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Speaker: The Honourable Anthony Rota



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HOUSE OF COMMONS

Tuesday, December 8, 2020

The House met at 10 a.m.

Prayer

ROUTINE PROCEEDINGS

• (1005)

[*English*]

CANADA POST CORPORATION ACT

Mr. Dan Albas (Central Okanagan—Similkameen—Nicola, CPC) moved for leave to introduce Bill C-260, An Act to amend the Canada Post Corporation Act.

He said: Mr. Speaker, I am certainly pleased to rise today to table my private member's bill, Bill C-260, entitled an act to amend the Canada Post Corporation Act. The title of the bill may sound simple, and that is intentional. That is because it is simple. The bill intends to amend the Canada Post Corporation Act to allow Canadians to order and enjoy their favourite wine, spirit or craft beer from any province or territory from sea to sea, without restriction, delivered to their doorstep by the fine employees of Canada Post.

As it currently stands, many Canadians cannot find their preferred wine, spirit or craft beer on the shelf of their local stores, and Canadian producers are unable to ship their product because of these archaic and outdated interprovincial restrictions that continue to vex this country. This not only stands in the way of the enjoyment of these products by all Canadians, but also hurts these small and medium-sized businesses by limiting who they can sell and ship to.

The COVID-19 pandemic has made it clear that Canadians feel more comfortable and safe shopping online or over the phone. This simple amendment would not only increase the happiness of Canadians and allow them to shop safely, but also help the small businesses that are seeing a sharp decrease in their local foot traffic because of the pandemic.

I am confident that all members in this place will join me in supporting this bill to enact a simple amendment and open the taps to all Canadians.

(Motions deemed adopted, bill read the first time and printed)

PETITIONS

INSECTICIDES

Ms. Elizabeth May (Saanich—Gulf Islands, GP): Mr. Speaker, I am rising today in Parliament to present a petition dealing with an issue that is of grave concern to many constituents. It is the issue of neonicotinoid insecticides and particularly their impact on pollinators. The petitioners call on the government to take action to follow the lead of the European Union, adhere to the cautionary principle and ban the use of neonicotinoid pesticides in Canada.

[*Translation*]

FALUN GONG

Mr. Pierre Paul-Hus (Charlesbourg—Haute-Saint-Charles, CPC): Mr. Speaker, I am proud to rise in the House this morning to present a petition signed by Canadians who want to remind the government that the Chinese Communist Party has committed crimes against the Falun Gong community. The petitioners want the people involved in these crimes to be sanctioned under the Magnitsky Law.

I will read part of the petition:

For over 21 years, China's communist party officials have orchestrated the torture and killing of large numbers of people who practice Falun Gong, a spiritual discipline promoting the principles of "Truth, Compassion and Tolerance", including the killing of practitioners on a mass scale for their vital organs to fuel the communist regime's organ transplant trade.

Members of Falun Gong have been making representations for years, and a number of MPs from all parties have supported their requests. Today I am pleased to table this petition in the House.

[*English*]

THE ENVIRONMENT

Mr. Richard Cannings (South Okanagan—West Kootenay, NDP): Mr. Speaker, I rise to present a petition from young people from across my riding of South Okanagan—West Kootenay and the neighbouring riding of Kootenay—Columbia. These young people are concerned about the increasing impacts of climate change. They point out that the government's targets and actions are woefully inadequate, and they want jobs that are sustainable, not for short-term gain at the expense of future generations.

Government Orders

The petitioners ask the government to support their future with a detailed climate strategy based on science. They want to eliminate fossil fuels subsidies and redirect those funds to renewable energy, energy efficiency, low-carbon transportation and job training.

* * *

QUESTIONS ON THE ORDER PAPER

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, I ask that all questions be allowed to stand.

The Deputy Speaker: Is that agreed?

Some hon. members: Agreed.

GOVERNMENT ORDERS

[English]

CRIMINAL CODE

The House resumed from December 4 consideration of the motion that Bill C-7, An Act to amend the Criminal Code (medical assistance in dying), be read the third time and passed.

Hon. Erin O'Toole (Leader of the Opposition, CPC): Mr. Speaker, it my pleasure to rise on behalf of the Conservative Party on probably the most important bill before this Parliament. I say that, without knowing how long this Parliament will run, because this is a decision with respect to the state interacting with one of its citizens at end of life.

This is probably one of the most important debates this Parliament will have, and if there is commentary coming from the government or from some pundits on why we are late and why we are approaching a time limit, that was entirely in the hands of the government for three reasons.

First, the government decided, with no reason and no grounds, to prorogue Parliament. We lost several months that could have been spent having substantive and compassionate debate on Bill C-7 and a range of other things.

Second, the bill results from a Superior Court judgment in Quebec, and normally something so fundamental would have been appealed to two higher courts: the Court of Appeal in Quebec and the Supreme Court of Canada. That was not done, and it should have been. Most legal observers believe this should have been the case.

Finally, as we may hear from the government and the Attorney General today, they could have asked for more time, given the proration, their own delays and the pandemic. I think they will end up doing that today, and that is appropriate.

• (1010)

[Translation]

We are getting close to the deadline for this bill because of the government's inaction. The government was slow to appeal a Quebec court decision. The government also prorogued Parliament. That is why we are so close to a deadline set by a Quebec court decision.

[English]

As I said when I spoke to the previous bill, now Bill C-7, four and a half to five years ago, when we debate the role of the state at the end of life of one of its citizens, there is compassion on both sides. There are people who do not want to see the suffering of someone near the end of life.

I will speak to the Sue Rodriguez case, when the Supreme Court was first charged with this. Someone with ALS, or Lou Gehrig's disease, loses their physical abilities and is confined in a horrible way. Approaching end of life, are they able to consent in the same way that someone would otherwise and make their own decisions about end of life?

There is compassion from people who want the well-being of their loved ones to be provided for. There is also compassion from people who are concerned about the state making determinations about quality of life. In fact, the justice in Quebec quoted many speeches from the last Parliament on the previous bill, following the Carter decision, including my speech. I talked about the concerns of a slippery slope and that we would be back in a few years. I said more vulnerable people might be swept into a law, and I am sad to say that is exactly where we are.

As a parliamentarian, a lawyer, a father and the son of a brave woman who fought cancer, with profound memories of her from the palliative stage of that disease when I was nine, I am here to make sure the bill is debated properly and that safeguards are provided. Anyone who suggests we should be rushing this debate does not understand how profound it is.

[Translation]

Today's debate should be approached with respect and compassion. It is not a normal debate on normal policies. We are talking about the power of the government to take away a person's life at that person's request. It is a very serious action, and the debate that seeks to establish an appropriate legal framework is a necessary one. We are talking here about the value of human life, about human dignity.

I know that people on both sides of this debate have good intentions, but I am concerned that the bill is a first dent in the value we place on life. It is a slippery slope that we should not be taking with such a vague law and no safeguards.

[English]

In the Rodriguez decision, Justice Sopinka, who represented the Supreme Court at the time in the 1990s, talked about the distinction of a passive role of the state and an active role of the state at the end of life. “Passive” refers to palliative care, assistance with pain and, potentially, non-intervention, do not resuscitate, but the active role, when the state takes that role, attaches to section 7 of the charter, which is based on human dignity. The Attorney General clerked under Peter Cory of the same court, and in fact, the McLachlin and Cory dissents both focused on human dignity with respect to section 7 of the charter.

All of them talked about the role of the state in protecting the decisionally vulnerable, as they were called, people who could be pushed into end-of-life treatment because they felt they were a burden. This has been talked about since the 1990s, and this Attorney General is removing the safeguards from our regime. Every ounce of case law on the issue of assisted dying, euthanasia or assisted suicide talks about protecting those vulnerable.

That went on in the Carter decision, which reinterpreted and changed the stare decisis, the precedent of the Rodriguez decision, because of societal norms, but the one thing that did not change was the need for safeguards. In fact, the Carter court said that a “carefully designed...system of safeguards” was required and that they would be scrupulously monitored.

That is the only way the Carter decision changed the Rodriguez decision and allowed there to be assisted dying in Canada. However, Bill C-7 does not provide for assisted dying. It provides for assisted suicide, where the end of life, the reasonably foreseeable death, is removed entirely, and it removes the safeguards that every decision of the court on this subject has said are fundamental to the state having a role at end of life.

The Attorney General seems to be out of touch with the entire body of case law with respect to assisted death. I think it is shameful that he is not allowing reasonable amendments to reinsert a scrupulous approach to the vulnerable. He is removing the 10-day waiting period. There is no coming back from this decision, and when the state plays an active role in the death of its citizens, the two-witness requirement is also removed.

The Attorney General, who is entirely out of touch with the case law in Canada, out of touch with the decision of Mr. Cory whom he clerked for, is rushing something, suggesting we are being unreasonable, when all Conservatives want to do is safeguard the decisionally vulnerable, something both Supreme Court decisions in Rodriguez and Carter said was critical to human dignity, section 7 of the charter. All disability groups are opposed to this bill the way the government is presenting it because of the removal of safeguards and because of the redefinition.

Inclusion Canada's Krista Carr said:

Equating assisted suicide with an equality right is a moral affront. Having a disability should not become an acceptable reason for state-provided suicide. MAiD should remain restricted to the end of life.

One of the leading scholars, which I would invite the Attorney General to review, Professor Grant from the University of British Columbia, said:

Government Orders

Disability organizations hear almost daily from individuals who are considering MAiD because the appalling lack of state supports makes life intolerable. It may be because they are institutionalized, because they cannot afford treatment, or because they are socially isolated. We have seen the social inequality of illness with COVID-19.

• (1015)

The government is a little upset the Conservative caucus is demanding what two decisions of the Supreme Court have demanded and is asking for, reasonably, what section 7 of the charter is built upon, which is dignity of life, to make sure we do not change the regime in a manner I spoke about five years ago: a slippery slope for the decisionally vulnerable such as the elderly isolated in a home.

We heard testimony of some people feeling like they were pushed or pressured because of the cost or lack of institutional care. Some of the professors and some of the indigenous witnesses who have raised concerns also raise concerns about generational trauma, residential schools and people who are facing that trauma and pain in their lives. Is the state then going to provide assisted suicide as a tool or should we help these people?

This is about compassion. This is about an appropriate role for the state. This is not about fundamentally changing a regime that has only been in place for a few years.

I said at the outset there is compassion on both sides, but there is an entirely out-of-step approach from the Attorney General. In fact, the former attorney general, the member for Vancouver Granville, has also criticized the reckless approach of this Attorney General with respect to the post-Carter decision regime, because he would be removing the safeguards both courts have said need to be scrupulously monitored: 10 days, a few witnesses.

All major disability groups in Canada agree with the compassionate and reasonable position being presented by my Conservative colleagues. I am very proud of the advocacy we have shown. We have also been joined by legal scholars, indigenous leaders and people working with people with mental health issues. I have worked on mental health and suicide prevention for many years since my time in the military.

We are also not providing enough palliative care support. Going back to the original Rodriguez framework, where Justice Sopinka talked about the passive role of the state, allowing someone's life to end without pain and to be present, allowing family gathering at palliative, we are not doing that well enough.

Government Orders

The government has actually violated the spirit of the Carter decision by removing the safeguards. Remember, the safeguards, the carefully designed safeguards, were fundamental to the Supreme Court Carter decision change from Rodriguez. Why after a few years would the government remove those, particularly when some of the vulnerable Canadians, seniors and disability rights advocates, have said they feel under attack? In fact, another comment Ms. Carr made is that Bill C-7 is their “worst nightmare”.

What is the job of Parliament? We are not just delegates here to be polled. We are here to bring our perspective in the Burkean tradition of being passionate representatives for our communities, our families, our values and our points of view. I cannot think of a more important debate for us to bring those values.

As the Supreme Court said back in Rodriguez and throughout, this is about human dignity with respect to access to section 7. The early debate, both in Carter and Rodriguez, was always that we cannot have an unfairness for someone who cannot physically make a decision about end-of-life suicide, so we have to have an approach. That was McLachlin's approach in the dissent in Rodriguez. She thought that choice was cruel with respect to Sue Rodriguez.

It was never about just having a widespread approach to assisted suicide with no irremediable or reasonably foreseeable death being a part of it. Now this is opening up a state-run regime with respect to suicide, with vague terms about grievous conditions or just disability writ large. The same concerns I raised reasonably a few years ago around people with mental health issues, who could get help if we are there for them, or people who are decisionally vulnerable, as the court said for now a generation, are why the safeguards are there.

• (1020)

The government should not lecture us about timelines when it prorogued Parliament and when it did not appeal a superior court decision on a fundamental issue just a few years after the Supreme Court ruled in Carter. It is now ignoring disability advocates. It is ignoring indigenous leaders. It is ignoring physicians, legal scholars and the opposition. What are we demanding? We are not saying eliminate the system that was established in the last Parliament. We are saying to maintain the safeguards. There would be no Supreme Court right under section 7 of the charter were it not for the safeguards.

I am proud that the Conservative opposition is not going to step away and allow our vulnerable to be forgotten. We are going to scrupulously maintain the safeguards that the state should have when we are making profound decisions about the end of life of our citizens. We are here for the people without a voice. We are here for the people who might feel coerced, in isolation during a pandemic, into an end-of-life regime without full capacity and consent.

If we step outside the bubble, I do not care what political party one belongs to or associates with, all Canadians want to make sure the vulnerable are provided for. That is all we are asking. If we have to stay here for 24 hours a day, seven days a week to stand up for those Canadians, we will do that.

Who is being unreasonable? Is it the Attorney General, who does not understand the entire body of jurisprudence with respect to assisted death? I am actually very disappointed. He was a law professor at McGill and seems to have not read the Rodriguez and Carter decisions. He is removing safeguards that are fundamental to protecting the decisionally vulnerable as per Sopinka, McLachlin and Cory in Rodriguez, and the McLachlin court in Carter.

Every single indication from the Supreme Court of Canada says that we cannot have end-of-life assisted dying, assisted suicide, euthanasia or whatever words someone uses, that section 7 charter right cannot be accessed without a very carefully crafted and scrupulously governed system of safeguards. This includes a 10-day review period to make sure somebody was not at their lowest point and then the state moves in, and two witnesses to make sure that there is not someone vulnerable being forced or coerced into it. These are very reasonable amendments that not just Conservative MPs are asking for, but Canadians are asking for.

• (1025)

[*Translation*]

We are adopting a reasonable approach by proposing amendments to the bill on medical assistance in dying. It is a critical issue for our society and that is why we, the official opposition, are here to defend the most vulnerable members of our society. That is why we already proposed reasonable amendments for seniors, people with disabilities and Canadians with mental health problems.

This is a very important debate for the well-being of Canadians across the country. That is why I am proud of my caucus, whose approach to Bill C-7 is very compassionate and defends the most vulnerable members of our society.

[*English*]

It is up to the government. Today, it might be asking for a delay from the court, which is something it should have done months ago. It should have appealed the decision or not prorogued Parliament. Even with the fact that we feel there is a deadline, we should not lose sight of who we are safeguarding.

When we come to the bar and bow to you, Madam Speaker, that is because Parliament is a court. It is the highest court and we have a dialogue with the Supreme Court on decisions related to the charter. Parliament is supreme. When the government suggests we are being unreasonable because we want to keep with the spirit of the Carter decision, this court should be respected that as well. I have not seen this from the government yet.

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If the government just reviewed the Carter and Rodriguez decisions and provided those safeguards, held up the dignity required under section 7 of the charter, we could ensure that the right guaranteed in Carter would be respected with a rigorous and scrupulous approach to protecting the decisionally vulnerable and most vulnerable in our society. The Conservatives are here to provide those reasonable amendments for the well-being of our country.

I appreciate the opportunity today to allow Canadians to realize that it is not the Conservative Party holding up legislation or not respecting a court. This is the Conservative Party asking for the will of the Supreme Court, through these two decisions, for our most vulnerable in society to be protected.

• (1030)

[*Translation*]

Mr. Stéphane Lauzon (Parliamentary Secretary to the Minister of Seniors, Lib.): Madam Speaker, I want to thank my colleague, the leader of the official opposition, for his speech.

We are accountable to Quebeckers and Canadians, as well as to the Quebec Superior Court.

I would like to know how the leader of the official opposition can believe it is appropriate to disregard a decision from the Quebec Superior Court.

Hon. Erin O'Toole: Madam Speaker, what is appropriate is to protect the most vulnerable in our society. That was actually the essence of the Supreme Court of Canada's decision in both Rodriguez and Carter.

Unfortunately, that was not the Liberal government's approach. Now here we are, with the deadline fast approaching, because of prorogation. We are here because of the government's inaction. That is why we are proposing reasonable amendments. That is why we will continue to protect the most vulnerable, including seniors at the Herron long-term care centre, for example, who are very isolated.

We are here for Canadians, people with disabilities and seniors. That is why the amendments, the safeguards, are so important.

[*English*]

Ms. Leah Gazan (Winnipeg Centre, NDP): Madam Speaker, I want to make a correction. The hon. member spoke a lot about mental health, but the bill explicitly states, in paragraph (2.1), "For the purposes of paragraph (2)?(a), a mental illness is not considered to be an illness, disease or disability." Then, if we go "Safeguards", paragraph (3.1), one of the criteria is "that the person meets all of the criteria set out in subsection (1)". I say that because this is a critical debate in the House and we are responsible for providing the Canadian public with accurate information.

He spoke a lot about dignity. I know, from the advocates I have worked with in the disability community, that one of the things they are fighting for is a guaranteed liveable basic income so they can live in dignity. Does the member opposite support implementing a guaranteed liveable basic income as has been requested from the disability community?

Hon. Erin O'Toole: Madam Speaker, I would like to thank the member for Winnipeg Centre for raising what she perceives is a

carve-out for mental health. The challenge is this. Mental health can be approached with a psychiatry handbook and a recognized condition. Mental health can also be someone who is in depression in a grievous harmful situation, isolated in a pandemic, a senior who feels her or she is a burden on his or her family. That is why, going back to the Rodriguez and Carter decisions, which I would invite all members to read, including the Attorney General, consent and capacity and 10-day review is to ensure there is no state-of-mind issue for someone is feeling coerced or vulnerable.

Mental health is a part of the end-of-life decision, the stress and pain, all those considerations. That is why the Carter decision said that a carefully designed system of safeguards was critical. The government does not have that. We are asking for reasonable safeguards to protect our most vulnerable.

• (1035)

Mr. Arif Virani (Parliamentary Secretary to the Minister of Justice and Attorney General of Canada, Lib.): Madam Speaker, I appreciate the contributions of the Leader of the Opposition. I would put out that safeguards have in fact been increased in the legislation, particularly in track two with respect to the 90-day requirement for an assessment and the expertise being required as part of that assessment panel.

When we consider why track two is appropriate, the member opposite went to great lengths to cite extensive jurisprudence. The jurisprudence in the Truchon decision indicated that not making medical assistance in dying available to persons who were not at the end of life, including persons with disability, like Madam Gladu and Monsieur Truchon, was itself unconstitutional.

Given that we have dealt with extensive consultations, given that Canadians are needlessly suffering and given that we have straight-forward legislation before us, will the member opposite use his leadership with respect to his caucus to ensure we can have a vote on the legislation to address, and no longer prolong, the needless suffering of Canadians?

Hon. Erin O'Toole: Madam Speaker, when the government removed the irremediable, it changed this from an assisted dying regime into an assisted suicide regime. The hon. parliamentary secretary is recognizing that in his own comments.

The government is removing some of the safeguards. It is making it easier to access, making more decisionally vulnerable people vulnerable and removing two of the safeguards in the process. It actually flies directly in the face of Rodriguez and Carter's clarity on dignity and on the decisionally vulnerable.

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I would ask the hon. parliamentary secretary to use his leadership. Our amendments really just ask the government to stop eroding protections. The government is running roughshod over what the court has said. When it takes out that approaching reasonably foreseeable death, that is gone. That should concern Canadians, particularly as we have seen the isolation in this pandemic for some of our seniors, that fear. They are the decisionally vulnerable. That is who the courts have been asking us to look after.

I would like the hon. parliamentary secretary to use his leadership, perhaps dropping a copy of those judgments off with the Attorney General. The former attorney general, who passed the regime following the Carter decision, a former Liberal until she was pushed by the Prime Minister, has concerns with the approach as do disability groups, a lot of indigenous leaders, mental health physicians and the opposition. All we are asking for is a few reasonable safeguards. It is up to the hon. parliamentary secretary to put down the talking points.

When the Liberals decided to prorogue, they put the time pressure on. We will continue to stand up for our most vulnerable.

Hon. Michelle Rempel Garner (Calgary Nose Hill, CPC): Mr. Speaker, we have heard the Leader of the Opposition outline how the bill shifts toward an assisted suicide regime. Then we heard the parliamentary secretary talk about Canadians who were needlessly suffering. I am concerned about the intersection of those two points without the state looking at doing everything possible to preserve the ability of Canadians to live with dignity.

Could the Leader of the Opposition talk about the need for the government to move on issues like support for persons with disability, housing, palliative care and the atrocities we see in long-term centres across the country right now? Could the Leader of the Opposition talk about how it is not just about this legislation, but that there needs to be a framework in which people are not needlessly suffering because they see hope and a choice through other services and programs?

Hon. Erin O'Toole: Madam Speaker, I would like to thank my colleague from Calgary Nose Hill for her advocacy for some of the folks we are talking about.

As was said by some legal scholars, by Prof. Grant, UBC and others, when we do not even have efficient palliative, end of life, care, when we have some challenges with long-term care, those holes and gaps have been exposed through the pressures of COVID, when we know there are rising mental health issues, there is trauma experienced by those who have suffered childhood abuse and other things, when our society is scrambling to get supports for the vulnerable to address those issues, but on the other hand is actually eroding safeguards to keep those people out of a state-run system with respect to end of life, we are failing our citizens.

Our approach here is to ensure that the vulnerable are protected. As I said to the former Liberal attorney general, who brought in the post-Carter regime, I was becoming comfortable with the other regime, knowing that safeguards were there and that it was to be an irremediable, reasonably, foreseeable end of life. The government is fundamentally changing this and taking out the safeguards at a time when we know there are more vulnerable as a result of the pandemic.

It is reckless public policy on the most important debate our Parliament will have. That is why I hope the government will see the light. With a few reasonable amendments, I think a lot of Canadians will be protected.

• (1040)

Ms. Raquel Dancho (Kildonan—St. Paul, CPC): Madam Speaker, I am very grateful for the opportunity to put a few words on the record concerning Bill C-7, an act to amend the Criminal Code, medical assistance in dying, which I will refer to as MAID throughout my remarks.

The bill from the Liberal government would amend the original MAID legislation that achieved royal assent only four and a half years ago. The new bill was initiated in response to the Truchon case, where a federal court in Quebec struck down the clause in the original legislation that said MAID could only be applied if natural death was reasonably foreseeable. The Quebec Superior Court judge ruled on September 11, 2019, just over a year ago, that this clause violated section 7 of the Charter of Rights and Freedoms, which guarantees the right to life, liberty and security of the person, making this clause of the original legislation unconstitutional.

The court's ruling will come into effect on December 18 of this year. The Conservatives have held firm to the position that this ruling by the Quebec Superior Court should have been appealed by the federal government to the Supreme Court of Canada. Given that it is a ruling that affects life and death, I sincerely agree with our position.

Had the Liberal government appealed, it would have given Canadians significantly more time to discuss this very critical issue, and had the Liberal government not prorogued Parliament for six weeks in August and September, Parliament would have had more time to study and debate the bill. However, this position was resoundingly ignored by the Liberal government. Now we are voting on a radical expansion of MAID, and I have many concerns and will not be supporting the bill.

I do understand the desire for legalizing MAID in Canada. I witnessed my grandmother suffer terribly at the end of her life. MAID was not made available to her and, frankly, I do not know if she would have chosen it. She was a very strong and resilient woman, with a gift of the gab and an incredible ability to write, which I have inherited those gifts. That is why I am able to be here today as a member of Parliament, which she would have been so proud to see. She had these abilities despite not even having a grade eight education. She would have achieved amazing things had she not been born into a very poor family in rural Manitoba.

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She tragically suffered a stroke and after that she could not speak or write, her favourite things. Then her diabetes wreaked havoc on her body and her leg had to be amputated as a result. A short while later, the doctors told us that they would have to amputate her other leg. It was really horrible and the worst thing in my life to see her go through this. I wonder if MAID would have been a kinder option for her. For that reason I understand and deeply appreciate why MAID was legalized in Canada.

However, the Conservatives have flagged a number of critical issues with this new expansion of MAID and we worked hard to bring forward amendments to ensure safeguards remained in place for Canada's most vulnerable people. Unfortunately, the Liberals voted against every one of our proposed amendments, and I really do not understand why. We presented many strong, sound arguments from stakeholders across the country, most of whom had no partisan connection whatsoever to the Conservative Party. In fact, this is not a partisan issue and yet it is being treated like one by the Liberal government, which I find deeply upsetting.

When I was researching the bill to determine my position, I was startled to discover that over 1,000 physicians had written to the Attorney General in opposition to the bill. I would like to read into the record some of what their letter said because I found it extremely compelling. They said:

This bill, expanding "medical assistance in dying" (MAiD) to virtually everyone who is sick and suffering in Canada, will, if passed in its current form, make our country the world leader in administering death.

As medical doctors, we feel compelled to voice our dismay...The shock of a sudden illness, or an accident resulting in disability, can lead patients into feelings of anger, depression, and guilt for requiring care - emotions that, with proper support and attention, can resolve over time.

They went on to say:

The care and encouragement shown by physicians may be the most powerful force in overcoming despair and providing hope. Unfortunately, patients can no longer unconditionally trust their medical professional to advocate for their life when they are at their weakest and most vulnerable. Suddenly, a lethal injection becomes part of a repertoire of interventions offered to end their pain and suffering.

Finally, they went on to say:

Bill C-7 would allow those who are not dying to end their lives by a lethal injection at the hands of a doctor or nurse practitioner. Shockingly, most of the safeguards that Parliament deemed necessary in 2016 to protect the lives of vulnerable individuals from a wrongful death are being removed. Under the new bill, an individual whose natural death is considered to be "reasonably foreseeable" could be diagnosed, assessed and euthanized all in one day. We are very concerned that removing the 10-day reflection period and other safeguards will lead to an increase in coerced or tragically unconsidered deaths.

The reckless removal of safeguards previously deemed essential will place desperately vulnerable patients directly in harm's way and may cost them their lives.

● (1045)

The comments tie in very well with what we have heard from the disability community at the justice committee and the like when we were studying this legislation. In fact, 72 national disability advocacy groups have opposed this legislation. I personally fielded many calls from my constituents, who were the first to tell me that they usually vote NDP, yet they felt very compelled to reach out to me to express their fear of what this bill meant to them.

There is a genuine terror in the disability community of this bill, which I have heard first-hand, yet those fears are being completely

discounted by the Liberal government. I really do not understand why.

More than that, the Liberals are even ignoring the United Nations with this legislation. A UN special rapporteur on the rights of persons with disabilities responded to the expansion of MAID with clear dismay. She said:

I am extremely concerned about the implementation of the legislation on medical assistance in dying from a disability perspective. I have been informed that there is no protocol in place to demonstrate that persons with disabilities have been provided with viable alternatives when eligible for assistive dying. I have further received worrisome claims about persons with disabilities in institutions being pressured to seek medical assistance in dying, and practitioners not formally reporting cases involving persons with disabilities. I urge the federal government to investigate these complaints and put into place adequate safeguards to ensure that persons with disabilities do not request assistive dying simply because of the absence of community-based alternatives and palliative care.

That is a pretty powerful quote, in my opinion.

We know that there are considerable issues with palliative care. We know that 70% of Canadians, seven out of 10, do not have access to palliative end-of-life care in Canada. I find that to be a shocking number, and I had no idea until I did research for this bill.

I do believe that without access to good quality palliative care, we have failed to offer Canadians a real choice. If they cannot peacefully live out their final moments with safe, reliable care that is supportive and catered to their needs, then I can understand why MAID would be so appealing.

More than that, the COVID-19 pandemic has really lifted the veil on the terrible state of elderly care in Canada. In Winnipeg, our residents in elderly care homes have suffered tremendously. While we have many care homes that are doing phenomenal, outstanding work, others, not so much. A few weeks ago, Manitobans were horrified at revelations of an elderly care home just outside of my riding that was understaffed, and overwhelmed by COVID-19 cases.

When paramedics arrived, they found that some residents had been dead for hours and no one knew. Others were severely dehydrated and starving to death. If we are to provide dignity in dying, we must also ensure dignity in living. This is paramount to the discussion and has been completely ignored by the Liberal government. In fact, in the Liberals' 2015 election platform, they promised billions of dollars for palliative care. This was never delivered.

Government Orders

Further to that, I found it alarming that the 10-day reflection period in the original MAID legislation would be eliminated with the passage of this bill. It is important to note that the existing MAID legislation allows the 10-day reflection period to be waived under special circumstances, so flexibility on this 10-day reflection period is already in the existing MAID framework.

I am really not married to the 10 days specifically. It could be a bit shorter, or it could be a bit longer. I would need to hear from professionals in psychology to truly understand how many days are best to ensure end-of-life decisions are not made emotionally, or made in the heat of the moment, so to speak. However, I do firmly believe, at the very least, someone who requests MAID should have to sleep on it, given that there is no going back from it.

Given there are tough days, whether someone had a poor interaction with a health care worker or does not like their new room or facility, or their family has not visited in a while, or it has just been a physically or emotionally tough and painful day, there are so many reasons why someone within their most vulnerable state should have safeguards in place when making life-ending, “game over” decisions. With this legislation, if it is passed, MAID could be administered only hours later.

What really solidified my thoughts on the removal of this safeguard was the former Liberal minister of justice, the member for Vancouver Granville, who was responsible for the original MAID legislation only four and a half years ago. She questioned the current justice minister on removing the reflection period, given removing this safeguard was not called for in the Truchon decision. The person who brought forward this legislation four and a half years ago is asking why the Liberals are removing this reflection period, yet we received no firm answer from the Liberal government as to why that is. I find that to be pretty compelling. The Liberals, for reasons unknown, went far beyond what was required in the Truchon case when they created Bill C-7, and I believe these concerns are valid.

• (1050)

In fact, we learned in the “First Annual Report on Medical Assistance in Dying in Canada, 2019”, that 3.6% of patients who made written requests for MAID subsequently withdrew those requests. Now, 3.6% may not sound like a lot, but of the 7,336 people who applied for MAID, 263 of them changed their minds.

We should keep in mind that MAID is new in Canada and not easily accessible everywhere. Members can imagine how many people will be applying for this after Bill C-7 passes. As MAID becomes increasingly normalized, we know that 263 lives were allowed to continue to live on because of that reflection period, which is, in my opinion, so important to maintain. However, it will not exist moving forward because of the Liberal government's refusal to listen.

Conservatives also proposed an amendment that would extend the new 90-day reflection period for those seeking MAID whose deaths are not reasonably foreseeable. We proposed to extend it to 120 days, and the arguments for this are solid. The over 1,000 doctors who I quoted earlier have said, “We live in a country where the wait time to see a psychiatrist in certain areas is 4-8 times longer

than the 90-day waiting period proposed in the bill for those whose natural death is not considered 'reasonably foreseeable'”.

Further, we know that after a catastrophic accident causing, for example, a life-altering injury, suicidal ideation is very common, but with the proper support it goes away and a happy and purposeful life can resume. Moreover, it takes much longer in many cases to get a wheelchair or quality specialized rehabilitation care than the 90 days, so I ask this: What good is 90 days if someone is not able to access alternatives in that time period? I do not know.

Additionally, Conservatives believe we can better protect vulnerable patients by requiring the patients to be the ones who first request information on medical assistance in dying, and not have it openly or flippantly offered to a patient as a standard everyday option like pain medication or various therapies. Conservatives believe MAID is an extremely serious matter and should not be something pushed on patients in their most vulnerable state.

Whenever members on this side of the House state the potential for pressure to be put on patients concerning MAID, I do find, during these debates, that Liberal members essentially roll their eyes. They scoff and say that never happens, while the justice committee heard something different. It heard first-hand from witness accounts that pressure does, in fact, happen and has been happening over the past four and a half years.

Roger Foley is an infamous example of this pressure. He was offered MAID on four separate occasions to date and never once indicated that he was interested. In fact, he indicated quite the opposite. When he was having a bad day it was offered to him. It was almost as if they were tempting him by saying there is an easier way and suggesting he should just end it all. I just find that terrifying.

I find Roger's case very alarming. Safeguards must be put in place to ensure that when people are at their weakest and most vulnerable moments, they are not offered something that would end their lives forever, but rather are provided various options for better care and support, if they want it.

Another issue I have with this bill is that it moves to expand MAID so quickly. Really, this MAID legislation's original framework was just legalized four and a half years ago, which is really a blink of an eye in relative terms. The original legislation was thoroughly researched and vetted, and numerous safeguards were put in place to ensure our most vulnerable were protected. Those safeguards were considered critical at the time.

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Now, less than five years later, the Liberal government is massively expanding MAID and doing away with many of those safeguards it itself deemed critical in the first legislation not even five years ago. At this pace, I very much believe and fear that we may be debating expanding MAID for children or those with mental health issues within my lifetime, and I find that absolutely terrifying.

More than that, this legislation comes before the mandatory five-year review. I feel that without that we are flying blind without the proper data that could have been revealed in a comprehensive review. There are simple questions I would have hoped would have been assessed in that review, such as these: “Who is taking MAID?”; “Is it mostly the elderly or the poor?”; “Is it racialized communities or wealthier white people?”; “Is MAID affecting certain demographics?”; “Why those demographics?”; “Are there re-occurring themes for choosing MAID that could be addressed by providing better care during suffering at end of life, rather than death?”.

We should be doing everything we can as legislators to provide alternatives to MAID that are reliable and easily accessible to everyone, yet the current government is not doing that at all.

What I find interesting on this is that the current Liberal justice minister is responsible for this aggressive expansion of MAID. He, in fact, voted against his own government's Liberal legislation on MAID, the original one four and a half years ago, because he believed it did not go far enough. We have known for a long time what his position is, and that leads me to question whether the Liberal consultations on this bill were really impartial. It may explain why this legislation goes far beyond what the Quebec superior court judge called for in the Truchon ruling.

● (1055)

There are so many questions with this new freedom Canadians have with MAID. I firmly believe we have the responsibility as legislators to proceed on ending the lives of Canadians with extreme caution. There is a profound shift happening in our society concerning MAID, and we must proceed thoughtfully and with thorough, exhaustive research, which has not happened with this expansion of MAID. For me, this expansion, to put it plainly, is too much, too fast, too soon.

Bill C-7 would remove other critical safeguards as well, such as the requirement to have two independent witnesses sign off on MAID for a patient. This safeguard helps to prevent abuse and coercion of MAID and provided much-needed oversight on those discussions with patients. To think a person needs two independent witnesses to sign off on a will, but not to end their actual life, makes me feel as though we are living in the twilight zone.

Further, Conservatives have advocated for amendments that would ensure physicians who sign off on MAID applications have expertise in a patient's condition. One would think that for a life-ending decision such as MAID, the safeguard would be a given, but no, the Liberals disagree, and again for reasons largely unknown.

Additionally, a number of constituents have reached out to me with significant concerns that health care professionals who do not agree with the morality of MAID would be forced to help adminis-

ter it. The Liberals have insisted that this will not be the case and that the conscience rights of health care professionals will be protected. However, communication on that has been dismal, to say the least, otherwise I would not be receiving so many calls about it. I urge the Liberal government to invest more time and energy into communicating on this specific issue.

I will end with a quote from the over 1,000 doctors who I have mentioned throughout my remarks. They said:

Our profession has been coerced into facilitating suicide rather than preventing it, for ever-increasing numbers of citizens. We watch in utter dismay and horror at how the nature of our medical profession has been so quickly destroyed by the creation of misguided laws. We, the undersigned, declare that the passage of Bill C-7, if left unchecked, will contribute to the destruction of much more than our medical profession, but fundamentally, of a Canadian society that genuinely values and cares for its most vulnerable members. Canadians deserve better.

Mr. Francis Scarpaleggia (Lac-Saint-Louis, Lib.): Madam Speaker, I myself am a strong advocate for palliative care. I was a founding member of the all-party Parliamentary Committee on Palliative and Compassionate Care, and I have the largest palliative care hospice in the country in my riding, the Teresa Dellar Palliative Care Residence.

The member mentioned that the Minister of Justice voted against the original bill, but the reason he did so was because he knew from the start that it was unconstitutional precisely because he did understand the jurisprudence. This makes me think that the Leader of the Opposition was being rather glib when he suggested that the Minister of Justice did not understand the jurisprudence.

The member mentioned that people should be allowed to sleep on it, but prior to the 10-day waiting period, there is an assessment period when people are obviously reflecting on the matter. I just do not understand how the member feels that, by taking away the 10-day waiting period, people are not being given the chance to sleep on it.

● (1100)

Ms. Raquel Dancho: Madam Speaker, I appreciate that the member has phenomenal palliative care in his riding. I wish the rest of the members of Parliament in the House could say the same. Had the member's Liberal government delivered on its 2105 promise to invest billions in palliative care, that may be the case in more ridings than his own.

To his question concerning the 10-day reflection period, I still believe it is very important that when the final decision is made, people still have to sleep on it.

Hon. Ed Fast (Abbotsford, CPC): Madam Speaker, I want to thank the member for Kildonan—St. Paul for articulating so well the risks to Canadians that this legislation represents.

Government Orders

I want to reference palliative care that the member's speech also referenced. She is correct that in 2015 the Liberal government announced it was going to deliver support for palliative care, which it never did. In 2017, it reannounced that, and it never delivered. In 2019, it never delivered. More recently it announced somewhere in the order of \$6 billion over 10 years across the whole country. It is a drop in the bucket to try to improve palliative care across the country.

I would ask the member to comment on the state of palliative and perhaps reference her grandmother again. She made a poignant reference earlier about her grandmother's end-of-life care and how palliative care played into that situation. I would ask her how it could be improved going forward.

Ms. Raquel Dancho: Madam Speaker, there are many palliative care facilities in my riding that are absolutely phenomenal and doing incredible work, particularly during this pandemic. As I remarked in my speech, there are a number of other care homes for the elderly in Winnipeg that are not doing so well. As I mentioned, at one point the situation was so dire, with so many COVID cases and such a staff shortage, that paramedics were called and when they arrived they were completely dumbfounded by what they found. There were numerous people who had been dead for hours and no one knew they had died. People were starving: "starving to death" was how they described it.

My grandmother had decent palliative care, I have to say, but I found that more could have been done to perhaps support her in her final days. Looking back, I would change so much. I think we all say that and think that about our grandparents and parents when they pass on, but I find this a very important discussion. If we are going to expand MAID, we have to expand palliative care.

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, I have been here for five years listening to a great deal of debate on this very important issue. All lives are of equal value. I genuinely believe that. We need to emphasize how important personal care, home care and palliative care all are. I have enjoyed those discussions. Money has been flowing in that area.

Will the Conservative Party be transparent and honest with Canadians by stating the real reason why it is not prepared to see this bill go forward?

It does not support the legislation and it would rather have it appealed to a superior court. If it was in government, it would not be passing this legislation at this point because it would have referred it to a superior court.

Ms. Raquel Dancho: Madam Speaker, the member opposite is correct. We would have appealed it to the Supreme Court. When we are talking about life and death, something of this magnitude that is going to be this much of a change for society should absolutely go to the highest court in the land. End of story.

Mr. Don Davies (Vancouver Kingsway, NDP): Madam Speaker, I know this issue engages the most profound issues of conscience. It requires great care as legislators.

I remember when the Carter decision came out. I am a lawyer by training. I read it carefully, and I was concerned that the government put in a requirement that death be reasonably foreseeable, because that was not called for in the Carter decision. Of course, that led the plaintiffs in the Truchon decision, Nicole Gladu and Jean Truchon, to appeal.

It is worth mentioning why they did so. Ms. Gladu was 74. She used a wheelchair. She had post-polio syndrome: a condition that weakened her muscles and reactivated her childhood scoliosis. She had difficulty breathing and was in constant pain. Mr. Truchon was born with cerebral palsy. He no longer had the use of his limbs. In 2012, he lost the use of his only working limb, his left arm, due to severe spinal stenosis, which left him almost completely paralyzed and caused painful spasms. He had given up most of his activities and gone into assisted living since there was little left that he could do by himself. Each of those people had been refused MAID under the Quebec legislation regarding end-of-life care, and they did not meet the requirements of the federal legislation because the ends of their lives were not reasonably foreseeable.

Does my hon. colleague agree with the Truchon decision, insofar as it has found the requirement that death be reasonably foreseeable to be a violation of Canadians' constitutional rights?

• (1105)

Ms. Raquel Dancho: Madam Speaker, I appreciate the member's thoughtful comments. I would have loved to hear what the Supreme Court would have said about the Truchon decision. That would have given me more confidence in that decision, but ultimately, removing the term "reasonably foreseeable" gives me some fear. I was very frank about that in my speech.

I wonder very much whether, in my lifetime, we are going to see this expanded to children who do not have reasonably foreseeable deaths, or to those suffering from mental illness. Concerning mental illness, I know the government has been very clear that this legislation excludes it, but at the rapid pace we are expanding it I am not convinced that we are not going to see this extend to mental illness within my lifetime. I find that to be the most terrifying aspect of this new legislation.

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Madam Speaker, I want to follow up on the question from the parliamentary secretary about the difference between the assessment period and the reflection period. I know members of the government have said it could not happen on the same day because there is an assessment period before the reflection period. However, there is no timing set on the assessment period. There is no reason that the assessment period could not happen very quickly. We are still left with a situation in which all of this could happen all at once. There are no time parameters on the assessment period. The government could have, if it wanted to, proposed time parameters around the assessment period, which it did not do.

Ms. Raquel Dancho: Madam Speaker, I appreciate the member's question.

I would refer to the quotes that I included in my remarks from the more than 1,000 doctors who wrote in response to this issue and said that it was a real concern to them. I would agree.

Mr. Garnett Genuis: Madam Speaker, I wonder if the member could speak about the issue of contemporaneous consent and the fact that the legislation would not even require people to be asked on the day they are receiving MAID. We had a Conservative amendment that would have at least required people to be asked on the day. Is that not the minimum of what would be reasonable?

Ms. Raquel Dancho: Madam Speaker, I have concerns with not having to sign off right before. I recognize, and I have heard many stories of, why that was removed. One could give prior consent and then have MAID administered when one has essentially lost the ability to give consent. However, I have concerns on that. Again, this is one of those issues that, had we more time, had this Liberal government not prorogued Parliament, we could have studied it in further detail.

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Madam Speaker, we are now at the third reading stage of C-7. This means all the amendments that will be considered by the House have now been considered, and we must now pronounce on the final version of the bill and its effects.

Before I speak about this bill in final form, I want to respond directly to what I see as the government's principal argument for this legislation and other similar legislation. It tells us this is all about choice: the choice of individuals to live as they choose and die as they choose. The idea is that moral judgments about good living and good dying ought to be made by the person doing the living and dying, as opposed to by someone else, because the individual is uniquely qualified to make judgments about their own happiness and someone outside their skin simply cannot make those judgments as well.

This is the one serious argument people use to advance this bill and others like it. We should of course appreciate the existence of other unserious arguments, such as the assertion that, "The courts told us to," or, "This is what people we have consulted told us to do."

A small part of this bill responds to a lower court decision, but most of it has been invented, out of thin air, by the government and whoever it consulted or did not consult. Over a thousand physicians have signed a letter opposing this bill, and every single disability rights organization that has spoken out about this bill has spoken in opposition to it. These are unserious arguments stemming from unserious readings of court decisions and unserious consultation.

The serious argument made in support of this bill, as I have stated, is that people ought to have the choice to make decisions about their living and dying because they know what will lead to their happiness better than anyone else. This is the argument, but we should also notice how those who use this argument ultimately choose to apply it selectively. Even while suggesting it is all about choice, they insist on changing the words we use to describe the choice in order to make us feel better about it.

Government Orders

The phrase "medical assistance in dying" was invented at the time Bill C-14 was proposed, and is not a phrase used in other countries to describe the phenomenon of doctors killing their patients. If this is really about choice, why do we have to invent new pseudo-terms to make ourselves feel better about that choice?

If I asked members point-blank whether they think a person should be able to commit suicide, I am sure many would respond that this is not suicide. It is completely different, as it is medical assistance in dying. Formally, what is meant by medical assistance in dying is facilitated suicide, or killing in a medical context. We claim to be focused on choice, but we still are uncomfortable enough with the choice that we have to invent new words to describe it.

Some members do not like the use of the word "euthanasia" to describe the phenomenon of doctors and nurses killing their patients after being asked to do so. The Minister of Health told the Standing Committee on Justice and Human Rights that phrases "referring to this bill as 'euthanasia' legislation, which I have heard in the House of Commons, are incredibly demeaning to the dignity of people".

The health minister may be interested to know the word euthanasia actually comes from two Greek words: "eu", meaning well, and "thanatos", meaning death. The term euthanasia means "good death", and is itself a sanitization of the concept of killing. If the term is misleading, it is not because it is too harsh but because it is too gentle. As we have heard, not all cases of assisted suicide can reasonably be called good deaths by any definition.

Notice that the word euthanasia is never used to describe the administration of the death penalty. The term was invented in order to sanitize the idea of the medicalized killing of a consenting person. It is instructive that a sanitized term for this practice, once people had a full social awareness of its meaning and reality, had to be replaced by a new sanitized term to further obscure the true nature of what is taking place.

No doubt, in 20 or 30 years, the term MAID will be thought gauche and replaced with another, more up-to-date sanitization of a term that no longer makes us feel better about something we naturally feel uncomfortable about. The point is that if this all about choice, and if we are comfortable with this choice, why are we not comfortable speaking plainly about sick people committing suicide and about doctors killing their patients when asked to do so? Would that not be a more plain and accurate description of the choice that many wish to defend?

If there is a practice or activity that people are uncomfortable seeing depicted or hearing described accurately, perhaps we should ask ourselves why we feel uncomfortable instead of demanding that the images and descriptions be put aside.

Government Orders

Members should observe as well that the idea of a choice to die, or a right to die, is being advocated for selectively. Some people have a right to die and some people do not, apparently, so we have to ask why this principle is being selectively applied.

Suppose that I, an able-bodied healthy white man, experienced some great personal tragedy such as the death of a child or the breakup of my marriage. It is possible that following such an event I might start to experience extreme existential pain and suicidal ideation. If I then went to a doctor to share the feelings I was experiencing, I would not be presented with MAID as a way out of the challenges I was facing. The way I look, my health status and other characteristics I have would signal to the doctor that my life was worth living. We know it to be true that when a young, able-bodied person chooses to die, those around them will say, "What a tragedy. He had so much to live for."

● (1110)

The argument for a choice to die does not apply to those who society believes should not choose to die, even if such people are sincere in their expression of pain, in their sense that their pain is irremediable and in their desire not to continue living, but what if a person who is older, who is disabled, who does not fit the stereotypical social mould of someone who has a lot to live for, presents themselves to the health care system experiencing existential pain and suicidal ideation?

