think you've been through this drill before, sir, so the floor is yours.

Mr. Ronald Griffis (National President, Canadian Association of Veterans in United Nations Peacekeeping): Thank you.

Mr. Gilles-A. Perron (Rivière-des-Mille-Îles, BQ): Are we going to give him a twenty-minute break or a ten-minute break, like we did for Mr. Mulroney today?

The Chair: I wasn't familiar with the break that the former Prime Minister received, but I don't suspect we're going to keep him here for four hours. We have a vote.

Mr. Ronald Griffis: Good morning.

My name is Ron Griffis. I am the national president of the Canadian Association of Veterans in United Nations Peacekeeping. On behalf of our association, I thank you for inviting us here today to give a small talk.

Before I start, on November 15, 2007, I happened to be watching CPAC. At that particular time there was a debate in Parliament about the National Peacekeepers' Day Act once again, and my colleague, retired Colonel Don Ethell, had some very nice things said about him by Member of Parliament Ms. Betty Hinton. Don is not able to be with us today—he's in Calgary—and he wanted to thank her for the very kind remarks that were made on his behalf.

With respect to the veterans independence program, from my point of view, the veterans independence program is working. It's working to the extent that when Veterans Affairs finds out about a veteran's difficulty, whether it's a traditional veteran or a new veteran, Veterans Affairs reacts to that particular situation and addresses the problem as put forth by the veteran.

Most recently, a case was handed to me on December 5. Because of the sensitive nature of the case, if I had responded right away, I would have been responding from my heart, as opposed to responding from somewhere else; I contacted Veterans Affairs over the weekend, sent them an email to be addressed on Monday, and by Wednesday of this week they were on the case and interviewing the veteran who was experiencing difficulties.

It falls into the category of communication, once again. This particular veteran was 71 years of age and was unaware of the benefits available to him. He's dying from leukemia. He wanted some assistance. As I've indicated, when Veterans Affairs was notified on the Monday and first read the email, they took hold of this and were on the case by Wednesday.

Other cases are working with respect to the veterans independence program. Two of my colleagues in Greenwood, Nova Scotia, had difficulties in their homes with respect to the special equipment that assists them in living in their homes. Within five days of being notified of that difficulty, Veterans Affairs Canada had rectified it.

The new Veterans Charter advisory group, chaired by Muriel Westmorland of Hamilton, Ontario, will be addressing the veterans independence program and the health care review, and I believe there will be a report in April as a result of that particular committee.

Some of the difficulties with respect to the veterans independence program are the time limits. As I mentioned just a few minutes ago, the time limits with respect to a couple of cases were very quick and to the point. By the same token, sometimes Veterans Affairs Canada is a little slow to react, but in the last couple of years that has been addressed, and they are certainly reacting very quickly when a problem is brought to their attention.

The only complaint we have is that from time to time there is difficulty with the application system and the time limits having to do with an application once it is put forth to VAC. Sometimes they're a little slow, but by the same token, things are working out quite well.

I don't have much to say with respect to the review of veterans' care needs. I am on a subcommittee chaired by Don Ethell, and the major committee, the new Veterans Charter advisory group, as I mentioned, is chaired by Muriel Westmorland. That particular subcommittee just started earlier this month, and once again we hope to have a report by April with respect to the health care review concerning the new Veterans Charter.

I have before me the note from Mr. Duffie. This is the gentleman who is passing away...or who is in serious difficulty with respect to leukemia.

As I indicated, it's a communication problem. And I think it's a communication problem with a lot of veterans.

Mr. Duffie joined the force and he said he wouldn't whine. Yet it has come to this situation where it's getting a bit beyond him with respect to the financial problems. Now that he's 71 years old and he's experiencing health difficulties, he's making an application. But by the same token, if there had been more communication earlier for Mr. Duffie, I'm quite certain this would have been addressed earlier. As it is, he's 71 years of age, and he has leukemia, which requires a great deal of medical care. It's just too bad that it wasn't addressed much earlier.

I have the note from Mr. Duffie, which I'm quite prepared to leave with you.

Other than that, as I indicated, our organization is content that the veterans independence program, generally speaking, is working very well.

•(1115)

The Chair: All right. That obviously leaves a lot more time for questions.

First off, we'll go to the Liberal Party of Canada, with Mr. Valley, for seven minutes.

Mr. Roger Valley (Kenora, Lib.): Thank you, Mr. Griffis.

I'm glad you corrected yourself and said that Mr. Duffie is still alive. He could be listening. This is live on the web.

Mr. Ronald Griffis: I told him I would mention it to VAC.

One of the reasons Mr. Duffie wrote to me is that as a prelude to coming to Ottawa, I sent an email to our membership, generally. It reaches well over a thousand people in a matter of seconds. Thank goodness for the email system.

Mr. Roger Valley: That's the challenge we face. We've brought it up many times at this committee. I serve in the Kenora riding. It's a very rural area, and it's a long way between anywhere. We don't know who has served and who our veterans are. I know our legions have a lot of support, and we work with them, but it's very difficult for us to actually communicate with them unless they come forward. There are privacy laws, and we have to deal with them.

I want to ask you where you served, sir.

Mr. Ronald Griffis: I served with the Canadian Army Provost Corps, which is now called the military police. I served in Manitoba, Ontario, Quebec, New Brunswick, and Cyprus.

Mr. Roger Valley: Thank you for all that service in those many different locations. We're fortunate to have someone with your experience.

You referred to the Gerontological Advisory Council report. A lot of that seems to be geared toward serving people who were in the Korean War and the Second World War.

We have people, like yourself, who did not necessarily serve in the war. We want to make sure that our focus is not totally on a couple of groups when there are people who served in the Gulf War, in Cyprus, and in any number of theatres and difficult operations around the world. What would you say about how we would involve everyone to make sure it's working.

Mr. Ronald Griffis: I'm under the impression that this is being addressed by the various committees in Veterans Affairs Canada. The Gerontological Advisory Council has indicated that a veteran is a veteran is a veteran.

Although I appreciate the different status of veterans, whether they be World War I, World War II, Korea, and then the different United Nations veterans and other veterans who began in 1953, 1956, I'm under the impression that before long—when I say before long, I gather it's up to Parliament—there will be a relatively new system where veterans will be dealt with on a case-by-case basis.

Keeping the Promise, the gerontological report that was 10 years in the making, indicated that the veterans will be served as to what they need, as opposed to what they qualify for. For instance, if a veteran needs a long-term care bed in a facility, that veteran will get it, and if he or she needs help staying in the home, they will get that also.

Mr. Roger Valley: Thank you for your comment. You'll hear from a number of people around the table that a veteran is a veteran is a veteran. We believe that. We want that to work that way.

From my own side, being from the riding of Kenora, it's very important that we have the home support services, because the bed is several hundred miles away when it comes open. We accept that because we live in small communities. We know we can't necessarily have those kinds of services there. It's important for us to continue to make sure that those home care services are provided and improved upon.

Your comment at the start, that VIP is working, is encouraging. I assume there are a lot of cases where it does work very well. The problems we hear about are where it doesn't work, and you've identified the information side of it.

