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**Standing Committee on Human Resources, Skills  
and Social Development and the Status of  
Persons with Disabilities**

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**Chair**

**Mr. Dean Allison**

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## Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities

Tuesday, June 2, 2009

•(1335)

[English]

**The Chair (Mr. Dean Allison (Niagara West—Glanbrook, CPC)):** Pursuant to Standing Order 108(2), our study on the federal contribution to reducing poverty in Canada will continue.

I would like to welcome all the guests and witnesses today and thank you for taking time out of your schedules to be here with us.

As I think most of you know, probably, we've been in Halifax, Moncton, and Montreal, and for the last two days, we've been here in Toronto. We were here yesterday and will be here today and then hopefully we're going out west in the fall. That's the plan right now.

We do want to thank you for taking time to do this.

I'm going to start with Sylvia Hall.

We welcome you. Could you introduce yourself and tell us where you're from? You have five minutes.

**Ms. Sylvia Hall (Director and Treasurer, Canadian Pensioners Concerned Inc.):** I'm Sylvia Hall. I'm here to represent Canadian Pensioners Concerned. CPC was founded in 1969. We're a national and provincial voluntary membership-based organization of "mature Canadians"—I like that phrase—committed to preserving and enhancing a humanitarian vision of life, but for all citizens of all ages, not just seniors.

We do want to thank the committee for taking the time to talk directly to Canadians about the challenge we all face in trying to reduce and, we hope, ultimately eliminate poverty among the citizens of this country.

We apologize for the late submission of our brief, so you do not have it translated, but we only learned on May 21 that we'd been given standing.

Our brief addresses the questions you've raised in the order they've been posed to witnesses.

First, how do you think poverty should be measured? Poverty is measured in every society based upon its own values of the kind of society it wants to be. The people who are excluded from the social and economic life expect it to be there for all its residents. A child in Canada does not have to be in the identical social and physical situation of a child in Darfur to be deemed to be poor. Most Canadians recognize that we have many people who are poor,

homeless, under-housed, or undernourished, and they cannot wait while we discuss and study measurements for poverty.

Some economists have argued that there is an absolute dollar amount that can define those who are poor and that poverty is not a condition relative to the rest of society. If we accept this argument, then the poorest people in the world would all have the same income and living conditions no matter where they live. This is clearly an absurd approach and has been rejected by the vast majority of those concerned with the issue.

The best measure we have at the moment is the Statistics Canada low income cut-off. LICO has been used by policy activists, analysts, and the public as a reasonable and reliable measure to show those who are substantially worse off than most Canadians. Governments must stop debating how to measure poverty, use what we have, and get on with the task at hand.

Second, you asked what role the federal government should play. It obviously must be engaged in tackling this serious and economic issue, but no government or aboriginal leadership can stand aside. The federal government must clearly state its commitments, goals, and objectives and be prepared to listen and respond to other governments, communities, and especially the aboriginal communities and their leaders.

It must commit to a process informed by those living in poverty. It needs to recognize that government policies, practices, and programs, either directly or even indirectly, have an impact on the poor. It needs to ensure that when it funds community initiatives, those are based on community needs identified by the community and not by remote decision-makers.

You ask what mechanisms can facilitate cooperation. The process that led to the Kelowna accord had the potential to be a very good model for the creation of an intergovernmental, cooperative approach to the reduction of poverty. It was a negotiated partnership between the key actors. The federal-provincial-territorial and aboriginal meetings are a model that can and must be used if a poverty reduction strategy is going to work.

We need to have the public as well as policy-makers informed about practices that work now and will move people out of poverty. Do not waste time and effort when we know there are models in Canada and around the world that have made a difference.

You ask if a joint federal-provincial-territorial response is necessary—obviously, yes—and what the target should be. We must have clear plans of action that ensure collaboration across all levels of government. Yearly budgets should be set, with clear allocations established to meet each target program.

● (1340)

The plans must look at and take account of the factors that we know are critical in determining poverty: gender, disability, illness, age, racism, and immigrant status. The plans must include, among other things, raising the social assistance support program to at least the LICO.

We cannot emphasize enough the importance of housing. Plans should ensure the availability of affordable housing in all communities. Bring Canada Mortgage and Housing Corporation back into the creation of social and affordable housing, including support for the co-operative housing sector, which targets mixed-income units. Subsidized housing must be available, but the supports must not be structured to penalize persons re-entering the labour force by raising the cost of their housing with each increase in income.

We need targets and we need to agree. A plausible one is 25 in 5, a reduction of 25% of the poverty rate over the next five years, with a commitment to five-year renewals after that. It cannot be just a once-only effort.

You ask what more the federal government could do to reduce poverty among children, lone parents, women, aboriginal people, persons with disabilities, recent immigrants, and unattached individuals. We would add a qualifier to “unattached” and include a particular reference to older unattached women, whose poverty rate is very significant and distressing given their extreme vulnerability, and we are troubled by the word “more”, as we see very little being done by the federal government at the moment.

However, in response to the question, we would suggest that you look at each identified group and, using the knowledge we have now about the determinants of poverty, put action plans in place to eliminate them. We find it hard to believe that the federal government does not have all the information needed to address these particular populations.

You ask how the federal government's contribution should be measured. The most important aspect, in our opinion, is that every policy, program, and practice should be reviewed through an anti-poverty policy lens. This kind of policy lens has been developed for such things as elder abuse. Some hospitals use it to deal with their geriatric patients. It ensures that all existing and new policies, practices, and programs contribute to the reduction of poverty rather than exacerbate it.

Examples that do exacerbate are taxation policies that target people with capital but do nothing to help those without, home renovation policies that help those with homes but do nothing for those who are homeless or living on the margins of society, and infrastructure programs that fail to give high priority to public transportation.

We are concerned by our sense that this question separates the actions taken solely by the federal government from those taken by

other critical actors. Poverty is a national problem, and anti-poverty programs and policies require cooperation and collective action by all levels of government, the public and private sectors, and all communities.

Indicators must, therefore, be broader than just the measure of one government's actions. We suggest that the investment in the development of an anti-poverty policy lens and its mandated use across the federal government would be a very useful first step in this regard.

