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Chair

Ms. Candice Hoepfner

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

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•(0850)

[English]

The Chair (Ms. Candice Hoepfner (Portage—Lisgar, CPC)):
Good morning, everyone.

I would like to call to order meeting number 36 of the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities. Pursuant to Standing Order 108(2), today we are doing a study of the federal support measures to adoptive parents.

I am very pleased today to have four witnesses with us who are going to be talking about some of their experiences. Primarily they are going to be speaking about what kinds of measures the federal government can provide parents who are adopting children, as well as those children who are being adopted.

First of all, I want to thank you so much for being here. We really look forward to hearing your stories. We would ask that you try, as much as possible, to stay within those parameters. Give us a very brief description of your experience. Then if you could let us know what kinds of supports the federal government could provide, or could do a better job of in helping adoptive parents and the whole adoption process, that would be very appreciated by the committee. It would help us to do our work.

As a quick note to the committee members, on your orders of the day we do have committee business at the end of the day. However, Mr. Lessard will not be moving that motion. We will go right through until the end of the meeting, as per usual, and we'll deal with any motion at another time.

We will begin today. We have four witnesses. We have Jane Blannin-Bruleigh, who is a social worker. As well, we have Jennifer Haire, Kim Jones, and Sandy Kowalko.

Again, ladies, we thank you all for being here. I'd ask that each of you stay within a five-minute to seven-minute timeframe. If you keep an eye on me, I'll let you know when your time is up. We are pretty strict on time around here because we have such a short amount of it.

I will begin with Ms. Jones.

Thank you.

Ms. Kim Jones (As an Individual): Good morning

My name is Kim Jones and I live in London, Ontario. I am the proud mother of two amazing, beautiful, little girls, ages nine and seven, and both of them were adopted from China.

Adoption and adoption issues are subjects I'm very passionate about. I've been volunteering my time helping couples and families navigate the adoption and post-adoption system for the past six years. I'm the post-adoption coordinator for the Children's Bridge China program in southwestern Ontario, and an Ontario parent liaison for the Adoption Council of Canada.

In 2004 I began, and have continued to run, a monthly support group for parents who have adopted. I see the concerns, issues, and challenges that adoptive Canadian families are facing. Many adopted children cope with a range of issues, including grief, loss, anger, post-traumatic stress disorder, trauma, and learning disabilities. They come from situations of abuse and neglect and often the loss of their culture and their identity.

The families who adopt these children continue to need help advocating for them in the school system in coping with the behaviours that many of these issues generate. Pre-adoption training and post-adoption support and continued training are critical to ensuring that adoptions succeed and that children flourish in their adoptive families.

In January 2008 the Ontario ministry did make PRIDE training—that is, Parent Resources for Information, Development, and Education—mandatory for all prospective adoptive couples. This training is to be completed in order to get a home study approval and to proceed with an adoption plan. The federal government should look into this program and consider making it available right across Canada. PRIDE training is designed to teach knowledge and skills to help individuals become better foster and adoptive parents.

I am a parent co-trainer involved with this training in London. I believe that this education is helping couples enter into their adoption journey with eyes wide open.

Education is power, and now more than ever, these soon-to-be parents are more prepared to anticipate, prevent, and seek assistance for any bumps that might arise. The training is a wonderful opportunity for couples to network with others who are also adopting. Because there are no organized post-adoption services provided in Canada, these couples really lean on and learn from one another through the adoption process and definitely post-adoption. I am constantly trying to connect people who have had like experiences, so that they can turn to one another for help and advice when it is needed.

The downside of the training is that the model for PRIDE was developed in the United States. There's absolutely no Canadian content in it. Our participants who are taking the PRIDE training constantly ask us why all the film clips are about U.S. adoption services. They wonder why Canada has not made its own training model. We need an updated Canadian version of PRIDE training that contains a training manual chock full of Canadian post-adoption resources available right across the country.

The biggest major obstacle facing parents is where to find help. Post-adoption services are hard to find in Canada. Unlike the United States, most child welfare agencies do not provide formal post-adoption support. Parents themselves typically bear the burden of locating services. It would be really great if there were a centralized place or a government website where families could go for information or support when issues arise.

Grief and loss issues are part of adoption. Children with a background of abandonment, neglect, and abuse have challenges to overcome. And yet families who adopt these children are the least likely to confide in their social workers when problems arise. Adoptive parents may sometimes fear being judged too harshly or feel like they've failed as parents. Rather than seeking help, they continue to struggle on their own.

I have had couples tell me that others have come up to them and made comments to them like "What did you expect?" or "This was somebody else's problem that you took on". If there were a specific place families knew where they could go to find resources and qualified therapists who deal with adoption issues in their area, it would be a huge step forward in this country.

I know parents who have asked family doctors questions about behaviours and health issues exhibited by their adopted children, only to feel that their concerns were marginalized. Fetal alcohol spectrum disorder, or FASD, is a common problem for families with adopted children to cope with. Many families struggle with their child's unexplained behaviours for years before they finally receive a diagnosis of FASD.

Attachment issues are a real concern with children who are not adopted as infants. More research on attachment is needed in Canada. Pediatricians and other professionals need to be educated about the differences between attachment formation in adopted versus non-adopted children.

● (0855)

I have seen families who have really struggled and cannot understand why their child is acting out. Struggling families need

help. Perhaps the funding of future training for parent leaders to run pre- and post-adoption support groups should be considered.

The Adoption Council of Canada offered training for parents a couple of years ago. The training was educational and informative. Most importantly, it brought parents together to brainstorm about problems that many of us have experienced. We identified some of the issues, and we discussed ways to assist families facing some real challenges.

This sort of training is invaluable to parents who are trying to help make a difference by setting up support groups in their communities. I know I really appreciated the support and the educational materials that I received. I frequently refer to the training tool kit that I received at that training, and I share it with others.

We need more parent-to-parent leadership and mentorship in this country. Unfortunately, the one-time funding that the ACC received to help launch this program was not enough for them to continue with their efforts right across Canada.

Parent support groups and parent education, on issues of critical importance to children and youth, are vital to ensuring that these permanent placements continue and that the children do not end up returning to the child welfare system.

The Chair: Ms. Jones, you just have a few seconds left, just to let you know.

Thank you.

Ms. Kim Jones: Okay.

Another big step we could take is to consider extending the EI for adoptive parents. We realize that we did not physically give birth, but there are other considerations to take into our situation. I don't think you realize how important attachment is to brain development. Attachment can cause developmental delays, as well.

Because many of our adopted children have not had a stable background, they've either come out of a....

Okay, thank you.

The Chair: Just finish up that sentence.

Ms. Kim Jones: Okay.

They've come out of an institution or they've been in foster care or they've been bounced back and forth from foster care to their parents, so they have not had a chance to form a strong attachment. I think the additional time, the 15 weeks for adoptive parents, if they could stay home with these children.... Time does heal wounds. The 15 weeks would be a big step forward in helping some of these families form that attachment.

The Chair: Thank you so much.

Ms. Haire, would you like to give us your presentation, please?

Ms. Jennifer Haire (As an Individual): Thank you for giving me the opportunity to be here today to speak to you.

I'm an adoptive parent, and I'm also a professional librarian, responsible for aboriginal studies at the University of Ottawa.

I've been involved in the adoption community for 18 years. I have two adopted boys. One was adopted as a newborn. It was a kinship adoption, meaning within family. My second was an international adoption, which was a two-year nightmare, that I completed myself. I went to Guatemala and completed that with a Guatemalan friend.

With my second son, I definitely needed recovery time. When I returned from Guatemala, I had to return to work the very next day because of the way the benefits worked. I suspected that my older son had attachment difficulties and I realized that I was actually his fourth caregiver. There were no post-adoption support services on either the Quebec or Ontario side. This was in 1994.

Adoptive parents, then and now, are reluctant to approach social services for help for fear of being labelled as unfit parents and also of losing their children to the system. This is a real concern.

I was fortunate to find a supportive and sympathetic psychologist at CHEO, the Children's Hospital of Eastern Ontario, here in Ottawa. However, I had to go to the U.S. There were no attachment specialists here. There was no attachment help. As a librarian, at least I had access to information resources. But I went to the U.S and sought help from Dr. Dan Hughes, a psychologist specializing in attachment issues.

In terms of support, I received UI support. I'll just go over that very briefly, because you do have the notes and statistics. I figured it would be easier to refer to the notes.

My employer gave me whatever benefits were the equivalent to a biological parent, so I had 12 weeks. Then when I returned from Guatemala, I had to immediately return to work and work for another 20 weeks so I could get a second leave. For the second leave I was allowed an additional five weeks, because if a child over six months had physical, mental, or emotional problems at that point, you were allowed to have another five weeks. So I had another five weeks.

At that point I had to take a three-day-a-week workload. I could not properly support these children and help them with all their needs working full-time. I neglected to mention that both of these children came within a three-and-a-half-month period, so you can imagine the challenges.

You also asked if I received federal benefits. I received the Canada child tax benefit for both children.

What I really want to focus on are my recommendations for awareness and training. I've given you very specific examples of people I think we should bring to Canada as support for the post-adoption support services. That's my main concern here.

I suggest that the Mental Health Commission of Canada, that newly formed commission, and the Public Health Agency of Canada create awareness of these issues by placing appropriate information on their sites—for example, a tab for adoption, and then under that attachment: grief, loss, and FASD.

I also highly recommend that the HRSDC fund a train-the-trainer program. The North American Council on Adoptable Children has already established this program. They would like to bring it to Canada. It's already there. It would be training adoptive parents who have a lot of experience, such as myself, to then make presentations to the mental health community and mental health professionals.

