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—
Chair

The Honourable Denis Paradis

Standing Committee on Official Languages

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• (1110)

[Translation]

The Vice-Chair (Mr. Alupa Clarke (Beauport—Limoulu, CPC)): Hello, dear colleagues, and welcome to the witnesses who are here with us this morning.

As you know, there are votes scheduled and we have to resolve some technical issues.

Mr. Tremblay, Ms. O'Donnell, I'm sorry for the inconvenience. I need a quick response from my committee colleagues.

We have two choices. We can give Mr. Tremblay 10 minutes since he is first on the list and then give Ms. O'Donnell 10 minutes when we get back or we could give the witnesses five minutes each right now. I don't want to use 20 minutes because that will leave us only 10 minutes to get to the House of Commons, which may not be enough time for some people. It is not a matter of privilege. I just want to make sure everyone gets there on time.

How would you like to proceed?

Mr. Darrell Samson (Sackville—Preston—Chezzetcook, Lib.): We could ask the witnesses what they would prefer to do.

The Vice-Chair (Mr. Alupa Clarke): Yes, that's a good idea. Ms. O'Donnell, Mr. Tremblay, what would you prefer?

What do you think, Ms. O'Donnell?

[English]

Dr. Lorraine O'Donnell (Coordinator-Researcher, Quebec English-Speaking Communities Research Network (QUESC-REN), Concordia University): Hello. My opening remarks are about eight minutes, so ideally I would be able to give them all at once.

[Translation]

The Vice-Chair (Mr. Alupa Clarke): Okay. From what I understand, Ms. O'Donnell would rather use her 10 minutes of speaking time all at once.

Mr. Tremblay, we will start with you. You have 10 minutes. We will then suspend the meeting so that my colleagues and I can go to the House to vote and then we will come back here.

Mr. Rioux, did you have a comment?

Mr. Jean Rioux (Saint-Jean, Lib.): Ms. O'Donnell may not be available that entire time. If not, we could start with her.

Mr. Tremblay, can you stay here until noon?

Mr. Michel Tremblay (General Director, Société Santé en français): Yes, no problem.

The Vice-Chair (Mr. Alupa Clarke): Ms. O'Donnell, are you free from noon until 1 p.m.?

Dr. Lorraine O'Donnell: From noon until 1 p.m.?

The Vice-Chair (Mr. Alupa Clarke): Yes.

Dr. Lorraine O'Donnell: Yes, I am.

The Vice-Chair (Mr. Alupa Clarke): Thank you very much.

We are continuing our study on the modernization of the Official Languages Act, pursuant to Standing Order 108(3)(f). Today, we are pleased to welcome Michel Tremblay, the general director of the Société Santé en français or SSF and, by video conference from Montreal, Lorraine O'Donnell, coordinator-researcher for the Quebec English-Speaking Communities Research Network at Concordia University.

Before we move on, I would like to know whether we have unanimous consent to proceed in the manner on which we just agreed.

Yes? Thank you.

Mr. Tremblay, the time is yours.

Mr. Michel Tremblay: Thank you very much.

Hello ladies and gentlemen.

On behalf of the chair of the board of directors for the Société Santé en français, Dr. Anne Leis, I thank you for the invitation to appear before your committee.

Created in 2002, the Société Santé en français is made up of a secretariat and 16 provincial and territorial networks. The purpose of the organization is to increase access to health care services in French for francophone minority communities across Canada.

The SSF and the networks have built and maintained partnerships and strong ties with policy makers, health care professionals, health services managers, post-secondary training institutions and communities. That way our communities' health care needs are on everyone's radar.

During the consultations on the renewal of the official languages action plan, Canadians across the country indicated that access to health care in their own language was a priority for their communities and themselves. That is understandable. Language is an essential element in providing safe, high quality health care and it is also a determinant of health.

Why is it important? Language barriers can be troublesome and often cause misunderstandings and misdiagnoses. They result in additional costs for health care systems and leave patients feeling powerless, stressed and dissatisfied because they don't feel understood by health professionals.

The SSF's main focus is on individuals, people like you and me, who need services in their own language, particularly when they are sick and vulnerable. Here are a few examples of real-life situations that we have encountered within the course of our work.

A seven-year-old child did not understand English and had to get chemotherapy treatments without being able to communicate directly with his medical team in his own language.

A teenager with mental health problems had to find the right words to explain what was troubling her and how she was feeling in her second language.

Francophone seniors who lived their whole lives in French or lost the use of their second language had to resign themselves to living out their days in a health care system where care providers were unable to speak their language.

An engineer from Quebec who was working somewhere in Nova Scotia took his pregnant wife to the emergency room at the hospital because she was in severe pain. They were both in a state of panic and unable to find the words in English to communicate with the health care professionals.