You ask if federal resources could be deployed more effectively. We suggest, again, that the quick development of an anti-poverty program, policy, and practice lens would give very quick and practical answers to these questions. It would show and highlight those activities that are not productive and those that have potential with perhaps minor improvements. We would learn where we as a society are failing and where we must develop new and more effective policies and programs.

You ask what strategies our organization is using to reduce poverty. CPC is an organization of older Canadians who have long memories. We've been concerned with this issue for many years, even before the 1989 parliamentary commitment to alleviate child poverty in Canada by the year 2000. What a disgrace. And we all should shoulder it. We must infuse a sense of urgency to this.

● (1345)

CPC is working with anti-poverty groups, such as Campaign 2000 and the Anti-Poverty Coalition, to cajole, pester, and engage governments at all levels to tackle this social issue. We write briefs. We hold public forums. We work with homeless groups to develop housing strategies in rural communities.

We do whatever we can to raise public awareness and engagement on the issue. We're often frustrated because people do not want to hear the facts, but we are also often delighted when policy-makers express their interest in and commitment to solving this problem.

The very fact that this committee of the House of Commons is raising the issue of poverty and is talking to the communities involved gives us hope that now, at last, something substantive will happen. We wish you every success in your work.

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

We're now going to move to the Children's Aid Society of Toronto. We have Colin Hughes here.

Thank you, sir. You have five minutes. The floor is yours.

**Mr. Colin Hughes (Social Worker, Community Development and Prevention Program, Children's Aid Society of Toronto):** Thank you.

I'm a community worker in the community development and prevention program of the Children's Aid Society. I'm here on behalf of the society, but also as a founding member of Campaign 2000, the campaign to end child poverty.

As my colleague indicated, many, many community groups have been working to raise the profile of the issue of poverty in our community and to see action. I really am pleased to be here as well. I hope the committee's deliberations will lead to some solid actions.

At the Children's Aid Society, poverty has a really devastating impact on children and families. We estimate that about two-thirds of our clients have incomes below the low income cut-off. About half have incomes below \$20,000. That's in the City of Toronto. About 7% are homeless and in temporary accommodation.

We spend about half a million dollars in emergency assistance for really basic needs just to prevent admissions into care. These are needs such as food, clothing, and shelter—really basic. We know from some research we've done that housing is a factor in about one of five admissions into care and that housing is also a factor in prolonging the length of time a child is in care.

Child welfare organizations right across the province, I think it's safe to say, strongly support all efforts to reduce and ultimately eliminate poverty. It's fundamental to the safety and dignity of communities and families for all children to flourish, including children or youth who are of transitional age.

In 1989, the House of Commons unanimously resolved to end child poverty by the year 2000. The CAS has since been a community partner in Campaign 2000 and has contributed numerous report cards tracking progress.

Our most recent study is "Greater Trouble in Greater Toronto" and it has troubling findings for the Greater Toronto Area. There are three broad themes.

The first is that poverty is urbanized and it is no longer sustainable. Since the 1989 Commons resolution, child poverty rates have increased substantially in the cities that make up the GTA. For example, it has gone from 12% to 21% in Mississauga, from 8% to 20% in Markham, from 9% to 18% in Richmond Hill, and from 24% to 32% in Toronto. That's from 1990 to 2005 census data.

The second broad theme is that poverty is racialized. There are just no two ways about it. Half the children in this city, or in the Greater Toronto Area, are children of non-European heritage, but they make up seven of every 10 children who are living in poverty.

The third broad theme is that lone parents are inordinately burdened by the problem of poverty. In Toronto, about 29% of children are in lone-parent families, but they make up 51% of the children living in poverty.

The timing couldn't be better: we can't wait any longer. Our national government needs to recommit to acting on poverty. Also, the timing is great in terms of working with Ontario. Ontario has recently committed itself to a 25% reduction over five years in the

number of children in poverty, as I'm sure you've heard, and it is specifically asking for federal help, for the federal government to be a partner. We can talk about those areas.

We at the Children's Aid totally support the Campaign 2000 policy solutions. These include a full child benefit of \$5,200 a year. In fact, child benefits have been a pretty big success story in Canada over the years in terms of reducing poverty. We feel that they have a little more to go, but they can really have quite an impact on poverty.

They also include the working tax credit of \$2,400 and extending EI eligibility, or restoring it, some would say, as well as making major investments in early learning and child care. This is really quite key. In fact, a crisis is looming in Toronto and in Ontario around early learning. We can talk about that later.

Also included are major investments in affordable housing. This is absolutely critical for families, but it's also critical for youth who are in transition, such as our youth who are in care.

● (1350)

I thank you again. We'll talk more.

**The Chair:** Thank you, Mr. Hughes. You're right on time. Look at that. You're at five minutes right to the second.

I now want to welcome FOR Women's Autonomy, Rights and Dignity, with Patricia Cummings-Diaz.

Welcome. You have five minutes. The floor is yours.

**Mrs. Patricia Cummings-Diaz (Co-Chair, FOR Women's Autonomy, Rights and Dignity (FORWARD)):** I'll start by telling you that in 1995, when the 21.6% came off the welfare cheques, the Fraser Institute, which made that estimate, also allotted only 1,000 calories a day to live on. I know that was true, because I lived it. In two months, there was no food in the house. By the spring of 1996, I was in the hospital, sick with gallbladder. By the time I was graduating, I was so malnourished I couldn't read a paragraph and be able to get into Guelph University for my masters' degree in international development.

The first job I got, with unemployment so bad and so many people losing their jobs in all that restructuring, was a job cleaning toilets at Toyota. I was injured. This is one of the worst things that happened at that time. When you downloaded everything onto the municipality, with everybody was losing their jobs, it was a real mess. The discrimination and hatred that came toward us was just unacceptable for this country. It's not who we are. We aren't that kind of people.

I could never understand the hatred, but it came, and it came full-fledged. I ended up outside the country for four years, teaching English in Mexico. I got back to Canada. I've moved 16 times in the last four years. I've worked at market research. Guess what I was doing? I was enlisting young kids in the American army. Do you want that immoral job? Because that's the kind of crap that's being given to us. The jobs where there is a minimum wage are a waste of time. It just doesn't work.