It's so important to get the message out that there needs to be awareness. I'm including not only mental health professionals, I'm including lawyers and judges. I think that's really very important. That program could also be appropriate for training teachers in the public schools as well. We really need that.

Parent volunteers also have a limit to the amount of time they can give. If there were some remuneration, that would really help. We all want to help one another, but we all are limited in time and have to make a living.

● (0900)

I suggest that the Mental Health Commission of Canada, the Public Health Agency of Canada, or HRSDC sponsor speakers who are specialists in adoption and attachment. I've mentioned specific ones in my notes. I know them all, I've heard them all, and they're excellent. The training they offer is also at a very high level. It is appropriate for curriculum in our medical schools, in our social work schools, for any type of professional training like that, and for judges too. It's of that high a calibre. I've taken it and I really suggest that. I think that's really important.

I also suggest that a national public awareness public health campaign be created and funding provided for a public service announcement and film. We had started on that last year as part of the Adoption Council of Canada, but we weren't able to go forward. We had already identified a filmmaker who has experience in the field of adoption and has continued to work and do research on this—and I've helped her with it—on her own. So I've also mentioned her name and contact information there.

Coming from the academic community, I think the Social Sciences and Humanities Research Council of Canada and other academic funding agencies should be encouraged to fund research on adoptee FASD. There is one professor at the University of Ottawa who does research in this area and is really interested in this. I've also provided you with another link of an agency that I recently found regarding that.

The final point I want to make is that the aboriginal community should be encouraged to participate. I noticed that Cindy Blackstock's name had already come up last Thursday. She's from First Nations Child and Family Caring Society of Canada, which supports aboriginal families dealing not only with adoption outside the aboriginal community but aboriginal families dealing with those issues within their own communities too, especially with fetal alcohol syndrome.

Please feel free to contact me for more information or if you need more help with the research, because I'm a professional researcher. That's my profession.

Thank you very much.

• (0905)

The Chair: Thank you very much. That was excellent.

So far, both have been very good. We're looking forward to the next two presentations as well.

We will now go to Ms. Blannin-Bruleigh, please.

Ms. Jane Blannin-Bruleigh (Social Worker, As an Individual): Thank you.

Adoption has always been a part of my life. I was adopted as an infant in Victoria, in a traditional adoption. I came home from the hospital at 11 days of age. As well as being an adult adoptee, I'm an adoptive parent. I also have an undergraduate degree in child development, and a graduate degree in social work.

I have been a board member of Open Arms International Adoption, which facilitates adoptions from China. I did that for several years. I founded a local playgroup for children who had been adopted in our community in Belleville. I'm also a member of the planning committee of our annual Jane Brown workshop, which is a playshop program for children in workshops and parents in separate workshops. We meet once a year, usually in the fall.

If you think about traditional closed adoption, a good analogy would be marriage. Pretend that on the day you get married, your future spouse suddenly announces to you, "Now that we are married, you don't need to have a relationship with anybody in your family, because my family is going to meet all your needs. You don't need to have any contact with anyone in your family, and this is going to be really good for you." Those are some of the reasons that children who are adopted have so many problems surrounding losing their original family—not that some of us don't have relatives that we'd rather lose, if we all come from normal families.

I have a biological sister, born four years after me, who was also placed for adoption with a different family. We met for the first time through the adoption reunion registry in British Columbia, which has made much more progress than the registry in Ontario, where I now live. My sister is a medical doctor specializing in geriatrics. At the time we met, I was working on the geriatric psychiatry team as their social worker. When we met, we wondered whether this was a coincidence or genetics. I'll let you think about that.

I'm going to tell you a bit about our first daughter's adoption from China. There aren't as many international adoptions happening now, but Singshan was two and a half years old at the time of her adoption, and I think that her story and her circumstances are very similar to children who have been taken into care in Canada because of neglect and abuse.

When I met Singshan in 1998, she was two and a half years old. She wore size-12 clothes, she weighed 18 pounds, she had no language—Chinese or English—and she had never met a white person. From her perspective, I didn't look right, I didn't sound right, and I didn't smell right. I was then 100% responsible for this child. Both of us agreed that we were totally overwhelmed. We didn't need language to express that we were totally overwhelmed.

When you talk about adopting a toddler or an older child, a good analogy is dance. When you learn to dance with an infant, you begin together and you learn together. But when you start with a toddler, you both already have your dance established. If you have a strong-willed toddler—and both of my daughters were strong-willed toddlers—you each know how to dance, and it's different, and you step on each other's feet, and you tug each other back and forth, and you try to figure out how to do this together. It's an incredibly frustrating process for both of you, but eventually you learn to work together. This takes a lot of time.

When I returned from China, my husband and I decided it was obvious that our daughter needed more time. Instead of the brief weeks that were available, we decided that I would be at home full-time, and we lived on one income. My husband is a United Church minister, and they do not make good money. We made a lot of choices and went through a lot of economic challenges, but we believed it was really important. So if you take this "little waif", as we referred to her at the very beginning, and fast-forward to now, you could see that she has just entered grade nine. She's in the arts program of her high school, which she auditioned for. She's a confident, bright student, who spent a year in a gifted program. She's a musician and a dancer, and has come to be this amazing person. There are days when I wonder where this beautiful child came from, and then there are other days when she's a normal teenager and I wonder *where* this child came from.

• (0910)

The two things that I think went into this was Singshan had this huge potential within her. It was there, it needed to be nurtured, and the time we had together at the beginning was to build a strong foundation for nurturing. That was critical for her.

The other piece was that we had a lot of friends and family who supported and encouraged us. You cannot parent an adoptive child with high needs on your own. You need help, sometimes professional help, but you need a community of people to encourage you and to encourage your child.

With our second adoption, our child was in much better shape physically. However, she had been with an amazing foster mother and she was devastated at the loss of her foster mother, which I witnessed, and I knew from that point that this was going to be really difficult. This little girl in foster care had been the princess of her family, and her needs were probably met in ten seconds or less. And I obviously was not dancing well with her, because I was unable to meet her needs at the beginning and she certainly let me know that. So we worked really hard to come together.

I asked Donnshai what I should tell you about adoption, and she said please tell them that

Sometimes adoption is sad and hard work and sometimes it is good. The bad part is the bullies who make fun of you for being different. The sad part is missing your first parents. The good part is that it doesn't matter if you are adopted, because you have a heart inside just like everybody else and on the inside we are all the same.

In closing, to make recommendations, I believe that all families would benefit from having a year-long maternity leave, family leave, and that if adoptive families had an adoption leave instead of maternity leave, it would allow us to take the full year. Our family chose to do that, but we put a lot of economic challenges in our way because of that.

We also believe there is a need for a better-informed picture of adoption across Canada so we know what's going on, what's working, what's getting older children placed. I wanted to close with a quote from an orphanage director in Haiti:

I have never heard a child talk about wanting to spend their entire life in an orphanage, but I cannot even begin to count how many times I have heard children dream and yearn for the possibility of a permanent family.

Thank you.

The Chair: Thank you very much.

We'll now go to Ms. Kowalko, please.

Ms. Sandi Kowalko (As an Individual): I'm wondering if I could pass my family picture around to the committee.

The Chair: Sure.

Ms. Sandi Kowalko: Thank you for having me.

I also am an adopted child, one who was very celebrated in my growing-up experience. Frankly, I was so celebrated that I felt sorry for birth children. That is actually the truth. I remember that my mom would tell me how the rest of the families did not get a choice about the children they had, and they did have a choice. That was the premise in which I grew up. I'm very thankful for that.

I am also an adoptive parent. And I'm a foster parent, and I have been for 18 years.

We have two biological sons.

Adoption was a first choice for us. We had no difficulty having children, but we knew that adoption was going to be part of our family picture. Before we were even married we discussed adoption being part of our family, regardless of the ability to have children of our own.

We started as foster parents. Our daughter, which is the singled-out picture you have, came to us when she was 13 months old. She had 19 fractures. She had shaken baby syndrome and suffered from failure to thrive. We dealt with her situation closely, with medical and assessment teams, not knowing what the future would hold for her. The court process would take four years until she was actually available for adoption. We were madly in love with her the first time we met her, so we walked through her journey with her and then chose to adopt her.

Over the years, we have fostered 19 children. And our heart is for Canada's children.

We adopted her. She has some issues with learning disabilities. The post-adoption supports we have had do not meet the needs she has. We have paid for private school for her, and that is not covered through adoption. The reason we chose the school we did was that they provided specific supports for her. Aside from that, post-adoption pays for tutoring. We've had assessments done so that we

can raise her up to her abilities. Just last night she told me that she received an award.

She is now in a public high school. We've taught her strategies so that she can be her own best advocate. She has been on the websites looking at the colleges she is going to go to. She's dreaming for the future. We are so thankful that we've had the opportunity to raise her and give her those privileges.

We did not receive any time off, because we received her through foster care.

The other single picture we have is of a little fellow we received when he was two. We will adopt him. He has fetal alcohol syndrome, and he came to us with two subdural brain hemorrhages from injuries that occurred in care. He has quite severe brain damage. We are using all the money we receive from foster care to provide the services he needs. We are paying for private school. We are paying for recreational activities that he excels at, because his academic disabilities are limiting. The system pays for assessments that are extremely expensive so that we can understand how to raise him and parent him in the way that he can best move into the future. We've gone to classes and learned that you can actually and prayerfully move forward in raising children with fetal alcohol syndrome.

I have also placed children into adoptive homes and have worked with the families that have adopted children out of my home.