As a member of Parliament, can you give me any advice on a riding that is almost one-third the size of Ontario? How do I reach out when I don't have the information and I don't have the contact names?

•(1120)

Mr. Ronald Griffis: In the various committees we serve on, we have brought that to the attention of Veterans Affairs Canada. They're trying to address an operation that will advise people of what is available to them. I'm under the impression that there are still 220,000 veterans out there who may or may not require assistance. When I go around to speak at the various veterans functions, I bring it to their attention.

We have the older veterans and the new veterans. The new veterans are latching on to programs like Facebook on the Internet, although I haven't been on it, where they talk about various difficulties. It's communication, and I don't know how we're going to address it. Perhaps it's going to be a full-page ad in the *The Globe and Mail* and the *National Post* and local newspapers.

Veterans Affairs publishes *Salute!*, which is a newspaper that goes out to all veterans who are registered with Veterans Affairs Canada. As I've indicated, I'm under the impression that there are 220,000 veterans out there who don't know what's available to them. And for those who know what is available to them, sometimes they have difficulties with Veterans Affairs Canada, and the rumours of the past difficulties with VAC catch up with them and they don't want to bother with VAC. It takes, I gather, a person like me to present an optimistic view of what's taking place in VAC, as opposed to a pessimistic view.

A lot of the comments I hear that are negative in tone, of course, come on November 11 when there are gatherings at various veterans facilities. At the end of the day, not at the beginning of the day, after there has been a lot of camaraderie and perhaps consumption of alcoholic-type beverages, they voice their opinions. Sometimes their opinions are very good and sometimes they're not, but most recently of that nature.

Mr. Roger Valley: I grew up...and there were 33 members of the Legion. It was mandatory for all of us to join the Legion. My father was a veteran, landed on D-Day. I've lived through many of those experiences of the day-long discussions. With my father, his opinion of Veterans Affairs was always on the negative side, right from the time he was...I forget the term, when they were actually released from the army, but they had a pay they were allowed to access. It took him years and years just to access that.

He had the ability. He was an educated man and had all the ability of living in a town of, at that time, 5,000 people, which wasn't bad. With many of the issues in northern Ontario, where they had no services or they were first nations, they simply didn't have the ability.

I'm getting the sign. Thank you very much for coming today.

The Chair: All right. Thank you very much, Mr. Valley.

We now go over to Monsieur Perron.

[*Translation*]

Mr. Gilles-A. Perron: Good morning, Mr. Griffis. Greetings, once again. We've met a number of times.

I have a message for Mr. Duffie, the former member who you have taken care of. He was lucky to find a guardian angel in blue because I'm convinced that his case would not have been settled in a

few weeks, as it was thanks to you, if he had remained alone in the field like most people who find themselves in a similar situation.

I'll give you an example. A lady by the name of Jennifer came and testified with her husband, Mr. Rainville. She told us that it took nine years to settle his case.

I'd like to hear your comments.

The main problems at the department are attributable to reaction time. You said in your statement that it was a bit slow, but I find it's very slow.

You didn't talk about the complex nature of the documents that must be completed? It isn't always easy for a person to complete those documents.

I'd also like you to give me your opinion in order to expand on a point that you raised. There is a tendency—and it's no doubt a good one—to keep veterans or former members at home and to provide them with a system of home care. What do you think of that system?

•(1125)

[*English*]

Mr. Ronald Griffis: With respect to the slowness of Veterans Affairs Canada, some applications are extremely complex, and some applications require the resubmission of documents. The resubmission of documents takes time. Sometimes they ask for medical documents. In cases that I'm aware of, the securing of medical documents takes more time, and sometimes the person who requires attention is slow in receiving these documents. By the same token, the medical professions in our community are very busy. I appreciate the slowness and the degree of slowness that is alluded to, but by the same token, if we had more persons with the Royal Canadian Legion—a very good organization—and with our organization, who volunteered to assist these veterans, and if the veterans had confidence in these persons, it would be addressed with respect to the slowness.

Once the documents are sent or given to Veterans Affairs Canada, that's a different story. We have no control over that, only to indicate that recently, as I've indicated, between last week and this week, they addressed the case that was brought to their attention.

I appreciate the complexity of the documents. For instance, I'm aware of a colleague who has applied for hearing assistance. He required the report of an audiologist. Just to get an appointment with that particular specialist took some time. After six months had elapsed, Veterans Affairs Canada sent him a reminder, and he still experienced difficulty in getting a comprehensive report from an audiologist. Once again, that has now been addressed. By the same token, that was very timely.

With respect to the trend of keeping veterans in their homes, I'm under the impression that once that particular decision is made...I feel it is less expensive, bearing in mind that a lot of times the dollar is the bottom line. To keep a veteran at home, with respect to the various services, such as home care, Meals on Wheels, and assistance in getting to appointments, is much cheaper and much better for the veteran, as opposed to putting that veteran in a long-term bed, which I understand costs a tremendous amount of money.

Once again, the veteran's mental health at that particular time will be addressed in that he will be in familiar surroundings in a familiar community. Once he establishes a rapport with the persons who are providing service, I think the veteran will be much happier and much more comfortable in his home. Our association agrees with the home care situation, and we hope there is more of it.

• (1130)

[Translation]

Mr. Gilles-A. Perron: I only need a minute. This is a very brief question.

My concern is home care. I'm not talking about my riding, because it's a semi-rural, semi-urban riding very close to Montreal. I'm thinking here of my friend Roger Valley.

How can anyone go and provide care twice a week, or every day, to a veteran who is at home a number of kilometers from the city, where the roads are often not very passable? Some will need care every day.

Does the medical transportation system for veterans have the capability and the know-how to make this task acceptable in all provinces?

[English]

Mr. Ronald Griffis: Yes.

As part of the veterans independence program... There's a paragraph in the booklet that is handed out by VAC that says, "transportation costs to foster independence, for activities such as shopping, banking, and visiting friends when transportation is not otherwise available".

I appreciate that this directs its attention to transportation, but it also pertains to other items. The veteran can be visited and things of that nature so they can be addressed.

I'm under the impression that if a problem of that nature arose, there would be flexibility with respect to Veterans Affairs Canada and they would address it, and they would address it to the benefit of the veteran.

[Translation]

Mr. Gilles-A. Perron: That's my wish as well.

Thank you, Mr. Chairman.

Le président: Thank you very much, Mr. Perron.

[English]

We will now move on to Mr. Stoffer, with the NDP.

Mr. Peter Stoffer (Sackville—Eastern Shore, NDP): Thank you very much, Mr. Chairman.

I will just give you a chance, Mr. Chairman, to welcome the group behind us, if you wish.

The Chair: Yes. From what I understand, they're visitors in from the riding of Richard Nadeau of the Bloc. We welcome you. Hopefully you'll get a sense of what our parliamentary committees are like.

We have a witness before us today, so we get to ask him all sorts of questions about veterans programs and get his feedback.

Thank you very much for visiting.

Mr. Peter Stoffer: Thank you, and have a cookie before you go.

First of all, Mr. Griffis, thank you very much for coming. I had the privilege of speaking to one of your organizations in Greenwood a few weeks ago.