As for welfare, when we signed NAFTA, I thought dismantling welfare was wrong, but I agree with it now. What we need is to get rid of it. It's punitive, it's demoralizing, and it just doesn't work. There's no way to get out of that thing. You get on welfare today and you go to your food bank. I met a woman—I'm talking about immigrants—who has just been in Canada a month. She gets a welfare cheque, which is only 1,000 calories a day. She goes to a food bank. As for the food I get at the food bank, 90% of it I would not otherwise buy. There's no nutrition in it.

As far as the Canada Food Guide, shelters, and the rest of the places are concerned, I've lived in those shelters. It's not true.

On the mechanisms, I went to the UN. All we were taught as poor, homeless, and under-housed women, that was and is our experience. I'm not just talking about women. We went to CEDAW because it's the bill of rights, but I'm talking about all the poor.

I would like to see some special measures. We signed documents with the UN. We wrote the Universal Declaration of Human Rights. That's who we are. We told them about what had happened.

Here's what I would like to see. Number one, the LICO line is probably the fairest for us. The Fraser Institute claims that there are only 1.5 million people living in poverty in Canada. Statistics Canada says it's about 4.9 million, but the OECD—the Organization for Economic Cooperation and Development—at a 60% median, they're saying it's 6.5 million. I'll take the LICO line, but it has to be guaranteed and non-taxable.

We need full health-care rights. I spent a year and a half going to a naturopath, teaching my stomach to eat, because my body will not tell me that anymore. The sad part about it is that all of the year and half that I spent there I'm losing, because I'm going to food banks. So it's back again. It's starting. I'm beginning to lose that year and a half. My body is beginning to do that again because I can't get enough food.

Food is a major issue among the poor. The only way to end this is to say enough with the band-aid solutions. We can do this. We had this dream in the 1970s. We wrote these documents. This is who we are. Go back and read it. It's the greatest document that's ever been made: the Universal Declaration of Human Rights. We made it. It was our dream.

There should be no squabbling about money in this. We have to get back down to being Canadians again. We have to remember who we are.

This should never ever happen again, where the poor are used as a scapegoat with the market economy flipping one way or the other and used in a political agenda. We need to be enshrined in the Charter of Rights, so that this never happens again.

• (1355)

The two 80-year-old women I met were in these drop-in centres, the 20 that I visited.

**The Chair:** Do you want to wrap up, Patricia?

**Mrs. Patricia Cummings-Diaz:** I think we need a human rights agency to help us, because we really have been behind at the UN. It's disgraceful. We didn't even sign the indigenous rights papers. We are a disgrace in the international community. It was embarrassing.

When it came to the point on violence against women, they gave statistics on how many women beat up men. Do you want to know how embarrassing that was with all the other people there from different countries in the world?

We have to change. We have to get back to us. This is us. Read the document and realize what incredible, unusual people we are.

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

We're going to move to Diana Capponi from the Centre for Addiction and Mental Health.

Good morning and welcome. The floor is yours. You have five minutes.

**Mrs. Diana Capponi (Coordinator of Employment Works!, Centre for Addiction and Mental Health):** I thank you for providing me the opportunity to speak.

I work at the Centre for Addiction and Mental Health. It's the largest mental health and addiction facility in Canada. I'm here as a person who, 28 years ago, was discharged from the Centre for Addiction and Mental Health, so I'm here today to explain to you some of my personal successes and some of the programs that were in place 28 years ago and that have allowed me to be sitting here today.

I grew up in a very violent family home in Quebec. I got involved in drugs and drug abuse and a lot of really obvious behaviour of kids who are facing a violent home life. At the age of 15, I had my first psychiatric hospitalization in Montreal, and it was probably annually after that, until I was in my twenties, that I was in and out of psychiatric facilities.

At some point, my mother, in desperation, shipped me off to Ontario, thinking my big sister would be able to assist me and get me on the straight and narrow. I'd had a baby. The baby remained in Quebec and I was here. I remember becoming aware of the old Queen Street Mental Health Centre, which was our provincial asylum at that time. I remember waking up there and spending many months at Queen Street. My sister took care of my daughter.

I was discharged to a rooming house and boarding house in Parkdale, a very infamous one that has been written about, Channan Court, and I lived there with 75 other people, all of us paying different rents depending on our income source. After a while there, I started to identify more as a mom than as a crazy person. I remember running into a YWCA program called "Focus on Change". They had confidence in me and thought I had something to offer. They offered me parental leave while I went to school and did some academic upgrading.

I remember the very day that they accepted me. I was thrilled. I had to write a little essay, so I wrote about Kraft Dinner, which was a common meal in the boarding house and rooming house. I remember going home and being elated, actually, that I had a way to structure my day, with somewhere to go and something to do. I remember being on the King streetcar holding my baby daughter and finding a louse on her head. The rooming house and boarding house always had lice and other delightful creatures.

In my community—and I would define my community as people who have mental health and addiction challenges or histories—poverty is more than just inadequate money. We talk a lot about poverty of soul. We talk a lot about rejection, about filth, about bugs, and about exclusion.

I pursued a dream of going back to school. I enjoyed the program so much at the Y and I really wanted to learn. I wanted to get out of the community of crazy people and start being more normal or doing what I thought normal people did. I had to fight the mental health system, because they told me not to bother, that it was too stressful and I couldn't handle it, without any understanding of the stress of poverty. I wanted to work with women in prison in particular, because I'd had some jail experiences and was really very distressed by what I'd witnessed in the penal system.

I was very fortunate in that I met a woman who chaired a board of directors for a local housing co-operative. This probably changed my life more than anything else. Here I was with a two-year-old child. I'd just come out of a mental hospital. I was trying and struggling to go to school. I was offered a most wonderful apartment in a wonderful community where I had not only affordable and secure housing but a very strong community of people around me who I could count on.

My confidence increased. I did exceedingly well in school. I was given a number of scholarships and awards. At the time, I remember

telling my welfare worker this good news, fully expecting the money to be taken back, and being told: "Good for you, Diana. You keep it. Congratulations."

I lived in the co-op for about 16 years and then purchased my first home. I have not used social assistance. I've not relied on welfare. I've been a steady taxpayer ever since. So investing in me for two years was a really good ROI—return on investment.

• (1400)

Now I'm the Employment Works! coordinator at the Centre for Addiction and Mental Health. I help the centre's human resources department actively recruit and retain people with mental health and addiction challenges for vacant positions at the hospital. So far, we've hired 130 more.