As a government, the need that I see you can meet is giving the full parental leave that other families have. Families that bring children home that are adopted have, at the very least, attachment issues. The children and the mothers and fathers need those weeks to bond with their children.

● (0915)

The children in Canada, if they are children who have been taken from their families because of neglect or abuse, often have challenges that are daunting. If we support our families right from the beginning when they have been willing to take children into their home, and we give them the time they need to bond and build relationships with their children, that will be the best way to ensure family preservation.

You provide a tax benefit for families. It's under the "compassionate care" section. I would love to see that extended, to give families the full benefit of the opportunity for attachment, because families often need counselling and a variety of things. They may need medical attention, and there are all kinds of things that they need to be available for their children. Then also at another time, if crises occur—because so many of our children are affected with fetal alcohol issues and neglect issues, which come into play later in life—there could be a tax benefit for families that would allow them potentially as much as a year to have EI so they could take the time to preserve their family and meet the needs of their children.

I could go on and on.

Thank you.

● (0920)

The Chair: We will have an opportunity to ask you questions, so maybe that will give you a chance to give us the rest of your suggestions.

Ms. Sandi Kowalko: Thank you.

The Chair: Thank you all so much. That was really good.

We're going to begin with our first round of questions. Just so the witnesses are aware, every one of the members has a certain amount of time in which to ask you the question and hear the answer. In this case, each side will have five minutes to ask a question, and then you'll provide the answer. So we'll be on a time limit as well.

We'll begin with the Liberals, with Madam Folco, please.

Ms. Raymonde Folco (Laval—Les Îles, Lib.): Thank you, Chair.

Ladies, I have nothing to say except that I am absolutely overwhelmed by what I just heard from all four of you. What can we say except that it's wonderful, particularly in the case of those of you who have actually lived adoption as adopted children and now want to give back. This is just wonderful. In the face of so much adversity—I'm listening to Madam Kowalko and the other ladies as well—and so many problems, you've developed the flexibility and the pragmatism and everything else to accept what is going on in the children, and yet bring the children to another level.

To say congratulations is such a weak, paltry word in the face of what you have lived through and what some of you are still living through in an everyday situation.

Really, Madam Kowalko, you didn't really need to bring a picture to us. The portrait all four of you have drawn of the difficulties but I think also of the joy you have had and the joy you have certainly brought to those children really speaks for itself. So thank you very much for all the work you've done.

We sit in Parliament, and we try to think about legislation, but in the end we look at you and people like you who have done so much work. It makes me—I'll speak for myself—feel small in the face of what you have lived through and have chosen to live through every single day. So all I can say is thank you.

But I'm also going to go back to my job as a legislator. You want Canadians to have a better-informed idea of what adoption is about and the problems that you would meet through adoption, and of course I come to the rule of the federal government. Many of the things you have suggested seem to my mind to be in the realm of the provincial government's responsibility, but quite a lot of them also should be taken on in a very constitutional way by the federal government.

Madam Haire, several of your recommendations touched the federal government and agencies of the federal government in a very concrete way. But I'd like to hear from everyone. When you've come into contact with the federal government over adoption, what has been lacking? Be specific. What would you like to see to fill in this lack, to make it better for those people who are going to be coming after you? Be as specific as you possibly can. My question is addressed not to one person but to all four of you.

Ms. Sandi Kowalko: I would like the federal government to have an umbrella that would expand on tax benefits specific for families with adoption, because assessments, medical attention, therapy, and educational expenses are daunting for families. That at least would be a tax benefit.

I don't believe that throwing money at families at the front end is a benefit. I have seen families come forward because I have dealt with some interprovincial adoptions, and different provinces provide more money for adoptive families than others. I literally had a family that said "We want to quit our jobs, so we're going to adopt some kids and raise kids". That's not what we're looking for.

We're looking for families that are faithful with the children they have, pursuing the needs that they have. They could have a benefit or reimbursement for the services they provide for their children, to encourage them to pursue all that's available to them, and at the government level they would meet that need.

• (0925)

The Chair: Ms. Blannin-Bruleigh, you have about 30 seconds.

Ms. Jane Blannin-Bruleigh: One of things we're lacking is that we don't have a national picture of how many children are in care across this country, who is placing older children well, which provinces do a better job of that and which provinces don't.

Ms. Raymonde Folco: Some kind of comparative study.

Ms. Jane Blannin-Bruleigh: In order to see what's happening right across the country, we could come up with some very good ideas from other places, but there isn't enough dialogue across the country.

The Chair: Thanks very much.

Ms. Raymonde Folco: By the way, you can use your answer time to answer my question too.

The Chair: Mr. Lessard.

[*Translation*]

Mr. Yves Lessard (Chambly—Borduas, BQ): Thank you, Madam Chair.

I would first like to thank you for being here. Your testimonies from this morning were remarkable. I feel very strongly about—

[*English*]

The Chair: Mr. Lessard, I'll just have you wait for a moment.

Do you all have your translation?

[*Translation*]

Mr. Yves Lessard: Will you stop the clock?

[*English*]

The Chair: For sure.

Mr. Jeff Watson (Essex, CPC): On a point of order, we should probably restart the time rather than start it, because they've lost the benefit of his original statement.

The Chair: Thank you very much, Mr. Watson, we'll do that. We'll restart the time.

Mr. Lessard, we'll begin again.

[Translation]

Mr. Yves Lessard: Thank you, Mr. Watson. That's very nice of you.

As I said earlier, your testimonies were remarkable. I am very concerned about this. In my opinion, we should view and treat all the children around the world as our own.

Ms. Haire said she noticed in 1994 that Ontario and Quebec had limited resources in support of adoption. I feel that progress has been made since. I believe you're aware that the jurisdiction issue comes into play as well. Ms. Folco pointed that out earlier. This morning, you made a series of recommendations on adoption. You specifically referred to a training manual, a website, resources, therapists, children's behaviour problems, leadership, mentorship, and attachment. These are areas where the provinces have to get involved.

I will be focusing more now on the measures you're proposing and that I think are under federal jurisdiction. One major measure is using employment insurance money to allow parental leave. We agree on that. We are going to study this proposal. As you must certainly know, both the adoption and the birth of a child allow for parental leave in Quebec.

You are proposing two other measures that I think deserve our attention. You're talking about the legal system and the training that could be provided to lawyers and judges who handle adoption cases in court. Could you expand on this?

My other question is for all of you.

In your own way, you each talked about national public awareness campaigns. Why? What should they cover? Given that your experience makes you experts in some ways, I would like to hear what you have to say about these two topics.

• (0930)

Ms. Jennifer Haire: I was talking about training for judges and lawyers because, in my opinion, they are not necessarily aware of what we have talked about today. So it is important that they get the proper training. They understand the legal adoption process, but that's it. They don't know anything else about it. When I talked about training, I was specifically referring to the people from the United States because I think it is important that people in all professions be aware.

Two or three years ago, NACAC held a conference here in Ottawa. I advertised the event to all the lawyers and judges in Quebec and Ontario, as well as to all learning institutions, both English-speaking and French-speaking. Yet almost no one came. That's really sad.

This is related to the suggestion I made with respect to the Mental Health Commission of Canada raising awareness. To my knowledge, this commission is new. In general, when you talk about a site like the Mental Health Commission of Canada, adoption is included in that. It is important. When we talk about attachment—and I'm not only referring to adopted children—

[English]

we're talking about loss, grief...

[Translation]

This all has to do with adoption, but also with the public at large. I am aware that there are provincial and federal jurisdictions, but we could still overcome that and establish links between the two.

[English]

The Chair: Thank you very much.

[Translation]

Mr. Yves Lessard: Madam Chair, I would also like to get an answer about the awareness campaigns. We could come back to that.

Ms. Jennifer Haire: Certainly.

[English]

The Chair: Mr. Martin.

Mr. Tony Martin (Sault Ste. Marie, NDP): Like everybody else, I thank you for your stories this morning. It certainly gives me hope for our children and, because of that, for our future.

Having said that, there are lots of challenges. Our work is to figure out what we, as the federal government, might do to facilitate and make that easier.

I heard a number of you speak of attachment issues and the need for more time with your children to get to know them, and to learn how to dance together more cohesively. You mentioned the EI system and the actual benefits that would be helpful, which you don't get but natural parents do. But I also heard, underneath that, a couple of things. One is that if you had more resources, you could do a lot more.

Each of you talked about finding resources to help with some of the challenges of the children you have taken into your families. It goes back, for me, to a study that we just finished on poverty and what we might put in place by way of national programs to support families. One of them was a very strong recommendation for a national child care program. Would that be helpful to adoptive parents?

Ms. Kim Jones: At this point, any assistance parents could get would be greatly appreciated, because we don't have the supports. We do not have a system set up here in Canada, and it varies widely provincially. I live in Ontario. In Ontario we are really lacking versus Calgary. When she said today she was from Calgary, I said I knew people who travel from Ontario to Alberta to get training, especially on FASD, because we just do not have that available here.

If we did have the extra time with our children initially... And attachment is all about brain development. If a child is not capable of attaching, there are developmental delays. If initially parents had the funding to stay home with the kids for that first year, it would lay the groundwork for them maybe to not have problems down the line.

If they had that initial attachment, you might be able to identify some of the developmental delays, get help, be home to work with the child, and take care of some of these issues before years later, when you have problems where children are acting out. You hear about promiscuity, girls that haven't been able to attach early. If we had that extra time early and there were some sort of a benefit or a fund...

● (0935)

Mr. Tony Martin: We also recommended that the national child tax benefit be increased to at least \$5,000 for each child. That would give parents and families more money to get the services they need.

