



House of Commons
CANADA

Standing Committee on Veterans Affairs

ACVA • NUMBER 016 • 2nd SESSION • 39th PARLIAMENT

EVIDENCE

Thursday, March 6, 2008

—
Chair

Mr. Rob Anders

Also available on the Parliament of Canada Web Site at the following address:

<http://www.parl.gc.ca>

Standing Committee on Veterans Affairs

Thursday, March 6, 2008

• (1535)

[English]

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

We have yet another meeting of our veterans affairs committee.

Before we get to our witness, I am going to turn the floor over to Mr. Gilles Perron to introduce a substitute, or a new member of the committee.

[Translation]

Mr. Gilles-A. Perron (Rivière-des-Mille-Îles, BQ): I would like to take two seconds to introduce Thierry Saint-Cyr. He is replacing Mr. Gaudet, who had to be absent today. Thierry will certainly do an excellent job, I am sure.

Thierry, I would like to welcome you to the Standing Committee on Veterans Affairs.

[English]

The Chair: Welcome, indeed. We look forward to your interventions, sir.

Of course, we're continuing with our study of the veterans health care review and the veterans independence program.

Today our witness is from the Korea Veterans Association of Canada, Les Peate, immediate past president.

Usually the witnesses are told 10 or 20 minutes. In this case, you were told 10, I believe, by the clerk. If you go over that and edge yourself up to 20, I'm sure we'll all be accommodating. Then we go to predetermined times of questions for all the parties, which we've all beaten each other up on, etc., early in the year and determined. It's all set in stone.

Now, sir, the floor is yours.

Mr. Les Peate (Immediate Past President, Korea Veterans Association of Canada): Thank you, ladies and gentlemen.

I appreciate the fact that we've once again been invited to appear before this committee.

I'm happy to say that since we were here last, a number of developments have arisen that are to our advantage. Perhaps the most significant thing is—if you'll bear with me for a little history—that for about 15 years we were concerned about the fact that many of our career veterans were suffering from pulmonary diseases, respiratory diseases, and a number of ailments we seem to suffer to a greater extent than the general public. We had one individual—I

think I mentioned him last time, a chap named Carter—and just about every organ in his body was ineffective.

We were concerned because in Korea we were exposed a lot to DDT and a number of other harmful chemicals.

We took our concerns to Veterans Affairs. We did a study ourselves and we found that certainly there was a much higher rate of these disorders among Korea veterans than there was elsewhere.

The only problem was, we did a study they didn't like to accept because we sent out a random sample study with about twice as many participants as we needed, to be on the safe side. But when we sent the study to the units, our units decided they wanted to prove they were suffering, so instead of giving out the samples of the questionnaires at random, they gave them to people they knew were suffering from various ailments. So this tended to flaw our study a little.

We've been discussing this with Veterans Affairs, and one of the things they decided to do was sponsor a Canadian study. We even got as far as having a study team appointed and funds allocated. And then came an election, a change of government; we had changes of deputy ministers, and the thing was more or less on hold.

We've been dealing quite a lot with veterans associations throughout the world. We're part of an international group, and we found out the Australians had commissioned a study on the effects of Korean War service. We think their living standards are pretty much the same as ours, their diets are the same as ours, their income is the same as ours, their work is pretty much the same as ours, so what applies to Australia would probably apply to Canada. We spoke to a number of people from Veterans Affairs, and they accepted this.

I'm not going to give you the whole thing to read, but there are three studies. One is a cancer incidence study, one is a mortality study, and the other is a health study. I'm not going to read the whole thing to you, so you can relax.

These were studied by Veterans Affairs, and Veterans Affairs originally agreed to accept the findings in the cancer study. One of the things they found was that in at least eight forms of cancer, the casualty rate or the sickness rate in Korea veterans was significantly higher than in the general population. I think the overall average was about 23% higher than the equivalent.

Veterans Affairs accepted eight of the major causes of cancer—the ones that have the biggest difference—and they decided they would accept Korea service as a *prima facie* cause of the cancer. In other words, we thought this was a breakthrough, because instead of the veteran having to prove his ailment was caused by Korea service, now it was accepted it would be unless it was proven otherwise.

For instance, we had a few people who worked at Chalk River, so this could have been a little questionable.

This was fine, and as a result I'm happy to say that about six or seven months ago I had reports that well over 500 people who previously either hadn't applied for a pension because they felt they couldn't prove the cause or they had been turned down for a pension.... Over 500 veterans are now in receipt of pensions and treatment for these eight forms of cancer.

● (1540)

This is one thing, but we're still a little concerned, because as I mentioned, we had chronic obstructive pulmonary disease, or COPD, and heart problems, which a lot of our people seem to have at a much higher rate than the general public. We went back, and the same study team took a look at this and looked at the other Australian study, which dealt with ailments other than cancer. As a result, we now have a policy, and when your material comes around you'll be getting a copy of the press release that went out.

During the last year, it was decided that if any veteran is suffering from chronic obstructive lung disease, as they put it, which includes chronic bronchitis and emphysema, or from arterial sclerosis and related ailments, once again, if they served in Korea during the period 1950 to 1956, that would be accepted as a cause, unless proven otherwise.

This is the one we won. We're rather pleased with that one. I must give credit to the team in Veterans Affairs. If you want names, the guy who did the study was a gentleman by the name of Dave Pedlar. They are the people who really worked on it, and they saw it our way. As I said, I think Veterans Affairs deserves credit. They get a lot of blame—people say they're trying to take our pensions away and trying to deprive us—but in this case I think they went out of their way and devoted a lot of time to seeing that our veterans got what was due.

Those are the two that we won.

The next point that rather concerns me is that, surprisingly enough, veterans complain that they're not getting service from Veterans Affairs: we still have complaints about time of service and complaints about decisions. But one of the things that Veterans Affairs have actually been complaining to us about is that we're not having enough of our veterans apply for PTSD, post-traumatic stress disorder. They feel that many more of them should be claiming it.

We've put it down to the fact that in our generation from back in the 1950s, if you have sleepless nights or become an alcoholic or are nervous, you live with it. You're macho about it; you don't like to admit it. They sense it as a form of weakness to apply for a pension and for treatment for it. We're trying to educate our people on that one, and hopefully we will. Again, as I have it here, it's a proud bunch, and we hate to admit that our nerves have been affected by our experience.

Those are the concerns we have that are particular to our Korean War veterans.

I would point out that we are a member association of the National Council of Veterans Associations. Cliff Chadderton heads the group, of course. As a form of unity, and because they are in a way acting on our behalf, we support a lot of the initiatives they're coming out with. You may or may not know, but the NCVAC parliamentary submissions include possible medals for prisoners of war, people who were wounded, and at least a medal or a bar or some recognition for people who served at Dieppe and those who were in Hong Kong.

Among other issues we've been dealing with, one of the items that has been suggested, without too much substance, is that perhaps Veterans Affairs should have a separate department dealing with widows or widowers. In particular nowadays, we have more and more widows who are eligible for pensions or for VIP and who have a lot of concerns. It was the contention of many of the NCVAC groups that perhaps Veterans Affairs should give a thought to a widows branch, widows directorate, or something like that to look specifically at the concerns of widows.

● (1545)

In conclusion, I'd like to mention that like most war veterans, most *old* war veterans—we used to be the young fellows and they were the old guys—our numbers are gradually decreasing. The Korea Veterans Association has moved down from almost 5,000 to something like 2,400. The number of Korea veterans in Canada is hard to guess. Some of them are veterans of other wars, and the only ones we can really keep track of are the clients of Veterans Affairs. But we estimate that there are now between 12,000 and 15,000 of us left, out of the almost 28,000 who went to Korea.

That is all I have. As I said, I will be attaching the new policy that I mentioned, on the pulmonary and heart functions, together with a brief summary of what I've just said.

The Chair: Fair enough. You were just over 10 minutes, at 11 minutes and 30 seconds, so you're doing fine, sir.

Mr. Les Peate: Oh, I did well. That's great.

The Chair: Yes, you did fine. Thank you very much for your presentation. I know that I've made some notes here.

We'll move on to questions.