I'm going to wrap up. On some of the issues people present to me today, the big issue is Canada student loans. Many students first develop mental health symptoms in university and college and often don't finish their programs. When you've received a mental health diagnosis, you can actually disappear for years at a time and not even have a memory that you owe that outstanding debt. I can tell you that a number of people who really have a strong desire to return to school are not able to because of the restrictions and clawbacks.

We have a number of really good educational programs with George Brown College that get people actual jobs when they graduate. I think we need to invest in more initiatives specific to the community.

We have what we call augmented education, which is a way of teaching people who have mental health and addiction challenges. It is a little unique and a little different from other mechanisms.

I'll finish by saying I find it very interesting in checking the Canadian Human Rights Act and looking at the Ontario Human Rights Code that the definition of a person with a disability includes a person who has an addiction to either drugs or alcohol. That's in both the federal and provincial acts, yet our local disability support payments do not consider people with addictions to be disabled. I wonder how this confusion can continue to exist.

Without getting Ontario disability supports.... If you're on Ontario Works or welfare, you're not eligible for a lot of the employment supports that helped me 28 years ago and are not there to help a number of people today. I hope you can take a look at that.

Thank you.

• (1405)

**The Chair:** Thank you very much, Diana. We really appreciate that.

We'll move to another Diana, Diana Summers.

I know you're with the Ontario Non-Profit Housing Association. Welcome. You have five minutes. The floor is yours.

**Mrs. Diana Summers (Manager of Policy, Research and Government Relations, Ontario Non-Profit Housing Association):** Thank you.

My name is Diana Summers, and I am here on behalf of the Ontario Non-Profit Housing Association, which is also called ONPHA.

ONPHA represents 760 non-profit housing providers in 220 communities across Ontario. ONPHA members operate more than 160,000 non-profit housing units and provide housing for approximately 400,000 people. This includes the elderly, low-income families with children, the working poor, victims of violence and abuse, people living with developmental disabilities or mental illness, and the homeless and hard-to-house.

We know that there is a need to act quickly—even more so now, as the impact of the recession is more broadly and deeply felt than we had anticipated.

In Ontario, one in five tenant households spends more than 50% of their income on rent. This means that there are over 260,000 households in Ontario that routinely choose to either pay the rent or feed the kids.

We also know that waiting lists are long. ONPHA's most recent figures show that nearly 130,000 households in Ontario will be waiting anywhere from 5 to 21 years for an affordable home. These numbers do not take into account the homes that will be lost as a result of jobs being lost in this current recession.

Those who live in poverty experience deprivation and are unable to purchase basic goods and necessities. It means that access to goods that most of us take for granted—access to employment, local commercial services, and affordable recreational opportunities—are out of reach.

Poverty is a multi-dimensional issue that requires action on several fronts. It is essential that we recognize the interactions among housing programs, social assistance programs, income supports, retraining programs, and health care availability. All of these have a role to play in an integrated strategy aimed at reducing poverty.

Non-profit housing plays an important role in keeping Ontario's communities healthy and strong. Non-profit housing, by its very nature, is permanently affordable, and can provide safe, livable, and affordable homes for the long term.

It is this type of community asset that can serve as an important tool to help individuals and families break the cycle of poverty. When people have a place to call home, they can seek and find a job, establish their children at school, and maintain a healthy household.

There are three key ways that housing can assist in poverty reduction. The first is at the individual level. It involves reducing housing costs through either housing allowances or rent-geared-to-income subsidies that reduce the household shelter burden to no more than 30% of income.

The second is by using housing programs as a basis for asset-building. These programs assist modest-income households to move

to home ownership and to begin building equity. The move to ownership also frees up community-based affordable housing, and thus reduces waiting lists.

Finally, there is increasing the supply of affordable housing, which, if carefully done, can create healthy mixed-income communities. New construction, regeneration or rehabilitation methods, supported with a regulatory framework, are all tools that can accomplish an increase in supply of affordable units. The revitalization of Regent Park here in Toronto is a good example of how these tools are being put to use.

It is important to recognize that different solutions belong in different communities. ONPHA strongly supports the need for local communities to identify the programs that will work best for them.

Poverty is an issue that requires the shared involvement of the federal and provincial governments as well as local communities.

ONPHA believes the federal government should articulate the housing outcomes it wants to see and then streamline the legislative and regulatory processes so that the province and local communities can develop and implement the programs to achieve those outcomes. As stated before, local communities are in the best position to make local decisions about their housing needs.

The economic stimulus funds provided by the federal and provincial governments, as well as the Canada-Ontario affordable housing program, are certainly welcomed, and housing providers will do their best to meet the timeframes, but they are tight. However, what's really needed is sustained funding to ensure long-term viability of housing.

These funds would ensure that existing housing stock is kept in good repair and that new housing stock can be acquired. Housing providers and those delivering support services need to plan in order to achieve operational and economic efficiencies. Multi-year commitments to stable and predictable funding are required.

The federal government should also keep those funds realized from the expiration of operating agreements earmarked to social housing. In Ontario this would mean keeping \$11 billion worth of funding for housing without requiring the federal government to increase its spending.

Certainly there is a need to address poverty in Canada. In ONPHA's view, the solution must be multi-faceted, long term, fully funded, locally implemented, and have measurable achievements.

• (1410)

Equally important is the need to realize that alleviating poverty is a shared responsibility, one in which the federal government can and must play an active role.

Thank you.

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

We'll now move to Steven Christianson from the Ontario March of Dimes.

Thank you, sir, for being here today. The floor is yours.



**Mr. Steven Christianson (Manager, Government Relations and Advocacy, Ontario March of Dimes):** Thank you for our virtual last-minute inclusion.

Good afternoon, honourable members and Mr. Chair.

My name is Steven Christianson. I'm the national manager of government relations and advocacy at March of Dimes. I thank you for this opportunity and for your time today.

As you've heard time and again, disability can affect anyone at any age at any time. It may be present at the time of birth, it may be the result of an injury or illness, or it may be simply part of the natural aging process.

In nearly six decades, the March of Dimes has evolved from a research-focused organization, raising \$14,000 in 1951 to eradicate the threat of polio, into an organization with an annual operating budget in excess of \$90 million, through which we provide a diverse range of services that help more than 40,000 consumers across Canada to live independently and to participate in community life.