I was specifically referring to a child care program where early learning would be a huge component. It speaks to that motor development and cognitive development, and those kinds of things where you actually have professionals providing a quality of care that speaks to some of that. Perhaps a kind of growth that may not be possible even at home, where you need the assistance and expertise and knowledge of somebody who knows about early learning and development—is that something that...?

Ms. Jennifer Haire: I was fortunate that when I had to return to work right away, I had a caregiver just down the road who was a natural. She worked with my kids so well and really helped with the attachment of my older son. She was my care provider. I certainly think there is room for what you're talking about. It is really important.

You mentioned professionals. Are you talking about day care professionals, or other professionals as well?

Mr. Tony Martin: I'm talking about a national child care program based on the principles that those out there who know more about this than I do.... Early learning is certainly an important part of that, and quality care, as opposed to just babysitting.

Ms. Jennifer Haire: Right.

Mr. Tony Martin: That would be it.

Am I done?

The Chair: You are done. I'm sorry. The five minutes go very quickly.

Mr. Watson.

Mr. Jeff Watson: Thank you, Madam Chair. And thank you to our witnesses for appearing.

We appreciate, of course, your very compelling testimony today. I think your personal experiences lend some very valuable guidance to this committee in terms of the successes or challenges you face in your own journey.

I want to start for just a quick moment on EI, which has been the focus of a lot of presentations before this committee from other panels before you. I presume there are two ways to look at this. We've had some recommend that we raise the number of parental weeks to 50 weeks, which presumably would mean there would still be a maternity benefit payable on top of that—parental being for care and attachment issues with children. It would have to be available to both adoptive and biological.

Or there's the other way, which is we have parental at 35 weeks, as it exists now, and a maternity benefit for 15 weeks, and some sort of a transition leave for adoptive parents that would be equivalent to maternity, which would equalize everybody out at 50 weeks. Presumably, though, you'd have to lay the intellectual rationale for why there should be a transition leave that's not focused around the attachment of children. That would be parental.

My question is you've spoken a lot about the attachment issues that are related to children. Ms. Kowalko, we'll start with you and go down the panel this way. Talk about some of the psychological or other challenges for mothers who adopt children and why the additional time is necessary for you, why a transition leave would be important for your own benefit—things that may be specific to challenges that adoptive moms face that biological mothers might not face.

● (0940)

Ms. Sandi Kowalko: Typically, when children come into care—I was a foster parent first—children are not attached to you. They don't even know who you are. You're a complete stranger. When they come, you have to work through attachment issues.

With that, for an adoptive mother, I have seen children into adoptive situations and the children have left me and gone to a new mom. Initially it's all exciting and everything's wonderful, and then the moms, when they realize the child is missing me and I've been able to transition children into their home, feel a sense of rejection. So I have had to help moms get help because they're embarrassed in a way that here they dreamed of this baby or this child for years and then the child came and rejected them.

Because mom is the one at home. Dad comes home.... It's not always this way, but dad comes home, plays with the kids, it's all fun and everything's wonderful. Mom's there all day long, and the child is crying and upset and behavioural after the honeymoon period is over because they're missing what they once had.

So there are times that moms need to have support to get the help they need, a place to go to say "This isn't what I signed up for. This isn't how I expected it to be." Time heals those issues.

There's a family I have worked with for years, and I had to hook her into an attachment specialist so that she would bond with her child. So I have worked with adoptive families when they've received their children, and the attachment issues have been big and secret.

Mr. Jeff Watson: Do any of the other panellists want to weigh in on some of the issues?

Ms. Jennifer Haire: I agree 100% with what Sandi has said, for sure.

Ms. Kim Jones: Not only attachment issues, but there are also sleep issues with children who are adopted because of the trauma, grief, transition. They had a past before they came to our house, and night terrors are very common in adopted children. They wake up in the middle of the night crying, screaming, flailing about, uncontrollable. It can go on for an hour, two hours sometimes with these children. There's no calming them down. So children are sleep-deprived, but parents are as well.

Ms. Jane Blannin-Bruleigh: Just to add to that, our older daughter, who came at two and a half.... In order to attach she needed an adult to be there to attach with. So attachment.... Very much my focus was on what she needed to do, what we needed to do together, because she had all these developmental things to catch up with. She had serious night terrors, and they started about six weeks after she arrived. For ten months she never slept through the night. She would wake up screaming every single night. So there's no way I could have been working at a job at that point.

Also, when I look at all the enrichment she needed, that was my full-time job.

The Chair: Thank you, Mr. Watson. I'm sorry, that's your time.

I actually just have a very brief question, and then we'll dismiss these witnesses. We have four more coming in.

Ms. Jones, I think you referred to a program by the Adoption Council of Canada. You said it went for a short time and then the funding ran out. Can you just briefly tell us again what the program was, and are you aware if it was federal funding?

Ms. Kim Jones: It was federal funding, yes. It was training we came to. It was in Toronto. Parent leaders from across Canada were invited to come and attend. It was two days of very extensive training, networking, how can we help our families so that we can go back into our communities and help these families.

Volunteers across Canada are the pulse of post-adoption support right now. We're really all that we have. This training was really beneficial for us.

The Chair: Okay, good. I think it's good to know, and we should look into that a little more to see what that federal training program was and what it fell under, because there might have been some supports previously that maybe could be provided now at the federal level.

All right. I'm sorry we don't have time for another round of questions, but thank you so much. I think we all got a very good picture of what some of your experiences were and ways that hopefully we can help as a federal government. So thank you again.

I will suspend for just one minute and we'll have a change of witnesses.

• _____ (Pause) _____

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• (0945)

The Chair: Order. I'll just wait for the witnesses to take their seats and then we'll be ready to begin.

We're very pleased to have with us, for the second hour of our committee, Julia Alarie, Tracy Clemenger, Wesley Moore, and Elspeth Ross. Thank you all for being here.

If you were here for the first hour, you heard that each one of you would have about five to seven minutes to do a presentation. If you watch me, I'll let you know when you're getting to the end. We are pretty strict on our time requirements.

We look forward to hearing you.

We are really trying to stay focused on the federal support measures that can be provided to adoptive parents, so we would just ask all of you to try to stay in that purview, while at the same time letting us know what your experiences are and what the effect has been on you and your family.

We will begin with Mr. Moore, please.

• (0950)

Mr. Wesley Moore (As an Individual): Good morning. *Bonjour, mesdames et messieurs.*

First of all, I want to commend the committee for undertaking this study. As an adoptive parent, it's very heartening to see our Parliament and parliamentarians looking at such an important issue that affects, literally, the lives of thousands of Canadians, thousands of families. So thank you very much. I really appreciate it.

A quick story. My wife and I, in 2008, felt that we were called to adopt, not because of fertility issues, but we just felt it was something we were called to do. So we set out and began to research international adoptions. We researched Geneva Convention-compliant countries and adoption agencies that aligned with our philosophies, and as a result we decided to adopt with Mission of Tears, an organization based out of Toronto. In fall 2008 we enrolled with Mission of Tears and decided to adopt from South Africa.

To say that the adoption process is lengthy, intentional, and intrusive is an understatement. Most of it is provincially regulated, as you're all well aware, but it's long. It's a very intentional process, and it's, as I said, very intrusive.

We attended the PRIDE training that's mandated by the Ontario government—the Parent Resources for Information, Development, and Education program—decided on a homestudy, or an adoption practitioner, and completed our financial, psychological, and personal child welfare and criminal background checks just to make sure that we were good people and apt to kindly take care of a child.

In the summer 2009 we applied for phase one of the citizenship requirements, which we were told was going to take about seven weeks and which ended up taking about 12 weeks to confirm my wife's and my citizenship. Then we attended in Toronto cultural sensitivity training about raising an African child in a predominantly white family. In fall 2009 we received our phase one approvals as well as our Ontario provincial ministry approvals.

In October 2009 we received our file for our son, Sivuyile Dlamini, and I have to say that was one of the most profound and amazing moments of our lives, where in our hand we held the file of our soon-to-be son. Sivuyile, at the time, was just about three years old, so that was last October.

On November 2 we departed Ottawa and journeyed down to South Africa, to Durban. We met him on the fourth, in the morning, spent the first day with him, and then on November 5 we went to court and the court in South Africa declared us his parents. It was a moment I'll never forget—equivalent with the moment when we just had a biological child in November. Yes—one of those moments you'll never forget.

From November 6 to November 28 we awaited phase two of his citizenship, under the Bill C-14 process, and then also his temporary Canadian passport. On November 28 he flew home with his Canadian passport in hand, a little white temporary passport, and on the 29th he arrived home to grandparents who were eagerly awaiting his return.

The Chair: Do you want to pass those around the room?

Mr. Wesley Moore: Sure, I'd be happy to. Actually I have more photos, so I'd be happy to.

Very quickly, in terms of federal support, what I would advocate is that internationally adopted children should have identical legal standing as biological or domestically adopted children.

There are three things that I would hope to propose and recommend to you today. One is to increase the international adoption tax credit to a minimum of \$20,000 from the current \$10,000. This would more reflect the true cost of international adoption. They range from \$20,000 to \$50,000, depending on which country you're adopting from and which province you're adopting from.

Ensure that internationally adopted children have the same ability to pass on their Canadian citizenship as biological and domestically adopted children. For instance, we have now both an adopted child and a biological child. Should my biological child go abroad and have their own child or adopt, that child retains Canadian citizenship, whereas if my adopted child goes abroad, he can't pass on his citizenship. As a parent of both, I find it perplexing and concerning.

Third is—I know you've all heard it before—the extension of the EI benefits. As I heard notably before from Mr. Watson, actually I would advocate, instead of extending the parental benefits, that there be a certain set-aside for adoptive parents rather than extending the parental, so make them two separate....