Sir, you had indicated how the VIP is working, and you're absolutely correct; it works for those who receive it. But for those who have been denied it because of the principles and policies that are in place, it can be a very frustrating experience, as I'm sure you're aware.

I'll give you the example of Chris Beattie. She is a woman whose husband was exposed to Chalk River. He was very ill. DVA came to his home and said, "Sir, you are entitled to VIP. We are going to give it to you." He died before he actually received it. Because he died before he actually received it, she is not entitled to VIP services.

As you know, sir, by the time we go to bed tonight, we will lose another 120 veterans and/or their spouses due to old age and sickness. And we're losing an awful lot of them very, very quickly.

We had a previous assurance by a former opposition leader, and now Prime Minister, that VIP would be extended immediately, and it hasn't happened yet. I understand there is a health care review, which is very important, not just for VIP but for other aspects of it.

Do you not believe, sir, that something like VIP, which does save the taxpayers money, should be extended immediately to people who call in? I have a very straightforward view. As you know, many of the older veterans find it very difficult to fill out forms. If they didn't get a hearing test during the war, they may be denied hearing aids or pensions for that, because there is no so-called medical evidence that they can link their need to their service.

We had a gentleman in Windsor, Nova Scotia, the other day who was denied by VRAB. He was a firefighter with DND for many years and was denied compensation or a pension benefit because they couldn't prove that his cancer and his heart problems were caused by smoke inhalation, because he didn't have all the medical evidence behind him.

The government, and other people, have said, sir, that the benefit of the doubt should always fall upon the veterans. If an 84-year-old veteran calls up looking for help, shouldn't the answer be, "we'll be there to help you, and what do you need?" instead of "well, you didn't have this particular medical form", or "you may be making too much money, we're not able to help you", or "you don't qualify for this particular benefit"?

We hear the good stories, but we hear an awful lot of the most unfortunate ones of people who have been denied.

What advice could you give us?

•(1135)

Mr. Ronald Griffis: With respect to Chris Beattie, on Monday of this week I joined a committee called the client advisory committee, out of Halifax. Mrs. Beattie sat to my right, and she has a folder that is approximately four or five inches thick with respect to the difficulties that took place in Chalk River in 1958. I appreciate her difficulties in that she wants the government to recognize that her husband passed away as a result of nuclear poisoning.

With respect to the firefighter whose article was in the paper just the other day, I appreciate his difficulties, bearing in mind that several provinces—and the one that comes to mind is the Province of Ontario—have recognized without question that the firefighting equipment has, over the last number of years, improved to such a degree that, when it was not to such a degree and firefighters were fighting fires, they breathed in a tremendous amount of chemicals. If they develop a cancer, I understand in Ontario it's recognized automatically with respect to that particular difficulty.

On the Agent Orange difficulty in Camp Gagetown, the government has recognized that there are about 10 or 11 categories of illnesses that will be recognized automatically if you served in Gagetown at a particular time, date, and place. Those would be type 2 diabetes, skin cancer, and high blood pressure, just to name a few. The government has automatically recognized it.

This was an American situation, where the Americans indicated that they will recognize this if you were subjected to Agent Orange, Agent Purple, or whatever the agent may be.

So I appreciate it, and I would imagine it's just a matter of time before our government will recognize that certain difficulties are caused by certain conditions that were not addressed in the past.

One of those, of course, would be Mr. Beattie, indicating that Mrs. Beattie just wants the government to recognize that her husband received nuclear poisoning at Chalk River. I understand there was a spill of some nature at Chalk River in May 1958, and that he was a member of the Canadian Guards at that particular time—they were stationed in Petawawa—and he was on a cleanup detail.

I appreciate that, and I appreciate the difficulties as put forth by Mrs. Beattie and by the Department of National Defence firefighter.

Mr. Peter Stoffer: Thank you very much.

The Chair: Now we're going to the Conservative Party of Canada, with Mr. Shipley for seven minutes.

Mr. Bev Shipley (Lambton—Kent—Middlesex, CPC): Thank you again, Mr. Griffis, for coming. I've had the pleasure of being here when you've made I think more than one presentation to us. Just so you know, Ms. Hinton is not here. She's home with some medical issues, so I will pass on to her the comments you've made today.

I also want to welcome the young people who have come in. I think we can never stress enough the importance of what Veterans Affairs are doing—not of what we're doing, but what our veterans have done for our great country of Canada. Any opportunity we have to raise that recognition to our young people, we should do. I appreciate their coming in today.

Mr. Griffis, earlier on you talked about communications. Many times, in many areas, communication seems to be one of the barriers

that we come up against. It happens in here, it happens with veterans, it happens in our family, and it happens in our business, where direct communications and clarity of communications to help people are sometimes hard to get across.

When we're talking of the 220,000 veterans who are there now, we know that some of those veterans likely have heard the communications, especially our traditional veterans who have a mindset, as we heard about the other day, as an example, that they don't want to take a service for free. When they're feeling they don't need the service, they don't always pay much attention to that. I think we're likely all a little guilty of that. When we're feeling good about something, we may read the notices, but if it doesn't necessarily affect us, we don't pay much attention to it.

You had mentioned that you sent out, in terms of communication, a magazine called *Salute!*. I'm wondering whether that gets to all the 220,000. Or is that going to the peacekeepers?

•(1140)

Mr. Ronald Griffis: The *Salute!* magazine is sent out by Veterans Affairs Canada and it goes to every one of their clients. In addition, they send to me about 1,000 copies and I distribute 1,000 copies to the peacekeepers. Now the peacekeepers in some cases, of course, will receive two copies, one from Veterans Affairs Canada and one from me.

Mr. Bev Shipley: Do you see that as a vehicle that we need to emphasize more, then, through Veterans Affairs, to carry that communication?

Mr. Ronald Griffis: Yes, but I also feel there could be regional contact. Perhaps under contract, I guess, they can't always do volunteer work on a continuing and regular basis, but perhaps they could have someone who goes out and speaks to the veterans organizations and goes out and speaks to community organizations so that they can expand on the services available to the veterans.

Mr. Bev Shipley: I appreciate your comments that, in general, your organization is happy with the VIP, and I think most are. As in everything, there are always people who seem to fall through the cracks or there are barriers that people come up against. Actually, what this committee is trying to do is to lower or get rid of some of those barriers that tend to affect our veterans.

I don't know about your understanding of this because of the new veterans. Do you see a difference, though, between what we would call the traditional veterans and the new veterans in terms of getting the information to them and the way in which we have to get it out to them?

Mr. Ronald Griffis: Yes, I do.

Regarding new veterans, I understand that the general retirement age for a new veteran is 36 years of age, or in that vicinity. Once they leave the forces, for whatever reason—their end of engagement, or some other reason—they want to move on. If they have a problem and it does not surface for a number of years, such as post-traumatic stress disorder, that's when they'll address something.

But by the same token, regarding the young man from the area 90 kilometres southeast of Montreal who committed suicide just a while back, I gather we didn't recognize the difficulty of post-traumatic stress disorder. He lost his foot on a landmine in Afghanistan, and then when he came home he decided to end it. It's a terrible tragedy.