Mr. Valley of the Liberal Party of Canada will have the first seven minutes.

Mr. Roger Valley (Kenora, Lib.): Thank you very much, Mr. Chairman.

Welcome back. It was close to the end of October 2006 when you first presented to us. We talked about a number of the same things. I was searching for my notes from that meeting, and you mentioned the three studies. When you were here, you mentioned that for one study, a lot of the recommendations had been adopted, but for the other two studies.... I'm not sure if "ignored" is the right word, but there wasn't a lot of attention paid to them.

Has there been any movement by Veterans Affairs in looking at those other two studies from Australia to see how we can benefit from them?

Mr. Les Peate: Yes, there has. As a matter of fact, what happened....

This is the study. I'd be only too pleased to pass it around except that this is the only copy I have, and I had to scrounge for this one from the Australians.

Basically, they accepted pretty well everything that was in the study.

Mr. Roger Valley: In all three studies?

Mr. Les Peate: All three studies. The first one dealt with cancer. Then one dealt with mortality; as the title suggested, people died from these ailments. The other was a health study that dealt with the incidence of the particular ailments—

Mr. Roger Valley: Which one of those...? The last time you were here, you mentioned that one of them identified 125 toxic chemicals.

• (1550)
Mr. Les Peate: That would probably be the mortality study. The last time I was here, this was a separate study. This was conducted by an Australian—a colonel, as a matter of fact. I believe I passed around at the time a list of the toxic chemicals that our people were exposed to.

I suspect that this report was submitted to the Australian veterans affairs, and it may well have been the trigger that generated the more formal study conducted by Monash University.

Mr. Roger Valley: So the Australians identified these chemicals that you had to use when you were in the field.

Mr. Les Peate: Oh, that is still valid. I think a lot of these are mentioned in the studies as the causes. It was a Colonel Limburg, I believe, who came out with this.

Mr. Roger Valley: The Gerontological Advisory Council in their report to us talked about the needs-based services. How do you feel that the Korean veterans were treated differently from the Second World War veterans? Or were they treated differently? I know that it took some time to recognize it not as a conflict but as a war.

Mr. Les Peate: They were originally. There's one that affects me; I don't want to bring my own problem up, but I'll give this example.

If you served in World War II in an allied nation, whether it be Polish, British, French, or whatever, and you have lived in Canada for ten years, you're a veteran. If you served in the Korean War, although you were still an ally of Canada and you were in the British army, as I was, you're not a veteran by Canadian standards—at least not a war veteran; I'm a veteran because I served in the Canadian army afterwards.

So there are some differences. As I remember rightly, we now get pretty much the same benefits that those who served in the Second World War are getting. In fact, they extended it, I believe, to beyond the war. I think it goes up to about July of 1954, which is a year after the armistice, because the conditions were still there and they were entitled to the veterans benefits, just as people in World War I were entitled to them, I believe, if they served until sometime in 1946.

Mr. Roger Valley: I would guess at something. I'll make a statement, and you can correct me. The World War II veterans are at a more advanced age. Many of them are in the last stages of their active living, in a way. The Korean vets' average age, I think we

read, is 74. They are much more active seniors. I would think that we have a lot more to learn from the Korean vets, when we talk about post-traumatic stress disorder. They're still active in the community in many ways. They still have an ability to provide more information to Veterans Affairs in another study. I think you'd have a lot more to offer than some of your older colleagues who served in the Second World War.

Mr. Les Peate: Yes, I think we have. We've been mentioning cases. As I said, the big problem is that people from that generation are reluctant to come forward. In this generation, things are a little different. For instance, I seem to remember that one person, who never went overseas, put in for post-traumatic stress disorder because his sergeant shouted at him when he was in basic training somewhere in Alberta. This doesn't apply too much to our people.

There's no doubt about it. The symptoms are there. What we're doing now is suggesting, perhaps, that rather than talking to the guys, we talk to the wives. The wives notice these things, so we should perhaps be working on the wives. We could ask if their husband gnashes his teeth in his sleep, shouts at night, has changed his habits drastically, has become a habitual drunkard, or is tense. If the guys aren't willing to come forward, perhaps the wives might. We don't know.

Mr. Roger Valley: You're refreshing my memory from that first meeting. We have a real window of opportunity to learn. It's unfortunate that it has taken us this long to get to it, but we are here now at this point. I'm glad you raised the wives, as you raised the widows and that it's up to the department to look after the widows.

So there's a real opportunity. You're going to have to help us with that, though, because we need to learn. We're just in the first stages of the post-traumatic stress disorder study and how it relates to the health of veterans.

Mr. Les Peate: We'd be pleased to. Of course, in the First World War, they shot people for it. But now we appreciate it for what it is. If I remember rightly, some of the veterans in Nova Scotia have been really concerned about that. I've been hearing from our people out there that they're becoming aware of it.

• (1555)

Mr. Roger Valley: We just had the opportunity to travel to some bases, and we were quite amazed to learn about the differences among the forces in how they treat their enlisted people right now and how they treat some of the people who have been released from the forces and their impressions of them.

To give you an example, in the air force, on some of the bases we visited, they were much more serious on small....

Maybe I'll get a chance to talk to you again, but the grinch over here has cut short my time. Thank you very much.

The Chair: By the way, I thought that was a fascinating observation, that PTSD in the First World War was treated far differently than it is today.

Mr. Roger Valley: It was more sudden.

The Chair: Yes, indeed.

Mr. Valley has already been written down for his next opportunity, which doesn't preclude, of course, Mr. Russell. So there we go.

We'll now go to the Bloc Québécois and *M. Perron pour sept minutes*.

[*Translation*]

Mr. Gilles-A. Perron: Good afternoon, Mr. Peate. How are you? It's a long time since we saw each other. A year and a half has passed since our last meeting. I have pretty much the same questions to ask you as I did then.

You know that I have a particular interest in post-traumatic stress disorder, which I call an operational psychological injury. I am not too fond of the word "stress", because it frightens people.

You talked about veterans as "old guys". When I see Thierry sitting beside me, I say to myself that I am an old guy. We are talking about progress being made, but you are afraid that a lot of people are bluffing, that they are pretending to suffer from post-traumatic stress disorder. But all the specialists have told us that a half-hour interview is all they need to tell whether a person is putting it on. So people shouldn't be afraid, they should go for a consultation. Yes, Second World War veterans treat post-traumatic stress disorder with a large gin. They start at 8:00 a.m. at the Legion. Those are my comments on post-traumatic stress: people have to go for consultation.

I would like to talk to you about another problem and I would like to know your views on it. It seems to be popular, both in Quebec and in the rest of the country, to want to keep seniors at home as long as possible. The wives, the spouses or husbands of these seniors are virtually the same age. So they may not have the strength they need to give home care.

Are we equipped to help these people in their homes? If not, what should we be doing?

Mr. Les Peate: Because I speak French somewhat like a Spanish cow, I am going to answer in English, if you don't mind.

Mr. Gilles-A. Perron: That is the answer you gave me a year and a half ago. Put your Spanish cow in the paddock and talk to me in English.

[*English*]

Mr. Les Peate: First of all, I quite agree about the wives. I think the wives have been very, very underrated. I think the part they play is very important.

The other thing I'm glad you brought up is that one of our concerns, not so much in the KVA, because we have a comparatively small group of veterans, but in the National Council of Veterans Associations, is not only with the placement of veterans in homes—which is obviously much better for everyone concerned, if they can get finance or support to stay at home, rather than keeping them in places like Sainte-Anne-de-Bellevue or at the Perley, or some place like that—but also with finding places for them. For the person who lives in, let's say, North Bay or Sudbury, where there is no veterans hospital, we're suggesting that DVA should purchase a number of beds—not necessarily purchase them, but at least reserve them. So if a veteran needed to be placed in care, there would be some place for him.

This is one of the things that Cliff Chadderton and Brian Forbes of the NCVA have been pushing for, for a long time. I feel they would be far more qualified to answer that than me, and should they come before this committee, I would suggest you raise that point with them.

