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# House of Commons Debates

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Tuesday, February 23, 2021

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Speaker: The Honourable Anthony Rota



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# HOUSE OF COMMONS

Tuesday, February 23, 2021

The House met at 10 a.m.

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*Prayer*

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## ROUTINE PROCEEDINGS

• (1005)

[English]

### PETITIONS

**The Speaker:** We have quite a list of members presenting petitions today, but we only have 15 minutes, so I want everybody to be as concise as possible.

The hon. member for Bow River.

HONG KONG

**Mr. Martin Shields (Bow River, CPC):** Mr. Speaker, I have two petitions to present.

In the first petition, the undersigned citizens and residents of Canada call upon the Government of Canada to join with other nations, such as the United Kingdom, Australia and Taiwan, to open our doors to the citizens of Hong Kong wishing to leave increasingly oppressive conditions created under the new Hong Kong national security law.

### HEALTH OF ANIMALS REGULATIONS

**Mr. Martin Shields (Bow River, CPC):** Mr. Speaker, in the second petition, the undersigned citizens of Canada draw the attention of the House of Commons to the Government of Canada's proposed amendments to part XV of the health of animals regulations, animal identification. These amendments would be very detrimental to agriculture societies and to organizations such as rodeos and fairs in Canada, and particularly in Alberta, where we have hundreds of these events.

The level of tracing that the CFIA is proposing is very concerning to agricultural organizations, the rodeo culture and fairs in the province of Alberta. The petitioners are very concerned about what this proposed piece of legislation from the CFIA would do.

### SECURE AIR TRAVEL ACT

**Mr. Tom Kmiec (Calgary Shepard, CPC):** Mr. Speaker, I have three petitions to present today.

The first is an e-petition. It is sponsored by Holly Oshust and signed by 576 Canadians.

The petitioners draw the attention of the House and the Government of Canada to the fact that minors do not need a piece of identification in order to board a flight in Canada. The petitioners are asking to amend subsection 3(1) of the Secure Air Travel Act to provide that air carriers must, at the boarding gate for a domestic flight, verify the identity of each passenger regardless of age and not just those who appear to be 18 years of age.

### FISCAL STABILIZATION PROGRAM

**Mr. Tom Kmiec (Calgary Shepard, CPC):** Mr. Speaker, the second petition is from residents in my riding who are calling upon the Government of Canada to remove the per capita cap on the fiscal stabilization program, referred to as the equalization rebate, which the petitioners say equals about \$3 billion to the public treasury in Alberta.

### COMMUNITY POLICING IN ALBERTA

**Mr. Tom Kmiec (Calgary Shepard, CPC):** Mr. Speaker, the third petition is from residents all across Alberta, who are reminding the Government of Canada that there was a Fair Deal Panel that was struck and had reported recommendations. The petitioners draw the government's attention specifically to the recommendation related to community policing. The petitioners are asking for the following, which I will read into the record:

The petitioners are calling upon the Government of Canada to make a public statement that, should the Alberta government decide to terminate the community policing agreement with the RCMP as per the recommendation of the Fair Deal Panel, there would be no penalty levied against the Province of Alberta from the Government of Canada, and that the Government of Canada would support the transition towards a province-wide community police force, as is Alberta's constitutional right.

### CARBON PRICING

**Mr. Earl Dreeshen (Red Deer—Mountain View, CPC):** Mr. Speaker, today is Canada's Agriculture Day. It is my honour to table in the House a petition from my constituents of Red Deer—Mountain View, as well as from other residents of Alberta, on such an important day for farmers.

*Routine Proceedings*

The petition calls on the Liberal government to exempt all direct and indirect input costs incurred by farmers as a result of the carbon tax. This ill-conceived tax costs Canadian farmers tens of thousands of dollars each year and puts them at a competitive disadvantage internationally. Even worse, the Liberal government's carbon tax will nearly triple by 2030.

The petition also calls on the government to immediately cancel implementation of the clean fuel standard. Studies estimate that the so-called clean fuel standard will represent a total cost to the Canadian economy of \$7 billion to \$15 billion. Canadians cannot afford another tax on top of an ill-conceived tax.

THE SENATE

**Mr. Damien Kurek (Battle River—Crowfoot, CPC):** Mr. Speaker, it is an honour to present six petitions today on behalf of constituents and Albertans.

The first petition asks that the Government of Canada take the steps required to establish equal representation for each province in the Senate of Canada.

FISCAL STABILIZATION PROGRAM

**Mr. Damien Kurek (Battle River—Crowfoot, CPC):** Mr. Speaker, the second petition asks that the government immediately increase and backdate the fiscal stabilization program and that the government commit to working with provinces to address the current inequities that exist within the equalization formula.

