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Chair

Mr. Neil Ellis

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(0850)

[English]

The Chair (Mr. Neil Ellis (Bay of Quinte, Lib.)): I call the meeting to order.

Pursuant to Standing Order 108(2) for our comparative study of service to veterans in other jurisdictions, this morning we have a witness from the Federal Ministry of Defence in Germany. Brigadier-General Bernd Mattiesen, medical corps, will appear via video conference from Berlin.

Good morning, sir. Thank you for joining us and being patient while we get started here. You have up to 10 minutes for your testimony.

Brigadier-General Bernd Mattiesen (Medical Corps, Federal Ministry of Defence - Germany): Thank you very much, sir.

Good morning. I am very pleased and very happy to have the ability to give my view, our view, from Germany to Canada on the support for mission-related traumatized personnel.

First let me say that I'm very happy to give this testimony. I had the great chance to visit Canada in the months of September and October for the Invictus Games and for your seminar on Warrior Care in the 21st Century, where I was very pleased to have the ability to participate.

Second, let me give you a little foreword. I am talking in a foreign language, which means that normally I say what I want, but sometimes I only say what I can. If I use a wrong term, please ask me a question about it. I would be very happy to correct it.

 $[\mathit{Translation}]$

I could normally give my presentation in French as well, but since English is a more technical language, I will give it in English, even though I know that French and English are Canada's two official languages.

[English]

Germany, since the year 1992, has been participating in international missions. On the mandate of the German parliament, the German Bundeswehr has been participating in multinational operations at the international level since 1992. A prominent operation in the past has been to participate in the international support and stabilization force of ISOF in Afghanistan. However, today the most significant are the two operations in Mali, in addition

to the ongoing participation in the Resolute Support training mission in Afghanistan.

After multinational support operations began in 1992, an adapted system of compensation and benefits had to be developed. Let me say that in the past we had them only in the civilian system in Germany, which was used for soldiers also, and now we had to develop from the start a special military system.

I have to admit that the Federal Republic of Germany does not have a separate veteran support system. In contrast to the case in the anglosphere, where the term "veteran" is frequently used, in Germany the use of the term *Einsatzgeschädigte* is common, which means personnel with deployment-related trauma. By that, we understand a service member suffering from a health impairment caused by deployment, so I tell you the noun "veteran" has not yet been established in Germany. There are still discussions going on about what "veteran" means, so I will not use the word "veteran", but I very often mean it.

From its foundation, the Federal Republic of Germany has had elaborate and well-developed civilian health care, as well as a well-developed pensions and benefits system. For many decades, the Bundeswehr members were treated and compensated after the end of their service period in accordance with applicable domestic regulations, which meant civilian regulations. Only with an increasing number of losses in Afghanistan, from 2002 onward, was there a growing understanding for the need for an adapted regulatory system for the armed forces, which is now based on four pillars.

The first pillar was created in 2004. This was the so-called Special Foreign Assignments Benefits and Pensions Act, which was amended and ameliorated in the year 2011. A very important law was created in 2007, the Law on the Continued Employment of Personnel Injured on Operations, with subsequent amendments, which is a very necessary law now for our soldiers. It was amended with the deployment-related accident regulation in 2012, which gives an easier way for our soldiers to go into this aforementioned law on continued employment of personnel.

For standardization purposes, responsibility for the pensions offices was transferred from the 16 federal states to the federal government in 2013. In 2015, the cut-off date for eligibility was shifted back, thus enabling equal treatment of all personnel with deployment-related injuries. As you can see, only from 2015 on have we had equal rights and equal compensation for soldiers who participated in missions.

The next slide, although a little complicated and a little busy, shows you how we have pensions and we have continued employment of personnel injured in operations.

Concerning the Law on the Continued Employment of Personnel Injured on Operations and the Special Foreign Assignments Benefits and Pensions Act, it is worth mentioning that any service member suffering from deployment-related trauma is eligible for what we refer to as a protection period. In this protection period, he or she may not be discharged on grounds of unfitness for service without his or her consent. Second, as required, the service status of a temporary career volunteer is extended while they receive medical treatment and vocational training. Third, a former service member may, upon request, be re-employed by the Bundeswehr as a temporary career volunteer with a special service status.

• (0855)

We take back injured soldiers in the armed forces for education and medical care. Temporary career volunteers with deployment-related trauma and re-employed temporary career volunteers with a degree of disability of more than 30% can become a career service member under simplified conditions, and that means lifetime. The Military Pensions Act, in combination with the Federal War Victims Relief Act, governs the financial entitlements of traumatized personnel and surviving dependents.

Initially, service members with deployment-related trauma are granted a relatively low basic pension of between 150 euros and 800 euros, according to the degree of disability, based on domestic legislation. Additionally, temporary career volunteers can receive a loss of earnings compensation upon termination of their period of service. Additionally, further entitlement for medical treatment and prosthetics can be granted.

On the next slide, we go to the Military Pensions Act, which provides more. All recognized service members with deployment-related trauma receive a non-recurring compensation of 150,000 euros if the degree of disability is higher than 50% and if the impairment is of a permanent nature.

Career service members impaired by having deployment-related trauma and whose degree of disability is higher than 50% may, upon request, be discharged and receive 80% of the pay award that is two pay grades above the current one. If we sum this up, it means that an impaired soldier and service member, after his dismissal, gets the same payment as he got before as an active duty soldier.