So we have to recognize that. We have to get out there and tell them it's not a bad thing that they're seeking help; it's not a bad thing that they're seeking assistance. Don Ethell will be going around to some of the armed forces bases in the near future, asking what we can do for them—and not necessarily asking that question on the base, but asking that question off the base in surroundings where you can communicate without any difficulties, for example, at a Tim Hortons, or some other place, a curling rink or something of that nature.

• (1145)

Mr. Bev Shipley: We've done a fairly significant study on post-traumatic stress, because it's an issue that we recognized as a large concern. There is a report that's been tabled on that, I believe. I hope we can help with awareness.

One of the things we heard is that there is not an awareness, that there's a resistance by some individuals to stepping forward and acknowledging that they have symptoms or have issues that may be leading them to, or that they are in, the early steps of post-traumatic stress.

So even though we've heard it's something people don't want to step forward on, I also believe, from what we've heard, that people have become more open to doing that—likely more so with the newer vets than with whom we call the traditional vets.

I'm finished. I'll come back.

Thank you very much, Mr. Chair.

The Chair: Did you wish to respond to what he said?

Mr. Ronald Griffis: I agree that post-traumatic stress disorder is going to be an illness of the future, although the illness is already here. It's going to be a severe illness of the future for these young men and women who are serving overseas. The difficulties they regularly encounter are reported in the newspapers, and while the media perhaps express it differently, by the same token, I feel it's going to be a recognizable and severe illness now and in the future.

The Chair: Thank you.

Now we're into what is known as our second round, so each questioner at this stage has five minutes.

Over to the Liberal Party of Canada and Mr. Russell.

Mr. Todd Russell (Labrador, Lib.): Thank you, Mr. Chair.

Good morning to you.

I just want to know a little bit more about your organization. I'm new on this committee and am learning as I go forward. In our notes it says you have about 1,000 members, but surely there have been more people within the forces who have served on peacekeeping missions abroad.

Is your organization only dealing with peacekeepers? Does it include any other types of veterans? Are there people who served on peacekeeping missions who are not members of your association?

I just want to know a little bit more about your organization.

Mr. Ronald Griffis: Our association is right across Canada. We have 27 chapters. We're part of what might be described as the “big six”, or the “three big and the three little” type of thing, and we're on the “three little” end of it.

The criterion for joining our organization is that you must have been awarded the Canadian Peacekeeping Service Medal that came into effect several years back. There's another organization called the Canadian Peacekeeping Veterans Association. I'm unaware of what their criteria are, except that if you're a retired or ex-member of the Canadian Armed Forces you can join.

All of the veterans organizations are working together—as recently as November 16 of this year—where there's an effort to bring all of the veterans organizations together under one umbrella. There is a possibility that it may be called the Royal Canadian Legion Federation of Veterans.

We appreciate that the difficulty with veterans is that there are traditional veterans and older veterans that we can't draw from any more. For instance, when the last member of the Korean War passes away, the Korea Veterans Association will disappear. When the last person from the air arm of the navy passes away, that association will disappear. So what we're trying to do—and the Legion held a very informative and good session on or about November 16—is bring all of the associations under one roof.

With respect to our association, we're growing, but ever so slowly. For instance, just about three months ago we opened up another chapter in St. Catharines, Ontario. I can only suggest that when the Afghanistan veterans return, they may in fact form an association, such as the Gulf War Veterans Association did. We can only suggest that once the Royal Canadian Legion gets together, and we understand and prepare a constitution, we may in fact all be under one umbrella.

Now, it's not something that's going to happen overnight, but it's something that's there and it's visible.

• (1150)

Mr. Todd Russell: Well, I certainly thank you for that information.

Let me say personally, and I'm sure on behalf of my colleagues—I'm a Liberal, but I do appreciate and value your colour blue and the work you've done. I don't say I appreciate blue all that often, but in this particular context I appreciate it very much, and I honour what you do.

An hon. member: That's a nice blue colour there.

Mr. Todd Russell: That's dark blue. I didn't want to open up heckling at this hour in the day.

Mr. Ron Cannan (Kelowna—Lake Country, CPC): We embrace you.

Mr. Todd Russell: Yes, I'm sure.

I want to get back to an issue that was raised by my colleague. As I understand it, disproportionately, a lot of people who go into the forces come from rural areas, for any variety of reasons. If you look at some of the numbers in Atlantic Canada, disproportionately we have a higher number of people per capita in the forces than other areas of the country. Atlantic Canada is very rural, as is my riding of Labrador.

The issue is, again, around communications. Have people made proposals about how we get more information out? Is there an awareness that we have to get more information out on the veterans independence program and other types of programs? Is there a concerted effort to do that, particularly in a rural setting?

Mr. Ronald Griffis: Yes, there is an effort to get out more communications. It is not particularly addressed to a rural setting.

I live in Nova Scotia, in the Annapolis Valley, in a rural setting, although I'm only six kilometres north of a small town called Berwick. On the same token, my neighbour down the road is an ex-military person and he's not aware of the availabilities. Now, he's aware of our organization. He's a UN veteran. But it sort of stops there.

Yes, there is an effort to communicate more.

Mr. Todd Russell: Is that time? Thank you.

The Chair: It was five minutes, thirty-seven seconds, just to let you know.

Now we're on to the Bloc Québécois, Monsieur Gaudet, five minutes.

[Translation]

Mr. Roger Gaudet (Montcalm, BQ): Thank you, Mr. Chairman.

Mr. Chairman, since I have to leave soon, I'd like to take a few moments to wish a Merry Christmas to you and to Mr. Griffis, to all my colleagues, the interpreters, the clerk, the analysts and all the House employees. I also wish everyone a good year and good health.

Mr. Griffis, what do you think about the 1-800 telephone system?
[English]

Mr. Ronald Griffis: It could be better operated. There's room for improvement.

[Translation]

Mr. Roger Gaudet: What solution are you proposing to us?
[English]

Mr. Ronald Griffis: A more local phone number, a more local 1-800 number, perhaps, for a province or two.

[Translation]

Mr. Roger Gaudet: From what you've said so far, what kind of relations does the Canadian Association of Veterans in United Nations Peacekeeping have with the Canadian Legion and veterans? Are they good relations?
[English]

Mr. Ronald Griffis: Our relationship with the Royal Canadian Legion as well as Veterans Affairs Canada is in the category of excellent. We get along very well. I enjoy the company of Jack Frost, the president of the Royal Canadian Legion. Although Jack is not a

veteran per se, he understands veterans issues. He's very knowledgeable on veterans issues. He's a nice guy.

I have found the people I deal with at Veterans Affairs in Charlottetown and in Halifax and other areas to be very accommodating. I appreciate that there are some difficulties, but they're really not worth mentioning, if you know what I mean. They're very minor in nature.

• (1155)

[Translation]

Mr. Roger Gaudet: I understand, but in the past while, you've been saying that 220,000 veterans have not been contacted. So people must be somewhat uncomfortable with the approach.

[English]

Mr. Ronald Griffis: The number I mentioned is the number, I understand, who are out there who have not contacted Veterans Affairs Canada. Perhaps they don't have a reason to contact Veterans Affairs Canada.