PROPERTY RIGHTS

**Mr. Damien Kurek (Battle River—Crowfoot, CPC):** Mr. Speaker, the third petition asks that the government seek the agreement of the provinces to amend the Constitution to include property rights and that the government also take steps to enact legislation to ensure that full, just and timely compensation will be paid to all persons who are deprived of personal or private property as a result of any federal government initiative, policy, process, regulation or legislation.

NATURAL RESOURCES

**Mr. Damien Kurek (Battle River—Crowfoot, CPC):** Mr. Speaker, the fourth petition asks to formally recognize Alberta's place as an equal partner in the federation, remove any barriers to Alberta being able to develop its resources without interference and ensure unfettered access to international markets for those resources.

PROVINCIAL AUTONOMY

**Mr. Damien Kurek (Battle River—Crowfoot, CPC):** Mr. Speaker, the fifth petition asks that the government take responsibility for creating a national unity crisis and that the government ensure there are no bureaucratic or legislative roadblocks for provinces that wish to exercise their constitutionally allowed measures of autonomy.

NATURAL RESOURCES

**Mr. Damien Kurek (Battle River—Crowfoot, CPC):** Mr. Speaker, the final petition I have the honour of presenting today asks that the current Prime Minister of Canada apologize for the actions of former prime minister Pierre Elliott Trudeau and the government's destructive national energy program and affirm the rights of provinces to develop, manage and market their natural resources.

These petitions address a series of very serious issues that Albertans are facing today in the federation.

• (1010)

SRI LANKA

**Mrs. Salma Zahid (Scarborough Centre, Lib.):** Mr. Speaker, today I present e-petition 3039, which has been signed by over 1,300 people, including constituents from Scarborough Centre and Scarborough—Guildwood as well as people across the country, including many Canadians of Sri Lankan origin.

The petitioners call our attention to the Government of Sri Lanka's mandated cremation order for all people in the country whose cause of death is related to COVID-19. They know there is no scientific evidence to support this practice and that it runs contrary to World Health Organization guidelines. The petitioners call on the Government of Canada to urge the Sri Lankan government to honour the religious and cultural practices of Muslims and Christian minority communities around burials and end this practice of forced cremation.

PEFFERLAW DAM

**Mr. Scot Davidson (York—Simcoe, CPC):** Mr. Speaker, Pefferlaw is small town with a big heart, and I rise again today to present a petition on behalf of the residents of Pefferlaw, Ontario, in my great riding of York—Simcoe.

The petitioners are calling on the Government of Canada to rehabilitate the historic Pefferlaw dam and to ensure that the Pefferlaw River flows again. Built in the 1820s, the Pefferlaw Dam has cultural, historical, environmental, economic and recreational significance to the residents of Pefferlaw and to visitors, which is why the petitioners' efforts are so important. Again, I would like to thank the petitioners.

THE ENVIRONMENT

**Mr. Greg McLean (Calgary Centre, CPC):** Mr. Speaker, it is a pleasure for me to present three petitions in the House today.

The first petition calls on the House of Commons to recognize the reduction of global net carbon emissions is a critical endeavour in our fight against climate change.

As the government committed to net-zero emissions by 2050 and furthermore committed to exceed Canada's 2030 goal by introducing new carbon-reducing measures, and recognizing that carbon capture, utilization and storage is a leading measure to reduce global carbon emissions, this petition calls upon the Government of Canada to introduce new incentives to encourage carbon capture utilization and storage investments in Canada.

## CARBON PRICING

**Mr. Greg McLean (Calgary Centre, CPC):** Mr. Speaker, the second petition I have the pleasure to present today is from Canadians who realize the current pandemic is causing significant disruptions to business models.

The petitioners remember that during the 2019 federal election, the environment minister at the time assured Canadians that the carbon tax would be frozen at \$50 a tonne annually as of 2022 and that the Liberal government has repeatedly told Canadians that the carbon tax would be revenue neutral for most taxpayers.

Now the first-ever annual carbon tax revenue report indicates tax collections were as much as 21% higher than rebates paid to taxpayers in four provinces: Ontario, Manitoba, Saskatchewan and New Brunswick. The plan, entitled “A Healthy Environment and a Healthy Economy”, now proposes to increase the consumer carbon tax to \$170 per tonne as of 2030.

This petition calls upon the government to keep its promise to Canadians and not increase the carbon tax beyond \$50 per tonne.