We know from testimony from the justice committee that people in this situation are offered and even pressured to opt for MAID. People who are elderly or living with disabilities are often offered and pushed to take MAID without asking for it. This is the testimony given over and over again at the justice committee and confirmed by the minister responsible for disability inclusion, who acknowledged how concerned she is about people with disabilities being regularly and proactively offered MAID that they do not want.

We see here an important and revealing contradiction in the application of the principle of choice. For some in society, death is seen as an unreasonable choice and is actively discouraged. For others, death is seen as a desirable choice and is actively encouraged. This is not just a debate about choice, therefore. Rather, it is a debate about how the architecture of choice is set up differently for different people, based on whether others assess their lives as being worth living.

This is what leaders in the disability community are deeply concerned about: how this legislation includes them and only them in the additional category of those for whom we think death is a reasonable course of action.

Suppose that of my four children one had a disability and suppose that I taught three of my children to always press on because life is beautiful, but I told the fourth child that they should consider death if they ever faced circumstance that they could not handle. Do colleagues think that situation would make my fourth child feel privileged by the special offer of choice or do colleagues think she would feel devalued by the fact that I thought death was uniquely an option for her, based on the presumption that her life was not worth living?

Choices do not exist in a social vacuum. When we speak about choice, we recognize that people are making choices between available options and the nature of those available options is constructed by the society in which they live.

I used to think that people were always better off with more options, that just like a menu at a restaurant, we are always better off with more options available to us: the longer the menu, the better. If I do not like any of the new options available, then no problem. I do not have to choose them, but I should not begrudge other people the opportunity to have more choices available to them, even if I do not like those choices. Nobody is made worse off by the lengthening of the menu. Then I realized that it was not that simple. If I am in a restaurant and the only options available are chicken or beef then, arguably, yes, I am better off with the addition of more items on the menu; a fish option, a vegetarian dish, etc., but there is also a case in which the existence of certain options on the menu fundamentally changes the nature of the experience.

Suppose that while travelling, I encounter a restaurant that offers a human flesh sandwich in addition to the usual fare. It is fairly safe that I would not stay and order in that restaurant even if I had no intention of ordering the human flesh sandwich. It is unlikely that any members of this House would feel comfortable eating in such a restaurant, even if all they planned to eat was the filet mignon. That example illustrates the way that the offer of an additional option can actually change one's entire experience of a place or environment. A person with a disability who is offered death has a very different experience of health care from a person who is consistently offered life-affirming care.

The fact that people are offered or encouraged toward certain choices, and that some people are offered those choices and others are not, changes the entire experience of health care for many people. Part of the response to this brave new world of so-called medical assistance in dying is that people are seeking safe spaces where they can receive care that is life-affirming. There are still many people in this country who have about as much interest in receiving care in an environment where death is being offered as they do in eating at a restaurant where cannibalism is offered. Such people should be free to receive care in a hospice where life is the only choice and where they feel safe from the possibility of pressure of a momentary weakness or from the sense that they are an unnecessary burden. Some are still looking for care that is animated by the conviction that all lives are always worth living, but perversely, those who claim to champion choice are actually attacking these safe spaces. With the absence of conscience protection in this or any other legislation like it, doctors are being forced out of their profession and life-affirming hospice care is being shut down.

Government Orders

We wonder why we have a crisis in long-term care in this country. Maybe it has something to do with the fact that so many of the people in organizations that have historically operated in this space are being pushed out because of a lack of conscience protection. Protecting the conscience rights of physicians and institutions is not just about the rights of providers. It is about the right, indeed the choice, of patients to receive care in a certain kind of environment if that is their desire.

I know from the many conversations that I have had with constituents, including those who are very supportive of the expansion of MAID, that the present realities of the social architecture of choice are top of mind for them during their advocacy. In other words, they want more euthanasia because they find the alternative intolerable. An absence of good care, an absence of effective pain management, an absence of support to live in a way that accords with their sense of dignity and a sense of resignation about these realities leaves them to want to be able to end it all, rather than endure under undesirable conditions, but those conditions could themselves be changed. The expansion of euthanasia, along with continuing pressure on all health care institutions to offer it, will further erode the life-affirming nature of care that people receive.

• (1115)

I remember once having a long conversation with a constituent who explained to me her reasons for advocating for expanded euthanasia. She emphasized the classic arguments about choice and control, and then shared with me a story of being in a care situation and struggling to have a bowel movement unaided. She went to the nursing station for help, and unfortunately was met with a gruff and unempathetic response. Her memory of the sense of indignity she felt, struggling for a long time on her own, and then seeking the help of a person who seemed uncaring and disgusted, was clearly a part of her thought process about the circumstances under which she would want to die.

While I can identify with her feelings in the moment, I think the solution is to give people the choice of compassionate care. It is a tragedy that people are considering death because of moments of perceived indignity that can be quite directly resolved.

Many older people who are considering death say that they do not want to be a burden on others. This is expressed as a matter of choice, but it is also revealing about the architecture of choice. It is generally unheard of for children to insist on paying rent to their parents or living independently because they do not want to be a burden. Certainly, I have never heard such sentiments from my children.

Why are elderly people made to feel like they might be a burden, while children are not? Again, this is an issue of social context. If children were constantly told from a young age that they were a great burden to their parents, that they were costing them money that could be spent on other things, and that they were interrupting their social lives, then children would likely start to worry about being a burden.

Conversely, if seniors and people with disabilities were constantly affirmed for their value and their ability to contribute to society, constantly told that they hold the key to our future rather than con-

stantly being told about the burden they impose, then of course they would be more likely to choose life instead of death.

This is not just a question of choice. It is a question of the social architecture of choice that leads people to make different choices in different kinds of situations based on the limited options in front of them and based on the way that different options impact each other.

To underline this with one further point, it should not escape the notice of members that the government's Bill C-6, the proposed ban on conversion therapy, is built on the premise that people cannot consent to something that is contrary to their human dignity. Although I have concerns about the text of Bill C-6 as written, I agree with the principle that conversion therapy is wrong and should not be allowed.

In light of both Bill C-6 and Bill C-7, it remains unclear to me what the government's view is on the ability of a person to consent to harm. Is it the view of the government that people should be able to voluntarily consent to things that harm them? Looking at these bills together, we might conclude the government finds it okay for people to consent to death but not okay for people to consent to certain things that are deemed worse than death. However, this subjective categorization of certain harms as being worse than others clearly may contradict an individual's own subjective sense of what things are more harmful than others.

It is time for us, as parliamentarians, to talk about the choices that elderly people and people living with disabilities have in front of them, and to give them options besides death, to move from a narrow focus on questions of choice to a discussion of the architecture of choice that puts people in impossible and painful situations. A good society is not just one that gives people the formal right to make choices between different alternatives. It is one that ensures that those alternatives are sufficiently robust so that individuals are able to make choices that truly lead to happiness. Of course not all choices lead to happiness.

People can make choices that they think will lead to happiness, but do not. This is especially serious when a decision is final and irreversible. The wider community has a reasonable interest in ensuring that a person making that choice has at least all of the information in front of them, taking into consideration the fact that people can and often do adapt to new circumstances over time. A belief in the pursuit of happiness entails a belief in freedom but also a belief in the value of encouraging the considered use of freedom through due reflection.

Government Orders

Having reflected on the application of the concept of choice in this context, I would now like to make a few additional comments about the provisions of this bill and the timing of it. This bill proposes to eliminate the requirement that death be reasonably foreseeable for those seeking euthanasia and puts those for whom death is not reasonably foreseeable on a second track with some distinct requirements. The reconsideration of the question of reasonable foreseeability was provoked by a court decision in Quebec, the Truchon decision, which the government could have chosen to appeal but did not.

This bill deals with more than this question. It also arbitrarily eliminates a number of safeguards that have nothing to do with the Truchon decision. It eliminates the 10-day reflection period. It reduces the required number of witnesses. It eliminates the requirement for contemporaneous consent. The removal of the 10-day reflection period in particular has led experts to point out that this opens the door to same-day death, to a situation where a patient could request and receive euthanasia on the same day.

Some members of this House have strenuously objected to the use of this term. Same-day death is a jarring idea that someone's worst day could be their last, and that temporary suicidal ideation could lead to immediate death. However, those who find this term uncomfortable must face up to the fact that the legislation as written contains no parameters for those for whom death is deemed reasonably foreseeable.

If members believe that time parameters exist, then they should point to where they exist in law. If members believe that time parameters should exist, then they should have supported their reintroduction into the bill. As the law stands before us now, there are no legislated requirements around timelines for those for whom death is reasonably foreseeable.

At third reading, members must choose whether or not they will vote for same-day death in Canada. As Wilberforce said:

You may choose to look the other way but you can never say again that you did not know.

• (1120)

The Conservatives have proposed reasonable amendments to reintroduce the reflection period, introduce a shorter reflection period and reintroduce requirements around contemporaneous consent and independent witnesses, in particular, recognizing the different experiences people with disabilities have reported with respect to the health care system. We also introduced a requirement that health care practitioners only discuss euthanasia if it is brought up by the patient first. These safeguards matter and would protect vulnerable people by reducing their risk of being rushed and pressured into vulnerable situations.

In response to our call for safeguards, the government said it trusts health care practitioners and these rules are not required. The purpose of a safeguard is not to respond to what may be the average case, but to establish a minimum standard. We are talking about 100,000 people in this country whose professional qualifications would allow them to administer euthanasia. Are those 100,000 so uniquely virtuous or trustworthy they do not need laws to regulate their behaviour while the rest of us do? I believe most people in medicine are doing their best to selflessly serve others, but one

needs only listen to the testimony at the justice committee to realize some of those who are providing health care have fallen short of that call. All of us need laws to regulate our behaviour to some extent. If we need regulations, then how can we expect those 100,000 people to be different? Are there no bad apples? I am not arguing they should be subject to unique suspicion, but that they simply need rules and laws to guide their actions like the rest of us do. People charged with taking another person's life should do so within strictly defined parameters for their own good and that of everyone else. I trust doctors just as I trust police officers, but they still need regulations and oversight. We recognize there are some bad apples on our police forces and if we need safeguards for police officers in light of their power to take life, then we also need safeguards for those in power to take life in a medical context.

The government has been working very hard to push the narrative about timing, claiming the Conservatives are responsible for delaying this bill. It should stand to reason that if the government wants us to invest in rapidly passing its bill, it must proceed to persuade us that it is a good bill, which it has not done. The Truchon decision requires a response, but matters would be much simpler if the bill only focused on a response to Truchon instead of a variety of other changes. As it is, we are forced to consider all of the elements together, not just the narrow part that responds to Truchon. This is the government's choice, not ours.

Let us also take stock of how we have come so close to the court deadline. This legislation was presented in February. In May and June, the Conservatives wanted the House to sit in a modified form, but the government refused to allow it. Then it killed its own bill by proroguing in August. All of these moves pushed us into the mid-fall before the bill was considered. It then received a mere four meetings of witness testimony at the justice committee. The government's approach to this legislation has been to delay until the last minute and then demand urgency instead of a considered review. Let us be clear that this is a political tactic designed to subject these radical changes to as little debate as possible.

As a high school student, I had the honour of participating in a special MLA for a Day program at the Alberta legislature. At one of our meetings, a seasoned Progressive Conservative minister explained to us how legislation was passed. Students were surprised by the length and complexity of the process. They asked why it took so long and could the process not be shortened a bit. The minister told us he was glad it took so long because one of the fastest pieces of legislation to ever pass in the Alberta legislature was the Sexual Sterilization Act of 1928, which allowed the government to sterilize people with disabilities against their will based on the analysis that they imposed an undue burden on society. Legislators at that time should have taken more time to listen to people with disabilities and considered the implications of what they were doing. The point that when we are in too much of a hurry to make decisions we risk undermining the fundamental rights of our fellow human beings, in particular, those living with disabilities, has stuck with me to this day.

Those of us on this side of the House who are raising concerns and demanding that time be taken to consider this bill and appropriate safeguards be put in place are on the right side of history. As was the case with the Sexual Sterilization Act of 1928, when this bill is repealed in five or 50 years, I will proudly tell my grandchildren that I took a stand for the universal immutable dignity of every human being.

• (1125)

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, let me start by saying this whole issue of process being advocated by the Conservative Party is a false argument. The opportunity for debate was and still is there, if that is truly the only interest of the Conservative Party.

The Conservatives need to be more transparent with Canadians. Because they do not support the legislation, it is their intention to prevent it from going forward. That is the honest truth regarding the legislation. I would ask the member to be straightforward with Canadians, admit the Conservative Party of Canada does not support the legislation and that is the reason we are at the stage we currently are at.

Mr. Garnett Genuis: Madam Speaker, the parliamentary secretary is conflating two issues.

Do I think this is a bad bill? Yes. Did I vote against it at second reading, and will I vote against it at third reading? Yes. Did I vote in favour of reasonable amendments from my friend from St. Albert—Edmonton that would have improved the bill? Yes. Does the government control the legislative calendar? Yes. Could the Liberals have not prorogued? Could they have scheduled debate on the bill in May and June? Yes.

Therefore, the fact that we are in this situation of created urgency is manufactured by decisions the government has made. This is the Liberals' own manufactured urgency, designed to limit considered debate on the bill. Yes, I think it is a bad bill, but I also think we could have been debating it in May and June. We could have been considering it earlier if they had not prorogued, and we could have allowed the justice committee to take the time that was necessary.

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There were four meetings of witness testimony. Conservatives put forward motions to ask that we have five, that we have one more meeting, given the overwhelming concern in opposition. We had many briefs submitted by medical practitioners that were initially rejected because of some arbitrary timeline that was not even published. It was only after a motion from the member for St. Albert—Edmonton that those briefs were allowed to be translated and presented, but even at that point they were distributed long after the consideration of amendments had started.

This was an unreasonable process, manufactured by a government that wanted the bill to not have to undergo serious debate.

• (1130)

Mr. Don Davies (Vancouver Kingsway, NDP): Madam Speaker, the bulk of the original criteria under Bill C-14, I believe, remain under Bill C-7.

In order to pursue a medically assisted death, a person must satisfy the following eligibility criteria: They must be, of course, of majority age. They must be able to make health care decisions for themselves. They must make a voluntary request for MAID that is not the result of external pressure, for example, from a health care professional or a family member. They must give informed consent after they have received all of the information they need to make their decision, including a medical diagnosis, available forms of treatment and available options to relieve suffering including palliative care. They must have a grievous and irremediable medical condition, meaning that the person has a serious and incurable illness, disease or disability, is in an advanced state of decline in capabilities that cannot be reversed, and experiences unbearable physical or physiological suffering from an illness, disease or state of decline that cannot be relieved under conditions that the person considers acceptable.

Does my hon. colleague support the ability to access medical assistance in dying for people who fulfill those criteria?

Mr. Garnett Genuis: Madam Speaker, again, there is a bit of a conflation of a few issues here. The member spoke about eligibility criteria. There are eligibility criteria, there are safeguards to ensure that those eligibility criteria are actually being met in a considered way, and there is also a question of context. Do people have those alternatives?

For instance, if a person is suffering in a grievous and irremediable way because they have not had access to care that would address their suffering, they may meet the eligibility criteria. However, there is a problem there in terms of context, in the fact that they are making a decision based on limited options because the system has not provided them with the care that they want.

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In terms of the safeguards, we have heard so much at the justice committee, and I encourage the member to look at the testimony from people with disabilities who talked about situations of being pressured and being told that they were selfish for not wanting to pursue this path. We have cases of pressure. Clearly, those are problems and, in principle, members would say that obviously that should not happen. However, the fact is that it is happening right now and the people who are involved in that pressure have not been prosecuted and have not been disciplined.

The government has held up that nobody has been prosecuted under this law so that means it is working well. Given that we have testimony saying it is not working well and there have been no consequences for those who are involved in abuses, that suggests the safeguards as they exist are failing. The government wants to take away more safeguards without addressing some of the context issues. My focus is on addressing the issues of context and the issues of safeguards in order to protect people who are vulnerable.

Mr. Terry Dowdall (Simcoe—Grey, CPC): Madam Speaker, my question relates more to the hospice discussion that is a part of this. I am very blessed in my riding to have two hospices. I have Hospice Georgian Triangle as well as Matthews House Hospice. Both are having a hard time these days because of COVID and fundraisers not getting their money. They are reaching out to the community, and they do such amazing work. It is dignity in dying, not just for the individual but for the family members.

The government obviously is not investing enough money into these types of operations, number one. Number two, how important is that to the bill, having other options for people who are suffering at the end of life?

Mr. Garnett Genuis: Madam Speaker, it has been wonderful to hear members at different points in this debate speak about the excellent work being done in their ridings by those who are accompanying people in their last days and seeking to provide good-quality palliative care. It is a tragedy that most Canadians do not have access to that and that many Canadians are offered death long before they are able to receive those things that will allow them to effectively manage their pain.

This is a choice that we have to make as legislators. We have to look at the architecture of the choice in front of people. As I said, it is not just about giving people choices. It is about asking what the options are that people have and saying if we pull everything out of that life option, if we do not have proper palliative care, if we do not have effective end-of-life supports for people, if we do not have effective pain management, and then say the only option is death or pain, that obviously is not a desirable choice. What we can do is help people get out of that choice by offering an alternative. If people's only options are pain or death, that is not a good place to be. That is not a place we want people to be in and the technology exists for better pain management than the vast majority of Canadians are receiving right now.

We have had multiple bills in the last five years on expediting the death side of it, but not dealing with the life side of it. That sends a clear message about the priorities of the government unfortunately when it comes to seniors and people living with disabilities.

• (1135)

Mr. Richard Cannings (South Okanagan—West Kootenay, NDP): Madam Speaker, my colleague talks about context and options. What I am hearing from the disability community in my riding is exactly that. These are people who before COVID were getting about \$1,000 a month in a disability pension. Then we gave everybody \$2,000 a month in CERB because we felt that is what was needed for people to live in dignity.

The member talks about the tragedy in long-term care homes. Considering those options, Bill C-7 aside, would he support the NDP proposal to move long-term care into the Canada Health Act so that our seniors get the care they deserve? Would he support raising disability pensions to \$2,000 a month so that those people can live in the dignity they deserve?

Mr. Garnett Genuis: Madam Speaker, we are going to agree with the NDP on the principle that we need to do more and do better to support seniors and people living with disabilities. There may be some cases where we disagree on the mechanism, because Conservatives value the partnerships that can exist in the delivery of, for instance, hospice and long-term care. We believe that by respecting conscience, by respecting what may be the unique and particular mandate of some of those private not-for-profit facilities, through partnerships like this we can do more and offer more collectively. Solidarity is not just about what the government does. Solidarity is about what all of us do together, politicians as well as not-for-profit organizations, faith groups and community groups.

We may disagree on some of those mechanics, but hopefully we can work together based on a common framework that says we need to do better in terms of ensuring people have access to a dignified life option.

Mrs. Tamara Jansen (Cloverdale—Langley City, CPC): Madam Speaker, I am thankful for the opportunity to address the House on this very important issue and to continue to act as a voice for those who continue to be ignored.

The government is acting as if rushing the legislation through in order to meet the Truchon deadline is its number one priority. Canadians are suffering because of the pandemic, and while people and businesses continue to fall through the cracks, the government is prioritizing expanding access to euthanasia over providing Canadians with the support they need. Shockingly, it is rushing the bill through before the mandated five-year review of the euthanasia regime in Canada has even taken place. This is reckless and this recklessness will cost people their lives.

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The Truchon decision is not a binding legal decision for the House of Commons, but the government is choosing to act as though it is, despite calls from this side of the House to appeal it. When we are dealing with something this serious, with stakes as high as life and death, it is imperative that the process is not rushed by a lower provincial court decision. Our vulnerable citizens deserve better. In all honesty, this deadline is nothing more than smoke and mirrors.

Amazingly, Bill C-7 would not only expand access to euthanasia to those for whom death is not reasonably foreseeable, but goes beyond Truchon by eliminating necessary safeguards that are in place to protect the vulnerable. By removing the 10-day reflection period, people nearing the end of their lives can receive medical assistance in dying on the very same day they request it. That means, in essence, for many Canadians, their worst day will be their last day.

I would like to point out an important statistic from the “First Annual Report on Medical Assistance in Dying in Canada” presented in 2019. In this report, it states that as of the date of its release, 263 Canadians who had requested MAID ended up withdrawing their requests. Because of the current 10-day waiting period, 263 Canadian lives were saved. It is clear these people felt they wanted to die on the day the request was made, but decided days later that they wanted to keep on living.

Had the 10-day reflection period not been in place, 263 Canadians would have had their lives ended prematurely. Maybe it was a phone call from an old friend, meeting with a family member or good news from their physician that caused them to change their minds. It does not matter. The point is that they did. Why does the government want to rob Canadians of the opportunity to make that decision? It justifies the need for Bill C-7 with the Truchon decision, but where in Truchon does it say that?

Another important safeguard that Bill C-7 seeks to eliminate is the requirement for final consent. This is one that truly frightens me. The reasoning behind the removal of this safeguard is the fact that a person may lose the capacity to consent to euthanasia before it is carried out if a person's illness advances causing significant cognitive decline. Therefore, people can give advance consent to have their lives ended should they lose the capacity to make such a difficult decision.

It fascinates me that we all agree that if a person is unable to provide advance consent to sexual activity, and that person is taken advantage of when not having capacity to say no, a crime has been committed. However, the government believes people can provide advance consent to have their lives ended, even if they lose the capacity to say no when the procedure takes place. The problem with the principle of advance consent is that it is impossible to know what people's desires are if they are unable to communicate them. We cannot know if a person in that state truly wants to die. Maybe the individual has had a change of heart and wishes to keep on living at the time MAID is administered, but just can't say that. That is horrifying.

The risks associated with the removal of the 10-day reflection period and the requirement for final consent are too serious for me to accept. We should remember that the stakes are as high as life and death. The government needs to protect vulnerable Canadians.

It needs to ensure safeguards are in place. The removal of these safeguards puts their lives in danger.

I would like to remind the government of the voices it ignored in its rush to meet this unnecessary deadline, the voices of disabled Canadians, their doctors and advocates. I remind members of the words of Krista Carr, the executive director of Inclusion Canada, who said that this bill is disabled Canadians' “worst nightmare”. There are also the words of Catherine Frazee, who said that the bill tells people like her that their lives are not worth living.

• (1140)

How about Dr. Heidi Janz? She told the justice committee that the bill “will result in people with disabilities seeking MAID as an ultimate capitulation to a lifetime of ableist oppression.” Roger Foley bravely told the committee from his hospital bed that, if the bill passes, he will not survive and the Parliament of Canada will have his blood on its hands.

I am here in the House to remind the government of the words they refused to listen to. The stream of euthanasia access for those who are not dying is ableist and dangerous. These are not my words. These are their words.

Doctors who work with disabled Canadians made it very clear at committee that a 90-day waiting period is simply not enough time. They explained that suicidal ideations are very common when someone experiences a catastrophic medical episode, but with good care and support they are almost always overcome.

In my last speech on the bill, I introduced the House to Kristine Cowley's story. Since her spinal cord injury 33 years ago, Kristine has lived the kind of life that most able-bodied people dream of, but it took her years after her injury to feel great again. She worries that people like her will decide to end their lives when they are at their lowest point.

Now I will share the story of David Shannon. David suffered a spinal cord injury in a rugby scrum when he was 18 years old. He shared that after his accident he lay in bed close to death more times than he wishes to contemplate. David has gone on to have a career in non-governmental organization leadership and a law practice focused on human rights and health law.

I will share a comment from David:

I have accomplished a lot in my life. I've crossed our great country by the power of my wheelchair—coast to coast. I've jumped out of an airplane at over 25,000 feet. I've made it to the North Pole and planted an accessible parking sign. I've written a book, performed in plays and on TV. I've received my law degree and been a Human Rights Commissioner. And I am an Order of Ontario and Order of Canada recipient. I've loved and been loved. My proudest accomplishment is that I lived.

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Several times during this debate, members on this side of the House have asked how many stories like this will never be told if Bill C-7 passes. I urge my hon. colleagues to truly understand what is being asked here. Much like the removal of safeguards, knowing that lives like those of David Shannon and Kristine Cowley will be cut short if this legislation passes is far too great a risk for me to accept.

Those who support the bill continue to fall back on the idea of autonomy to justify their willingness to ignore these risks, so I will read a comment from David Shannon addressing this:

What offends me most about Bill C-7 is that there is an implicit licence to promote death. And I ask, why is there not the promotion to pursue one's autonomy? When someone is first injured, they are compromised. They need to know there are supports available, that life can be fantastic, not coerced to leave their life and loved ones behind.

When someone is first injured, they are compromised. When someone is compromised, their autonomy is impaired. It is in this compromised state that the government wishes to offer death to Canadians. I will also remind the House of the government's absolute failure to provide disabled Canadians with the care they need. I remind the House that it often takes much longer than 90 days to even see a specialist. I remind the House what the Minister of Disability Inclusion told the justice committee: It is easier to receive MAID in this country than it is to receive a wheelchair.

Not only are we offering death when a patient's autonomy is most compromised, but we are coercing patients to die by failing to offer them care. I have asked this before, and I must ask it again: Do we really want our legacy as members of Parliament to be the Parliament that offered patients death before we offered them care? That is where we are headed with this legislation.

Once again, on behalf of disabled Canadians, their doctors and their advocates, I am begging members of the House to stop this attack on Canada's disabled community. They have been crystal clear about the ultimate abuse that their community would be subject to if the bill passes. I am begging members to hear their pleas. We know the abuse we can expect in the future, so the government will not be able to say it did not know, just that it did not listen.

• (1145)

We have been warned in no uncertain terms about what will come, but now I would like to speak about the abuse that is already happening.

Gabrielle Peters, a journalist who lives with a spinal cord injury, wrote the following in a recent open letter to Canadian senators. "I know that Bill C7 must be stopped because I know passage of this bill will result in preventable deaths of disabled people. I know this because I know those already happen. I know they already happen because I was almost one of them."

The government is rushing to eliminate safeguards for euthanasia when the current safeguards are not even being adhered to. According to bioethicist Dr. Jaro Kotalik, it is evident provincial and territorial authorities are not fully engaged in their role of monitoring, enforcing and reporting on the performance of the MAID program, which they are expected to do according to federal laws and regulations.

This is clear from Roger Foley's testimony to the Standing Committee on Justice and Human Rights. His caregivers, who he depends on for every comfort and necessity of life, have suggested four times that he opt for MAID. Roger's death is not reasonably foreseeable, so this is completely illegal.

It is incredible that on the International Day of Persons with Disabilities, every Liberal MP voted against protections for persons with disabilities being added to Bill C-7. Even the Minister of Disability Inclusion, who expressed in the Senate pre-study that she shares some of the concerns of disabled Canadians, voted against our amendment.

Let me remind the House what the UN special rapporteur on the rights of persons with disabilities said on her visit to Canada: "I am extremely concerned about the implementation of the legislation on medical assistance in dying from a disability perspective. I have been informed that there is no protocol in place to demonstrate that persons with disabilities have been provided with viable alternatives when eligible for assistive dying."

The opposition tried to address that concern by moving an amendment in committee requiring that patients have meaningful access to care before MAID can be administered. I remind the House that the Liberal members voted it down.

Let me share another concern raised by the rapporteur. She said, "I have further received worrisome claims about persons with disabilities in institutions being pressured to seek medical assistance in dying, and practitioners not formally reporting cases involving persons with disabilities."

Earlier I referenced the 2019 Health Canada report on MAID. While some of the statistics therein were helpful, there were clearly some issues with the report, namely the lack of any mention of abuse. The information collected was self-reported by MAID providers, so uncovering abuses was unlikely. We know there has been abuse; that much is clear. Cases like Roger Foley's, as well as those of many others, make this undeniable.

Archie Rolland, 18 months before his death by MAID, was transferred against his will from a residence that provided highly specialized care to a geriatric long-term care facility that could not meet his needs. He said that it was not the illness that was killing him. He was tired of fighting for compassionate care.

Sean Tagert, a father with ALS, exhausted from battling for the care he needed to live at home, was told he would have to be placed in a long-term care centre hours away from his home community and family. He was unable to live the remainder of his days at home with his young son and felt the only option was MAID.

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There are also the stories of Alan Nichols, Yvon Tremblay, Gabriel Bouchard, Tommy Sec, Jonathan Marchand, Raymond Bourbonnais, Candice Lewis and far too many more. Some of these people are still fighting for their lives and some of them already gave in to the pressure to die.

Why are there so many horror stories? Why is there such a lack of compliance? It is simple: There is a lack of oversight. Many doctors and family members of patients have told me their complaints lie dead in the water. There also exists a culture of severe bullying in medicine, so doctors are scared to speak up out of fear of losing their jobs.

• (1150)

A press release from back in March written by the Physicians' Alliance against Euthanasia said, "The pressure has been intense for many physicians, especially amongst palliative specialists, some leaving even before this latest development. Descriptions were made of toxic practice environments and fear of discipline by medical regulators."

When I last spoke to the bill, the Parliamentary Secretary to the Minister of Justice asked me if I knew of any cases of pressure that led to prosecution. There are plenty of cases of pressure, just no prosecution. When complaints are made about abuse, there is virtually no avenue for recourse. If someone complains to the police, they are blocked from investigating by doctor-patient confidentiality. When complaints are made to the College of Physicians and Surgeons, they are not followed up on. Many doctors feel cowed into submission before complaints are ever made in the first place.

I attempted to find out from the Legislative Library of British Columbia how many complaints were lodged against doctors with B.C.'s College of Physicians and Surgeons regarding MAID. The response I got is as follows. "The College of Physicians and Surgeons of B.C. cannot disclose the existence of a patient complaint against a physician, unless the complaint leads to formal discipline. Therefore, the exact number of complaints to the college, whether related to MAID or not, is not possible to ascertain using public sources."

The response went on to offer me a media scan of newspaper stories related to MAID complaints in the hopes this would be helpful. Imagine that: The only place where any information is publicly available on MAID complaints is in the media. Shame on us. Imagine the cases of elder abuse that are happening under this easy-to-cheat scheme. We have millions of elderly Canadians with no protection from this regime because there is absolutely no way of monitoring it.

Imagine the cases like that of my constituents, who attended a town hall I held when the MAID survey was open for submissions. Together with almost 100 people, we went through each question attempting to understand and respond in a thoughtful way. The more questions we answered, the more we all realized the issue was far too complicated and nuanced for a survey to be of any good.

Then a young father stood up and told his own story of being diagnosed with terminal brain cancer. In the town hall, he explained how he had become depressed following his diagnosis and sought counselling to help him cope with his new reality. Instead, his

counsellor offered him MAID. He was shocked that in his darkest hour a professional counsellor would suggest the very thing that was extremely tempting for him, but not in alignment with his ultimate goal to live his best life to its natural conclusion.

The medical professional on our panel was shocked. This was completely illegal under current law and should have been reported, to which the young man said this: How does one even report it? Imagine that: This man, whose life was put in jeopardy, was completely unaware of even how to report the incident. The doctor said he could go online and write a complaint to the College of Physicians and Surgeons, and told him to do it right away. The young man replied that he did not have the energy. He was going through chemotherapy and was absolutely exhausted. He could not wrap his mind around anything extra at that time.

How many people are out there right now who either do not know who to file a complaint with or just do not have the energy or strength in them to fight? They are already fighting a battle with death and now we want them to go online and file a complaint they may not live to see to its conclusion.

Let me close with a comment from a constitutional lawyer, Derek Ross. He said:

In the face of ongoing evidence that the current procedural safeguards are not being followed, it is alarming that the government is seeking to remove many of those safeguards, rather than strengthen and uphold them. Who is investigating these findings of non-compliance? And who is collecting and consolidating this data? The Carter decision was premised on the assumption that procedural safeguards would be "scrupulously monitored and enforced". The federal government bears responsibility for reviewing reported cases of non-compliance and ensuring that data regarding non-compliance is gathered and used to inform future policy decisions.

There are horrible abuses of the current MAID regime taking place, which anyone who is engaged with it will know. The bill is a nightmare to disabled Canadians and to physicians across Canada. The risks associated with it are too serious to accept, and the stakes are as high as life and death. We cannot get this wrong.

• (1155)

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, one gets the sense, listening to the member, that she is very passionate on the issue, and I do not question that at all. However, I substantially differ with her regarding the attention paid, particularly by our health care professionals, family members and dear friends, to the type of abuse that the member seems to be convinced exists, if it is in fact there. I have never heard a complaint. I have never had a constituent complain to me personally regarding abuse in this area. That is not to say it is not there, but I do not think the member supports the idea of MAID legislation, and that is the question I have for her.

Does the member support the need for legislation of this nature, even in an amended form?

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Mrs. Tamara Jansen: Madam Speaker, I support two very important principles. The first is that choices are patient-initiated, which is very important. The second is meaningful access to care before MAID is carried out.

If we cannot even manage to offer palliative care or psychiatric care, how can we honestly do what we are doing? The palliative care bill that we passed a number of years ago says that MAID cannot be considered voluntary if there is no meaningful access to care. I am begging members to consider that this is a bad bill. We need to focus on offering good medical care.

I will give the member a few statistics that come from the Canadian Association for Long Term Care. The 2017 federal budget included a historic \$6 billion over 10 years for home and community care, but long-term care was not included in this investment. The national housing strategy does not include long-term care. The home support work pilot for foreign caregivers does not include employment in long-term care. The 2019 federal budget did not include investments in long-term care. The federal government flowed \$343.2 billion in COVID-19-related spending in the first quarter of this year, and not one dollar was committed to supporting long-term care.

How are we going to support our seniors, our vulnerable, if we do not invest in long-term care?

• (1200)

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Madam Speaker, the member gave an excellent speech.

It is interesting to observe the discussion between some of our colleagues and members of the government. We are pointing out that in testimony, especially at the justice committee, people were reporting significant problems. The member read some additional stories. These are people with disabilities who were being pushed toward euthanasia even when they had not expressed any interest in it. On the other hand, the government is saying that the system must be working, because nobody has been charged, complaints are not being made through official channels, and nobody has called the office of the member for Winnipeg North to report this issue, which I am not sure would be the appropriate reporting mechanism anyway. There is a disconnect, but at the same time, they are both true. It is true that there are problems. We know this. It is also true that people are not being disciplined or held accountable when abuses take place.

The member has spoken about this, but I would love to hear more about how we can actually address this disconnect and ensure that, first of all, abuses are not taking place, and secondly that we have safeguards to support and protect people and that we give them avenues, or have others advocate for them, when there are situations of pressure towards death. The reality is that we will just never know about most of these cases with the problems in reporting and support that are there. We are just never going to hear about the vast majority of times when this happens.

Mrs. Tamara Jansen: Madam Speaker, I have been an advocate on this issue for many years now, and worked with Mark Warawa, an amazing member of Parliament who is no longer with us. I have had many people come to me with their concerns about issues of non-compliance. Perhaps other members have not been paying at-

attention, but had they, and had they been advocating on behalf of the disabled and the elderly, they would know that this was happening. There is absolutely zero way of monitoring it.

Before anything, we absolutely need to ensure that vulnerable Canadians are protected. We are focusing on Bill C-7 rather than on ensuring that there is some sort of protocol in place, as the UN Rapporteur talked about, where we can monitor what is going on rather than just on MAID providers. We are opening it up more and more, and we have no way of knowing how much abuse is happening.

Again, I am speaking on behalf of those who are not able to speak for themselves and I am saying it is happening. We need to watch out. We need to take care not to push these myths forward.

Mr. David Sweet (Flamborough—Glanbrook, CPC): Madam Speaker, I appreciate the opportunity to ask my colleague a question. Earlier the Leader of the Opposition referred to a legal term called “decisionally vulnerable”. My colleague was just talking about long-term care, but the promise that the government made a full five years ago, in regard to an investment in hospice and palliative care of \$3 billion, has not come to pass.

I am wondering how the member feels in regard to whether that would exacerbate the feeling of being vulnerable for those people who are decisionally vulnerable presently.

• (1205)

Mrs. Tamara Jansen: Madam Speaker, what we are hearing is that those who are vulnerable are not able to access meaningful care. Without access to meaningful care, many of them have no choices. They are in our hands and we are not offering them care. We are offering them euthanasia.

I would like to point out what happened with MP Mark Warawa. He was diagnosed with cancer and it took him nine days to see a palliative care specialist. There were only two of them in the hospital there. The fact that it took him nine days to be able to see a palliative care specialist shines a light on the fact that our system needs more support. We need to ensure that these sorts of care are in place for those who are in need of them. To ignore them like this, and to rush this legislation in the way that we have been doing, is absolutely shocking. To see the vulnerable advocates who came forward at the justice committee, and who were ignored, is quite shocking. I would love to see the government stop and actually listen to those who are begging it to ensure there is care, and not a rush to death.

Government Orders

Mr. Scott Reid (Lanark—Frontenac—Kingston, CPC): Madam Speaker, I know my colleague has been following the debate. I saw her on the screen earlier, so she would have heard everything. One of the arguments that has come up in the course of the debate was a suggestion from the government benches that the bill is being introduced in order to comply with court-ordered rules regarding maintaining the constitutionality of our law. Moreover, the Minister of Justice and Attorney General was opposed to the previous MAID legislation because it failed to do this.

With regard to the various amendments that were put forward by the Conservative Party, is it the case that any of these suggested amendments would have had the effect of causing the new legislation to not be compliant with the Constitution, or is it the member's view that the legislation nevertheless would have been fully compliant if amended as suggested by the Conservatives?

Mrs. Tamara Jansen: Madam Speaker, it is important to understand that we looked very closely at what our amendments were to ensure that they would be allowed. Unfortunately, the Liberals voted all of our amendments down.

Mr. John Williamson (New Brunswick Southwest, CPC): Madam Speaker, I will be splitting my time today with the hon. member for Battle River—Crowfoot.

I rise today to participate in this important debate on Bill C-7, which seeks to expand medical assistance in dying, or MAID. While the Liberal government has summarily dismissed the role of Parliament with respect to the all-party committee study, an evaluation of this law, I believe it is still important to ensure my remarks appear on the record because Bill C-7 is literally a matter of life and death.

Let me begin by quoting my hon. colleague, the member for Lanark—Frontenac—Kingston, who posed this question to the government during the earlier days of our hybrid sittings. In the context of advocating for defibrillators to be placed in community halls, hockey rinks and other places Canadians gather, he asked:

It will cost approximately a billion dollars to renovate Centre Block. I believe that's accurate. It will cost \$5 million to put these AEDs, defibrillators, into all police cruisers. This would save 300 lives per annum. Is the cost of saving 300 lives per annum—one half of 1% of a billion dollars—more or less important than renovating Centre Block?

My colleagues on both sides of the House know I am a strong supporter of our institutions and our history, and of protecting them for future generations to appreciate, learn from and, in some cases, even revere. This is true of Parliament, historic sites across Canada and even statues of our founders for their vision and even, at times, for their faults, and sometimes many faults. My hon. colleague for Lanark—Frontenac—Kingston was posing a simple but profound question to Parliament, which was what is the value of life, and how can it be measured? It is a question that all members of Parliament have been consumed with since the start of the coronavirus pandemic: How can we protect and save lives? It is a question that will form the basis of debate in the House of Commons for the remainder of our natural lives and well beyond.

In just over eight months, all levels of government have spent a combined half a trillion dollars in their struggle against the pandemic. Rich or poor, old or young, married or single, with kids or grandparents: it does not matter what families or households look

like. Everyone is impacted by COVID-19, and governments have acted. The measures brought forward were, in one way or another, based on one simple, profound truth: that elected officials at every level of government across the country support life, and want our nation to fight for it and protect it.

I stand today as someone who will be voting against this piece of legislation, Bill C-7. Medically assisted death is a practice that, if left unchecked, could in some dark corners of society turn the right to die into an obligation to die.

How is it that a government that advocated overwhelmingly to accept closures and economic lockdowns in response to the coronavirus can be the same government that has unmoored us from protecting Canadians, by vastly expanding the legal parameters of medically assisted death? It is grisly.

I would like to quote the member for Vancouver Granville, the former minister of justice, who stated the following about this legislation, Bill C-7:

[Why] is Bill C-7, medical assistance in dying, abolishing the safeguard of a 10-day reflection period and reconfiguration of consent, thereby introducing advance requests for MAID?

Nothing in the Truchon decision of the Quebec Court of Appeal, which the government chose not to appeal, requires this, and the Supreme Court of Canada, in Carter, insisted on the requirement of clear consent. Palliative care physicians, disability advocates and other experts insist that this is an important safeguard and, like other legislated MAID reports on mature minors and mental disorder, advance requests also raise significant challenges.

It is very troubling that this is the direction the Liberals have chosen. A single decision in a single province by a single lower court has upended the law as it stands today, passed by a previous Parliament.

● (1210)

A culture of life is abandoned. Even the most basic safeguards are deemed by the current justice minister, the cabinet and caucus to be overly restrictive. We have a fragile consensus established in the last Parliament and with Bill C-7, we will undo that important consensus. I hope we can rediscover that consensus again in a future Parliament when its leaders are more reflective on matters of life and death and perhaps will express some humility when we face these questions.

We must, as parliamentarians, even those who sit across the aisle, reject the unwise extension of medical assistance in dying in our society. However, I am dismayed that this will not happen.

Bill C-7 is medical assistance in dying in name only. Its sponsors cling to that description to give it a fig leaf of respectability and to make it palatable to the public. Bill C-7 would strip away both safeguards to protect vulnerable Canadians and even the belief that one's death should be near, imminent or even reasonably foreseeable. Whereas medical assistance in dying has built in safeguards, today's bill does not and we are simply left with medical assisted death.

Government Orders

Mr. Charlie Angus (Timmins—James Bay, NDP): Madam Speaker, one of the issues that is really important is the fact that we have to deal with the courts and court decisions, which lays out questions that government has to look at with respect to legislation.

What I find concerning about the last court decision is that the federal government never appealed it. I do not think there has ever been a first nation ruling in any court ever that the federal government has not appealed all the way to the Supreme Court, fighting tooth and nail. However, on a fundamental question on the issue of a foreseeable death, something that is difficult for all of us to deal with but we understand it, we understand why it was brought in and we understand why the Supreme Court made us come forward with legislation, this was ruled on by a provincial court and the federal government did not appeal it before bringing it in for legislation and then went beyond the decision.

Does my hon. colleague think it would have been better if we had actually appealed it, had a very clear ruling from the Supreme Court and then responded to that?

• (1215)

Mr. John Williamson: Madam Speaker, I do think that would have been the better approach, to examine the ruling and appeal it the Supreme Court to get a broader interpretation of the law.

The last Parliament was right in the approach it took in crafting the legislation by striking an all-party committee. That committee came up with recommendations. Not everyone agreed with it, but the bill that came out of Parliament had broad consensus in the House despite some of the flaws, which even I see in the current legislation. At least it had that democratic participation. As well, it went through the Senate, received royal assent and became the law.

Today we are left with a single court decision, as my hon. colleague said, from a lower court judge that was not appealed. I think that was done as a rush to judgment by the government to make changes. I will note for the chamber, and I am sure it has been noted before, that the current justice minister voted against the current law.

At the time, he felt it was not sufficiently robust or expansionary. Opportunities have allowed him to re-craft that law in a way that ignores Parliament and ignores the input from the last Parliament, which was sought from all parties. Today we are left with a much diminished bill that breaks that consensus. Because of that, we will be debating this into the years ahead and in Parliaments ahead.

Mr. Damien Kurek (Battle River—Crowfoot, CPC): Madam Speaker, a lot of discussion has been had around the safeguards issue. I wonder if my friend and colleague could comment on how this bill greatly diminishes the safeguards. He talked about how they were carefully crafted in a way that respected the democratic process in the last Parliament. Could he talk about how some of those safeguards have been reduced or completely eliminated in the bill, which go beyond the court decision that the government uses as justification for the bill it has introduced?

Mr. John Williamson: Madam Speaker, that is exactly right. The crafters of this bill like to tell us in Parliament and Canadians that they were forced to do it, that a lower court forced their hand to come up with this legislation. However, in many cases, as my hon.

colleagues have pointed out and as the former minister of justice who is now an independent member has noted, this bill goes far beyond the court ruling. It would remove safeguards.

For example, the 10-day reflection period is gone. Other important safeguards have been removed. This will have an impact, I believe. It will have a grisly impact over time as medically assisted death becomes just a push to death in some corners as people are forced to consider things they would not have otherwise considered. I worry about this. I worry about it for those Canadians who are in a vulnerable position or near their end of life or even people who have given up for a brief time. Often, we know, with health care and with better care, that people can rebound, not always, and I know there are tough cases out there, but this legislation will send us in the wrong direction on these important questions.

• (1220)

Mr. Damien Kurek (Battle River—Crowfoot, CPC): Madam Speaker, it is an honour to enter into debate on such an important subject.

The first thing I would like to address is the comments that the Minister of Justice and other members of the government have been making that somehow the Conservatives are holding this bill up, that we are somehow responsible for this delay. I will expand on this, but there is really one word that completely rejects that argument, “prorogation”.

The government came forward with the legislation before. It certainly will not surprise any of my constituents, but when the government used its excuse for the need for a legislative reset, it just happened to coincide with the day that very revealing documents were to be released relating to an unprecedented scandal the Prime Minister and various members of the government were facing, it prorogued Parliament, resetting the legislative agenda, because of COVID, they claimed. Now many of the bills they introduced in the previous Parliament have been reintroduced in this Parliament. Then they make it about the Conservatives somehow holding up the process.

We are 24 days behind in the legislative process during which we could have dealt with this legislation and many of the other important things, COVID-related and otherwise, yet here we are. The words that come to mind about it are not necessarily parliamentary, but it is a shame that we find ourselves in this position and that members on the government side would suggest we are somehow not doing our jobs by debating legislation that is literally about life and death.

Constituents will hold government members to account on this subject. I have heard often from those concerned on all sides of this issue. I will get to some of the comments that the Minister of Justice has made more recently. There is the need for dialogue, discussion and careful consideration so we can strike the right balance. That is why Parliament exists, the hallowed chamber that we all have the honour and privilege of sitting in, so we can have discussions.

I would love to see the composition of the House changed a little with respect to the numbers of seats that particular parties have. I am certainly doing my best to ensure that happens, and there is some encouraging news on that front. However, it is interesting that the people who Canadians send to this place, regardless of the composition, is due to the importance of the dialogue associated with every aspect of our jobs here, whether it be COVID-related, or related to medical assistance in dying, as we are debating today, or the many other issues that come before this chamber and its committees.

We cannot diminish the requirement for us to do our due diligence in every aspect of the word. I am certainly doing my part in this debate and resoundingly rejecting the government saying that somehow the Conservatives are delaying this. The blame for that lies directly on the desks of the members of the Liberal government. They are manufacturing urgency when the reason there is even urgency to begin with is due to carefully crafted political games by members of the government opposite.