In terms of how this goes, establishing fairness among Canadian parents and children, recognizing the true costs of international

adoption to the average family.... I would just as an aside say that the costs of international adoption are prohibitive for a lot of average—as they were termed in the last U.S. election—Joe the plumber families. International adoptions aren't affordable for people. They can't do it, which is very unfortunate.

Citizenship and EI benefits should not be dependent on the location of your child's birth. International adoption is a means of addressing Canada's demographic challenges while ensuring Canadians are brought up in Canadian values.

Thank you very much for your time. I look forward to your questions.

•(0955)

The Chair: Thank you very much.

We'll now go to Ms. Alarie, please.

Ms. Julia Alarie (As an Individual): I'd also like to thank this committee for taking time to study support measures for adoptive parents.

My partner and I, both women, were legally married in 2005. Adoption was and remains the only way we could simultaneously be conferred equal parental rights in the creation of our family.

In 2006 we initiated a child-specific adoption in Ontario through Ottawa's Children's Aid Society for a pair of siblings, ages nine and eleven. Our children were placed with us in February 2007 and their adoption was finalized one year later.

My partner is due to give birth in April to a biological child that we conceived through a home insemination using semen from a known donor. I raise this because after she is born I will be pursuing a second parent adoption in order to be legally acknowledged as our daughter's parent.

My partner also was trained through the Adoption Council of Canada's program, and we co-founded the only post-adoption support group for LGBTQ families in Ottawa. Despite the loss of funding, we continue to run that support as volunteers in the community.

When our current children came to live with us, one had significant behavioural needs that eventually required placement in a year-long behavioural and academic intervention program. Both required intensive support and learning and were barely literate, despite being extremely intelligent. My son could add six rows of seven-digit numbers in his head, but at nine years old had not learned yet how to read the word "dog".

Each received counselling to work through the instability, hurt, profound loss, and rejection they had experienced in their short lives. And when asked independently what they both needed to be happy in our family, they each used the word "security", not "love". They just wanted to know we weren't going—

The Chair: Could you just slow down slightly so the translators can keep up with you? Thank you.

Ms. Julia Alarie: Sure, no problem.

When asked independently about what they needed to be happy in our family, they each used the word “security”. They didn't want love, they just wanted to know we weren't going to return them. Our focus, then, was on helping them build lasting attachments within our family and learn how to foster healthy, nurturing relationships with other people. Four years later, they are thriving, they are loved, they are secure, and my son read his first chapter book last week.

The support we received from the federal government was limited to the employment insurance benefits that enabled my partner to take a 32-week parental leave at the time of adoption. We do not believe we received the same supports as those available to biological parents, which I will go on to explain. To that question, I've had much time to consider it from the standpoint of an adoptive parent of older children as well as a member of the LGBTQ community.

I offer the following recommendations in response to the question.

First, broaden the federal tax credit for adoptive families. Canadians are currently able to claim the federal tax credit, but I would like the federal government to consider extending the list of eligible expenses allowed by the Canada Revenue Agency for the adoption credit to include reasonable and necessary expenses incurred by parents in obtaining post-adoption support services for older children, such as psychological counselling, court costs, and legal and administrative expenses related to second-parent adoptions.

My second recommendation is that the federal government intervene to fund post-adoption support services for adoptive parents. Once a child is placed under adoption, support at the provincial level stops, as these services fall outside the mandates of children's aid societies. There must be funding to create services that will provide post-adoption support to adoptive parents and their adopted children to successfully transition into a family. Without these supports to families, adoptions are at risk of being disrupted early on and children are at risk of returning to public care. For older children this is especially dangerous, as their chances of adoption are diminished well before a disrupted placement. Of the three families our social worker was overseeing at the time our kids were placed with us, our adoption was the only one that was not disrupted.

My third recommendation is to expand the definition of “disability” and to broaden that definition under CRA guidelines to better encompass the needs of substance-exposed kids, as our publicly adopted children are significantly more at risk. As you've heard from many others, to amend the employment insurance benefits to increase the duration of parental leave, this will support, particularly in the adoption of older children, the significant coordination of services that's required as we transition them into a family and often into new schools and entirely new social circles. It will help parents who are coping with post-adoption depression; it will help cope with the sleeplessness you've heard of. My son, for example, did not sleep for the first two years he was with us, and it took a year before he was sleeping four hours through the night.

So our opportunities to nurture, attach to, and secure support for adopted children early on are critically important to their later

success. And I don't necessarily expect to personally have parity with a biological mother and employment benefits, but I do expect that my adopted children, regardless of age, have the same chances to be mothered or fathered, or simply parented in their first year with a family, as they would have experienced if not for the misfortunes of their circumstances.

My fifth recommendation is to eliminate the ability of provinces or territories to discriminate against LGBTQ parents and adoption and to enact legislation that stops any province or territory from refusing prospective adoptive parents for reasons of gender identity or sexual orientation. We must have national uniformity on this issue.

My last recommendation is that the federal government must intervene to resolve the challenges of interprovincial adoption. First, if a family is considered to be approved for adoption in one province, they should be able to move to a different province or territory without having to restart the entire process. The current process is an unnecessary waste of public resources and delays children in leaving care for adoption into permanent homes. Second, the federal government should establish a national databank to assist with interprovincial matching so that children can receive the best possible placements for their situation. This means that a child in one province could be adopted into a family in a different province or territory if that family were the best match. This is particularly relevant to provide permanency to children and youth who are marginalized within the foster care system, such as those who identify as LGBTQ, especially transgendered youth.

Thank you.

● (1000)

The Chair: Thank you very much, Ms. Alarie. You spoke quickly, but you got a lot of information out, and that was great.

We'll now go to Ms. Clemenger.

Last week I thought we had broken the record for the youngest witness because we had an 11-year-old witness. But I think today we actually have a new record-breaker, because we have Lauren with us.

Lauren, you're nine years old. Is that right?

Ms. Lauren Clemenger (As an Individual): Ten.

The Chair: Ten. You just had a birthday last week?

Ms. Lauren Clemenger: In October.

The Chair: Okay, so you're ten.

Well, welcome here. We're really happy to have you.

We will give Tracy and Lauren seven minutes, please.

Ms. Tracy Clemenger (As an Individual): Thank you.

Madame Chair, members of the committee, I want to thank you for inviting me. I am very excited to be here.

I have a vision for Canada's waiting children.

As background, hopefully you have in both official languages the first national magazine to tackle the issue. I co-wrote the cover story concerning Canada's 30,000 adoptable children. My comments are based on a more lengthy text with detailed recommendations, which I have already tabled with the clerk.

After years of investigation and talking with those working on children's welfare, I can say that those who are living the adoption journey are excited about this study—and yet at the same time, they aren't waiting for government to fix the big problems. My maxim is “No childhood can wait for the big problems to be fixed”. So part of my post-adoption supports project is voluntary in nature and includes mobilizing ordinary Canadians now, with the primary goal of filling some very basic gaps at ground zero in educational awareness and recruitment.

That being said, the government is not off the hook. Part of my post-adoption support activity has been in research as well. Public agencies, provincial commissioners, researchers, and those working in children's welfare will by and large admit a need for a national vision, a national study, and a national action plan coordinated at all levels of government. Indeed, the Senate has been calling for a national children's commissioner for three years now.

What I learned as a citizen, as an academic, as a researcher on Parliament Hill, and since becoming a mom is that when it comes to decision-making, it's not the quantity of information that matters but the quality. This is very important to Canada's 30,000 children and the thousands of other children in government care who are your constituents. But they are the voiceless constituents you have, dependent on others to empower them. My definition of being an adoptive mom is about the empowerment of all children, and not just my own. This is what I mean by the phrase “adoption-savvy parenting”.

Parenting at ground zero didn't mean simply the discovery of a complete vacuum of healthy resources and education, but also that there wasn't accurate national information on domestic adoption. I was shocked at what I found. I wanted to know if MPs were at least being briefed by the bureaucracy on simple questions. When I started my investigation there were an estimated 18,000 children waiting. In five years it has morphed into 30,000, and that is proportionately 260% higher than in the U.S. That is why those in the field use the language of “crisis”.

If you were given the file called adoption in Canada or child welfare in Canada, you would quickly learn there is no one place to go within the civil service to get simple questions answered about Canadian children. How many children are in government care? How many are in foster care? How many are available for adoption? How many boys are there, and how many girls?

To get national information, you would have to go to a fast-food chain restaurant. Most NGOs are relying on the Dave Thomas Foundation for Adoption to gain a national perspective on adoption in Canada, and they are not necessarily tracking post-adoption supports. This foundation is a laudable effort by its founder, and an adoptee, Dave Thomas, but it also tells us about how we are measuring up in our priorities and planning at a federal level.

Federal MPs or Canadians cannot obtain accurate national information because there are—and are you guys ready for this?—no national standards on how we describe a child or universality in that description. How a child is defined differs from province to province, as do the definitions of special needs and what is old—for starters.

There are no national standards on portability. It's been said many times that an adoptable child and an adopt-ready family face what some have called a “bureaucratic nightmare”, going from province to province, and even, in some cases, county to county.

There are no national standards for services. We have a piecemeal, patchwork quilt of regional agencies working independently and as hard as they can. From what I can tell, not all have new acts or commissioners, nor is there any consistent agreement in their action plans.

In terms of accessibility, a child at age 16 in one province or territory does not qualify for services granted to a child at age 18 in another province or territory. Without national standards, we create and condone an un-level playing field at ground zero for children.