## TRANS MOUNTAIN PIPELINE

**Mr. Greg McLean (Calgary Centre, CPC):** Mr. Speaker, the third petition I am presenting today is from Canadians who draw to the attention of the House that Canadian oil is produced to the highest environmental standards in the world, and the government needs to acknowledge the industry's pioneering efforts.

Oil sands producers reduced their GHG emissions intensity by 28% from 2000 to 2017, and oil and gas is Canada's leading export and the number one private sector investor in the Canadian economy. This past year, the Trans Mountain expansion project provided almost 8,000 jobs and contributed \$78 million to personal, corporate and sales taxes.

The continued uncertainty of Canada's ability to get our energy products to tidewater erodes global trust in Canada's environmentally advanced energy sector.

As pipelines are the safest and the cleanest way to transport oil and gas, this petition calls upon the Government of Canada to expedite the Trans Mountain pipeline expansion.

## INDIGENOUS AFFAIRS

**Ms. Elizabeth May (Saanich—Gulf Islands, GP):** Mr. Speaker, I am rising this morning to present a petition on behalf of a number of my constituents and petitioners outside my community. They are calling on the government to respect the United Nations Declaration on the Rights of Indigenous Peoples, to embed UNDRIP into our laws, and specifically to move to address the unresolved issues related to the rights of the people of the Wet'suwet'en nation, to move expeditiously to hear their concerns and to implement UNDRIP in relation to the pipeline moving through their territory.

• (1015)

[Translation]

## STILLBIRTHS

**Mr. Steven MacKinnon (Parliamentary Secretary to the Minister of Public Services and Procurement, Lib.):** Mr. Speaker, I am pleased to table petition e-2467, which was initiated by Nadine Belzile of Gatineau and signed by 726 people. There are more than

## Routine Proceedings

3,000 stillbirths in Canada each year, and experts say that at least 30% of these babies could be saved.

The petitioners are asking the government to create a national committee on stillbirth and launch a national awareness campaign.

[English]

## NATURAL RESOURCES

**Mr. Gerald Soroka (Yellowhead, CPC):** Mr. Speaker, I would like to present two petitions today.

The first is with regard to the fact that Canada is still many years away from eliminating the use of oil and gas. Oil and gas produced in western Canada is produced with the highest labour and environmental standards in the world. Using Canadian oil nationwide first, before importing any oil from any other country, would greatly benefit the economy.

The petitioners call on the government to eliminate all importation of foreign oil and gas into Canada within the next five years, thus creating more jobs and building back a better economy.

**Mr. Gerald Soroka (Yellowhead, CPC):** Mr. Speaker, my second petition is on thermal coal.

The petitioners call on the government to keep mining thermal coal in Alberta because it is produced to the highest environmental and labour standards, with very low sulphur content, thus giving China access to better coal to lower its environmental footprint.

## ALBERTA

**Mr. Arnold Viersen (Peace River—Westlock, CPC):** Mr. Speaker, I am presenting a petition on behalf of Albertans who want to draw to the attention of the House the recent Statistics Canada report that highlights how a disproportionate number of young men have died between May and October. The petitioners recognize that men are three times more likely to commit suicide.

Likewise, Albertans have suffered an energy downturn, an oil price war and a federal government unwilling to support major pipelines. Alberta has one of the highest unemployment rates in Canada.

The petitioners ask the House to approve shovel-ready projects across the country, letting Albertans get back to work, and ensure that the TMX expansion is completed, that local communities and organizations are supported, and that the 988 suicide hotline is quickly created.

*Government Orders*

## ENERGY SECTOR

**Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC):** Mr. Speaker, I am presenting five petitions today.

The first petition deals with something very important in my riding, which is Alberta's industrial heartland. It notes that the industrial heartland is one of the world's most attractive locations for chemical, petrochemical, and oil and gas investment. It is Canada's largest hydrocarbon processing region and has 40-plus companies, several being world scale, providing fuels, fertilizers, power, petrochemicals and more to provincial, national and global consumers.

The petitioners highlight the importance of energy-related manufacturing in Canada as a key component of our energy sector and our national economy. They call on the government and the House of Commons to advance policies that support growth in Alberta's industrial heartland and growth in energy-related manufacturing in general. Specifically, it calls on the House to support permanent accelerated capital cost allowance for energy-related manufacturing.

• (1020)

## CARBON PRICING

**Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC):** Mr. Speaker, the second petition is in response to the Liberal government's decision to massively hike the carbon tax and push that forward in the midst of a pandemic. The petitioners note that this is not going to be an effective environmental measure at all. This is much more to do with the government trying to tax Canadians more and take more of their hard-earned dollars from them.