As listened to the Minister of Justice talk about Bill C-7 over the course of specifically the last number of weeks, there has been an evolution in his responses. The last time I participated in debate was from my constituency office and the Minister of Justice, the day before, had talked about how the Liberals had found broad consensus on this issue, that they had come together and done what the people had asked them to do.

• (1225)

He bragged about the 300,000 submissions to the consultations, when I know for a fact, and I mentioned this in my last speech, that the position the government came to was certainly different from many of the consults my constituents sent in, which did not seem to be acknowledged.

I find it very interesting that when the minister answered yesterday, there was a change in his tone. The Minister of Justice referred to this as a sensitive subject. He was much more nuanced in his approach, acknowledging that there is wide disagreement on it, but that Conservatives should hurry it up. I am paraphrasing, but the change in the minister's tone is a clear example that the Liberals' hands have been slapped. The Liberals claim to have consensus on an issue when it is clear they do not.

We have disability rights advocates and medical professionals who certainly seem to have a wide consensus, although I will not go so far as to say it is universal, as that is an inappropriate use of a term with such a broad application. However, there seems to be a tremendous amount of consensus, not universal, that this bill is flawed and deserves due consideration.

Government Orders

That is exactly what this institution's role is, whether it is us or the other place debating Bill C-7. I imagine the bill will pass. At second reading and report stage we certainly saw the bill pass, so I anticipate that we will see a similar result and that the other place will also have the opportunity to go through the dialogue.

I do want to talk about how we are facing a tragic irony. The Government of Canada, like governments around the world, like provincial governments and like municipal governments, has poured trillions of dollars into COVID response programs. It is without question that those who are most at risk and most vulnerable among us for this virus, which has gripped our world over the last number of months, or close to a year, are seniors. I find it tragically ironic that, in the legislative reset supposedly prioritizing COVID, we would be debating this bill, which puts some of our most vulnerable at risk.

While governments have poured trillions of dollars, in many cases rightfully so, into COVID relief and response programs, we are here debating a bill that would allow people to end their lives and reduce safeguards on a decision that can be no more final. That tragic irony brings us to today. The government members will talk about the need, and often they criticize Conservatives' debate on many aspects of the COVID response, yet here they are pushing for something that is the antithesis of what all parliamentarians would certainly say is trying to do what is best for constituents, which is doing what is best for Canadians.

Often the constitutionality of this place is forgotten, and the reality that the highest elected office in this land is not that of the prime minister, but that of the member of Parliament. We could have a lengthy discussion about why there is that misunderstanding, whether it is because of the prominence of American media in Canada, education or whatever the case may be, but in regard to the primacy of Parliament in Canadian law and society, the member Parliament is the pinnacle of what this institution is.

There are 338 of us. When constituents talk about things like western alienation, they ask how we can make a difference. My response is that I know I can make a difference because I occupy the same number of seats as the Prime Minister does, as the member for Winnipeg North does, and as does any one of my Conservative, Bloc, NDP and Green colleagues. That is the strength of our institution and why free votes are a part of the reality of this place. I would certainly encourage my colleagues—

• (1230)

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): The hon. parliamentary secretary to the leader of the government.

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, it is a false argument for the Conservative opposition to give the impression this is about process. It is not about process; it is more about a lack of confidence. The Conservatives, as the official opposition, are saying they do not trust the Superior Court of Quebec, which I would suggest impugns the character and competency of the Superior Court of Quebec judge. They are saying no to the legislation because it should have been appealed.

Government Orders

My question to the member is this: Will he come clean, be transparent with Canadians and say that the Conservatives do not like the legislation, and that if they were in government, they would not respect the superior court and go to the Supreme Court of Canada?

Mr. Damien Kurek: Madam Speaker, I will respond to the member opposite in two ways.

I would encourage the member to read our constitution, if he has not had a chance, to understand the appeals process in the lower courts, higher courts and the Supreme Court. It has nothing to do with the confidence of that decision, but with the decisions made within what I assume are the hallways or back rooms of how the current government operates. I would encourage the member opposite to look into that process, because I am sure he would find it enlightening.

When it comes to being open and transparent, there is certainly a lot I would say on that. Where are the documents regarding the WE Charity scandal? Where are the documents regarding every aspect of—

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): The hon. member for Winnipeg Centre.

Ms. Leah Gazan (Winnipeg Centre, NDP): Madam Speaker, I think we can all agree that there is a history in this country of human rights violations against those in the disability community. It has been mentioned by Conservative colleagues many times today.

My question is this: Because of that, do they support the call-out from the disability community for a guaranteed livable basic income; more investments into affordable, accessible social housing; and more supports to ensure people have what they need so they can live in dignity, yes or no?

Mr. Damien Kurek: Madam Speaker, when it comes to ensuring that Canadians have the opportunity to live in dignity, absolutely, yes. However, when the member talks about the need for supports and ensuring there are programs to protect the most vulnerable among us, I would simply pose this counter-question: How would that be paid for?

It would be paid for by the prosperity of Canadians, including from natural resources. I have heard from indigenous communities that are troubled by the fact there are political opponents in this place who would try—

[*Translation*]

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): I must interrupt the hon. member. The hon. member for Laurentides—Labelle on a point of order.

Ms. Marie-Hélène Gaudreau: Madam Speaker, there is a problem with the interpretation.

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): The interpretation does not seem to be working.

It is working now.

The hon. member for Battle River—Crawfoot.

[*English*]

Mr. Damien Kurek: Madam Speaker, when it comes to ensuring Canadians have the opportunity to live their lives in dignity and

that we have well-funded social programs and whatnot, we need to ensure our economy grows, so the government has the revenue to pay for that world-class suite. This is as well as a continuous consideration of ways to ensure it continues to serve the best interests of Canadians. I would ask the member to consider supporting some of these resource projects, which are largely supported by indigenous communities from her region and others.

Mr. Warren Steinley (Regina—Lewvan, CPC): Madam Speaker, what a privilege it is to listen to the member for Battle River—Crowfoot today. I had the honour of working with this young man when he was in the Saskatchewan legislature. To hear him represent the views of his constituents today on such an important bill is inspiring. It shows what a great parliamentarian he is and will continue to be for a long time to come.

My question is this: Could the member expand on some of the reasonable amendments our Conservative Party has put forth regarding the bill? Maybe he could give an example or two of why he thinks the Liberal government would vote against reasonable amendments that would have put safeguards in place, such as the 10-day reflection period, which was championed by most people with disabilities across this country.

• (1235)

Mr. Damien Kurek: Madam Speaker, it is a little hard to believe that it was only a few years ago that I was a staffer serving this member and others in their work as MLAs. It is certainly an honour to be able to serve in this hallowed institution now with him as colleagues. I look forward to working with him for many years to come. Hopefully there will be a redistribution of seats and a reconfiguration, and I hopefully look forward to that being from the other side.

He mentioned two very important amendments that were brought forward that would have ensured the real crux of what we are talking about here, which is that the most vulnerable among us are to be protected. Two very simple aspects of that were the reflection period and the time limits on reasonably foreseeable death.

To protect those most vulnerable among us should be of the utmost importance for each and every member of the House, so I would encourage all members, with my final few words, to vote the way they feel best represents their constituents, not the way their party leader suggests they should.

[*Translation*]

Mr. Gérard Deltell (Louis-Saint-Laurent, CPC): Madam Speaker, it is with a great deal of emotion that I rise again in the House to speak to this extremely sensitive issue, medical assistance in dying.

In this speech I will highlight the parliamentary and judicial reality. As the House leader of the official opposition, I have a thing or two to say about that. In fact, I have quite a few things to say about that. I will talk about the reasons why we are gathered today to talk about Bill C-7 at third reading stage. I will also address the substance of the issue, that is, my position and that of my colleagues.

Government Orders

Before I begin, I would like to make certain things clear: this is a topic that leaves no room for partisanship. On this file there are no good guys or bad guys, good positions or bad positions, good votes or bad votes. There are just positions that we are comfortable with, that we believe in and are prepared to defend personally as individuals. This topic may be terribly divisive, just as it may be a golden opportunity to have an intelligent conversation that is above all respectful of differing opinions.

As you well know, Madam Speaker, I do really enjoy political battles. I do not hate the arguments and the counter-arguments. On the contrary, it is part of politics. However, there are issues that do not lend themselves to this.

[*English*]

As far as I am concerned, when we talk about assisted dying situations, the issue is not a partisan one. There are no bad guys and good guys. There are no good votes or bad votes. There are only votes and positions in which we are comfortable. Where we stand firm on that is being respectful to our counterparts. This is the issue, and this is why I want to address it. While sometimes, the House knows, I like to be a little aggressive in my comments, in this case I will try to do my best to be modest, because I want to be respectful to each and every position.

[*Translation*]

Bill C-7 responds to a decision of the Quebec Superior Court. However, this is not the first time that medical assistance in dying has been addressed.

Members will recall that the Province of Quebec was the first to begin working on this issue, which led to the passage of a law on medical assistance in dying. Unfortunately, or fortunately, I know what I am talking about because I was a member of the National Assembly of Quebec. In passing, I was elected for the first time 12 years ago on this day. As a provincial representative, I worked for six years on this sensitive issue under three ministers and three different governments.

I want to be clear. This issue can be dealt with in a non-partisan way, and the proof is that three premiers—Premier Charest, Premier Marois and Premier Couillard—in two different political parties led the parliamentary work that resulted in the adoption of the first provincial law on medical assistance in dying in Canada. I would like to point out that this was done under the leadership of a premier who was a physician, Dr. Philippe Couillard. I was there.

Then came the Supreme Court of Canada's decision in Carter, again, on medical assistance in dying. The federal government had to decide how to define and set the federal criteria for medical assistance in dying. Prime minister Stephen Harper, recognizing that the federal government was on the verge of an election campaign, rightly decided, with the support of the other political parties, not to address this issue. That was the right thing to do.

● (1240)

[*English*]

As I said earlier, this issue is not a partisan one. That is why former prime minister Harper did the right thing and put it aside during the campaign in 2015. Then the new government elected, which

could have been Conservative, NDP or Liberal, would table a new bill. I have been part of that discussion. I have been part of that committee.

[*Translation*]

The government was well advised to create a cross-party and, more importantly, joint parliamentary committee, which had both senators and members of Parliament as members.

I had the honour of sitting on that committee, at the request of my then leader, the Hon. Rosa Ambrose. I had the privilege of having very interesting and fascinating conversations with Canadians across the country who had different points of view. We came to a consensus in the form of Bill C-14. I want to be clear about the use of “consensus”, because the way democracy works, and this is a good thing, means that some people are in favour while others are against.

Bill C-14 was passed in the House of Commons five years ago. This bill included a clause that could be considered a sunset clause, since it required that parliamentarians review the legislation.

It was inevitable that this issue would end up before the courts, and it did. A Quebec Superior Court judge issued a decision in *Truchon v. Attorney General of Canada* on September 11, 2019.

Through the Minister of Justice, the federal government immediately reviewed the decision, decided to hold an online consultation and introduced a bill in the House of Commons in February. As we see it, that was the first major mistake. I have nothing against the judge or the Quebec Superior Court. Every court has its own responsibilities and makes its own decisions. The judge was appointed to that court in 2017, which was a good thing, and she was appointed to the Court of Appeal on November 20, which was a very good thing.

Every aspect of this issue is sensitive. No matter which law we pass, there will be legal challenges. The better approach, the more responsible, respectful, reasonable approach, would have been for the government to appeal the ruling and then take it to the Supreme Court. As my colleague from Alberta quite rightly said earlier, the Constitution says that every province has a superior court and a court of appeal before cases reach the Supreme Court.

[*English*]

For that purpose, we need to have the highest degree of evaluation. In that specific case, the Superior Court of Quebec is good, but it is not enough. We need to be sure of our judgment on that. That is why the government should have appealed the decision and then let the Supreme Court judges decide what is good and right based on the law, based on our Constitution and based on our Canadian history that we are proud of. That is how it works.

Government Orders

However, that is not how it went. The government decided to call the shots right now. I heard my colleague from Winnipeg North. He is always articulate and always passionate, but with all due respect, I do not agree with him. Just because we are appealing this decision to the appeal court and then the Supreme Court, that does not mean we pay no respect to the Superior Court of Quebec.

[*Translation*]

It is simply a matter of respecting the judicial process as it is set out in our Constitution, particularly when it comes to an issue as sensitive as medical assistance in dying. Regardless of the law that is passed here, we can expect it to be challenged.

It would have been far better to draft legislation based on a Supreme Court decision, as we did five years ago, rather than on a Superior Court decision. I say that with all due respect for Justice Baudouin, who was just recently appointed to the appeal court by the Liberal minister, and for the Quebec Superior Court, which plays an important, essential and extremely serious role in our justice system.

A debate took place in the House of Commons. This was well before COVID-19, before the words “in-person meeting” became part of our everyday vocabulary and at a time when the word “zoom” referred to a camera lens and not to a way of holding meetings. In short, we have adopted a lot of new concepts in 2020.

Getting back to what I was saying, Bill C-7 was introduced in the House of Commons on February 24 following the decision rendered on September 11, 2019, and the subsequent government consultations. On February 26 and 27, we began debate at second reading. We followed the usual regular, rigorous process. Discussions were held. Things were being done in a reasonable manner, even though it would have been preferable if this matter had been brought before the Supreme Court.

Then COVID-19 happened. The government did what it had to do, that is, it postponed the study of this bill and sought an extension from the court because of the delay. The court agreed. Parliament resumed in September, and that is when the government made a serious mistake. I will come back to that later.

• (1245)

Now let's get to the substance of Bill C-7. As I said earlier, there will not be unanimity on this bill because society is not unanimous. That is the very foundation of democracy. That is why we are here in the House of Commons. Some people are for, and some are against. Some people are right-leaning, and some are left-leaning. Some people are sovereignists, and some are federalists. Society is not a monolithic block. The beauty of society lies in all its different textures. That is the democracy that we must preserve. That is why we need to have intelligent debates in the House of Commons.

That is why, during the analysis, our party proposed two amendments that are entirely respectful and reasonable and that seek to protect the most vulnerable people in our society. The amendments essentially call for the 10-day reflection period to be restored when death is reasonably foreseeable, and for the 90-day reflection period to be increased to 120 days when death is not reasonably foreseeable. The purpose of those amendments is to ensure that individuals

who choose to act have enough time to look into their hearts and make the decision that feels right.

That is why prestigious organizations have spoken out against Bill C-7. The Canadian Psychiatric Association has expressed very serious reservations. The Canadian Bar Association has said that it has conditional reservations about this bill. The Council of Canadians with Disabilities opposed the bill. Groups like Living with Dignity, a Quebec-based network, and Inclusion Canada have spoken out against the bill. Indigenous spiritual leaders have expressed very serious reservations. In short, society has spoken, and that is what makes for an interesting debate.

We needed to have a proper debate, with people on both sides of the issue. That is why we would have liked the debate to run its course, without the very heavy influence of the deadline imposed by the Quebec Superior Court.

I will now talk about our work in Parliament, which is essential. I mentioned that Bill C-7 was introduced in February, before COVID-19 and the return of the House. However, the government decided to prorogue Parliament. We know that the Prime Minister made this decision because he was not pleased with the work being done by our MPs on the parliamentary committees studying ethics and WE Charity. The more the work progressed, the more things were heating up for the Prime Minister. He therefore decided to prorogue Parliament.

This prorogation put an end to all committee and House work, and the study of Bill C-7 had to start all over again. As a result, we lost 24 days of parliamentary time. Had we not had this prorogation, we would have resumed on September 21, not on September 23 with the throne speech. Furthermore, had we started on September 21, we would not have lost all the work that had already been done so far on the bill, which adds up to 24 additional sitting days.

The government has the power to prorogue Parliament. Even if I accept the prorogation, why did the government wait so long to introduce Bill C-7? Today we are being told that the Superior Court's December 18 deadline is fast approaching and that we need to hurry up so the Senate can pass the bill in time.

The government presented its throne speech on September 23. When was Bill C-7 introduced? It could have been introduced on September 24, like Bill C-2 was. It could have been introduced on September 25, like Bill C-3, the bill on judges, was. However, this bill was introduced on October 5, costing us seven parliamentary sitting days.

Now, the government is lecturing us, claiming that the Conservatives will not stop talking for talking's sake and that we are wasting time. No. The government has full control over the agenda, and it is the one that decided to prorogue Parliament, wasting 24 days of parliamentary time. On top of the prorogation, this government wasted seven sitting days before introducing this bill, even though it knew full well that everything had to be finished by the Superior Court's December 18 deadline.

• (1250)

Consequently, I will never accept responsibility for the fact that we are still not done, a week and a half out from the December 18 deadline set by the Quebec Superior Court. The government is entirely responsible for this situation, and I will never allow it to accuse us of causing delays.

Not once have Conservative members acted petty, not at second reading, not in committee, not at report stage and not at third reading. Some members support this issue and others oppose it, but we have always expressed our opinions in an appropriate, respectful way.

[*English*]

We never used filibusters or any other rule to be sure that we would let it go, without any decision made. We were respectful, because this issue calls for being respectful. We did it correctly. I am very proud to be the House Leader of the Official Opposition, because members on this side of the House, the official opposition, did a tremendous job at each and every stage. Conservative members were very serious; they were very parliamentary; they did it correctly.

[*Translation*]

That is the opposite of what the Liberals did at the Standing Committee on Finance, where they engaged in systematic obstruction for over 16 hours to prevent the committee from studying ethics scandals, and at the Standing Committee on Access to Information, Privacy and Ethics, where the Liberals engaged in almost 40 hours of obstruction over the course of 10 meetings. That is what I call wasting time. We have done serious, diligent work here, and we are very proud of that.

As I said, the government that is being held hostage by that date, December 18. If ever this bill were not passed by Canada's Parliament, including the Senate, by December 18, what would happen? Bill C-14 will continue to apply, and the Truchon ruling will apply in Quebec.

Basically, the regime proposed in Bill C-7 would not apply, but life would go on, no pun intended. People will keep doing what needs to be done, as they have done from the start, except that the Truchon decision will apply in Quebec and Bill C-14 will apply in the rest of Canada.

I would like to talk about one final, but critical, issue.

[*English*]

With regard to freedom of speech and freedom of vote, I am very proud to be the House Leader of the Conservative Party. On this issue, each and every Conservative member has the right to vote on his or own belief. The best proof of that is that my leader, the future prime minister of Canada, the member of Parliament for Durham, voted against and I did for. This is what democracy is all about.

In our party, we have people who are against, like my leader, and there is me, the official opposition House leader, who voted for. That is what democracy is all about. We should fight for that. Even if I disagree with some of my colleagues and even if all my col-

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leagues behind are not pleased to see that I will vote in favour, so what?

We are the only party to preserve that tool that is so important, that tool that can fight cynicism in politics. I am proud to be part of that team.

• (1255)

[*Translation*]

During the vote on the amendment, there were even Conservative members who voted against the entirely reasonable amendments that we proposed. When it came time to vote on the report, 13 Conservative members voted with the government on this bill. I was one of those members. There were six Quebecers, seven members from outside Quebec, anglophones, francophones, people from the east and west and even neighbours. I voted in favour, but my neighbour from Portneuf—Jacques-Cartier, who is right next to me, voted against.

Let us celebrate this democracy. Let us celebrate this parliamentary system. Let us celebrate full freedom of conscience when it comes time to vote on these issues. Most of all, let us rightly stand up for the work of parliamentarians and vigorously condemn the fact that this government has been dragging its feet, which is why we ended up here with little time to spare.

Mr. René Arseneault (Parliamentary Secretary to the Minister of Economic Development and Official Languages (Atlantic Canada Opportunities Agency and Official Languages), Lib.): Madam Speaker, when I hear my colleague from Louis-Saint-Laurent, whom I hold in high regard, say that the government is dragging its feet, everyone will remember the Carter case.

Everyone will recall that the Supreme Court of Canada had at the time unanimously ordered the Harper government to introduce the legislation that would become Bill C-14. For 10 months, the Conservative government dragged its feet to such an extent that when our Liberal government came to power in 2015, we had only two months to introduce that bill. We had to ask for an extension, which was unprecedented.

My colleague says that we are going too fast. It is always the same doublespeak: we are either dragging our feet or we are going too fast.

In fact, Bill C-7 is a logical continuation of Bill C-14. My colleague sat with me at the Special Joint Committee on Physician-Assisted Dying that was behind Bill C-14. Does he agree that we failed to hold all the consultations necessary to comply with the Carter decision from the outset?

Mr. Gérard Deltell: Madam Speaker, it is always nice to hear from my colleague from New Brunswick.

I will just refer to his province because the riding names are very long and I have to admit that I can never remember them. I commend him for the very serious work he does. He is a serious lawyer, and I have a lot of respect and regard for him.

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First, with regard to the question about 2015, as I said in my speech, we were on the verge of an election campaign. Medical assistance in dying is an issue that must be above partisanship, while an election campaign is the pinnacle of partisanship. That is normal because we are fighting for our ridings and our seats and some debates may become acrimonious because we are being guided by partisanship.

Partisanship is not at all what is needed in the debate on medical assistance in dying. That is why I think the Harper government did the right thing by saying that the next government should be the one to address that situation and by asking for an extension from the court. That is what was done and rightly so.

With regard to the relationship between Bill C-7 and Bill C-14, I would like to remind my esteemed colleague, who, unlike me, is fortunate enough to be a lawyer, that the Canadian Bar Association expressed some very serious concerns about the constitutionality of Bill C-7 and some of its provisions.

I therefore encourage my colleague to be cautious, while reminding him that, personally, I am going to do like him and vote in favour of this bill.

[English]

Hon. Peter Kent (Thornhill, CPC): Madam Speaker, I would like to commend my hon. colleague for the powerful logic of his remarks today.

While we know the Liberals have blocked reasonable amendments to protect the most vulnerable in committee and here in the House, we also know that the Minister for Disability Inclusion testified before the Senate committee pre-studying Bill C-7 that she has grave concerns and that she regularly hears from people who are appalled to discover that a family member with a disability has been offered what she calls “unprovoked” medical assistance in dying. We also know that the Liberal House leader has questioned the acceptability of amendments to be made potentially in the Senate.

I wonder if my colleague could address the legitimacy of possible amendments, when Bill C-7 does arrive in the Senate, for better protection of the most vulnerable.

• (1300)

Mr. Gérard Deltell: Madam Speaker, I have a lot of respect for my hon. colleague, and if I remember correctly, he voted in favour of the amendment and also in favour of the bill.

The point is that we have to always think of the most vulnerable. This is the job we have to do, but we also have to respect the process. This is why my colleague from St. Albert—Edmonton tabled two amendments, which were very reasonable, to protect the most vulnerable of us. The House decided and voted against those amendments. It is sad, but this is the reality. We should respect the will of the House of Commons.

However, as we have to respect the will of the House of Commons, we must also respect the will of the Senate. Most of the senators there have been appointed by the Prime Minister. Therefore, let the Senate do its work. This is why, when we finish third reading and have the final vote here in the House of Commons, the job will continue at the Senate. As the member for Thornhill said, during

the Senate consultations, the Minister of Disability Inclusion said that she had some concerns.

Why does the Prime Minister push so hard, especially with a senior cabinet minister who is there to protect the most vulnerable?

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen’s Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, the member is very much a distinguished parliamentarian, both from the provincial legislature and national legislature here in Ottawa, and is very much aware of process. For example, Conservatives attempted to bring amendments in the hope that if they passed in committee then they would be in a position to support the legislation.

However, the member is also aware that we do not have a majority government. That means they could not get the support of opposition members for the Conservative amendments, just like today the Conservative leadership supports not passing the legislation. The Conservative leadership has made it very clear that it would have taken this to the Supreme Court of Canada, and that because it did not get its amendments, it does not support the legislation.

Would the member acknowledge, in the name of transparency, that it is the Conservative Party House leadership that does not want it to come to a vote? It is not the process, because even if we debated this for another month, the opposition has the mechanisms, tools and so forth to ensure it never comes to a vote.

Mr. Gérard Deltell: Madam Speaker, I will remind my hon. colleague from Winnipeg North that I deeply appreciated, as I said earlier in my speech, that the Leader of the Opposition voted against and the House leader voted for the bill. This is the best demonstration of democracy. The Conservative Party respects everyone, as well as each of their opinions, even all my colleagues here who applaud me. Maybe they are disappointed to learn I will vote in favour, but this is what democracy is all about.

Yes, as I said earlier, we would have preferred to see the Supreme Court table a decision on this issue. Whatever happens, and the member knows this quite well, it will be challenged in court. As far as we are concerned, it would have been preferable to have a bill based on the toughest jurisdiction, which is a Supreme Court decision, so that we could build a bill, which we could oppose or support, that would at least have a foundation based on the greatest, toughest and highest court of this country, the Supreme Court of Canada.

• (1305)

Mr. David Sweet (Flamborough—Glanbrook, CPC): Madam Speaker, my colleague started out by saying that often the problem with this debate is that motives are being impugned. Unfortunately, I am going to have to come to his defence because the member for Winnipeg North impugned his motives.

My colleague from the NDP, the great musician, made an excellent point earlier. The government will take first nations to court and will take veterans to court, but with a life and death situation, it will not deal with that in the Supreme Court of Canada. How does my colleague feel about that?

Mr. Gérard Deltell: Madam Speaker, I feel very uncomfortable.

My colleague raised first nations, saying the government is ready to take them to the Supreme Court. First nations leaders said that they are concerned about the bill, as did the Canadian Psychiatric Association. There is no link there with the Conservative Party of Canada. No, it is Canadian society who has these concerns.

More than that, as human beings, we can change our minds. A friend of mine, who was a strong supporter of the medical assistance in dying policy, changed his mind. Why? Because his father was suffering two years ago and he had to fight with him about it. He said that he was a strong supporter of assisted dying, but not anymore because he lived through it with his father. This is what he told me.

As I said, there is no right or wrong decision and no right or wrong vote. There are just votes and decisions based on what we feel comfortable with.

Hon. Ed Fast (Abbotsford, CPC): Madam Speaker, I am thankful for the opportunity to again speak to the bill. There were a lot of things that I wanted to say the first time around at report stage that I could not share because we ran out of time, but hopefully I will be able to conclude my remarks today.

I am splitting my time with the member for Northumberland—Peterborough South.

The Leader of the Opposition spoke in the House earlier today and talked about how Bill C-7 is moving our country from a regime of assisted death to a regime of assisted suicide. We presently have in place former Bill C-14, which was brought in as a response to the Carter decision. That bill recognized the fact that the Supreme Court said that medically assisted death was a right but needed to be surrounded by guardrails, by safeguards that would ensure that the most vulnerable in Canada do not end up dying when they have an opportunity to live a productive life.

The Carter decision resulted in legislation that imposed a requirement that death needed to be reasonably foreseeable. The legislation before us eliminates that and a whole bunch of other safeguards that the original legislation was intended to keep in place.

Why are we at this place in the first place? Members in the House know that a lower court from Quebec, one single judge, ruled in the Truchon case that the reasonable foreseeability aspect of Bill C-14 violated the Charter of Rights. It was unconstitutional. This is a lower court from Quebec, one single judge, making a life and death decision for Canadians across the country.

One would expect, from a Liberal government that takes veterans to court and takes first nations to the Supreme Court of Canada, that this life and death decision would be appealed. The Truchon case would be appealed through to the Supreme Court so that we could have the Supreme Court, which articulated the Carter decision, comment on whether reasonable foreseeability was in fact constitutional.

Instead the Liberal government said, no, it was not going to appeal and in fact it would simply respond to the Truchon case and do exactly as that single judge of a lower court asked it to do. The Liberals eliminated reasonable foreseeability from Canada's medical assistance in dying regime. That is why we are here.

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Members may recall, when C-14 first came forward, when the Carter decision had to be responded to, that parliamentarians noted the fact that this represented the crest of a steep, slippery slope toward making assisted suicide available to a broader and broader group of vulnerable Canadians. That was the concern that we expressed at the time and, quite frankly, some people mocked us. They said we were fearmongering. They pooh-poohed our concerns. Today, here we are and our concerns have been borne out.

Last time I did not get a chance to read into the record a letter from a doctor in my community of Abbotsford, Dr. James Warkentin, who expressed his concerns about the legislation. He says, "I appreciate your invitation to write to you regarding C-7. As a family physician, the decriminalization of medical assistance in dying in 2016 struck me at my core. How could killing someone one day cost me my licence and send me to jail, and the next day be expected of me to provide? Furthermore, how could our most vulnerable be protected from the pressure to end their life one day and then have state-sanctioned avenues the next?" He went on to reference the six reasons why over 1,000 Canadian physicians have signed a letter opposing Bill C-7.

● (1310)

In a moment I am going to read that letter into the record, because I believe those judges would appreciate having that letter on the record so it is very clear that many medical professionals across the country oppose Bill C-7, which would remove many of the safeguards, the guardrails, the protections for the vulnerable which were originally intended under the Carter decision.

The letter begins like this:

This bill, expanding "medical assistance in dying" (MAiD) to virtually everyone who is sick and suffering in Canada, will, if passed in its current form, make our country the world leader in administering death.

As medical doctors, we feel compelled to voice our dismay at how individuals who have little lived experience of the realities involved in the everyday practice of medicine suddenly and fundamentally changed the nature of medicine by decriminalizing euthanasia and assisted suicide.

As a side note, when they refer to "individuals who have little lived experience of the realities involved in the everyday practice of medicine", they are referring to us, the parliamentarians in the House. It goes on:

Unfortunately, our patients are the ones who suffer the most from the consequences of this ill-devised scheme. The shock of a sudden illness, or an accident resulting in disability, can lead patients into feelings of anger, depression, and guilt for requiring care - emotions that, with proper support and attention, can resolve over time. The care and encouragement shown by physicians may be the most powerful force in overcoming despair and providing hope. Unfortunately, patients can no longer unconditionally trust their medical professional to advocate for their life when they are at their weakest and most vulnerable. Suddenly, a lethal injection becomes part of a repertoire of interventions offered to end their pain and suffering.

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Bill C-7 would allow those who are not dying to end their lives by a lethal injection at the hands of a doctor or nurse practitioner. Shockingly, most of the safeguards that Parliament deemed necessary in 2016 to protect the lives of vulnerable individuals from a wrongful death are being removed. Under the new bill, an individual whose natural death is considered to be “reasonably foreseeable” could be diagnosed, assessed and euthanized all in one day. We are very concerned that removing the 10- day reflection period and other safeguards will lead to an increase in coerced or tragically unconsidered deaths.

The reckless removal of safeguards previously deemed essential will place desperately vulnerable patients directly in harm’s way and may cost them their very lives....

Our profession has been coerced into facilitating suicide rather than preventing it, for ever-increasing numbers of citizens. We watch in utter dismay and horror at how the nature of our medical profession has been so quickly destroyed by the creation of misguided laws.

That is an excerpt from a letter from over 1,000 physicians in Canada. It does go on, but I do not have time to complete it.

That is the perspective coming from our medical profession across the country and it is the disability groups, medical professionals, faith groups, palliative care advocates and first nations that are all calling for more caution before expanding assisted suicide, yet the government has refused to listen to those concerns.

At the committee, our Conservative opposition members brought forward numerous amendments that would have addressed some of the failings of the legislation, that would have reinstated the protections for which the vulnerable within our country have called. Seventy-two disability groups oppose this legislation. They want more protections, yet they are not there.

I encourage my colleagues across the way to please give this legislation more time. Give us an opportunity to get this right.

● (1315)

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen’s Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, whether it was the Supreme Court of Canada five years ago in the Carter decision, or the Superior Court decision in the province of Quebec or parliamentarians in this or previous sessions debating this for hundreds, if not thousands, of hours via committees or the chamber at second or third reading stages and so much more, this issue has been debated in a very passionate way for many years. Let there be no doubt that every life is of equal value. I believe that Canadian society wants this legislation passed.

When the Conservatives were in committee, they proposed amendments and had those amendments passed. I assumed they would agree to pass this legislation. It was not just the Liberal Party agreeing, other political parties in the House also agreed.

Could the member provide his thoughts on that issue?

Hon. Ed Fast: Madam Speaker, the member has suggested that the contents of Bill C-7 have been debated for years and years. The legislation was just brought forward by the Liberal government. The issues of expanding medical assistance in dying to effectively become assisted suicide need fulsome debate, because it is an issue of life and death.

Unfortunately, the member does not realize that. He does not understand how critical it is that the 72 disability groups across Canada fear the legislation will put their members at risk. The most

vulnerable in our society, whether it is the poor, children or those with mental health issues, all feel vulnerable under the legislation. Why is that and why is the Liberal government not listening to those concerns?

Mrs. Cathay Wagantall (Yorkton—Melville, CPC): Madam Speaker, I am thrilled to be part of a party that allows its members to vote with their conscience when it comes to bills like this. We have stressed that this is not a partisan issue. From what we heard from Canadians across the country, this impacts them at their core. I would like some feedback from the member on the concept of being able to vote our conscience.

I grieve for people across the floor and around me who I do not think have that freedom. That is something Canadians absolutely look for in their Parliament, the realization of our responsibility in these circumstances to vote our conscience.

Hon. Ed Fast: Madam Speaker, I am safe in saying that the Conservative Party is the only party in the House that takes free votes seriously, that regularly provides its MPs the avenue of saying yes or no to legislation, especially on issues of conscience.

I would extend that to protections that should be available to physicians and medical practitioners across Canada to not to be involved in any way in facilitating assisted death or assisted suicide. Across our country physicians are being told it is part of their obligations as physicians to refer people to another physician if they themselves will not counsel on the issue of medical assistance in dying. This is not about a country that respects freedoms and conscience rights.

We need to step into that gap, protect physicians from having to do something against their conscience in the same way the Conservative leader provides us as parliamentarians a free vote on any matters of conscience.

● (1320)

Mr. Philip Lawrence (Northumberland—Peterborough South, CPC): Madam Speaker, I have been a little disappointed at the tenor of the debate recently regarding MAID. I am hopeful we can carry this back to the passionate, but compassionate, debate we had earlier.

This is a matter of conscience and I am certainly very proud to be part of a party that has given me, as the member for Northumberland—Peterborough South, the freedom to decide how I would like to vote on this bill.

When we look at the legislation, after extensive consultation with folks inside and outside of my riding, a number of issues have occurred. The challenging part for me is that despite many advocates for persons with disabilities raising the alarm bells, much media attention on this and how they might feel, we really have not seen any amendments or changes to this legislation.

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I would say this earnestly and with openness for my friends across the aisle. Are we so arrogant that we believe this language is absolutely perfect and completely beyond improvement? The member for Papineau used to say a number of times that there was always room to be better and there was always the opportunity to be better. In response to that, with all kindness and respect, this bill can be better and there are opportunities to do that.

Some legislation the government has put in during this last year alone has failed. The rent subsidy program did not go off as well as the government had hoped. All reasonable observers, and even members on the other side, would acknowledge that. That is why they had to relaunch the program. The LEEFF program is also not working up to capacity and no doubt will have to be redone. We have seen those challenges.

The difficulty with this legislation is that there is no ability to redo it. This is a life or death matter. If we lose members of our most vulnerable communities due to the legislation, we cannot come back. There is no redo of this. I am perfectly aware, as a lawyer, of the obligation the court has put in front of us from the Truchon decision to get this legislation revised. However, there are multiple devices, as our leader spoke about, to get that time extended.

In all respect and fairness, any reasonable, objective observer would say that it was the government that prorogued Parliament for an additional six weeks. We would have had the time to pass this on time.

I will get into my remarks, but let us keep the tenor of this debate how it is meant to be and how our constituents want it to be. They want a deep discussion of the important issues of passion, the very reason our Parliament exists and the very reason this reasonable debate is what makes Canada, in my opinion, such a great country.

To get into the substance of my speech, those who support Bill C-7 do not want anyone to suffer. Those who do not support it do not want anyone to suffer either. It is important to begin this controversial debate by recognizing that both sides, regardless of how different their beliefs are, are passionate for the right reasons. As with any legislation that will have a dramatic impact on people's lives, the discussion is very important.

Medical assistance in dying is a relatively new topic. Canada is one of the few countries that has legalized it so far, and as such, we must proceed in this new territory with the utmost caution. As our members have spoken about, we need the safeguards. This is not just the members of the Conservative Party mentioning this. Some of our most noted jurists in Canadian history have brought this up, jurists from all sides of the political spectrum who have called for and demanded that there be safeguards. As we say, and it is only common sense, this is a matter of life and death. While we should be guaranteeing a death with dignity, I strongly believe we should first guarantee a dignified end of life.

• (1325)

In order to do this, in order to make sure that people are choosing medical assistance in dying for the right reason, I believe that we need to have a conversation around the state of palliative care in our country. Unfortunately, the state of palliative care in our country is less than favourable. While medical assistance in dying is cur-

rently considered an essential service, palliative care is not. This is an issue that should be gravely concerning to everyone in this House and across our country.

Palliative care is a type of health care for patients and families facing life-limiting illnesses. It helps patients to achieve the best possible quality of life right up to the end of one's life. I know, and I am sure that many members share this, I have had some of the most important conversations of my life with loved ones and friends at or near the end of their life. These moments provide so much quality to those who carry forward and provide so much advice that I carry forward with me to this very day.

Where it is possible to retain a reasonable quality of life, we as a society have a sacrosanct obligation to make sure that people are taken care of, so that, if they do decide on medical assistance in dying, they have done so of their own free will and not because of a poor quality of life that could have been avoided.

Quality palliative care focuses on the concerns of patients and families, and works to support patients through both physical and mental symptoms of serious illness. This may include everything from helping to manage a patient's pain and symptoms to keeping them comfortable in their home for as long as possible.

Unfortunately, while 75% of Canadians would prefer to have their last moments at home, only about 15% have access to palliative home care and 60% die, instead of being surrounded in the homes that some of them have grown up in, in cold, stark hospitals.

Many physicians have raised the concern, because the majority of Canadians do not have access to high-quality palliative care. It is possible that many people, or at least some people, may be choosing MAID because they do not feel there are other options. Amongst the concerns are those laid out by Dr. Stephanie Kafie, a family physician in Niagara Falls with a focus on caring for the elderly.

She has said that something that has not been considered in the rush of passing this bill is the state of palliative care. It is not considered an essential service, however, MAID is. In her experience, many requests for MAID reflected a need for palliative care. Rushing misguided laws regarding the medical profession has led to an erosion of their profession and started significant damage to doctor-patient relations. Their hands are tied. They are not consulted on the drastic changes that are being made.

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As Dr. Kafie notes, the importance of consulting with doctors in the creation of legislation is so crucial. As is so often is the case with parliamentarians, not enough people working on the legislation have any experience in the field itself.

Dr. Drijber, a palliative care physician, has spoken out on this issue, stating that this legislation seems to ignore the importance of the dignity that comes with palliative care, the importance of those final moments for both the living and those who will pass on. He has gone so far as to say that it seems the government has not fully consulted with experts or people who work in the field to help guide them through their decision-making process.

When we come to a conclusion here, in all earnesty and openness, I am reaching out to the other side. They know that there are people in their constituencies who will have differing opinions from them, as do I. We need to make sure that all voices are heard. Are we so arrogant as parliamentarians to think we should not change the legislation, that we cannot, as the member for Papineau has said, always do better?

• (1330)

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, where I agree wholeheartedly with the member is in regard to the issue of palliative care, home care services or long-term care services.

Even though these are provincially administered, the national government does have a role to play. I have always believed that. It goes beyond just transferring cash. We have to ensure there are some standards, that there are opportunities for individuals to be able to have those types of services, in particular, palliative care. We have too many palliative care patients passing in hospital hallways and rooms versus in a proper palliative care facility or in a home.

Could my friend provide his thoughts in terms of to what degree he would like to see the national government take a more proactive approach in working with other governments, and possibly what role he believes Ottawa should be playing in ensuring that there is more consistency across Canada when it comes to these types of services, in particular, palliative care?

Mr. Philip Lawrence: Madam Speaker, I appreciate that well-thought-out and reasonable question. I understand completely that the member's intentions are nothing but the best to make sure that our seniors and those who are at the end of their life have the best possible care.

It is also important to enable innovation and provincial innovation, so that we can see that for Quebec or Ontario, and we are able to get those best practices across the various provinces. It is also critical that we manage our finances well, so that the federal government is in a position to enable proper funding of health care transfers, not as the transfers were slashed under the Chrétien government.

Mr. Dave Epp (Chatham-Kent—Leamington, CPC): Madam Speaker, my hon. colleague's background is not a lie. He is a lawyer.

There were concerns expressed in 2016 with the legislation then, about the potential for judicial creep and now we are experiencing some of that. Why would the decision, then, not be appealed to the Supreme Court where the court could actually uphold some of the guardrails and safeguards that it put in place? I am wondering if my hon. colleague would have a comment on that.

Mr. Philip Lawrence: Madam Speaker, truly, we have some of the most brilliant jurists in all the world in Canada, in our upper courts, in the Supreme Court, and in our lower courts as well, so why we would not give them the opportunity to put their learned intelligence and wisdom to this legislation I just do not understand.

As we have seen, our justices have much to contribute to this debate. Whether it be Justice McLachlin or Justice Cory or Justice Sopinka, they have all offered so much to this debate and to the discussion and, in many ways, they define the very terms of this conversation.

Mr. Charlie Angus (Timmins—James Bay, NDP): Madam Speaker, I always like listening to my colleagues and I especially like listening to my friend from Winnipeg North because he really focuses the discussion so clearly. He said that he thinks it is really important to learn lessons about palliative care and how the federal government could play a role. Well, he stood in the House with his Prime Minister when we brought forward a national palliative care strategy and the Liberals voted for it.

I raised it during the first round of discussions on the end-of-life bill and asked why we do not have a palliative care strategy.

The Liberals said, "Oh well, we will but we have to respond to the Supreme Court, we have to do this first".

Therefore, here we are. We have another end-of-life bill and we have the Liberals saying, "Can anyone can tell us how we could do a palliative care strategy? It is such a good idea, maybe we could start some kind of conversation." We have been through this. We voted on it. We told the Canadian people it would happen and the Liberals did nothing. How long is it going to take?

• (1335)

Mr. Philip Lawrence: Madam Speaker, I might have difficulty answering that question. I certainly enjoy the member. I must say he is one of my favourite parliamentarians with his ability to ask questions.

In response to that question, the time for action is now. I would concur that, unfortunately, the current government does have some challenges sometimes with the follow-through of its great words, as the member's leader would say.

Mr. Tako Van Popta (Langley—Aldergrove, CPC): Madam Speaker, I will be sharing my time with the member for Cypress Hills—Grasslands.

Here we are on December 8, 2020, only 10 days away from a deadline imposed on Parliament by the Quebec Superior Court from the Truchon decision. The Liberal side of the House is suggesting that perhaps it is the fault of members of the Conservative Party for delaying progress on this very important topic. I take exception to that.

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How did we come to this point in the first place? Our leader spoke this morning and he raised this topic, and so I am just going to repeat some of what he said. First of all, there was the failure of the current Attorney General to appeal this decision of the Quebec Superior Court. It is a lower court. In my opinion it was a wrong decision, and it should have been appealed, first of all, to the Quebec Court of Appeal. We would have had the benefit of the wisdom of that bench. Subsequently it should have been appealed, like all important constitutional issues, at the Supreme Court of Canada. I have the deepest respect for the Supreme Court of Canada and the constitutional expertise and scholarship that has come out of that court. The Attorney General has missed that opportunity to be able to engage the Supreme Court of Canada in the discussion on this very important topic.

Parliament, as our leader said, is the top court of the land. We are sovereign. We can make and unmake any laws that we want, provided that they are within the four walls of the Constitution of this country. That is the dialogue that we should have had with the Supreme Court of Canada. That, sadly, will not be happening on this topic.

The second very important point is prorogation. We had been making good progress on Bill C-7. We were talking about this back in February and March already. Prorogation happened, and the debate had to go right back to square one. How is that our fault? Why did the Liberal government decide on prorogation? It was not for any good policy considerations. It was strictly for political considerations, so we are not going to wear that. The Liberal government is going to wear that.

Another point that I would like to raise is that if Bill C-7 reacted in the narrow way that the Truchon decision required, this debate would be much shorter and faster, but the government has decided to take the opportunity to expand the debate. The Liberals are suggesting that we are disrespecting the Truchon decision and the Quebec Superior Court by raising these issues. We are not the ones who are raising the additional issues; it is the government in its Bill C-7 that is doing so. If Bill C-7 was just about the Truchon decision, then it would not be talking about removing the 10-day reflection period. The "First Annual Report on Medical Assistance in Dying in Canada, 2019", just recently published by Health Canada, has told us that, of the 7,336 MAID applications in 2019, 236 of the applicants changed their minds during the 10-day reflection period. Obviously, that 10-day reflection is there for a purpose. It is serving that purpose very well. Why would we be removing that?

Furthermore, Bill C-7 has introduced the concept of advance directives and, consequently, the elimination of contemporaneous consent by the person who is asking for the medical assistance in dying. That would be shifting the final decision away from the person receiving medical assistance in dying to the person who would now be going to apply it. We are no further ahead. I do not think that is an improvement.

Then, there is the other requirement, removing the second witness. What is that about? Why is that so important? There are so many legal documents that require two witnesses, wills for example, to make sure that there is not coercion on the part of people who might benefit. In the case of wills, the beneficiaries of the will might benefit. It is a long-standing legal principle that two witness-

es be required. These changes are significant, and disability groups across the country have told us so loudly and clearly.

• (1340)

Of the many groups that appeared before the committee hearings, not one of the disability groups was in favour of Bill C-7 and the removal of these protections. That is why we are at an impasse in this eleventh hour.

Mr. Neil Belanger, executive director of the British Columbia Aboriginal Network on Disability Society, commented on a newly released document entitled "In Plain Sight", commissioned by British Columbia's minister of health, the Hon. Adrian Dix, to review indigenous-specific racism in British Columbia's health care system. Although it is a review of B.C.'s health care system, the principles in it would apply right across Canada. Mr. Belanger and the group that he represents are concerned about the proposed removal of safeguards. He said:

There is no debating the systemic racism and discrimination within Canada's health systems, and the experiences and deaths of Indigenous peoples when seeking care. We all would be remiss to believe that this somehow would not permeate into MAID.

He went on to say in his testimony before the Senate committee that:

...the Government of Canada has failed to engage the Indigenous peoples of Canada living with disabilities, Elders, and Indigenous Leadership in relation to MAID on any tangible level. This lack of engagement is contrary to the government's stated commitment to reconciliation, UNDRIP, and the CRPD.

Other disability groups are saying the same, yet this government is refusing to listen. Mr. Belanger takes this a step further. He and the organization for which he speaks advocate sticking with the end-of-life criteria already in place after the Carter decision and after Bill C-14, which was the well-considered opinion of Parliament just four and a half years ago.

Recently, when Mr. Belanger's organization presented to the Senate committee on legal and constitutional affairs on Bill C-7, he said that:

[BCANDS]...stands with our sister disability organizations and countless others across Canada in calling for the removal of Track 2 in the proposal changes to Bill C-7, and limiting access to MAID to the end of life criteria...