• (1600)

[*Translation*]

Mr. Gilles-A. Perron: I understand your perspective and I have a lot of sympathy, but we have the same problem with so-called normal civilians and people who are not veterans. In every hospital in Canada there are beds that are full and unbelievably long waiting lists. Your solution will create another more severe problem: we will have to say that there are three or 10 or 20 beds in a hospital that can't be touched in case a veteran comes in. The idea is perfect, but how can it be applied? That's the problem.

[*English*]

Mr. Les Peate: That is true. It's why I would strongly suggest that you discuss this with Mr. Chadderton and Brian Forbes.

Incidentally, I would like to know where the people got their gin at 8 o'clock in the morning.

Mr. Gilles-A. Perron: *La Légion canadienne*. We could go to the *Légion canadienne* at 8 o'clock in the morning and have some there. I've been there and I had some!

Mr. Les Peate: Very interesting!

Some hon. members: Oh, oh!

Mr. Les Peate: I might add, and I don't want to take your time, that I did attend the convention that was held in your province, as you know. I found there was no shortage of gin or anything else, but there's a drink they have there that I believe is called Caribou, which comes out during the winter carnival.

[*Translation*]

Mr. Gilles-A. Perron: Because I have only one minute left, I am going to ask my question now, and you can answer it next time around the table.

I am still astounded to see that there are 57 veterans associations and no effort is being made to bring them together under a single roof. Regardless of what it were called, you would have more power if you got together, instead of having 57 separate associations.

[*English*]

Mr. Les Peate: The answer to that one is, we are together. I didn't bring my letterhead from the National Council of Veterans Associations, but the 57 associations are the member associations of that body, and we do work together. We feel unity is strength, and the more the better. Cliff Chadderton is our president and he represents all of us. So we have in fact got together.

[*Translation*]

Mr. Gilles-A. Perron: Thank you.

[*English*]

The Chair: Monsieur Perron, that was uncanny. You were bang-on, within a second of your time.

Mr. Gilles-A. Perron: As usual.

Some hon. members: Oh, oh!

The Chair: Sir, that's to be commended.

Now we're on to the New Democratic Party and Mr. Stoffer for five minutes.

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

Thanks again, Mr. Peate, not only for your service to our country but also to your fellow veterans.

One of our concerns, sir, of course, is that being a veterans committee, we interlope a lot on defence issues when it comes to soldiers returning to their families and on some issues facing veterans and their spouses, issues that really are under the auspices of DND. For example, there's the marriage after 60 clause, which you're aware of. We've spoken about it before. It's actually a DND technicality. The amount of money a veteran leaves his spouse when he passes on is 50%. Many groups have been asking for that to be increased a bit, because a lot of the time their wives will be pushed into—or, at least, in some cases—pretty dire poverty. So those are some of the hurdles we need to look at.

In your experience—because you were in the reserves as well, if I'm not mistaken—of going from DND to DVA for your hearing aids, and everything else, how did you find that transfer? Were there delays in some of your processes, or was it fairly smooth, in your opinion, when you transferred?

• (1605)

Mr. Les Peate: Actually, there wasn't really much of a comparison. We're really talking of apples and oranges here. The only part that DND really played in my hearing pension was that they provided medical evidence from the sick reports.

Mr. Peter Stoffer: Was that a fairly quick process?

Mr. Les Peate: It should be. The only thing is, of course, they lost mine. Usually, as you probably know—I'm probably telling everybody something they know well—in the service, if anybody is injured, a board of inquiry is convened, an incident report is created, and that sort of thing. These are the things our veterans go back to.

I had one case, for instance, where this was lost. The guy injured his back on a parachute jump. But being a macho guy, he never reported sick, because he had done four jumps and had two more to do to qualify. We had a heck of a job proving this guy's back injury, which deteriorated as he got out of the service and he was unable to do the job he wanted. We had no record of it. This was when our association really got in touch with his buddies. If you read *Legion Magazine*, for instance, you'll often see in the lost trails, “Did anybody know Private Jones who fell off a truck in Germany? Evidence is needed to support a pension claim.” This is really the connection. In other words, let's say DND provides the evidence, Veterans Affairs provides the assessment, and presumably the pension is triggered.

A few years ago we came up with a group called the Centre. Some of you may know it. This was a joint DND and Veterans Affairs operation. It was just around the corner from here, as a matter of fact. This is when they were staffed by both, and this enabled things to

move faster. One of the things they did that never really happened is they set up four centres to test people for the effects of DDT. We thought this was great because this was our biggest problem. Could we use it? Certainly it was open to all veterans. Well, apparently the Centre either shut, moved, or didn't open. We never really did get much out of it.

To this extent, we do cooperate with Veterans Affairs and DND, but they have a distinct role to play. DND provides the evidence and Veterans Affairs then assesses it and determines what pension or treatment the person could have. This may be changing, of course, in light of the Afghan situation.

Mr. Peter Stoffer: Mr. Chairman, you may recall that on most cenotaphs in the country the Korean War is listed from 1950 to 1953, but in the War Memorial room in the Peace Tower it says 1949, with no end date, because the Korean War is not over.

Mr. Les Peate: Can I explain that?

Mr. Peter Stoffer: Yes, go right ahead.

Mr. Les Peate: We're talking about the peacekeeping monument?

Mr. Peter Stoffer: No, this is in the War Memorial room in the Peace Tower. Do you know where the books are? There's no end date on it.

Mr. Les Peate: Our first peacekeeping mission in Korea—in fact, it was our first Canadian peacekeeping mission—was in 1949 when we sent somebody to supervise the elections. That's where you get the 1949. You are quite correct that an armistice was signed in 1953; a peace treaty has never been signed. Technically, North and South Korea are at war.

Mr. Peter Stoffer: Rather interesting. My last question—

The Chair: And that's why it's especially fun, as a marine, to serve in the DMZ.

Mrs. Hinton, with the Conservative Party, for seven minutes.

• (1610)

Mrs. Betty Hinton (Kamloops—Thompson—Cariboo, CPC): Good afternoon, Mr. Peate. It's always a pleasure to see you and listen to you. You remind me a lot of another voice I could listen to forever, which is Morgan Freeman's. That's a compliment coming from me.

The second thing I want to start with is to bring you special greetings from my executive assistant, who happens to be the president of your fan club. We don't need to go into details as to why, but I would be remiss if I didn't bring you greetings from her.

You mentioned a couple of things in your speech today that I found really interesting and intriguing. One of them was regarding allied veterans, who received benefits until 1995, when they were cut off unceremoniously. I happen to be on the same side of that issue as you are, and I can give you my personal assurance that it's not being overlooked.

The second thing I wanted to ask you is regarding your comment about a separate department for widows. You're obviously aware of the ombudsman's position. Do you think that would suffice, or is there another rationale behind your wanting a separate department for widows?

Mr. Les Peate: I could be wrong...and happily, I'm not in the situation where I'm leaving a widow, but I think one of the concerns is whether or not...the entitlement for VIP for widows. This is very much an issue these days. Would a widow really get the VIP? If a veteran is on VIP—the veterans independence program—and dies, the lawn still has to be cut, the snow has to be moved, and all that sort of thing. Sometimes there seems to be some doubt as to whether the widow would be eligible for the same benefits the veteran had.

We haven't seen this new policy long enough, really, to determine how it works. As I said, right now it's a concern rather than a complaint. But we are concerned about it.

The other interesting one that came up—and this probably doesn't affect Veterans Affairs as much as DND—is if a person was killed in Korea, and now, only now, his wife is in need of assistance, does she get VIP? Right now, obviously, she probably wouldn't. And the reason she wouldn't is because of course VIP is a Veterans Affairs program. The pension she's getting from the army is the DND one.

If the guy was fortunate enough to live for a little while and get VIP, and then pass away, his wife would still get it.

But as it is, we don't know.

Mrs. Betty Hinton: Mr. Peate, I have some wonderful news for you. We just added 12,000 widows in the last budget, the one that just passed, and it's for that very reason. We had some of these very stoic men who did not apply for VIP even though they were eligible to do so. They died before their wives were able to get them to apply for it. These last 12,000 that we just added—we added 12,000 last year and we just added 12,000 more this year—are precisely who are covered: women whose husbands didn't apply.

So I'm very happy to be able to give you that kind of news.