Often people put off going to the doctor or do not go at all. Language barriers also cause stress for health care professionals who cannot communicate effectively with their patients or offer them quality services. The message here is simple: when people are sick and vulnerable, they are not bilingual.

I will now talk about the modernization of the Official Languages Act. Together with the Consortium national de formation en santé or CNFS and with the support of legal counsel, we prepared arguments regarding the modernization of the OLA and its impact on health. In December, the CNFS and our organization finalized the document, and we sent each of you a copy.

We also helped our colleagues from the Fédération des communautés francophones et acadienne du Canada or FCFA to develop a model bill to modernize the Official Languages Act. Here is how the modernized act could improve access to health care in French.

We support the following recommendation made by the FCFA, which states:

Any agreement between the federal government and a province involving a transfer of funds must contain a binding language clause that advances the equal status and use of French and English in Canadian society and enhances the vitality and development of official language minority communities.

We cannot enhance the vitality and development of our communities without access to French-language health care services. For example, during recent negotiations between the federal, provincial and territorial governments on agreements pertaining to mental health care, home care, and palliative and end-of-life care, the CNFS and the SSF jointly recommended that Health Canada incorporate performance measures into its obligations toward our communities because communication and language issues are particularly critical in these areas.

Under the current legal framework, these services, which are made possible through federal funding, are delivered in both official languages only if the province so desires, and you know as well as I do that that does not happen in most cases.

The modernization of the Official Languages Act should make linguistic duality mandatory and non-negotiable in all transfer agreements, including those related to health.

When it comes to health care, the federal government already has the power to spend in areas of activity of its choice and can place conditions on the subsidies, conditions that would fall under the jurisdiction of the provinces and territories.

● (1115)

In the field of health, there is an instrument called the Canada Health Act, which recognizes the jurisdiction of the provinces and territories in health-related matters. It sets out five criteria that the provinces and territories must meet in order to be eligible for a contribution. They are public administration, comprehensiveness, universality, portability and accessibility.

In order to satisfy the criterion respecting universality, one hundred per cent of the insured persons of the province must be entitled to the insured health services provided on uniform terms and conditions.

In order to satisfy the criterion respecting accessibility, a province or territory's health care insurance plan must provide for insured health services on uniform terms and conditions and on a basis that does not impede or preclude, either directly or indirectly, reasonable access to those services. That includes francophones in minority communities.

In accordance with the bill proposed by the FCFA, we recommend that the modernization of the Official Languages Act include an amendment to the Canada Health Act, namely, the addition of linguistic duality as a sixth criterion. In order to satisfy that criterion, the provinces and territories would have to develop a program of access to health services for official language minority communities, taking into account the human, material and financial resources of each facility and the sociocultural and linguistic characteristics of the population served.

The OLA requires federal institutions to take positive measures to implement the federal government's commitment to enhancing the vitality of francophone and anglophone minorities in Canada, supporting their development, and fostering the full recognition and use of both French and English in Canadian society.

We believe that the OLA must be modernized to ensure that the federal health obligations are fully respected in the contribution agreements reached with national organizations, including the Canadian Institute of Health Information, the Canadian Patient Safety Institute and the Mental Health Commission of Canada.

As you are no doubt aware, scientific data is needed to make real changes. We need that data to be able to measure results and progress. We cannot change what we cannot measure. Data collection falls under the responsibility of a number of organizations. The act should require federal institutions to collect data on official languages and ensure that they are analyzed in way that is useful to the communities. I am thinking, for example, of Statistics Canada, Health Canada, the Canadian Institute for Health Information and the Public Health Agency of Canada.

What is more, the federal government could encourage the provinces and territories to collect language statistics and offer them financial incentives if they include language preference on their health cards.

Given the nature of our work, we know that institutions often do not fully understand or have misunderstood the act and their responsibilities under it. Individual responsibility and the enforcement of the act in isolation makes it very difficult to implement cross-cutting measures that would make it possible to meet the objectives of the act.

• (1120)

The Vice-Chair (Mr. Alupa Clarke): You have one minute left, Mr. Tremblay.

Mr. Michel Tremblay: Okay.

The modernization of the Official Languages Act must therefore give the federal government a clear role. In other words, the government needs to take all of the measures necessary and promote official languages within its own administration.

In closing, Health Canada depends on organizations such as the SSF and the CNFS to meet its obligations under the act. The SSF and its networks want to continue to work with our partners to help them acquire the knowledge, skills, tools and support they need to make decisions and take real action to meet the needs of our communities.

We want to continue our mission to give communities better access to health care in French and thus contribute to their vitality. We need leadership from the federal government and a robust Official Languages Act.