Who are the people we serve? About 80% of March of Dimes consumers have personal incomes of less than \$20,000, and 91% have incomes below \$30,000. A staggering 40% of the people we serve, based on data from our 2007-08 fiscal year, have incomes of less than \$10,000. Many of them reside right here in Toronto. About 72% of the service expenditures of March of Dimes assist people with incomes below \$20,000.

I have a few more statistics: 65% of our consumers are over the age of 55, while 2.5% are under 19 years old. In Ontario alone, 1.85 million people have a disability, and nearly half of those between the ages of 15 and 64—49.5%—are unemployed. The national picture is not fundamentally different.

It's safe to say that we know quite a bit about poverty and its relationship to someone who lives with a disability. When we speak of poverty, we mean social conditions as well as economic conditions. Similar to many of the recommendations we recently made to the Ontario legislature, our recommendations today are that any federal strategy should explicitly embrace the principles of preserving and enhancing dignity and respect and should incorporate participation in the planning and public policy process.

Barriers to employment, housing, social inclusion, health care, and participation in society can often lead to poverty for someone with a disability. The lack of, or cost of, supports in home care, workplace accommodation, and assistive technologies and devices can also contribute to poverty.

Our approach highlights those two terms and concepts: supports and barriers. The success of any federal contribution, from our perspective, will ultimately be found in those very supports and the barriers they help eliminate.

People with disabilities are among the most disadvantaged, with lack of employment being one of the main reasons. Employment for people with disabilities has its complexities around access and training in particular. We appeared before this committee speaking to that very topic during your 2006 study on employability. Barriers to employment make up a huge area that can be addressed through a national strategy with annual benchmarks.

Affordable social housing that incorporates the necessity of accessibility and support is equally important and, in Canada, equally lacking.

We also want to emphasize the growing need for caregiving, as well as the need for a framework that recognizes that modifications to one's home that facilitate independence, make community participation easier, and help ease provincial health care expenditures can also help alleviate poverty among Canadians with disabilities and their families.

Our main point is that the federal government needs to reconsider discussion about enacting a national disability act that would create a baseline for all provinces so that provincial legislators will have a point of reference from which to enact legislation.

A national framework on disability is an idea that is not new. National legislation is something that we at March of Dimes have been encouraging for nearly 20 years. Parliamentarians recommended such an approach in a 1981 report, "Obstacles", and the Conservative commitment to exploring how such legislation might be formulated also advanced the debate on the issue.

Despite these many initiatives, and many more that I don't mention, Canada remains one of the few countries without a national legislative framework on disability. This in no way suggests that a national disability act would be a panacea to fix everything tomorrow, but it does represent a focal point, providing national measures and a baseline that the federal government can use to more effectively coordinate its contribution to reducing poverty with the provincial governments and the non-profit or third sectors.

● (1415)

Poverty for Canadians with disabilities can be unique, and any efforts to address poverty, be they programs or new legislation, will require at least national standards for supports that identify, eliminate, and prevent barriers to the full participation and inclusion of Canadians with disabilities.

Thank you for your time. Always feel free to call upon us for any assistance this committee might need.

**The Chair:** Thanks, Steven.

We're going to start with Ms. Minna, who is going to have seven minutes for questions and answers.

**Hon. Maria Minna (Beaches—East York, Lib.):** Thank you very much, Mr. Chair.

I thank all of you for coming here today. Welcome, and thank you for being so frank with us, because it's very helpful. I suspect that for some of you, when you've said it so many times, you get kind of tired of it by now.

There are a lot of things we've heard and some things that are consistent as we go across the country, such as: affordable housing; a national early education and child care program; reform of EI; strengthening the national disability act, which I think we've discussed in this committee and about which we've heard many times before; and a number of other things.

Then, once in a while, some interesting new things and perspectives that come up. That's what I want to get into a little bit now so I'm not being repetitive, for our own sake.

Mr. Hughes, I wanted to ask you something. The last time I was on one of these panels was in 1994. It was the social security review.

Some of you may remember that great old time.

**Mr. Colin Hughes:** I certainly do.

**Hon. Maria Minna:** Yes.

At that time, though, we were in Toronto, and some of our witnesses were actually young people who were wards of the state. They said very bluntly to us, "When your child reaches 16, if that child still lives at home and continues to stay with you, you continue to assist and to help finance education, post-secondary, and so on, but when we reach 16, you throw us out on the street, essentially." They looked at us and said, "You are our parents, so what are you going to do about it?"

Of course, I'm not sure that we've done anything about it, but I just wonder if 16 still the age, or is it 18?

**Mr. Colin Hughes:** It's 18. Then you can go onto what's called extended care and maintenance in Ontario until the age of 21. It can be extended.

• (1420)

**Hon. Maria Minna:** What does extended care and maintenance look like?

**Mr. Colin Hughes:** It's basically an income support program. It's not very much money.

**Hon. Maria Minna:** Is it the same as welfare levels?

**Mr. Colin Hughes:** It's not much different.

I think I know where you're coming from. When you hear people talk and some of the youth talk—and I must say that I found Ms. Capponi's and Patricia's speeches really quite compelling—it just drives home how it must get a little dry for some when we talk about these macro policies on housing and child care. But when it comes down to the community level and what that actually means for people, I think this is where the rubber hits the road.

You need to have the policies. It's very difficult. The community can only do so much on its own without the policies that say we're going to have that housing co-op, we're going to have assured income levels, and we're going to have a spot in child care for you.

Kids who are leaving care crave connection. It's not just about money. They need to be connected. A very successful program, as

you know, is the Pape Adolescent Resource Centre, which provides that kind of connection, a home away from home. The kids also say that society needs to be a good parent.

**Hon. Maria Minna:** I appreciate what you've just said. It's very relevant.

My question to you, though, was a little bit different. Should we be looking at treating young people as our children, the way a family might, until they're 21, at least as long as they're still in school?

**Mr. Colin Hughes:** Yes. We should be providing assurances. There are children who are labelled "children at risk". There are children, not just crown wards, for whom we could be doing a much better job of reaching out, connecting, and ensuring that they have opportunities to continue in education and that the supports are there for housing and that kind of thing. All of these things are terrific investments.