In terms of administration and funding, there is no standard reporting of the total cost of keeping a child in care, and no estimate of the social and financial costs of the failure to provide stable and nurturing homes to children. Ask me sometime about my conversation with the Auditor General's office on this.

To help you understand just how fragmented the picture is, I decided to do an access-to-information experiment. We loved doing them when we were on the Hill. I asked your very own human resources committee for access to specific and relevant information from the HRSD briefing manual that is given to ministers when they assume their position. I asked them some simple questions. For the sake of time, ask me what happened.

● (1005)

I was then sent to Health Canada to get my simple questions answered. I went to six provinces. Some had the information, and the most disturbing response eventually came back from Alberta. Canada's most vulnerable children tell us a lot about how we are measuring up as a society. They tell us about unemployment, finance, dignity, human rights, citizenship and immigration, public services, poverty and homelessness, and the decline of parenting skills and education. They are the tip of the iceberg of a lot of social issues going on right now.

Canada's children are not one of Canada's top domestic priorities for information gathering. I believe we can do better. It's going to take all of us to get Canadian children home and to level the playing field for all kids.

Ms. Lauren Clemenger: My name is Lauren Clemenger. I am ten years old. I am adopted and I am proud of it.

The first time I heard negative things about adoption was in kindergarten. I didn't bother telling them I was adopted. I didn't feel like it, but I did feel sorry for them.

My sister came home when I was in grade three. The children asked the teacher at circle time what adoption was. Angus said he had adopted a turtle from the zoo in Georgia and someone else said it's about cleaning up ditches. My friend Camden said adoption was special and only about children. Everyone was so excited to meet Kate, so I finally told my friends I was adopted too. When the children asked the teacher to tell them which answer was correct, she said nothing. She didn't say that paying money to feed turtles was really called sponsorship and cleaning up ditches was about caring for the environment.

I did feel sad that day, because she didn't tell the truth. The kids said Camden and I didn't know anything about adoption. That's when the bullying started for both of us. From then on, we were supposedly the dumb ones about adoption and many other issues as well. I did have one friend ask my parents if they would adopt her. She's a latchkey kid. What I learned that day is that schools need healthy books explaining adoption.

• (1010)

The Chair: That was very good. Thank you so much, Lauren.

I don't know about the other members around this committee table, but it's a little hard to keep a dry eye today.

Thank you again. That was really good.

Ms. Ross.

Ms. Elspeth Ross (As an Individual): My name is Elspeth Ross. I am an adoptive parent and educator in adoption permanency and fetal alcohol spectrum disorder from Rockland, Ontario. My husband is here with me today. I speak to you for our family and many others about my family and work, what's wrong with adoption, the federal government's support for adoption, and citizenship and adoption: the two routes and deportation.

My husband and I adopted our children, who are Cree and Saulteaux, from Saskatchewan, the first one in 1981, when we lived in Aylmer, Quebec, the others in Ontario. They came at the ages of 19 months, three and a half years, and eleven years, and are now 31, 28, and 34. For the past five years we have been parenting our daughter's son, now age 12, in a kinship-care arrangement. All came with special needs. Our boys were affected by alcohol before birth. Our grandson suffers from trauma and anxiety, and keeps getting suspended from school. The boys are doing well. Both graduated from high school and one from college; both work seasonally and live together in our lower house. They are also connected to their birth families. I still take them to the doctor and help with food shopping, even though they are in their thirties.

We were told in 1981, when our first son came, that he was fetal-alcohol-affected, and we were advised to get whatever help we could. This paid off. Most families are not so well informed. Our children and grandson were moved around within, and in and out of, their birth families and within foster care. We are still struggling with the impact, which shows itself in attachment, behaviour, and school problems. We got support from support groups—

The Chair: You're going to have to slow down just a little for our translators.

Ms. Elspeth Ross: We got support from support groups, the Open Door Society and NACAC, North American Council on Adoptable

Children, and on the web. The Wabano Centre for Aboriginal Health helps with our grandson now. Health Canada's non-insured health benefits for first nations and Inuit health also helps, with the added benefit of making our kids feel they belong to first nations.

I have worked for the Adoption Council of Canada since 1991, when it began, as staff, as board member, and volunteer researcher. I currently provide a current awareness service on the ACC's listserv, but I work more actively in FASD, sending e-mails on international listservs, running a support group at CHEO, and serving on committees.

What's wrong in Canadian adoption? If there were recruitment, training, and support, 30,000 children in the child welfare system could potentially be available for adoption. They move in and out of foster care, group homes, change workers, and age out of the system to apartments on their own.

We need a paradigm shift to believe that adoption works, and a vision to make it happen, but the provinces aren't acting. Ontario hasn't moved to do anything about the implementation of recommendations from a panel last August, and it's strange that child welfare associations don't really talk adoption. An adoption conference last year brought experts from Australia and Ireland to talk permanency, but never mentioned the word "adoption" at all.

Yes, people will adopt older kids and stick with it, just as people come home from eastern Europe with children very much like those here. It's easier to adopt internationally than domestically. Some jurisdictions don't do adoption at all. Adoptive families need information and education, support and understanding, services and referrals, and many need financial help. Both domestic and international adoptive families are struggling with mental health problems. It's hard. It's estimated that 70% of Canadian children affected by FASD are not living with their birth family, but with foster, adoptive, and kin parents. Adoptive families could make a huge difference in raising children with disabilities such as FASD.

I've provided a list, a bibliography that gives you information on that, a professor doing research.

We know little about adoption in Canada, and that's—

• (1015)

The Chair: Ms. Ross, I'm sorry to interrupt you. I have your presentation. It's not in both languages, but I think what we might do, because probably you won't be able to get through the whole—

Ms. Elspeth Ross: I have to get to the citizenship parts, so I'll skip —

The Chair: What I'll do is this: we could try to get it translated and then hand it out, because it looks like a very good one. So that way you know it will be covered.

Ms. Elspeth Ross: I'll skip the recommendations, because they are the same as the Adoption Council of Canada's. I do want to get to the citizenship, because I think I'm the only one who's maybe going to talk on citizenship.

The Chair: Okay, go ahead.

Ms. Elspeth Ross: Can I do that, please?

The Chair: Yes, please do. You have the time for that. I only wanted to let you know that it's okay—

Ms. Elspeth Ross: I'm getting in a panic to get through the material.

The Chair: It's okay. We'll get this translated and handed out, so you go ahead. You probably have about three minutes left.

Ms. Elspeth Ross: Three minutes is enough.

I have the same recommendations as the Adoption Council of Canada because of the lack of information: stats, publishing, and what not. But I have some new recommendations for you.

One is that the government support or preferably adopt Bill C-569 of MP John Rafferty, calling for a national strategy for FASD to commit the government to develop a national plan for treatment and prevention, which we don't have at the moment.

On citizenship, Bill C-14, from 2007, an act to amend the Citizenship Act, was applauded for bringing equality to adopted children. It did the opposite. Lawyers from the Canadian Bar Association recommended that adoptive parents use the permanent residency route instead of the direct citizenship route because the new faster route has no appeal. Now adoption advocates are recommending the permanent residency route again because the other creates a two-tier system. Now I have the same recommendation that the Adoption Council of Canada had: to amend the regulations accompanying Bill C-37 so internationally adopted children have the same legal status as children born in Canada and are permitted to transmit their citizenship by descent to children born abroad.

One thing that Bill C-14 did right was to ensure that adopted children can no longer be deported for criminality if their parents did not obtain their citizenship. Before the Standing Committee on Citizenship and Immigration in June 2006, an official from CIC said "...to respond to charter concerns, all adopted persons would no longer be prevented from acquiring citizenship for any criminality...". She said it was an equity matter.

In June 2008, the first of a number of adoptees who were under threat of deportation received their Canadian citizenship. A few of us protected Gilberto Currie, adopted from Brazil. We protected him for five years and kept him from being deported to Brazil until the bill was passed. We do not know how many adoptees could have been in the same position.

The fact that people are still choosing to adopt internationally by the permanent residency route leaves the possibility that parents may not obtain citizenship for their children, which can create great hardships if the adoption fails. Children who come to Canada to be

adopted and whose adoptions break down before they obtain citizenship are still under threat of deportation today. This must be stopped. Canada must not bring children here in inter-country adoption only to send them back to a country they have not seen since childhood, where they know no one and do not speak the language.

Mario Perez came to Canada from Mexico to be adopted at the age of five and was deported to Mexico in 2006 at the age of 22. Efforts to prevent this failed, and he still wants to come back. We are now supporting Tina Desrosiers, who came to Canada—

The Chair: I'm sorry, Ms. Ross, we will translate this and get out the story for everyone to read. I'm so sorry we have to limit your time.

Ms. Elspeth Ross: It's all right. I just have a recommendation that something be done, because it's very complicated to get through the citizenship process, and people whose adoption failed need to be helped to make sure they become citizens.

The Chair: What I think we'll have to discuss as a committee is we may want to bring back officials from immigration to talk about some of the issues you've brought up.

I'll make sure this is translated and distributed to all the members so they can read the report you've prepared. I want to thank you for the work you've done in preparing that.

We have a short time before the end of our meeting, so we'll have one round of five-minute questions and answers.

We'll begin with Mr. Savage, please.

• (1020)

Mr. Michael Savage (Dartmouth—Cole Harbour, Lib.): Thank you, Chair.

I want to thank the witnesses. We've had some compelling testimony here today. It's certainly an emotional issue for people who've gone through the process, either having been adopted or in your cases adopting children or perhaps both.

Lauren, you may be the youngest witness we've had here, but you're one of the best we've ever had. You did a great job.