Track 2 is medical assistance for those people whose death is not reasonably foreseeable.

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People may state the obvious: that this is all water under the bridge and that the Truchon decision said that it is unconstitutional. To go back to my original comments, that decision should have been appealed, and it was not. I am going to have to tell Mr. Belanger that the debate has been had already. This government has sadly treated as a settled constitutional principle that it is unconstitutional for any law of this country to refuse medical assistance in dying to those who meet all the other criteria, but are not dying.

This is a fundamental shift that was not debated. This government has stated on many occasions that it had broad consultations and 300,000 people responded, but the one question it never asked was if people agreed that medical assistance in dying should be given to those whose death was not reasonably foreseeable. The fundamental question was never asked. That is not a true consultation, in my opinion. It is a pretext for advancing a legislative agenda that had been preconceived. It has been said on several occasions in the House during this debate that the current Attorney General voted against Bill C-14 four years ago because it did not address that, and did not expand MAID to that point. This is the current Attorney General imposing his will on Parliament and forestalling that very important debate.

The first report by Health Canada on the state of medical assistance in dying stated that roughly 2% of Canadians in 2019 used medical assistance to die. That is the average across the country, but it is much lower in some provinces. It is the average in Quebec and far above the average in British Columbia.

Why is that? Is it because there are more sick people or old people—

• (1345)

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): The member will have to complete that thought during questions and comments.

The hon. parliamentary secretary.

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, I believe the bill we are debating reflects a great deal of effort on the part of the Supreme Court of Canada and its decision five years ago, the Superior Court of Quebec, tens of thousands of Canadians and hundreds of hours of debate inside and outside the chamber in the form of standing committees and so forth. From what I understand, it has the support of the New Democrats, the Green Party, the Bloc and the Liberals. We know it is not an issue of process, and I would counter any false argument presented by the Conservatives that it is. Rather, the Conservatives do not want this bill to come to a vote because they believe it should have gone to the Supreme Court of Canada.

Would the members opposite be transparent with Canadians and make it very clear that this is the real reason why they are not supporting the legislation?

Mr. Tako Van Popta: Madam Speaker, the real reason we are not supporting the legislation is because it does not provide adequate protection for the disabled. It is not just members from the Conservative Party stating that, but many disability groups that

have come to committee to represent the opinions of their members. This is a broad discussion across all of Canada.

Why is the Liberal government not listening to those real concerns? We have offered reasonable solutions and amendments. The Liberals are turning all of them down. It seems they have predetermined what the outcome will be. They are not listening to the debate.

Mr. Don Davies (Vancouver Kingsway, NDP): Madam Speaker, I want to thank all of my colleagues for the very thoughtful and compassionate speeches and the different perspectives I have heard. One issue I have not heard anybody speak about today is that Bill C-7 creates a waiver of final consent for those already assessed and approved for assistance who fear the loss of competence before their chosen date. This is colloquially referred to as the "Audrey Parker amendment".

Audrey Parker was diagnosed with stage four breast cancer that had metastasized to her bones and caused a tumour to grow on her brain. She spent the last weeks of her life raising awareness about these challenges. She was worried she would lose competence and be unable to give her final agreement because of the influence of the cancer on her brain, and she ended her life prematurely. I do not think that is what anybody wants. We want people to live their full lives. We do not want anybody exercising their right to MAID before they would otherwise want to, because of a legal requirement.

Does my hon. colleague have any comments on that part of the bill?

• (1350)

Mr. Tako Van Popta: Madam Speaker, I have to admit that the Audrey Parker argument is very compelling. Nobody wants Canadians to die earlier than they should.

I believe the best argument against the Audrey Parker principle, as it is sometimes referred to, is that last year alone, and we have hard evidence of this, 263 people changed their minds during that 10-day waiting period. I recognize that even under Bill C-7 there is an opportunity for people to change their minds if they are still cognitively capable. If not, then somebody else makes the decision. Mrs. Parker probably would have signed that document, but ultimately it is the doctor who has to make the final decision as to whether or not to administer the lethal injection. That doctor might wonder if she is one of the 263 people who would change their minds. Why is it the doctor's decision?

[*Translation*]

Mr. René Arseneault (Parliamentary Secretary to the Minister of Economic Development and Official Languages (Atlantic Canada Opportunities Agency and Official Languages), Lib.): Madam Speaker, I have listened with great interest to the debate on Bill C-7, having myself been a member of the joint committee behind Bill C-14.

I heard my colleague say that he has the utmost respect for the Supreme Court of Canada. I would remind him that we cannot talk about Bill C-7 without first talking about Bill C-14, since Bill C-7 is the logical and natural continuation of Bill C-14. On top of that, the Supreme Court of Canada, in which my colleague has great confidence, issued a unanimous ruling in Carter.

Is it not entirely reasonable to keep to the Carter decision, for example, since the Truchon decision addresses in some ways the gaps in Bill C-14, to accept that Bill C-7 finally closes the loop of the Carter case and Bill C-14?

[English]

Mr. Tako Van Popta: Madam Speaker, that question gives me an opportunity to distinguish between the Carter and the Truchon decisions. I have the greatest respect for the Supreme Court of Canada. There is great scholarship coming out of there.

The Carter decision underlined the importance of a scrupulous regime of protection and safeguards for the disabled. Truchon did not undermine that, so there is no contradiction there. It is this Parliament that is contradicting Carter.

Mr. Jeremy Patzer (Cypress Hills—Grasslands, CPC): Madam Speaker, earlier this morning, the leader of the official opposition began today's debate with a strong speech about the problems with Bill C-7 and how the government has been handling it. He started by saying that it could be the most important bill before this Parliament, regardless of how long it actually lasts. After all, we are discussing a matter of life and death, and the decision we make here will make all the difference for countless Canadians.

These are people who will be making their own choices, which will directly impact their own lives, their legacies, their loved ones and their caregivers. It is a choice they might not have expected to ever have to make, whether because of a sudden illness, the unrequested suggestion of assisted suicide or some other reason. Anything could happen, which is why we have to maximize the protection and safeguards there will be for each person involved, especially for those who are most at risk of abuse and neglect.

At this last stage of debate in the House of Commons, I want to focus on the choice, or in some cases the lack of choice, a person might face. Some argue we are seeking their best interests by expanding access to MAID, not only for the relief of suffering but also purely for the sake of free choice.

On the idea of choice, we have to remember this is not an ordinary decision. Someone's death, premature or otherwise, is literally a point of no return. The decision is final. With all the circumstances leading someone to consider the end of their life, it gets complicated very quickly.

To explain it from someone's lived experience, I will quote journalist Ben Mattlin, who suffers from spinal muscular atrophy. He wrote the following in the *New York Times*:

I've lived so close to death for so long that I know how thin and porous the border between coercion and free choice is, how easy it is for someone to inadvertently influence you to feel devalued and hopeless—to pressure you ever so slightly but decidedly into being “reasonable,” to unburdening others, to “letting go.”

Perhaps, as advocates contend, you can't understand why anyone would push for assisted-suicide legislation until you've seen a loved one suffer. But you also can't truly conceive of the many subtle forces—invariably well meaning, kindhearted,

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even gentle, yet as persuasive as a tsunami—that emerge when your physical autonomy is hopelessly compromised.

Despite Mattlin's significant physical disability, he is a father, a husband, an author and a journalist. He has a successful life and he knows what he wants. He is less vulnerable than others who lack the confidence and spark he has, who could easily be persuaded that assisted suicide was their best option.

The idea of this happening voluntarily is, in many subtle ways, the start of a slippery slope that leads to it happening less voluntarily, or involuntarily. The choice is not always so free, especially if real alternatives are lacking. One of the greatest fears a lot of people face in their lifetime is their own mortality, and in a lot of breadth that is what we are discussing here today.

When I talk about Bill C-7, when I talk about facing our own mortality, I often reflect on the experiences my wife and I have had, when grandparents and other loved ones within our family have passed away. We have spent countless hours at their sides, either in the hospital or in their care home. The time spent with one's family is so precious and valuable.

Within the last year, the health of my wife's grandma deteriorated. Her husband had passed away a few years prior, and she had been living in, I think, level 1 care for most of COVID. We were not allowed to go into the facility and had to stand outside the building. She had a nice corner unit with lots of windows, so we were able to observe her condition and speak to her through the window.

Over the course of time, we watched her state of mind and physical state deteriorate steadily and progressively. Her state degraded to the point that she could not lift her head when we came to the window to talk to her. She could not see who was there.

When the restrictions were lifted and one or two people were allowed into the unit, my wife was able to sit beside her grandma, hold her hand and tell her that she loved her. To see her state improve, and to be able to lift her spirits, was so powerful.

● (1355)

I think that as we are having this discussion on Bill C-7, we especially need to ensure that we value life and that we are giving people every option to live their lives. We should also have the opportunity to have our loved ones at our sides as we go through the final moments and face the ultimate end of our mortality, the end of our life.

We need to make sure that people have full supports as well. At the risk of sounding like a broken record, I note that one of the biggest parts of Bill C-7 is the need for palliative care. I have talked at length previously about the need for it to make sure we are providing real choice and real options to people so they have all the options they need and, quite frankly, deserve.

Statements by Members

The vast majority of people who are being considered under Bill C-7, or who will consider MAID, are in our senior population. When we look at the contributions they have made to our society, these are the people who built our country. These are the people who have provided us with the freedoms and opportunities we have. However, here we are discussing a bill, which we will be voting on in the near future, that basically signals to them that we do not value their lives and do not value the contributions they have made to this country. That is what the bill signals.

I know people will argue that this is not what the bill is doing, but sometimes it is not about what the bill directly does, but what it is going to do indirectly. The moment we signify to our country, to our citizens, that we inherently do not value and defend life to its fullest extent, we are sending the wrong message to people.

I realize that people who advocate for Bill C-7 and medical assistance in dying are doing it from a position of compassion. I will never question somebody who says that is the reason they are advocating for it. However, we also need to realize that part of a compassionate response to people who are at that point in their life—

• (1400)

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): I apologize, but the member will have two and a half minutes to finish his speech after Oral Questions and five minutes of questions and answers.

STATEMENTS BY MEMBERS

[English]

ANNA KISIL

Mr. Yvan Baker (Etobicoke Centre, Lib.): Madam Speaker, Gandhi once said, “The future depends on what you do today.” Today I rise to honour someone who shaped our future by what she did every day.

Last month our community lost Anna Kisil. Anna immigrated to Canada from Ukraine in 1990 and with her family built several businesses. Then she gave back to our community, to Canada and to Ukraine, and not just with her generosity, but with her leadership, eventually becoming president of the World Federation of Ukrainian Women's Organizations.

Anna received many medals and awards for her service, including the Cross of Ivan Mazepa awarded by the president of Ukraine.

What struck me about Anna is how she supported younger people to ensure that they could make a difference for today and for the future. In fact, one time Anna fought for me and gave me an opportunity without which I would likely not be standing here today living my dream, and I am not alone.

About that moment, Anna once said to me, “I fought for you because I believed in your potential to make a difference.” Anna Kisil not only made a difference, but helped others to do so as well. In so doing, she made a monumental contribution to Canada, to Ukraine and to our community for today and for the future.

Vichnaya Pamyat.

COVID-19 PANDEMIC RESPONSE

Mrs. Kelly Block (Carlton Trail—Eagle Creek, CPC): Madam Speaker, I want to thank all those constituents who have reached out to me with their questions and concerns during this pandemic. Canadians have questions about the decisions being made by their governments and the plans to get their lives back.

It is alarming to hear the push-back on citizens who are engaged and asking critical questions about the Prime Minister's comments during his speech to the United Nations about a reset. By refusing to answer these legitimate questions and hiding behind name-calling, the Prime Minister demeans his office. To quote a recent article, “Labelling concerned citizens ‘conspiracy theorists’ and claiming that those who accept the prime minister's very words given at the United Nations, are succumbing to ‘disinformation’ is sheer bullying. Our key to freedom and upholding democracy is knowledge, action, and civic involvement.”

I encourage my constituents to keep asking critical questions. We owe it to ourselves and future generations.

* * *

EMANCIPATION DAY

Mr. Majid Jowhari (Richmond Hill, Lib.): Madam Speaker, I am pleased to rise in the House to mark the first reading of my private member's motion, Motion No. 36, calling for the designation of August 1 as emancipation day in Canada. Our motion calls for the House to recognize the abolition of the transatlantic slave trade on August 1, 1834. As well, the motion aims to recognize the significance that August 1 holds as a historic celebration of freedom among Black Canadians.

I want to acknowledge the support the motion has received from Senator Wanda Thomas Bernard, the hon. member for Hull—Aylmer and the members of the all-party Parliamentary Black Caucus. I want to commend the valuable insights I received from community voices like Rosemary Sadlier from the Royal Commonwealth Society, the Ontario Black History Society and the Canadian Association of Social Workers.

In closing, I call upon colleagues in the House to vote in favour of designating August 1 of every year emancipation day throughout our wonderful nation.

* * *

[Translation]

NATIONAL ACADIAN DAY

Mr. Luc Thériault (Montcalm, BQ): Madam Speaker, Acadia has a national holiday to celebrate its history, the history of a dignified, often mistreated, but proud and unique people.

Every year on August 15, the excitement of National Acadian Day reverberates inland all the way to Montcalm, and I am proud of that. I am a Quebecker of Acadian descent and I represent a riding that is home to New Acadia, where many Acadian families have settled.

This year, however, because of bureaucratic insensitivity, the Acadians are facing a second deportation, as they are being asked to move their national holiday to either Canada Day or the Quebec national holiday if they want to receive subsidies. This is a direct attack on the dignity of a nation that deserves respect for the significance of its national holiday, which celebrates the resilience, pride and fighting spirit of the Acadian people.

When will the Minister of Canadian Heritage right this wrong?

* * *

CHRISTIAN BARTHOMEUF

Mrs. Lyne Bessette (Brome—Missisquoi, Lib.): Mr. Speaker, on November 27, 114 Canadians were invested into the Order of Canada, one of the country's highest honours.

I especially want to congratulate one of them, Christian Bartheuf, a resident of Brome—Missisquoi and the owner of Clos Saragnat in Frelighsburg. Throughout his career, Mr. Bartheuf has contributed to the world of viticulture by creating new ways to cultivate that are adapted to Quebec's climate.

Mr. Bartheuf has had a remarkable journey and is known above all as the inventor of the famous ice cider, a product for which he has won many international awards. He has helped promote Quebec agricultural products abroad and garner worldwide recognition for Quebec. Even after 40 years, the man who has been called the “rebel farmer” continues to innovate and to enrich our region's food products.

In closing, I congratulate this winemaker and entrepreneur who has made the region of Brome—Missisquoi very proud.

* * *

• (1405)

[English]

CHRISTMAS GREETINGS

Mr. Richard Bragdon (Tobique—Mactaquac, CPC): Mr. Speaker, on that starry night many years ago, there was a message of hope given in a very dark place of history, declaring, “Be not afraid; I bring you good news of great joy that will be for all people. On this night, a saviour is born. Glory to God in the highest, peace on earth and goodwill to all people.” If there has ever been a year that we needed some good news to pierce through the darkness of fear, doubt and despair, it would be this one.

May we embrace the peace that was promised all those years ago and overcome the uncertainty of fear we face today. May the goodwill that was expressed that night continue to be expressed through our lives, as has been so clearly displayed in the valiant efforts of our front-line workers, small business owners, truckers, grocers, farmers, fish harvesters and many others, who have all made tremendous sacrifices and together have laid the foundation for our country's comeback.

Statements by Members

May the love, joy, peace and hope that was brought that night many years ago be with everyone and their families this Christmas and throughout the coming year. On behalf of my wife Crystal and our family, I would like to extend to every member of the House and all Canadians a very merry Christmas and a happy and healthy new year.

* * *

HOLIDAY SEASON

Ms. Jennifer O'Connell (Pickering—Uxbridge, Lib.): Mr. Speaker, let us face it: 2020 has been the worst, but after hearing yesterday's announcement about vaccines rolling out, we know there is light at the end of the tunnel. Unfortunately, though, Christmas and the holiday season are still going to be difficult and different.

For some they will be particularly difficult, so I am asking the residents of my great riding of Pickering—Uxbridge and Canadians across the country to think this holiday season about helping to support local businesses by shopping local. They should consider donating to local food banks or picking up a couple of extra toys and donating to local toy drives. Despite the difficulties this year, we can all, in the name of the holiday spirit, do our part to help make this year a little brighter for those who really need it.

Merry Christmas, happy holidays and good riddance to 2020.

* * *

CHRISTMAS BELLS

Ms. Gudie Hutchings (Long Range Mountains, Lib.): Mr. Speaker, it is wonderful to stand in the House again on behalf of the wonderful folks of the Long Range Mountains. I want to thank them and all Newfoundlanders and Labradorians for doing their part to control the spread of COVID-19 in our province. As my colleague has said, the light is at the end of the tunnel.

Today, as we take time to talk about church bells and sleigh bells and jingle bells, I want to speak of another bell: Charlotte Bell.

Many of us know Charlotte as the CEO of TIAC, the Tourism Industry Association of Canada. We know her passion for the tourism and hospitality sectors and we know that during the pandemic that passion only grew. Her forward thinking and outright love for this industry, its leaders, workers and clients, many of us have seen first-hand. We have seen the results of her hard work and planning among the many winding roads that she has travelled throughout our country from coast to coast. Charlotte is now travelling another road, and wherever this road leads I know her passion for tourism will always be with her.

Statements by Members

For my friends, here and at home in the riding of the Long Range Mountains, when they hear the bells of the holiday season this year I want them to pause and reflect, be safe and treasure those near and dear to them. May the road we all travel on lead to a magical place.

I wish everyone a merry Christmas.

* * *

JIM PHILLIPS

Mr. Randy Hoback (Prince Albert, CPC): Mr. Speaker, this summer, Canada lost a true friend and ally. Jim Phillips was the president and CEO of the Can/Am Border Trade Alliance for almost three decades. His legacy is embodied in the strong relationship and organization forged between Canada and the United States.

Under Jim's remarkable leadership, the essential decision-makers from both countries could gather in one room and always left with the game plan to fix any border irritant, with real results flowing closely behind. Without Jim's hard work, among many other things, we would not have NEXUS cards or a border that flows as reliably and safely as the 49th parallel.

Jim will be greatly missed by all of us engaged on Canada-U.S. issues. We will work tirelessly to keep up the work that Jim dedicated the last 30 years of his life to.

I thank Jim. Rest in peace, my friend.

* * *

• (1410)

RON IRWIN

Mr. Terry Sheehan (Sault Ste. Marie, Lib.): Mr. Speaker, this past Saturday, Lisa and I were very saddened to learn of the passing of our dear friend, the Hon. Ron Irwin.

At the local level, he served as a school trustee, city councillor and mayor. In 1980, Ron was first elected as the Liberal member of Parliament for Sault Ste. Marie and served as parliamentary secretary to then justice minister, Jean Chrétien. Ron was elected again for a second term in 1993 and served as the minister of Indian affairs and northern development.

Irwin was invested into the Order of Canada and was a recipient of the Queen's jubilee medal. I had the honour to present him with a Canada 150 pin for his exceptional public service career, spanning over 35 years. Ron served not only our community but our nation with strong conviction and persevering efforts. He served as Canada's ambassador to Ireland and as a consul general in Boston.

I was blessed to have Ron as a friend and a supporter. Nobody campaigned like Ron. Rest in peace, dear friend.

Lisa and I offer our condolences to his wife Marg, his family and his so many friends. I thank him on behalf of all constituents of Sault Ste. Marie for his years of service.

RURAL INTERNET CONNECTIVITY

Mr. James Bezan (Selkirk—Interlake—Eastman, CPC): Mr. Speaker, I just received hundreds of surveys back from constituents, raising concerns about poor Internet and cellphone connectivity in our riding.

The ongoing frustrations of the COVID-19 pandemic, especially with restrictions to work and school from home, have amplified their exasperation and demand for better service. Back in 2017, only 37% of rural households had access to the sufficient Internet speed identified by the federal government, compared with 97% of urban households. Now in 2020, as more people are working, studying and streaming at home, our already unreliable connections have worsened.

The Liberal government has repeatedly promised to improve Internet connectivity but has failed to deliver. This is a slap in the face to my constituents who pay more to get less and often buy additional equipment, like boosters, just to get five megabytes per second downloads, if they are lucky.

Canada's Conservatives are demanding concrete action from the Liberal government to connect rural Canadians and eliminate these barriers to equal opportunity in today's digital economy and society.

* * *

[Translation]

DAVIE SHIPYARD

Hon. Steven Blaney (Bellechasse—Les Etchemins—Lévis, CPC): Mr. Speaker, the Liberals like to strut around the Davie shipyard in Lévis and make fine promises. Once the photos have been taken, they slip away without doing anything for the shipyard's workers and suppliers.

However, the Canadian Coast Guard and the Royal Canadian Navy have urgent needs, and only Davie is able to build these ships here, in Canada, on schedule and on budget.

The Liberals claim that the Davie shipyard is now part of the national shipbuilding strategy, but they are ignoring and flouting this strategy by having ferries built abroad.

It is time for the Liberals to finally put words into action by offering a firm contract to Davie before Christmas and stop ignoring the largest shipyard in Canada and one we are very proud of.

[English]

MYLER WILKINSON

Mr. Richard Cannings (South Okanagan—West Kootenay, NDP): Mr. Speaker, a few days ago we lost Dr. Myler Wilkinson, former instructor of literature and peace studies at Selkirk College in Castlegar. Myler was an accomplished scholar, an award-winning author and an educator whose students often said that he was the best teacher they ever had.

The West Kootenay has long had a strong vein of peace activism. There are the Doukhobors, whose motto is “toil and a peaceful life.” There were thousands of American opponents of the Vietnam War who found a haven in the Kootenays in the sixties and seventies.

Myler and his wife, Linda, had the brilliant vision to build on this core of peace activism to form the Mir Centre for Peace studies at Selkirk. It has flourished since 1999, providing courses on transformative justice and peace studies.

I am proud to represent a riding with such a brave and bold history of peace activism. We will all miss Myler, but we have the legacy of the Mir Centre to carry on his passion for peace on earth and goodwill to men.

* * *

[Translation]

JEAN DUCEPPE

Mr. Alexis Brunelle-Duceppe (Lac-Saint-Jean, BQ): Mr. Speaker, 30 years ago yesterday, Quebec lost one of its greatest artists in Jean Duceppe.

Jean Duceppe was an actor, comedian and host who left his mark on the theatre, film, television and radio worlds. He was known for his roles in *My Uncle Antoine*, *Death of a Salesman*, *Charbonneau et le chef* and *The Plouffe Family*, and was also known for the theatre company he founded and that still bears his name. Above all, Jean Duceppe was a staunch defender of Quebec.

He loved his people and left a massive cultural legacy, and I was fortunate to call him my grandfather. Of all the lines he ever delivered, his most significant line came at the end of his life. These words are just as powerful now as they were when I was a child: “Quebec is our only country.”

* * *

• (1415)

[English]

BLOOD DONATION

Mr. Eric Duncan (Stormont—Dundas—South Glengarry, CPC): Mr. Speaker, it has been nearly two weeks since the Minister of Health and I exchanged a debate on the floor of the House about ending the gay blood ban. The government was reminded that it has been five years since the Liberals promised not to study and research the issue anymore, but to end the discrimination and stigma that gay men face in this country.

The minister is aware of a safe, science-based solution that asks questions based on sexual behaviour and not sexual orientation.

Oral Questions

The Canadian Medical Association and the All Blood is Equal campaign are calling and backing this campaign. The time for talk and excuses is over. Gay men want to make a difference. We want to be treated the same way everybody else is treated. We can get this done.

All I am asking is for the Liberals to keep the promise they made in the past two election campaigns. All parties are united in this. Let us make history and get this done, not in months or years from now, but now. Let us make the change that is long overdue for gay men in this country.

* * *

CHRISTMAS GREETINGS

Mrs. Alexandra Mendès (Brossard—Saint-Lambert, Lib.): Mr. Speaker, first, let me wish you, all my fellow parliamentarians and all those who work on the hill as happy a Christmas as possible. Just as importantly, I would like to wish my constituents in Brossard—Saint-Lambert a healthy, safe and loving holiday.

The year is drawing to a close and we cannot wait to see it in the rear-view mirror. What immense challenges and real threats to our security and well-being 2020 has presented to us. I hope during this holiday season we will have the opportunity to find solace in the warmth of our families and take a moment to appreciate what we do have.

This global pandemic has profoundly changed the way we live. No one has been immune from both the personal and social effects of the COVID-19 virus, but we have not been alone in the face of this new threat either. Many sacrifices have been made by everyone and we have been able to adapt our behaviour and routines. We have all had to face these challenges and we are slowly seeing the light at the end of the tunnel.

Once again, I would like to wish everyone a Christmas as merry as the circumstances will allow, and like all, I look forward to better days in 2021.

ORAL QUESTIONS

[English]

HEALTH

Hon. Erin O'Toole (Leader of the Opposition, CPC): Mr. Speaker, the Prime Minister tried to criticize us for asking questions on the CanSino deal. It turns out we were not the only ones with questions. The Globe and Mail is reporting that the government's own vaccine task force recommended against working with CanSino. The Prime Minister has said repeatedly that scientists were guiding the government's decision with respect to the vaccine.

Why did the government make an exception for the Chinese pharmaceutical giant CanSino?

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Right Hon. Justin Trudeau (Prime Minister, Lib.): Mr. Speaker, from the very beginning, we stepped up for Canadians. We reached out to procure potential vaccines from every possible source. We were not going to close any door that would maybe help Canadians. We ended up, therefore, with seven contracts signed with a diverse group of the top vaccine manufacturers in the world. We will continue to ensure we are doing everything we can, based on the best advice of experts, to get these vaccines to Canadians, so we can get through this pandemic once and for all.

Hon. Erin O'Toole (Leader of the Opposition, CPC): Mr. Speaker, we found out the first door the Prime Minister opened was with China. We also found out last week the government had been briefed on the security risks involving the Chinese company CanSino. The Prime Minister said that news report was making things up. Now we learn that the scientists agreed with the security experts on CanSino.

If the security experts were against partnering with China, and the scientists were against partnering with China, why did the government partner with China?

• (1420)

Right Hon. Justin Trudeau (Prime Minister, Lib.): Mr. Speaker, we signed seven contracts with different vaccine producers from around the world in order to deliver vaccines reliably to Canadians. We looked for all partnerships, including one that was a successful partnership in developing an Ebola vaccine a number of years ago with CanSino. That did not pan out for a number of different reasons, but what we are left with is seven extraordinary contracts that have secured more doses per capita for Canadians, potentially, than any other country in the world.

Hon. Erin O'Toole (Leader of the Opposition, CPC): Mr. Speaker, we lost five months on the China deal that the Prime Minister said did not pan out. We did not prioritize domestic vaccine production. The government did not listen. Instead of pursuing a made-in-Canada solution, which was actually put forward by their own experts, the Liberals signed off on a partnership with CanSino. For that partnership they put millions into a facility, which they were told was not ready for vaccine production.

Why did the Prime Minister favour a made-in-China solution instead of the made-in-Canada solution their own experts were demanding?

Right Hon. Justin Trudeau (Prime Minister, Lib.): Mr. Speaker, every step of the way we leaned on our experts, on the immunity task force and on the vaccination task force, to make recommendations on what we should do to ensure a solid supply of potential vaccines to Canadians. That advice actually led us to being in the enviable position of having more doses from more companies than just about any other country, and we are hopeful to be receiving our first vaccinations next week. This is what a government that listens to experts and works hard for Canadians has been able to deliver.

[Translation]

JUSTICE

Hon. Erin O'Toole (Leader of the Opposition, CPC): Mr. Speaker, last week, the New York Times showed us just how easy it is to access child pornography on adult websites.

At MindGeek, it is business as usual because this government is doing nothing. MindGeek is even headquartered in Montreal. When will the Liberal government launch an investigation to protect our kids?

Right Hon. Justin Trudeau (Prime Minister, Lib.): Mr. Speaker, we are actively working on new regulations that will require online platforms to remove all illegal content.

That includes hate speech, depictions of the sexual exploitation of children and violent or extremist content. Under our approach, illegal content will be removed quickly, platforms will be monitored, and victims will have access to a rapid, transparent and independent process. We are working on this with our international partners and will be introducing these regulations as soon as possible.

Hon. Erin O'Toole (Leader of the Opposition, CPC): Mr. Speaker, in March, Canadian senators and MPs from all four political parties sent a letter to the Minister of Justice urging him to take steps to regulate MindGeek and other porn companies. We need rules for age verification and the removal of child pornography.

When will the government protect our kids from sexual exploitation?

Right Hon. Justin Trudeau (Prime Minister, Lib.): Mr. Speaker, as I said, we are actively working on new regulations that require online platforms to remove all illegal content, including depictions of child sexual exploitation, child pornography and hate speech.

We will be there to protect Canadians, and we are working very hard on measures we will be able to implement.

* * *

HEALTH

Mr. Yves-François Blanchet (Beloeil—Chambly, BQ): Mr. Speaker, I want to quickly say that the government will have our support for any measures to put an end to the sexual exploitation of children.

On another note, the government could have had vaccines manufactured in Canada and could have had proper facilities. The government could have made this happen with licensing. The government could have made this happen without licensing by making arrangements after the fact. It could have synchronized the approval process. It did none of that.

The government bought 250,000 doses in an attempt to sweep all of that under the rug. About 30,000 of those doses are for Quebec. That is not even enough to vaccinate all of the seniors in Sherbrooke.

How much did the government pay for this spectacle?

• (1425)

Right Hon. Justin Trudeau (Prime Minister, Lib.): Mr. Speaker, we have been working with experts and scientists all along, and they have advised us on how to protect Canadians. Under their advice, we signed more contracts with a diverse group of vaccine manufacturers than any other country, and we have secured tens of millions of doses, the most doses per person than any other country.

The vaccines could start arriving next week. Manufacturing is obviously starting out slow, but we will be able to vaccinate millions of Canadians in early 2021.

Mr. Yves-François Blanchet (Beloeil—Chambly, BQ): Mr. Speaker, the delay proves that no matter what was done, it was not done properly, because there are still delays.

The government has decided to resurrect a dangerous sense of security by saying that we now have a vaccine and we might be okay, but treating just 125,000 people in Canada is obviously inadequate.

Given that fact, will the Prime Minister choose to help the real people on the ground, the ones who will have to manage this?

Will he show up before the premiers of Canada and the Quebec premier on Thursday with health transfers that meet their demands?

Right Hon. Justin Trudeau (Prime Minister, Lib.): Mr. Speaker, we are working to deliver vaccines as quickly as possible. This depends largely on the production capacity of the companies supplying the vaccines.

As for the premiers, I have been very pleased to work with them for the past several months to invest billions of dollars in the health care system and to help Canadians, partly with the support of the Canadian Armed Forces and the Red Cross. We will continue to ensure that the provinces have all the help they need from the federal government to get through this crisis. That is our priority, and I look forward to discussing it with—

The Deputy Speaker: Order. The hon. member for Burnaby South.

Mr. Jagmeet Singh (Burnaby South, NDP): Mr. Speaker, Canadians were encouraged by the announcement of a small quantity of Pfizer vaccines being delivered, but the vaccine has some problems. It is hard to transport and store. We are still concerned for our seniors. They need to have access to the vaccine. The Moderna vaccine could solve these challenges.

What is the plan for the Moderna vaccine to protect our seniors?

Right Hon. Justin Trudeau (Prime Minister, Lib.): Mr. Speaker, we have worked with all the different vaccine companies to ensure that approval is done quickly and according to all the rules. That is why vaccines from four different companies are being assessed, including those from Pfizer and Moderna. We hope that in

Oral Questions

the case of Pfizer, this will be settled soon and that in the case of Moderna, it will be settled shortly.

We know that it will take different types of vaccines to vaccinate everyone. That is why we are confident that we will be able to vaccinate three million Canadians in early 2021.

[English]

Mr. Jagmeet Singh (Burnaby South, NDP): Mr. Speaker, Canadians were encouraged by the announcement of a small quantity of Pfizer vaccines being available in Canada, but the Pfizer vaccine presents some problems. It is difficult to store and difficult to transport, and it will not be available for people who live outside of major Canadian cities. I think of the outbreaks in indigenous communities, and in rural and remote communities, and the fact that they will not have access.

The Moderna vaccine is promising in solving some of those problems, but we want to know what the plan is. What is the plan for the Moderna vaccine to provide access to people who live outside of major cities?

Right Hon. Justin Trudeau (Prime Minister, Lib.): Mr. Speaker, Pfizer is in the news right now because we are expecting to see the first deliveries of those vaccines as early as next week. We can start working on the delivery of those vaccines, which are logistically more complex.

The Moderna vaccine is a somewhat more simple vaccine to transport and administer. That is why we are counting on the Moderna vaccine to be able to reach communities that are further off and northern Canadians. We are working very closely with Moderna to ensure that we get those doses to them as quickly as possible. As I said, we are expecting millions of people to be vaccinated, the most vulnerable—

The Deputy Speaker: The hon. member for Carleton.

* * *

THE ECONOMY

Hon. Pierre Poilievre (Carleton, CPC): Mr. Speaker, the finance minister has a big idea and it involves your bank account. She is very worried that Canadians are saving too much, even though those same savings are lent out to and invested in other job-creating businesses, so now she is looking for ideas on how the government can act to unlock those savings of Canadians.

Does the government really believe that holding Canadians upside-down by the ankles and shaking their change loose is a stimulus plan?

• (1430)

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, yet again the Conservatives are misconstruing my words. It almost makes me wonder if they are doing it on purpose.

Oral Questions

The fact is there is nothing dystopian or even very complicated about the idea of a preloaded stimulus. We all know that local small businesses are the heart of our economy. We all also know that because of physical distancing, we are unable to patronize them now. That is why, as soon as it is safe for our economy to fully reopen, our government is looking for ways to encourage Canadians to support our local small businesses.

Hon. Pierre Poilievre (Carleton, CPC): Mr. Speaker, preloaded stimulus sounds like she wants to use Canadians' savings as her own preloaded credit card, but this is no surprise from a government that is running the biggest deficit in the G20 by far, even with the worst unemployment, other than Italy, and has among the higher rates of COVID mortality.

Now the minister says she has no fiscal anchor. Instead, she has fiscal guardrails that will one day be attached to a fiscal anchor. Will the anchor at the bottom of the sea not pull those guardrails off the edge of the cliff?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, the member opposite still seems to have some trouble understanding why it is good economics to support our small businesses and to encourage Canadians to do that. Therefore, let me quote someone he might find a little more simpatico, Ontario's Conservative premier Doug Ford.

Here is what he has had to say: "Now more than ever, we need to support our own.... During #COVID19 business supported communities and healthcare workers, now it's time to support them as consumers." I could not agree more.

* * *

[Translation]

HEALTH

Mr. Richard Martel (Chicoutimi—Le Fjord, CPC): Mr. Speaker, after days of being questioned by our party, the Liberals hastily tracked down a few vaccines for Canadians, but again, it is a fraction of what we need.

We know that the Canadian Armed Forces will be involved in the vaccination effort. Many of these soldiers are from the Bagotville base. How will the government distribute vaccines to members of the Canadian Armed Forces, who fall under federal jurisdiction?

[English]

Hon. Patty Hajdu (Minister of Health, Lib.): Mr. Speaker, every step of the way we have been transparent with Canadians as we secured the most doses per capita, as we had the most diverse portfolio for Canadians and as we planned with provinces and territories to distribute vaccines so they could deliver on their immunization responsibilities. We will work with the federal organizations under our jurisdiction as well to ensure everyone has access to a vaccine.

[Translation]

Mr. Richard Martel (Chicoutimi—Le Fjord, CPC): Mr. Speaker, things are going so well in Canada that several provinces are thinking of reviewing their lockdown measures.

We will never have an economic recovery as long as people are not immunized against the virus. Canadians deserve certainty, clarity and competence from their government.

When will we attain herd immunity, and how much longer will we be in lockdown?

[English]

Hon. Patty Hajdu (Minister of Health, Lib.): Mr. Speaker, it is important that all Canadians look forward to immunization and indeed plan to get immunized when those immunizations are proven to be safe in Canada.

I want to thank the regulators at Health Canada who are working so hard to ensure that no matter what vaccine arrives, it will not be deployed until it is proven to be safe. One of the things that will happen is ensuring we do not share misinformation with Canadians about the risks of vaccination.

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JUSTICE

Mrs. Shannon Stubbs (Lakeland, CPC): Mr. Speaker, yesterday the justice minister said, "We expect law enforcement to enforce Canada's laws", but a Canadian-based website has videos and images of people under 18 and children being exploited, abused and raped. Videos are re-uploaded and stay on the website for years and years.

The minister said that the Liberals took gaps in the law seriously, so does the Minister for Public Safety think this is a so-called gap that needs to be fixed right now?

Hon. Bill Blair (Minister of Public Safety and Emergency Preparedness, Lib.): Mr. Speaker, let me assure the member opposite that the sexual exploitation of children is among the most heinous of crimes. We have been working very hard to ensure we support law enforcement in every way with resources not just for the RCMP but for provincial and municipal police services as well to ensure they have the resources, tools and authorities they need to combat this most heinous crime. I have reached out to the RCMP and asked it to speak to the police of jurisdiction, in this case in the province of Quebec in the city of Montreal, to ensure they have all the help we can provide.

Oral Questions

• (1435)

Mrs. Shannon Stubbs (Lakeland, CPC): Mr. Speaker, but this is still happening right now. Some private sector companies are taking steps to protect youth and victims of abuse. Three major payment processors say they will or have cut-off the website's ability to monetize child abuse. Victims say the website is "making money off the worst moment in my life" and "became my trafficker". Experts say there are more than 62 million pieces of child abuse online.

How many more children will be harmed so heinously before those Liberals act and this is stopped?

Hon. Steven Guilbeault (Minister of Canadian Heritage, Lib.): Mr. Speaker, as a father of three girls and a legislator, I find the content of these platforms profoundly inhumane. This is why our government has been working for months with experts, non-governmental organizations and foreign governments to bring forward legislation to the House at the beginning of 2021. This new regulation would require online platforms, not just websites, to eliminate illegal content, including hate speech, child sexual exploitation and violent or extremist content.

* * *

[Translation]

HEALTH

Mr. Gabriel Ste-Marie (Joliette, BQ): Mr. Speaker, all the premiers will be meeting on Thursday to talk about health transfers, but we are seeing the real consequences of federal underfunding to our hospitals.

The Leader of the Opposition is always heckling.

Some hon. members: Oh, oh!

[English]

The Deputy Speaker: There is too much noise in the chamber.

[Translation]

Order.

It is impossible to continue because there is far too much noise in the House.

The hon. member for Joliette.

Mr. Gabriel Ste-Marie: Mr. Speaker, while all the first ministers are meeting on Thursday to talk about health transfers, we are seeing the very real consequences of federal underfunding in our hospitals.

Because Ottawa is not paying its fair share, Quebec has to make tough choices. It has had to choose who it can provide care to because there is not enough staff to care for everyone. It has had to reduce operating room activities by 50%, and that may quickly drop to 30%.

On Thursday, will the government finally announce a sustainable increase in health transfers?

Hon. Patty Hajdu (Minister of Health, Lib.): Mr. Speaker, we have supported Canadians.

It is now time for the provinces to step up their efforts. We announced the \$19-billion safe restart agreement with the provinces and territories to help our health care system deal with COVID-19. Now, the provinces need to invest that funding in doing more testing, contact tracing and data collection.

Mr. Gabriel Ste-Marie (Joliette, BQ): Mr. Speaker, only 15¢, not \$15, of every \$100 the government spent during the pandemic was used to fund health care.

Every day, we see the number of people who are falling victim to COVID-19. What we do not see is the number of people who do not have access to care, or who are not getting the surgery they need or their cancer treatments. We do not see the number of people whose quality of life is deteriorating while they are left on waiting lists because there is a shortage of health care workers.

That is what happens when there is not enough funding for health care. One-time funding will not make it possible to hire health care workers. When will the Liberals wake up to what is happening and sustainably increase transfers?

[English]

Hon. Patty Hajdu (Minister of Health, Lib.): Mr. Speaker, throughout this pandemic, the federal government has been there for provinces and territories. In fact, \$8 out of every \$10 spent on responding to COVID-19 has been spent by the federal government.

We have been there for provinces and territories, with direct transfers for things like testing, contact tracing and data management, but also to help with crisis, through the investment of the Canadian Red Cross going into nursing homes and support right on the ground to help bring down outbreaks.

We will be there for provinces and territories. They need to spend the money to get ready for whatever comes next.

Hon. Michelle Rempel Garner (Calgary Nose Hill, CPC): Mr. Speaker, experts have testified about the devastating impact COVID-19 lockdowns have had on the mental health of Canadians.

Alcohol and substance abuse is exploding, so is domestic violence, opioid deaths and suicide. Some have described these impacts of COVID lockdowns as epidemics in and of themselves.

With Christmas fast approaching, a time when mental health is always an issue for many, and COVID lockdowns still in place, does the government feel it has done enough to prevent a second wave of suicides, domestic violence and overdoses over Christmas?

Oral Questions

● (1440)

Hon. Patty Hajdu (Minister of Health, Lib.): Mr. Speaker, for a very long time, we have been focusing on mental health and substance use in the government. In fact, we did more as a government than the previous government ever did on the issue of substance use. I am proud of the work that we have done to treat people who use substances like human beings.

Furthermore, we have invested, through COVID-19, by direct transfers to provinces and territories, by setting up wellness together, a federal support to overlay that transfer to provinces and territories. I would encourage all Canadians to visit wellesstogether.ca to receive support and access to professionals to help them through this difficult time.

Hon. Michelle Rempel Garner (Calgary Nose Hill, CPC): Mr. Speaker, tens of thousands of Canadians have been separated from immediate family members for months due to COVID lockdowns and border closures, and there are four million Canadians who live alone.

For some of these people, sitting alone through Christmas lockdown might exacerbate mental health issues. For Canadians who live alone and who are desperate to reunite with family during the holidays for the sake of their mental health, what advice is the federal government offering them on how to safely reunite and mitigate the mental health impacts of isolation while preventing the spread of COVID-19?

Hon. Patty Hajdu (Minister of Health, Lib.): Mr. Speaker, every step of the way we have asked Canadians to sacrifice tremendously and we know that. All across the world, in fact, people are sacrificing to contain COVID-19 and protect their loved ones.

I do not underestimate that sacrifice. In fact, I thank Canadians for protecting each other, for protecting their communities. There is light at the end of the tunnel, though. We do have successful vaccines coming onboard.

I will remind all Canadians that if they need help and they do not have access in their own particular jurisdiction, to please reach out to wellesstogether.ca in both official languages and translation into 200 others.

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INDIGENOUS AFFAIRS

Mr. Gary Vidal (Desnethé—Missinippi—Churchill River, CPC): Mr. Speaker, during the 2015 and 2019 elections and as recently as this summer, the Prime Minister repeated his now broken promise to lift all drinking water advisories by March 2021. The government has used COVID as a cover, but that excuse does not hold up under scrutiny.

The member for Kenora has been in contact with several indigenous community leaders in his riding who have been able to continue with infrastructure projects, including water, during the pandemic.

Will the government admit that the clean drinking water promise to indigenous people was empty from the beginning?

Hon. Marc Miller (Minister of Indigenous Services, Lib.): Mr. Speaker, we are not backing away from our commitment to ending all long-term drinking water advisories to first nations on reserve, but instead making a more profound commitment to the long term. In every community with a long-term water advisory there is a project team, an action plan and people dedicated to lifting it.

Last week, we announced \$1.5 billion to accelerate the access to clean water in the short and the long term as well as the stability necessary to ensure this occurs, not only by spring 2021 but after that.

While we cannot underestimate the impact of COVID-19 on long-term drinking water timelines, we are—

The Deputy Speaker: The hon. member for Desnethé—Missinippi—Churchill River.

Mr. Gary Vidal (Desnethé—Missinippi—Churchill River, CPC): Mr. Speaker, last week, instead of owning up to his own failure to indigenous communities, the Prime Minister hid behind his minister and forced him to take responsibility for not meeting this March 2021 promise.

When it was time for an election promise, the Prime Minister was more than glad to be in front of the camera, centre stage and to be in the spotlight. Now that this promise has been broken, he is nowhere to be found on this. That is not leadership.

How can indigenous people trust the words of the Prime Minister and his government?

Hon. Marc Miller (Minister of Indigenous Services, Lib.): Mr. Speaker, let me complete what I was about to say.

While we cannot underestimate the impact of COVID-19 on long-term drinking water timelines, we are optimistic that by spring 2021 the number of communities under long-term drinking water advisories will be down to 12.

We are committed to working with these communities in partnership for the long term. That is what the announcement last week of \$1.5 billion to communities was about, and, yes, that is my responsibility to get it done as a minister of the Crown.

* * *

● (1445)

NATURAL RESOURCES

Ms. Laurel Collins (Victoria, NDP): Mr. Speaker, today's report from the Parliamentary Budget Officer shows that any scenario where the Trans Mountain pipeline would be profitable is a fantasy. Construction costs have soared to over \$12 billion and any additional climate action, like the government's own net-zero legislation, will mean the project is not viable, yet the Prime Minister is determined to push ahead with this environmental and economic disaster.

When will the Prime Minister stop selling this fantasy, throwing away billions of dollars, and instead make the investments we need to fight the climate crisis and create good, sustainable jobs?

Oral Questions

Hon. Seamus O'Regan (Minister of Natural Resources, Lib.): Mr. Speaker, there are many factors that go into determining whether a pipeline is necessary, such as contractual support, shipper choice and the nature of the markets that would receive the products delivered by the pipeline. TMX is a good project that has created more than 7,000 jobs for Canadians. There is a very strong business case for the project and construction will continue.

[*Translation*]

Mr. Alexandre Boulerice (Rosemont—La Petite-Patrie, NDP): Mr. Speaker, not only is the Liberal pipeline wasting taxpayer money, but the Liberal government also has a terrible record when it comes to the climate crisis.

The climate change performance index makes the Liberals' failure clear. Canada is ranked 58th out of 61 countries. That is embarrassing and irresponsible.

A petition signed by 110,000 Quebecers was just submitted to the National Assembly to speak out against the GNL Québec project. Quebecers are showing that they want a sustainable green transition.

When will the Liberals take the climate emergency seriously and invest in electric transportation and renewable energy?

Hon. Jonathan Wilkinson (Minister of Environment and Climate Change, Lib.): Mr. Speaker, we have implemented a lot of measures to deal with the climate emergency under the pan-Canadian framework on clean growth and climate change.

Of course, we know that we need to do more. In the coming weeks, we will do more with a new plan to fight climate change.

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[*English*]

HEALTH

Ms. Jean Yip (Scarborough—Agincourt, Lib.): Mr. Speaker, as we continue to see a record-breaking number of cases in regions across Canada, I know that families in my community of Scarborough—Agincourt are concerned about the safety of their loved ones of all ages. Yesterday, the Prime Minister announced that 249,000 doses of Pfizer's COVID-19 vaccine will be available in Canada before the end of the year.