**Hon. Maria Minna:** I want to get at that group, because it's a group I remember very vividly from last time. When you mention youth in transition, I know what it means, but I was also looking at these others.

I want to now go for a moment to Patricia Cummings-Diaz.

You've given us some terrific information. I just want to put something down. I was just talking to some of our colleagues at lunch—to Mr. Ouellet, actually. We were talking about the myriad of programs that exists when you add up all of the national, provincial, and municipal programs and about what it costs to administer all of the various income support programs and other programs.

I think what you're telling us is, "give us a guaranteed income supplement", which would include.... And I think you're putting the seniors in there as well, because to get GIS right now means to be somewhat impoverished. It needs to be strengthened. You're saying, give us a guaranteed income supplement as opposed to welfare or targeting us in one way or another, which is very punitive—I agree with you.

Is that what you're saying? To roll it into one thing?

**Mrs. Patricia Cummings-Diaz:** Yes, because the band-aid things.... I mean, how many times have you met within the last 50 years? I think when MacDonald met, sometime in the eighties, he got paid \$600 a day for doing it, while a single person on welfare was getting \$19. We're kind of tired of all of this.

**Hon. Maria Minna:** Would you roll EI in there or would you leave it separate?

**Mrs. Patricia Cummings-Diaz:** For example, for a single adult, I believe it's \$24,000 a year. If a person can be assured of that.... I was talking with people I worked with, who said, "Well, so then we get taxed after that?" I said yes, and they said that's fair. You have to see the conditions that we've been left in after 13 years of this.

We need help. You have to be able to guarantee full health benefits. I found that going to a doctor was a waste of time, which is a whole other issue. The number of women—

**Hon. Maria Minna:** Because then you can't do what he says you need to do.

**Mrs. Patricia Cummings-Diaz:** No. Basically you go in, get your prescription, and leave. With a naturopath it's an hour, which is more comprehensive.

**Hon. Maria Minna:** I'm sorry, but I'm out of time. If there is any time later, I'll come back to Ms. Capponi, because I had some questions for her as well.

• (1425)

**The Chair:** Thank you.

I'd like you to know that if you need headsets for translation, now is a good time to put them on. Mr. Ouellet is going to ask all his questions in French.

Mr. Ouellet, the floor is yours.

[Translation]

**Mr. Christian Ouellet (Brome—Missisquoi, BQ):** Thank you, Mr. Chair.

Ms. Summers, earlier you said that the federal government should also keep those funds realized from the expiration of operating agreements earmarked to social housing. This, you said, would mean providing nearly \$11 billion in funding for housing without requiring the federal government to increase its spending. Where did you come up with this figure of \$11 billion?

[English]

**Mrs. Diana Summers:** Those are not our office's numbers. As I understand it, the number across Canada is closer to \$33 billion, with \$11 billion as Ontario's share. This is the money that is spent right now by the federal government under the social housing operating agreements that will expire gradually up until 2033, so it's a total figure.

Over the next 30 years, the obligations of the federal government to fund social housing will drop by just over \$60 billion. That withdrawal of subsidy is linked to the date when the housing provider's mortgage is paid off: as the mortgage is paid off, the subsidy decreases.

For us, it's both a concrete lack of dollars and, more significantly, the ongoing viability of some of the providers that comes into question. We would ask that you look at that as potentially one way of staying involved in social housing.

[Translation]

**Mr. Christian Ouellet:** Thank you.

Earlier, you stated that people were waiting anywhere from 5 to 21 years for affordable housing. You also said that in order to meet the timeframes, sustained funding was required to ensure long-term viability of housing. How level of funding would be required in Ontario alone to meet the needs of people who have been waiting anywhere from 5 to 21 years?

[English]

**Mrs. Diana Summers:** I don't think anyone in my organization has put a figure to that. As I said, I would start with the \$11 billion. Whatever funds there are for us, the important thing is to state what you want, come up with the outcomes, and fund it on an ongoing basis so there are no surprises and people can manage and accomplish efficiencies. I don't have a dollar—

**Mr. Christian Ouellet:** You don't have that figure.

**Mrs. Diana Summers:** No.

**Mr. Christian Ouellet:** To come back to this \$11 billion—

*Excusez-moi.*

[Translation]

The \$11 billion is not for new housing. It would merely be to keep existing housing in a proper state of repair. Is that correct?

[English]

**Mrs. Diana Summers:** Yes, absolutely.

[Translation]

**Mr. Christian Ouellet:** So then, you would need additional funds for new housing. Are you aware that CMHC is currently sitting on a reserve fund of close to \$10 billion? That money could be used to build new housing units.

[English]

**Mrs. Diana Summers:** Absolutely. Yes, the money that's spent, which will expire, would not create a new unit, so there would have to be new money. And yes, on looking at CMHC, in our case we would suggest that.

• (1430)

[Translation]

**Mr. Christian Ouellet:** Thank you very much.

Ms. Capponi, you stated that you lived in a housing co-op for 16 years. Do similar co-ops still exist? Is the type of housing cooperative that you lived in for 16 years still around?

[English]

**Mrs. Diana Capponi:** A number of housing co-ops exist in the city of Toronto. I can only speak for Toronto. However, no new cooperative housing has been built for many years. The beauty of cooperative housing is the mixed incomes. Nobody's ghettoized by living there. It's an opportunity for some of the most marginalized people to really benefit from the inclusivity of a housing cooperative. I know I certainly benefited. I'd say there has not been any new federal money for housing co-operatives for at least eight or nine years.

[Translation]

**Mr. Christian Ouellet:** You're right, not since 1993.

Ms. Cummings-Diaz, your testimony was very moving. You said that 90% of the food handed out by food banks had little nutritional value. How would you resolve that problem? Would providing healthier options be more costly? Would consulting with dietitians be one option? What could we do to rectify this situation?

[English]

**Mrs. Patricia Cummings-Diaz:** I think the food bank is just another band-aid solution. When we start putting up food banks, we are throwing our whole ideology right out the window. Give people a guaranteed income, non-taxable, with full health benefits, and then we're not going to need food banks. On home ownership, expand Canada Mortgage and Housing, add the green element to it with solar energy.