In contrast with that, temporary career volunteers with deployment-related trauma are entitled to receive a compensation in accordance with their period of service in the armed forces. It means that they get roughly 500 euros for every month they were in the armed forces.

For legislation governing the consequences of deployment to be applied, evidence of service-related health impairments has to be provided in every single case. This has turned out to be difficult, and was, I have to admit, a political matter or concern, in particular with cases of mental disorder such as PTSD.

Now, with the Deployment-Related Accident Regulation, an instrument was developed that under certain circumstances provides a possibility of applying some of the legislation governing the

consequences of deployment based on a sufficiently high probability. That means that there's no need for evidence, but there must be a sufficient probability of the person having been traumatized in mission, and then they can benefit from the regulation.

Sirs and ladies, you have asked about an ombudsman. There you see the team of the ombudsman and the commissioner, with the two ombudsmen on the right and left. You see my two civil servants, two lady jurists, who have a very big impact on my work. In the level below, you see the three military assistants, who also do also great work, and one of them was with me in Canada for the Invictus Games.

Ladies and sirs, this concludes my presentation. I'm very open to questions you might put.

(0900)

The Chair: Great. Thank you.

We'll start with our first round of questioning of six minutes. Go ahead, Mr. McColeman.

Mr. Phil McColeman (Brantford—Brant, CPC): Thank you, Chair.

Thank you for the testimony here today outlining your system.

I'm very interested in the Law of Continued Employment of Personnel Injured on Operations and in getting a little more information about that from you, if we could. Based on the charts, I noted it had changed in more recent years.

With regard to the concept behind it, if you're injured, is there a certain degree of injury that must occur, a certain percentage of disability that has to be achieved? Essentially my understanding is—and I'm looking for you to better explain it conceptually to me—that a person in the service, a soldier, can stay employed in the military if the injury is attributable to their service, and also someone who has left the military can come back and apply and be rehired.

Do I have the general concepts correct?

BGen Bernd Mattiesen: Yes, that's correct. Every soldier who is injured on a mission, be it physically or psychologically, can stay in the armed forces only for medical treatment and education, notwithstanding the degree of disability. If he's a career soldier, it's not a problem, because he remains in the military. If he's a time-restricted soldier, then he might stay over the end of his career within the armed forces as long as he needs medical treatment or education. Once he has left the armed forces, he might apply to come back and become a soldier again as a means of getting medical treatment and education for a new job. Even with a disability of 30% or more, he might become a career soldier—not because he fits as a soldier, because of being traumatized—but he must be able to fit his position.

Let me give you a very simple example. We have a soldier who has lost both his legs, so he cannot be a normal soldier. He cannot run around. He cannot fight in wars. However, he might be a very good IT technologist. He can become a career soldier as an IT technologist, but he must be able to fit this position. This you can approach as a psychological question. If he's above 50%, he gets an extra benefit of 150,000 euros.

● (0905)

Mr. Phil McColeman: Do you have numbers that you could share with us of individuals in this category?

BGen Bernd Mattiesen: Yes, I do.

Let me start with a preliminary remark. Numbers are always very difficult because it depends from whom you get them. If you get them from the physicians at the hospital, you get numbers that are different from the ones you get from the administration.

Mr. Phil McColeman: We know about that.

BGen Bernd Mattiesen: I believe most in the administration numbers, and I'll give you their numbers because I have the theory that every soldier who has become traumatized shows up one day at administration to ask for benefits.

Roughly 3,000 soldiers from the beginning of our missions in 1992 have applied under both laws. Of these, roughly half, 1,500, are now back in the armed forces as normal soldiers or have left the armed forces because they are cured.

We have roughly 500 soldiers in the special service. We have about 700 soldiers overall who are now under this Law of Continued Employment of Personnel Injured on Operations. Up to the end of November, there were 106 career soldiers in this situation.

These are the rough numbers I can give you.

Mr. Phil McColeman: Okay.

To make sense of these numbers, how many people are active in the military in Germany?

BGen Bernd Mattiesen: We have roughly 180,000.

Mr. Phil McColeman: Thank you for that.

Let me be sure I understand the person who receives the 150,000 euros. To be in that category, someone must have a disability assessment of 50% or more. Is that correct?

BGen Bernd Mattiesen: Yes.

Mr. Phil McColeman: How many more benefits would they receive from a monetary point of view? Would they be eligible to receive more than the 150,000 euros? Is that the maximum?

BGen Bernd Mattiesen: You might discuss the law, and we do in Germany. There's a rough cut-off at 50%. Below 50%, there is nothing, and being above 50% doesn't get you more. This was decided in the past. There has been thinking about it, but it's still the law. It's still in force at to this date.

This creates some problems. If you have 40% and you are a psychologically traumatized person, what do you have to look forward to? You're looking forward to 50%. This gives a bit of a problem in curing or healing the disease. This is what we talk about a lot with our jurists and psychiatrists, but for the time being, it's like that.

Mr. Phil McColeman: That's where I'm having a difficult time, because everybody between zero and 50% is receiving nothing. Only the people over 50% get what I would consider to be a very generous benefit of 150.000 euros.

How do you determine the categories, particularly with a PTSD diagnosis, to refuse someone who perhaps is not able to function

very well? Is it all based on medical criteria that a doctor assesses? Is that how it's determined?