One of the issues we have with respect to communicating is that the longer we put off communicating with the veterans, the more they're going to pass away, and before you know it, there will be very, very few veterans, save and except the modern-day veteran. I appreciate that there's one veteran left from World War I and there are several thousand from World War II and Korea, but once they all pass away, the number of people who will be clients of Veterans Affairs Canada, I feel, will diminish.

There are only so many, and as Mr. Stoffer just said a few moments ago, we're losing hundreds of veterans a day because of age. Regarding the communication difficulties, the more we sit on our hands and not communicate, the more the veterans are going to pass away. As I said, before you know it, if we don't do something quickly, within five or six or seven years, the population of veterans will be diminished, save and except the new veterans.

[Translation]

Mr. Roger Gaudet: Do you think there could be a single organization for veterans and those who, like you, are peacekeeping veterans? There is an association for veterans of the Korean War, one for the Gulf War and so on.

Why wouldn't there be a single association with representatives of each mission? Otherwise there is a risk that we may wind up with as many associations as there were missions.

[English]

Mr. Ronald Griffis: A qualified answer to your question is yes. I feel we could operate as one as long as we can keep the identity of the original association—for example, if I were to join the Legion as a member of the federation of veterans, would I be allowed to wear my blue blazer? Would I be allowed to wear my blue beret?

I understand that's one of the problems we're addressing, and I understand that problem could be addressed in the affirmative in that there would be no problem. So a qualified answer is yes, as long as the identification of the other veterans organizations can be kept.

[Translation]

Mr. Roger Gaudet: My time is up.

Thank you very much.

[English]

The Chair: I realize we sometimes would like to ask more questions, but it's out of respect for fellow members and their ability to ask questions as well that we move on.

Now, over to the Conservative Party of Canada, Mr. Sweet, for five minutes.

Mr. David Sweet (Ancaster—Dundas—Flamborough—Westdale, CPC): Thank you, Mr. Chairman.

Mr. Griffis, I, too, would like to add my voice to thanking you, not only for your service in the Provost Corps, but also for continuing with veterans to this day to make sure they are serviced well.

Also, I'm very encouraged by this information—and it's the first time I've heard it—about the Royal Canadian Legion Federation of Veterans. That must be very encouraging to all veterans as well.

I'm very grateful as well that you have affirmed your confidence in the government's bringing about the resolution of the VIP program. I'm certainly conscious that “immediately” also means “sustainable”, and that there are a lot of considerations to make sure that not only do you deliver, but you can consistently deliver over many years to come.

I want to ask you particularly about outreach, because the Minister of Veterans Affairs has been busy. The charter has been established, the bill of rights, the ombudsman.

And by the way, I hope, like the ombudsman, you didn't have the same experience as a peacekeeper. I believe he said he was threatened, spit on, shot at, and stabbed. I hope your experience was a little bit more positive.

We've had a number of witnesses here before the committee who have said that there's substantial outreach happening at Veterans Affairs. As I said, a lot has happened. I'm encouraged by the fact that even you have said that their services are getting better, their response times, etc. But it seems to me that this outreach is lacking if there are the numbers that you say who have not communicated with VAC or are not aware of these services. And I believe you're doing outreach as well.

In your opinion, is there still substantial work that needs to be done to ramp up that outreach? As I said, a couple of witnesses have already been here and said there are outbound calls happening now.

• (1200)

Mr. Ronald Griffis: Yes, I agree there is a tremendous amount of work that could be addressed. But by the same token, I appreciate the dollars and cents issue that goes along with any program, and that causes me some concern. You can volunteer only so much, and then it becomes a problem.

Mr. David Sweet: Do you have a coordinated effort with Veterans Affairs, or are there privacy issues that impede your ability to synergize their efforts?

Mr. Ronald Griffis: There's a qualified answer to that, and the answer is yes, we get along quite well with Veterans Affairs, but we still must appreciate the privacy issue.

A case in point is a veteran in Berwick, Nova Scotia, who requires a hearing aid and won't let me give his name to VAC for them to help him. He's an older veteran and he's set in his ways, and he doesn't want to be considered a problem. He doesn't want my involvement to hurt his application, so he's concerned in that way. He'll let the application go ahead, and hopefully it will work out well for him.

Mr. David Sweet: Sure.

I have another specific question for you as well, because I had a couple of constituents approach me. Have you had any feedback in your organization of any disparity on travel? Travel is a part of the VIP program. Have you had any concerns from some who say their travel is covered more easily, that some have a card they can use and some others don't?

Mr. Ronald Griffis: Yes. For instance, in Greenwood, Nova Scotia, a lot of our veterans have services that take place in Halifax and they have to take a bus; they don't have a vehicle available to them. They must take a bus, and it's not covered.

Mr. David Sweet: It's not covered?

Mr. Ronald Griffis: No, it's not covered.

Mr. David Sweet: Have you talked with Veterans Affairs Canada about that?

Mr. Ronald Griffis: Yes.

Mr. David Sweet: I have one final question. I think it's probably going to be my final question.

Your association was involved with the Gerontological Advisory Council—

Mr. Ronald Griffis: Yes.

Mr. David Sweet: —and coming up with the recommendations. Were there any concerns or recommendations you had that were not involved in that study as it was published?

Mr. Ronald Griffis: No. As a matter of fact, when Dr. Marshall appeared before this committee, he expressed a concern that this committee was not given a copy of *Keeping the Promise* firsthand. That is part and parcel of the communication difficulty, and by the same token, we're quite content that a lot of the recommendations in *Keeping the Promise* have been or will be implemented.

Mr. David Sweet: Good. Thank you very much.

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

Now we're back over to the Liberal Party of Canada and Mr. St. Denis.

Mr. Brent St. Denis (Algoma—Manitoulin—Kapusking, Lib.): Thank you, Mr. Chair.

Thank you for being here, Mr. Griffis. I'll also add my thanks for your service and as you continue your service in support of the veterans.

One of the issues we want to make very clear—and we have discussed it here on many occasions. As one of my colleagues has already said, a veteran is a veteran. Even though, in the minds of the public, there might—I say might—be some distinction between somebody who was in the Second World War or the Korean War versus those who maybe served at home in Canada in very important jobs, as mechanics, for example, at Petawawa, which is very important, or as a peacekeeper—many of those peacekeeping missions were in tougher circumstances than some of the war circumstances.

That said, have you ever experienced any difference in the level of service or the response of the department because one was a peacekeeper versus a person who was a World War II veteran, for example? Were you always treated equally, or was there ever a difference in approach?

• (1205)

Mr. Ronald Griffis: To the best of my knowledge, we've always been treated equally. There's been no difficulty.

Mr. Brent St. Denis: In my own riding, I'm thinking of a Mr. Meier and another gentleman, Mr. Morrissette, one of whom was a Second World War veteran and the other was a peacetime veteran. He may have been a peacekeeper; he was in Germany, so he may not have been a peacekeeper per se, but it was post-war service. In both cases, their injuries were undocumented. They were young and possibly in the early stages of their service, and they may have tried, in the event of an injury—in one case it was a knee, and in the other case a gentleman fell off a truck because it moved while he was on the back of it—and there was a lack of support, as they would say, in terms of documenting the incident. Later on, when these injuries manifested themselves as they got older, they couldn't go back. There was no file, or there was an insufficient file to support their cases.