Mr. Les Peate: One of the things we're encouraging people to do is...and a good example is PTSD. I'm about in the middle I guess. I'm 79—I'll admit it. But a lot of our veterans are in their 80s, and they're saying what's the point of applying for a pension. I say, look, even if you're only going to live six months to draw your pension, you're going to leave a widow.

This is a point we can't stress enough. This is probably one of the reasons I think we should have more emphasis on widows. When I say widows, I'm being a male chauvinistic pig, of course, and saying that the veterans are male and the survivors are female. But yes, I think definitely that is very much a concern, and I'm hoping they will address it.

It's a fairly new initiative, but I'd like to see what happens on it.

•(1615)

Mrs. Betty Hinton: Sure, well, maybe you and I can have coffee afterwards and I'll try to bring you up to speed, because it's very good news.

Mr. Les Peate: That's great.

Mrs. Betty Hinton: There are some other things.

You mentioned beds. I've been approached by a number of representatives from a number of different veterans groups with some pretty innovative ideas. We're taking all of those ideas into

consideration so that we can actually improve the situation for veterans and their widows.

Perhaps you and I can have a coffee sometime when we're not limited to how much time we have to speak, and you could give me some of your ideas on what you'd like to see happen.

Mr. Les Peate: I think so.

I might add, incidentally, as you know, that your executive assistant knows whereof she speaks, because her father was a Korean veteran.

Mrs. Betty Hinton: Yes, he was.

I know you're aware that this year is the 55th anniversary of the ceasefire in Korea, and I wanted to assure you that Veterans Affairs is organizing events. I brought a list with me today, but as per the rules, we need to do something in French and English for both sides. I will be happy to put that forward at a later date.

I look forward to seeing you at those events.

Mr. Les Peate: Are you going?

Mrs. Betty Hinton: We'll hope so.

Mr. Les Peate: It's quite an experience. I really strongly recommend it.

If any of the members here are approached to go to Korea, it's well worth it. I hate to put in a plug for our allies, but I think possibly there are two nations that really appreciate what Canada has done for them during war. One of course is the Netherlands—that's fantastic—and the other is Korea. The greetings we get are almost embarrassing. You drive on a bus to our old battlegrounds and all the little kids are waving to you. They have a Canadian flag and everything else. It will do your heart good to go down there.

I'm sorry to digress from the subject, but—

Mrs. Betty Hinton: Any time you want to talk about the good deeds Canadian veterans have done, I'd be more than happy to let you have the time.

Thank you very much.

The Chair: Thank you.

Now we'll go over to Mr. Russell for five minutes. We've said Mr. Valley wasn't finished, but that doesn't preclude Mr. Russell, with the Liberal Party.

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

Good afternoon, sir. It's a pleasure to listen to you this afternoon.

I'm new on the committee and I'm learning as we go through some of the issues that are of importance to you and your colleagues.

You wrote a book, *The War That Wasn't: Canadians in Korea*, according to my notes. I have not read it, but I'm definitely going to have to read it because—

A voice: He could sell you one now.

Mr. Todd Russell: He could probably sell me one now. I'll have to go down to Chapters and get one.

There are also notes here that say it is a forgotten war. I'm reflecting on that a little bit, because I believe it's absolutely true, even with my own experience. We hear so much about other conflicts we've been involved in. With some of my colleagues around the table and many other Canadians, I've had the opportunity to celebrate some of our victories in Europe during World War I. There was the 90th anniversary at Beaumont-Hamel, which was a very moving experience, and I can relate when you talk about some of your own remembrance experiences as well.

This may not be directly related, but I think it is: why is it that you entitled your book *The War That Wasn't*, and why is it that we call it the forgotten war? It's important in your struggle to achieve equality of benefits for people who served in the Korean War.

• (1620)

Mr. Les Peate: Well, the title was based on the fact that it wasn't until I think something like 1998 that the Canadian government accepted the fact that the Korean War was a war. It was a police action; it was a United Nations operation. We felt that when you're shooting somebody and they're shooting you, it's a war. It took us about 45 years from the end of the war to get the war recognized as an actual war.

There are a number of reasons for that. I think one of the things was the timing. The Korean War broke out in 1950. People were war-weary. They'd had a world war that ended five years before, and now they had another one. And really, in comparison with the scope of the Second World War, obviously Korea was, as far as Canada was concerned, at least, a sideshow.

Then on top of that came the next major war or the next major operation—we like to call it—when the Americans moved into Vietnam. This was a massive operation again, and it was covered. Every day you saw the war on TV. It was fresh in everybody's memory. It got lots and lots of news and all that sort of thing. So we were more or less sandwiched in between the two major events.

As an example, one of the papers—I think it was the *Vancouver Province*—just to see what happened, printed the same communiqué from Canadian headquarters three days in a row to see if anybody noticed it. Nobody did.

Today, as an example, a soldier gets killed in Afghanistan. God knows we don't want to lose anybody in Afghanistan or anywhere. He gets a full page of the paper. You get TV showing him going on the plane in Kabul. You get more TV showing the ceremony at Trenton. You probably get something in the national press. Fine, he deserved it. As far as I'm concerned, any soldier who gives his or her life for the country—and I say “her” because we have a lady right now in our cemetery, as you know, at Beechwood—deserves everything they get. In our day, the most you would get in the national press would be a list of casualties. You might get a couple of paragraphs in the local paper, perhaps a photograph, if they had one, and that was it.

So people did feel forgotten. And this is why it's unfortunate. I don't think it's deliberate; I think it's just the way events happen. As I said, we called it “the war that wasn't” because it took 40 years to get it recognized as a war.

Mr. Todd Russell: I thank you for sharing that history with me. It's certainly something I'll remember.

On a more technical question, you mentioned that if you served in World War II with one of the allied countries, and now you've come to Canada and you live here for 10 years, you can apply as a veteran.

Mr. Les Peate: You're a veteran. If you served as one of Canada's allies in the Second World War, yes, you're a veteran, but if you served as one of Canada's allies in the Korean War, you're not.

I'm getting a pension from Veterans Affairs on the basis of my peacetime service in the Canadian army.

Mr. Todd Russell: Am I finished?

The Chair: Sir, you're 37 seconds over, but it doesn't mean you can't come up later.

Mr. Todd Russell: Okay. Thank you, sir.

The Chair: You see, this way they have opportunity. It keeps them fresh. You've inspired them to further questions. They can carry on later. It's all good.

Now over to Monsieur Perron

[*Translation*]

of the Bloc Québécois. You have five minutes.

Mr. Gilles-A. Perron: Mr. Peate, I am going to go back to the questions of residence and domicile, and the question of home care. Only a few weeks ago, we were in Todd Russell's riding, and we heard testimony that described a truly shocking story. An aboriginal man who had fought in the Second World War was going to be removed from his little village. The man was living peacefully with his family and they were caring for him as best they could. But because of a lack of resources, he was sent to Halifax, to a home or a hospital. The man didn't commit suicide, he simply refused any medical care. A few months, or weeks, or days later—the time is not the issue—he died.

When we are told that kind of story, we realize we have a long way to go in taking care not only of our veterans, but also our seniors. The same thing happens in everyday life as well. I don't see how we can uproot a fellow from the far reaches of Abitibi and put him in a home in Montreal, where he is to live out his days. That is asking people to die like dogs. I think we should be making an effort—and I hope you would agree with this—to help the natural caregivers to care for their father or mother and provide care in their community. With the technology we have today, we can care for them long-distance so they can keep their feet in their own backyard and on the land where they love to live.

Mr. Peate, I would like to hear your comments on this subject.

•(1625)

[English]

Mr. Les Peate: There's no doubt about it, whether you're looking at a veteran or a senior, it doesn't make any difference. It is better for the person, better for the individual, and it's certainly more economical to provide the necessary care and support to keep the individual at home as long as possible. This, I believe, is part of the policy of Veterans Affairs now. This is, for instance, why they have the VIP program. This is one of the reasons.