BGen Bernd Mattiesen: Let me make one remark first. Even those who do not get the 150,000 euros might be re-employed in the armed forces and getting their normal payment as a sergeant, let me say, or as a master sergeant or whatever, and they get a regular little monthly pension. It is not too much, but it's a little bit. If they are not in the armed forces, they can get a lot of different civilian benefits.

On the second question you asked, it is like that. We have a team of medical doctors, medical officers. Four of them are psychiatrists from the psychiatric hospitals. From their knowledge and with their ability to do the work, they estimate the grade of the disability.

Indeed, you're correct, in that there are sometimes complaints about that situation. We are a very open state and we have a good legal system, so some lawyers have a good time living on that.

● (0910)

The Chair: Thank you.

Speaking of lawyers, Mr. Fraser, you're up.

Mr. Colin Fraser (West Nova, Lib.): Thanks very much, Mr. Chair.

Brigadier-General, thank you very much for your appearance today. It's very much appreciated.

I'm pleased to hear that you were able to go to Toronto for the Invictus Games this year. I wonder if you can talk for a minute about your experience at the Invictus Games and why you think that is an important aspect for our veterans.

BGen Bernd Mattiesen: Yes. Thank you very much. I am very pleased to give you the answer.

I had a big chance to participate even beforehand, in the Warrior Care in the 21st Century symposium, where I had contact with your surgeon general, with whom I had long talks about our medical systems in our armed forces. After that, I participated in the Invictus Games and was able to see our German team, consisting of 17 soldiers from Germany.

From my point of view, it is the biggest appreciation you can give to soldiers who went to a foreign country and fought, who maybe were not understood in civilian life by their families and relatives, and who came back traumatized or even critically injured. They got a big chance to go into the community of the soldiers of the world through sport, and to be very highly appreciated by Prince Harry, for example, and by your Prime Minister Trudeau, whom I saw at that meeting.

They had the ability to go to a foreign country to make a 1,500-metre run, let's say, and to be applauded by a lot of people. It is the biggest possibility for taking care of our soldiers who sacrificed some of their health on their missions.

Mr. Colin Fraser: Thank you, sir.

In your presentation, you touched on employment, but I didn't hear a lot—perhaps I missed it, and I apologize if I did—on training and education benefits and what would be available for an ill or injured soldier who wants to go back to school or receive training that would allow them to go back into the workforce. Can you describe for me the benefits available for ill and injured veterans?

BGen Bernd Mattiesen: Yes, I can. I just touched on it very briefly by saying that they were able to get some education within the armed forces.

If a former soldier or a temporary career volunteer whose time has expired stays in the armed forces or is re-employed in the armed forces, they have the possibility, depending on their psychological and mental fitness, of taking part in education. For this a time of five years is accepted, which might be extended to eight years. In those eight years, they are fully paid at their rank by the armed forces and may go to whatever: a school, an apprenticeship—as we call it in Germany—an industry education, or whatever. They are very free. The only thing is that they must be psychologically and physically fit enough to do this.

This is even more the aim of our re-employment. Normally we don't want to keep them in the armed forces until the end of their active life, but get them educated so that their problems and the damage caused to them in the mission are going to be equalized, you might call it, by a good education, so that they are at the same standard as they would be if they had not been traumatized in a mission.

Mr. Colin Fraser: You mentioned that they have to be psychologically well enough to go back to school or whatever. Are the mental health services in place to allow someone to receive those mental health services at the same time as they go back to school or training? If so, who provides those mental health services?

• (0915)

BGen Bernd Mattiesen: As long as you are a soldier in the armed forces, you are entitled to go to the psychiatric service of the four Bundeswehr hospitals. You also have an outpatient psychiatric clinic. In this you can have the service of psychiatrists who are very experienced in the civil standard of care.

Today and tomorrow we have a big psychiatric conference here in Berlin. I just left it to come to this conference with you. If you go to my presentation, slide 13 shows the hospitals. We have four big ones and a smaller one, which is in Westerstede.

The psychiatrists take care of the soldier. They advise them on what kind of occupation they're able to perform and whether or not they're able to be educated.

Mr. Colin Fraser: Thank you, sir.

Are we able to get a copy of that presentation? **BGen Bernd Mattiesen:** Yes. You have it.

Mr. Colin Fraser: We have it? All right.

Thank you very much, sir.

The Chair: Ms. Mathyssen is next.

Ms. Irene Mathyssen (London—Fanshawe, NDP): Thank you, Mr. Chair.

Thank you very much, Brigadier-General. It's a pleasure to be able to exchange information. I appreciate that very much.

I have a number of questions. I'm particularly interested in the transition to civilian life. It's impressive, I must say, how you care for your injured service personnel. In terms of the individual for whom it is important to return to civilian life, when does that process start in terms of preparing the veteran?

BGen Bernd Mattiesen: This is a very interesting question in Canada. At the Warrior Care in the 21st Century symposium, we heard from your surgeon general that this is a big item in Canada. In Germany it is not such a big item. We have the impression that our soldiers, in terms of living as civilians, have a lot of contact with the civilian life and know what civilian life is about.

We have some courses and training periods with regard to civilian regulations, civilian laws, illness insurance, unemployment insurance, and so on, but it is not a real system of preparing for life. We have a special service in the German armed forces, which I'll translate as "education empowerment". This service accompanies the soldier when they go to an apprenticeship, to study for whatever, or to be trained for a new job, but there's not a real process for making our soldiers fit for civilian life, because we think they live amidst civilian society and they know about that.