Is there a way around that? Is the notion of benefit of the doubt appropriate? What level of proof does a veteran have to provide, without a file or a complete file, in order to access services? It would seem to me that if somebody swore an affidavit, that might be sufficient.

Could you talk about the documentation? Maybe it applies to your veterans and maybe it doesn't.

Mr. Ronald Griffis: I find if there is a lack of documentation with respect to an injury or with respect to a claim, if that claim is examined by a person with knowledge of the particular employment of the claimant, that could assist the claimant.

I'll give you an example. If a person spent a great many years in a ceremonial unit and had occasion to fire the older weapons, the FNC1 and the .303, at shoulder height, and explained this, a young person today, although they're very well educated, would say he was just firing a gun, but in those days no hearing aids or noise aids were provided. If a person who had that type of experience could examine the claim and address it from that point of view.... It's like going to an orthopedic surgeon. If you go there with a bone problem, he'll help you out; if you go there with a blood pressure problem, perhaps he would send you to another specialist.

As I've indicated, for instance, if a person is always doing the 21-gun salutes on Parliament Hill, or whatever number of gun salutes

they have, and we had a person who had knowledge of that particular activity and could identify with it, then certainly that would be a way to go.

Mr. Brent St. Denis: In your experience, how much has the disability itself, whether it was hearing, whether it was a physical injury, or even an issue of literacy...? We presume there's a reasonable level of education going into the military regardless, and as we look at veterans of more modern times, it may be less of an issue, but is literacy an issue itself? You talked about the gentleman who didn't even want you to bring his name forward. Maybe he had anxiety over having to deal with the government.

What are some of the social barriers that you see for veterans? Are they literacy or anxiety? I think you get the point of my question.

I think you're allowed to respond to that, Mr. Griffis, if you can.

• (1210)

Mr. Ronald Griffis: I agree with your submission. When a veteran experiences difficulty, I find they withdraw. They withdraw from social activities; they withdraw from the community; they withdraw from normal activities that you and I perhaps do every day without thinking twice about. They just withdraw, and that's a sad situation, bearing in mind that if they had, for instance, a hearing aid—although a hearing aid is quite expensive—a lot of their problems could be addressed.

Mr. Brent St. Denis: Thank you, Mr. Griffis.

Thank you, Mr. Chair.

The Chair: Thank you.

We'll now go over to Mr. Shipley.

Just before Mr. Shipley begins, Mr. Griffis, you are our witness today and our guest. As you can see, some of us are having lunch. If you wish, we can have the staff of the committee bring you some lunch.

Mr. Ronald Griffis: No, it's okay. Thank you.

The Chair: Okay.

Oh, I see, we're going over to Mr. Cannan, are we? Okay, fair enough.

Mr. Ron Cannan: Thank you, Mr. Chair.

I have just a quick question, and then I'll pass it to my colleague, Mr. Shipley.

Thank you very much for your presentation. I didn't hear your preamble, but I did read your website and the information that was provided.

I also would like to thank you and your organization for the work you do.

I know you represent a broad perspective of individuals. Looking at the website, you represent "retired and serving Canadian military (Regular and Reserve), RCMP and civilian personnel who have served on United Nations Peacekeeping Missions". So thinking of the diversity of individuals, men and women, that you have to address, do you find much of a difference between the RCMP needs and those of the Canadian military?

Mr. Ronald Griffis: I find the RCMP have much better benefits than the military do. I feel the military benefits could be addressed, increased.

Mr. Ron Cannan: There's a bit of a disparity then?

Mr. Ronald Griffis: It's not much, but these are things that are negotiated on contracts and things of that nature.

Mr. Ron Cannan: Hopefully, this review will address that.

Regarding the issue of hearing aids, I know it's a big issue in my constituency. My wife actually works for an otolaryngologist—ear, nose, and throat doctor—working with the technology. What's changed so much now with the hearing aids, how quickly the technology.... It costs \$5,000 for a little hearing aid now, and you can barely even see it in your ear. There are devices available for veterans. I'm hoping that our new system and the benefit program will address those needs to give our veterans the services they require.

Thank you, again, for your services.

I'd like to also wish all the members and the staff the best of the season. Merry Christmas.

Thank you.

Mr. Ronald Griffis: Thank you.

The Chair: Mr. Shipley.

Mr. Bev Shipley: I have just one question, and in fact I know you've sort of touched on it. We've had the Gerontological Advisory Council's report *Keeping the Promise*—and you've talked about it. Could you suggest some recommendations for change that would be advantageous? Do you have some that you could talk to us about?

Mr. Ronald Griffis: I find that the recommendations and the changes that are being proposed and prepared by Veterans Affairs Canada—at least by the people that I talk with and that I'm in committees with—are reasonable under the circumstances, and they are moving forward. The difficulty I see is that, as Mr. Stoffer mentioned before, we have veterans dying every day. I think we lose 20,000 veterans a year, and that's just terrible.

We have to move ahead faster than we are doing, but by the same token, I appreciate that we can't hire people left, right, and centre to address something that's going to be over a period of five years, or perhaps less or perhaps more.

Mr. Bev Shipley: I would think there will be movement ahead on this, hopefully. As we've come through this committee and had reports, it's certainly been the desire of our government to move ahead with the VIP. We recognize the significance of it.

I think sometimes we tend to think it's all about cutting the lawn and removing the snow. And that's a portion of it, but it reaches much more into the health care aspects of individuals and keeping them in their local communities, in their surroundings, and in their homes as long as we can.

Again, I want to thank you, Mr. Griffis, for coming back out today. I wish you and your family and everyone a merry Christmas and a happy new year.

•(1215)

Mr. Ronald Griffis: Thank you, sir.

The Chair: Now we'll go over to the New Democratic Party. Mr. Stoffer, you have five minutes.

Mr. Peter Stoffer: Thank you very much, Mr. Chair, and Mr. Griffis, again.

Sir, the other day, at an air force reception, I met a gentleman who had served in Afghanistan. He said something to me I hadn't thought of before. He said that the mission in Afghanistan will not be finished until the last person who serves in that mission dies. Basically, what he was referring to was that assistance for some of these individuals who come back will be lifelong. If they come back with PTSD or physical or mental injuries of some kind, for them and their families, the care from the government will probably be for the rest of their natural lives. I thought that was extremely poignant.

Would you agree with the statement that a mission is not completed until the last person who served in that mission is gone? In other words, he was saying that care for the veteran should go from the time they're in the service right to their headstone.

Mr. Ronald Griffis: A qualified answer to that is yes, I agree. A great many veterans are going to come back, and they're going to be receiving care of some nature from Veterans Affairs Canada. It's only reasonable, as I understand it.

I understand that when the service personnel leave Afghanistan, they stop in Cypress. In Cypress they're interviewed with respect to any problems. Some of the problems that have been identified have been PTSD.

I was talking with a district officer from Veterans Affairs Canada, and they indicate, if memory serves me correctly, that 27% of the persons interviewed in Cypress have indicated that they require assistance with respect to PTSD. Now that may be higher as some return to Canada and leave the service.