I have a brother who adopted a little girl from China. I have a sister who's adopted two children in Ontario, and I'm the proud godfather of one them—a little girl who was born with FASD and is doing very well. It's pretty clear that from an adoption point of view it comes in all ages and all kinds and all sizes and all different conditions from all parts of the world. There probably isn't a single solution. We are hearing there are some specific things we could do that would assist in many cases. Your testimony is very helpful.

There are a couple of things I want to pick up on, if I could.

Mr. Moore, I think it was you who suggested.... Jeff Watson had mentioned earlier, in the previous panel, about how do you deal with paternal parental. I think what you're suggesting is to forget about that and have an adoptive parents benefit. Is that what you're suggesting?

Mr. Wesley Moore: Yes, I am. It would match up with the maternal, so it would add the additional 15 weeks. But it would be a set-aside for adoptive parents. It would address some of the issues you heard today and in the previous panel about bonding, attachment, etc.

Mr. Michael Savage: So just have a whole new category and make it simpler.

Mr. Wesley Moore: Yes, I think it would make it much more clear-cut.

Mr. Michael Savage: Okay, thank you.

Ms. Alarie, thank you for your testimony as well. I found it very compelling. One of the things you said was interesting. It was about expanding the definition of “disability”. I guess you're speaking about kids who are FASD or born addicted to crack cocaine or things like that in utero. Can you just expand on that a little bit? What you would like to see?

Ms. Julia Alarie: One of the most common issues the parents within our support groups face is that they aren't able to have all of their children's needs recognized. When they are exposed to substance within the womb, when they come into adoption, the services they need are not necessarily recognized as disabilities. So it makes the coordination of services and obtaining individual education plans very difficult for them in terms of advocacy and support within the schools.

Mr. Michael Savage: Okay. I agree with that.

Ms. Clemenger, I'm looking at the article you've written. It's pretty clear from a number of different people's points of view that we don't have enough awareness across the country of how many children are actually in need. You referenced that in your testimony.

I'm looking at an interview with Sandra Scarth of the Adoption Council of Canada. The question was asked whether Canadians are aware of the number of children waiting to be adopted. She said, “No, we don't have funding for public awareness campaigns at all. In Canada only 8 per cent of the waiting children get placed. In the United States it's around 30 per cent.”

That's quite a difference. Let's talk about that a little bit.

Ms. Tracy Clemenger: I think comparatively the U.S. has a voluntary sector that's been on this in a different way.

One of the programs that we're promoting, at least from the perch that both my husband and I are a part of right now, our world.... What he does is run a ship of about 39 Protestant denominations in Canada. There are over 80 affiliates, such as World Vision and so on. We're seeking to mobilize those denominations at the denominational level to embrace this as one of their top key priorities. They meet annually on a president's day, CEOs only. They go through that, so he's had the blessing to move on this in a way that can get information at ground zero. He'll be working with Catholics and Anglicans on this. It will be a very generic, easy-to-digest type of kit. Again, this is to get people past the myths, which we feel are dominant right now. I tried to articulate our journey, I think partly because we were choosing adoption in our story. People were very aggressive to try to talk us out of it.

So we got the goods for a number of years on that. We're looking at it and saying that when we talk to people at ground zero on what their hurdles are and why they're not adoptive, the first thing we find is the lack of good information—awareness. You'll see that my first recommendation is actually to please endorse in your recommendations, somewhere in some government office, to promote this. I see car seats every night watching the news. I see a whole bunch of things the Canadian government is doing.

We see myths as a big thing. We see fears in objectives. And that is going to take the harder work, because part of the systemic failure that you're going to hear about from people is that in essence, we have a system that is based on bias.

• (1025)

The Chair: Thank you so much.

Madame Beaudin.

[*Translation*]

Mrs. Josée Beaudin (Saint-Lambert, BQ): Thank you very much, Madam Chair.

Thank you for coming and welcome.

I am going to try to summarize the main needs. We've heard other witnesses before you. Am I wrong to say that your main challenges are especially post-adoption? Perhaps you disagree. We will come back to this and you can answer then.

I understood that you don't have support groups and that you need to network. You would like adoptive parents to get the same employment insurance benefits as biological parents.

I am speaking to those who have received the benefits: is a 55% benefit rate sufficient? I know that, in Quebec, the benefits go up to 70% of insurable earnings. There is even a maximum insurable salary of \$62,500. At the federal level, the maximum salary is around \$43,000. Could you also tell me whether this benefit rate was sufficient for you or if you needed more? That's probably the case.

My other question is for Ms. Ross. You talked about Bill C-14, which is meant to speed up the adoption and citizenship process. From listening to you, I get the impression that it has not quite been meeting its objective. I would have liked to hear you talk more about the bill.

Mr. Moore, I am listening to what you have to say about the main needs.

[*English*]

Mr. Wesley Moore: First, regarding Bill C-14, as I alluded to in my opening remarks, there is an issue with it. We went through the Bill C-14 route when we adopted our son from South Africa last year. It was a wonderful experience, in that we came home with a Canadian passport. We came home with the shiny white temporary passport, and we appreciated that route.

The ability for him to carry on citizenship is an issue that came with that bill. As I alluded to, we have a biological son who is now almost four months old, and we have an adopted son who is three years old. If our biological son were outside of the country he could pass on citizenship, and that's great. If our adopted son, who is from South Africa, were outside the country, he could not pass on citizenship to his children. That is a substantive issue. The legal standing in Canada is different, and it should be remedied.

I may be unique in the fact that I did not experience a need for a substantive amount of post-adoption support. I know there are a lot of issues that come with adoption, especially of older children. I know you've heard a lot of stories. What I find to be a bigger issue with adoption, frankly, when you go internationally, is the upfront costs. International adoptions cost about, as I said, \$20,000 to \$50,000. For instance, to adopt from South Africa we had to spend almost a month in South Africa. It was a wonderful place to spend a month, but it was a month abroad. If you adopt from Russia, you have to fly there two or three times in the adoption process. That's expensive. To adopt internationally is cost-prohibitive.

As I said, there are 30,000 children, so it depends on what your calling is and on whether you feel you're called to adopt domestically or called to adopt internationally. That's a personal and individual choice.

[Translation]

Mrs. Josée Beaudin: Thank you. It is very short.

Mr. Wesley Moore: That's okay.

Mrs. Josée Beaudin: I would like to hear Ms. Ross talk about Bill C-14.

[English]

Ms. Elspeth Ross: The problem with Bill C-14 is that it was supposed to make it equitable and faster to come home with your adopted child from another country and have the citizenship automatically. Some people are choosing not to go that route, and there are two reasons. One is that there's a possibility of not getting through. People stall in other countries for a long time in not being able to get the automatic citizenship. So some people would choose to adopt by the old way and go the permanent residency route instead. Some people are advising that people should go that way instead.

The second reason is that the automatic citizenship means that for internationally adopted children, if they live outside the country as adults and have children, their children won't be able to be Canadian citizens. This was something that totally caught everybody off guard when it happened. It was completely another issue and was entirely caught up in a different problem, and adopted children got caught in it. Our joy over Bill C-14 turned to dismay, although we were extremely happy over the deportation provision that it brought in so that criminality couldn't be a reason for sending them away afterwards.

• (1030)

The Chair: Thank you very much, Ms. Ross.

We'll go to Mr. Martin, please.

Mr. Tony Martin: Thank you very much.

Thanks for coming this morning. I've learned quite a bit again at this panel, as we always do. I have only five minutes to focus on one particular thing, but I'd like to ask a lot of questions.

We heard again that there are 30,000 adoptable children, and we heard there's no registry, and we're trying to figure out where all that's at. We also heard a lot of myths and fears around adoption.

I'm particularly interested, Julia, in your presentation, because I'm not sure we're going to get another one similar to yours before us in this study. I want to know a little bit about the whole issue of LGBT families trying to adopt. We're looking for families, and we're looking for security for children. We have some families now that want to adopt under the LGBT framework. Maybe you can talk to us a little bit about some of the challenges there. We heard from Lauren about her going to school and some of the misinformation and myths and fears there. There have to be some in your experience as well, so maybe you can talk about that.

Ms. Julia Alarie: Thank you.

The first relates to the way employment insurance is defined for us. If you take the example of my family, which has two mothers, out of the gate, with adoption, the maternity benefit is not allowed. So when you're dealing with employers, it becomes very difficult, when you don't have the top-up, for both parents to be able to be mothers and have that experience. That's one area where there is a struggle.

But if you move even beyond that, when you have a same-sex family with two fathers, maternity leave isn't even an option. By virtue of gender, they are already able to take only parental leave, despite having the same needs.

Systemically, that's one area where, when you look at the way HRSDC currently interprets the employment benefit clauses, that interpretation, as written, pertains to mother and father. The way we try to read the law and read the way it applies to us, it's very hard to identify and figure out where we fit.

In terms of our ability to adopt in Ontario, it is a fairly progressive system, and Ottawa has one of the best records. Of 96 public adoptions made the year before last, one-third were to LGBTQ families. Our experience there has been very positive.

The challenge in post-adoption support is that we simultaneously become advocates in the education system and in the medical system for our children's needs while we are also trying to advocate around the fact that our children may not have a mother and a father and may come from a same-sex family. With older children, the additional challenge is that you may be adopting children with needs who have been in a foster system and may have been enculturated in a way that's not necessarily open-minded to living with same-sex parents. So not only do you have the predominant issue of attachment that comes with being a child in care, but you have the issue of their dealing with their own internalized homophobia, while you're trying to love them and give them stability.

How to deal with those challenges, for us, is a very real issue that has been heard as a need in post-adoption support, specifically for the LGBTQ community .