Ms. Irene Mathyssen: Thank you. It's interesting, because one of the things we've discovered in talking to veterans here in Canada is that they are very much cocooned or very much looked after while in the military. Everything is laid out for them, so going into a civilian situation can be very traumatic because it's a different culture. I'm interested in what you say, that in Germany there is already this familiarity with civilian life.

I'm wondering also about the 150,000 euros. Is it a lump sum that is given to a severely injured veteran? Also, to follow up on my colleague's question, is there any follow-up on this lump sum in terms of benefits, or is it simply a matter of "Here's your money; you deal with it"?

BGen Bernd Mattiesen: Thanks for the question.

Let me just go back to what you said about the veterans in Canada, of their need to be, let me say, "recivilized" in the Canadian society.

I was very interested in hearing this presentation at the symposium down in Toronto. What I'm doing for the time being is to make a comparison between different countries, so I was very happy to see Canada. I was in France, the Netherlands, Israel, and Austria just to see how different societies have their different military societies work, and there are very big differences.

I very much like what you are doing for the soldiers in Canada, and maybe someday we will take an example from Canada, but this has to be rethought. For the time being, this is how we regard soldiers as also being members of civilian society.

On the second question, the 150,000 euros, there is a real discussion on that. This is indeed paid as a lump sum. We have the picture of a soldier as being a very responsible woman or man and knowing what she or he is doing, but in effect, you're correct: some of them are buying a rather big car, and after that there might not be so much left and there is no follow-up from that. Normally the idea was to hand it over and they would have the basis for a new life, maybe fixing a home, building a new home, or starting a new career with it.

It is a lump sum, yes.

● (0920)

Ms. Irene Mathyssen: Okay.

Finally, I wondered about something in terms of the veterans' families. Once a veteran leaves the service, there is very often a need for care, particularly if there is post-traumatic stress. Do you support the veteran's family in that struggle to look after a veteran, or in some cases to receive training with regard to the care of their veteran?

BGen Bernd Mattiesen: Thank you very much. You are using the term "veterans". As I said before, we do not do it in Germany because it has not been defined.

We are just in the middle of the discussion we are having in Germany, and we did have it today at the conference I was at earlier.

Yes, we are going to integrate the family even better and even more. This is a long process. It also depends on money, of course, and it has to be brought to law, which the Federal Ministry of Defence cannot decide on alone. It has to be decided with the Federal Ministry of Finance and the Federal Ministry of the Interior, which is a pretty long process, but it is something we want to do in the next session of our parliament, which just started some weeks ago.

The Chair: Go ahead, Ms. Lambropoulos.

Ms. Emmanuella Lambropoulos (Saint-Laurent, Lib.): Thank you.

First of all, thank you for being with us today to answer our questions. We really appreciate it.

My first question is going to be about benefits you give to veterans once they've left the armed forces. You mentioned that they receive a transition benefit of up to 75% for a number of years depending upon how long they have served, but I was wondering about those who are not going to stay in the military for work or to be educated. Do you offer any kind of support if they decide to leave completely during or after their transitions?

BGen Bernd Mattiesen: Yes. There are a lot of different possibilities. Most of all, it depends on whether you're a career soldier or whether you are a temporary career volunteer.

In the case of a career soldier, it is easier. If the career soldier leaves the armed forces in the regular fashion, or if the career soldier is regarded as no longer being fit for the armed forces, he simply gets retirement pay every month, which means a pension. He gets some percentage as a pension, and the normal rate is 72% for his lifetime. It might be less if he leaves the armed forces very soon after being employed in the armed forces.

If they were over the 50% of grade of disability—and I appreciate very much the question from before, because this is a really hard question to be decided by medical officers and by psychiatrists—then they get 80% of the payment of the next higher payment group. That means that they more or less get the same payment they had at the end of their career for their lifetime.

If they're not a career soldier, it becomes more difficult. The temporary career volunteers get both a lump sum and a monthly payment, but only for some time, depending on the duration of their time in the armed forces. They get also an education, and they're entitled to have an education for three to five years, which depends also on the time they were a temporary career volunteer. If they're a temporary career volunteer, there is a big possibility of different payments, be it a lump sum or be it a monthly payment for a special time, but they get no lifetime payments.

• (0925)

Ms. Emmanuella Lambropoulos: I guess I'm going to follow up that question. Do you know how many of the veterans who have served and have left the armed forces end up in the homeless category? Do you have anything that helps them find housing?

BGen Bernd Mattiesen: Housing support is not what we do. They get support from the social service of the armed forces for their lifetime; that's correct, but the problem is that they have to show up. If they don't show up, they will never get them. It's the same problem with this country as with the U.S. Department of Veterans Affairs: if they don't show up, if they're not at least brought in by somebody.... We have a veterans organization, and they might help.

Are there homeless? Of those traumatized on mission, I don't know, but if you look at homeless people, of course there are a lot of soldiers, because we had mandatory service until some years ago. Of course there are soldiers in there, but I cannot give you a number because I do not know, and I guess nobody knows.

Ms. Emmanuella Lambropoulos: I guess my last question would be to ask if the government or the Ministry of Defence partners with other levels of government or with other people offering services in order to ensure that veterans get better services and get whatever they need after transition.

BGen Bernd Mattiesen: Yes. Our veteran has to call—or former soldier, let me say, to avoid using "veteran".... There's a big discussion that there has not been a definition of "veteran", so I will avoid it.