That is particularly interesting with respect to the member of the militia or the reserves who goes on a nine-month contract, six months being in Afghanistan. Then he comes back to his unit and fails to attend any parades with the militia unit—they parade two nights a week—and they lose contact with him for whatever reason. And then he requires assistance. So there's a difficulty in that particular respect. But I feel that if a person has experienced the terrible difficulties in Afghanistan, he or she will require assistance for a great many years.

Mr. Peter Stoffer: Thank you, sir.

Along with my colleague Mr. Sweet, it's the first I've heard of the Royal Canadian Legion and other groups getting together to form at least some form of alliance. On the surface, that is something I think should be pursued with great vigour, because I think it's a wonderful suggestion to put everything under one tent and at the same time to maintain your own identity.

Sir, just as a sidebar, I received a call the other day from some guys who were on the HMCS *Bonnie* during the Cuban missile crisis. One thing they mentioned was that they were never formally recognized with a medal for the so-called Cold War effort. They were wondering if it's at all possible if one could be struck.

It's the first time I've heard of that request. I'm just wondering what you think of that. Would it be feasible, advisable, or even possible for the government now to recognize the so-called Cold War veterans who served, especially during the Cuban missile crisis?

I know it's an off-the-topic question, but I figured, while you're here, you might be able to help me out on this.

Mr. Ronald Griffis: I think it would be an extremely difficult endeavour, bearing in mind that during that particular crisis, armed forces personnel from right across Canada were sent to various locations, just in case something did take place. Those in Montreal were sent up to Saint-Jérôme, Quebec. Those in Ottawa were sent to Carp, and it keeps going like that. So it would be difficult to identify those persons.

It would be difficult to identify the difficulties they encountered, in fact they did encounter any difficulties, with respect to the Cuban missile crisis. Or was it just another exercise by the Canadian Forces?

• (1220)

Mr. Peter Stoffer: Thank you very much, and thanks again for your service. Have a great one.

The Chair: Thank you, Mr. Stoffer.

Now we'll go to Monsieur Perron for five minutes.

[*Translation*]

Mr. Gilles-A. Perron: I was stunned when you said that 27% of people who have been debriefed upon returning from Afghanistan have psychological injuries as a result of their service.

That leads me to ask you a question that is a great concern to me. I'd like to hear your comments on whether, in light of past and present experience, that would have been useful to you. I hear that the army spends millions of dollars—and I agree with that—to provide good training to young members who are sent to the United States and across Canada to be trained in combat and the mission in Afghanistan. However, only two and a half hours are devoted to preparing them psychologically for the atrocities that they may perhaps survive. Perhaps we could help them diagnose themselves in order to determine whether they have problems when things don't go well during the mission.

Should we do proactive training, in other words try to prepare our young soldiers as much as possible to face the possibility of psychological injuries that they might suffer in a theatre of operations? Would it have been helpful for you to have a kind of prevention course on the possibility of such injuries?

[*English*]

Mr. Ronald Griffis: Yes, I think a lot more can be done for the young men and women who are serving overseas.

I don't know what else I can say on that. I agree with your comments that more could be done and should be done. Being the nice people we are in that we're Canadians, and to see the things that take place in a foreign land, it's extremely difficult.

[*Translation*]

Mr. Gilles-A. Perron: Unfortunately, there were psychological injuries during World War I, trauma as a result of artillery fire. They

were given electric shock treatments to the brain in an attempt to get them back on track. They were so painful they said they were cured.

I think a number of veterans, those who fought in World War II and the Korean War, still today feel psychological injuries that they suffered at that time.

In fact, when I see veterans lay wreaths on November 11, a grandfather 84, 86 or 87 years old crying and trembling like a leaf, not because it's cold, but because he feels a lot of emotion, I say to myself that there's something there that they have yet gotten over. How many World War II and Korean War veterans have unfortunately had Beefeater gin as their only medication, which they start drinking very early in the morning and stop very late in the evening and who start to cry when you talk to them about the Armed Forces? When I see these people in the field and I think that we can't help them as human beings, that distresses me.

I'd like to know the humanitarian side of your views on psychological injuries past and future.

• (1225)

[*English*]

Mr. Ronald Griffis: They're absolutely terrible, what has taken place, with respect to the scars that have been engraved on the veterans, the veterans from World War II and Korea, and from other conflicts. Some persons are stronger than others. That's not to say they're any better than anybody else, but some are stronger than others and they could grasp these particular difficulties and move forward. But by the same token, I feel that nowadays there is more we can do as a society to prepare our soldiers, sailors, and airmen and women to deal with these psychological difficulties. There is much more that we can do, and it has to be addressed.

[*Translation*]

Mr. Gilles-A. Perron: Thank you very much, and I wish you happy holidays.

[*English*]

The Chair: Now we go to Mr. Valley of the Liberal Party for five minutes.

And I'll just note that so far, according to our list, that appears to be our last person. There is something I'd like to address, and then we do have to get to the votes.

Thank you.

Mr. Roger Valley: Thank you very much.

I have just a quick comment. It has come up a number of times today. Communication is a problem for all of us. Well, not for me, but for the rest of my colleagues.

Some hon. members: Oh, oh!

Mr. Roger Valley: I want to be serious for a moment. You mentioned the tragedy that happened a few weeks ago with the young individual who had his foot blown off. There are a number of us around this table who believe a veteran becomes a veteran the day he signs up, the day he starts. We've had our difficulty, and some people at this table have even commented that they're not our responsibility when they're in active forces. A lot of us don't believe that. We believe they're our responsibility because they're going to be a veteran the minute they finish. So even in that circumstance somebody let that individual down. Somebody, somewhere, didn't get to him. So we take our responsibility very seriously on that issue.

But it's communication. Whether it's through the people who are still serving...communication for us is the barrier we face.

I want to ask you a quick question, because you mentioned Cyprus. You served in Cyprus. When active members go now, they go to be debriefed in Cyprus. What happens to somebody who has either a minor injury or a serious injury? Do they get that debriefing where they are in the hospital or where they're taken, because they probably don't get sent through Cyprus when they're injured?

Mr. Ronald Griffis: I don't know the answer to your question. I appreciate that those who are interviewed, as I understand it, are walking. Of course, if you were injured seriously, you would be in the hospital in Germany. So I don't know the answer to your question, sir.

Mr. Roger Valley: Well, as a future question for this committee, I think if debriefing is as important as we've all heard, we should make sure everyone has it properly done. We're assuming that and we probably shouldn't assume that. So that's a question for us in the future.

And lastly, Mr. Chairman, since I do get to be the last speaker today, everybody has said it, but I want to wish everybody merry Christmas, but especially from this committee, from all of us, to all the veterans who serve us and the ones who will see this transcript or hear it today: merry Christmas, and thank you, thank you, thank you.

Some hon. members: Hear, hear!

The Chair: At that, I'd also like to reiterate and thank our witness very much for his presentation. You're welcome to sit in, sir, while I discuss a couple of other issues.