The petitioners therefore call on the government to repeal the decision to increase the federal carbon tax to \$170 per tonne. Also, as an important accountability measure, they call on the government to have the carbon tax shown as a separate expense when buying products so citizens can actually be aware of how much money they are paying at a given time in the carbon tax.

## HUMAN RIGHTS

**Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC):** Mr. Speaker, the third petition calls on the House of Commons to recognize that Uighurs and other Turkic Muslims have been and are being subjected to an ongoing genocide. The petitioners no doubt welcome yesterday's vote, but they also call on the government to take the same position that the House of Commons has. Of course, we still have not heard from the government on that in terms of whether it is for or against that recognition.

The petitioners call on the government to apply Magnitsky sanctions, targeted sanctions, against those who are involved in this horrific genocide.

## HUMAN ORGAN TRAFFICKING

**Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC):** Mr. Speaker, the fourth petition calls on the House of Commons to pass Bill S-204, a bill currently before the Senate, that deals with forced organ harvesting and trafficking. The bill would make it a criminal offence for a person to go abroad and receive an organ without the donor's consent.

## MEDICAL ASSISTANCE IN DYING

**Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC):** Mr. Speaker, the fifth and final petition is with respect to Bill C-7. The petitioners are very concerned about how the government's Bill C-7 would make people living with disabilities effectively second-class citizens when they are accessing our health care system. They are deeply concerned about provisions in this bill and want the bill to be either defeated or significantly amended.

I commend all these petitions to the consideration of the House. I hope the government will take very seriously the concerns raised by Canadians and people living with disabilities with Bill C-7.

\* \* \*

## 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 Speaker:** Is that agreed?

**Some hon. members:** Agreed.

## GOVERNMENT ORDERS

• (1030)

[English]

## CRIMINAL CODE

**Hon. David Lametti (Minister of Justice, Lib.)** moved:

That a message be sent to the Senate to acquaint Their Honours that, in relation to Bill C-7, An Act to amend the Criminal Code (medical assistance in dying), the House:

agrees with amendment 1(a)(ii) made by the Senate;

respectfully disagrees with amendment 1(a)(i) because this matter, including questions of most appropriate precise definitions, whether those definitions should be included in the Criminal Code or elsewhere, and whether any consequential amendments or protections relating to issues such as consent and capacity are necessary in relation to such an amendment, will also be addressed by the expert panel and the upcoming parliamentary review, and the Government will collaborate with provincial and territorial health authorities to ensure a consistent approach;

respectfully disagrees with amendment 1(a)(iii), 1(b) and 1(c) because it would permit advance requests for medical assistance in dying before an individual has a grievous and irremediable medical condition, a change which goes beyond the scope of the bill, and further, this expansion of the medical assistance in dying regime requires significant consultations and study, including a careful examination of the safeguards for persons preparing advance request and safeguards for practitioners administering medical assistance in dying, all of which could be part of the parliamentary review undertaken to study this important type of advance request to reflect the crucial input of Canadians affected by the medical assistance in dying regime;

proposes that, with respect to amendment 2:

the portion of paragraph 241.31(3)(a) before subparagraph (i) be amended by replacing it with the following:

“(a) respecting the provision and collection, for the purpose of monitoring medical assistance in dying, of information relating to requests for, and the provision of, medical assistance in dying, including”;

clause 241.31(3)(a)(i)(B) be amended by adding after the words “respecting the race” the words “or indigenous identity”;

subparagraph 241.31(3)(a)(i) be amended by deleting “and” at the end of clause (A), by adding “and” at the end of clause (B) and by adding the following after clause (B):

“(C) information — other than information that must be provided in relation to the assessment of eligibility to receive medical assistance in dying and the application of safeguards — respecting any disability, as defined in section 2 of the Accessible Canada Act, of a person who requests or receives medical assistance in dying, if the person consents to providing that information.”;

paragraph 241.31(3)(b) be amended by replacing it with the following:

“(b) respecting the use, analysis and interpretation of that information, including for the purposes of determining the presence of any inequality — including systemic inequality — or disadvantage based on race, Indigenous identity, disability or other characteristics, in medical assistance in dying.”;

as a consequence of amendments 1(a)(ii) and 3, proposes that the following amendment be added:

“1. New clause 3.1, page 9: Add the following after line 20:

“Independent Review

3.1 (1) The Minister of Justice and the Minister of Health must cause an independent review to be carried out by experts respecting recommended protocols, guidance and safeguards to apply to requests made for medical assistance in dying by persons who have a mental illness.

(2) A report containing the experts’ conclusions and recommendations must be provided to the Ministers no later than the first anniversary of the day on which this Act receives royal assent.