Our former soldiers of course get support. They get support from social security, be it health benefits, be it unemployment benefits. After having left the armed forces, they are in the condition of being a civilian member of society.

Ms. Emmanuella Lambropoulos: Thank you.

The Chair: Go ahead, Mr. Eyolfson.

Mr. Doug Eyolfson (Charleswood—St. James—Assiniboia—Headingley, Lib.): Thank you, Mr. Chair.

Thank you, Brigadier-General, for meeting with us today.

I want to go back to something you talked about. You said that a soldier who is injured may not be able to perform all of their duties, but can have specific duties. You particularly mentioned—and I've used the same example when talking to people—that a soldier who had lost his legs could serve in his capacity in information technology and that sort of thing.

In Canada we have something called universality of service, which means you cannot be in the armed forces unless you can perform all the duties. As a result, a paratrooper who loses one leg but who could still, as you say, be in IT or something, could not be in the military and is medically discharged.

We have had an issue with soldiers with chronic injuries who are not readily diagnosed or not readily seen, such as a paratrooper who's starting to get chronic back pain or a person who's starting to get PTSD from their deployments. A lot of them are afraid they're going to be discharged because they've come forward and no longer meet universality of service. Sometimes these problems get worse.

Have you ever had this problem in your services, with people hesitating to come forward with chronic injuries, or do they tend to present right away when they have symptoms?

BGen Bernd Mattiesen: There is a study right now on the willingness to show disability and show traumatization. This concerns most of all the psychological side of illness. If you have a physical illness, it's very obvious. We also have a problem with soldiers showing up with some chronic diseases.

If you have mission-related trauma or injury, then you are under the protection of the law and you cannot be forced to leave the armed forces. You stay within the armed forces even if you're not totally fit to do military service. This is what our legislation wanted: to give them a kind of social home, let me say, so they are in the armed forces getting paid and getting medical treatment.

These 106 career soldiers whom we took over because they had been traumatized are generally doing a very good job, even though it is not foreseen that they will be able to do a demanding mission and they cannot do field service.

I have to admit—and this is quite true—that we can do this because we have a relatively small number. If there are more and more, then one day we will have to think about different options.

Soldiers with diseases that are not mission-related might very well be declared unfit for military service and then leave the armed forces. Again, as I told you before, if they're career soldiers, they will get a lifelong pension. If they're not career soldiers, they will get a payment for some years, but this will end.

• (0930)

Mr. Doug Eyolfson: All right. Thank you.

Was this concept of having injured soldiers stay with modified duties always the case, or did your country ever have universality of service in your armed forces? **BGen Bernd Mattiesen:** These laws were created in the years between 2004 and 2010, when we first started in Afghanistan and we saw that we had injured or killed soldiers in Afghanistan. It started with a bomb defusing in Kabul. Some people were killed and some were severely injured. Then we had a bus attack, which was, I think, in 2002, in Jalalabad, just between the German camp and the city of Kabul. Then our parliament started creating laws for that.

Mr. Doug Eyolfson: All right.

I just want to confirm the number of people with this classification. Is it 106 soldiers?

BGen Bernd Mattiesen: We have 106 soldiers, yes.

Mr. Doug Eyolfson: That is out of a total force of 180,000. Is that right?

BGen Bernd Mattiesen: We have 106 soldiers who are now career soldiers because of being injured.

Mr. Doug Eyolfson: Yes.

BGen Bernd Mattiesen: We had 3,000 in all who were injured, psychologically or physically—

Mr. Doug Eyolfson: Yes.

BGen Bernd Mattiesen: —but these 106 have now become career soldiers, not because they were at the maximum age but because they were injured in a mission.

Mr. Doug Eyolfson: Sure.

I bring that point up because the proponents of universality of military service say that you couldn't handle the large numbers of people who couldn't fully serve, but you have 106 out of 180,000, which is less than 0.05% of your forces.

BGen Bernd Mattiesen: Yes, absolutely.

Mr. Doug Eyolfson: Thank you very much.

BGen Bernd Mattiesen: That's correct.

Thank you.

The Chair: Go ahead, Mr. McColeman.

Mr. Phil McColeman: Are the pensions and benefits taxable that are provided by your organization?

BGen Bernd Mattiesen: Yes.

Mr. Phil McColeman: They are taxable?

BGen Bernd Mattiesen: The pension is taxable. The lump sum of 150,000 euros is not taxable. This is free.

Mr. Phil McColeman: Okay, so some of the benefits are non-taxable, whereas pensions are taxable?

BGen Bernd Mattiesen: Yes.

Mr. Phil McColeman: What are the differences between what former military members receive as a result of service-related disability and what public servants receive for the same disability if injured in the course of their employment? In other words, do military members with a service-related injury receive more than public servants injured in the course of their employment?

• (0935)

BGen Bernd Mattiesen: The public servants, of course, also get a pension if they are career public service, and normally they are, but they will never get those 150,000 euros, which is only reserved for military missions outside of Germany. All these laws that I explained to you are only applicable for soldiers who have been deployed outside the borders of Germany.

The reason behind that policy is quite simple. Our Ministry of the Interior fears having to pay a lot more money if it also applied within the borders of Germany.

That brings up a very interesting situation. If a soldier loses both legs because of a severe accident while doing pre-mission training in the training area, for example—and we had that—he will not get the same pay as if he got the same injury within a mission.