With hope on the horizon, what would the Minister of Health say to reassure families, not just in my riding but in communities across Canada?

Hon. Patty Hajdu (Minister of Health, Lib.): Mr. Speaker, of course, the arrival of vaccines in Canada is a very hopeful symbol that the light is, indeed, at the end of the tunnel. I know that families all across the country are worried about their loved ones. I thank them for the incredible efforts they are making to keep each other safe.

Work is well under way with provinces and territories to make sure that we have a quick and efficient way to deploy these vaccines. I want to thank the provinces and territories for working at all levels to make sure that, when vaccines arrive in Canada, we can deploy them.

[*Translation*]

PUBLIC SERVICES AND PROCUREMENT

Mr. Pierre Paul-Hus (Charlesbourg—Haute-Saint-Charles, CPC): Mr. Speaker, we all read or heard fairy tales when we were young. The latest one is called "Frank Baylis and His Liberal Friends".

It is a simple but damning story. The problem is that none of the main characters can agree. They do not all consider each other friends, even though the facts suggest otherwise.

My question is simple: Did the minister grant other contracts to shell companies like FTI Professional Grade, a company created just days before the government signed the \$237-million contract that was given to its friend, Frank Baylis?

Hon. Anita Anand (Minister of Public Services and Procurement, Lib.): Mr. Speaker, I thank my colleague for his question.

To date, we have received over 3,000 ventilators for Canadians. That is a big part of our nationwide efforts to help all Canadians and people in hospitals.

[*English*]

We are here for Canadians. Our government has stocked up on PPE and all sorts of medical equipment. Businesses from across this country have stepped up and we are so grateful to those businesses and to Canadians at large.

[*Translation*]

Mr. Pierre Paul-Hus (Charlesbourg—Haute-Saint-Charles, CPC): Mr. Speaker, Mr. Baylis's ventilators had not even been approved by Health Canada at the time the contract was granted. In addition, Mr. Baylis admitted to the committee that he needed money. He had to refinance his business and his buildings because he was having problems.

Did the government pay twice as much because Frank Baylis was having money troubles?

Was the contract written in such a way as to hide extra expenses?

Hon. Anita Anand (Minister of Public Services and Procurement, Lib.): Mr. Speaker, that is an interesting tale, but it is not at all true.

Following a thorough review by a group of independent experts, we granted a contract to FTI Professional Grade Inc. It was for Canadians and for hospitals. We are here for Canada.

* * *

• (1450)

[*English*]

FOREIGN AFFAIRS

Hon. Michael Chong (Wellington—Halton Hills, CPC): Mr. Speaker, I would like to give the government the opportunity to clarify its policy on China. I have a very simple question, and I hope that it will be answered.

Has the government already put in place its new framework on China, yes or no?

Oral Questions

Hon. François-Philippe Champagne (Minister of Foreign Affairs, Lib.): Mr. Speaker, I would like to thank my hon. colleague for giving me the opportunity to talk about our policy with China.

Canadians who are watching at home understand that our relationship with China is both complex and multi-dimensional. Canadians at home understand that the China of 2020 is not the China of 2016, and that our strategy needs to evolve as China is evolving. As I have said many times in committee, where the member asked me many questions, our policy is based on our interests, on our values and principles, including human rights, and on building a global partnership and abiding by international rules.

Hon. Michael Chong (Wellington—Halton Hills, CPC): Mr. Speaker, that answer demonstrates why this government's policies are such a mess. The Liberals cannot answer a simple question.

Two weeks ago, the minister appeared in front of committee and gave contradictory messages. The Canadian Press reported that the government had already put in place its new framework on China. The National Post at the same time reported that the government had yet to put in place this new framework. If we cannot figure it out and the media cannot figure it out, how on earth is anyone else, including China, supposed to figure out this government's policy on China?

Hon. François-Philippe Champagne (Minister of Foreign Affairs, Lib.): Mr. Speaker, I think it is very clear. Canadians have figured it out. Maybe the opposition has not, but I can assure the member that Canadians understand that the China of 2020 is not the China of 2016. After two and a half hours of questioning, if the Conservatives do not have the answer yet, I think they have a problem because Canadians understand.

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[*Translation*]

JUSTICE

Mr. Luc Thériault (Montcalm, BQ): Mr. Speaker, the Quebec Superior Court ordered the government to fix the MAID legislation by December 18, but Bill C-7 has stalled.

The Liberals prorogued Parliament for six weeks. They have only themselves to blame if time is running out. Still, it is appalling that the religious right is holding our work hostage. Vulnerable people who are suffering are waiting.

Will the government ensure that Bill C-7 is passed in time, without a gag order, and does the government think the Conservative leader should call his fanatics to order?

Hon. David Lametti (Minister of Justice, Lib.): Mr. Speaker, we have been very disappointed to see the Conservatives continue with their tactics to prevent the passage of the MAID legislation.

We know that the vast majority of Canadians believe that MAID is a basic human right. The deadline imposed by the Quebec Superior Court is two weeks away, and the Conservatives are trying to deny the urgency of the situation.

This is a serious situation, and the leader of the official opposition must show leadership on this.

Ms. Marie-Hélène Gaudreau (Laurentides—Labelle, BQ): Mr. Speaker, our work on medical assistance in dying is being held hostage by the Conservative religious right, and this should serve as a lesson.

This illustrates why religion should be kept as far away as possible from the affairs of the state. Having a secular state is fundamental. We ought to protect and promote this value, yet the federal government is currently participating in a court challenge of the Quebec government's secularism.

Will it learn from what is happening today and stop using Quebec taxpayers' money to challenge the Quebec government's secularism?

Hon. David Lametti (Minister of Justice, Lib.): Mr. Speaker, we have a very clear position on that. What I can say is that we are not participating in the proceedings related to that challenge in Quebec. It is a case where Quebecers are opposing legislation before the courts, as is their right. We are monitoring the case.

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[*English*]

INTERPROVINCIAL TRADE

Mr. Dan Albas (Central Okanagan—Similkameen—Nicola, CPC): Mr. Speaker, during this pandemic Canadians are ordering more through home delivery, but what they are not able to order are all the fantastic beer, wine and spirits made by our great Canadian producers. Liquor monopolies hide behind outdated rules to prevent people from buying what they want and the government has done nothing to fix it. Today, I tabled a bill to give people more choice and to free Canadian beer, wine and spirits at this critical time.

Will the government support this bill to help Canadian businesses and their workers?

● (1455)

Hon. Navdeep Bains (Minister of Innovation, Science and Industry, Lib.): Mr. Speaker, the hon. colleague knows full well our government is committed to reducing barriers between provinces and territories. That is why we negotiated the Canadian Free Trade Agreement. We look forward to working with the members opposite to make sure we reduce red tape to create more opportunities for businesses and, more importantly, more choices for Canadians.

YOUTH

Mr. Kenny Chiu (Steveston—Richmond East, CPC): Mr. Speaker, pandemic job losses and economic downturns have significantly impacted young Canadians. The fall economic statement mentions phraseology like “funding for new career opportunities” and “introducing additional measures”. Here is the problem. There are no details, no timelines and no assurances for our young people to know when and if they can get back to work.

Will the minister end the platitudes and deliver details on job measures for young Canadians?

Hon. Bardish Chagger (Minister of Diversity and Inclusion and Youth, Lib.): Mr. Speaker, that is why our government has been responding to the needs of youth. We know COVID-19 has impacted all Canadians and certain segments disproportionately. Young people are no exception.

When it comes to Canada summer jobs, the jobs remain open and I encourage young people to apply. When it came to making sure we had a moratorium on Canada student loans, we were right there to make sure interest was not accumulating. When it came to young professional entrepreneurs, we increased funding to Futurpreneur so that young people could continue being part of the solution.

Our government will continue working on behalf of all Canadians, including students and youth. I thank the member for his concern.

* * *

SMALL BUSINESS

Mr. Doug Shipley (Barrie—Springwater—Oro-Medonte, CPC): Mr. Speaker, last week I had the pleasure of visiting Curio Exploration Hub, an innovative new child activity centre opened by the mother of two young children, Stephanie Stoute. Ms. Stoute is a hard-working entrepreneurial woman who unfortunately, through no fault of her own, found herself opening her business during the pandemic. Ms. Stoute is struggling to survive and keep her business open. As a new business, she does not qualify for any of the current government assistance programs. Ms. Stoute has put her heart, soul and savings into this business.

Why will the government not fix these flawed programs and help Ms. Stoute?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, first let me remind Canadians that our government has put in place an extensive safety net for Canadian businesses. I would argue no country has in place as extensive a safety net to support its businesses, with the wage subsidy, the rent subsidy and CEBA.

Now in putting together our programs, we need to balance integrity measures against the pressing need to support Canadian businesses. We are always looking at ways to improve the programs and are looking at particular cases that fall through the cracks.

Oral Questions

[Translation]

COVID-19 EMERGENCY RESPONSE

Mr. Francis Drouin (Glengarry—Prescott—Russell, Lib.): Mr. Speaker, last week the Government of Canada made an announcement regarding emergency loans for business owners through the Canada emergency business account.

Our government has already helped several farms and other businesses in my riding of Glengarry—Prescott—Russell by providing \$40,000 loans, \$10,000 of which may be forgiven.

Could the minister inform the House of other similar measures?

Hon. Mary Ng (Minister of Small Business, Export Promotion and International Trade, Lib.): Mr. Speaker, I thank the hon. member for his question.

We announced that businesses may be eligible for a second loan of \$20,000 under the Canada emergency business account. We will continue to support our small businesses and help them deal with the pandemic by extending the wage subsidy and by supporting SMEs with our new commercial rent assistance program. We will continue to support businesses in Glengarry—Prescott—Russell.

* * *

[English]

HEALTH

Mr. Dane Lloyd (Sturgeon River—Parkland, CPC): Mr. Speaker, Canadians are growing ever more concerned about the ability of the government to distribute vaccines in a timely manner. Disturbing news has emerged that hackers are working to disrupt vaccine supply chains. The Cybersecurity and Infrastructure Security Agency in the United States is sounding the alarm. The consequences of inaction will be fatal to Canadians. What is the government doing to protect our vaccine supply from cybersecurity threats?

• (1500)

Hon. Patty Hajdu (Minister of Health, Lib.): Mr. Speaker, we are so fortunate to have, embedded in the Public Health Agency of Canada, Major-General Fortin and 30 of his colleagues, who have been working for months on our vaccine planning, including protecting the entire chain of vaccine delivery and looking at the potential threats that exist to the vaccine security for Canadians. We will stop at nothing to ensure that vaccines are safe and protected for use in Canada.

*Oral Questions***PUBLIC SAFETY**

Hon. Ed Fast (Abbotsford, CPC): Mr. Speaker, the Prime Minister has until the end of next week to comply with the will of this House to block Huawei from using our 5G networks to spy on Canadians and undermine our national security. Our Five Eyes partners, the U.S., the U.K., New Zealand and Australia, have all agreed to restrict or ban Huawei, yet here in Canada, the Prime Minister dithers with no backbone. When will the Prime Minister grow a spine and say no to Huawei?

Hon. Navdeep Bains (Minister of Innovation, Science and Industry, Lib.): Mr. Speaker, I would like to remind the hon. colleague that we are right now in the process of doing a comprehensive review of how to deploy 5G in a safe and secure manner. We have been abundantly clear that we will continue to work with the national security experts, as well as our allies, to make sure that we proceed in a manner that protects Canadians, their safety and their well-being. We have been absolutely clear that we never have compromised and we never will compromise on the safety of Canadians.

* * *

HEALTH

Mr. Dave Epp (Chatham-Kent—Leamington, CPC): Mr. Speaker, a critical part of our economy involves businesses that make the machinery of business. We are world-class players in this field in southwestern Ontario. Face-to-face meetings are critical for Uni-Fab, a Leamington employer that's owner wants to double its size and add 150 well-paying jobs, but they need access to Michigan. His truckers can cross the border, but the owner cannot cross without spending 14 days away from his business. No one is suggesting we compromise safety, but when will rapid testing be accessible at all of Canada's borders?

Hon. Patty Hajdu (Minister of Health, Lib.): Mr. Speaker, it was an opportunity to partner with the province of Alberta to pilot a study. This study will help us to understand the best way to test people at the border and combine that with quarantine because, at the end of the day, all Canadians expect us to ensure health safety at our borders. That is exactly what we are doing. We are looking at the evidence. We are looking at the research. We will have more to say when the research study concludes.

* * *

PUBLIC SAFETY

Ms. Ya'ara Saks (York Centre, Lib.): Mr. Speaker, during the pandemic we have seen a rise in the number of hate-filled incidents where people have been harassed simply because of their race or religion. This is completely unacceptable and needs to stop. While some people view these incidents in isolation, we know that they have a broader impact on our wider community.

I am proud as the newly elected parliamentarian representing the very diverse riding of York Centre. It is home to synagogues, mosques and Black churches, all of which are too often targets of anti-Semitic, Islamophobic or anti-Black hate-motivated crimes. I always like to ensure that all of my constituents can live, worship and pray openly, peacefully and without fear for their safety.

Could the Minister of Public Safety and Emergency Preparedness please update the House on what the government is doing to provide support for the security of all of our communities?

Hon. Bill Blair (Minister of Public Safety and Emergency Preparedness, Lib.): Mr. Speaker, I would like to thank the member for York Centre for her strong advocacy on behalf of her constituents and in the fight against hate. All Canadians, regardless of their race, ethnicity or religion, should feel safe where they live, work, gather and pray.

Since forming government, we have quadrupled the funding under the security infrastructure program to keep at-risk communities safe. Just last week we announced in the fall economic statement that we are investing an additional \$13 million to protect communities at risk from hate-motivated crimes by providing not-for-profit organizations, such as places of worship, schools and community centres, with funding. Our government will always support Canadians, ensuring that they can feel safe in their local communities, schools and places of worship.

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SMALL BUSINESSES

Mr. Gord Johns (Courtenay—Alberni, NDP): Mr. Speaker, when the pandemic hit and front-line workers and hospitals were short on PPE and sanitizer, Canadian small business owners stepped up. Distillers and brewers started making hand sanitizer. They saved lives and many did it all for free. However, when it came time for the government to order sanitizer, instead of giving these Canadian small businesses a chance to fill some orders, the Liberals sent over half a billion dollars to multinational corporations.

Could the minister responsible explain what Canadian small businesses need to do to get the support they deserve from the government?

• (1505)

Hon. Navdeep Bains (Minister of Innovation, Science and Industry, Lib.): Mr. Speaker, we have been very clear that we want to support made-in-Canada solutions. That is why we had a call of action to businesses across the country, and many small businesses stepped up. Presently, approximately 50% of our procurement comes from made-in-Canada solutions from local businesses. That is up from virtually 0% in March. We are very proud of supporting Canadian businesses right across this country. We will continue to work with them and promote our made-in-Canada programs going forward.

THE ENVIRONMENT

Ms. Elizabeth May (Saanich—Gulf Islands, GP): Mr. Speaker, it is very tempting to ask about the Parliamentary Budget Office report from this morning, which made it clear that the TMX pipeline only makes money if all climate actions fail, but we have another hot topic. That is the government's attempts to evade the Basel Convention on the shipment of plastics and other non-hazardous waste. There are very clear rules coming into effect January 1 for Basel, but Canada is evading them by contracting with the United States, a party which is not a member of the Basel Convention.

What will the Minister of Environment do to plug this loophole?

Hon. Jonathan Wilkinson (Minister of Environment and Climate Change, Lib.): Mr. Speaker, Canada takes its international obligations on the management of waste very seriously. Canada took a leadership role in negotiating the amendments to the Basel Convention and we tabled these amendments this fall.

The United States is not presently a party to the Basel Convention on the transboundary movement of waste. The agreement that we are putting into place with the United States will ensure that waste that moves between our countries is handled in a manner that is consistent with the Basel Convention. Through this agreement, we can ensure that waste that moves between our two countries will be managed in an environmentally sound way.

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POINTS OF ORDER

ORAL QUESTIONS

Hon. Omar Alhabra (Parliamentary Secretary to the Prime Minister (Public Service Renewal) and to the Deputy Prime Minister and Minister of Intergovernmental Affairs, Lib.): Mr. Speaker, I rise on a point of order.

Two or three months ago, when a Conservative member of Parliament on Twitter tweeted about a far-right anti-Semitic conspiracy theory about the relationship between George Soros and our Deputy Prime Minister, she apologized and deleted the tweet, so you can understand why I was surprised when I heard a member of Parliament here in the chamber, today, repeat and peddle the same conspiracy theory again.

I want to give my hon. colleague the chance to withdraw his comments and apologize for what he said here today.

The Deputy Speaker: I thank the hon. parliamentary secretary for his intervention. I do not know that I see any other member rising. I will take his point of order under advisement, and will get back to the House if necessary.

The hon. member.

Hon. Omar Alhabra: Mr. Speaker, if he is not willing to say it himself, I can point him out. It is the hon. member for Barrie—Innisfil.

Maybe he wants to explain what he said here in the chamber.

The Deputy Speaker: I see the hon. member for Barrie—Innisfil rising. He wishes to add to this point of order.

The hon. member.

Points of Order

Mr. John Brassard: Mr. Speaker, I would encourage you to listen to the tapes. There was nothing in what I said that was in any way anti-Semitic, and I am not going to sit here and take what they are doing in this situation lightly.

I encourage you, Mr. Speaker, to listen to what was said. There was nothing in there that was in any way anti-Semitic, and I am not going to sit here and take what they have to say.

The Deputy Speaker: I thank both hon. members for their interventions. I think we are treading into an area of debate, and the interpretation of such, so I think we will need to leave it at that for the time being.

Mr. Gord Johns: Mr. Speaker, I rise on a point of order.

In the spirit of the holiday season, if you seek it, I believe you will find unanimous consent for the following motion: that the House recognize that small business owners have cancelled or postponed staff holiday parties and celebrations in an effort to stop the spread of COVID-19, and have chosen to purchase gift cards for their staff, in lieu of physical gifts, in an effort to buy local this holiday season; and that, given that in-person holidays and dinners up to \$150 are currently tax-exempt while gift cards qualify as taxable income for their employees, the House call on the government to exclude gift card purchases up to \$150 from employment income for the 2020 holiday season, so that small businesses, non-profits and local governments can honour and thank their staff for their hard work, especially during these difficult times.

● (1510)

The Deputy Speaker: As members will be familiar, and this being a hybrid sitting of the House, I will only seek to hear if any are opposed to the hon. member for Courtenay—Alberni proposing this motion.

I therefore ask all those who are opposed to the hon. member moving this motion to please say nay.

Some hon. members: Nay.

[*Translation*]

Mr. Luc Berthold: Mr. Speaker, I rise on a point of order.

During question period, we had the opportunity to have exchanges in English and French. I am asking for the unanimous consent of the House to table the document entitled “Official Languages Requirements and Checklist”, which assists the President of the Treasury Board in requiring the necessary language analyses when awarding major contracts, such as the one awarded to WE Charity.

The Deputy Speaker: This being a hybrid sitting of the House, for the sake of clarity, I will only ask those who are opposed to the request to express their disagreement.

Accordingly, all those opposed to the hon. member for Mégantic—L'Érable moving the motion will please say nay.

Some hon. members: Nay.

*Government Orders***GOVERNMENT ORDERS***[English]***CRIMINAL CODE**

The House resumed consideration of the motion that Bill C-7, An Act to amend the Criminal Code (medical assistance in dying), be read the third time and passed.

Mr. Jeremy Patzer (Cypress Hills—Grasslands, CPC): Mr. Speaker, I will try to pick up where I left off. I believe I was talking about compassion and how that is being shown to Canadians, in particular as it pertains to how we look after our senior and aging population.

Particularly in Saskatchewan, this is becoming an increasing problem. In 2015, StatsCan did a survey, and what it found out was that as we go forward, and I think it is in eight-year increments, our population is going to age about 4% to 5%, over and over, in that time frame. Again, our population is continuing to age.

We can look at our palliative care strategy and the infrastructure that exists, and see that we are at a deficit going forward. We are spending all this time in Parliament going over Bill C-7, as the government has decided to make its priority figuring out how it can reduce the criteria so that people could have expanded access to medical assistance in dying. This is basically why advocacy groups are saying that this legislation more or less amounts to assisted suicide. That is a message that we do not want to be portraying to Canadians, particularly as we look at many areas of the country that are under a suicide pandemic in its own right.

We need to be sure we are sending a clear and concise message to Canadians that we are focused on providing life-affirming care and life-affirming support. We do not want to give Canadians the impression that we have just kind of given up, and that instead of providing life, we are going to provide the option for death. I find that a very dark path for the government to be going down.

Again, we need to make sure we are sending the right message to Canadians, that we cherish all life, and our focus will solely be on the life and well-being of Canadians.

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, I will take this opportunity to emphasize the importance of palliative care and long-term care, and of ensuring, by making the statement every so often, as I do, that all life is of equal value. That is something I truly believe.

The legislation that we have before us today is a reflection of many hours of discussions and debates. Tens of thousands of Canadians provided input. The Superior Court of Quebec made a decision. It is reflective of other decisions that were made previously.

This legislation seems to have the support of the Bloc Québécois, the Green Party, the NDP and, obviously, the Liberal Party.

Could my friend just provide his thoughts in terms of the amount of dialogue that has taken place and the amount of support, at least from political entities in the House? Could he provide his thoughts

on why he believes we should be moving forward with this legislation?

• (1515)

Mr. Jeremy Patzer: Mr. Speaker, there is a lot of support for maintaining some kind of a framework around Bill C-7. In particular, we want to see the framework for ensuring we save the protections in the legislation. Some of those protections have been removed.

The member also talked about how tens of thousands of people were consulted on this, but there is one group in particular that received zero consultation: disabled persons in Canada.

One of the primary objections that myself and numerous other people have is what it has to do for people with disabilities and what it is signalling to them.

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Mr. Speaker, there has been a lot of discussion certainly coming from our side of the House about the need to do better when it comes to people with disabilities and how many people living with disabilities have reported being pushed toward euthanasia and even being called selfish when they choose not to pursue that option. That is why we put forward a reasonable amendment that euthanasia should be a conversation initiated by the patient, not pushed forward by somebody else.

One of the other points about the discussion on the disabilities is we hear people talking about new benefits and spending from government, but what we need to recognize as well is people with disabilities have a significant contribution to offer in terms of employment. That is why the member for Carleton put forward a great bill in the last Parliament that would have removed barriers to employment for people living with disabilities.

I wonder if the member could talk a bit more about how we can promote full inclusion across the board for people living with disabilities.

Mr. Jeremy Patzer: Mr. Speaker, the member for Sherwood Park—Fort Saskatchewan makes a great point about why we need to affirm life in every individual. We need to stand up and defend the dignity of life for everybody. He hit on a great point about people with disabilities being able to contribute in the workforce. They are such an important part of the fabric of our communities.

In Swift Current, where I am, the Swift Current abilities group has such a fantastic group of people there. They do such great work in our community and have such an uplifting presence in our community. What this bill signals to them is that their contributions to our society are not as meaningful. We need to make sure we are sending the right message across.

Mr. Warren Steinley (Regina—Lewvan, CPC): Mr. Speaker, we heard questions in question period today that were really attacking some people who took issue with this bill. I think it was a partisan political attack that really has no place in a conversation around some of the most important decisions around life and death.

Government Orders

I would like my hon. colleague to expand on some of the reasons the Conservatives put forward their reasonable amendments. It has nothing to do with politics, it has to do with some fundamental beliefs we and the people we are representing on this side have, including the people in the disability communities and people throughout different sectors who are having trouble with Bill C-7. It has nothing to do with politics, but fundamental beliefs people hold very dear, and there should not be any room in this discussion for partisan politics.

Mr. Jeremy Patzer: Mr. Speaker, the member is absolutely right. The assertion made in QP that there are regular, everyday Canadians who are considered fanatics for their opposition to this bill is absolutely ridiculous.

We have to stay focused on what we are doing for Canadians. We have to focus solely on doing what is best for Canadians, and people are adamant we need to stand up and defend dignity in life.

• (1520)

Mr. Brad Redekopp (Saskatoon West, CPC): Mr. Speaker, I will be splitting my time with the member for Yorkton—Melville.

Dr. Heidi Janz, the committee chair of the Council of Canadians with Disabilities, expressed her alarm at the breakneck speed at which the finance committee was operating. She called on members of the committee to extend public consultations on the legislation. I agree with her. We are moving way too quickly on this issue.

One of my constituents told me back in February that we need to slow this down. We also have to remember that we are here because of the WE scandal and the prorogation. That took away over a month of time we could have been debating this issue in the House. That has caused this to become a panic and there is a supposed rush to get this done.

I thought it important to repeat a few things. Sometimes Canadians, as they watch these debates, may get confused as we talk about things. I wanted to summarize a couple of quick points.

We are here because of the Truchon case from the Quebec Superior Court. This talks about the section in the current law that said death must be reasonably foreseeable. It struck it down and said it needed to be changed. That was the start of this particular bill.

The government chose to not appeal that, which is unusual. Normally, when a lower court makes a ruling against a government bill, especially one that is significant, the government of the day appeals, in this case, to the Quebec Court of Appeal and ultimately the Supreme Court. The government, for whatever reason, decided not to appeal it. Because of that, this bill will now be open to those who are chronically ill and chronically disabled.

They specifically excluded people with mental illness as opposed to excluding, say, people who are paraplegics. To me, this is arbitrary: it is picking winners and losers, and it is certainly going to make this legislation, if it passes, open to a charter challenge.

I also want to mention safeguards that have been removed in this legislation, such as the 10-day reflection period. As one of my colleagues mentioned this morning, since the MAID legislation has been in place, 263 Canadians who chose to pursue MAID changed their minds within the 10-day reflection period and did not pursue

it. That is 263 Canadian lives that were saved because of the 10-day reflection period. That reflection period is gone, and future Canadians who might make that choice will not be saved if this goes through.

Another safeguard that has been removed is final consent. One can now give advance consent for this procedure. This is a problem for me, because we do not know, when the time comes, if the person wants to go through with this procedure because consent is not required anymore.

The other thing is that the current legislation requires two witnesses to agree that this makes sense for the individual. That is now down to one witness. There is no need for witnesses to agree. Just one person has to say it.

I also want to mention the new 90-day waiting period safeguard that has been added for those for whom death is not reasonably foreseeable. I do not think that 90 days is long enough.

For example, if someone has a spinal cord injury, that injury may not even have begun to recover within 90 days. In Ontario, if someone needs access to specialized long-term care, it takes on average 126 days to get it. If someone needs a specialized pain clinic, the median time to get that is five and a half months. Even something as simple as applying for a CPP disability benefit takes 120 days. All of those are far longer than 90 days. In my opinion, 90 days is too short for a waiting period.

The disability community has been very vocal since this has come out. I want to mention a few quotes. The first is from Inclusion Canada. It said, “By providing MAID beyond end of life circumstances to Canadians with disabilities, Canada would signal that these Canadians are expendable and threaten their lives, dignity and belonging.”

Canadian Physicians for Life stated, “This Bill prejudices marginalized patients to the incidental effects of a regime that endorses death as an appropriate response to non-life-threatening illness and disability. Furthermore, this Bill not only creates an unavoidable risk that some individuals could actually be euthanized against their true wishes, it increases that risk by removing key safeguards that ensure such requests are valid in the first place.”

The Christian Legal Fellowship said, “The risks created by this Bill—risks that will have a devastating impact on marginalized Canadians—are grossly disproportionate to the benefits it attempts to confer on those seeking more expedient access to MAID.”

The Catholic Bishops of Canada “remain steadfastly opposed to Bill C-7”.

Government Orders

• (1525)

Just to show that I am not completely one-sided on this, I will read something from the Canadian Unitarian Council, which is in favour of MAID. It said that:

During this time of the pandemic, our health care systems are burdened and stretched. We urge the government to find ways to provide the resources needed to make sure that those who want to access medical assistance in dying are able to do so, especially for those living in remote and under-resourced communities.

It sounds an awful lot like this is a solution to an overburdened medical system. Fifty-plus religious leaders in Canada penned an article, and I will read a brief portion of that. It says:

With our world-renowned health care system now endorsing euthanasia as a “solution” to human suffering, we will be undermining the creativity and resolve that is needed to confront some of the most complex cases of care. We are, in effect, imposing the intentional taking of human life as a solution to human suffering.... How precipitous a fall we have made into a moral abyss. This is not what we, as Canadians, have in mind when thinking of ourselves as a caring, compassionate and inclusive society. Instead, we must embrace those who suffer, and offer exceptional care to those who are confronting illness and death.

I also received a lot of correspondence from people in my riding, and I want to read some of those.

Cecile Goodmanson wrote:

Bill C-7 is a horrible law and I am asking you to oppose it. It is basically a suicide pact....Under Bill C-7, we as a society are saying that it is okay to kill sick, disabled, lonely and mentally ill people. If those people feel like life is not worth living, we should go along with that lie and dispense with them post-haste.... This is ridiculous. I thought we were not supposed to discriminate against the disabled, the elderly and those who are sick or mentally ill.

Becky Thomas wrote:

The new Liberal government Bill C-7 to expand assisted suicide and euthanasia is truly horrifying. It would allow people who are not even dying to be able to demand that a doctor help kill them. Anyone will be able to demand the state and taxpayer participation in their execution provided they claim they have intolerable psychological suffering or physical suffering, terms that are very broad and open to every interpretation one could imagine.... Please speak out against this push.

Pat and Donna Robol wrote this to the justice minister, and I am not sure that he read it so I will read it so that he can hear it. They wrote:

As someone opposed to physician-assisted suicide, we did complete the questionnaire; however, found the online survey very difficult to complete, because it was formed on a basis of presupposed agreement with euthanasia and assisted suicide. It did not give those of us opposed a proper voice. I heard over the course of a couple of weeks of many who, in conscience, felt they could not participate in such a survey for that very reason. This survey was flawed in so many ways, including the time allotted and the assumption everyone had access to computers.

David Dombrowski wrote:

I am very concerned that the Liberal government is not doing the promised five-year review of their Liberal euthanasia law but instead liberalizing it well beyond the court ruling that prompted the government's response.... This government has not charged anyone or even decided to investigate any of the several publicized cases of abuse under the existing euthanasia law, and now it proposes to remove many of those existing safeguards.

Cheryl Fraess wrote:

The Government of Canada prides itself on championing inclusion and accessibility. With its current position on the reintroduction of MAID, the government reminds us that it has a glaring blind spot when it comes to its vision of a more inclu-

sive Canada. This is not simply an unfortunate omission. It is a betrayal of the foundational principles of inclusion, one that puts the lives of people with disability at risk.

As I conclude, I want to mention a few men who have gone before me.

My Uncle George was born around 1940. He had Down syndrome. He was my father's next oldest brother. My father would say that he did not even know that his brother had Down syndrome until my father was eight or nine years old. My Uncle George died naturally at age 53. My Uncle Ken suffered a horrific farm accident when he was four years old and became a paraplegic. His life was very difficult in those days, especially for his parents in dealing with a newly paraplegic son, but he persevered. He had a successful career with the provincial government, and became a very senior bureaucrat. I looked up to him, and he was by far my favourite uncle. He died of cancer in his fifties. I am who I am today, in part, because of these two men. I stand on the shoulders of these two men. Without words, they taught me tolerance, acceptance and love, and I am here today, in part, because of those two men.

Let us not create a Canada where men like Uncle George and Uncle Ken are erased from existence. Let us slow this down.

• (1530)

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, it is important that we recognize that there is a clock ticking on this piece of legislation. The Bloc raised this issue in question period today and other people from other parties have raised it, in terms of seeing it passed.

The Conservatives should not try to give the false impression that it is about the process, or that it would cause a delay in passing it. If the Conservative Party is to be completely transparent, it does not support the legislation because it believes that the decision should have been appealed to the Supreme Court of Canada. That is why it does not support the legislation.

I wonder if my colleague from across the way would acknowledge that this is, in fact, the case.

Mr. Brad Redekopp: Madam Speaker, perhaps the parliamentary secretary needs a bit of information. The government seems extremely stuck and confused as to what to do. There are many options available to it.

Number one, it could ask the Quebec superior court for an extension, as it already did. I am sure it could do it again.

Second, the government could appeal. That is commonly done and is necessary in a case where the law that is being changed has such profound impact on the country.

Government Orders

There are many tools the government could use if it chose to. It is just choosing not to.

Hon. Ed Fast (Abbotsford, CPC): Madam Speaker, I want to commend my colleague for referencing the human side of this. He mentioned his two uncles, both of whom had serious disabilities, yet lived productive, satisfying lives. He mentioned that those uncles taught him tolerance, which is sometimes in short supply here in the House as we heard today during question period, where those who opposed the expansion of medically assisted suicide were being referred to as religious fanatics.

I would be interested to hear the member's views on whether that is the appropriate way for MPs to characterize those of us who have serious substantive reservations about this legislation.

Mr. Brad Redekopp: Madam Speaker, it is absolutely inappropriate. There are 338 of us in the House. We certainly all do not agree on everything. We come from different walks of life and different faith backgrounds. We all have different beliefs, different lived experiences and different families. We are different in every way.

That is what the strength of the House is. We come together with all of those differences and we make good laws by bringing our unique experiences to the House.

It is very important for our colleagues in the House to bring their lived experiences here and share them with everybody. Together, we make good laws.

Mr. Kenny Chiu (Steveston—Richmond East, CPC): Madam Speaker, listening to the member for Winnipeg North sounded like it has been repeating a tactic of using a conspiracy theory. I have also heard a conspiracy theory about the Liberal Party of Canada on the MAID strategy, which makes it sound like they want to withdraw palliative care so that they can save money by pushing for more MAID. I do not believe the Liberal Party of Canada would sink so low.

I would like to ask my colleague to comment on that, please.

• (1535)

Mr. Brad Redekopp: Madam Speaker, conspiracy theories are always an interesting and strange place to go, but the member raised something that I wanted to mention, and that is palliative care. My mother-in-law experienced an end-of-life situation in palliative care and it was very important to my family to have that ability. Unfortunately, 70% of Canadians do not have access to palliative care and that is, in part, driving the demand for MAID.

It is important that we as a country and the government come up with a strategy and plan to develop proper and improved palliative care in the country. That will go a long way to helping seniors and those in end-of-life situations.

Mrs. Cathay Wagantall (Yorkton—Melville, CPC): Madam Speaker, I consider it an honour to speak for a third time on Bill C-7 as the bill would dramatically expand access to assisted death in our country.

I rise again to represent the thousands of voices across the country who feel that the bill puts them in crosshairs. I am referring to vulnerable Canadians living with disabilities and disabling condi-

tions who believe they have been targeted. They have told us that this legislation singles them out by providing them with a special path to assisted death. They want us in this place to know their lives matter. This is the last opportunity for members of the House to legislate Bill C-7 to ensure their best interests are considered.

I want to use my time today to reiterate what has been a common theme throughout my interventions on Bill C-7. The Liberals are moving to impose sweeping consequential legislation despite what they have been clearly told by Parliament and Canadians. Yes, they have even ignored their own legislation.

The government should not have moved to implement the bill before the parliamentary review of Bill C-14, which was slated to take place before the end of June next year. It should have done that first. We do not yet have a clear enough picture of the impact a Canada-wide MAID regime has had on our country. Five years is not remotely enough time to take stock of trends, abuse and the impact of MAID on charter-protected conscience rights.

I remember the words of the former member for Winnipeg Centre, Robert-Falcon Ouellette, during debate on Bill C-14. In his view, the Liberals should have delayed the implementation of the Canada-wide MAID regime for at least five to 10 years until it could be adequately determined what the impact of assisted death would be in all communities across our vast and diverse country. Mr. Ouellette spoke against adding fuel to the suicide crisis that had taken such a heartbreaking toll on reserves.

Tyler White, CEO of Siksika Health Services, said recently that Bill C-7 ran the risk of undoing the work that indigenous elders had done to curb the frequency of suicides among indigenous youth. What message does Bill C-7 send these young people? If indigenous advocates believe that Bill C-14 was a step in the wrong direction, why is the government taking things even further with Bill C-7? What is the purpose of rushing this?

I also remember the elements of the Bill C-14 debate pertaining to instances of MAID abuse in other parts of the world. This is key. The Belgian model, which Bill C-14 was modelled after, is known for its abuse. In Belgium and the Netherlands, MAID laws, once limited to mentally competent, terminally ill adults, now include adults and children with mental deficiencies, severely disabled individuals and even those with treatable psychiatric conditions, such as anorexia and depression. Between 2012 and 2017, the Netherlands alone saw a 600% increase in euthanasia, which was sought to address psychiatric conditions.

When was the government planning to take a hard look at Canada's MAID regime and how we could prevent this kind of abuse in the future? The Minister of Justice says that it is in the works and part of the plan. Why was it not done first? This is the cart before the horse. It is the tail wagging the dog.

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By ignoring a five-year review, the government has also cast aside the concerns of physicians. We cannot ignore the monumental importance medical professionals place on their Hippocratic oath, such as true of Dr. Ramona Coelho, a champion of conscience rights in her field. She told former MP David Anderson at the end of the Parliament, “Doctors know the importance of conscience rights to protect themselves and their patients...people like me who are being pressured to leave family medicine. I know palliative care doctors in Ontario who have stopped practising. I know nurses in institutions who are feeling bullied...shift their focus, or retire early ...The pressure is there, and we are looking for relief.”

It saddens me that the government has yet to establish conscience protections for medical practitioners who do not wish to violate their conscience while at a patient's bedside. This bill is asking doctors to go far beyond what Bill C-14 even asked them to do. In Dr. Coelho's words, “it is my conscience that pushes me to go the extra mile, and I think patient care will suffer if doctors are not allowed to live with integrity and follow their conscience.”

It is because of this risk of abuse on many fronts that many of us on this side of the House walked away from the Bill C-14 debate with an unpleasant feeling in our gut, one that suggested that the implementation of the MAID regime had started Canada down a very slippery slope to a culture of death on demand. We are at Bill C-7 today.

• (1540)

However, there was an ever-present light at the end of the tunnel with Bill C-14. The five-year review was important to members of the House and indeed to all Canadians. It is shameful we find ourselves ramming through this legislation before this review is even started.

On that note, I realize that the Liberals are frustrated that my colleagues and I have been so diligent in vocalizing the outpouring of concern from disabled Canadians, concerned medical professionals and those whose personal beliefs conflict with the bill. That is our responsibility.

The Liberals desperately want to speed up the passage of this life and death legislation. They want to meet the deadline imposed by the Quebec Superior Court, a deadline they could have met comfortably if the House had sat in May and June and the Prime Minister had not prorogued Parliament in August.

In a way, this is beside the point. The December 18 deadline is arbitrary, as was the deadline for Bill C-14. As legislators, our mandate is to pass the best legislation possible for all Canadians. I underscore the words “all Canadians”.

The bill has barely been studied as the Standing Committee on Justice and Human Rights only held four meetings of hearings. Many witnesses and briefs were denied a voice because of this. Of course, the Liberals certainly could have, should have and still could appeal the Quebec Superior Court decision. We could have struck a balance in good faith of what Canadians actually wanted when it came to end-of-life decisions.

As I said in a previous debate, four years since the passage of Bill C-14 has allowed Canadians to further process the idea of as-

sisted death. Almost 80% of Canadians believe it should be easier to make end-of-life decisions for themselves. That number is seven points higher than it was four years ago upon the passage of Bill C-14.

At the same time, Canadians are unwavering in their support of strong safeguards for the most vulnerable in our society as well as conscience protections for medical professionals. They are unwavering. According to an Angus Reid Institute poll released last month, the same majority of Canadians who desire empowerment in their end-of-life decisions want Parliament to weigh the risks of MAID for those living with mental health issues such as depression.

Sixty-nine per cent of Canadians fear depressed individuals could see MAID as a means to escape dealing with the underlying cause of their condition. Of those surveyed, 65% want Parliament and the courts to consider MAID's impact on the elderly and those with disabilities. They fear death-on-demand could encourage these Canadians to seek it as a means of ending their perceived burden on others. This perceived feeling is being encouraged and more research needs to be done.

Sixty-two per cent of Canadians want Parliament and the courts to examine the potential impact of MAID on our health care system. There is a danger that increased reliance on assisted death will lead policy-makers to begin neglecting long-term and palliative care. I am being gracious in saying “begin”, because, in my view, we can see this discouraging trend unfolding already.

Seventy per cent of Canadians continue to live without access to palliative care, while the government has failed to invest the \$3 billion it promised to help in closing that gap. Clearly there is a discrepancy.

Canadians are equally as outspoken when it comes to conscience protection for doctors or those whose faith bars their participation in MAID. Fifty-seven per cent agree that nursing homes and hospices with conscientious objections should be able to deny MAID to those who request it. The Canadian Medical Association has indicated that 23,000 doctors are available to provide this service, which is more than enough across Canada. We need to protect our conscience protections.

Canadians want to see reasonable safeguards maintained in Bill C-7. They want to see Parliament legislate with their interests in mind, their interests, not those of the courts. They want to see the House continue to give credence to the views of medical professionals and those with disabilities.

Government Orders

Regrettably, judging by what we have seen through debate, Bill C-7 is another example of the government allowing the courts to legislate for Canadians. This bill is not reflective of what Canadians hold dear: Care and compassion for all, regardless of age, disabilities or religious beliefs.

Public health and economic safeguards have been the highest priority of the House throughout the pandemic. That is why so many in this place and across the country find Bill C-7's attack on end-of-life safeguards so painfully ironic and troubling. It is for this reason I cannot and will not support the bill.

● (1545)

Mr. Arnold Viersen (Peace River—Westlock, CPC): Madam Speaker, I want to relay for the hon. member a bit of a story. Recently, on my Facebook page, I shared a picture of a clinic that had “Suicide Prevention” written on the front door with a set of stairs going up, and “Assisted Suicide” on the side door with a ramp going up. Something I often raise about this bill is that it would create two classes of citizens in the country.

Ms. Keay, a constituent of mine from Whitecourt, recently reached out to me. She was concerned that the picture I shared on my Facebook page was not reflective of the current situation in Canada. I have assured her that it is indeed reflective of it.

I wonder if my hon. colleague could comment on the two classes of citizens we would create with this bill.

Mrs. Cathay Wagantall: Madam Speaker, it definitely needs to be discussed. For some reason, the members on the other side of the floor feel they have heard from the disability community. I have no idea who they have spoken to, because every disability organization across the country has come out saying the bill is a danger to it and it wants to see the safeguards in it.

Maybe a lot of Canadians are just waking up to this reality, but every letter I have received, like my colleague, indicates there is great concern. We value our life in this country. We value every person. My children had the privilege of growing up in a school where those with handicaps and disabilities were part of the classroom, which was something very different than I experienced. There is such a growing appreciation of the fact that all lives matter, regardless of one's conditions, and that we all have something to contribute to our country, our families and our communities.

Hon. Ed Fast (Abbotsford, CPC): Madam Speaker, my colleague from Yorkton—Melville has referenced the issue of the steep slippery slope on which we find ourselves. Back when Bill C-14 was being debated in the House, many of us had concerns it was indeed a slippery slope and we were generally mocked and accused of fearmongering. Today, here we are. In fact, it is very clear it was a steep slippery slope.

It is the vulnerable in Canada who are being exposed to medically assisted death. I would ask the member to comment on the assurances from the government that those with mental health issues, children and other vulnerable Canadians will not be exposed to this in the future and that they will be fully protected under the legislation.

I would like her comments on whether she takes those words at face value or questions them.

Mrs. Cathay Wagantall: Madam Speaker, I am very troubled by what the government says and what it does. It puts preambles up on websites, but does not include them in its bills.

I put something on my Facebook that said, “If it's not in the bill, it doesn't exist. If it doesn't exist, there is cause for concern.” We have heard that concern on this side of the floor, as the official opposition, from groups across the country. If the Liberals truly mean what they say, they need to ensure those safeguards are in the bill. They should go the extra mile to say that they truly care about the vulnerable and make it their priority. Right now, no way are Canadians hearing that from the government.

Mr. Dane Lloyd (Sturgeon River—Parkland, CPC): Madam Speaker, a member stated earlier in question period that it was members of the faith communities who were holding up the bill, that they had an agenda. In my observations, throughout the committees and hearing the witnesses, although faith-based communities have been involved, primarily the disabled and indigenous communities have been sounding the alarm on the legislation.

I was hoping the member could comment on how incredibly inappropriate it is to try to cast aspersions on the motivations of vulnerable people who are just trying to stand up for their right to live.

Mrs. Cathay Wagantall: Madam Speaker, it is very disconcerting when it drops to that level. I guess that shows desperation.

That being said, the reality is this. We all have faith. My faith may be very different from someone else's, but whatever we do in this place is motivated by who we are and what we have entrenched in our lives through the relationships, exposure and perspectives we bring to this place. I am honoured to be here for who I am. We are in the House of Commons. We represent the sense of Canada across the nation, all our different regions and perspectives. It is an honour for me to stand here and represent the people who came to us for help on this issue, people with disabilities—

● (1550)

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): Unfortunately, I have to resume debate.

The hon. member for Elmwood—Transcona.

Government Orders

Mr. Daniel Blaikie (Elmwood—Transcona, NDP): Madam Speaker, I am rising today to participate in the third reading debate of Bill C-7. I want to recognize the very real and legitimate challenge here and the difficult questions that were raised by the Truchon decision, which declared that the reasonably foreseeable death criterion for accessing medical assistance in dying goes against the charter and is null and void. When we talk about the deadline in December that we are working toward, we are talking about the moment when the court decision will take effect and the criterion, regardless of whether Bill C-7 passes, will take effect. At that point, reasonable foreseeability of death will no longer be a condition for accessing medical assistance in dying.

That raises a lot of difficult questions. It raises a lot of questions about the nature of human dignity. Of course, one thing to consider in the long-standing debate on medical assistance in dying is the dignity provided to people who are experiencing severe suffering and know that it is not going to get better. There is a sense of autonomy that comes from being able to choose their own time to go and the conditions under which they go.

There is another really important side to human dignity, and we have heard some other members speak to it already today. It is the dignity of those who choose life and want to choose life. They have to know that in so doing they have the resources and the respect for their human rights to make that affirmation of life and to choose to go on.

I want to take some time to recognize that, for people in the disability community in Canada, this debate comes in a very difficult context. It comes in the context of decades of neglect and inadequate resourcing and support, and a recognition of the barriers they face in trying to live a full life and realize their potential. It comes in the context of the pandemic, during which there have been conversations about how to allocate scarce resources and a real worry, on the part of people living with disabilities, that decision-makers might not value their lives in the way they value the lives of others, which has to be scary.

When they looked for reassurance that the government had their backs and understood these concerns, what they saw over the first number of months of the pandemic, about six or seven months, was a lot of heel-dragging on a commitment to make a simple one-time payment to support people with disabilities regarding the added costs and difficulties of the pandemic. I can understand why that does not engender a lot of confidence that the government has their backs and understands their real concerns.