(3) The Ministers must cause the report to be tabled in each House of Parliament within the first 15 days on which the House is sitting after the day on which they receive the report.”;

proposes that, with respect to amendment 3:

section 5 be amended by replacing it with the following:

“Review

5 (1) A comprehensive review of the provisions of the Criminal Code relating to medical assistance in dying and their application, including but not limited to issues relating to mature minors, advance requests, mental illness, the state of palliative care in Canada and the protection of Canadians with disabilities must be undertaken by a Joint Committee of both Houses of Parliament.

(2) The Joint Committee shall be composed of five Members of the Senate and ten Members of the House of Commons, including five Members from the governing party, three Members of the Official Opposition, and two Members of the opposition who are not Members of the Official Opposition, with two Chairs of which the House Co-Chair shall be from the governing party and the Senate Co-Chair shall be determined by the Senate.

(3) The quorum of the Committee is to be eight Members whenever a vote, resolution or other decision is taken, so long as both Houses and one Member of the governing party in the House and one from the opposition in the House and one Member of the Senate are represented, and that the Joint Chairs be authorized to hold meetings, to receive evidence and authorize the printing thereof, whenever six Members are present, so long as both Houses and one Member of the governing party in the House and one Member from the opposition in the House and one Member of the Senate are represented.

(4) The Committee must commence its review within 30 days after the day on which this Act receives royal assent.

(5) The Committee must submit a report of its review — including a statement of any recommended changes — to Parliament no later than one year after the day on which it commenced the review.

(6) When the report, referenced in paragraph (5), has been tabled in both Houses, the Committee shall expire.”;

section 6 be amended by replacing the words “18 months after” with the words “on the second anniversary of”.

He said: Mr. Speaker, I would like to begin my remarks today by acknowledging the comprehensive study and debate on Bill C-7 in the other place. I applaud their diligence in holding a pre-study of Bill C-7 this past November and an in-depth committee study of the

### *Government Orders*

bill earlier this month, and a thematic third reading debate two weeks ago.

The matter of medical assistance in dying, or MAID, is a serious and complex one. The Senate has given it serious thought, and I believe we have given it serious thought in our response in this motion.

Before discussing the amendments, I want to remind hon. members of the process that got us here.

As members will recall, the bill proposes a legislative response to the Superior Court of Quebec's Truchon and Gladu decision in which the court ruled that it was unconstitutional to limit MAID to persons whose death was reasonably foreseeable.

[*Translation*]

To develop this bill, my colleagues, the Minister of Health and the Minister of Employment, Workforce Development and Disability Inclusion, our parliamentary secretaries and I held round table discussions across Canada with over 125 experts and stakeholders.

The government also ran a public online survey, to which over 300,000 Canadians across the country responded. A report summarizing the consultations was released in March. Our government fulfilled its mandate by creating this legislation. The whole process resulted in the bill that was introduced in the House last February.

As hon. members know, we had a thorough debate on this bill before the work of the House was suspended.

[*English*]

The objective of the bill is to recognize the autonomy of individuals choosing MAID as a means of relieving intolerable suffering regardless of the foreseeability of their natural death, while at the same time protecting vulnerable persons and affirming the inherent and equal value of every person's life.

Bill C-7 proposes important changes to the Criminal Code's provisions on MAID in response to the Truchon decision and informed by the results of the January and February 2020 consultations. We recognize these changes represent a critical shift. Our government has been working very hard since the Truchon decision on responding to this important court ruling and remains committed to doing so as quickly as possible.

After months of review of Bill C-7 in both the House of Commons and the Senate, we are now at a critical stage. There are Canadians who are suffering intolerably and would become eligible for MAID under the government's proposed changes, but they are currently unable to access the medical assistance in dying regime. This matter has been thoroughly examined, and Canadians need to be able to access the regime. We are renewing our commitment to the parliamentary review to look at the wide variety of other issues related to MAID outside of Bill C-7, but it is essential that we pass this legislation.

*Government Orders*

Following its thorough debate, the other place has adopted five amendments to Bill C-7. The most significant amendment is the sunset clause that would repeal the mental illness exclusion 18 months after Bill C-7 receives royal assent. I know that many senators and some witnesses from whom they heard believe that the exclusion of mental illness unjustifiably infringes the equality rights guaranteed by section 15 of the charter. I do not share that view. It is my opinion as Minister of Justice and Attorney General of Canada that the mental illness exclusion is constitutional because it serves a protective purpose and is narrowly crafted.