Do all of that. There's a way of doing this. That guaranteed income will generate the economy, because now we have the money we need necessities for. I sleep on a mattress on the floor. Welcome to the new world order, Canada.

That's not us. We're bigger than that.

[Translation]

**Mr. Christian Ouellet:** Thank you, Madam.

[English]

**The Chair:** Thank you, Monsieur Ouellet.

We going to now turn it over to Mr. Martin.

Sir, you have the floor for seven minutes.

**Mr. Tony Martin (Sault Ste. Marie, NDP):** Thank you very much.

Thanks for being here today. We're certainly getting an education this afternoon.

I really appreciated your comment, Patricia, that it is who we are. Somewhere along the line we seem to have forgotten who we are. I remember the late nineties and I remember the 21.6%. I was in the provincial legislature at the time. I was shocked. I remember Kimberly Rogers. How that could happen in this country is unbelievable.

How do we get back to who we are? You've suggested that we go back to the whole issue of human rights and the covenants we've signed onto internationally and that we try to live up to those. Some have suggested that we need a new piece of legislation—a poverty act. Would that help in any way?

**Mrs. Patricia Cummings-Diaz:** As long as we don't have to keep on coming back here and talking about poverty.... Let's just end it. Do you know what I mean? If we get it into the Charter of Rights that you protect us so that this never happens again.... It's billions of dollars that we're going to cost us just on health care alone.

You take work from the working class for two years and you have a mental health issue. That's one of the saddest things. Instead of defining us as unemployed, we became defined as chronically depressed, bipolar, etc. Then there are all the medications, which is another thing that came up when I did this study last year with the drop-in centres: cannabis.

Many of the women who were originally told to take these psychotropic drugs were vomiting and having extreme difficulty with them. Their choice was to turn to cannabis. Now, of course, we have little grannies walking along seedy alleys trying to get their medication. A number of women who have taken that over the last 13 years have multiple kinds of health care problems. You can't take that stuff without hurting another part of your body.

To either prohibit or at least include.... Post-traumatic stress, I think, is how you can define what we're going through. There are eating disorders, sleeping disorders, and the anxieties. When you get on welfare, you are caught in a system of going to the welfare office and trying to get your cheque and then going to food banks. It becomes a little culture in itself. A cigarette is actually an economy. I lived in those shelters. There's everything in there.

When I was in Kitchener, the poor kids were the hookers. As for Children's Aid, I mean, who's the parent here? These were the hookers in that place. In sitting down and talking with them, I can tell you, if you want access to pedophiles, let's use these young girls. We have a wealth of information that can help Canadian society. I had no idea that this happens.

I had no idea that the lower you go down in your work, the worse your paycheque is and the more you get abused. When I worked for that American company in doing market research, you had to talk a lot and you needed to drink. If you go to the washroom, it's deducted from your cheque. There are no rules for us because nobody really looks at it.

You give us a guaranteed income and then we have something to start off with. We can begin to heal. We can begin to dream again. That's what we all have to do. This is a mess, but we've been in messes before, and we can get out of it.

Home ownership is absolutely necessary. Expand Canada Mortgage and Housing. For your public housing, you can clean it up and give people the opportunity to buy into that. They now have money, so it's not subsidized anymore, and we don't have to be constantly wrapped up in things.

Did you know one of the reasons that houses in public housing are so ugly? I lived in them. If you get in there and plant a garden with flowers everywhere, or if you do anything inside the house, when you leave they tear it all apart. For 30 years we could have had beautiful places, but because of the policies there, they rip it all out and you go into the same ugly thing that somebody else was in. If you actually have a good time and you're able to fix the basement, which is empty, they rip all that out. What sense does that make? It takes away the whole ambience of a community.

It's great to walk through those little communities. You can smell the Jamaican food. You can smell somebody else's food. There is a real chance to really make that work.

• (1435)

**Mr. Tony Martin:** Diana, I really liked your story. It sounds like, to some degree, that you were able to find what Patricia is talking about, which is a community where you belonged, that cared for you, a home that you could feel safe in and proud of and secure in. That was the launching pad for you.

**Mrs. Diana Capponi:** That and Canada Student Loans gave me an ability to go back to school. I was very fortunate. In preparing for today, I was thinking back to the programs I was able to take advantage of, which largely don't exist anymore.

The waiting list for housing is awful and often the housing is awful. Sorry, but even within the non-profit sector for my community, I still have people who are paying rent in rooming houses and boarding houses who are kicked out at 8:30 in the morning and not allowed to return until dinnertime. That's still going on in this city. Their rights are being totally taken away. They are stripped of any rights.

When it comes to mental health or addiction, having a mental health label is probably the worst label a person can have, and you're probably guaranteed to face more discrimination in employment and in housing. You can't even get a general practitioner to take you as a patient. I get calls from family members across this country. Some have moved from province to province trying to get care for their children who have mental health difficulties. GPs just won't take them on. There's a myriad of issues.

I know how much I benefited from those programs and I'm nothing special. I know other people who benefited back 28 or 29 years ago. We need to go back. I felt really supported going to school. I was a lone mother. I had wonderful housing. I had a wonderful community.

• (1440)

**Mr. Tony Martin:** What year was that, Diana?

**Mrs. Diana Capponi:** It was in 1983-84.

**Mr. Tony Martin:** When the Government of Ontario reduced welfare by 21.6%, they also made it a criminal act to be on welfare and get a student loan to go back to school to better yourself.

**Mrs. Diana Capponi:** Yes. Isn't that silly?

**Mr. Tony Martin:** Just quickly, Sylvia, you were suggesting that we really don't need to talk much more about measuring poverty and that we should actually get at doing it and fixing it.

**Ms. Sylvia Hall:** Yes. I assume that as a committee you're getting a lot of concrete, specific suggestions across the country. I hope your work won't disappear into a study on the shelf.

**The Chair:** Thanks, Sylvia.

We're now going to move to Mr. Lobb.

You have seven minutes, sir.

**Mr. Ben Lobb (Huron—Bruce, CPC):** Thanks again.

My first question is for Ms. Summers. You talked a bit about asset building for the most vulnerable. There is the general thought, and

my colleagues have mentioned this as well, that for people at the margin it's a possibility, but for the poorest of the poor, asset building is a dream. How do we start to build assets for the most vulnerable?