I mentioned at one of the previous meetings—I think I did anyhow, and if I didn't, now I am—that this flow chart, as it were, which I know was distributed at a meeting some months ago, is an eligibility profile table. It highlights what we're really attempting to do or get at. I don't know if all of you have seen this. We were able to dig up a copy from times previous. It has nine categories on one side and then a number of other characteristics on the other. It's an X and Y axis diagram, and it shows all the various benefits that people qualify for or don't. I'll look to have this circulated or copied.

But I hope that when we come back to the revised report that Michel has spent some time doing, we'll keep this in mind with regard to maybe simplifying it, because looking at it, I have a tough time deciphering what it all means, and I imagine it's even more difficult for some of our veterans out there and maybe even for officials inside Veterans Affairs to make sense of it.

That's part of what we're trying to do here, sir, to simplify that.

So that's that. I'll leave that for your consideration, probably not so much over the holidays as it will be for when we return.

I also want to update the committee with regard to my presentation at the liaison committee for our trip to the various military installations, hopefully when we return in late January or early February. How will I put it? Of the three motions that we put forward, the one to Petawawa was approved, no problem. The one to Val Cartier was approved, no problem. On the one for the four bases, it was a very interesting scenario. I will be honest when I say it was Mr. Merrifield of my party and Ms. Ratansi of the Liberal Party who seemed to vivisect that more so than anybody else. But anyhow, what they wound up doing was restricting it so that it was six members for each side of the country. In other words, six members could go west to Cold Lake and to Comox and six members could go east to Shearwater and I think it was Goose Bay. That is what they determined. I tried my best. As I say, if you have issues, you can take it up with either Mr. Merrifield or Ms. Ratansi.

• (1230)

Mr. Roger Valley: You are the chairman. We'll take it up with you.

Mr. Brent St. Denis: I tried.

Could we strangle Mr. Merrifield?

The Chair: Consider it done—more of a kick in the shins, really, for Mr. Merrifield.

Anyhow, that's what they came up with, so we'll have to think about that and when we come back figure out a way through it.

Mr. Valley.

Mr. Roger Valley: I have a couple of questions.

We have a budget. We're supposed to be masters of our own destiny here. We're not over budget in any way. In fact, we spent very little.

The Chair: I understand.

Mr. Roger Valley: We made a decision to do some travel. Is this normal? You sit at this committee. Is this normal that they take apart every—

The Chair: It's very haphazard. Sometimes they do, sometimes they don't. Honestly, Ms. Ratansi was actually the most vociferous about it. She was of the opinion that sometimes if you split up the committee you are able to get a more diverse opinion; in other words, that everybody wasn't indoctrinated by the same visit. Don't ask me to get inside her head because I obviously wasn't agreeing with her, but that's where she was coming from. Mr. Merrifield was concentrating more on the idea of cost-effectiveness.

Mr. Roger Valley: Mr. Chairman, my question was, do they do this to other trips?

The Chair: They do sometimes, yes. It is honestly a haphazard situation in the sense that sometimes they do, sometimes they don't. The national defence committee, for example, got approved for a budget that was substantially larger than ours, etc. The clerk was there. He knows well what happened.

Mr. Roger Valley: I want you to take the message back, or I'll deliver it myself, that I take a bit of offence at them telling us what we're going to do and not do when we're dealing inside our mandate.

The Chair: I understand. I appreciate that one hundred percent, Mr. Valley. I ask you to express that to Ms. Ratansi.

I was not impressed.

Mr. Shipley.

Mr. Bev Shipley: I agree. We've prioritized within Canada the areas for veterans. I don't know if there is some sort of an appeal. If we had put money out on other ventures and were close to our budget or had gone beyond it, but we actually haven't.... And in fact we've had discussions around here about being concerned about maintaining our budget, and I think that comes from all sides, quite honestly.

I'm a little disappointed because we had put together a program all of us agreed on that would take us to the pertinent places in Canada to get the best knowledge we could from our veterans. Splitting it up serves a purpose. I just don't think it serves a very good purpose in terms of getting a unified scenario across Canada, because veterans come from different parts of the country. They go with different initiatives sometimes, and they come back into a different part of the country that may have a different society and culture, different health, different whatever. When you go up to Mr. Valley's area, it's obviously remote, as compared to coming back into someplace close to Montreal, where it is a large urban area and those services are much more accessible.

I don't know what the route is, Mr. Chairman. I don't know if we could get another kick at the can, so to speak. I guess we could speak to some of our colleagues.

•(1235)

The Chair: Just to let you know—and forgive me, I was just talking to the clerk—there was a female member of the Liberal caucus who sits on the subcommittee, if you will, that deals with the budgeting particularly of the Liaison Committee. I believe it was Ms. Robillard, and she was very supportive, very reasonable, and very understanding that the committee as a whole would benefit from seeing each of these different locations, and she saw the value in travelling as a group. She was very supportive. As I said, the two individuals who I mentioned were difficult.

Mr. St. Denis.

Mr. Brent St. Denis: Just to follow on Bev's comments, and Roger's, I'm not sure if we can do it today or whether we have enough to do it today, but if we agreed to resubmit it just as it was and then we will do the due diligence and arm-twisting that we need to do, I don't see why we can't resubmit.

The Chair: I'm perfectly amenable to that. Just make sure you pigeonhole Ms. Ratansi.

Mr. Brent St. Denis: Could I just move a motion, that the budget for the travel, non-Petawawa, non-Valcartier, the third and fourth pieces of the travel, the western and eastern portions of the travel, be resubmitted as originally drafted?

The Chair: The motion is received.

Mr. Peter Stoffer: A point of order, Mr. Chair.

Mr. Griffis is just leaving. He wants to say a formal goodbye.

The Chair: Okay. Yes.

Mr. Ronald Griffis: On behalf of our association, thank you for inviting us here today to speak.

On behalf of the association, we wish all a merry Christmas, a happy new year, and a prosperous new year.

See what you can do about getting the peacekeepers act passed for August 9, please, and thank you.

Some hon. members: Hear, hear!

The Chair: Fair enough. Merry Christmas.

Mr. Sweet, I don't know if I'm recognizing you next, sir, but—

Mr. Brent St. Denis: I just moved a motion that we resubmit the budget for the east and west travel as originally drafted.

The Chair: Okay. Fair enough. I think it's understood. Do we need a vote on it, really?

Mr. Sweet, I think I know where you're going to go with this one anyway. Carry on.

Mr. David Sweet: I communicated directly to you, Mr. Chair.

The Chair: Yes, you did.

Mr. David Sweet: And I will vote in favour of that motion.

The Chair: Okay. Fair enough.

Mr. Peter Stoffer: I absolutely agree with it, Mr. Chairman. There is just one slight alteration. I don't know if it should be done in the committee or with the clerk. If we do go to Shearwater, Greenwood is just down the road, and I know Mr. Griffis and a couple of his folks from the Greenwood area would probably come down to visit with us. If there's any additional lunch cost there, maybe we could include that in there. It's only an hour away.

The Chair: I should think we would probably be able to accommodate that, Mr. Stoffer. The clerk is the master of our destiny in these things, so let him know.

We've had a discussion on that then.

(Motion agreed to)

The Chair: That's carried unanimously.

At that, I say merry Christmas, adieu, and we're off to the vote.

The meeting is adjourned.

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