•(1035)

The Chair: You have one minute.

Mr. Tony Martin: Is there a package anywhere that we can include in our report that some group has put together that indicates specifically what pieces of legislation need to change, for example, to make it more equitable so that the discrimination doesn't happen?

Ms. Julia Alarie: There isn't, to my knowledge, with the exception of Toronto's 519, which has extensive resources on adoption issues related specifically to the LGBTQ population.

Mr. Tony Martin: What's Toronto's 519?

Ms. Julia Alarie: It's the 519 Community Centre, which is part of Rainbow Health in Toronto.

Mr. Tony Martin: They may have some specific recommendations.

Ms. Julia Alarie: Yes, specifically, Rachel Epstein, a researcher based with the 519 Community Centre, has recently completed a great deal of research across Canada about the impact of being an LGBTQ adoptive parent.

The Chair: Thank you very much.

We'll now go to Mr. Watson, please.

Mr. Jeff Watson: Thank you, Madam Chair.

Thank you to our panellists for appearing today. Thank you very much for your testimony and your specific recommendations. You're doing a very good job in terms of equipping the committee to consider how the federal government can play a supportive role with respect to adoption.

We've heard a number of panellists in our hearings so far who have recommended, in one way or another, that the federal government take some sort of leading role with respect to promoting adoption, if you will. I suspect that any type of adoption promotion would need supporting infrastructure behind it to ensure that adoption is indeed viable. We've heard that we have 13 jurisdictions that deliver adoption services. There are a variety of differences in the baskets of services, from pre- through post-adoption, across the country.

I have two questions. First, can you identify for us where—that is, in which province or territory or province—there are some best practices or supports provided that we should be looking at?

Second, would you support a relevant federal minister meeting with his or her provincial and territorial counterparts with the aim of working cooperatively to sort of raise the basket of services in all provinces, if those provinces want to participate that way, I suppose? Should some dialogue begin that way?

I'll leave it at those two questions to start.

Ms. Ross.

Ms. Elspeth Ross: Yes, in looking across Canada there's a great deal of support for and knowledge about fetal alcohol spectrum disorder out west, and Alberta is a province with a lot of support. I would like to say that HRSDC originally did have a role in interprovincial adoption—that was in the 1980s. That department

could play a very good role in working with the directors of child welfare and getting knowledge from the provinces out there.

I know this department did bring together international adoption researchers a few years ago and it would be something that they could expand their role to do. The Public Health Agency of Canada is another one that could extend it somewhat because it works in FASD nationally. It could extend its mandate to do something about getting the provinces together. There's a lot of knowledge out there.

Mr. Jeff Watson: I wonder if other panellists would want to weigh in.

Ms. Tracy Clemenger: The answer is yes. That's one of the recommendations I have in my full text. In fact, I've had a meeting with Scott Reid, who is my member of Parliament, who's making arrangements to meet with his MPP to talk about this very issue at ground zero. I fully endorse that type of dialogue.

Mr. Jeff Watson: Would any of the other panellists want to weigh in?

Ms. Alarie.

Ms. Julia Alarie: I also fully endorse that recommendation.

Mr. Wesley Moore: Sure.

•(1040)

Mr. Jeff Watson: We've heard some talk about research and data collection.

Ms. Clemenger, do you want to weigh in on this one? You had a few more things you wanted to say about this. I'm going to presume there's a role for the federal government.

I asked our officials, by the way, who appeared at this committee not long ago, if they could tell us, with respect to international adoption, whether the countries that had their own internal adoption processes—with the greatest amount of integrity—were well aligned or not with domestic demand for international adoption. They couldn't even tell me basic things like that. There are no longitudinal long-range studies about any of this.

Do you want to jump in on this?

Ms. Tracy Clemenger: Categorically, it doesn't seem that adoption or fostering is on anybody's planning and priorities, internally, from what I can tell. When I asked the human resources department, I wanted to ask them two things. One was, are you collecting the information categorically...the word "adoption"? I asked for access to information using the word "adoption", the word "fostering". Then secondly, I wanted to know, if they were collecting the information, was it getting to the decision-makers—yourselves? The answer is no.

Actually, I asked the human resources department for Monte Solberg's briefing manual, for anything in his briefing manual that might have told the minister responsible for HRSDC what's going on in fostering, adoption, domestically, and the answer was there's nothing in his briefing manual. So how do you do what you're doing without studies like this? One of my recommendations is that it goes broader.

I went to Health Canada. Health Canada said, “Well, we don't collect data that way. Thank you very much. Could you please go to the provinces?” I went to six provinces with the same question, the same request: can I see what's in the briefing manual for ministers responsible for this? Alberta came back. That was the most startling. After a series of dialogues with Alberta, they essentially said, “We do collect the information. Here's some of it. In terms of having access to the information on how we brief the minister responsible in Alberta...”—yabba, yabba, yabba—“...national security.” They refused to give me that information.

At that point, I thought this is absolutely nuts that, categorically, your people, our people, are not collecting the data domestically. Secondly, if they do have it, they're not even briefing.... Does the Prime Minister of Canada even know there are 30,000 kids out there? This is a burden that I share, my daughter shares. I think, are you getting it at the top?

The Chair: Thank you.

Thank you, Mr. Watson; that's all the time you have.

That certainly confirms, even with our analysts trying to put information together for this study, that there really is no information for them. We absolutely can confirm what you're saying.

We don't have time for another round of questions. I know Mr. Moore wanted to add something. Then I hope we have just a moment, because I want Ms. Ross, with the permission of the committee, to quickly brief us on her seventh recommendation. She didn't get to the last part.

Mr. Moore, perhaps you could have your comment very quickly.

Mr. Wesley Moore: Just to Mr. Watson's question, I think that promotion and advertising about adoption is very important. I hope the committee would consider that as part of the recommendations.

The other thing around international adoption that may be considered is having pre-approval from foreign governments for adoption for Canada. If you're adopting from the U.S.—or there are a lot in China, South Korea, or in our case, South Africa—if there is a possibility of having a bilateral relationship or a pre-approved adoption process between governments, between states, that may help to expedite the process.

The Chair: Thank you very much.

Ms. Ross, did you want to give us that seventh recommendation you had?

Ms. Elspeth Ross: Yes. It's concerning deportation of what I would call failed adoptees, people who came to Canada to be adopted and whose adoptions broke down.

In the case of Mario, his adoptive mother brought him at the same time as his younger sister; she wanted the younger sister, but she gave him up to foster care. Nobody got him citizenship. He wasn't saved by Bill C-14, and he was deported.

We're now supporting Tina DesRosiers, who came to Canada in 1984 from Brazil to be adopted at the age of nine. She went into care. I think her adoptive mother gave up on her within a couple of weeks of her coming. She was moved into 27 homes, and no one ensured that she obtained her Canadian citizenship. Now, 26 years

later, with a criminal record, she's been under threat of deportation for being a so-called “drain on the system”, living on ODSP.

We do not know how many potential cases like this there are, but Tina has passed stage one. She has a receipt of approval in principle for inland processing for a permanent residency on compassionate humanitarian grounds, which is really good.

The process of applying for Canadian citizenship is incredibly complicated. Adoptees, and those from failed adoptions, have great difficulty and they need assistance. Therefore, I give you my seventh recommendation: Ensure that CIC work with Canada Border Services Agency to see that people from failed adoptions who are not Canadian citizens are not deported from Canada, and work with HRSDC and the directors of child welfare to set up procedures to assist them to obtain Canadian citizenship.

• (1045)

The Chair: Thank you, and thanks so much for bringing that forward. I think it's important that we have that one on the record.

Ms. Clemenger, I know you want to add something very quickly.

Ms. Tracy Clemenger: In my full brief you'll see a list of recommendations. I strongly encourage you to meet with the McGill centre for research in child welfare excellence. They have formed something called the national outcomes matrix.

Everybody trying to get at this will have a preamble that says this is our best shot at calculations. Everything in here is disjointed, and they have a good best stab at this stuff. They've got some good people on this across Canada.

The Chair: Thank you so much for that.

Mr. Martin.

Mr. Tony Martin: On committee business, I'm wondering if it wouldn't be possible to extend an invitation to the 519 Community Centre for Rainbow Health, Rachel Epstein, to share with us some of the recommendations they've come up with in terms of adoptions.

The Chair: I think we had agreed as the committee that we would look at different types of adoption, international, domestic, aboriginal—and I'm very happy we have Ms. Haire to bring her perspective—but unless the committee decides they want to expand this study and we want to bring other people in, I don't think we want to start—

Mr. Tony Martin: This isn't expanding the study; this is looking at what's already going on to get further clarification and maybe recommendations to the committee on how we fix the system so more of these 30,000 adoptable children might find their forever families.

The Chair: Well, you know what we could do—

Mr. Tony Martin: Anyway, I'll leave it with you.

The Chair: Okay, why don't we talk about it? We'll have a bit of time for committee business and then we could discuss it. If we'd like to expand, then we could even bring more in.

Mr. Watson.

Mr. Jeff Watson: I think what he's effectively doing is submitting a witness for testimony.

The Chair: True.

Mr. Jeff Watson: So I think that should go into the mix for consideration as a witness being submitted by Mr. Martin.

The Chair: Exactly. My only concern is that we are going to be looking at our long-form census report. We have to look at that, so

that will interrupt this study. That probably will happen on December 9, so we really are limited for witnesses.

Thank you, Mr. Martin, for that suggestion, and we'll see how that will work out.

Thank you again to all the witnesses. We appreciate so much your coming and sharing your stories with us.

The meeting is now adjourned.

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