Mr. Phil McColeman: That presents a whole new area of problems for that eventuality.

It's very arbitrary, then, and you have to be out of country to qualify. How do people deal with it when they're denied because it happened within the borders of Germany? How are your members dealing with that?

BGen Bernd Mattiesen: Yes, this is part of the discussion. It is a part of the political discussion. The members of parliament, of course, are involved in that discussion. There are some private organizations involved in it, and this is indeed a discussion. However, these people injured in Germany get all the medical treatment, of course. They get the same support from the social service, but they do not get the same sum of money. It's a law that is discussed, but for the time being, I can't change it.

Mr. Phil McColeman: Okay.

I'm sorry, but I wasn't able to take notes as quickly as I would like to have done regarding another area that you said in your opening comments briefly became very political. Can you refresh us on what that was and on what the political fallout or discussion was that you were referring to?

BGen Bernd Mattiesen: I'm not just on the right track, I think. **Mr. Phil McColeman:** It was when you were referring to one of the charts. You said that this became very political. Do you recall saying that?

BGen Bernd Mattiesen: Yes. It might well be the creation of the special laws for mission in the years 2004, 2007, 2011, 2013, and 2015, when Germany for the first time realized that they also had mission-related or war-related injured, traumatized, and killed people. Maybe this was it.

Mr. Phil McColeman: What were the two sides of that political argument?

BGen Bernd Mattiesen: It started simply from the fact that for the German Bundeswehr in the past, we had laws to compensate for injury within the service, but these laws were based exactly on the civil service, meaning the policemen, the teachers, the fire brigades, or whatever. Then it was realized that they were doing more service out of Germany than they were doing in Germany, and it was not so easy to make an understanding for that, because you had the counterargument that they are voluntary in the armed forces. If they are voluntary, they get paid for that every month, and that's enough.

This was a discussion we had very long ago in the years 2004 to 2007, and 2011.

Now the general opinion has changed on that question. We might improve a bit today, but as I said before, it's also a question of integrating the soldiers' families and relatives and environment in their therapy and support.

Mr. Phil McColeman: We have examples in our country of serving soldiers who are qualifying for over 100% of the benefits available that are attributable to their injuries and the assessments they have received. In one case, it was somewhere around 140% of what is available, so it was over the 100% level.

Do you have any examples of people being assessed and receiving benefits well beyond what the 100% level would be in normal circumstances?

(0940)

BGen Bernd Mattiesen: If you say 100%, it's the normal full payment for a soldier. Is that correct?

Mr. Phil McColeman: Okay, and what would—

BGen Bernd Mattiesen: It is a monthly payment.

Mr. Phil McColeman: What would that be? What would be the level of remuneration, or how much would they receive? If they qualified for the 100% level in all of the categories of their service-related injuries, what would that total amount be in terms of pension and other benefits?

BGen Bernd Mattiesen: If you go to the high end, if you go to a theoretically 100% disabled soldier, he or she will get 80% of the next higher payment over what they had before. This 80% is calculated from the highest payment of the group they were in, so it is roughly about what they would receive monthly at the end of their career. Additionally they would get a 150,000-euro one-time lump sum and a basic pension of 800 euros a month, again because of the disability.

The Chair: Thank you.

Mr. Bratina, I believe you're going to split your time with Mr. Samson

Mr. Bob Bratina (Hamilton East—Stoney Creek, Lib.): Okay. Guten Tag, General. Wie geht es Ihnen? That is all my German.

Thank you so much for this very interesting discussion. Are there any general public controversies with regard to benefits to veterans, or is there general satisfaction in Germany under the current system?

BGen Bernd Mattiesen: Let me start with two comments.

First of all, there is agreement that we are on the right track in having these laws. The problem is not the law. The problem is the interpretation of the law, the living of the law, the decision in a special case. This is more or less the problem.

For example, awarding a lump sum of 150,000 euros has to be decided on 50% disability and the condition must be everlasting, permanent. How to prove everlasting is not so easy to do. We have said it must have been for two years. The question is when the two years will start. I told you before that there are other aspects, but some lawyers make a very good living on that point. This is the first thing.

Second, yes, we are thinking about improvement, of course. This is going again in the direction of integrating families and relatives within the system and providing more support. This again depends on our civilian social insurance, which now also excludes relatives from the payment if they are not sick themselves but only the relatives of a sick or ill person. This we want to change for the military now. I'm looking forward to having it changed when the new parliament is in session in Germany.

Mr. Bob Bratina: With regard to your comments on homeless veterans, we heard testimony from France that it was hardly an issue. The witness seemed almost puzzled as to why we were concerned. We have, here and in the United States, apparently thousands of those who have not come forward to identify.

Could I take it from your comments that, as in France, generally speaking homelessness is not as big an issue in Germany as we feel it is in North America?

BGen Bernd Mattiesen: Yes, I would agree with this statement. It is not such a big issue. We have people talking about it, but if you ask these people if they know one of them, then you get a more or less very weak answer like "Yes, I once met a homeless person who had worked at the armed forces." I agree entirely.

Nearly every man who is over 40 now has worked in the armed forces because of the mandatory service in Germany, so the question is not whether he was in the armed forces, from my point of view, but whether he was commissioned in the armed forces. This is a big differentiation. From my point of view and from the discussion we have—and we have a civilian advisory team to the Minister of Defence in Germany, which we contact very often—it is talked about, but for the time being, nobody is able to give numbers or really prove or at least show that it is a big issue.