Francophones living in minority communities have not had access to services of equivalent quality to those provided to the majority community for far too long, and they have stopped asking for them. However, there is still a pressing need for such services. There is still a lot of work to be done and a lot of catching up to do.

Thank you for giving me an opportunity to share our perspective and recommendations as part of the study on the modernization of the Official Languages Act.

We would be pleased to answer any questions you may have.

The Vice-Chair (Mr. Alupa Clarke): Thank you for your presentation, Mr. Tremblay.

I would like to remind everyone here and Ms. O'Donnell that we need to go to the House to vote now. That is part of parliamentary life, but we like it. Thank you for your understanding.

We will meet back here after the vote. Ms. O'Donnell, you can give your presentation from noon until 12:10 p.m. We will wrap things up at 12:50 p.m. because the members of our committee really need to meet in camera to deal with some upcoming issues.

The sitting was suspended.

• (1120)

(Pause)

• (1200)

The Vice-Chair (Mr. Alupa Clarke): Without further delay, we will hear from Ms. O'Donnell from Concordia University.

Ms. O'Donnell, as planned, you have 10 minutes for your presentation. The time is yours.

Dr. Lorraine O'Donnell: Hello Mr. Paradis, Mr. Clarke, Mr. Choquette and committee members.

[*English*]

The Quebec English-Speaking Communities Research Network, QUESCREN, was founded in 2008 as a joint initiative of Concordia University, the Canadian Institute for Research on Linguistic Minorities and Canadian Heritage. Today, the Quebec government's secretariat for relations with English-speaking Quebecers also provides support.

QUESCREN is a collaborative network of institutions, researchers and stakeholders. It promotes understanding and vitality of Quebec's English-language minority communities through research, training, knowledge mobilization, networking and outreach.

Thank you for inviting me to represent QUESCREN here today. I understand that your committee is studying the modernization of the Official Languages Act with a focus on part VII, as well as compliance and the impacts of the act on Canadians. My comments are on the first and third of these topics.

Part VII commits the Canadian government to enhancing the vitality of the English and French linguistic minority communities in Canada and supporting and assisting their development.

Regarding community vitality, Dr. Richard Bourhis, a QUESCREN researcher and member, helped develop the concept. He writes that "the more vitality a group is assessed to have, the more likely it is expected to survive collectively as a distinctive linguistic community."

• (1205)

Using a vitality framework, researchers look at factors such as demography and institutional support. Studies show that Quebec's English-speaking communities lack vitality in these areas and have issues of high outmigration, underemployment and poverty. In my view, vitality is a useful concept and should be maintained in the renewed act. However, I suggest a few changes.

First, the act does not define “vitality” or detail how the government would enhance it. It would be beneficial for the modernized act to clarify these.

Second, the act does not refer to concepts used in other research that provide additional insights into official language minority communities. For instance, critical sociolinguistics and ethnology researchers such as Dr. Diane Gérin-Lajoie, another QUESCREN researcher-member, show that minority language community identity evolves and relates to other identities such as bilingual or multilingual identities.

Other researchers use intersectional and multiple minorities concepts to clarify that one can be a member of a linguistic minority and also of racial or immigrant groups, and that minority language communities have their own hierarchies of race and immigrant status. For instance, University of Alberta’s Yasmeen Abu-Laban and Claude Couture argue that referring to what they call “French/English” is binary thinking, and that it is helpful for analysis but minimizes the “complexity and nuance” needed to fully understand linguistic minorities.

It would be beneficial for the modernized act to acknowledge that official language communities are complex and diverse. Their populations have multiple identities and may belong to multiple minorities. In my view, the act’s policies and programs need to take such factors into account.

Still with regard to part VII, while Quebec’s official language community shares characteristics with francophone ones, it is also different. Its population is composed of unique and diverse regional and ethnocultural groups.

A modernized act should, in my view, continue to support official language minority community development while also explicitly acknowledging the distinctiveness and equal importance of both official language minority communities, and addressing the distinct needs and profiles of both. For the English-speaking communities, this may mean addressing vitality issues and challenges faced by vulnerable multiple minorities while also supporting the communities’ unique strengths, such as their heritage of welcoming immigrant initiatives.

I do not want to leave the impression that English-speaking Quebec is unique in its heterogeneity, or that the act should be worded in any way that treats linguistic minority communities differently. Each of Canada’s official language minority communities faces unique challenges, which is why consultation is so critical to designing positive measures that enhance their individual vitality.

My brief comments will now turn from part VII to impacts the act has on Canadians. Quebec, as you know, has a second language law, the Charter of the French Language. To my knowledge, in English-speaking Quebec, it is much better known than the Official Languages Act. QUESCREN researcher-member Dr. Paul Zanazanian has studied our community’s common historical memory about Quebec. He identifies the charter’s passage, but not the act’s, as a key event in this shared memory. Moreover, research on English-speaking Quebec has paid much more attention to the charter. A keyword search of online bibliography calls up over 450 publications on the charter and only around five on the federal act.