I have spoken before about the inherent complexities and risks with MAID on the basis of mental illness as the sole criterion, such as suicidality being a symptom of some mental illnesses, the impossibility of predicting whether in any given case symptoms will improve or not and the increased difficulty of capacity assessments. These are the concerns that led the government to exclude mental illness as the sole condition for MAID eligibility, given the proposal to broaden it beyond the end of life context. This decision was accompanied by a commitment to further consider the issue of MAID for mental illness in the parliamentary review required by former Bill C-14.

• (1035)

[*Translation*]

We heard from witnesses who share those concerns, but we also heard from several others who said that excluding everyone with mental illness as a sole underlying condition could be stigmatizing and pointless.

Some mental health experts believe that practitioners can assess the eligibility criteria case by case, particularly the voluntariness of each request and each patient's decision-making capacity.

In November 2020, the Association des psychiatres du Québec released a discussion paper exploring safeguards and procedures that could be put in place for the provision of MAID on the ground of mental illness alone.

While I do think the exclusion is constitutional, and I do not believe that we are fully prepared to safely proceed with the provision of MAID on the ground of mental illness alone, I also hear the concern expressed by Canadians that this exclusion fails to address the issue of whether and when the provision of MAID will be permitted to alleviate intolerable suffering due to mental illness.

[*English*]

That is why I propose that we support the sunset clause, but with an amendment so that it would repeal the mental illness exclusion after 24 months instead of after 18 months, after Bill C-7 comes into force. In combination with this amendment, I am also proposing the enactment of the requirement that the Minister of Health and I establish an expert panel to review safeguards protocols for guidance for such cases. We would give this group of experts 12 months to consider these difficult questions and make their recommendations to us, which we will make public by tabling their report in Parliament. The government and Parliament would then have 12 additional months to consider what safeguards should be legislated before the exclusion is repealed.

We hope this compromise can be acceptable to the other place. While some work has begun on potential safeguards for this group of persons, the work is far from complete and enacting legislation takes time. We think 24 months is still an ambitious timeline to implement such an important change in Canada's MAID policy, but it still provides a fixed timeline in the relatively near future for considering MAID eligibility on the basis of mental illness.

[*Translation*]

We also welcome the Senate's amendment concerning the parliamentary review. We suggest making a few changes to the timetable for completing the work, and we think it is appropriate to include key issues that this review will address.

The parliamentary review should address important issues, most of which were highlighted during the procedures and committee debates on Bill C-7 in both chambers, including palliative care in Canada, protecting Canadians with disabilities, safeguards for persons with mental illness, medical assistance in dying for mature minors, advance requests for medical assistance in dying and the legislation on medical assistance in dying more generally.

The spirit of the amendment aligns with the government's commitment to make it easier to call for a parliamentary review as soon as possible following royal assent to Bill C-7. This review is absolutely essential for the future of medical assistance in dying in Canada.

During consultations and the committee process in the House and in the Senate, we noted that a certain number of issues should have been reviewed and addressed, but they required a more in-depth study than was possible to carry out within the court-imposed deadline.

Bill C-14 calls on Parliament to conduct that review, and we are using this message today to initiate the process. While the motion sets out important issues that need to be examined, I do not expect the list to be limited to only those issues. Medical assistance in dying is a very broad subject, and we hope to hear from many Canadians on a wide variety of subjects related to it.

Having heard from many witnesses and spoken to many Canadians about Bill C-7, I know that people have different views on these issues. They are challenging issues, and I look forward to the parliamentary review, to hearing from many more Canadians on the subject and to seeing what comes out of this review.



*Government Orders*

● (1040)

[English]

I will let other colleagues speak in greater detail about the Senate amendments to the MAID monitoring regime. I will say that I am proud to support this Senate amendment, with some modifications to make it more inclusive, as a necessary step in the right direction toward gathering better data to inform us all, going forward, about the operation of MAID in Canada. Good data is what grounds good policy, and by knowing more about who requests MAID and why, we can assess the impact of broadening the MAID regime and provide Canadians with the transparency and public trust that such a regime requires.

That brings me to two Senate amendments that I do not believe we can support.

[Translation]

The Senate adopted an amendment that will enable people whose death is not reasonably foreseeable to sign a waiver of final consent. Bill C-7 set out a general policy on the waiver of final consent that intentionally limited it to the most obvious cases with the least amount of uncertainty, specifically when a person's death was reasonably foreseeable and the person was ready to receive medical assistance in dying.

Since the question of expanding the circumstances in which medical assistance in dying can be administered in the absence of contemporaneous consent requires more in-depth study, it is best if it is addressed by the parliamentary review. I know that many people will be disappointed with that decision.

Last year, I had the opportunity to meet Sandra Demontigny, who was diagnosed with early onset Alzheimer's at 39 years of age. She is an advocate for advance requests for medical assistance in dying. We had a long conversation. I was very touched by her story, her beliefs and her book. We will soon begin an in-depth study of this important issue during the parliamentary review.