• (0945)

The Chair: Mr. Samson, you have three minutes.

Mr. Darrell Samson (Sackville—Preston—Chezzetcook, Lib.): Thank you for your presentation, Dr. Mattiesen. It's always interesting to be able to compare various countries with how we do things here to support our veterans so we can continue to improve our services to those men and women.

I have a few quick questions. The first is for a bit of information around family support, which I think one individual mentioned. If veterans come back with PTSD or other challenges, what supports are there for their spouses or partners and kids?

BGen Bernd Mattiesen: There are two support possibilities. The first is the social service of the German Bundeswehr, which works not only with the soldier himself or herself, but also with the kids and the families. The second is that we have a military organization taking care of the families of our deployed soldiers. From the two big Christian churches, Catholic or Protestant, we have a lot of seminars and a lot of support for the soldiers' families.

If you refer to page 14, you might see some of the books designed for the families and even for the kids, just to show what's going on with the soldier who comes home with PTSD.

Mr. Darrell Samson: Thank you.

The second question would be about transition. Here in Canada, servicemen and women have occupational skills, certain areas of expertise in which they are outstanding in those areas in the military, but when they come back to civilian life, they don't have all the certificates or qualifications.

What type of bridging or support does your government do for those men and women?

BGen Bernd Mattiesen: In Germany, it is a rule that every soldier, be it a career soldier or a temporary career volunteer, gets one profession, at least at the rank of sergeant and higher.

The NCOs are educated in an apprenticeship, for example, as an electronic specialist or a metalwork specialist—it's hard to translate into English, no?—and the officers all get an academic degree in their profession, be it civil engineering or teaching or whatever. If a career soldier leaves, he gets a lifetime pension. If a temporary soldier leaves, he might be eligible for another apprenticeship or an academic degree, which he may do at federal expense after his work in the armed forces.

The Chair: Sorry, but we're out of time. We might have another round for you, though.

Ms. Mathyssen, you have three minutes.

Ms. Irene Mathyssen: Thank you very much, Mr. Chair.

Thank you again, Brigadier-General. I have a couple of questions to follow up.

We have heard from former members of our military and currently serving members that there is an issue in the military with regard to sexual assault. We are desperately trying to support those members.

Has this come up in your experience, and do you have supports in place for those who have suffered assault or sexual harassment?

• (0950

BGen Bernd Mattiesen: Yes, it is an issue in the German armed forces.

Within the Ministry of Defence we have established a special commissioner, a special branch for equal rights and for all the questions of sexual assault and of inequality. It has been led by a female colonel for a while now. Every soldier is entitled to apply to this institution, and if there is a complaint, it is followed up, and they are supported in the garrison also.

Ms. Irene Mathyssen: Is there any effort to find discharged survivors of sexual trauma, or do you just focus on those who are still serving?

BGen Bernd Mattiesen: We focus on those who are still serving, yes. The soldiers—or, let me say, the civilian citizens of Germany who were once members of the armed forces but left it—are no longer under military control and are no longer supported by the institution.

Just let me say that if there's a complaint of a discharged soldier against a soldier still in service, it might be different then, but the health treatment of the discharged soldier is no different from a normal civilian.

Ms. Irene Mathyssen: Thank you.

In that case, if there's a complaint against someone who is still serving, does the military handle it through their courts, or does it become a matter of the civilian courts?

BGen Bernd Mattiesen: Well, it depends. The military has a special judicial system for giving penalties, up to discharge from the armed forces, so it is always handled through the military system. We don't have military courts, if you call it that. We have special punishment within the armed forces, but it's not as high as in civilian cases.

If it's over a certain level—and this is laid down in German laws—then it's handed to the civilian side. They will carry out a normal prosecution of it by prosecutor and then a normal judgment, and then it goes back to the military. Then, in the military, the decision is made whether, in addition to the punishment given in the civilian court, there is also a need for special military punishment, which means a cut in rank or maybe even a discharge from active service.

The Chair: Ms. Mathyssen, we'll give you another three minutes on the extension now. You're on your three-minute extension. Thank you.

Ms. Irene Mathyssen: Okay. Thank you very much.

General, you mentioned deployment to Mali.

Did the German military use mefloquine with soldiers who were deploying to areas where malaria was an issue?

BGen Bernd Mattiesen: We used it.

Ms. Irene Mathyssen: Yes?

BGen Bernd Mattiesen: Yes.

Ms. Irene Mathyssen: All right. Was there an issue with those former military service personnel in regard to after-effects from using mefloquine? Has that become an issue at all?

BGen Bernd Mattiesen: After-effects have not become an issue, but there were some complaints during the mission that personnel felt psychologically altered, so we developed a system to very carefully monitor whether we had a real danger of malaria, whether we had this anopheles mosquito and there was a danger of transmitting malaria in this area or not. If there was no malaria transmitter found, then mefloquine use was ended. This was the case for Afghanistan, for example.

Ms. Irene Mathyssen: Are those who complained being treated specifically for mefloquine toxicity?

● (0955)

BGen Bernd Mattiesen: We don't have an issue with that, no. Personally, I don't remember any case of lasting problems with mefloquine. I do not remember that. That does not mean that it is not a problem, but I don't know about it.

Ms. Irene Mathyssen: Okay. Thank you. I appreciate that.