I'm old already, but when I get older I hope I'll be able to stay at home. Sure, there's no doubt about it, if people have no family, for example, we have places like the Perley; we have places like Sainte-Anne-de-Bellevue, which would be a good place to go. To get a veteran and shove him around like a piece of merchandise or something else, or like the railroad shoves the empty trucks down into a siding, out of sight, no, that is not it. I would say that we would certainly be very much in favour of keeping the veteran at home as long as possible. This, I believe, is the policy of Veterans Affairs. I could be wrong, but I'm pretty sure they are more and more inclined towards providing assistance in the form of things like the VIP.

[Translation]

Mr. Gilles-A. Perron: If young people like my friend here want to care for their aging father or dying mother, could we not give these natural caregivers tax benefits to encourage them to take care of their old folks, of their parents? I hate the expression "old folks"; I will use the word "parents" instead.

An effort has been made in Quebec. I don't know whether I like how it is working. The government is helping to make alterations to homes so that they can be intergenerational housing, so that people can take their father or their mother or their grandfather into their home. That is still not enough to suit me.

[English]

Mr. Les Peate: I think that makes sense. As I said, it's perhaps more of a social issue than purely a veterans' issue.

I know there are certain incentives. For instance, I believe you get tax credits if you're supporting a parent, or something like that. In some cases, I seem to remember that grants were made over the years for things like building what they used to call a "grandmother" apartment, an extra apartment in your building to keep your—

•(1630)

[Translation]

Mr. Gilles-A. Perron: These are homes where several generations live together.

[English]

Mr. Les Peate: I'm not an expert on that. It's more or less out of my field. But I agree with you. The bottom line is, it's certainly better to keep your veteran at home, if you can. And I think that's the policy of Veterans Affairs.

[Translation]

Mr. Gilles-A. Perron: Thank you, sir.

[English]

The Chair: Over to the Conservative Party of Canada and Mr. Shipley for five minutes, please.

Mr. Bev Shipley (Lambton—Kent—Middlesex, CPC): Thank you, Mr. Peate, for being back with us again as you were in October, as part of our successful discussions around putting in place the ombudsman for Veterans Affairs. We hope the process, in terms of health care for our veterans in the VIP, becomes as successful in the end. It seems to be taking a long while. We just want to be thorough and make sure the product put forward is one that's good for everyone.

One of the things you mentioned about your allies not wanting to give some credit to.... One veteran told me one thing worse than having to fight along with allies is having to fight without them. So I think we always recognize how important it is to have our allies with us, even in the conflict we're in today.

You say veterans are not recognized. If you were in the conflict in the Korean War, you're not recognized as veterans.

Mr. Les Peate: That's because I wasn't in the Canadian army; I was in the British army.

Mr. Bev Shipley: But if you're in the Canadian army, you are recognized.

Mr. Les Peate: The Canadian army, of course, recognizes veterans.

Mr. Bev Shipley: Okay.

One of the things you talked about.... When we were going through earlier discussions, you indicated there are not enough claimants in the PTSD issue. People don't put their names forward.

We've heard a lot of reasons, or at least comments, why someone won't.... One of the issues is that we need to have different communications, a different education system for them. I think you have touched on one, which is that in some cases people don't want to acknowledge they've got an issue or a problem.

I'm looking for some ideas you might have that would help us raise that awareness, lower the concern that somebody would have, by coming forward and saying they've got this disease that affects them mentally, and physically also.

Mr. Les Peate: One way, of course, is through publications. I'm not going to plug the publication I write for, but nevertheless.... I write a veterans column in a military magazine. I've been constantly urging people, pointing out there's no shame in applying for post-traumatic stress disorder. It's an injury just as much as if you were hit by a shell. Just because there's no blood, it doesn't mean you're not suffering from an injury.

One of the more pleasant phone calls I got was from a guy who had quite an interesting time in Korea. He rode in the back of an unarmed aircraft looking for targets he had fired rockets at. Then the high-performance aircraft came and shot them and napalmed them and things like that. He said he had never thought of this. He decided to put in for it. To his surprise, he's getting treatment and getting a 60% pension from Veterans Affairs for it. He thanked me for letting him know.

We can do it through the *Legion Magazine*, and we've done it. We can do it through the Veterans Affairs newsletter. But there's an ingrained feeling I think that it is somehow shameful to admit you're suffering from post-traumatic stress disorder. And there isn't.

It's very hard to explain to a very mature generation that there's nothing wrong with it. There's nothing wrong with claiming you've got it. People live with it. They bottle it up and they get worse. I find I can sleep at night, but a lot of my friends can't.

• (1635)

Mr. Bev Shipley: Those are interesting comments. I'm a member of the Legion and I get the magazine. There are very interesting articles in it. All the encouragement we can give to help veterans walk forward is very good.

One of the things you talked about earlier in your speech is the differences in the Korean War. One, which I read an article about and which is in here, is DDT, and there are other issues.

What makes that war different from World War II, for example, and the conditions they were exposed to then?

Mr. Les Peate: Let's use the political reason first of all, if we may. People often ask why it was necessary. I hate to give everybody a history lesson and waste your time, but I don't think many people here were around in 1936.

In 1936, Italy invaded Abyssinia—Ethiopia, as it is now. Abyssinia applied to the then-League of Nations, saying, "Help, help, help!" The League of Nations did nothing. The only concession they made was that Britain wouldn't let the Italians put troop ships through the Suez Canal.

What happened? You had Mussolini, you had Hitler, you had Tojo. These people were encouraged. They saw they could get away with this sort of thing, and they did, and eventually we had World War II.

Now look at 1950. The same thing happened. You had a bullying nation starting to throw its weight around, and South Korea appealed to the United Nations for help. This time they didn't sit back. They sent troops and medical people from 21 nations, who served in Korea to push the North Koreans out.

This was a time when there was a great deal of communist aggression: they were pushing into Europe; China was getting antsy. Who knows what might have happened if we hadn't stood firm and said enough is enough, and that's it? This is why I think the Korean War was important.

I don't look upon myself as a knight in shining armour and a saviour of democracy; nevertheless, it could have been.... That's one reason why it was different.

Secondly, as far as Canadians were concerned, it was different because of where we served. People have served in hot countries; people have served in cold countries. Korea had extremes of climate, massive rain storms; the climate was terrible, and the country itself was terrible. I heard an Australian say that if Australia were looking for the worst place in the world to send their troops to fight, Korea would have been it.

As an example of why we have ailments, the ground had been fertilized with human excrement for centuries. These are the places that our troops were digging into. You dug a hole in it and you lived in a hole there. Is it any wonder that Korea veterans are suffering? Of course, to counteract the effects of this, we had the ubiquitous DDT. I think the cure was probably worse than the problem.

This is why we felt this was important.

Thirdly, the first troops we sent to Korea.... We had very few troops left. We disbanded after World War II. All we had were three infantry battalions, nothing left to defend Canada. We had to rush out and recruit a special force from volunteers, and they did it in no time. The first troops to go to Korea were all volunteers. They did it in such a rush that amongst other people they enlisted a man with one leg, a 70-year-old, and heaven knows how many 14-year-old boys.

But they did it. They volunteered, and they got them out in a rush, in a matter of weeks. This is one of the things that makes it different.

Mr. Bev Shipley: Thank you.

Mr. Les Peate: I'm sorry for the history lesson.

Mr. Bev Shipley: It was interesting. Thank you.

The Chair: Sir, don't apologize; that was a fascinating insight. We appreciate those types of things. That's why we particularly enjoy your visit.

Now we go to Mr. Valley, with the Liberal Party, for five minutes.

• (1640)

Mr. Roger Valley: Thank you.

I'm not sure I expressed my question very well last time, but we just travelled to some bases and we're looking forward to visiting a couple more very quickly—I think Valcartier and Petawawa. You mentioned incident reports and how vital they are to us—tracking medical records and making sure we can provide veterans with the coverage they need, pensions, and everything else.

I was surprised that at the base I visited last summer it was totally the opposite to what we saw last fall. Last fall they stressed incident reporting. Everything had to be written down and documented. You've been through a whole life of this, so you know how important that is.