[English]

Finally, while I appreciate the efforts at clarifying what constitutes a mental illness in the MAID context, this is a matter that can and will be addressed by the expert panel and the upcoming parliamentary review, and the government will collaborate with provincial and territorial health authorities to ensure a consistent approach. Through this work, I am confident there will be consistency on the scope of the exclusion, going forward.

Medical assistance in dying has always been a difficult issue that generates a variety of opinions on all sides of the issue. It is an issue that strikes deeply to every Canadian's personal morals and sensibilities. As such, it requires different interests to be considered. I firmly believe that Bill C-7 does so. The law would continue to require informed consent and a voluntary request made by a person with decision-making capacity, while also creating a more robust set of safeguards when the person's natural death is not reasonably foreseeable. These safeguards would require significant attention to be paid to all of the alternatives that might help alleviate suffering on the part of a person whose death is not reasonably foreseeable.

I believe that Bill C-7 is one important and prudent step in ensuring greater respect for the autonomy of a broader category of Canadians who are suffering intolerably. Our legislation would make only the necessary changes to ensure a MAID regime that is responsive to our experience to date and respects the charter rights and freedoms of Canadians to autonomy and safety. In Carter the court said, "the risks associated with physician-assisted death can be limited through a carefully designed and monitored system of safeguards", and that is exactly what Bill C-7 would continue to do.

I look forward to working with all members of Parliament to pass these reasonable amendments prior to the court deadline on Friday. If the suspension period expires without the passage of Bill C-7, Truchon would come into effect without the benefit of the protection, safeguards and exclusions of our proposed bill. I encourage all members of the House to support the government's motion on the Bill C-7 amendments.

**Mr. Mark Gerretsen (Kingston and the Islands, Lib.):** Madam Speaker, I note that toward the end of his speech, the member specifically talked about why the timeline is so important and about getting this done in time before other measures come into effect. I am wondering if he can comment on the seriousness of that and what it would mean if we did not get this accomplished by Friday, not just from a legal perspective, but also with regard to the real effect it would have on so many Canadians.

● (1045)

**Hon. David Lametti:** Madam Speaker, first of all, if we fail to meet this deadline, we will have a different regime existing in Quebec than in the rest of Canada. In Quebec, the Bill C-14 regime would be enlarged to include death that is not reasonably foreseeable without any kind of safeguards. On the other hand, Quebecers would not benefit from the Audrey Parker amendment or the other compassionate improvements that we made in the end-of-life regime.

In the rest of Canada, there are people who would like to have access to MAID who are not at the end of their life. They would be denied. This is a source of suffering for so many people and they would like it to be alleviated, but they would also not have access to the new benefits in the bill, such as the Audrey Parker amendment.

**Ms. Heather McPherson (Edmonton Strathcona, NDP):** Madam Speaker, the new second track for accessing MAID requires that one of the two medical practitioners assessing the person have expertise in the condition from which the person is suffering. How will this work in rural or remote areas for Canadians who maybe do not have access to such experts? How does the bill ensure there would be equal access for all Canadians, regardless of where they live?

*Government Orders*

**Hon. David Lametti:** Madam Speaker, that is a very important question. Indeed, the concern for Canadians living in rural and remote areas is precisely the reason why we adopted the wording we did, so that a person did not have to necessarily have access to a specialist. This was seen by a number of medical experts as being a barrier for people living in remote areas.

A medical practitioner with expertise in the condition is not necessarily a specialist but is someone who, frankly, has required experience over time. This, therefore, opens up the category of people who can give an opinion. Obviously we still need to work with the provinces, and particularly with the territories in the north, to make sure that provincial health care systems can account for this. We pledge to do that.

Perhaps a positive by-product of the COVID era is the ability to have consultations online. Maybe technology is also part of the solution.

**Mr. Damien Kurek (Battle River—Crowfoot, CPC):** Madam Speaker, although I have outlined some disagreement with the government's approach throughout the course of debate, it is a very, very important debate, which Canadians need to hear. Certainly I have also taken issue with some of the consultative processes undertaken by the government and what seems to be a lack of representation of certain perspectives that may not be in agreement with the government.

I saw many of the thousands of responses that came from my constituency. I was cc'd on many of those things, and also given feedback. Certainly many of those perspectives, including those of health care professionals, were not readily acknowledged in the report they gave on those consultations.

Had the government appealed the Quebec court decision, we would be in a very, very different circumstance today. Can the minister provide justification for the government not undertaking what would have been a regular process to appeal that decision to a higher court?