●(1210)

I wonder how well known the act is among other Quebecers as well. In modernizing the act, it may be useful for the government to determine how well known the act is among English-speaking Quebecers, and indeed all Quebecers, and if, as I think, it is not very well known, to consider how this might affect promotion and policy implementation.

Another aspect of the act’s impact on Canadians is perceptions of inclusion and exclusion. Prominent Canadians have addressed this issue. For instance, Drs. Abu-Laban and Couture, whom I already quoted, write that “[f]rom the stand-point of Aboriginal peoples (and postcolonial theory) there is much to question about the discourse of ‘two founding peoples.’” Likewise, a political commentator has recently identified indigenous and immigrant Canadians as groups “whose linguistic experiences occur outside” what he calls “these dated frames” of the act. He calls for the government to protect these groups’ languages, not just official languages.

My colleagues at the QUESCREN secretariat and I definitely believe that the act and its identification of official language minority communities continue to be relevant. However, we believe that it is important to be aware of critiques. Could the process of modernizing the act also somehow acknowledge or address concerns of these other populations? For instance, I wonder how the renewed act will relate to the newly tabled indigenous languages act and, in particular, outcomes for Quebec’s many English-speaking indigenous people.

In conclusion, ideally modernizing the act will help keep social cohesion in Canada at a time of social change. Drawing from QUESCREN’s own experiences, I believe that the modernization process should involve and promote the following general principles: recognition of diversity, inclusiveness and rapprochement between different linguistic and cultural communities; respectful dialogue; evidence-based decision-making; and the use of research based on different methods to capture nuance and complexity.

I will close my remarks by inviting all committee members to attend a conference that we are co-organizing. It is called “50 Years of the Official Languages Act” and it will take place in Gatineau on May 29 and 30.

Thank you for inviting me here today. *Merci*.

The Vice-Chair (Mr. Alupa Clarke): Thank you very much, Madame O’Donnell. You were able to get through your opening remarks. We see the depth of your knowledge in those kinds of issues that interest us at the committee.

We will start the round of questioning with Madame Boucher for six minutes.

[Translation]

Mrs. Sylvie Boucher (Beauport—Côte-de-Beaupré—Île d'Orléans—Charlevoix, CPC): Hello Mr. Tremblay and Ms. O'Donnell.

[English]

Thank you for being here today.

[Translation]

I have a question for you, Mr. Tremblay.

In my previous life, when I was a government member in 2006, I was responsible for the French language health services file. I would like to know whether anything has changed in that regard.

If so, what? Has the situation improved?

If not, what changes would you like to see, particularly to the Official Languages Act?

Mr. Michel Tremblay: Yes, there is no doubt that things have changed since 2006. The networks have grown increasingly strong and more and more partners have rallied around them.

We just finished an evaluation of the period from 2013 to 2018 and produced a report entitled “Destination Health 2018”. We surveyed nearly 200 people and conducted interviews. We found that progress has been made in some communities in particular.

For example, the health care system in Prince Edward Island has been including people's language preference on its health cards since 2016. PEI is the first province in Canada to do that. It will take five years before all the old cards are phased out, but we already have access to some data. That data helps us to determine seniors' home care needs. We can see who is getting home care and who is not, and we are starting to see where there are problems. A lot of progress is being made in this area.

Manitoba created a new shared health services agency. We are now working with that province on the designation of bilingual positions.

The CNFS still offers training to health professionals in Canada's French-language colleges and universities. In fact, five colleges and universities recently joined the CNFS. Progress is being made everywhere.

• (1215)

Mrs. Sylvie Boucher: Okay. If progress is being made, then that means you still have work to do.

What would you like to see included in the new modernized act moving forward?

Mr. Michel Tremblay: The example I mentioned earlier is the best one I can give you. Two years ago, \$11 billion in funding was allocated to the provinces and territories to help them in the areas of mental health, home care and palliative care. Prince Edward Island was the only province that agreed to use a portion of that funding to improve access to health care services for francophone and Acadian communities. No other province took any action in that regard because it was optional at the time.

If some of that money was used to improve access to home care and promote mental health care projects, it would help francophone and Acadian communities.

Our role is to support health care services and provide tools. We created a tool box. We also worked with Accreditation Canada to develop a language standard. We therefore have tools to help the facilities in the various provinces take action regarding French-language services.

Mrs. Sylvie Boucher: We have been talking a lot about mental health and gaps in health care. We know that health care is a problem all across Canada.

Is it a bigger problem in minority communities? Are majority communities facing the same challenge?