One of the things that is currently under discussion here in Canada is the idea of sacred obligation to those who were deployed outside

of the country. After your description of the laws that came into effect once Germany was involved in foreign deployment, I'm wondering if there is a sense among the German public, among members of the government, that there is this sacred obligation to those who serve their country, a sacred obligation to care for them?

BGen Bernd Mattiesen: No. I'm a little bit lost with the expression "sacred obligation". What does it mean?

Ms. Irene Mathyssen: It's the obligation of a country to care for those who served and who were injured in that service.

BGen Bernd Mattiesen: Thank you.

Yes, there is a common understanding, at least after Afghanistan, that we have to care about our soldiers and that we really have to support them. There's support coming from the press side also.

The question is not whether we do this sacred obligation or have mandatory care for them; no, the question is how we do it, in every single case.

As I said a bit tongue in cheek before, we have the ministry, the judicial side, and the lawyer side at the end. They always have big discussions, and as I told you, some lawyers are living very well on that. It was a bit tongue in cheek, but it's correct.

Ms. Irene Mathyssen: There are some lawyers living very well in this country in that regard too. Thank you.

The Chair: Thank you.

For the analysts, I have one clarifying question. How many soldiers were deployed to Afghanistan? Do you have a figure off the top of your head?

BGen Bernd Mattiesen: Let me say that overall I think it's nearly the strength of the Bundeswehr today—180,000—but that's a very rough number. It is not a true number.

We once calculated that we had 300,000 cycles. A cycle is four months. If you go for four months, it is three times a year. If you go for 10 years, you have 30 times that. We were up between 2,000 and 10,000, so you might calculate how many soldiers or whatever. Some soldiers went twice, or three or four or five times, so it's not an easy number to discuss.

If I tell you the very, very rough numbers, we had 300,000 cycles done by 150,000, and I think that's going in a good direction—

The Chair: Thank you for that.

BGen Bernd Mattiesen: —but it's very, very rough.

The Chair: It's very rough. Okay.

We have a three-minute round for Mr. Samson, and then Mr. Bratina wanted a question. I think that should do it.

Mr. Samson, you're up.

Mr. Darrell Samson: Thank you.

To continue with my series of questions concerning certification, occupational skills, and moving into the workforce, you did give me an answer there, but now I'd like to go a little deeper to ask about your relationship with the private sector in terms of hiring veterans when they finish in the military. Can you expand on that and maybe share some of the strategies that are in place?

BGen Bernd Mattiesen: Yes, I can. Indeed, in this area the German armed forces are taking good care of them.

First of all, if you have been a temporary limited-career soldier, you can apply for a position as a civil servant in the same area you had been in before. This means that if you are an NCO, you might apply for mid-level service. If you were an officer before, you can apply for higher service.

Second, the German armed forces invite civilian employers to conferences that depict the abilities of the soldiers so that the the civilian employers can have a good picture of these abilities.

Third, there's a common understanding that soldiers who were educated in doing things straight-on and thinking very logically and analytically in putting things forward are very much liked in the civilian workforce.

Normally it's not a problem to get the time-limited career soldiers into civil work. However, for the mission-related traumatized soldiers, it is indeed a problem to get these soldiers into work. Very often when it comes to this situation, they will not agree with the fact of their traumatization and will want to carry on until the day they are no longer able to.

● (1000)

Mr. Darrell Samson: Thank you.

To continue with the transition piece, do you release any serving members before all benefits and pensions and everything are in place before they leave?

BGen Bernd Mattiesen: Do you release before they leave?

Mr. Darrell Samson: For example, would all benefits be in place and all information provided so that when the member is discharged, everything is in place?

BGen Bernd Mattiesen: Yes, this is in the normal regulations, of course.

This means that normally these are time-limited career soldiers. The lifetime career soldiers are no problem. They get paid all their life, and if they are retired, they normally get 72% monthly, so they're looked after.

The time-limited soldiers get an announcement of their retirement, normally two years ahead, and then they get information about the

possibilities. They can have a date to visit social service. Most importantly, the service supports you in finding civilian employment and additional civilian education.

The Chair: That's great. Thank you.

Go ahead, Mr. Bratina.

Mr. Bob Bratina: Thanks. General.

I have a question about commemoration and how the veterans feel about society appreciating their service.

In our case, in the city of Hamilton, when our young Afghan veterans came back, we struck a pin. It was the City of Hamilton Overseas Service Pin for Afghanistan. This went over quite well, so we did it again with Korea and others.

I'd like to ask you whether there are any issues at all with your veterans and how they feel the public is appreciative of the service that they did for their country.

BGen Bernd Mattiesen: I would very much like to tell you that the work with—you call them veterans—former soldiers is on three pillars. First is the benefit and personnel support. Second is health support, whether it's medical or psychological. The third, which from my perspective is a very important one, is acceptance into society and mental support from society.

Our former soldiers are very keen on being supported and being accepted, and we have the feeling sometimes in Germany that there could still be some improvement.

Mr. Bob Bratina: That's great. Thank you very much.

The Chair: Thank you.

That ends today's questioning.

I'd like to thank the brigadier general for testifying and for all the knowledge you brought to us today. Hopefully, we'll get some of this knowledge into the report.

If anybody has any questions or if they want to receive answers back, you could get them to our clerk.

BGen Bernd Mattiesen: Thank you very much. It was nice to talk to Canada today.

The Chair: The meeting is adjourned.

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