In light of the Truchon decision, the long-standing neglect of people living with disabilities and the heightened sense of urgency given the pandemic, I can definitely understand how this has become such a charged issue and understand the very strong feelings that people, especially in the disability community, are facing. They do not want to be faced with the terrible dilemma of having to choose between a life of poverty and suffering on the one hand and a premature death on the other hand.

There are certainly members in the House speaking today to one side of that dilemma, which is wanting to ensure that people are not forced into a premature death. However, I put it to the House that we cannot do that if we are not willing to address the other side of

the dilemma, which is to recognize the overwhelming number of people in Canada living with disabilities who are forced into a life of poverty. There are a number of people living with disabilities who have managed to overcome a whole bunch of barriers to get gainful employment and support themselves and their families, and that is a wonderful thing. That is what I wish for all people living with disabilities for whom that is a possibility.

However, we also have to recognize that many people with disabilities are not going to have a full-time job just like everybody else. There are barriers that simply will not permit that. That is why we see such a high number of people living with disabilities on various kinds of social assistance plans and other kinds of income support programs.

• (1555)

Those programs have been totally inadequate for allowing the people who depend on them for their income to live with dignity. When we talk about dignity, it is really important that we talk about this, human rights and the importance of recognizing that people living with disabilities have rights and deserve to live in dignity. It takes resources to do that.

I really want to take the time to put the emphasis on that side, because the court has made a decision about whether a reasonably foreseeable death can be part of the criteria for medical assistance in dying. The government chose not to appeal it. I cannot change the government's decision on that. The NDP cannot change the government's decision on that. However, what we can do is try to add to and take on the sense of urgency the government has had in getting this legislation through the House when the House has been sitting.

I take the point. There is some real legitimacy to the point that, as we all know, we could have had more time in the House to consider these questions. When members talk about the effect of prorogation on House time, they are quite right about it. We have seen some urgency from the government regarding the legislation, but we need to see that same urgency for putting the supports in place for people living with disabilities so that the overwhelming majority of people living with disabilities are not forced, by virtue of being on some kind of income support plan, to live a life of poverty.

That is why I was proud, as the NDP's disability inclusion critic, to write, alongside the member for Esquimalt—Saanich—Sooke, the government last week, calling for it to institute one national disability income support program that would cover people who are already receiving income support under the auspices of a disability program, whether it is through the provinces, the territories or the federal government. We want to set that at a rate of \$2,200 a month to recognize that \$2,000 a month is a reasonable standard, which many in the country recognized during the pandemic. It is not easy for everyone, for sure, but it is a reasonable standard of income. We have seen a larger consensus than ever on that.

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We also need to recognize, as we did when the Canada emergency student benefit was established, that people living with disabilities do face additional costs. There was a differential for students living with disabilities. They were paid a little more in recognition of those additional costs. I think that \$2,200 a month would accomplish that and would make sure that no matter where people in Canada, they have some kind of basic income that would allow them to put a roof over their head and get the basic necessities of life. Valuing life cannot just mean “not death”. It has to mean providing the resources for people to really live a life they value and that they feel allows them to meet their full potential.

That is not just a question of income. It is also a question of getting very deliberate and focused about an employment strategy to change the attitude of many employers who do not have experience with people living with disabilities. We can educate them about what they can do in the workplace to make it more friendly to people living with disabilities. It will help overcome some of those barriers and change attitudes in society generally.

It is also about supports, like investments in good public housing where rent is geared to income, so those who are not high-income people can still afford to be in good housing. It is about investing in good transportation options so that people living with disabilities who are not able to own or operate their own vehicle still have good options to get around the city. This helps with employment, but it also helps with socializing in times when we are able to do that.

If we want to talk about the value of life, these are things we not only have to talk about, but have to do. We have to do them with the same sense of urgency that the government has put on passing this legislation. I am very much looking forward to doing things in that urgent way, and the NDP will continue to push for this.

• (1600)

Mr. Dane Lloyd (Sturgeon River—Parkland, CPC): Madam Speaker, I had the honour of listening to the member's father, a very long-standing and esteemed member of the House, when he spoke at my university about the intersection between faith, social gospel and the founding of the NDP.

In the context of this debate, it was raised by a member in question period that those of a faith-based perspective who might be opposed to this legislation are so-called religious fanatics. I would like the member to talk about this and affirm that people who have a faith-based perspective on legislation such as MAID have a legitimate point of view.

Mr. Daniel Blaikie: Madam Speaker, I do not think the comments made earlier in question period are helpful for the debate. This is a difficult issue, and it is rightly a difficult issue. It is one of the most important issues, and it is a fundamental existential issue.

People bring their faith to the debate. That does not mean everyone is going to agree. We know that not everyone in the Christian community, for example, agrees on this point. There are people of faith who are proponents of medical assistance in dying, just as there are people of faith who are opponents of medical assistance in dying, and there is just about every position in between.

The important thing is to stay focused on the issue at hand and not to get into ad hominem arguments. I know there is often a temptation for that in politics, but particularly for issues like this, it is important to avoid that temptation.

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, there is one concern that I believe has a lot of legitimacy, and it would be nice to see some further dialogue on it. It is with regard to palliative care. Depending on where one might live in the country, whether it is urban or rural, there is a great deal of difference in obtaining palliative care.

The member for Elmwood—Transcona is very much aware of provincial jurisdiction and federal jurisdiction, so I am interested in hearing his thoughts about what he believes the national role should be on the issue of palliative care. If he could go beyond the idea of providing money, I would very much value his opinion.

Mr. Daniel Blaikie: Madam Speaker, I thank the member for Winnipeg North for raising the issue of palliative care. I want to take a moment to recognize the very good work of the member for Timmins—James Bay over the years on that very point. There was a motion he helped the House pass that called for a national palliative care strategy. When I talk about according to other issues the urgency the government accorded to Bill C-7, this is one of those issues. That motion passed a long time ago now, and we have not seen that kind of action happen.

We need to get moving on these things. It is the lack of action on those things that people in the disability community and other vulnerable communities look at, and it is part of why they worry. The government and people in politics have words about these things, but we need to show that we can pass to action.

We need to do that when it comes to palliative care. We also need to do it when it comes to things like pharmacare and dental care. We must ensure that everyone, regardless of their employment status or their income, has access to those things as part and parcel of valuing life. We need to create supports for people living with disabilities that will allow those who want to choose life to have a life in which they can flourish and live with dignity. I believe that is most people.

Mr. Randall Garrison (Esquimalt—Saanich—Sooke, NDP): Madam Speaker, I want to thank the member for Elmwood—Transcona for working with me on the proposal we sent last week to the government for a national income support program for people with disabilities that would replace the patchwork of programs across the country managed by the provinces.

I wonder if the member could comment on what he thinks the premiers' reactions or provincial governments' reactions would be to a federal national income support program for people with disabilities.

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• (1605)

Mr. Daniel Blaikie: Madam Speaker, I think most members of the House are aware of the fact that provincial governments have been struggling a lot as a result of the pandemic. They have asked in many cases for additional transfers of funding that do not have any conditions attached.

The federal government is the government with the most financial wherewithal, and this moment, when the medical assistance in dying regime is changing, gives an even stronger added sense of urgency to the need to support people living with disabilities. This means freeing up some room in the budgets of provincial governments that currently have income support programs for people with disabilities so they can spend on other priorities.

I would hasten to add this should not be a replacement for the non-income supports that are provided for housing and transportation. This would be a quick way to put some money back into the pockets of provincial governments while raising up the level of support for people living with disabilities, no matter where they live in the country. That is one of the virtues of this proposal.

Mr. Arnold Viersen (Peace River—Westlock, CPC): Madam Speaker, I was just wondering if the hon. member is not concerned about the two classes of citizens the bill would create. The first is if they are able-bodied Canadians, then suicide prevention measures would be given to them at their first request. The second is if they are disabled Canadians on their worst day and they are attempting suicide, then they would be provided with MAID.

Is the member not concerned about the two streams and the two classes of citizens that we would be creating with the bill?

Mr. Daniel Blaikie: Madam Speaker, I see the member's question as an opportunity to highlight a provision of the bill that I do not think has really been talked about in the context of the debate in this way.

I have heard Conservatives say that they are worried that the 90-day period is not enough for people whose death is not reasonably foreseeable. However, that waiting period is the waiting period that would apply to people living with disabilities whose death is not reasonably foreseeable. Therefore, Bill C-7 would add something that will not be there if we do not add it by passing the bill by the deadline. We could have a case where a person whose death is not reasonably foreseeable, but who meets the other criteria, could get access to MAID a lot more quickly than if we pass Bill C-7 before the deadline.

Ms. Jenny Kwan (Vancouver East, NDP): Madam Speaker, the member's comments are always very thoughtful and well considered, so I really appreciate that.

The issue around dignity of life centres very much on people's ability to support themselves and the issue around income. To that end, with regard to the proposal for a new program from the government to support people with disabilities, what sort of response has the member received from the government on this proposal?

Mr. Daniel Blaikie: Madam Speaker, to date, we have not received a response. We sent the letter in about the middle of last week.

What we do know from the government is that it had a vague commitment in the Speech from the Throne to a bold new disability income support program. We are trying to fill in the blanks. Often-times, we see the current government, on other issues, make promises without a lot of details. Characteristically, New Democrats are interested in the details and how we would get it done.

That is why we proposed a number, we proposed a way to do it and we proposed what the advantages of doing that would be in terms of making sure that it does not depend on what part of the country people live in or what their level of income support is as a person living with disabilities. It is a way to put money back in the hands of provinces at a time when they desperately need it, and it is a way now to make sure that if they do need income support as a person living with disabilities, they are not forced below the poverty line. If we look at the rates that are paid across the provinces and by the federal government, it is not enough to make it. It is just not enough and that has to change.

When we talk about valuing life, about people choosing life and about not forcing them into a dilemma between premature death on the one hand and poverty and suffering on the other, it has to mean an income that does not keep them below the poverty line. That absolutely has to change and that is the real crux of that proposal.

We are hoping that the government will see that proposal as a good way to implement its own promise. If the Liberals have another idea, they had better hurry up and share it because this needs to be addressed with the same sense of urgency as this bill has been pushed through the House.

• (1610)

Mr. Dane Lloyd (Sturgeon River—Parkland, CPC): Madam Speaker, it gives me no pleasure to rise yet again to oppose this deeply flawed and dangerous legislation, Bill C-7. The Liberals have been complaining in the media that they think the Conservatives are holding up the legislation and that they are going to miss their court-imposed deadline of December 18, but they really have no one but themselves to blame. Conservatives are doing our constitutionally mandated job to hold the Liberal government accountable on its legislation.

Looking at the record over these past eight months, it is clear that my party has bent over backwards to give the Liberals the breathing room to implement emergency economic aid and other COVID-related measures. We have been very co-operative. We have also seen a great deal of government legislation move fairly quickly through the House just this fall, and in a minority Parliament at that.

Let us look at the Liberal record on moving the legislation forward. From the very beginning, the government really made its own bed on this one when it refused to defend its own legislation, Bill C-14, which was just passed in the last Parliament. Even some of its own members said on Twitter that the legislation was unconstitutional, admitting they felt it was unconstitutional even when they were voting for it, but they did not use the opportunity to appeal the legislation to the Supreme Court. That shows me that it was the government's intent to use the courts to circumvent Parliament.

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Parliament was mandated, under Bill C-14, to conduct a thorough review of medical assistance in dying and that review was to occur next year. It is important to have these sorts of reviews built into legislation because when we talk about something as serious as medical assistance in dying, which is a novel legislation, a new innovation in our social fabric, Canadian people really have not had adequate time to digest how they feel about the legislation and to examine their lived experiences.

A five-year review was a very adequate provision to give Canadians a bit of time to assess the bill and then have Parliament make recommendations and possibly changes to the legislation so that we could fix the bill, whether that meant tightening up some things that were prone to abuse or maybe loosening up the legislation in cases where it was needed. However, with the Liberal government's desire to short-circuit the legislative process and the will of the previous Parliament, it chose to fast-track the legislation by not choosing to appeal it to the Supreme Court. I believe this was done very purposely to ensure the legislation would pass before a review took place.

If the review had gone forward, as we have seen from the Council of Canadian Academies, there are a lot of questions about the practice of the legislation and how it has been carried out over the past few years. Abuses have been raised in committee and in the House repeatedly, yet in the legislation the government has taken no efforts to take those experiences and make this a safer piece of legislation for vulnerable people.

Going to the next example of why the government's problem is one it made itself, with the COVID-19 pandemic, which I agree was not the government's fault, it was required to request several extensions of the bill. The courts were willing to approve those extensions and, in late summer, Liberals chose to prorogue Parliament. By proroguing Parliament, they made the choice to clear the decks of all of their legislation, start from the beginning and send us back to the drawing board. By doing that, they delayed the legislation further. For the Liberal government to claim that Conservatives are holding up the bill when what we are doing is our constitutionally mandated job, especially on an issue as important as life and death, it does not ring true.

Another example is that if the bill was so important for the government to get passed so quickly, why was it not the first justice bill it put forward? Bill C-3 was passed in a very expeditious manner with all parties' support in the House. It was passed, largely, with the support of committee and minimal amendments. Even in that expedited manner, that delayed the government's legislation by weeks. The Liberals are talking and complaining about how Conservatives are allegedly delaying the legislation, but it was their own choices that resulted in the delay of the legislation.

• (1615)

We are left today with the government complaining that the Conservatives are doing their job. We are doing our job by criticizing the Liberals' legislation. We are holding them to account. We are championing the rights of vulnerable people. We will never apologize for doing what our constituents have sent us here to do, which is to stand up for their deeply held beliefs, to stand up for their concerns and to stand up for vulnerable people.

Vulnerable Canadians made their desires known and their concerns known very loudly and clearly at the committee. I am pleased to see that the other place has had more time to hear from witnesses. I believe it has heard from over 80 witnesses, the vast majority of whom are opposed to the legislation. Frankly, in the House, we only had four committee meetings for this very important legislation, so I am pleased that the Senate is taking its responsibility seriously and thoroughly examining the bill and hearing from vulnerable people and others who are concerned about the legislation.

The members of these communities were afraid of Bill C-14. They were assured by the government that they would be protected and that there were protections for people with mental illnesses from accessing it. There were protections for children. There was the reasonably foreseeable death requirement, which was touted as a great protection for the disabled community. I can tell members that what they are saying is that they are terrified by what they see in this bill from the Liberal government.

I read today on CBC that the Minister of Justice appears to be in a showdown with disabled groups who are demanding a halt to the bill. The idea that the Minister of Justice, whose role is to uphold the Charter of Rights and Freedoms for Canadians, is fighting and ignoring the pleas of disabled and other vulnerable Canadians is just plain wrong.

Conservatives have been listening and we have been fighting for these vulnerable Canadians. It appears that nobody else is willing to fight for them. That is what we will do. We are fighting for these vulnerable Canadians. We are not being intransigent about this bill. Conservatives have a wide range of perspectives on this issue. We have put forward, as a party, some very common-sense amendments that do not undermine the legality of medical assistance in dying as a general practice but will do a lot to assuage the fears of vulnerable Canadians.

Some of these common-sense amendments proposed at committee included protecting patients from undue coercion. By coercion, people immediately draw up images of doctors in deeply immoral situations pushing medical assistance in dying on vulnerable people who are isolated from loved ones and family members. I am not trying to say that is happening. Frankly, I think what we have seen is that it is a lot more benign than that. It is not doctors aggressively pushing medical assistance in dying on people.

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Someone may be in a situation where there is a power imbalance, and as a disabled person, other vulnerable person or a person who is older, they might not have family members or access to supports like social workers and psychologists. In this situation, they trust their doctors and that is a good thing because our doctors work very hard and they are very professional. However, if someone has that trust relationship with their doctor and the doctor comes and asks if they have considered medical assistance in dying, that could seem very benign for an average person. If I was in a situation like that and the doctor came to me, I would say no thanks, but we never know what someone else is going through and what challenges they are facing.

If they do not have someone to turn to, they can feel like the doctor is looking out for their best interests and the doctor is suggesting that they consider medical assistance in dying, so maybe the doctor is right and maybe that person should consider it. In this case, we recognize there is a power imbalance. At committee, we suggested putting forward some very strong protections to say that health care professionals should in no way be presenting medical assistance in dying as an option to patients. This is a basic protection.

● (1620)

This is something we talked about with the last bill. I was actually very disturbed, during debate at second reading, when a Liberal member stood up and talked about a couple they knew who had not ever considered medical assistance in dying. It was a very touching story. The member nonchalantly said that the doctor came in, passed them a brochure and asked if they had ever considered medical assistance in dying. The member, I think, thought that this was an innocuous and benign situation, but for me and for people in disabled and vulnerable communities, it was very scary that they could be put into this situation without adequate supports. They might feel like they were being coerced into a decision.

We also wanted to put in some stronger protections around a period of reflection. I think the period of reflection is key because, even in the government's own reports on medical assistance in dying, there were many cases in which people did not receive disability supports, and they received MAID while still not receiving disability supports. There were people waiting to get palliative care who had not received access to palliative care who also received medical assistance in dying.

It clearly illustrates that the government is not putting the resources in to help disabled Canadians, or to help Canadians who need palliative care. If we shorten the timeline or eliminate the timeline altogether, we are really losing an opportunity for people to access these wonderful services that can make the end of life much more peaceful.

One of the sad things about debating this bill today is that I feel like I am being forced to defend the status quo, implemented in the last Parliament under Bill C-14. I was not a big fan of Bill C-14, and as legislation it has proven time and again to fail to protect vulnerable people. It certainly did not protect the prisoners who underwent medical assistance in dying.

This issue was raised by the Office of the Correctional Investigator, and it has deep moral and ethical problems. Prisoners really have no power. He raised a case in which a prisoner was coming

close to the end of life and wanted to die peacefully in the community with access to palliative care. They were denied the opportunity to do so, and then chose MAID instead. I think the correctional investigator was very astute in bringing that up. In situations where somebody does not have a right to determine their own manner of death or the manner that leads up to their death, how can they be given a choice to access medical assistance in dying? That raises some big issues.

In numerous cases, people were largely not sick with anything. In one case in the *Globe and Mail* a number of years ago, an elderly couple in their nineties wanted to die together. According to the article, they were not suffering from any pre-existing conditions, except arthritis, but it was ruled that because they were so old their deaths were reasonably foreseeable. That is really troubling. Medical professionals have raised the point that a reasonably foreseeable death is not actually defined in any medical journal. There is no definition of "reasonably foreseeable." It is so subjective. One thing that I would have liked to see with this legislation was for the government to come forward with an actual medical definition of "reasonably foreseeable." Instead, it has chosen to eliminate this language altogether, which waters down the protections.

Bill C-14 did not save people who were suffering from mental illness from receiving medical assistance in dying. There was a case in Chilliwack where somebody who had a history of depression was able to access medical assistance in dying in an expedited manner. Their family was not informed until very late into the process and they were not able to intervene and explain that this person, while they did have a reasonably foreseeable condition, also suffered from depression and other challenges and that maybe, with a social worker or a psychologist, those things could have been worked out and medical assistance in dying could have been avoided.

It is clear to me that we are removing even the barest of protections. We are removing this adequate reflection period and making this legislation, which is already prone to abuses, even more open with this new legislation.

Government Orders

• (1625)

The government claims this new bill is safe because it is explicitly denying people who are suffering exclusively from a mental illness from receiving MAID. When the previous legislation was brought in, even though I was not a member of the House at the time, I sat in on a lot of meetings. It is interesting that, in committee appearances and at the joint special committee, Dr. Sonu Gaiind from the Canadian Psychiatric Association was very hesitant to endorse medical assistance in dying for people suffering from mental illnesses, especially exclusively mental illnesses. Their testimony said that they do not treat any mental illness as if it is untreatable. There is always a treatment. Sometimes it is a very difficult treatment or an ongoing treatment, but society must never accept that there is not a way to treat mental illness. The alternative is that we stop helping people and that they seek medical assistance in dying.

It is tricky when the government talks about excluding MAID for people with exclusively mental illness, but we are seeing that too many people who might qualify for medical assistance in dying because they have a physical condition and a reasonably foreseeable death also have a mental illness.

Where doctors are involved, they are very well educated but they are not necessarily educated in all aspects of health. Not every doctor is a psychologist or qualified to make mental illness determinations. How do we know that somebody who might have a reasonably foreseeable death, and who might have a previous condition, is not depressed and seeking medical assistance in dying for the purpose of their mental illness?

Under this legislation, there is no protection for those people seeking medical assistance in dying. While the government may say they qualify because they have a grievous and irremediable condition, we need to have more protections to ensure that people with mental illnesses are not seeking medical assistance in dying in the heat of the moment. Maybe they have had an incident that has led them to want it, and given more time to reflect maybe they could be dissuaded from seeking it.

There are no mechanisms, as I said. I am not going to just criticize, I am going to put forward actual, concrete ways I think we could make this legislation better. Unfortunately, it does not seem the government is in the mood to accept too many amendments from the Conservative side, but I will go ahead and say them anyway. We should require social workers and psychologists to be involved with decisions where underlying mental health issues, or issues related to access to income supports or to poverty, might be identified.

I was very disturbed to read in Maclean's magazine that some people are seeking medical assistance in dying because they are living in poverty. That was never written in the legislation. That was never intended as a purpose for medical assistance in dying. By including these important medical professionals, we could make it much more difficult for people to get medical assistance in dying who might not make that decision if it was between them and a doctor.

That leads me to one of my final points. The government is removing some of the witness requirements. Under the previous legislation, an independent witness who was apart from the medical

process was required to be involved. That would provide accountability to ensure that doctors and health care professionals were crossing all their t's and dotting all their i's to make sure that this was a completely kosher procedure. By removing the independent witness requirement, it is leaving the decision up to a doctor and the patient.

I am going to be opposing this legislation. I look forward to the other place coming back with some very strong amendments. I look forward to debating those amendments again, and getting the best possible legislation that will protect vulnerable people in this country.

• (1630)

Mr. Matthew Green (Hamilton Centre, NDP): Madam Speaker, I know the hon. member to be a man of compassion and deep caring. He has now spoken at length, raising many compelling arguments that I have many points of agreement on. We share many points of common ground.

We have heard Conservative members talk about dignity and life, yet earlier in this debate, when it was proposed that we provide actual financial supports, a member of the Conservative caucus answered that it had to be in exchange for support for the extractive oil and gas sector, in a very flippant way.

I am going to give the hon. member the opportunity to clarify, on behalf of care and compassion, all the talk about supporting people and the dignity of life. Is the hon. member willing to support our proposition that we provide financial supports to people living with disabilities in a way that would lift them out of the poverty and despair that we are hearing them advocate for as it relates to Bill C-7?

Mr. Dane Lloyd: Madam Speaker, I am not going to comment on the interaction. I am not aware of the context of the interaction that he alluded to. I will say that I am unreservedly in support of better economic supports for the disabled and those who are in poverty, but it is really about how we reach that place. We live in a confederation. We have provinces that have their own income support measures. I know the NDP members were talking about a national measure. It is all about finding the best politically workable solution to ensure that people can get access to the income supports they need.

Something that has been alluded to is that statistics are showing a lot of people who are accessing medical assistance in dying are in the upper class, but people who are impoverished are accessing this because they have concerns about their ability to make their payments or to live life the way they want to. We need to address those intersectional socio-economic factors with this legislation, and I do not think that has been given adequate coverage.

Mr. Kevin Waugh (Saskatoon—Grasswood, CPC): Madam Speaker, I sat in the House today for six hours, and I have not heard the name Robert Latimer.

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Robert Latimer was a farmer from Biggar who killed his daughter, Tracy, who was 12 years old at the time. He was convicted of killing his 12-year-old daughter. She had several severe disabilities. At the time, I was in the newsroom at CTV Saskatoon, and we did several stories with the Latimer family, almost every week. The case of Robert Latimer killing his 12-year-old daughter, Tracy, is one of the most polarizing in Canadian legal history.

Tracy could not walk, talk or feed herself. Here we are, over 25 years later, in the House talking about a situation like this. I just want to know something. My colleague from Alberta has heard of the case. Everybody, I think, has heard of this case from over 25 years ago. Robert Latimer served time in Victoria, about 10 years.

I want to ask the member from Alberta his thoughts as we debate Bill C-7 today.

Mr. Dane Lloyd: Madam Speaker, it was a shocking case, and it laid bare some very difficult questions. In my perspective, when we are talking about this legislation, that it is one of the strong reasons there was so much all-party support to prevent minors from accessing medical assistance in dying. I think it is absolutely critical that we ensure that remains the policy in this country: that minors not be allowed to access medical assistance in dying.

I think it also raises questions about how we value human beings. My younger sister, who has passed, had Down syndrome. We live in a much more inclusive society today, and I think that is a wonderful thing, but we have seen how people can devalue the lives of people like my younger sister, and we need to ensure that we stand up for the value of those people's lives. I think that is what we, as a Conservative caucus, are trying to do when we are fighting for vulnerable people who we believe will be impacted, in some cases fatally, by this legislation.

• (1635)

Hon. Ed Fast (Abbotsford, CPC): Madam Speaker, I thank my hon. colleague from Sturgeon River—Parkland for his wonderful speech. It reflected compassion, but it also reflected a high respect for human life.

Unfortunately, a lot of us here in the House lament the fact that we can no longer critically debate. We cannot establish our views based on the merits of the arguments. Today, we saw that in question period, when those who oppose this legislation were referred to as religious fanatics.

I would ask my colleague this. Does he agree that the vilification and disparagement of those who do not support the Liberal government's efforts to expand assisted suicide is inappropriate?

Mr. Dane Lloyd: Madam Speaker, I thank the hon. member for his wisdom on this issue. As the member from the NDP who spoke previously said, it is very unhelpful to this debate to be casting aspersions and singling out certain groups of people to question their motivations. I know people who come from a faith background and a faith perspective on this issue, on both sides of the issue, and they are honourable people who want to do what they feel is right.

It is very demeaning to cast all opposition to this bill into a single bucket, when we have so many people from disability communities, indigenous communities and other vulnerable communities raising the alarm about this bill. It is a cheap shot that undermines

the quality of this debate and our ability, as legislators, to come here and bring the views of our constituents. That is what democracy is all about, which is an opportunity to share our perspective and shape the way our country is going. That is incredibly important.

The member is right that that seems to be decaying. We must put a stop to it and reverse it as soon as possible. Our country will suffer when one side is being told it cannot participate in debate.

Mr. Bob Bratina (Hamilton East—Stoney Creek, Lib.): Madam Speaker, I appreciate this debate. In light of what was just said, I point out the member across the way depicted the Attorney General as having ignored the pleas of the disability community. Does he honestly think that the Attorney General is ignoring the pleas of the disability community?

All of us on this side, and hopefully all on the opposite side, have the best interest of Canadians at heart. This is a difficult and complex issue. We understand that, and it is good we are having this debate.

Does the member actually think the Attorney General has ignored the pleas of the disability community?

Mr. Dane Lloyd: Madam Speaker, there is a saying that the road to hell is paved with good intentions. The member does not have to take it from me believing the Attorney General is ignoring the pleas of disabled Canadians. He can take it from them. They have been saying it at committee. I just read it on CBC today that he is in a showdown with disabled and vulnerable communities, as they are calling for this legislation to be halted.

If the minister is indeed listening to the pleas of the disabled community, why has the committee majority rejected any of the recommendations put forward by the disabled and vulnerable communities? Why are they so intransigent in their fight against any effort from these communities to shape this legislation in a way that would protect their lives and protect their dignity?

It is really up to the government to show and demonstrate it is listening to the pleas, because I have seen absolutely no evidence that the Attorney General has done so.

• (1640)

[*Translation*]

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): It is my duty, pursuant to Standing Order 38, to inform the House that the questions to be raised tonight at the time of adjournment are as follows: the hon. member for Vancouver East, Housing; the hon. member for Regina—Lewvan, Air Transportation; the hon. member for Leeds—Grenville—Thousand Islands and Rideau Lakes, Ethics.

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[English]

Mr. Richard Bragdon (Tobique—Mactaquac, CPC): Madam Speaker, it is a privilege to rise in the House again this afternoon and speak to a bill that I believe deserves long and serious consideration. The ramifications of this bill will last a very long time, beyond any one Parliament or group of parliamentarians. Hence, it would be behoove this Parliament to make sure that we spend adequate time reflecting on this bill and making sure we get it right. As I have said before, and I believe it bears repeating, especially as we debate this bill, the character of a nation is reflected in how it treats its most vulnerable citizens.

There is an ancient writing from the Book of Psalms that many members would be familiar with. It has been utilized all over the world and has been heard for centuries and generations. Psalm 23 simply states, “Yea, though I walk through the valley of the shadow of death, I will fear no evil: for [you are] with me”.

In one of my previous roles, as a minister, I had the privilege of walking with individuals and families as they traversed that valley of the shadow of death. I have both witnessed and experienced personally what it means to be affected by the passing of a loved one, as I am sure many, if not all, in this chamber have as well.

This bill brings with it great responsibility. It literally deals with matters pertaining to life and death, and decisions of absolute and complete finality. I believe it would behoove this House to take adequate time to reflect upon the powerful testimonies we have heard at committee. Testimonies such as Mr. Roger Foley's, which shares his story of being denied the health services he requested and being pressured, instead, to pursue a medically assisted death. He is now fighting for others to not be put in the same situation he was, and he supports our amendments to the bill.

Krista Carr also gave testimony at committee. She is from Inclusion Canada and works with persons with disabilities. She stated at committee that the worst fears of those living with disabilities are being realized by Bill C-7. The government's own Minister of Employment, Workforce Development and Disability Inclusion has stated that MAID should not be brought up by doctors to the disabled.

Indigenous leaders, including the former attorney general and minister of justice for Canada, have also raised serious concerns over this bill and its inadequate safeguards. Medical practitioners have raised concerns pertaining to conscience rights as they pertain to medical assistance in dying.

In light of all these concerns that have been brought to the table, and all of these powerful testimonies that we have been able to hear, we can see that Canadians from across the country are raising the alarm bells and encouraging us parliamentarians to get this right because of the finality that this decision entails.

What would be wrong for us to pause and adequately reflect about such serious matters, and take the time to ensure that adequate safeguards are built in so that the concerns of the most vulnerable people among us are adequately addressed? No one could deny that those concerns have not been expressed with fervency and urgency. At this point, we as parliamentarians should take the

time to reflect and ask, what steps are we taking to make sure those concerns are being addressed in this legislation?

In my time as a pastor, I got to know a lady who was suffering greatly with a disease that had caused her to become incapacitated, in many ways. She could not walk. She could not even lift her arms to feed herself as the disease progressed. Her health was deteriorating. Her emotional stability was already ravaged by having gone through the loss of her husband overseas.

• (1645)

I remember visiting her in the hospital and at that time watching as her mother had to feed her with a spoon. It was almost a pablum-based type of nourishment because she was slowly losing her ability to chew food. Her circumstances were overwhelming. While visiting and being in the hospital with her and her mom at this time, we could not leave without being affected by what we saw.

I must say that our local, faith and church communities responded and did everything they could to provide encouragement, visits and make sure adequate food and support was provided where possible. She had been through so much she even had a hard time expressing everything she was going through. I remember one day when it did not appear she had all that long to be with us, I went to visit her in the hospital and witnessed her taking the nourishment from her mom. I remember leaving the hospital room shaken and wishing there was a better way for this lady.

I am glad to report to members that she had an amazing turnaround. Her story did not end where we thought it was going to end. Though her pathway up to that point had been marked with a lot of suffering, discomfort and terrible loss, I am glad to say that over 12 years later this woman has fully recovered, is married again, enjoying life and doing well.

One would ask what that has to do with what we are talking about. It has a whole lot to do with it. I believe there are many other Canadians who have walked through that valley of the shadow of death who wondered if their life was still worth living and if they could make it to the other side. Because of the supports, care and love from the friends, family and community members who stood by them in that most difficult of circumstances, they were able to get through that valley and get to the other side.

How many other Canadians in terrible circumstances at the moment, who are feeling overwhelmed by what they are facing, would benefit from having people walk with them through that valley? It may be all they need to get to the other side. It may not be the case for everyone, but I know it was for that lady. I am so glad it was the case for her. It made all the difference in the world to know that others kept believing when she had lost the ability to believe herself. Now, after getting to the other side, she serves as an inspiration for many others.

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I want to conclude with this. Though the valley of the shadow of death casts a very long and dark shadow for those going through it and for their families, as a member here who has lost a loved one, I can attest that we have an obligation as parliamentarians to pause and ensure that every safeguard is in place, so that when people are walking through that valley, they do not make a decision while still in the darkness, when they are near the end of that valley.

The last part of the writing I shared earlier is “for [you are] with me”. I think the questions every parliamentarian needs to ask themselves are these: Are we going to be there for all Canadians who are in the midst of the valley of the shadow of death? Are we going to be with them by ensuring every safeguard is in place and the supports necessary to carry on are amply supplied?

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen’s Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, I like to think that I would be there. I went through a personal experience with my father, where his dying days were very difficult because of the amount of severe pain he was experiencing. I am ever so grateful I was with him at his time of passing. The medicine ultimately alleviated the pain, but some health care professionals indicated to me that it likely might have shortened his lifespan also.

I understand the importance of the difference between an assisted death and assisting someone with suicide. My father was a very proud man and I believe in my heart that he died with dignity, and in the way in which he wanted to pass.

I understand how important this legislation is and would remind members this is a debate that has been taking place for many years. Even after we deal with this legislation, the debate will continue, because we all recognize, no matter where we fall on the issue, the importance of making sure we get it right. I suspect we will continue to do so in the form of committees. However, we do have some deadlines that need to be and should be addressed. Could the member provide his thoughts on that, or on my comments, whichever he feels comfortable with?

• (1650)

Mr. Richard Bragdon: Madam Speaker, I appreciate the member sharing his personal story of walking through the valley with his dad. I can relate, having had a 34-year-old brother who had cancer and suffered quite tremendously toward the end. I remember being there and seeing it. Yes, medication played a role in alleviating his pain and helping with his suffering, but ultimately we walked through that valley. With all of the treatments and all of the things that we went through, some of it was not easy at all to witness, but I will say I was very thankful to have every moment I had with my brother. I was extremely thankful for how others came through during that time and the people in the community who rose to the occasion, from all walks of life.

I think sometimes that in our rush to alleviate suffering, which we all want to do, naturally, perhaps we miss the lessons and virtues that only suffering can bring in life. The ancient saying is that there is more to be learned in the house of mourning than in any other house. The lessons we learn from people who have gone

through tragedy, hardship or painful circumstances help all of us understand what matters most.

One of the greatest lessons I learned in that time was that every bit of life we have is to be cherished. I am so thankful for that. The things that are said in those moments—

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): I will have to interrupt for one last question from the hon. member for St. Albert—Edmonton.

Mr. Michael Cooper (St. Albert—Edmonton, CPC): Madam Speaker, the hon. member brought up the case of Roger Foley and as he concluded his speech, he talked about the need to ensure that there are adequate safeguards in place. I was wondering, having regard for the case of Roger Foley, if the member could provide his thoughts on the removal of a key safeguard in this bill, which is to provide for two independent witnesses. This legislation would remove that and provide that persons attending to the care of someone requesting medical assistance in dying can constitute a witness.

Mr. Richard Bragdon: Madam Speaker, when it comes to any safeguards being removed, to me it poses a great threat. We need to provide adequate safeguards for everyone traversing the valley of the shadow of death—

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): Resuming debate, the hon. member for St. Albert—Edmonton.

• (1655)

Mr. Michael Cooper (St. Albert—Edmonton, CPC): Madam Speaker, I am pleased to rise once again to speak to Bill C-7, the government's medical assistance in dying legislation. I do acknowledge that this is an incredibly complex subject matter for which there are many diverse views.

With that said, the way in which the government and the Attorney General have handled the legislation is a lesson in what not to do, having regard for the gravity of the legislation. I say that having full respect for the Minister of Justice and Attorney General. I believe he is a sincere and intelligent individual who is compassionate and does want to do what he believes to be right.

That said, when the Minister of Justice spoke in the House at second reading, he indicated that there were widespread consultations and that out of those consultations there was a consensus. Neither is true.

The consultations that the minister spoke about were largely over the course of one month in January of this year. They were online consultations that excluded vulnerable segments of the population, including persons with mobility, cognitive or visual impairments, persons without access to the Internet and persons living in remote and northern communities. Their voices were not heard or were not heard as easily as a result of the online consultation process that started and ended within roughly a period of one month.

Not only that, but the consultations were said to have had a predetermined outcome. In other words, the minister had an idea of the legislation that he sought to craft and he used the process as a way of getting the answers that he had hoped to receive.

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Do not take my word for that. Take the words of the persons who were involved in the consultation process, including Heidi Janz of the Council of Canadians with Disabilities, or Dr. Catherine Frazee, the former chief commissioner of the Ontario Human Rights Commission and a leading advocate for persons with disabilities. They said that the consultations were predetermined when they appeared before the justice committee.

What about the consensus that supposedly arose out of these so-called extensive consultations that simply were not so? We know that out of those consultations just about every national disability rights organization opposes this bill. As we speak, they are calling on the minister and the government to put this bill on pause. We know that more than 1,100 physicians have penned a letter expressing their opposition. Concerns were expressed by the U.N. Special Rapporteur on the rights of persons with disabilities.

• (1700)

Just about every witness, if not every witness other than the minister himself, who appeared before the Senate legal and constitutional affairs committee that held hearings the last couple of weeks, panned the bill. No one, it seems, is happy with the bill. So much for the minister's assertion at second reading in the House that there was a consensus. There was no consensus, because there was no meaningful consultation, and there was a predetermined result that has resulted in legislation that just about everyone in one way, shape or form has been highly critical of.

I heard over the course of the debate members of the government and other parties talk about this issue in a context as if there were no risks, "Get out of the way, let the patients make their choice and throw out safeguards, because otherwise one is infringing on individual autonomy." The Supreme Court of Canada recognized in Carter that "there are risks, to be sure", at paragraph 105 of the Carter decision, and the court talked about how those risks can be "very substantially minimized through a carefully-designed system' that imposes strict limits that are scrupulously monitored and enforced". That is what the Supreme Court of Canada said.

When we talk about those risks, one need look no further than the case of Roger Foley, who is severely disabled, requires 24-hour care and is in a hospital facility in London, Ontario. I will read what he said about his experience, because it really is quite shocking. When he came before the justice committee, he talked about what can happen when there are insufficient safeguards, and we are talking about safeguards that are in Bill C-14 which are now being further removed by Bill C-7. He said:

I have been coerced into assisted death by abuse, neglect, lack of care and threats. For example, at a time when I was advocating for assistance to live and for self-directed home care, the hospital ethicist and nurses were trying to coerce me into an assisted death by threatening to charge me \$1,800 per day or force-discharge me without the care I needed to live. I felt pressured by these staff raising assisted dying rather than relieving my suffering with dignified and compassionate care.

In the face of that, we put forward an amendment to say that this must patient-initiated. The minister responsible for disability inclusion said that she had grave concerns about what happened to Roger Foley, and she has heard about this regularly. Yet, even in the face of that evidence, the government rejected that very common-sense amendment, rejected other amendments and instead moved recklessly ahead. We are now in this untenable situation where the

most vulnerable persons in our society could be put at risk. It really is unfortunate that it has panned out this way. I can only hope that the Senate will bring forward substantive amendments to this deeply flawed legislation.

• (1705)

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, the member looks to the government and accuses it of defeating Conservative amendments. I suspect that, if the member were to reflect on what took place in committee, he would likely find that, in a minority situation, it is not just the Liberal Party that would carry the vote in a committee. The member knows this full well.

The Conservatives were unable to convince enough members of the committee to support the Conservative amendments. I suspect that the current legislation, as it is, reflects the overall thinking, dating back to 2015, from the Carter decision to the superior court decision in Quebec, which has in essence put forward the deadline of December 18.

With respect to other members of his caucus, one in particular said that the Government of Canada has two options, going to the Quebec to say that we need an extension or going to the Supreme Court. Does the hon. member share that opinion, and could he expand on it?

Mr. Michael Cooper: Madam Speaker, very simply, I do share that opinion. I would further add that it should never have come to this, because the appropriate course of action for the Attorney General to have taken was to appeal the Truchon decision in the first place. Had the minister done so, at the very least, we would not be in this position of trying to rush through legislation on the eve of the stay of the declaration on constitutional invalidity expiring.

Mr. Paul Manly (Nanaimo—Ladysmith, GP): Madam Speaker, I know the Conservatives have expressed a lot of concern about people who are making money during the pandemic who should not be making money during the pandemic. I know they are not talking about the 20 billionaires who made \$38 billion in the first six months of this pandemic.

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The Conservatives are talking about people who got the CERB who do not deserve the CERB. In the last week, I have had a number of constituents, people with disabilities, contact my office because they are getting letters from the CRA saying that they need to pay back the \$14,000 they received from the CERB. These are people who have disabilities and who are self-employed and use that income to pay their rent and utilities and to help with expenses. They did not understand the difference between the gross and the net amounts in the application process. People on disability benefits here in British Columbia can earn \$12,000 a year before their disability starts getting clawed back, dollar for dollar.

Would the hon. member like to see more compassion on this issue of taking care of people with disabilities now, while they are alive, trying to survive? What does the member think should be done?

Mr. Michael Cooper: Madam Speaker, what I would hope is that the concerns expressed by the disability community would be heard as we debate this important piece of legislation.

Unfortunately, those voices were not heard by the Attorney General. They were not heard by Liberal MPs. They were heard by my friend from Nanaimo—Ladysmith, who did bring forward some important amendments at the committee, which we supported and which we thought moved in the right direction to provide greater certainty to protect vulnerable persons. However, those amendments were rejected by the Liberals across the way.

I hope, in the face of all of that, the Senate will do better than the process we have had in the House.

Mr. Gary Vidal (Desnethé—Missinippi—Churchill River, CPC): Madam Speaker, I knew entering federal politics would mean participating in many very important debates in the House, but speaking on matters of life and death brings that to a whole new level. As someone who comes from a small city in northern Saskatchewan and now has the privilege of representing the entire northern 52% of Saskatchewan, I hope to bring somewhat of a unique perspective to this debate.

As we stand here in Ottawa and debate this legislation, there are several communities in my riding dealing with very high suicide rates. Makwa Sahgaiehan First Nation, a community of about a thousand people, has over 100 community members currently on suicide watch.

There are long-term care home and palliative care shortages across the country, but this is even more true in northern and remote communities. We need to consider what message we, as legislators, are sending to these vulnerable communities when we go way beyond the Supreme Court of Canada's Carter decision by removing safeguards that would protect Canada's most vulnerable.

The government is now seeking to play an active role rather than a passive role in the end of Canadians' lives. I find this extremely troubling and implore my colleagues on the other side of the aisle to allow the necessary time to consider the truly long-term ramifications of the legislation and to listen to all the voices speaking out on it. This does not need to be done with unnecessary hurry.

There are two main topics I want to address when it comes to Bill C-7. Number one is the impact passing the legislation will have

on indigenous communities, and number two is the importance of safeguards to protect Canada's most vulnerable.

I do not stand here pretending for one moment to speak on behalf of indigenous people in Canada. However, over my lifetime I have developed relationships with many first nations and Métis people in northern Saskatchewan and over the year I have discussed this issue of assisted dying with many of them. There is a great worry among the leadership of these nations that legitimizing suicide in our culture will have grave impacts on their younger generations as well as those who are nearing the end of their lives.

These concerns were actually raised during debate in the last Parliament by Liberal MP Robert-Falcon Ouellette during his speech on what was then Bill C-14. He said:

In the indigenous world view, everything is interconnected. It is holistic, meaning that when a change is made in one place, the impact will be felt elsewhere, and the two cannot be separated. In the western world view, often we compartmentalize things. We believe that we can play, that we can control certain situations, that we can effect change here and not see change in other places. Above all, we have come to believe ourselves able to predict and control all, to control the future. This does not mean, though, that we should not take action.

The impact of this bill on people in Toronto may be very different than on the people in Nunavik or Attawapiskat. Our role as parliamentarians is to place ourselves in the moccasins of others, to place ourselves outside of our own experiences, to see the world through another cosmology and other world view, and to see the impact that our decisions may have on others.

We are making profound changes in concepts surrounding life, which cannot be undone in the future. In the indigenous tradition and philosophy, we are required to think seven generations into the future. If I am wrong and there is no connection between Attawapiskat and physician-assisted dying or suicide, if the average person does not see a connection and communities do not see a greater stress, then I will gladly say I was wrong; but if there is an impact, which is caused by the valorization of suicide, then what?

Mr. Ouellette then goes on to share a very personal and difficult story of hardship he and his siblings faced as young children, which led him to nearly take his own life. He goes on to say:

If in my life I had seen, or I had known, that my grandmother had somehow used physician-assisted dying or physician-assisted suicide, or others in my family had completed the irreparable act, then it would have made it much more difficult for me to continue.

We might not think the impact will be there, but we do not know. We assume we know these things. We are deciding the future of a few for the end of a few.

Speaking to CBC during the debate on Bill C-14, Senator Murray Sinclair shared similar views. He said:

From the indigenous perspective, ending one's own life was not encouraged, in fact it was discouraged and there are teachings in my community, Ojibwa teachings, around whether or not you will be able to travel to the spirit world in the proper way or a ceremony could be done for you if you make the decision to end your life without good reason.

● (1710)

In speaking to his colleagues in the Senate, Senator Sinclair, speaking about younger people, said:

It will not take much for a young, vulnerable person to believe that their situation is intolerable to them and, therefore, we need to ensure the message we send to the Canadian public with this legislation is that this is not a right that should be easily exercised or that we are embracing.

First nations people in northern Saskatchewan, Mr. Ouellette from Manitoba and Senator Murray Sinclair are not alone. Tyler White, chief executive officer for the Siksika Health Services, as well as Dr. Thomas Fung, a lead physician of the same nation, are sounding alarms in response to the legislation. During an interview with CTV, Mr. White said, "The expansion of MAID sends a contradictory message to our peoples that some individuals should receive suicide prevention, while others suicide assistance."

In a letter shared with my office, Mr. White and Dr. Fung told the story of a patient who suffers from a lung disease that causes him to become easily short of breath, even when doing simple household tasks. This patient uses a walker but cannot walk for more than a couple of minutes without gasping for breath. While the man's condition is incurable, he could certainly have an improved quality of life if he had access to funding to support his home oxygen, but he was just out of the range of being approved for funding. Dr. Fung concluded by writing that under Bill C-7, this patient would have qualified for assisted death when it should be clear to all that there are other ways to relieve this man's suffering and improve his quality of life. Patients like Dr. Fung's deserve better.

In a country as developed and resourceful as Canada, we cannot allow ourselves to abandon people like this. Our health care system is the pride of many Canadians, but that is because of universality of access to life-saving treatments, not the universal admissibility to a physician-administered death.