Mr. Michel Tremblay: It is a much bigger problem. It is difficult to find a doctor who is francophone or bilingual. It can be very difficult when a francophone shows up at the emergency room with a sick child and there are no services in French.

There is also a problem when it comes to mental health care. I haven't spoken about that yet, but soldiers and their families encounter difficulties in that regard. I've seen it in Alberta, for example. The Government of Canada is supposed to offer bilingual services to soldiers, but not all care and services can be provided on the military base itself. Sometimes soldiers need to be sent to the hospital where services are not available in their language. That is the case in Edmonton. It is difficult for people to try to find the right words in another language, particularly if they are suffering from a mental illness.

There is still a lot of work to be done. Let's not forget that our networks aren't the ones that offer the services. Our role is to support the provincial governments and the health care systems that provide the services, give them tools and encourage them to use them.

Mrs. Sylvie Boucher: What do you think is the most important thing that should be included in the new Official Languages Act?

Mr. Michel Tremblay: The addition of a linguistic duality criterion to the Canada Health Act.

Mrs. Sylvie Boucher: Thank you.

The Vice-Chair (Mr. Alupa Clarke): Mr. Samson, you have six minutes.

Mr. Darrell Samson: Thank you very much, Mr. Chair.

Thank you very much for your presentations, Mr. Tremblay and Ms. O'Donnell.

Very quickly, I would like to first ask Ms. O'Donnell a question, and then I have a different question for Mr. Tremblay.

[English]

You shared general comments around the unique challenges of various communities—francophones outside of Quebec, anglophones in Quebec, and all of the questions of consultation. I found your comment—and maybe you can expand on it—quite interesting because it seems to fit with some of the comments that have been made in the last three or four months about duality and Canadians' understanding of that duality.

You seem to draw a fine line, which is that Quebeckers, even English Quebeckers, understand law 101 in Quebec. That doesn't mean they agree with it, but they understand what it stands for and what it's about. The same goes for the Charter of Rights to some extent, but not the Official Languages Act. That's quite interesting because the same can be said of francophones, or even anglophones, across Canada. I don't believe they have a full understanding of the richness and strength of the official languages.

Dr. O'Donnell.

• (1220)

Dr. Lorraine O'Donnell: Just to clarify, when I mentioned the charter, I was referring to the Charter of the French Language. I can only reiterate that this law is very important, and that my colleagues and I support the law's main lines.

In respect of support for official language minority communities and the principle of duality, I wanted to make two points. One is that the Charter of the French Language is not as well known as Bill 101. I definitely think there's work to be done in bringing this charter and its origins to people's understanding.

The other point I wanted to make is that I know the official language minority of Quebec very well. It's a richly diverse community in itself, with many languages spoken among its members, many identities, and so-called multiple minorities. Because of this diversity, they might not even know about the act, or understand its particular relevance to what they need.

I think work is needed on both of those fronts.

Mr. Darrell Samson: That's a very good point, and I think we can learn something from it.

[Translation]

Thank you, Ms. O'Donnell.

Mr. Tremblay, I would first like to tell you what I think.

There is not enough funding for research. Research is my theme for the day. I think that official language minority communities really need research to justify the situation on the ground and to show just how disadvantaged they are and how they are still suffering. That is just a general comment.

With regard to the field of health, Mr. Vachet, a journalist who is not far from us right now, wrote an article entitled "La recherche en santé en français menacée". In it, he clearly indicated that, last August, the Hon. Ginette Petitpas Taylor announced an investment of \$378 million for 405 projects and that only one French project was approved. That is very serious.

Here's the situation. A program was put in place by the Liberals in 2004 for official language minority communities. As you are well aware, the Harper government eliminated that program in 2012, which is really unfortunate because we are now seeing the impact of those cuts.

In spite of all that, nothing has changed, and the Liberals also take responsibility for that for now.

Tell me a little bit about that program. How was it helping to advance French-language health care in Canada?

Mr. Michel Tremblay: That program supported researchers so that they could submit applications in French. It also ensured that the assessment process took into consideration the communities' challenges. However, the program was eliminated.

Since then, as you said, researchers have been choosing to submit their applications in English since the assessment is conducted by their peers and it is not always conducted by people who understand the communities' challenges.

We have small communities, and it is more difficult for us to seek support. We cannot do things the same way they are done in a large majority community.

Incidentally, the result is that most research is conducted in Manitoba, Ontario and New Brunswick. Research is not being done in the other provinces because they are being told that they do not have the numbers. There is one research group that obtained funding, but usually when funding is allocated, it is only in small amounts.

Mr. Darrell Samson: If I may say so, that comes back to the modernization of the act.

The Vice-Chair (Mr. Alupa Clarke): You have 10 seconds left.