**Mrs. Diana Summers:** Right now, the proposal that is circulating is for the people who are close to being able to move into home ownership. For the people you are talking about, I think that a house, a safe home, allows people to get a job or to access other things in the community. It starts the process.

For me, affordable housing is the answer. It allows people to start. It's the bedrock beneath our feet, if you will, a safe, secure, stable, and nice place.

**Mr. Ben Lobb:** That being said, at what point do you go from being a person who is just getting housing to someone who starts to build assets? Is there a threshold? Is there a number? How would someone know that now it's time to start building an asset?

**Mrs. Diana Summers:** We are in a partnership with Home Ownership Alternatives, and they are developing a program like that with targets. I haven't seen it yet, but people would get assistance with their mortgage. Then, as their income goes up, the assistance goes down, and it translates into equity. Again, I haven't seen the figures. It's not new in other parts of Canada and it's not new in other parts of the world. It is new in Ontario, but not elsewhere.

**Mr. Ben Lobb:** Ms. Capponi, could you just describe your thoughts or some thoughts around the transition and mental health? Obviously, income is a very important component of being in mental health or out of mental health. You mentioned affordable housing. What other tools are there with which the federal government can help people who are faced with mental health and addiction issues?

**Mrs. Diana Capponi:** It used to be, some time ago, that the federal government provided assistance to employers. You had a Canadian accommodation network that employers could contact to get advice around workplace accommodations.

Around 47% of all leaves of absence from the workplace today in Canada are related to mental health and addiction. That's, like, shocking: 47%. Employers don't know how to accommodate, so people lose jobs. For a lot of people who have to leave the workforce due to mental health or addiction challenges, with the discrimination and stigma they face coming back to work, really, a lot of people don't go back to work. So we have a very low success rate.

That's something that I would see as helpful, because I see those folks, and—

**Mr. Ben Lobb:** Would I be able to interrupt you for a second?

**Mrs. Diana Capponi:** Sure.

**Mr. Ben Lobb:** I'd like to go back to a point you just touched on. We had a Dr. Kirby here from the Mental Health Commission, and he too mentioned something along that line. Obviously, if you are working somewhere and you get injured, the system is set up for you to rehabilitate yourself physically, yet there is really not a system that is for exactly what you mentioned, a mental health issue at a work site.

Is there another way that we could do that? I mean, we can't break everybody out, but definitely this is an issue for the workplace. There's a cost to society, too, and it's hurtful to the people who are experiencing the issues.

Do you have any thoughts on that?

• (1445)

**Mrs. Diana Capponi:** I think continuing to support the work of the Mental Health Commission would be great. Again, whatever type of resources for employers—I'm talking all employers, from small business right up to huge corporations—the employers need that advice.

In terms of extending the EI medical benefits, I think it's 15 weeks now. That's for someone who's going through a first episode or has just become ill. Often it takes months—years, actually—for doctors to find the right diagnosis and therefore the right medication. People really suffer through that timeframe. Then you have this huge employment gap on your resume. Things just get worse and worse.

So extending the medical leave for people to a six-month level, I think, gives a person a better chance to return to work healthy. If we had resources available for employers on accommodation, on mental health—if we helped employers increase what I call mental health literacy—they could detect when employees were in trouble. There are so many things that we could be doing that we're not doing.

I'm glad I got that EI thing in there.

**Voices:** Oh, oh!

**Mr. Ben Lobb:** Good. That's a big help, thanks. That's why you're here today.

Just to conclude—I think my time is likely running short—you made a comment, Ms. Cummings-Diaz, that kind of intrigued me. You mentioned, if I can quote you right, that the poor were used in the market economy.

**Mrs. Patricia Cummings-Diaz:** No. It just seems that we're expected....

The market economy ebbs and flows, and we can't survive under that kind of stuff. Somebody comes in with another idea and then, between that and political agendas, we get squished.

I mean, single mothers were literally called out as...all kinds of derogatory terms. I lived that. I had a friend who said that a nice guy came to her door with a \$20 bill and a condom. That's the kind of stuff that was happening with housing.

You can read my report. A lot of the women in the drop-in centres were older women. I'd say they were anywhere from 35 to 65, but we certainly had a couple of women who were 80.

**Mr. Ben Lobb:** On the guaranteed income suggestion, is there a timeline on that? Is there a timeframe? Is this something that is on in perpetuity, or is this something that is transitional?

**Mrs. Patricia Cummings-Diaz:** I think because of the state that we're in right now, if there's anything we need, we need money in our hands. We can't be living in the places where we're living. We can't be continuing to eat that kind of food.

Yes, a guaranteed income, absolutely; I really think that would boost the economy.

**Mr. Ben Lobb:** To conclude, then, you would not want to stick a timeframe on it. It would be open-ended.

**Mrs. Patricia Cummings-Diaz:** For right now, it should be special measures. There should be special measures.

This has been going on for 13 years. I can't work 40 hours any more. I'm lucky if I can work 20.

Right now I should be in Chapingo, Mexico, doing research on rural women, making \$35,000 a year, helping my children get their university education. But this is how debilitated I've become. This is all I can do.

EI is a mess, and especially with part-time work. Remember, a number of people are working two, three, apparently four part-time jobs. They're paying EI and they don't get anything from it.

I don't get anything from EI. Two hundred people just lost their jobs in my office.

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

I believe that Mr. Ouellet has one last quick question before we wrap up.

**Mr. Christian Ouellet:** It's more like a statement.

[*Translation*]

You rightly stated—and you were not alone in doing so—that a person who has been unemployed for two years will sooner or later experience some mental health problems. Mr. Shapcott whom we heard from this morning told me three years ago that only 4% of people who end up living on the street initially suffered from mental health problems. Unfortunately, when a person is forced into living on the street, these types of problems tend to surface, and I would point out, to surface fairly quickly. The problem could be avoided if housing was available for these individuals.

Thank you, Mr. Chair.

[*English*]

**The Chair:** Thank you, Monsieur Ouellet.

I want to thank the witnesses again for taking the time to be here, and certainly, Patricia and Diana, for sharing with us your stories, which were very moving. Thank you very much.

We're going to adjourn now and we'll be starting back up very shortly.      The meeting is adjourned.

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