I want to talk for a minute about the safeguards for vulnerable Canadians and how the legislation would fail to provide them. I am not a lawyer, but thankfully the Leader of the Opposition is. We are probably all glad that is the case, that I am not the lawyer. I was glad to be in the House during this speech on Bill C-7 this morning.

Leaning on his legal expertise, allow me to repeat some of what he said regarding previous litigation surrounding assisted death, because it struck me as very important. He said, "All of them talked about the role of the state in protecting the decisionally vulnerable, as they were called, people who could be pushed into end-of-life treatment because they felt they were a burden. This has been talked about since the 1990s, and this Attorney General is removing the safeguards from our regime. Every ounce of case law on the issue of assisted dying, euthanasia or assisted suicide talks about protecting those vulnerable."

Speaking of protecting the vulnerable, the leader also said, "All major disability groups in Canada agree with the compassionate and reasonable position being presented by my Conservative colleagues. I am very proud of the advocacy we have shown. We have

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also been joined by legal scholars, indigenous leaders and people working with people with mental health issues." I wholeheartedly echo the comments made by my hon. friend this morning and repeat the need for the government to step back from its repealing of the provisions that would ensure a 10-day waiting period, as well as two witnesses.

As a matter of fact, regarding the 10-day waiting period, a senior employee of the AFN shared on Twitter recently, "This ten day period literally saved a member of family's life. MAID must be accessible but also account for clear and thoughtful consent. The Liberals should rethink this."

In closing, I want to completely acknowledge that both sides of this debate are coming from a point of view of compassion. I understand that the government has approached the drafting of the legislation in good faith, but the reality is that it has fallen short of its duty to Canadians. That is why I will be voting against this dangerous bill and I hope that my colleagues on the other side of the aisle will reconsider their support for it as well.

● (1715)

Mr. John Brassard (Barrie—Innisfil, CPC): Madam Speaker, the member talked about this being a life and death issue. Oftentimes, when we sit in this place, we look to these issues with the degree of magnitude that they deserve.

As the bill went through committee, there were some challenges. I know some reasonable amendments were put forward by the Conservative caucus. I am wondering if the member could speak to those reasonable amendments and just how important they are to determining this piece of legislation.

● (1720)

Mr. Gary Vidal: Madam Speaker, I agree that some reasonable amendments were proposed, and we would like to see the 10-day reflection period I talked about put back. I would like to share a really personal story about this, which I think will emphasize that point to the House.

Back in 2014, in my small city in Meadow Lake, Saskatchewan, a young lady graduated from high school, a tremendous athlete. She had just finished her nursing degree, and I think one Tuesday night she was in a terrible car accident and ended up a paraplegic. This was a family friend of mine, and I had the privilege, or maybe the horror, of being in the hospital with her family that night and in the following days. I can guarantee the House that this young lady would have chosen death over life at that point if she had had that opportunity.

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Now this young lady, several years later, is a Paralympic athlete. She has gotten back to doing incredible things with her life. She has been all over the world for athletics. I could talk for a long time about this, but I am going to say something that came from her dad. He said, "One of the really cool things we are slowly catching is the members of this special group of people don't see themselves constrained in any way." People with disabilities do not see this when they get past the hurdle of the original burden, which, in this case, was this young lady's accident.

Mrs. Cathay Wagantall (Yorkton—Melville, CPC): Madam Speaker, we know that physicians are very concerned about conscience protections for medical practitioners. Right from the beginning, with Bill C-14, many stressed that this should be part of Bill C-7, yet the Liberal government has totally ignored it and punted it down to the provinces. I believe it is impacting palliative care and impacting people's perspectives of serving in the medical profession. I would just like some comments from the member in that regard.

Mr. Gary Vidal: Madam Speaker, I fully agree. Probably the second most common concern I have heard about from people is conscience rights. I have talked to people who believe that is a huge issue. They do not believe that their personal belief system, faith or life journeys should be impacted by some imposition of government.

I want to share one other quick comment here. In the debate on this in the last Parliament, the former attorney general and justice minister commented about preventing the normalization of suicide to protect vulnerable person who are disproportionately at risk of inducement to suicide. She spoke of that repeatedly. This is from a CTV article:

In defending it before the Senate, [the former justice minister] warned that expanding the eligibility criteria to include anyone who is suffering intolerably would "send the wrong message that society feels it is appropriate to address suffering in life by choosing death. This message may encourage some who are in crisis and already considering suicide to act."

I really do not think we should be putting our medical professionals in that place.

Mr. Bob Zimmer (Prince George—Peace River—Northern Rockies, CPC): Madam Speaker, I feel honoured tonight to be speaking to Bill C-7 given the many great speeches by my Conservative colleagues, who are concerned about our citizens and especially those in the disability and senior communities.

I speak today deeply concerned about Bill C-7 and the changes being proposed in the legislation. I know this is an emotional issue for everyone, and it is an important discussion we are having this evening. Any legislation that is introduced in Parliament requires a thorough review, but this is especially true for bills that are literally matters of life and death.

It is my firm belief that the federal government should have appealed to the Supreme Court to get certainty on the framework within which Parliament can legislate. Unfortunately, that did not happen, so here we are with a rushed bill that puts the lives of our most vulnerable at risk.

Make no mistake: As a Christian I am firmly against the use of medically assisted dying. That said, I understand that the courts

have made a ruling and the legislation is required. However, we must ensure that this type of legislation includes safeguards for the most vulnerable in our society and for the conscience rights of physicians and health professionals.

That is why we Conservatives introduced a number of reasonable amendments to reinstate protections that the Liberal government has simply removed, which is troubling. These include reinstating a 10-day reflection period when death is reasonably foreseeable, extending the reflection period when death is not reasonably foreseeable, protecting vulnerable patients by requiring that the patient be the one who first requests information on medical assistance in dying and protecting the conscience rights of health care professionals.

It is unfortunate that these amendments have been rejected by the government. I am deeply concerned that this legislation will allow assisted death for Canadians who are not dying by removing the requirement that a person's death must be reasonably foreseeable for them to be eligible for assisted suicide and euthanasia.

My dad is 86 and my mom is 76, and as the son of two elderly Canadians, I am very concerned about what this would mean for our nation's seniors and the positions they may be put in when trying to access health care. Will they be placed in a position where they will have to decide between care and ending their lives because of outside pressure? As the bill expands medically assisted dying further, there is a risk that palliative care will suffer and, as a result, patients will view medically assisted dying as a better option.

I know Canadians share my concerns. It must be said that every national disability organization in Canada opposes this legislation. Krista Carr, executive vice-president of Inclusion Canada, said at committee, "Bill C-7 is our worst nightmare." These organizations caution that removing the end of life requirement discriminates against those who are disabled and puts their lives at even greater risk. Ms. Carr notes:

The end-of-life requirement was the only safeguard whereby disability was not the sole criterion. By having a disability itself under Bill C-7 as the justification for the termination of life, the very essence of the Charter of Rights and Freedoms would be shattered. Discrimination on the basis of disability would once again be entrenched in Canadian law.

It is shameful that in the Liberal government's rush to pass the bill before Christmas, it continues to neglect to address legitimate concerns being raised by persons with disabilities.

I am also deeply concerned about the limited protections for the conscience rights of our medical professionals. While some doctors and health care workers may have been comfortable with medically assisted dying under Bill C-14, the continued expansion may cause them to rethink their participation.

Others who have always been against medically assisted dying are already feeling the pressure to go against what they believe. As the Physicians Alliance Against Euthanasia said in a news release just last March, “The pressure has been intense for many physicians, especially amongst palliative specialists, some leaving their profession even before this latest development. Descriptions were made of toxic practice environments and fear of discipline by medical regulators.”

Members of the justice committee have heard first-hand from disability advocates vehemently opposed to Bill C-7 and its rapid expansion of medical assistance in dying. They argue it amounts to a deadly form of discrimination, making it easier for persons with disabilities to die than live. It is shameful.

• (1725)

Health care professionals have also spoken out, concerned not only about their conscience rights but also about the speed at which the government is trying to pass Bill C-7. To quote Adam Taylor about the lack of consultation on this legislation, “As an emergency and family doctor, I know the importance of consultation, along with the day to day experiences and sufferings of Canadians which cannot be ignored. I’m terrifically concerned about this.” Even so, here we are, and the Liberals are continuing to push through the bill, ignoring concerns of those who would be directly affected by these changes. Again, it is shameful.

As the Evangelical Fellowship of Canada said in its submission to the House of Commons Standing Committee on Justice and Human Rights, we must carefully consider the impact of Bill C-7 and the concerns being raised by many Canadians, particularly Canadians with disabilities. The legislation, not to mention the human lives the bill would negatively affect, is too important to be rushed.

PRIVATE MEMBERS' BUSINESS

• (1730)

[English]

EMANCIPATION DAY

Mr. Majid Jowhari (Richmond Hill, Lib.) moved:

That the House recognize that: (a) the British Parliament abolished slavery in the British Empire as of August 1, 1834; (b) slavery existed in British North America prior to its abolition in 1834; (c) abolitionists and others who struggled against slavery, including those who arrived in Upper and Lower Canada by the Underground Railroad, have historically celebrated August 1 as Emancipation Day; (d) the Government of Canada announced on January 30, 2018, that it would officially recognize the United Nations International Decade for People of African Descent to highlight the important contributions that people of African descent have made to Canadian society, and to provide a platform for confronting anti-Black racism; and (e) the heritage of Canada’s people of African descent and the contributions they have made and continue to make to Canada; and that, in the opinion of the House, the government should designate August 1 of every year as “Emancipation Day” in Canada.

He said: Mr. Speaker, I am pleased to rise today in the House to speak to my motion, Motion No. 36, which would have the House formerly recognize August 1 as emancipation day and in turn maintain our government’s commitment to highlight the contributions people of African descent have made to Canadian society and continue to combat anti-Black racism today. This motion builds on the

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incredible work done by Senator Wanda Thomas Bernard with Bill S-255 in the last session of Parliament.

Motion No. 36 on emancipation day, when passed, would have Parliament officially recognize the abolition of slavery on August 1, 1834, in the British empire, including British North America, what we know as present day Canada; the role of British colonies, including our nation, in participating in the transatlantic slave trade and the abolitionists who laid the ground work for change and defied the norms of the time; the history of emancipation day, including the many untold stories and unsung achievements of Black Canadians in Canadian society; and address anti-Black racism in the context of the United Nations International Decade for People of African Descent and for the purpose of achieving our goal of a just, inclusive and equal society.

In 1807, the British Parliament voted to end the transatlantic slave trade. On August 1, 1834, chattel slavery was abolished across the British empire and all its commonwealth territories, including Canada. This was a landmark victory for Black communities across the British empire and especially for the Black Canadians who organized, rallied and fought for this legislation. The day was one of celebration among Black Canadians who expressed their joy at being able to live freely and independently, though it also stood as an important occasion to reflect on the struggle it took to achieve that freedom.

Emancipation day allows for Canadians of African and Caribbean descent to connect through shared experiences and gives an opportunity to pass on the stories of their enslaved ancestors, whose names and experiences would otherwise not be recounted or honoured in any history book of that time.

World recognition of emancipation day is at the heart of this motion and one of the primary pillars in education and awareness that should be highlighted. This summer, in the weeks leading up to emancipation day, I had the opportunity to consult with various advocacy groups regarding this motion. I want to highlight an emancipation day panel I attended with notable Black scholars in Canada, including the Hon. Jean Augustine, the first female Black Canadian member of Parliament.

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One of the key highlights I took from this event was the importance of education. The primary purpose of this motion is to continue to educate our community on Canada's history and culture as well as shed light on part of our history that we have not always acknowledged. It also presents us with a unique opportunity to learn about important Canadian Black historical figures, community leaders and trailblazers.

The history of emancipation day goes beyond the abolition of the slave trade. It should highlight the work of numerous Black scholars, activists and change-makers. We specifically want to acknowledge historic events like the underground railroad, where tens of thousands of African Canadians and African Americans bravely escaped slavery in the south and sought refuge in Canada from 1850 to 1860. We want to recognize the influential Black Canadian abolitionists and cultural leaders like Mary Ann Shadd, the first female newspaper publisher in Canada and first Black female publisher in North America.

● (1735)

Ms. Shad founded and ran *The Provincial Freeman* from 1853 to 1860 and was a fierce anti-slavery activist. She used her platform to showcase Black culture and explored political and human rights issues, such as abolition, women's rights and the right to vote. She later went on to establish a non-segregated school in the town of Windsor.

I should recognize Viola Desmond, a Nova Scotia businesswoman who was arrested in 1946 for sitting in the whites-only section of a theatre. She was later charged with tax fraud. This incident became a catalyst for change as she refused to succumb to the racist policies of her time. Her case sparked a civil rights movement in Nova Scotia and inspired a generation of Black Nova Scotians and Canadians to fight for justice and human rights.

We must also acknowledge the Black Canadians who played a pivotal role in Canada's effort during World War I. Despite facing discrimination and barriers to enter into the armed forces, a significant group of Black men dedicated themselves to the war effort and served in multiple combat and support roles.

For example, we should honour the No. 2 Construction Battalion, an all-Black military unit that dug trenches, diffused land mines, stocked ammunition and removed wounded soldiers from the battlefield. The contribution of the No. 2 Battalion was not recognized until much later in the war.

In the words of Senator Bernard, "Emancipation Day served as an instrument to pass on the history and the memory of those who went before them and as a beacon for taking up the responsibility to carry on from where their ancestors left off."

Since immigrating to Canada, I have been lucky to live in many diverse and multicultural ridings like Richmond Hill. However, I have seen and experienced the effects of racism, prejudice and discrimination in my daily life. I know that I can never know the struggle of Black Canadians in our society today, but it is our duty as allies to emphasize and to continue to educate ourselves on issues that continue to impact Black communities across the world and in our country of Canada.

Throughout the month of July, my office created a social media campaign entitled "We Recognize". This online campaign highlighted the stories of Black Canadians throughout history who have made important contributions to our society; Canadians whose stories were not told in our history books or in our school classrooms.

My hope is that this motion will be the first step in acknowledging the gaps in our education system. It can encourage a greater focus on Black history and the inclusion of Black Canadian stories in history and social studies classes.

Emancipation day is a time for all Canadians to look inward and unlearn the biases and behaviours associated with the history of slavery that have resulted in the under-representation of Black Canadians in history books, school curriculums, elected positions and public service. It also serves as an opportunity for us to dismantle the remnants of institutionalized racism, discrimination and the overrepresentation of Black Canadians in correctional facilities.

Recognizing emancipation day gives Canadians the opportunity to confront this reality and to advocate for greater diversity, inclusion and opportunity.

I want to acknowledge the support that this motion has received from my colleague, Senator Wanda Thomas Bernard. Senator Bernard's guidance has been essential in allowing me to approach this motion with the care and nuance it required. Senator Bernard has been advocating extensively for this cause and continues to be a fierce advocate for Black communities across our country.

● (1740)

I also want to thank the member for Hull—Aylmer, the chair of the parliamentary Black caucus, and the members of the all-party parliamentary Black caucus for their support with this cause.

I want to commend the valuable insight from community voices, like Rosemary Sadlier from the Royal Commonwealth Society, the Ontario Black History Society and the Canadian Association of Social Workers. Their guidance and assistance were key to bringing visibility to this issue.

In honour of emancipation day and the United Nations International Decade for People of African Descent, I am calling on all Canadians to come together to confront our nation's history with racism as well as emancipation, so we can achieve better outcomes and representation for people who are marginalized, a label which disproportionately includes Black Canadians as well as first nations, Métis and Inuit people.

As for myself, I continue to advocate for a more inclusive, culturally aware and diverse society in which emancipation day and ancestry are represented and embodied in our schools and our institutions.

It is my sincere hope that all Canadians, especially the members of the House, will join me in exploring our nation's history and next August take part in their communities' emancipation day celebration. I ask members to please support Motion No. 36.

Private Members' Business

Mr. Matthew Green (Hamilton Centre, NDP): Mr. Speaker, what a historic moment it is. I thank the hon. member for Richmond Hill for lifting up the important work of the always honourable Senator Wanda Thomas Bernard.

We heard in his remarks that this is indeed a first step. It is a symbolic one, but a first step in dismantling anti-Black racism. What would the hon. member prioritize, with the opportunity that his government has, on second steps in order to dismantle anti-Black racism?

• (1745)

Mr. Majid Jowhari: Mr. Speaker, the hon. member and I have had an opportunity to work together at the OGGO committee, but, most important, today. As the hon. member mentioned, this is the first step. It is the first step in a journey. This journey is no different than any other journeys on which our country is embarking. Acknowledgement is the first step. I hope that when it is passed, this acknowledgement will be behind us.

As I said, it is upon us and upon the government to ensure we take the next step. The next step could be investment and generating awareness in other programs, whether social or educational programs, that would support the motion.

[Translation]

Mr. Alexis Brunelle-Duceppe (Lac-Saint-Jean, BQ): Mr. Speaker, I listened carefully to my hon. colleague's speech. I want to congratulate him for moving this motion. I think there is consensus on this.

Frankly, I was moved by the personal experiences that he shared with us. He himself has experienced racism. He obviously has a deep understanding of this cause. My question is simple.

Could our hon. colleague tell us what would be the benefits of this motion if it were adopted in the House?

[English]

Mr. Majid Jowhari: Mr. Speaker, I think the answer is obvious. The first step in any journey or reconciliation is acknowledgement and acceptance. The benefit is that it is now behind us and we can take the next step.

As I said, my focus remains on filling one of the gaps that I see, which is in education and ensuring that the depth of the contribution of African Canadians, especially to our country, is properly reflected and also brings an understanding within our country and makes our country much safer for visible minorities to grow and find their rightful place in this community.

Ms. Elizabeth May (Saanich—Gulf Islands, GP): Mr. Speaker, it is an honour just to ask a question of the hon. member and thank him for bringing this motion forward, and put on the record that the Green Party of Canada supports unequivocally recognition of Emancipation Day. It is recognized in many countries around the world. I am particularly pleased to note our historic breakthrough this year that our new leader, Annamie Paul, is the first Black woman leader of any federal political party in Canada.

What more can we do as individual members of Parliament? We know that private members' bills and motions can take their time to

wend their way through the House. How do we make sure this becomes law before the end of this Parliament?

Mr. Majid Jowhari: Mr. Speaker, it is good to hear that we are getting unanimous support across the House for this motion. It speaks to the significance of this motion. As individuals, we can make sure that we become the champion for the cause of anti-racism, reach out to organizations that are in our communities and reach out to those who are vulnerable and are struggling, and support them. In the House, we can make sure that we vote in support of the motion to pass second reading.

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, I just want to compliment my colleague for the fantastic work he has already accomplished by getting the resolution to the floor.

Can he add some further thoughts on how important it is for education to be a part of this going forward?

Mr. Majid Jowhari: Mr. Speaker, I believe when it becomes part of our education curriculum, then it is actually documented and in the books. It could be used as a base for us to be able to pass along that knowledge in a structured way. To that effect, that is why I picked education and awareness as what I believe the next step for us in this journey should be.

• (1750)

Mr. Alex Ruff (Bruce—Grey—Owen Sound, CPC): Mr. Speaker, I am going to start my remarks a little differently. I am going to try to tell a bit of a story.

Let us picture ourselves as my seven-year-old daughter and living in the southern United States in the 1830s. Life is not good. We utilize what was then known as the Underground Railway and make our way up. It is not a simple journey where people just grab a ticket, hop on the train and off they go. It is done at night. It is done, quite frequently, by foot. People need to use code words and travel constantly in fear that they may be recaptured and put back into slavery. Eventually, though, we make it to the Canadian border, or Upper Canada as it was known then, and cross that border. We feel that inspiration of hope. We know we are somewhere safer but we do not stop quite yet. We keep on going and travel to the most northern terminal of the Underground Railway, the village as Sydenham, now known as Owen Sound which, I am proud to say, is in my riding of Bruce—Grey—Owen Sound.

The only reason my daughter has to make that escape is because she happens to be of colour. It is sad, but I am glad that Canada has such a rich history and my riding has such a rich history in abolishing slavery. That Underground Railway helped free 30,000 to 40,000 slaves during its time of operation. It offered that beacon of hope. It gave people of Black descent an opportunity to settle, raise their families and find work. Again, it makes me so proud to come from the riding.

Private Members' Business

I want to thank the member for Richmond Hill for bringing forward this motion, Motion No. 36, and continue not what Senator Bernard started but actually what the Hon. Deepak Obhrai brought forward in this House in 1999, 21 years ago, as a private member's bill, Bill C-282. It was then brought forward within the Senate, a couple of years ago by the good senator. She tried to get it passed, but unfortunately the bill was not passed before Parliament broke. Fortunately, the member for Richmond Hill has brought it forward. I agree with his earlier comments; I am confident this motion will pass with unanimous consent in the House, when we get there.

My riding has some unique contributions that people of Black or African descent have made to this great country. This speaks to the motion as well. In the southernmost part of my riding, I have the town of Priceville. I did not know until I was preparing for this speech that it is named after Colonel Price. Colonel Price happened to be of Black descent, something I did not know. It just speaks again to the rich contributions Black people have made to Canada, throughout our history.

As well, in my own riding going back to 1993 to 2004, a former MP was Ovid Jackson. Ovid Jackson made national news at the time because while I come from a riding that is not as ethnically diverse as some of our ridings in more urban centres, Ovid was elected as a Black man. That speaks not only to the constituents of my great riding and how fair and balanced they are, but to what a nice, intelligent and competent individual Ovid himself was. Unfortunately, in my view, he ran for the wrong party, but we will deal with that on another day.

What is unique too about my riding and specifically Owen Sound, or the village of Sydenham as it was known then, is the Owen Sound Emancipation Festival. It is the longest ongoing festival in North America. It started in 1862, five years before Canada was officially a country, when Owen Sound or the village of Sydenham was recognizing the importance of the British Commonwealth's Slavery Abolition Act of 1833, which took effect August 1, 1834. The festival started back then with a picnic with the early settlers and they have been celebrating it non-stop ever since. That act freed more than 800,000 slaves across the British colonies and that festival kept going.

In 2004, there was a commemorative cairn, and I challenge any members of Parliament if they are ever up in my riding to come and visit it.

• (1755)

It is in Harrison Park, right in the downtown part of Owen Sound, and it is a beautiful cairn that allows people of all backgrounds to go and visit, meditate for a while, think about the importance and the contributions Black people have made to our country, and remember the challenges they faced in our history. It recognizes those early settlers to my area: the Millers, the Johnsons, the Scotts, the Greens and the Courtneys. Their descendants come back. They are not just in the area, they actually come back from all across our great country, and, I dare say, across the world, every year to be part of that annual celebration, which has actually turned into a three-day event.

I have a unique connection to Blaine Courtney, who is a past chair of the Owen Sound Emancipation Festival. He was actually

my track and field coach as a young teenager. Blaine and I got along great. He never stopped pushing me all the time to be the best that I could be, and I actually think I owe him, and all my coaches, a lot of gratitude for making me into the person I am today. I think they were instrumental in helping me be successful in my military career, and hopefully it will lead to success here in my political career.

Just a year and a half ago at the 2019 festival, my daughter and I were in attendance, and I was so proud as she was selected by the town crier to be part of the festival. She got to ring the bell, and she actually rang the bell with the granddaughters of Senator Bernard, and it was a unique experience. The one thing that I guess I was a little envious of was that my daughter made the front page of the local paper, the Owen Sound Sun Times, which is the biggest paper in my riding. I had just been elected as the Conservative candidate just a couple months prior, and there was my daughter making the front page of the newspaper and I was not mentioned at all. Maybe she has a future in politics if she wants. This year, of course, was slightly different; 2020 was done virtually, but I dare say it was impressive to see everybody still gathered and be instrumental as part of that festival.

A key part, as well, in our riding is the Grey Roots Museum. That museum is a wealth of knowledge to educate people, which this motion speaks to the importance of. I really think that the root advantage of bringing this motion forward is to make sure we never forget, and at the same time that we educate.

I have travelled the world in my military career. I have been in countries all over the world, some of the worst parts of the world. I have always said that I have yet to meet a single person in any other nation around the world who, at that grassroots level, is any different from the average Canadian. Most people just want to live in peace and have their children grow up healthy, well-fed and with an opportunity to have more.

I have served with people of all descents and backgrounds. The best friend I made at basic training out in Chilliwack, unfortunately I can't remember his last name, was Derek. He and I were sort of like two peas in a pod. He was from Montreal. We did basic training together in Chilliwack and sort of tried to stay out of trouble. Unfortunately, he did not make it through basic training, and I have not seen him since. I got to the Royal Military College, and made friends like Scott Morrow and Austin Douglas. I served with Austin in The Royal Canadian Regiment as well. There was Master Corporal Raymond Farmer, who I will never forget. I do not know where Raymond is now, but he was sort of like my close protection bodyguard on my first tour in Afghanistan. All these gentlemen are people of Black descent.

I cannot imagine living in any country in the world other than Canada. We are so fortunate, and I am so glad that we played such an instrumental part in helping slaves escape from the United States back in the 1800s. I am so glad to see this motion being brought forward by the member for Richmond Hill. It is a way to recognize the contributions the people of African descent have made to this great country. It is a way to educate and to recognize what they are still contributing to this day. This is the Canada I want my daughter to grow up and be proud of.

• (1800)

[Translation]

Ms. Marie-Hélène Gaudreau (Laurentides—Labelle, BQ): Mr. Speaker, I would like to begin by thanking my hon. colleague for his speech and the friendship that is clear to all of us today.

I am going to talk about Motion No. 36 to designate emancipation day. My colleague talked about education, so I am going to take this opportunity to revisit history, because knowing where we come from is the best way to know where we are going. Let me share a few historical facts.

According to the *Canadian Encyclopedia*, the abolition of slavery in the British Empire began with the Act for the Abolition of Slavery throughout the British colonies for promoting the industry of manumitted slaves; and for compensating persons hitherto entitled to the service of such slaves, also known as the Slavery Abolition Act. The member mentioned it earlier. The act received royal assent on August 28, 1833, and took effect in August 1834.

The act abolished slavery in most British colonies, freeing the 800,000 African slaves in the Caribbean, South Africa and Canada. However, in the eastern colonies of Lower Canada, now Quebec, in Nova Scotia and in New Brunswick, abolitionist efforts remained unsuccessful.

In 1793, for instance, Pierre-Louis Panet introduced a bill to the National Assembly to abolish enslavement in Lower Canada, but the bill languished over several sessions and never came to a vote. Instead, individual legal challenges first raised in the late 1700s undermined the institution of enslavement in these areas.

One important case arose in February 1798, when an enslaved woman named Charlotte was arrested in Montreal and refused to return to her mistress. She was brought before James Monk, a justice of the King's Bench with abolitionist sympathies, who released her on a technicality.

According to British law, enslaved persons could be detained only in houses of corrections, not common jails. Since no houses of correction existed in Montreal, Charlotte could not be detained there. Charlotte and another enslaved woman named Judith were accordingly freed that winter. Justice Monk stated in his ruling that he would apply this interpretation of the law to subsequent cases.

New France was not free from slavery. Thanks to the trail-blazing, if dated, work of Marcel Trudel, we know a fair amount about slavery in Quebec. He listed a total of 4,185 slaves for a period ranging from the 17th century to 1834. Of that number, three-quarters were indigenous slaves. The slave trade took on different proportions. The proportion of indigenous slaves, the Panis, was

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greater than that of African slaves. In 1759—there are a lot of dates, but it is important to remember them—records listed 1,100 Black slaves in Canada toward the end of the Seven Years' War. That is terrible.

• (1805)

Obviously, we cannot talk about slavery without talking about the young Marie-Josèphe-Angélique, who was born in 1710 and hanged in 1734. In their book *Elles ont fait l'Amérique*, anthropologists Serge Bouchard and Marie-Christine Lévesque helped make many people aware of Marie-Josèphe-Angélique's story, which is the first documented case of slave resistance in the history of Quebec and Canada.

Obviously, in 2020, we recognize that slavery is an extremely unfair practice. Unfortunately that was not always the case over the course of history. It was not until the 19th century that slavery was slowly abolished.

Although the Bloc Québécois is in favour of this motion, it might have been a good idea to have the motion place more emphasis on the agency of slaves in the slavery abolition process. What does agency mean? It is the ability of historical actors, particularly those who were oppressed, to make their mark on the world, transform and influence it for the better, rather than simply being subject to it.

In fact, the motion seems to give the British Parliament an all-powerful role in the abolition of slavery, as if it were a divine gift that British parliamentarians bestowed upon slaves in the four corners of the empire. The historical reality is much more complex. We need to remember the context in which slavery was abolished. The emancipation proclamation was only the culmination of a historic process that slaves were an integral part of.

Our version of history so far has credited liberal abolitionists alone with putting an end to this unjust system. However, in a fairly recent book called *Slave No More: Self-Liberation Before Abolitionism in the Americas*, Russian historian Aline Helg describes the slaves' own agency and how they were the architects of their own liberation.

She details, from the very beginning, how slaves in the Americas between 1492 and 1838 engaged in rebellions and emancipation strategies. How were these slaves agents of their own liberation? Through marronage, enfranchisement, military involvement and rebellion. This cannot be forgotten.

This motion is also inspired by the International Decade for People of African Descent, the theme of which is "People of African descent: recognition, justice and development". In recognizing this decade, the House of Commons will put itself at the forefront of the recognition, justice and development of people of African descent as a distinct group whose human rights must be promoted and protected. This needs to be made clear here, in the democratic institutions that belong to all citizens.

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That is why this motion, which recognizes historical facts and builds on this international decade, highlights the contributions made by African descendants to Quebec's and Canada's societies and acknowledges Canada's history of slavery through a national day of commemoration.

The Bloc Québécois will obviously vote in favour of this motion. I want to take a moment to acknowledge our beloved mayor back in my riding of Laurentides—Labelle, who has been in office for 14 years. He is one of just two Black mayors in Quebec's history. I congratulate Michel Adrien for his 14 years—

Mr. Sébastien Lemire: And Ulrick Chérubin.

Ms. Marie-Hélène Gaudreau: Yes, of course, there was also Ulrick Chérubin in Amos, in my hon. colleague's riding.

In closing, Black history is our history.

• (1810)

[English]

Mr. Matthew Green (Hamilton Centre, NDP): Mr. Speaker, I have had the privilege of rising in the House on many occasions, but perhaps none with the deepest privilege with which I rise here today. I shall begin by noting that 10 minutes is not nearly enough to capture the collective lives and times of descendants of the African slave trade.

I want to restate the gratitude that I have for the hon. member for Richmond Hill, who with passion, justice and rightful recognition has reintroduced this critically important motion. He is lifting up the work of the always honourable senator Dr. Wanda Thomas Bernard, who would indeed rank among the most learned and exalted members of Canadians of African descent.

Like many Black and racialized Canadians, I am often asked the question, "Where are you from?" When I share with them that I am Canadian, the next question I am asked is, "But what about your parents?" I tell them I am Canadian, and they ask about my grandparents. I share with them that I am Canadian. My people go back here six generations. In the previous speaker's comments, he inadvertently gave me a shout-out when recognizing the founding families in the settlement that have become Owen Sound. Indeed, I am my ancestors' wildest dreams.

My earliest memories of family would come from our annual trip to Owen Sound to Harrison Park, which is shared by the hon. member from that riding. This would be an extended family picnic and a place where I would be rooted in the celebration of emancipation day. Yes, this commemorates the history that goes back to 1862, before the Confederation of this country.

I am here in the spirit of the Black Moses, Harriet Tubman, who in escaping the wretched and brutal conditions of slavery in the south, risked her life to follow the North Star, to follow the footpaths of the Underground Railroad searching for the promised land. She was an exceptional woman, with a military mind, and a leader of the likes any people would be proud to claim. Indeed, my people followed that North Star from what is likely Maryland today and travelled for days along those backwoods paths.

We have heard here today, and I want to go on the record to correct the record, the framing of slaves. It is true that as a young person I grew up in our education system, and I would have shared that I am the son of runaway slaves. Of course, that is false. The context is very problematic because they were not slaves, they were people who were enslaved.

These were a people who survived the transatlantic slave trade and who found themselves in one of the most wretched conditions of humanity, the deepest evil of the United States of America at that time in those settlements, yet they survived. They were the ones who risked everything in following those footpaths to get to freedom, and they are the ones who will teach us about emancipation today.

Our history books will teach us that we were given freedom. I will share, as taught by the Black Moses Harriet Tubman, her grave warnings. She said, "If you hear the dogs, keep going. If you see the torches in the woods, keep going. If there's [someone] shouting after you, keep going. Do not ever stop. Keep going. If you want a taste of freedom, keep going."

The history books hide a painful truth in our collective class. They are things that I had to find for myself. The member is quite right that we have to change our education system. There was a book by Daniel Hill Sr., from which I learned that I am actually the descendant of freedom seekers. I would be remiss if I did not mention that in the motion the historical truths of Canada laid out very clearly in that British Parliament abolished slavery in the British Empire on August 1, 1834.

• (1815)

It also acknowledges and recognizes that slavery existed in British North America prior to abolition in 1834, which is a clear acknowledgement of the British Crown's active participation and, indeed, profiteering from the human trafficking and enslavement of stolen African diaspora.

Where is the acknowledgement and, indeed, the solemn apology to all descendants of African slavery from the Liberal government?

We have heard before, in section (c) of the motion, about abolitionists and others who struggled, and I will share that it is true in that time that men of faith, people of faith, Quakers and others risked everything to give refuge to people seeking freedom. My people were the first refugees of these lands. It begs the question, "What are you willing to sacrifice in order that others may be free, free from discrimination, free from police brutality, free from the systemic barriers?"

The government is facing a class action lawsuit from the public sector today. We have to contextualize exactly what emancipation means. I think a lot about the refugees seeking safety at Roxham Road.

When the Government of Canada announces the United Nations International Decade for People of African Descent to highlight important contributions and to provide a platform for confronting anti-Black racism, this would be a perfect time for the Prime Minister to make clear that recognition and acknowledgement in the form of reparations for the displacement of historical Black settlements, from Africville to Hogan's Alley and every settlement in between.

It is true that we get together in the deep beauty of my people to celebrate our freedom and our liberation and the collective struggles of our ancestors. I will close by calling on the work of the present-day abolitionists of our time, those who rallied around the Black lives matter movement in this country, and whose members, the founding members, our present-day abolitionists, wrote in their seminal work, the book *Until We are Free* by Black Lives Matter Toronto, and who dedicated their life's work, and for whom I dedicate mine, to a true and everlasting emancipation, "For our Ancestors, whose struggle we continue until we are free. For our Elders, whose fight we continue until we are free", and I will add, for the future generations that continue the struggle for our collective liberation and our emancipation, for our children and our children's children, until we are free.

Ms. Marci Ien (Toronto Centre, Lib.): Mr. Speaker, I rise today to speak about Motion No. 36, which seeks to designate August 1 of every year as emancipation day in Canada.

Motion No. 36 acknowledges that the British Parliament abolished slavery in the British Empire as of August 1, 1834, and that slavery existed in British North America prior to its abolition. In fact, Olivier Le Jeune was recorded as the first enslaved African to live in New France in the 1600s. Olivier's birth name is not known as he was taken from Africa as a young child and eventually given the last name of the priest who purchased him.

The Slavery Abolition Act ended slavery in the British Empire on August 1, 1834, and thus also in Canada. However, the first colony in the British Empire to have anti-slavery legislation was Upper Canada, now Ontario. Unfortunately, the act against slavery of 1793 did not free a single slave. It was superseded by the Slavery Abolition Act.

To better understand the anti-slavery legislation of 1793, we have to remember Chloe Cooley. Chloe was a young Black woman who was enslaved in Fort Erie in the late 1700s. Her owner forced her onto a boat across the Niagara River into the United States to sell her. This incident is believed to have led to the passage of the legislation of 1793 in Upper Canada that prevented enslaved people from being imported into the province.

Although the Slavery Abolition Act stopped slavery in the British colonies, it did not end in the American southern states. Up to 40,000 African American slaves tried to escape from the American south to freedom in the northern states or to Canada.

The Underground Railroad appeared in this context. It was not a railroad at all, but a complex clandestine network of people, including Blacks, fellow enslaved persons, white and indigenous sympathizers, Quakers, Methodists, Baptists, farmers, Americans and Canadians alike, who organized safe houses that helped enslaved men, women and children in southern plantations reach freedom in the north.

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Between 1850 and 1860 alone, up to 20,000 slaves reached Upper Canada. It became the main terminus of the Underground Railroad. Black Canadians helped build strong communities and contributed to the development of the provinces where they settled. Some lived in all-Black settlements such as Elgin, Buxton, Queen's Bush and the Dawn settlement near Dresden, Ontario, as well as Birchtown and Africville in Nova Scotia.

They cultivated the land, built homes and raised families. Black people established religious, educational, social and cultural institutions, political groups and community building organizations. Two newspapers were also founded: *The Voice of the Fugitive* by Mary and Henry Bibb and Mary Ann Shadd Cary's *The Provincial Freeman*, making Cary the first Black woman in North America to edit a newspaper.

Through the ages, Black Canadians encountered various forms of discrimination. They were often relegated to certain jobs and denied the right to live in certain places due to their race. Parents were forced to send their children to segregated schools that existed in parts of Ontario and Nova Scotia. This is what historians call "residential segregation".

People of African descent have shaped Canada's heritage and identity since the arrival of Mathieu Da Costa, a navigator and interpreter whose presence in Canada dates back to the early 1600s. However, the vital role of people of African descent has not always been viewed as such.

Inspired by these stories of courage and resilience, Black Canadians of a more recent past have made tremendous contributions to our society. Let me recall some notable figures such as Alberta's Violet King, Canada's first Black female lawyer; Gloria Baylis, who in 1965 won the first-ever case of employment-related racial discrimination in Canada and founded the Baylis Medical Company; Chatham, Ontario's Fergie Jenkins, one of the most talented pitchers to ever play in Major League Baseball, winning the Cy Young Award in 1971 and becoming the first Canadian inducted into the National Baseball Hall of Fame in Cooperstown, New York, in 1991; and Édouard Anglade, the first Black and for several years the only Black officer on the police force in Montreal.

• (1820)

On a very personal note, growing up in Toronto and studying in history class in high school, I did not see my history. The history books did not include me. It was almost as if Black history was erased. All these years later, decades later, my 16-year-old daughter still does not have what I wanted. She does not see herself in the books that she studies.

I say to members today, Black history is Canadian history.

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● (1825)

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, what a pleasure it is to speak to this important motion that my friend and colleague has introduced in the House. I do not think I can compete with the eloquent speeches that have been given in the last hour, because they came from the heart and have very strong, passionate words, but I do have a few thoughts I would like to share.

The New Democratic member referenced the generations. I believe he said eight generations is the extent of his family roots. This triggered something in my memory. Many years ago, probably about 20 to 25, I was at the Victoria Hotel. There was a Black lady standing beside me, and a Caucasian individual walked up between us. He posed her a question: "How long have you been in Canada for?" As much as he meant it to be an innocent comment, I suspect that if she had been of a Caucasian background, that question would never have been asked.

I do not believe we have done well regarding education and cross-cultural awareness. That is why I put to my good friend the importance of it. Education is critically important to advance, and it goes beyond our classrooms. We can talk about our workforces and how we can incorporate it into our communities. A number of years ago, the Manitoba Intercultural Council came up with a recommendation that said the way people should deal with issues like this is through cross-cultural education. I am not too sure if the council exists today.

I think there have been some very interesting stories over the years that Hollywood has amplified. I am very touched when I watch some of the videos that I have acquired. For example, I have a copy of the *Roots* series. To watch it sets off all sorts of emotions, but I am mostly angry because it is hard to imagine how society could treat people in such a fashion.

The way the character William Wilberforce was portrayed in the show *Amazing Grace*, which is about the abolishment of slavery, and the impact the British Commonwealth had are so significant to the debate we are having today. However, as my colleague who spoke just before me alluded to regarding her daughter, for young people who are in school today, this major, important aspect of Canadian heritage has been completely overlooked and is not getting the attention it deserves.

I am very proud of the general attitudes that are brought forward from parliamentarians when we talk, for example, of our Black caucus and the extending of hands to try to get more involvement on the issue of systemic racism, which is in fact present. It is very real and it is tangible. It hurts a great deal of Canadians in all regions of our country.

The objective of this motion is very admirable and needs to be put into place. I suspect that when it does come time for others to contribute to the debate and for the ultimate vote on the motion, it will pass through the House, as I believe it is long overdue.

● (1830)

I anticipate that it will be a significant step, but we recognize the need for us to do so much more. I believe all members are committed to doing this in whatever capacity they can, whether they are in government or opposition. Whatever role they play in the House, there is a great expectation—

The Deputy Speaker: We will leave it there for now, but the hon. member for Winnipeg North will have four and a half minutes remaining in his time when the House next gets back to debate on the question.

The time provided for consideration of this item of Private Members' Business has now expired, and the order is dropped to the bottom of the order of precedence on the Order Paper.

It being 6:30 p.m., pursuant to Standing Order 37(7), the House will now proceed to the consideration of Bill C-230 under Private Members' Business.

* * *

NATIONAL STRATEGY TO REDRESS ENVIRONMENTAL RACISM ACT

Ms. Lenore Zann (Cumberland—Colchester, Lib.), seconded by the member for Saanich—Gulf Islands, moved that Bill C-230, An Act respecting the development of a national strategy to redress environmental racism be read the second time and referred to a committee.

She said: Mr. Speaker, "The land is our Mother, so when we lose value for the land...people lose value for the women." Thus says Vanessa Gray of Aamjiwnaang first nation in Ontario, and I agree. It is also my firm belief that, like systemic racism, environmental racism is something that has been ignored for far too many years. The time has come for us to act to redress the problems of the past and make sure they do not continue. Surely it should be enshrined as a human right for all Canadians to have clean air, water and earth.

I first became aware of the issue of environmental racism five years ago when I first met Dr. Ingrid Waldron, a professor in the School of Nursing at Dalhousie University, at a coffee shop in Halifax near the provincial legislature where I worked as an MLA. At that time, Dr. Waldron explained what her research and data gathering was proving about the reality of environmental racism in Nova Scotia.

I suggested that creating a legislative bill to address the issue would be of help at that point in time in bringing it to public awareness and to the floor of government in Nova Scotia. Dr. Waldron and I worked together for several weeks on my very first private member's bill, Bill No. 111, the environmental racism prevention act, which I introduced in Province House in 2015.

Later on, Dr. Waldron wrote a book entitled *There's Something in the Water*, which highlights environmental racism in Black and indigenous communities across Nova Scotia. She recently partnered with Nova Scotian actor Elliot Page to create the 2019 documentary based on that book.

Upon my arrival in Ottawa as an MP a year ago, my first personal order of business was to introduce a similar bill, but this time as a national strategy, in order to address environmental racism across Canada. The scope of Bill C-230 is therefore broader and more comprehensive than my original provincial bill.

Bill C-230 would collect data, including socio-economic circumstances, physical and mental effects of communities affected by environmental racism across this land. These effects are wide-ranging, from skin rashes and upset stomachs to more serious ailments, such as respiratory illness, including asthma; cardiovascular disease; reproductive morbidity, including preterm births and babies born with Down syndrome; as well as cancers that disproportionately impact women. There is evidence that many chronic diseases in indigenous communities, for instance, are not primarily due to genetics or internal factors, but instead, to external factors, such as what is in the air, in the water and in our environment.

I would like to personally thank the member for Saanich—Gulf Islands at this time for seconding Bill C-230. I suggest this is an example of what Canadians truly want to see in their government, especially in these dangerous times, which is parliamentarians working together.

I would like to thank Dr. David Suzuki and the David Suzuki Foundation, the Blue Dot movement and The ENRICH Project for their endorsement for and support of this vital bill. I would also like to acknowledge and thank Dr. Ingrid Waldron for her passion, dedication, research and assiduous study, as well as for sharing her notes with me this evening, because environmental racism and its effects on racialized communities need to be heard by everybody.

As MP for Cumberland—Colchester, I would like to explain what environmental racism is. It refers to the disproportionate location and greater exposure of indigenous, Black and other racialized communities to polluting industries and other environmental hazards. These toxic burdens have been linked to high rates of cancer, as I have said, and other health problems in these communities.

From the decision approximately 60 years ago to off-load pulp mill effluent into Pictou Landing first nation's once pristine boat harbour and toxic landfills and dumps placed in the African Nova Scotian communities of Shelburne, Lincolnville and Africville to mercury contamination in Grassy Narrows First Nation, petrochemical facilities in the chemical valley of Ontario and in British Columbia, the legacy of environmental racism can no longer be ignored.

• (1835)

Bill C-230 is asking the Minister of Environment and Climate Change to develop a strategy that must include measures to:

- (a) examine the link between race, socio-economic status and environmental risk;
- (b) collect information and statistics relating to the location of environmental hazards;
- (c) collect information and statistics relating to negative health outcomes in communities that have been affected by environmental racism;
- (d) assess the administration and enforcement of environmental laws in each province; and
- (e) address environmental racism including in relation to
 - (i) possible amendments to federal laws, policies and programs,

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- (ii) the involvement of community groups in environmental policy-making,
- (iii) compensation for individuals or communities,
- (iv) ongoing funding for affected communities, and
- (v) access of affected communities to clean air and water.

I would contend that indigenous and Black women have been building grassroots environmental and social justice movements for decades to challenge the legal, political and corporate agendas that sanction and enable environmental racism and other forms of colonial violence in their communities. Colonial gendered violence continues today and includes the crisis of missing and murdered indigenous women, the displacement of indigenous people from their lands by corporate resource-extraction projects, anti-Black and anti-indigenous police violence and other forms of state-sanctioned violence that make it difficult for indigenous and Black peoples and women to meet their basic needs with respect to employment, income, health care and other resources.

Colonization and genocide are tied to the intersections of indigenous lands and bodies. Women experience violence because they are the ones who are responsible for taking care of the land and holding it for future generations. Therefore, gendered violence that harms women specifically, also harms nations which makes it easier to take possession of the land.

For indigenous women specifically, production and reproduction, land and life, resistance and survival are all intimately connected. There is no separation. Therefore, the indigenous role in fighting against environmental racism by defending their land and territory and protecting their water are acts of resistance against gendered oppression.

What is environmental racism exactly? How do we define it?

Environmental racism is racial discrimination in the disproportionate location and greater exposure of indigenous and racialized communities to contamination and pollution from polluting industries and other environmentally hazardous activities, as I said, but also in the lack of political power these communities have for resisting the placement of industrial polluters in their communities; in the implementation of policies that sanction the harmful and, in many cases, life-threatening presence of poisons in these communities; in the disproportionate negative impacts of environmental policies that result in differential rates of clean up of environmental contaminants in these communities; and in the history of excluding indigenous and racialized communities from mainstream environmental groups, decision-making boards, commissions and regulatory bodies and in the feminist movement.