Mr. Darrell Samson: Before the programs are even developed, when they are still in the planning phases, it is essential to take into account language issues and to ensure that official language minority communities, whether anglophone communities in Quebec or francophone communities in other parts of Canada, are at the table.

• (1225)

The Vice-Chair (Mr. Alupa Clarke): We need to move on.

Mr. Choquette, the floor is yours.

Mr. François Choquette (Drummond, NDP): Thank you, Mr. Chair.

Thank you very much, Mr. Tremblay.

Thank you very much Ms. O'Donnell for being with us via video conference today.

I will start with you, Ms. O'Donnell.

I have a question about something you mentioned.

[English]

Regarding part VII of the Official Languages Act, you talked about the word "vitality". This word may exist in English, I don't know. You said that you need to define this word, and to make sure that people understand the concept very well. You talked a lot about the fact that across Canada, not only in Quebec, the French and other language communities are changing; they are in evolution. It's very interesting to talk about the diversity of the communities. Have you thought about the definition of "vitality"? Is there research that has been done on this? What can you bring to the table on this question?

Dr. Lorraine O'Donnell: Yes. I did not think to bring a definition with me. Dr. Richard Bourhis is a scholar from UQAM, l'Université du Québec à Montréal, who is one of our researcher-members. He was instrumental in creating the definition of "community vitality" some years ago. He would be interested, I'm sure, in discussing it with you.

There is also research I'd be happy to share with your committee.

Mr. François Choquette: Yes, I think we absolutely need that kind of definition. That will help us a lot.

[Translation]

Mr. Tremblay, you spoke about the much talked-about language clause and added the word “binding”. To my knowledge, adding the word “binding” is something new.

We want language clauses in the agreements with the provinces. However, you mentioned that only one province has a language clause, if I understood correctly, or only one province has a binding language clause. I'm not sure of the details. Why is it so difficult for the provinces to get these language clauses? How can we improve federal-provincial relations?

The problem remains. The provinces will say that it falls under their jurisdiction while official languages fall under federal jurisdiction. Investments are being made, but it makes sense to have language clauses.

What approach should the federal government take to relieve this tension between the federal and provincial governments?

Mr. Michel Tremblay: The representatives of the two levels of government have to talk.

It is not currently a huge issue for many provinces. Access to health is considered a public good, people request it. What I said in my presentation, and I want to clarify this point, was that the federal government can't necessarily tell the provinces what to do. It is a provincial jurisdiction, as you stated. However, the government, because of its spending power, can add a condition such as linguistic duality. People can do that.

The federal government cannot say to a certain group that home care must be provided in a certain way, or that mental health problems must be addressed in a certain way. However, the federal government can say that access federal funds is subject to certain conditions. The federal government has the spending power and if the provinces want to access funds, they should put in place measures to support official language minority communities.

Mr. François Choquette: With respect to the Canada Health Act, you want to add a sixth condition.

Therefore, an amendment should be made to the Canada Health Act rather than modernizing the Official Languages Act. Is that right?

• (1230)

Mr. Michel Tremblay: It could be done in two ways.

Mr. François Choquette: All right, please expand on that.

Mr. Michel Tremblay: This is already in the bill prepared by the FCFA, which would also benefit us. In our brief, we also recommend that this be done by amending the Canada Health Act.

Mr. François Choquette: Therefore, this could be done in two ways.

What exactly is the sixth condition?

Mr. Michel Tremblay: Linguistic duality.

Mr. François Choquette: In your view, how would this further strengthen the act?

Mr. Michel Tremblay: It would be part of the negotiations between the federal government and the provinces and territories concerning funding. They would have to show how they would implement services or programs that meet community needs.

Mr. François Choquette: Perfect.

How much more time do I have, Mr. Vice-Chair?

The Vice-Chair (Mr. Alupa Clarke): You have 15 seconds.

Mr. François Choquette: In 15 seconds I just want to thank you once again for being here and providing your input on the modernization of the Official Languages Act.

The Vice-Chair (Mr. Alupa Clarke): Thank you, Mr. Choquette.

Ms. Lambropoulos, you now have the floor.

Ms. Emmanuella Lambropoulos (Saint-Laurent, Lib.): I would like to thank the two witnesses for being here today.

[English]

Ms. O'Donnell, my questions are going to be for you, specifically.

You mentioned in your opening statement that the act is not as well-known among the anglophone community in Quebec as the Charter of the French Language. I guess it's for obvious reasons, in some ways.

How do you think being aware of the act would help this community better thrive?

Dr. Lorraine O'Donnell: I'm sorry; there was background noise. There was an emergency announcement here at Concordia.

You asked how the act could become better known, or how that would improve the situation.