When I was on the base, reservists were being trained, and a lot of them were sent to Afghanistan after that. You mentioned your sergeant yelling at you. I experienced that firsthand. There was no way that anybody who was hurt in this whole group we were with was ever going to report anything. The lieutenant was adamant that if you got hurt you shut your mouth and did not say anything to anybody. I was surprised at that because, being reservists, these people wouldn't have had that background on how important the incident thing was. I think it's something we have to standardize through all levels of the military. Whatever service they're in, they have to document that.

I just want your comments on that. Have you noticed, throughout your long experience, different levels of tracking systems and service?

Mr. Les Peate: Yes. In some cases, records get lost or burned. These things happen.

The other thing that's interesting is if you're sick in the service now, you go to the medical officer and he gives you some pills. It wasn't done that way in Korea or World War II. If you were sick you went on what they referred to as sick parade. You had to dress up in your best uniform, your full kit. You were inspected. If the sergeant who was inspecting you didn't think your cap badge was shiny enough or your webbing was blanched well enough, you'd be on the charge. Then you'd go along and eventually get to see the medical officer. If you were lucky, you got treatment; if you weren't....

I can give you an example. When I was in the Canadian Forces I brought two people to the medical inspection room. The MO said, "I'm going home now. The first person who's ready for me I'll give excused duty. The second person will get M and D." That meant medicine and duty, or, in other words, they gave you a pill and sent you back. One poor guy had blisters on his feet and had to take his boots and socks off. The other guy had a sore throat. So guess what happened? That was literally how some of these things happened.

I noticed that my hearing was going when I was on a French language course. I went to the medical officer and said, "I think I'm losing my hearing." So he got his glasses out and started tapping on the glasses case and said, "What am I doing?" I said, "You're tapping on your glasses case." He said, "Oh, that's all right. You can hear me." I said, "I can't hear you; I can see you right out of the corner of my eye." Nevertheless, no sick report was made out. When I applied for a hearing pension many years later when I was on another French course with the public service and couldn't hear the tape recorder, they found no record at all of my reporting that problem in the first instance. They do those things.

They get lost and misplaced. Sometimes rather than go through all this stuff on sick parade—maybe someone sprained his ankle or something like that—a guy would just stay and hope it went away in a couple of days.

There are a lot of problems with any system of documentation. I was with another government department and we lost people's records; we lost documents. I was with unemployment insurance and we sometimes lost a person's record of employment. The poor individual had to wait months before getting UI. So it happens. It's a way of life that documents get lost.

Mr. Roger Valley: We need to make sure they're filled out.

You mentioned post-traumatic stress disorder and the value of the wife's input. What about the rest of the family? Someone who served in Korea would have grown children—maybe retired children at this point. So it might be of some value for the entire family to talk about post-traumatic stress disorder. Have you carried that line further?

• (1645)

Mr. Les Peate: I would say that by extension when I say "the spouse", I mean the family members—and friends; it doesn't have to be.... I've seen the way two or three of our Korean veterans have been acting and more or less urged them to apply for PTSD.

I say "the wife" because she is probably the person who can see these things more than anybody else, but certainly it could be family and friends—anybody, in fact, who sees these signs.

These signs are published, by the way. We get them in the *Legion Magazine*, and I put them in my magazine, telling people what to look for. It's no secret.

Mr. Roger Valley: Thank you very much.

Mr. Les Peate: Thank you.

The Chair: Now we are over to the Conservative Party of Canada. Go ahead, Mr. Sweet, for five minutes.

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

I never tire of saying "thank you" for your service to this country, and I think that goes for all parliamentarians. We're very conscious of the fact that there have been many people who, like you, have paved the way to have the kind of vibrant democracy we have today, so I thank you for that.

You introduced right at the beginning of your remarks the three studies from Australia and the dates they were completed. Two of them were in 2003, and then the last one, the health study, was completed in 2005.

How long did it take Veterans Affairs Canada to recognize those studies?

Mr. Les Peate: To be fair, these were conducted in 2003; I didn't get them until possibly 2004 or 2005.

When we took them to Veterans Affairs, they worked on them, and we got the first results about a year after we'd given them to Veterans Affairs. They had studied them and come up with the first recommendations.

Mr. David Sweet: Is it fair to say that it's been in the last two years that they've fully accepted them and were prepared to act on them?

Mr. Les Peate: Actually, we got the results of the second one in September of last year and we had the results of the first one probably a year or more earlier.

Mr. David Sweet: Okay. Have you seen a substantial difference now in the delivery of service around those issues since Veterans Affairs has complied with the fact that the results of the study are true and there should be benefits for it?

Mr. Les Peate: Yes, we have, because for one thing, as I said, service in Korea was a prima facie cause; really all the veteran had to do was prove that he'd served in Korea. He didn't have to get witnesses to a particular incident and he didn't have to get medical reports. From what I gather—and I haven't been asking people to keep track of time—I would say that the service is probably faster than in a normal case.

Certainly with the cancer ones I had people call me within a couple of months of getting the announcement, to the effect that they had been advised they would receive a pension.

Mr. David Sweet: You're very knowledgeable about all the dimensions of the war. Was there a Korean War service medal?

Mr. Les Peate: Was there a Korea War service medal? There are actually three, or four, if you like.

First of all, there's the Commonwealth service medal. This is the one that all members of the Commonwealth got. Canada's is slightly different. Mine is a British one. It's made of copper and nickel. Canadians are, obviously, much more wealthy, as we found out on parade in Korea, and theirs are made of silver. This is a medal with a yellow and blue-striped ribbon.

Then the United Nations gave you a United Nations Service Medal, which was awarded to people who served in Korea and afterwards and also to people who served in Japan. To get the Korea War medal, you had to have served in Korea during the actual war; to get the United Nations medal you had to have served in the theatre up until I think 1954, or a year after the ceasefire.

Apparently that wasn't enough for some people. They decided that we didn't have a distinct Canadian medal. So I think about 15 years ago.... Do you remember when your assistant actually received a medal, because I think I got one of the first ones?

A voice: Wow.

Mr. Les Peate: Anyway, this was a Canadian Volunteer Service Medal for Korea.

So in fact there are three medals.

There was also a medal that was awarded by the president of South Korea, Syngman Rhee. Unfortunately, Syngman Rhee and Winston Churchill, who was Prime Minister of Britain at the time, were not the greatest of friends. Churchill refused to accept it, and he persuaded the other Commonwealth nations not to accept it either.

We found that we were entitled to it. For about, oh, maybe 10 or 15 years, we tried to persuade the government house chancellery to allow us to wear that as an approved foreign decoration, because it was legitimately awarded by a foreign government, but they kept saying no. And finally we decided, well, three medals is enough for one war anyway, so we gave up.

So there were, in fact, medals for the Korean War. Then, of course, there'd be the gallantry medals people get.

•(1650)

Mr. David Sweet: This is my last question, Mr. Peate.

You mentioned that it was Veterans Affairs that came to you and said they felt there was an inordinately low application rate for post-

traumatic stress disorder among Korean War veterans. From your testimony, you've done everything you can, including writing articles, to try to make veterans aware of that.

What other measures would you like to see from Veterans Affairs Canada to try to encourage the remaining Korean veterans—those, of course, who are suffering from symptoms of post-traumatic stress disorder—to take the initiative and get to Veterans Affairs?

Mr. Les Peate: I think, really, we have done all we can.

Veterans Affairs, as you know, puts out a bulletin from time to time, *Salute!*, I think it's called, which goes to all veterans who are receiving pensions. It's in there. As I said, I keep bugging people in my magazine. The Legion puts it in their magazine to Legion members.

The trouble is that out of the 12,000 or so Korean veterans, about 2,500 belong to our association. Maybe half of them belong to the Legion. There are still probably about 5,000 or 6,000 Korean veterans out there who don't even know we exist, who don't even know what we've got, who don't even know about the medal that came out last year, who don't even know about PTSD, and who don't know about the benefits as a result of this study.

There's not a lot we can do. They put out a press release, one of which I'm giving you. So Veterans Affairs puts out a press release. Are they going to pick it up? I don't know. Maybe some Hollywood starlet's going to have twins or something and everything will be bumped off anyway. One never knows.