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Regarding the health effects of environmental racism in Canada, the health risks associated with that include, as I have said, all of these various different types of serious illnesses. Studies provide evidence that health effects of environmental racism are both gendered and racialized and impact indigenous women in specific ways, most notably the impacts on reproductive health. One of the most significant ways that environmental racism impacts indigenous women specifically is through the detrimental health effects of toxic contaminants that include high levels of toxins in breast milk, placenta, placenta cord blood, blood serum and body fat as well as infertility, miscarriages, premature births, premature menopause, reproductive system cancers and an inability to produce healthy children due to compromised endocrine and immune systems while in utero.

This bill, Bill C-230, is important. Why is it important? It would play a significant role in addressing the legacy of environmental racism in Canada and ensure that these communities would have access to clean air and water, to which all Canadians have a right.

• (1840)

It would also help address environmental health inequities in indigenous and Black communities that are outcomes of these communities' proximity to environmental contamination and pollution.

It is up to those with power, and not the people impacted by environmental racism, to address the problem. Those who have the most influence and the strongest voices need to be part of the solution. It is important that all communities have the power to control their environment. Currently, indigenous, Black and other racialized communities, non-white communities, do not have that power. When they do not have a say in what happens in their communities, we all suffer.

Bill C-230 addresses this imbalance of power and benefits everyone. It is good for all of us. It is good for Canada. It would provide an opportunity for the communities most affected by environmental racism to be involved in environmental policy-making.

According to a Lincolnville resident in Nova Scotia, who is mentioned in Dr. Waldron's book *There's Something in the Water*, community members have experienced worsening health since the first generation landfill was placed in their community in 1974, including increased rates of cancer and diabetes.

This person also says:

"If you look at the health of the community prior to 1974 before the landfill site was located in our community, our community seemed to be healthier. From 1974 on until the present day, we noticed our people's health seems to be going downhill. Our people seem to be passing on at a younger age. They are contracting different types of cancer that we never heard of prior to 1974. Our stomach cancer seems to be on the rise.... Our people end up with tumours in their body. And, we're at a loss of, you know, of what's causing it. The Municipality says that there's no way that the landfill site is affecting us, but if the landfill site located in other areas is having an impact on people's health, then shouldn't the landfill site located next to our community be having an impact on our health too?"

Perhaps no other African-Canadian community has served as a more classic example and symbol of both gentrification and environmental racism than Africville: the former Black community on the shores of the Bedford Basin.

By 1965, the City of Halifax had embarked on an urban renewal campaign resulting in the forcible displacement of Africville's residents, resulting in the area becoming host to a number of environmental and social hazards, such as a fertilizer plant, a slaughterhouse, a tar factory, a stone and coal crushing plant, a cotton factory, a prison, three systems of railway tracks and an open dump.

I ask that all members of the House support this bill. Let us be a first. Let us make this something we can all be proud of, and let us do this for the people of Canada.

• (1845)

The Deputy Speaker: I see there is a lot of interest in questions and comments. I am going to ask hon. members to keep their interventions to no more than 45 seconds and the same for the hon. member who is responding.

The hon. member for Central Okanagan—Similkameen—Nicola.

Mr. Dan Albas (Central Okanagan—Similkameen—Nicola, CPC): Mr. Speaker, I appreciate that the member has brought a bill to this place and a debate that she is very passionate about. In this bill, she is actually tasking the Minister of Environment, but many of the issues she has talked about are in regard to indigenous reconciliation.

Why only task the Minister of Environment? Why does the member believe that the minister may criticize many of the failures the government has had in reconciliation? Many of these are also historic wrongs dating back to the last century. I would like to hear what the member has to say in regard to that.

Ms. Lenore Zann: Mr. Speaker, when I first started down this road and researching it, I thought of it as a provincial issue. A lot of things are provincial and municipal like dumps, waste sites, toxic landfills and things like that. As I started to look into it more, I started to notice that it is stretched right across Canada. In fact, there are many corporate polluters, which is part of the reason why many indigenous communities do not have clean drinking water today, why children have rashes and why they have all kinds of illnesses. That is why our government is now tasked with cleaning that up. I think it will stretch across all kinds of departments, but it lands at the department of environment to begin with—

The Deputy Speaker: Questions and comments, the hon. member for Victoria.

Ms. Laurel Collins (Victoria, NDP): Mr. Speaker, I want to thank the member for Cumberland—Colchester for bringing forward this really important bill. I applaud her work on it.

I am curious about reparations. This bill speaks about the impacts on indigenous communities and on racialized communities. We were just debating a bill on Emancipation Day. The conversation around how to compensate communities that have been impacted is an important one.

I am curious how the member sees her bill fitting into a conversation around reparations.

Ms. Lenore Zann: Mr. Speaker, I know the member opposite has also studied environmental racism and actually taught about it in university.

This is an important part of this bill. We are talking about this now in Nova Scotia and in the Black community. It is a very big deal here. The dialogue has just started.

This bill is meant to enable people to make references and tell the government what they think we should do. I would hope that the government would then follow suit, take note of that and follow up with it. It is very important.

Ms. Elizabeth May (Saanich—Gulf Islands, GP): Mr. Speaker, I want to thank the hon. member for Cumberland—Colchester for bringing forward Bill C-230. It is an honour for me to second it.

My home was originally in Nova Scotia, and my first experience in understanding environmental racism was the horror of the Sydney tar ponds in industrial Cape Breton. They are now sort of cleaned up. They are at least buried. I am flagging that what was called the tar ponds was originally an estuary of the Mi'kmaq fishing grounds. The Mi'kmaq were forced off that land and put in Membertou in order to build a steel mill and coke oven, and the only African, Black, community in Cape Breton was between the coke ovens and the steel mill. The population had huge levels of cancer. It was the biggest toxic waste site in Canada.

I wish we had had the bill here in place then. I would ask the hon. member if she has any reflections on that, and thank her again.

• (1850)

Ms. Lenore Zann: Mr. Speaker, I thank the hon. member for seconding my bill.

That is a perfect example, and so was Boat Harbour, which was a beautiful, pristine lagoon where first nations communities came to picnic for thousands of years. I went there and saw the degradation, and smelled the stink. I saw what it was doing to the people. Many of the people who I stood in a barricade against the mill with at that time are no longer here. They died of cancer.

It is a bill whose time has come. I think it is up to us to make sure that this happens.

The Deputy Speaker: We are out of time, but I am going to take some liberties here and take one more question.

Mr. Jaime Battiste (Sydney—Victoria, Lib.): Mr. Speaker, I would like to start off by thanking the hon. member for her comments, and for her strong leadership and commitment to social justice on this file.

As a Mi'kmaq from Nova Scotia, I learned numerous times during my research where indigenous people were displaced from their traditional lands, often close to their resources in lucrative areas, and centralized onto small reserves in areas that led them to be vulnerable and open to exploitation.

My question is as follows. How does the member see her bill being able to create the important awareness around these injustices?

Private Members' Business

Does she feel education is an important part of this bill, moving forward?

Ms. Lenore Zann: Mr. Speaker, my hon. colleague has done a lot with treaty education in Nova Scotia, and I believe that is something we need to roll out right across this country.

People do not seem to understand that the first nations people were here for 13,000 years before we ever got here. Sometimes when I hear people say, "Go back to where you came from: pick up your tents and go back to where you came from," it just breaks my heart. I feel that this kind of bill could start the dialogue and open people's eyes and hearts to what has been going on for far too long. I believe it is up to us to fix it.

Mr. Dan Albas (Central Okanagan—Similkameen—Nicola, CPC): Mr. Speaker, it is always a pleasure to rise in this place to participate, especially in Private Members' Business. I am certain that I am not alone in my appreciation for the passion and ideas from colleagues of all parties in this place.

Generally speaking, we either oppose a private member's bill or we support it. On rare occasions, from my perspective at least, a private member's bill may come along that I will oppose despite being supportive of the principle being raised. This is one of those rare occasions for me, and I would like to share with this place my thoughts on the bill.

First, I would like to commend and recognize the member for Cumberland—Colchester for raising this very important concern. The member refers to this concern as "environmental racism", and ultimately proposes to create a national strategy to promote efforts across this great country to redress the harms caused by environmental racism.

What does the member for Cumberland—Colchester define as "environmental racism"? One part of the bills reads as follows:

Whereas the establishing of environmentally hazardous sites, including landfills and polluting industries, in areas inhabited primarily by members of those communities could be considered a form of racial discrimination;

[*Translation*]

I happen to have a few local examples that directly reflect this problem. I will share them with the House to illustrate why I said in my introduction that I support the principle of this bill.

My first local example is Appleton Waste Services, a company that was paid by many Penticton and area residents to pick up and collect garbage and then transport it and dispose of it at the local landfill. The company did not pay its bills to the operator of the landfill, which was another local government, the Regional District of Okanagan Similkameen, or RDOS, as we call it in the region. Because the bills were unpaid, the RDOS had to suspend service to Appleton Waste.

Private Members' Business

Unfortunately, this did not stop the company from continuing to pick up waste and charge their customers for it. Instead, it made a deal that ultimately resulted in 5,000 tonnes of waste being dumped on Penticton Indian Band lands. The arrangement was that this was going to be a transfer station before the waste was hauled off to somewhere else.

How did it end? Well, the company disappeared, but a massive pile of waste became a serious problem for members of the Penticton Indian Band to deal with, and it was not even their own waste. It came from the citizens of the city of Penticton.

● (1855)

[*English*]

In other words, the Penticton Indian Band ended up with a landfill, and it was, as the bill says,

in areas inhabited primarily by members of those communities.

The bill states this could be considered a form of racial discrimination.

This is the first example that, in my view, speaks to the challenge that is referred to in the bill. I will provide a second local example.

Many will know the Okanagan region I come from is famous for its excellent wines, but many years ago, it was for fruit growing. As a result, there is a significant fruit industry infrastructure in many small communities, much of it aging.

In Naramata, there was an old fruit-packing warehouse that was scheduled for demolition and removal. Ultimately, the successful salvage bidder hauled the demolished wood waste away. Where did it end up? It ended up on Penticton Indian Band land, where ultimately it was burned.

[*Translation*]

In that case, charges were laid against the parties involved under provincial environmental legislation. This case eventually made its way through the courts. The defendants argued that these activities took place on the Penticton Indian Reserve, which does not come under provincial jurisdiction on such environmental matters.

They argued that they had complied with all the requirements of the local government, in this case the Penticton Indian Band.

In the end, an application was made challenging the charges on constitutional grounds. The judge ended up handing down a not guilty verdict and declaring that the application was moot, as there would be no further legal proceedings.

After listening to me explain these two Canadian examples, members will probably understand why I support the challenges addressed in this bill. However, I will now explain why I will be opposing this bill, even though I recognize these challenges.

[*English*]

In both of these situations there was one common denominator, the Penticton Indian Band lands that were adversely environmentally impacted by these situations were what is called “locatee lands”. As many are unaware, on some first nations not all land is band land. Some lands are locatee lands. These lands are very similar to privately held land where locatees can make land use decisions in-

dependent of locally elected band chiefs and their respective councils. In both of these cases, local non-indigenous business owners made financial deals with band members who control these locatee lands.

We all know that the federal government, more specifically Indigenous Services Canada, is supposed to safeguard the interests of aboriginal communities to prevent these types of situations from occurring. Here in Ottawa, we seldom hear how some of these situations are actually caused. This also raises a question that has to be asked. Is it the role of Indigenous Services Canada to tell a locatee family what they can or what they cannot do on their lands, or is that up to a locally elected band chief and council?

● (1900)

[*Translation*]

I have another question. Was the member approached by a local first nation in her riding to introduce this bill, or is this another example of the “Ottawa knows best” attitude, where Ottawa presents another series of studies to come up with a one-size-fits-all strategy, as it has been doing for decades? I do not know the answer to this question.

I see two challenges in this bill. As I mentioned, I would like to be able to support the bill. However, then I would be voting for something that could impact a large number of first nations communities in my region, without having heard how they feel about this bill. I simply cannot in good conscience do that.

I believe it is time to put an end to the era when decisions were made in Ottawa without first sitting down with the chiefs and local councillors to hear from them directly. Environmental factors clearly have repercussions for first nations. Grassy Narrows comes to mind, as well as the Prime Minister's reference to these issues, which was to thank them for their donation.

It is important to study those impacts, but the use of the term “racism” implies that Canadians are racist and responsible for these actions and does not take the Liberal government's failure over the long term into account.

[*English*]

Indeed, just this week the Liberal government confirmed it would not meet its clean drinking water promise, another failure. Canadians are warm and caring people and would support finding ways to better ensure everyone is healthy and thriving. What is not right is implying the fault lies at the feet of a racist country.

Canada is not a racist country and to imply that is just disgraceful. Now, I appreciate that the member for Cumberland—Colchester is well intentioned. However, I have many aboriginal communities in my riding that I must be accountable to. It is for that reason that I cannot support this bill. I do thank the member for raising this concern.

I also would like to thank the members in this place for taking the time to hear my comments today. It is a pleasure serving on behalf of the communities in my region.

[Translation]

Ms. Monique Pauzé (Repentigny, BQ): Mr. Speaker, before getting into the Bloc Québécois's reasons for not supporting this bill, I want to emphasize a few points.

First, we recognize that problems related to geographical disparities affect people's standard of living and their access to a quality environment. Second, we are concerned about the fact that newcomers and indigenous communities are more directly affected by these disparities. Last, we fully support government measures to rectify inequalities experienced by the entire population vis-à-vis the environment.

However, Bill C-230's provisions create a lot of problems, starting with a direct attack on the environmental sovereignty of Quebec and the provinces. It will therefore come as no surprise that the Bloc Québécois will oppose anything that undermines Quebec legislation and its jurisdiction. Also, it is not at all clear that the federal government would have the constitutional authority to implement the measures proposed in this bill.

That is not all. As my colleague just outlined, there is no definition. As we understand it, there is no definition of environmental racism. When a new concept is introduced into a law, especially when it comes from a very specific theory, it must be clearly defined. In society and in academia, the meaning of concepts may change over time, but the meaning within the law must always be clear, known and recognized.

For instance, Bill C-230 makes extensive use of the word "race". We understand the hon. member's anti-racist and anti-discriminatory intent, and we are not in any way questioning that intent. However, we do have some concerns. The sociological construction of race from such a perspective is not a process on which there is scientific or social consensus.

This concept, yet another one that comes to us from the United States, is based on the analysis of a relationship between the social, that is, the classes, gender and race, and nature. Some folks might remember the film *Erin Brockovich*. It was about a woman fighting an industry, but she was talking about financial precariousness. Today her struggle continues in Greece, but she is still talking about poverty.

Ingrid Waldron, a professor and author who has high hopes for Bill C-230, looks at the real and important issue of environmental discrimination through the lens of race and colour. I do not want to contradict Dr. Waldron, but we must recognize that environmental injustice, which disproportionately affects minority communities, is more in line with a fundamentally anti-capitalist ideology.

Private Members' Business

Furthermore, in her research she addresses the conditions that fuel environmental racism:

The combination of sociopolitical factors that enables environmental racism include poverty, lack of political power and representation, lack of protection and enforcement, and neoliberal policy reform.

She does recognize that there are many vulnerability factors. Why talk about racism, then?

The term "environmental racism" is politically and theoretically charged. If we are to have an open debate, we must not be already attached to restrictive theoretical premises influenced by sociological approaches that are firmly rooted in activism. As my colleagues know, I was a teacher and a union president. I am well versed in activism. I will be the first to say that it is important. However, activism must not be the motivation for introducing a bill in Parliament.

Dr. Waldron cites the inequalities between minority languages, including indigenous languages, of course, and the majority language of English as one of the factors contributing to the environmental burden:

While some provinces and territories have "environmental bills of rights" and legal frameworks for addressing environmental rights, gaps remain in areas related to federal jurisdiction.

Here we are. There certainly are gaps.

● (1905)

Last week, I spoke to Bill C-225 introduced by my colleague from Jonquière. The public engagement I was referring to and the social movements that lead to political battles have the desired impact on government action. These battles are often quite distinct from one another depending on the realities experienced.

However, the legislator faces an entirely different challenge. The legislator's responsibility is to make laws that serve justice, of course, but that must apply to all citizens. A good policy is a universal policy. It serves the common good and applies to the entire population. Moreover, universal public policies also end up dismantling inequality structures and discriminatory practices. Choosing the parameter or the lens of race to look at an intersectional phenomenon such as environmental discrimination seems inappropriate in a legislative context.

Quebec's Commission des droits de la personne et de la jeunesse has ruled on the matter as follows:

The idea that socio-economic, cultural and political differences between groups of individuals can be based entirely or in part on biological and genetic disparities has been widely rejected by most researchers in the social sciences.

The commission added that, in its view, the relationship between the social sciences and the notion of race is a dangerous one.

Private Members' Business

Canada needs to do some soul-searching, given the reality of the work described by Dr. Waldron, if only with respect to indigenous peoples and the unacceptable conditions that exist in far too many communities across Canada.

It is hard, very hard in fact, to explain how Bill C-230 can include a provision that puts “the administration and enforcement of environmental laws in each province” back into the hands of the federal government, when we have clear examples of the federal government demonstrating its indifference to the legislative mechanisms that are already in place in other administrations. That once again brings me back to Bill C-225, which we debated last week, and to the sad reality of the undue precedence federal legislation takes over environmental concerns and provincial laws.

Canadian laws are much more permissive than Quebec's laws when it comes to environmental protection, and yet they take precedence over Quebec's laws. We will not give the federal government another opportunity to have even more precedence over the provinces. It already has too much. Canada needs to examine its priorities when it comes to protecting its population from climate change, pollution-related issues, health impacts and all of the inequality that permeates its environmental action. Yes, the federal government needs to address the gaps that Dr. Waldron referred to.

Like her, I call on members to think about the sad legacy of neo-liberal policies, those that adversely affect the welfare state. We need to be firm in our legislative intentions of looking out for and eliminating discrimination, but we must do so from a perspective of unity, not division. Take, for example, pay equity, gender equality, universal access to life-sustaining resources, such as drinking water in indigenous communities, and access to justice. In short, we must continue to always fight to ensure that we stop the divide from growing.

I want to remind members that the right to live in a healthy environment has been enshrined in a multitude of constitutions and national charters. The member noted it in her introduction. Why could we not consider the same thing in Canada, that is, including the right to a healthy environment alongside other fundamental legal guarantees, regardless of our biology, the community to which we belong, our socio-economic status or where we live?

Would this be another argument for discussing the Constitution? We are ready.

● (1910)

[*English*]

Ms. Laurel Collins (Victoria, NDP): Mr. Speaker, I want to thank, again, the member for Cumberland—Colchester for bringing forward this important issue in the House.

Environmental racism is a huge, but often ignored, problem. In fact, many people are unfamiliar with the concept. As she mentioned, before becoming an MP, I taught a course that focused on environmental racism, and I had my students read the provincial bill that the member for Cumberland—Colchester put forward when she was a New Democrat member in the provincial legislature. It is such an important topic and such an important bill. I was disappointed that it never passed provincially, but I am hopeful that we can move this forward federally.

Across Canada, toxic dumps, polluting projects, risky pipelines, tainted drinking water and the effects of the climate crisis disproportionately hurt indigenous, Black, and racialized communities. Systemic discrimination has been embedded into environmental policy-making, along with the uneven enforcement of regulations and laws, the targeting of indigenous, Black and racialized communities for toxic waste facilities, the official sanctioning of the life-threatening presence of poisons and pollutants, and the exclusion of these communities from the decision-making process.

We also need to think about this in the context of the fact that we export our waste to countries, predominantly in the global south, and it is often racialized communities that are experiencing the impacts of this toxic pollution. I support the bill, and I believe we need to take urgent action on environmental justice. I would also like to see the right to a healthy environment enshrined in law through an environmental bill of rights.

Environmental racism in Canada is well documented. It is a direct result of the historic and ongoing impacts of colonization. Many have seen the documentary, *There's Something in the Water*, that was referenced. It is based on the report to the Canadian Commission for UNESCO by Dr. Ingrid Waldron. In that documentary, the highlighting of the stories of indigenous and Black communities in Nova Scotia fighting for environmental justice is poignant and powerful.

After visiting Canada in 2019, the UN special rapporteur on human rights and hazardous substances and wastes wrote, “I observed a pervasive trend of inaction of the Canadian Government in the face of existing health threats from decades of historical and current environmental injustices”. A report submitted to the Human Rights Council just this September stated that, “Pollution and exposure to toxic chemicals threaten the right to life, and a life with dignity,” and that, “the invisible violence inflicted by toxics is an insidious burden disproportionately borne by Indigenous peoples in Canada.”

It is so clear that we have a problem of systemic racism that our government is doing little to nothing to address. In the absence of government action or legislation, and often excluded from the leadership of mainstream environmental movements, indigenous and racialized communities and their allies have been demanding environmental justice, demanding their rights and demanding to be heard. They have recently had some success in the halting of environmentally hazardous projects in their communities, through community organizing, petition signing and civil disobedience, but they should not have to fight not to be poisoned by the air they breathe or the water they drink.

Negative health impacts caused by toxic exposures compound other existing inequalities and the challenges that indigenous and other racialized groups face: low income, poverty, underemployment, unemployment, food insecurity and poor access to health care. All of these things, in addition to more direct impacts on human health, impact environmental racism, which destroys natural environments, causing the loss of access to traditional food sources and cultural practices.

This disproportionate exposure to toxic substances also contributes to indigenous and racialized people in Canada being locked into a vicious, intergenerational cycle of poverty. The manifestation of illness due to exposure to heavy metals in turn leads to reduced income and reduced earning potential. Lower incomes and poverty are significant factors for why households from racialized communities are less likely than white households to be able to leave environmentally hazardous communities.

• (1915)

Many of us recognize the names of communities that have been devastated by toxic pollution, but what could have been done to stop it?

In the Chemical Valley, there are 62 large industrial facilities, or about 40% of Canada's petrochemical industry. They operate within a few kilometres of Sarnia and the Aamjiwnaang First Nation, exposing community members to a range of harmful pollutants causing increased rates of asthma, reproductive effects, learning disabilities and cancer.

There is Grassy Narrows, where ongoing mercury poisoning, first discovered in 1970, has had devastating health effects and contaminated the water and the fish the community relied on.

There is Boat Harbour, where an effluent treatment facility for the Northern Pulp mill was built and operated by the provincial government near Pictou Landing First Nation in Nova Scotia. It turned a quiet estuary and fertile hunting and fishing ground into a highly toxic site.

Let us not forget to mention what is maybe the most famous example of environmental racism: Africville.

This is not just about communities that have become infamous sites of toxic pollution. In urban areas across Canada, 25% of the lowest socio-economic status neighbourhoods, which are disproportionately home to racialized people, are within one kilometre of a major polluting industrial facility, compared with just 7% of the wealthiest neighbourhoods, where white families are more likely to live. This results in elevated risks of hospitalization for respiratory and cardiovascular illnesses.

Climate change is taking a disproportionate toll on indigenous peoples. Canada is warming at twice the global rate and northern Canada at about three times the global rate, depleting traditional food sources, driving up the cost of imported alternatives and contributing to a growing problem of food insecurity and related negative health impacts. However, indigenous communities have been fighting back. They have been resilient in the face of this injustice. Canada is not adequately supporting the efforts of indigenous peo-

ples to adapt to the climate crisis and is failing to do its part to reduce greenhouse gas emissions.

The United Nations Declaration on the Rights of Indigenous Peoples needs to be enshrined in law. I am glad to see the government finally tabling a piece of legislation on UNDRIP, but I am concerned its bill is watered down compared with what many indigenous organizers and people across Canada have been fighting for. We need to take into account indigenous science and knowledge in relation to the environment and its protection.

I also want to talk about the right to a healthy environment. The top recommendation of the UN Human Rights Council in September 2020 was for Canada to recognize in law the right to a healthy environment. Over 150 countries have legal obligations to protect the human right to a healthy environment. Although there are environmental bills of rights in Ontario, Quebec, Yukon, the Northwest Territories and Nunavut, as well as provincial and territorial laws that address environmental rights, there is no federal law that explicitly recognizes the right to a healthy environment in Canada. The Canadian Environmental Protection Act, CEPA, does not include any reference to environmental justice, human rights or vulnerable populations. It is 20 years out of date and badly needs updating.

For many years, my New Democrat colleagues have been advocating for an environmental bill of rights. I want to recognize former NDP MP Linda Duncan, who put forward the bill, and my NDP colleague, the member for Winnipeg Centre, who introduced Bill C-232, which calls for the recognition of the right of all Canadians to a safe, clean and healthy environment, grounded in a commitment to upholding the United Nations Declaration on the Rights of Indigenous Peoples. We remain committed to implementing an environmental bill of rights and strengthening CEPA to better protect Canadians from toxic substances.

• (1920)

We broadly support the bill and the need to take urgent action toward environmental justice. We need to address the disproportionate environmental impacts felt by indigenous, Black and racialized communities. The bill stipulates that the strategy must include measures to address environmental racism, including compensation for individuals or communities and ongoing funding for affected communities—

The Deputy Speaker: I am afraid we are out of time.

Resuming debate, the hon. Parliamentary Secretary to the Minister of Environment and Climate Change.

[*Translation*]

Mr. Peter Schiefke (Parliamentary Secretary to the Minister of Environment and Climate Change, Lib.): Mr. Speaker, today I am pleased to be able to speak to Bill C-230, an act respecting the development of a national strategy to redress environmental racism, which was introduced by the member for Cumberland—Colchester.

Adjournment Proceedings

The objective of this bill is to promote efforts across Canada to prevent and redress situations where indigenous and racialized communities must disproportionately contend with pollution, environmental degradation and other forms of environmental damage.

• (1925)

[*English*]

This is a valid concern that resonates particularly in the current context of COVID-19, where impacts of the pandemic have been disproportionately borne by disadvantaged groups. Numerous Statistics Canada studies point to the unequal impacts of the pandemic on various groups. One study, for example, found that immigrants and visible minorities form a larger proportion of front-line workers, including nurse aides, orderlies and patient service associates. This suggests that some groups of Canadians likely have been at a greater risk of exposure to the virus than others.

Additional evidence from Public Health Ontario suggests that people living in ethnically diverse neighbourhoods have been more likely to get sick from the virus than other Canadians. Various analysis has also shown that particular groups, such as indigenous Canadians, are much more vulnerable. This is a signal that we have to take action.

[*Translation*]

This bill comes at a time when many Canadians are giving careful thought to all aspects of racism, including its environmental aspect. The public is very concerned about the systemic racism experienced by Blacks, indigenous people and people of colour as a result of institutional policies and practices.

In the throne speech, our government promised to make a concerted and tangible effort to continue the fight against racism. Significant action has already been taken with the release of Canada's anti-racism strategy for 2019-2022, which includes a \$45-million investment to take immediate steps in combatting racism and discrimination.

[*English*]

Through the anti-racism action program, the Government of Canada is investing \$15 million to fund 85 anti-racism projects that aim to remove systemic barriers faced by racialized communities, religious minorities and indigenous Canadians. We have committed to also furthering transformative change by taking action on online hate; going further on economic empowerment for specific communities; implementing an action plan to increase representation in hiring, appointments and leadership development within the public service; and taking new steps to support the artistic and economic contributions of Black Canadians, culture and heritage.

We know the bill highlights that the efforts to combat systemic racism can intersect with environmental and health concerns. We are taking action in this regard as well.

The Government of Canada is also committed to continuously improving how vulnerable populations are considered in the assessment and management of chemicals and other substances under the Canadian Environmental Protection Act and other federal statutes. Chemicals are an integral part of everyday life, essential to our health and well-being, the economy, our communities and our

homes. While chemical substances may provide benefits, some may also have harmful effects on human health. Some Canadians may be more vulnerable than others to those harmful effects.

Where there is information available, departments consider this both in conducting risk assessments and in designing risk management measures. This includes consideration of individuals living in the vicinity of industrial commercial facilities and first nation and Inuit populations.

To build on our commitments to address the unequal burden of exposure of certain groups to harmful substances, in late 2018 and early 2019, the government undertook consultations on defining vulnerable populations. It was a first step toward a policy framework on vulnerable populations. Feedback received through this consultation process is helping to inform the activities related to chemical assessment and management, including the development of a policy framework to address vulnerable populations under the CEBA.

Also of note, work under the federal air quality program is exploring how to address air pollution in specific areas that are particularly stressed: so-called hot spots. This work is important, as vulnerable populations can be disproportionately impacted by the pollution in those areas

[*Translation*]

The government has committed to tackling systemic racism and we promised to base our approach on the lived experiences of racialized communities and indigenous peoples. It must be a co-operative and collaborative effort.

The first step will be to listen as much as possible to those whose experiences will guide our approach. Bill C-230 is the start of a conversation that we are pleased to have in order to address this important issue.

In closing, I would like to once again thank the member for Cumberland—Colchester for introducing this bill.

The Deputy Speaker: The time provided for the consideration of Private Members' Business has now expired and the order is dropped to the bottom of the order of precedence on the Order Paper.

ADJOURNMENT PROCEEDINGS

A motion to adjourn the House under Standing Order 38 deemed to have been moved.

• (1930)

[English]

HOUSING

Ms. Jenny Kwan (Vancouver East, NDP): Mr. Speaker, the pandemic has only amplified existing vulnerabilities of the homeless and those who are precariously housed.

People continue to face skyrocketing rents, ballooning home prices and demovictions, and have increasingly resorted to living in encampments. Vancouver East continues to have the largest encampment in the country as the cold, wet weather is upon us, and we are now grappling with the highest rate of COVID-19 in the city, as well.

The urgency for action is more acute than ever. The last time the importance of housing was backed up with serious action federally was after the Second World War, when hundreds of thousands of affordable supportive housing units were built by the government to make sure soldiers returning from the war had places to live. Now, veterans who served our country increasingly find themselves without roofs over their heads.

Clearly, the Liberals do not feel the sense of urgency to act that housing providers and housing advocates do. While the Liberals have declared that adequate housing is a basic human right, their actions do not come close to matching their words. It took six months into the pandemic for the Liberals to announce the rapid housing initiative, and their promise will only bring 3,000 new units to address the homelessness crisis. When over 235,000 Canadians experience homelessness every year, even before the pandemic made things worse, 3,000 units simply is not going to cut it.

The Canadian Housing and Renewal Association, the Canadian Alliance to End Homelessness, housing providers and advocates are all saying that this is not good enough. In fact, CHRA is calling for the federal government to increase the rapid housing initiative funding by at least \$5 billion. They also want to see the program extended until at least 2028.

Communities also noted that the rapid housing initiative announcement does not include any resources for wraparound social supports and services. For those suffering from chronic homelessness, supportive services are essential for their success. They are calling on the federal government to include additional resources to fund wraparound supports so that proper care can be provided to ensure their success.

In Canada, 80% of indigenous people live in urban, rural and northern communities, and they are severely overrepresented in the homeless community. The fact that the announcement did not include a dedicated rapid housing stream for urban, rural and northern indigenous peoples highlights once again how their needs continue to be neglected by the Liberal government.

The Canadian Alliance to End Homelessness and CHRA note that when the national housing strategy was announced in 2017, there was nothing included for urban, rural and northern indigenous peoples. Even though the Minister of Housing was explicitly told to create an urban, rural and northern indigenous housing strategy in his 2019 mandate letter, a year later there is still no strategy.

Adjournment Proceedings

The time to act is long overdue. The indigenous caucus of the CHRA is demanding the federal government develop a for-indigenous, by-indigenous national housing centre. They want to see an increase in the supply of stable, safe and affordable indigenous housing by 73,000 units. They want accelerated action on indigenous homelessness, along with wraparound services to support indigenous tenants' well-being and long-term success. They want accelerated action on the elimination of indigenous homelessness, and a focus on northern housing.

There must be no more excuses and no more delays. The time to act is now.

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, I thank my colleague from Vancouver East for giving me the opportunity to speak about the rapid housing initiative, which the Prime Minister launched on October 27. This is an important new program that will quickly give more vulnerable Canadians a place to call home at a time when it is needed most.

Some of those hit hardest by COVID-19 are those who also find themselves in precarious housing. This includes seniors, women and children fleeing violence and people experiencing homelessness.

For example, it is impossible to safely shelter in place when people do not have a place to call home. Our government has recognized this and mobilized quickly to offer a number of supports to address these urgent housing needs. This includes additional funding of more than \$236 million for reaching home, Canada's homelessness strategy. These funds will help communities to extend and expand the emergency measures put in place at the onset of the COVID-19 pandemic as well as provide them with the flexibility to deliver housing solutions.

Many parts of the country are now in the second wave of the pandemic. As my colleague has noted, temperatures are dropping. It is clear that we need more affordable housing. We need it urgently and our government is committed to helping make this happen.

Adjournment Proceedings

That is where our government's rapid housing initiative comes in. This program represents \$1 billion in federal investments. It will create 3,000 new permanent affordable housing units across the country. All units will be completed within 12 months from the signing of the funding agreement. It will focus on creating housing for Canadians in severe need, people who are experiencing homelessness or living in temporary shelters as a result of the COVID-19 pandemic. At the same time, the program will stimulate the economy, creating good jobs when they are needed most.

The rapid housing initiative will be delivered through Canada's national housing strategy, a 10-year, \$55 billion-plus plan, but it will be delivered on a much more accelerated timeline. One half of the program's funds will be delivered directly to cities with the highest levels of housing needs in homelessness. The other half will fund projects led by provinces, territories, municipalities, indigenous organizations and non-profit organizations. All projects funded through this initiative must be completed within one year. The funding can be used to build modular housing, buy land or convert existing buildings for affordable housing.

I have spoken to our partners in cities, provinces and territories in the housing sector and they advised on the design of the program. They are quickly mobilizing the seizing of this opportunity. Our government is proud to be working hand in hand with these dedicated partners to ensure our most vulnerable people can be safely housed now and can thrive in the years to come.

I will note that the parliamentary secretary for housing is one of the most able-minded individuals in Canada when it comes to non-profit housing. I am proud to have him as a member of this caucus. I know on numerous occasions he has stated these types of words and in fact he assisted me in this speech. At the end of the day, we have a caring, compassionate government like no other government before it with respect to investments in future development of a truly national housing strategy.

● (1935)

Ms. Jenny Kwan: Mr. Speaker, 3,000 units in the rapid housing initiative just does not cut it. The fall economic statement failed to indicate that action will be taken to ensure an acquisition fund will be in place to support affordable housing providers in their purchases of distressed housing, while large for-profit capital funds have been buying up distressed housing.

This was called for as early as March by the former UN housing rapporteur, Ms. Leilani Farha. She wrote to the government on April 19 about this and it is now December and the government still has not even had the courtesy to respond to her. Her suggestion is further supported by many other housing advocates, including the Canadian Alliance to End Homelessness. The *Globe and Mail* wrote an article indicating that private buyers are lining up to try to get their hands on rental towers, especially the older buildings, which tend to have lower rents.

If we wait to act, it will be too late. There can be no more excuses. It is time to act.

Mr. Kevin Lamoureux: Mr. Speaker, too many Canadians are in need of housing. The COVID-19 pandemic has made a difficult situation even worse, but our government is taking action and delivering strong results for Canadians. The rapid housing initiative is the

latest major program we have developed to help Canadians get through these difficult times and build back better.

I ask my colleague and members on all sides of the House to do their part. I urge them to work with their local government and housing sector partners to help their constituents through this difficult time by making the most of this and other national housing strategy programs. I really encourage the member to do just that.

● (1940)

AIR TRANSPORTATION

Mr. Warren Steinley (Regina—Lewvan, CPC): Mr. Speaker, I am happy to be here to have a conversation about a question I asked regarding Nav Canada and the possibility that the air control tower at the Regina International Airport may cease to exist in the not-too-distant future. This is a very important conversation for the people of Saskatchewan, southwest Saskatchewan and Regina. I look forward to getting an answer from the member for Winnipeg North. I hope he does not just read speaking points and that we have a dialogue, a conversation between two parliamentarians about something that is very important for not only Saskatchewan but western Canadians.

I was able to have a conversation with not only the member for Winnipeg North but also the Minister of Transport. I asked a question, and the response I got was not really favourable to the people of Regina—Lewvan. Regina International Airport is in the heart of Regina—Lewvan, and it is very important to ensure that, when we come out of the COVID-19 pandemic, flights can come in and out safely. It will be a big part of our economic recovery when we see the light at the end of the tunnel.

I have had conversations with representatives from Nav Canada, and they talked about the complexity of flights that come into our air zone. One thing we need to take into account when it comes to having an air traffic control tower is that 15 Wing Moose Jaw, the training base for the RCAF, is in the same air zone as Regina. For complex flights, we want to keep our military pilots safe. There are flights coming into that air zone that are going 600 to 900 kilometres per hour, so it is a very complex situation. We need professional people at the control tower to make sure that our military personnel are safe.

Also, as I am sure the member for Winnipeg North would know, we have the world-famous Snowbirds at 15 Wing Moose Jaw, which fly out of Moose Jaw. They can take up the same airspace as the international airport in Regina. Therefore, the safety of all these complex flights should be taken into account when we are having this conversation.

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When it comes down to it, Regina is also a provincial capital. If we did not have an air traffic control tower in Regina, it would be the only provincial capital in the country that did not have safety measures in place. I think that sends a signal to people, not only in Regina and Saskatchewan but in western Canada. A provincial capital that does not have an air traffic control tower sends the wrong signal.

I remember as clear as day on election night when the Prime Minister said that he heard what western Canadians were saying. He said he was going to be there to make sure their concerns were heard, but we have not seen that in the last year.

For this one reason, I think it is time for the Liberal government to step up and assure western Canadians that the safety and complexity of all these flights in the Regina International Airport's airspace are taken into consideration. For once I hope the government is listening to western Canadians and will take the complexity and safety of our Snowbirds, our Royal Canadian Air Force and all of the pilots at 15 Wing Moose Jaw into consideration when it makes these decisions.

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, I will put my notes to the side and make it a discussion more so than a speech. I assure the member I will take the time to raise the issue with the minister. I do not say that lightly.

I spent a few years in Saskatchewan in my younger days. In fact, I am very familiar with the Snowbirds as I went to the air show in Moose Jaw. I am also very much familiar with air traffic control because I was actually a member of the Canadian Forces and I was an air traffic control assistant. I worked out of the tower in Lancaster Park, which had the longest runway at 14,000 feet. The space shuttle could land there, which is something I have reminded the current minister of. I also have family who live in Regina. Go Riders. We all love the Riders.

We understand the importance that airports play in our communities, whether they are the smaller airports we see scattered throughout the Prairies, the ones in larger centres like Regina or our international airports such as the Calgary airport. I am sure my friend has been to the Calgary airport. It is a massive and growing airport. We have different types of airports that provide all sorts of services. I understand the importance of towers. I also understand the importance of issues, having worked on radar, air zones and so forth. Safety is important.

Nav Canada has a high level of expertise that I do not have and I suspect the member opposite might not necessarily have. That is why it is important we get that good understanding. If there is something that can be done that is practical, I assure the member we are listening and very much interested in what we can do to further the cause.

One of the nice things that just came out in the budget presentation, the mini-budget, was the idea that we need to have a prairie investment fund. I see that as a sign to the Prairies that the government is very much concerned that all three beautiful Prairie provinces, and I have lived in all three, get the attention they need. I understand personally the importance of our airports and towers.

I will take the member's comments and at some point have that discussion. I do not know when, but I will have that discussion with the minister.

• (1945)

Mr. Warren Steinley: Mr. Speaker, I very much appreciate the comments made by the member opposite. He will know, having worked in an air traffic control tower, there is a difference between what they do and what flight information services do and the services they provide.

I ask him to make sure, when he does have that conversation with the Minister of Transport, that the minister knows the complexity of the flights going on at the Regina International Airport. I believe, and I hope the member opposite would agree, flight information services provide a valuable service, but it is not quite the same service as an air traffic control tower in the fact that there are a few different words such as "you may land", "you could land" or "you are cleared for takeoff".

The member will understand these words and the differences between the services provided by the different entities. I hope he will help me in making sure the Regina International Airport has an air traffic control tower going forward, based on the complexity of the flights, the Snowbirds, the 15 Wing air force base in Moose Jaw and the seriousness in ensuring the brave men and women who serve there have the safety and services they deserve.

Mr. Kevin Lamoureux: Mr. Speaker, when I was in Edmonton, I would work in two capacities. One was with search and rescue, which by the way is in Winnipeg right now, planning the flights that would ultimately go onto radar and different airspaces. If I was not working there, I would then be in the tower and my responsibility was to take the planes from the tarmac and get them just prior to the runway so that they could ultimately get the air traffic controller's instructions to tell them they were cleared for takeoff.

I have a fairly good understanding. If my friend is prepared to make the call to Nav Canada to try to set up maybe a Zoom discussion sometime after the session has come to an end, I would be very much interested in taking part in that call and maybe we can come up with something we can jointly send to the minister.

ETHICS

Mr. Michael Barrett (Leeds—Grenville—Thousand Islands and Rideau Lakes, CPC): Mr. Speaker, it is a pleasure to take part in adjournment proceedings. My question goes back to remarks I made in question period. While it was a question, I am not sure that we got a real answer.

Of course, this goes back to the WE scandal. This summer, we saw the now infamous Canada student service grant presented to Canadians worth \$912 million. Before the program was able to launch, it was cancelled. We had the Prime Minister apologize for failing to recuse himself. The then finance minister apologized for failing to recuse himself.

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The WE organization was right at the centre of it. The reason the recusals would have been necessary for the Prime Minister and for the former finance were that members of the Prime Minister's family had been paid nearly half a million dollars by the WE organization. He then he turned around and gave approval for Canadian tax dollars for this organization to administer a half a billion dollars.

The former finance minister's challenges came out of him having his daughter directly employed by this organization. He accepted \$40,000 in free vacations from this organization. Both the then finance minister and the Prime Minister were at the cabinet table when this was approved.

We look back to very recent history and this is the first Prime Minister in Canadian history found guilty of breaking ethics laws. We have seen that detailed in the "Trudeau Report" and the "Trudeau Report II". That was, in the first instance, for the Prime Minister's trip to billionaire island. In the second instance, it was his interference in the criminal prosecution for his friends as SNC-Lavalin.

We now have an issue that will be the subject of the third report coming from the Ethics Commissioner where we have this situation where the Prime Minister's family received half a million dollars and he turned around to give that organization half a billion dollars.

What happened when the committee investigations got too hot for the Prime Minister on the eve of documents to be disclosed to the finance committee and documents to be released to the ethics committee? The Prime Minister shut down Parliament.

We do not have to remember too far back into history when the Prime Minister said that sunlight was the best disinfectant. When the Prime Minister prorogued, he said there would be lots of time for questions when the House resumes. Then the House resumed and what did we have? Over 40 hours of filibuster from the Liberals at committee.

We are going to hear from the parliamentary secretary about Conservatives looking for scandals under every rock, but the question to the parliamentary secretary is very clear. If there is nothing to hide and if the government has the courage of its convictions, why not just let these matters come to a vote? Why filibuster? Why give rise to the appearance of corruption if, as he will tell us, there is none? We have seen them obstruct, filibuster and look to block rightful questions by the official opposition and by parliamentarians into the conduct of the government. It is unbecoming of a Prime Minister. It is shaking the confidence Canadians have in their parliamentarians and in Parliament.

We need to get back to good, ethical government. I look for Canadians to have that opportunity after the next election by electing a Conservative government with the Prime Minister being from the riding of Durham. In the meantime, we need the current, temporary occupant of the Prime Minister's Office to do his part and let the sun shine in.

● (1950)

Mr. Kevin Lamoureux (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, I am sure you would not be surprised to hear that we al-

ready have a good, ethical government, a government that understands and appreciates the importance of accountability and transparency. The opposition parties saying this is a scandal does not make it a scandal.

Unfortunately, I did not have the opportunity to participate in a lot of the discussions on this topic, primarily because of other commitments, but I would not concede to the official opposition that there is this huge scandal. It is interesting when my friend references, as he did today in his three or four minutes, that this is the first Prime Minister who has been held in violation by the Ethics Commissioner. There is nothing of that nature.

It was Stephen Harper who brought in the Ethics Commissioner, so it is not as though the commissioner was there for other prime ministers. However, the member tries to give the impression that we have a really bad prime minister. The Ethics Commissioner, after all, found a couple of examples where the Prime Minister made some mistakes, which the Prime Minister owned up to. He apologized where he needed to apologize.

The focus of the Conservatives in opposition, since day one, has always been what I would classify as character assassination. They do not care what the policies are. They go after the Prime Minister, the minister of finance, or any minister, and talk scandal, whether it exists or not. That is what they want to talk about.

The member referenced the filibuster, saying the Liberals are bad because we have been doing 40 hours of filibustering, as the Conservatives are being somewhat mischievous and looking under every rock for a scandal. They are calling for civil servant after civil servant to go before the committee. I think my colleagues did a good job of ensuring that this government continues, even though the opposition continues to look for made-up conspiracies, in some cases.

We continue to be focused on the coronavirus. That has been clearly demonstrated. While Conservatives would rather have civil servants answering questions about conspiracy, we prefer civil servants doing what they do best, which is serving Canadians by minimizing the negative damage of the coronavirus. That has been our priority, and that has been demonstrated with the many programs we have introduced.

We have been talking a lot about vaccinations lately, and justifiably so. I asked the Conservative opposition during debate the other day where the thousands of questions about the vaccination issue were during the summer, in July and August. No, they wanted to fan this whole notion that there is this huge scandal. There was no huge WE scandal. Yes, there were some mistakes, and those mistakes are very well established, but the government continues to focus its attention on the pandemic.

As much as the Conservatives try to divert our attention, we are continuing to focus on the coronavirus. I would encourage my friend to try to influence his caucus colleagues to do likewise.

• (1955)

Mr. Michael Barrett: Mr. Speaker, the member opposite never fails to disappoint in his responses to my comments and questions.

The Conservatives brought in these accountability measures and were not found guilty of breaking any of them because we did not. Then Canadians elected the Liberal government, which immediately fell into the trap we set for it. What was the trap? Do not break the law. Do not break the rules. That proved impossible for the Liberals. Nothing needed to be fabricated. No conspiracies needed to be formed. We have seen time and time again with the Liberals that the only thing they want to do, other than help themselves, is to help their well-connected insiders.

The member opposite needs to implore his colleagues to do the right thing and let the sunshine in and, guess what, the opposition will hold them to account on financial matters, the pandemic response and their ethical transgressions.

Mr. Kevin Lamoureux: Mr. Speaker, I assure the member we are doing the right thing. I am not saying we have been an absolute-

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ly perfect government. There have been areas where we have made some mistakes, but when that has occurred we owned up to those mistakes and where necessary apologized. We continue to work cooperatively with the Ethics Commissioner and other independent officers of Parliament.

However, let there be no doubt. We are going to continue our focus on combatting the negative impacts of the pandemic and supporting Canada's middle class and those aspiring to be a part of it. Those are the priorities of this government and they will continue to be its priorities.

[*Translation*]

The Deputy Speaker: The motion that the House do now adjourn is deemed to have been adopted. Accordingly, the House stands adjourned until tomorrow at 2 p.m. pursuant to Standing Order 24(1).

(The House adjourned at 8 p.m.)

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