Ms. Emmanuella Lambropoulos: I asked if it being better known would help the community.

Dr. Lorraine O'Donnell: I wanted to emphasize that, in the act not being well known, as far as I understand it, it means that when we talk about support for official language minority communities—for instance, support for our partners at Quebec Community Groups Network, and the many partner groups, including my own.... I might say that the QUESCREN people don't necessarily understand where the money is coming from, why it is there, how these groups support them and can represent them, so that when media situations arise, when official language situations arise, they don't necessarily make the link between the federal legislation and being self-aware as a linguistic minority community and the existence of the groups.

I would also like to make a more general point that, according to what the research says, it was really with *la loi 101* that the English-speaking community became self-aware as a minority, even though it always had been a minority, numerically speaking. The community still, I would say, would benefit from more self-awareness as a linguistic minority community. It would affect its capacity to organize and its capacity to express its needs, request support and so on.

Ms. Emmanuela Lambropoulos: You also spoke about the diversity that exists within this minority community. I have seen first-hand quite a bit of that, and I guess I'm part of it myself. As much as certain individuals within certain different communities consider themselves anglophone, communities themselves have difficulty associating with the anglophone community because it might punish them in other ways. For example, I'm not going to name specific communities, but there are some communities that run schools that are language-based. So they'll have an Italian school, let's say—I'm just throwing that out there; I don't know if this actually exists for the Italian community—that teaches French, English and Italian, and if they consider themselves to be an anglophone community, they might not receive the same supports from the education minister.

This is what they believe, and this is a fear that certain groups have. They're afraid of being part of that community. What can you say to these groups?

Dr. Lorraine O'Donnell: First of all I think it's important to recognize that, when we talk about official language minority communities in Quebec, it's an inclusive definition. I'll get a little technical. It includes what Statistics Canada calls those people whose first official language spoken was English. In other words, it might not be their mother tongue, but according to the way the Canadian government counts English speakers, it is their official language. First of all, I would reach out to those groups and say there are supports and resources available to them if they understand how the English-speaking community works.

Just to be clear, within the Quebec government, generally English speakers are identified by mother tongue. It's a different way of counting, and first official language counting includes more people.

In terms of what advantages it offers specific groups, it's absolutely through networking, through being part of a large group that there's know-how and possibilities for work together, for initiatives, for learning from each other—for example, through educational and research activities. The advantages are definitely there.

That being said, I'm well aware of the situation you are mentioning. I remember talking to a friend of mine who was in fact of Italian heritage, and she said to me in English, “I'm not an Anglo”, and for her that meant British. We had a discussion kind of like I just said.

• (1235)

Ms. Emmanuela Lambropoulos: I have one minute left, so I will just be a little bit more specific about what I was mentioning. People who do have English as their first official language don't want their institutions to be related to the anglophone community because, even though they can get benefits from the Official Languages Act and from Heritage Canada and these things, they fear that the Quebec government would stop funding them for certain things.

Dr. Lorraine O'Donnell: While I cannot speak specifically about the ins and outs of educational funding, what I can say is that we have noticed, since 2017, a very heartening positive situation with the Quebec government, with the creation of a new body called the Secretariat for relations with English-speaking Quebecers. That body

is very research oriented, and its mandate includes reaching out to different communities—regional, ethnocultural—and also to the Quebec government, to improve knowledge and relationships.

I would encourage such groups to reach out to this secretariat.

The Vice-Chair (Mr. Alupa Clarke): Thank you very much, Madam O'Donnell.

Now we have two rounds left of four minutes each.

[*Translation*]

Mrs. Fortier.

Mrs. Mona Fortier (Ottawa—Vanier, Lib.): Thank you very much, Mr. Chair.

Mr. Tremblay, thank you for being here today. I am very pleased that you were able to share some concerns that others have raised.

I would like you to tell us more about data, because this is a very worrisome issue at present. As you mentioned, it is difficult to develop policies that consider community needs.

I believe that a committee was abolished in 2014. I am not sure about the date.

Mr. Darrell Samson: It was 2012.

Mrs. Mona Fortier: Okay. It was a consultative committee on research at the Canadian Institute for Health Information, or CIHI. This committee was chaired by Dr. Prud'homme.

Should we create a similar committee in the different authorities or should we instead implement other measures to add the language variable?

Mr. Michel Tremblay: Thank you very much for the question, Mrs. Fortier. You are my MP.

I would like to add that a new committee was created two years ago. I am referring to Health Canada's Federal Health Portfolio Consultative Committee for Official Language Minority Communities in Canada, or OLMC. This committee existed in the past. It was abolished in 2007, but then re-established two years ago.