I think they're doing all they can, really. They're using every avenue they can think of. I think it's just a matter of people not reading it. We still have 6,000 veterans, at least, out there. We would love to have them in our association, but they don't even know we exist. They don't even know there is a Korea Veterans Association.

So it's hard to get at people. A lot of people get away from the forces and they want to forget about it. They don't even read articles in the paper about it.

The only thing I can suggest is that they keep up the publicity campaign and put out the announcements. Whether the media will accept them, I don't know, but certainly Veterans Affairs lets them know.

Mr. David Sweet: Thank you.

The Chair: Thank you, Mr. Sweet.

Mr. Sweet, consider yourself treated. You got eight minutes, sir, because he took three minutes to answer the last question. That's quite impressive.

Now we'll go to Mr. Stoffer, from the NDP, for five minutes.

Mr. Peter Stoffer: Thank you, Mr. Chairman.

Mr. Peate, where would a person get your book, *The War That Wasn't*? Where would one go to buy it?

Mr. Les Peate: What you can do is give me your address and I'll send you one. That's sheer bribery.

Mr. Peter Stoffer: No, I want to buy it, as long as you sign it for me.

Mr. Les Peate: I get a certain number of promotional copies, so it's not going to cost me anything. If I mail it to you, it's not going to cost any postage.

• (1655)

Mr. Peter Stoffer: God love you, buddy. Thank you.

Mr. Les Peate: If you could give me your card before we go....

Mr. Peter Stoffer: I will.

You mentioned the Australian studies regarding cancer, health, and what was the third one?

Mr. Les Peate: There was a cancer study, a mortality study, and the third one was a health study.

The first was on cancer, the second was deaths from other causes, and the third was on people who didn't die but still have the—

Mr. Peter Stoffer: The Australians did that, right?

Mr. Les Peate: Yes, that was the Australians.

Mr. Peter Stoffer: Are you aware of any other country that did similar studies?

Mr. Les Peate: As a matter of fact, this is surprising, because they started a study in the U.K. that faded out, a similar study. Surprisingly, about the only thing the Americans have done that we can gain from, that we've used as an example for Veterans Affairs, is that they'll consider frostbite as a related ailment, because of the weather.

But the major study I think is the one the Australians did. It's certainly comprehensive and well done. Needless to say, the university was named after one of the famous Australian generals.

Mr. Peter Stoffer: Sir, I can't speak for other provinces, but in Nova Scotia, over the past year, there have been three stories that have hit the paper where an elderly veteran was transferred to the Camp Hill Hospital and his wife couldn't be with him because the hospital is just for veterans and not for the spouses as well. Unfortunately, they couldn't make arrangements for them to be in the same room together. What they tried to do was work with the province to find a facility of comparable capability in order to have them together in the same room. Of course, the challenge we have is what is federal jurisdiction and responsibility and what is provincial.

I wonder what advice you can give us, because one of the saddest things that we hate to see is when someone has, say, six or seven months to live and they have to be separated from their spouse of over 60 years. It's not just a federal issue; it's a provincial one as well. What advice can you give us in order to move that issue forward?

Mr. Les Peate: One of the many hats I wear is that I'm on the veterans liaison committee for the Perley Rideau, and this situation arose. I think one of the things we must differentiate between is hospitals and long-term care.

I know in some long-term care facilities the wife can share a room, but in others they can't.

Honestly, as to why and why not...I do know we had a case at the Perley of an air force veteran whose wife's presence was refused at first, but later on they relented and she did share a room with him. Further than that, I couldn't say.

You might like to get in touch with Cliff Chadderton at War Amps. I think they could answer that one.

Mr. Peter Stoffer: Thank you very much.

The Chair: Thank you, Mr. Stoffer.

Now we'll go to the Conservative Party of Canada, to Mr. Devolin for five minutes, if he wishes.

Mr. Barry Devolin (Haliburton—Kawartha Lakes—Brock, CPC): Thank you, Mr. Chair. I won't need the whole five minutes.

I'm a substitute here today, but it's fortuitous, because I am the government liaison with the Korean community in Canada and I chair the Canada-Korea interparliamentary group. So when I saw that someone from the Korea Veterans Association of Canada would be here—

Mr. Les Peate: I guess you know my friend Jon Jennikins quite well.

Mr. Barry Devolin: I do, and I had the opportunity earlier this year to attend the dedication of the Korean War Memorial in Burnaby, B.C., which took place last spring.

When I lived in Pusan, Korea, about 10 years ago, each day on my way to work I would pass by the UN cemetery, which is the only UN cemetery in the world. There are, I believe, 300 Canadians buried there.

So I briefly want to say, as have many of my colleagues, thank you to you and to other veterans who have served Canada.

The Korean War has been referred to as the forgotten war, but I actually think more and more Canadians are learning, even in recent years, about the Korean War, about the contribution Canada made, and are appreciating Korean War veterans more than maybe you have been in the past. I think that's a good thing, because you certainly deserve that, so thank you.

• (1700)

Mr. Les Peate: That's rather interesting, because I found there's an increasing awareness. I talk to schools, as many veterans do. We always go in veterans week, of course. This is an almost routine thing: you bring in a veteran and that sort of thing.

But now a number of schools are asking me to go and talk specifically about the Korean War. Apparently, some people are including it in their history curriculum, which is something. It wasn't....

You've obviously seen the memorial we have, not the national war memorial, but the one that's a little bit farther along, which has a plaque with the names of all the.... There's a further thing: we're having somebody from the Korean bureau of patriots and veterans affairs coming over for a year, so you'll probably be meeting him.

Mr. Barry Devolin: Oh, great, thank you.

That's all I have, Chair.

The Chair: Okay. Well, I think at this stage we've exhausted our list of questioners.

I thank you very much for your presentation today. I learned a great deal about the situation, the police action, war, and what have you in Korea. You've given us some things to think about.

Please forgive me, as we have a couple of matters of committee business we would like to deal with before votes happen and then the bells start ringing in about 15 minutes. So I'll just carry on. You're welcome to sit and observe if you wish.

We'll go right into business then. We have a notice of motion from Mr. Stoffer. We discussed this two meetings ago, but then Mr. Stoffer decided to bring it up at this one rather than the meeting just past.

I'm going to read it for the edification of our members here so everybody knows.

Mr. David Sweet: Mr. Chair, I normally wouldn't do this, but just while Mr. Peate is packing up.... We already did it for one, and I think it would be a worthy expense for this committee. Could I seek unanimous consent for a motion that enough copies be purchased of Mr. Peate's book for every member of the committee?

The Chair: I think that would be.... It's certainly a valid motion. Is there any debate on the subject?

The clerk has just spat a bunch of gobbledygook at me about technicalities, but I don't sense there's any debate or any objection, so I think that's passed. Is that fair?

Some hon. members: Agreed.

The Chair: Does that take care of that, Mr. Clerk?

I sense the clerk clearly understands.

There you go, Mr. Peate. You're going to have a few more of us apprised of your book and maybe some royalties coming your way.

Thank you, Mr. Sweet.

I just want to make sure I read Mr. Stoffer's motion so we can talk about this:

That in relation to its study on PTSD, Veterans Independence Program and Health Care Review, the Committee on Veterans Affairs travel to Cyprus to gain a thorough understanding of the decompression period for troops returning to Canada from Afghanistan.

That is the nature of the motion. Do we have any discussion?

Mr. Stoffer.

Mr. Peter Stoffer: For the committee, as you know, we tried an earlier motion to go to Afghanistan, and unfortunately the powers that be suggested not. So this is sort of a compromise in a way.

In the four-city tour we did and in the next two cities that we will do, I'm sure we'll hear the same evidence, that every one of the returning soldiers who had the opportunity to go to Cyprus for decompression thought that was the greatest thing, thought that was really fabulous. It really helped them out and gave them that chance to catch their breath and, as one guy said, have a bunch of beer.

So I thought it would be really interesting for a committee in our study of post-traumatic stress and other ailments to look at how that actually works. When they come back from the war zone, they go into Cyprus. How are they set up? What forms do they fill out? What discussions do they have?

Eventually they'll become veterans. How does that process help them and their families in dealing with some of the future problems they may have? That's why I moved the motion.