This committee brings together people from the CNFS, the SSF and, on the Quebec side, the Community Health and Social Services Network, or CHSSN, McGill University, the Public Health Agency of Canada, the Canadian Institutes of Health Research and Health Canada. It meets twice a year. We have established a work plan and linguistic data is one of the topics. It is the subject of our next meeting in May.

At present, representatives of the SSF, CNFS, Health Canada and CIHI, are working on this file together. The only thing we need to add is the research component, which is really important. We also need to know what kind of data is required. Statistics Canada also has a consultative committee looking into this.

• (1240)

Mrs. Mona Fortier: What this committee is trying to determine is how, as part of the process of modernizing the act, we can include measures to ensure that the government meets these needs. What would be the best formula, a formula that would need to be in the act?

Mr. Michel Tremblay: The SSF and many other organizations believe that including the language variable on the health card is important. The CIHI collects the information reported on the health card. When people apply for a health card, they are not in a vulnerable state. They will indicate their mother tongue.

We realized that this is what happens in Prince Edward Island. People are asked to indicate their mother tongue. About one hundred languages can be found on health cards, but we also ask which official language they are most comfortable with.

We can obtain linguistic data on indigenous people and other groups. It is a way of helping other groups, not just francophones and anglophones.

Mrs. Mona Fortier: I know I do not have much time left.

The Vice-Chair (Mr. Alupa Clarke): You have 30 seconds.

Mrs. Mona Fortier: All right.

In your brief, you state that a binding clause could be added to federal-provincial agreements to ensure that we add not just the language variable but also funding for the services needed on the ground. That is interesting and we need to reinforce that in the act.

Mr. Michel Tremblay: And accountability.

Mrs. Mona Fortier: Yes.

Mr. Alupa Clarke: Thank you.

Mr. G n reux, you now have four minutes.

Mr. Bernard G n reux (Montmagny—L'Islet—Kamouraska—Rivi re-du-Loup, CPC): Thank you, Mr. Chair.

Mr. Tremblay, you would like to add a clause to the Canada Health Act to support the application of the Official Languages Act. You will tell me if I have misunderstood. However, if we did that, would we be creating a precedent? Other departments or organizations might think that was a good idea and want to change certain laws to facilitate the application of other laws.

I am trying to make the connection between the two. If we were to amend the Canada Health Act, we would be supporting the application of the Official Languages Act. Is that correct?

Mr. Michel Tremblay: I am not a legal expert.

Mr. Bernard G n reux: I'm glad to hear it, neither am I.

Mr. Michel Tremblay: If we look at the issue of linguistic duality, it's about language. If we amend the Official Languages Act, it could amend another law.

Mr. Bernard G n reux: The people we have heard to date, and those who might at some point interpret today's meeting, might think that because this was proposed for the health sector it could be done by other departments. They might also think that if they raised their hand and asked for a change in their department, they might be able to better apply the Official Languages Act.

How will the amendment to the Canada Health Act ensure a better application of the Official Languages Act?

You spoke about linguistic duality. I realize that linguistic duality is important, but it could be included in the part on linguistic duality in the amendment to be made to the act.

Do you believe that the Canada Health Act will still have to be amended if we do that?

Mr. Michel Tremblay: The other option would be to include a binding clause on linguistic duality in the agreements between the federal government and provincial and territorial governments.

Mr. Bernard G n reux: In this context, we are referring specifically to the provinces, since health is a provincial jurisdiction.

Does this potentially make the application of the act more complex? Will it help the situation?

Mr. Michel Tremblay: There are many recent examples.

There is the issue of early learning and child care, which is also a provincial jurisdiction, and the federal government was able to negotiate with the provinces on that issue. In Alberta, there was a language clause requiring a portion of the funds for early learning and child care to be allocated to services in French. There are other areas where this occurs, for example in education, even though this element is in the Constitution.

There are other areas of provincial jurisdiction where the federal government, as a result of its spending powers, goes ahead and asks for linguistic duality to be considered.

Mr. Bernard G n reux: That's all for me, Mr. Chair.

The Vice-Chair (Mr. Alupa Clarke): Very well.

I would like to thank our two witnesses who gave their presentations in spite of the interruption for voting.

Mr. Tremblay, please continue your good work on the official languages in the health sector in order to help French-language communities in particular.

• (1245)

Mr. Michel Tremblay: Thank you.

[English]

The Vice-Chair (Mr. Alupa Clarke): Madame O'Donnell, thank you very much for your time and understanding throughout our session.

This is just a reminder for both of you that, if you have any documents you want us to take a look at or supplementary information, you can always send it to the clerk of the committee, and she will distribute it to us through email.

[Translation]

Thank you very much.

[English]

I will suspend now so we can go in camera, which is very important. We have 10 minutes of committee business to do.

[Translation]

The meeting is suspended.

[Proceedings continue in camera.]

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