The Chair: Fair enough. Thank you, sir.

We have a list beginning. We have Mrs. Hinton first, then Monsieur Perron. Please notify us if you wish to be added to the list.

Mrs. Hinton.

• (1705)

Mrs. Betty Hinton: I can understand why Mr. Stoffer would be interested in pursuing this, but from my personal perspective, I think the very last thing soldiers who are going through the decompression system need is a group of politicians asking them questions, when they're trying to go through a very sensitive time period.

I'm afraid I'm not going to be able to support the motion, but I certainly understand the sentiment.

The Chair: Okay. Over to Mr. Perron of the Bloc Québécois.

[*Translation*]

Mr. Gilles-A. Perron: It would be really nice to get a paid trip to Cyprus and then stay maybe an extra week or two to visit Greece, but I think it really would be sticking our nose into something that doesn't concern us.

When a soldier goes to Cyprus to decompress, he is not yet a veteran. Would we be going to Cyprus to get into fights and throw beer bottles at English restaurant owners, as happened recently?

I think this is a pointless expense. It would be very instructive and enjoyable to go there, but I am reluctant because that is the army's job, not the job of the Standing Committee on Veterans Affairs. Those soldiers are actually still part of the army.

That being said, I would love to take a trip there and see whether the water is nice and warm.

We will be voting against this motion.

[*English*]

The Chair: That's very blunt of you, Mr. Perron. Thank you.

Mr. Valley, for the Liberal Party.

Mr. Roger Valley: Thank you. I will speak in favour of the motion. I think there's a lot to be learned. If we've learned anything in our four visits to the cities, it's that these people are very anxious to talk to us. I think what we learn would be important. It costs money, but to be very blunt, we just authorized travel of \$118,000 that was not used. It was a waste of money to support a motion from the other side that did not happen for reasons we know are beyond this room. We can do that. I think there's a lot to learn. I've said before we spoke about Afghanistan that we needed to be there to see the people who are on the ground. That was accepted. The committee makes its own decisions. Travel was thwarted for a number of reasons.

I have a question for you, Mr. Chair. The committee has a budget. Off the top of my head, I don't know exactly what it is. I don't care to know the number; I just want to know if this is dictated by the committee when they spend their money through Liaison.

The Chair: Just so everybody is apprised of how this works, what happens is there's a global budget for all the committees, and if memory serves me correctly, it's around \$5 million, \$4.5 million, in that area. What happens is it's a very restricted budget, in the sense that it's allowed with regard to our clerk, our researcher, beverages we have provided to us for committee meetings, the odd meals, and travel expenses for witnesses, etc. That's all standard, and you have to do a lot to initiate that. We do that at the beginning when we establish the committees.

Then when you want to travel you always go before Liaison, and that's where you have the chairs of all the various committees sit down and in a sense peer review and decide whether or not they're going to give you the money. That collective group of all the chairs holds that bag of around \$5 million and they determine whether the travel is a go or not. I'm not going to cast any partisan aspersions, but in some years that money is spent pretty much right to the max, and there are other years—and this would be one of those times—when it's not.

There's not as much travel in this particular session as there has been sometimes in the past. That probably has more to do with a minority government as opposed to a majority government. As you can well imagine, it's easier to travel in a majority government than in a minority government. We all know that all too well.

Mr. Roger Valley: No, we don't. I've only served in a minority.

The Chair: Really?

Mr. Roger Valley: Really.

The Chair: Oh my, let me tell you, it's a lot easier.

I hope that explains how that works.

• (1710)

Mr. Roger Valley: For the record, I would say I totally disagree with my good friend Gilles and anyone who says they're not our responsibility. I think silos that have been built in the past by any department, any government agency, are part of the problem. I think they're our responsibility. Where and when we talk to them is the committee's decision, but I just wanted to say that for the record.

The Chair: Okay, fair enough.

Mr. Stoffer.

Mr. Peter Stoffer: I was going to wait until the end, but I wanted to clarify for Mrs. Hinton and Mr. Perron that the people we spoke to, the soldiers we spoke to on the bases we went to, suggested it. I didn't come up with this myself; they suggested it. It's not a question of our seeing the soldiers, because if the argument is that the soldiers are going through a period of reflection and assistance and politicians are the last thing they want to see, that's a good point. No politician should ever be going to the base in Kandahar, because the last thing they need is to see politicians while they're technically in a war zone.

The only reason I brought this motion forward is that the soldiers themselves suggested it. The gentleman in Goose Bay whom Mr.

Perron talks about, whom apparently we've invited, was very adamant that we go to Cyprus and see it. So that's why I brought it forward.

The Chair: I understand.

Oh, I see Mr. Perron wishes to speak to the motion again.

[*Translation*]

Mr. Gilles-A. Perron: We have to put things in perspective, and see them as they happen and as they are. I was and am still in favour of going to visit the local bases before the soldiers leave on missions, regardless of where they are going. My objective is to be able to advance a cause I hold dear, which is to provide soldiers with more information about post-traumatic stress disorder and operational psychological injuries. That is why I agree to go and I am happy and proud to do it.

On the other hand, when it comes to Cyprus, you have heard the psychologists who testified before the committee. They told us that it was too late to tackle post-traumatic stress syndrome. They explained that the intervention had to be within 24 or 48 hours or within the shortest possible time. I think that in Cyprus we are going to see soldiers who are there to entertain themselves, to have some fun. I doubt that it would be useful. That is why I find the proposal of a trip to Cyprus to be less worthwhile, except from a tourism standpoint.

[*English*]

The Chair: Okay.

I don't have any other speakers on the list.

I wish, for edification's sake, to toss out that in some private conversations I've had with some members, they've indicated that they may be in favour of travelling to places where we were meeting with veterans, in terms of programs they had in other countries, etc. It's a consideration for future business.

That being said, we're now to the vote.

Do you want to read it again? We know what it is, okay. It's a visit to Cypress.

(Motion negated)

The Chair: Mr. Valley.

Mr. Roger Valley: As for future business, the parliamentary secretary mentioned in her comments to the witness today that there are plans in place for the 55th...the signing of the armistice in Korea. I'm not sure just how you worded that. I was just wondering if, at a future meeting, you could you inform us of some of those plans. I think it would be of interest to the committee to know as soon as possible.

I'm not sure of the date, Betty. It's upcoming anyway. If you'd let us know, we'd appreciate that.

Mrs. Betty Hinton: It's actually the veterans organizations that are putting this together. I don't have any specific dates.

I do have an answer for another query, if I could have a minute.

•(1715)

Mr. Roger Valley: Will you bring that information in the future if you have it?

Mrs. Betty Hinton: As soon as we're made aware of it by the veterans, I would be glad to.

Mr. Roger Valley: Thank you.

The Chair: It's something Mrs. Hinton sent me a note about. She wanted to bring it to our attention.

Mrs. Betty Hinton: We had a wonderful witness from the gerontology group last week. She was asked by one of the

members—I think it was you, Roger—whether VAC had participated in any research projects. You were going down that line of questioning. Her answer was that she didn't know. I do have an answer for you. There are actually 13 research projects that Veterans Affairs Canada has participated in. They've included dementia, pain, operational stress injuries, and nutrition and aging. As soon as I have this put into both French and English, I'd be happy to distribute the list.

The Chair: Okay. I think that's a wrap.

The meeting is adjourned.

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

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

**Also available on the Parliament of Canada Web Site at the following address:
Aussi disponible sur le site Web du Parlement du Canada à l'adresse suivante :
<http://www.parl.gc.ca>**

The Speaker of the House hereby grants permission to reproduce this document, in whole or in part, for use in schools and for other purposes such as private study, research, criticism, review or newspaper summary. Any commercial or other use or reproduction of this publication requires the express prior written authorization of the Speaker of the House of Commons.

Le Président de la Chambre des communes accorde, par la présente, l'autorisation de reproduire la totalité ou une partie de ce document à des fins éducatives et à des fins d'étude privée, de recherche, de critique, de compte rendu ou en vue d'en préparer un résumé de journal. Toute reproduction de ce document à des fins commerciales ou autres nécessite l'obtention au préalable d'une autorisation écrite du Président.