• (1050)

**Hon. David Lametti:** Madam Speaker, the simple fact of the matter is this: Had we appealed the decision through the court of appeal, or possibly the Supreme Court of Canada, so many more Canadians would have had to suffer for so much longer. It is that simple. That would be on a case in which we strongly believed legally we would lose on its constitutionality. The reasoning of the Quebec Superior Court was compelling and it will ultimately be upheld. Why make people suffer in the meantime?

We proceeded to act expeditiously on the parts in which we could in response to that ruling. We also responded to the lived experiences of medical practitioners and the families of those who had gone through MAID in the parts they suggested we change immediately.

**Ms. Elizabeth May (Saanich—Gulf Islands, GP):** Madam Speaker, as we all know, this is an extremely important piece of legislation. I think all sides of the House have benefited from an approach that is entirely non-partisan. I appreciate the minister's comments that he did not feel the Government of Canada could accept all of the amendments made in the other place, but I continue to

feel that some of them would make this legislation sit better with some of my constituents.

This is really outside the purview of the Minister of Justice, but perhaps he could let us know if the government would provide health supports for recipients of care.

**Hon. David Lametti:** Madam Speaker, I apologize to the hon. member, but I missed the last dozen words or so of her question.

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** I will ask the hon. member for Saanich—Gulf Islands to repeat her question, as there were some technical issues.

**Ms. Elizabeth May:** Madam Speaker, goodness knows that we all persevere through technological challenges.

My question for the minister is this: Can we look to the government to deliver more supports for mental health services and palliative care?

**Hon. David Lametti:** Madam Speaker, those are such critical issues. While they are not directly in the bill, they are indirectly in the bill and provide the context for it.

We have already committed a great deal toward increased mental health supports to the provinces. I cannot imagine that will change. We will continue with our commitment to help support better mental health services, obviously administered through the provinces and territories.

Certainly, palliative care is something we are committed to. We are committed to studying it better. The interrelationships are made in this bill, and I can assure the member I will do my best to make sure we are supportive there as well.

**Mr. Gary Vidal (Desnethé—Missinippi—Churchill River, CPC):** Madam Speaker, it is a difficult issue that is very personal to a lot of people.

My question is quite quick. With respect to amendment 2 and the addition of the words "or indigenous identity", what consultations were done with members of the indigenous community that might have led to this, and did they have input into this addition to the amendment?

**Hon. David Lametti:** Madam Speaker, we have been in consultation with indigenous peoples from the beginning of this process. Specific panels were composed with indigenous participation on them.

The amendment is the result of a general desire. It was obviously led by the Senate to cover issues of race, but it was led by a general desire, coming in part from our experience with COVID, for better disaggregated data, both with respect to race, but also with respect to indigeneity. We need to have a better picture of how this is impacting people.

As we move forward to discuss the implications of what the data generates, this will give us all a better basis for more collaborative discussions and work with indigenous Canadians.

*Government Orders*

**Mr. Michael Barrett (Leeds—Grenville—Thousand Islands and Rideau Lakes, CPC):** Madam Speaker, today I am speaking again to the government's bill, Bill C-7. I join my Conservative colleagues in being the voice for those who do not have one, those who have been thoroughly ignored and cast aside. Throughout this bill's debate, many people from the disability community have cried out in fear that they will be victims of this deeply flawed bill. That is why we are here today. We are here to stand up for them and be the voice that the government cannot ignore.

The Liberals are in such a fevered rush to pass this bill that they completely rejected amendments Conservatives offered at committee that would have seen safeguards in place for the vulnerable among us. They are in such a rush because they want to meet some arbitrary deadline to avoid political embarrassment. When there are lives on the line and the stakes could not get any higher than life or death, the Liberals are worried about embarrassment. They are not worried about the people who stand to be victimized by this bill and the unnecessary deaths it would lead to, but about political embarrassment.

We might remind the Liberals that it was their government that prorogued Parliament and locked the doors to this place, all in the name of covering up for the Prime Minister's corruption and blocking the investigations happening across multiple committees. Where was the need for great haste then?

One might have thought that when the Liberals missed their first arbitrary deadline it might have given the proponents of this dangerous bill time for pause and reflection about what this means for the most vulnerable Canadians, but it seems to have had the opposite effect. We are now looking at yet another arbitrary deadline and a vastly expanded bill that would see exponentially more Canadians victimized when they are at their lowest.

The government had a second chance to reform this bill and do what needed to be done to protect the vulnerable. Instead, it tossed protections to the wayside. This legislation, by its very nature, requires caution and constant monitoring to ensure that vulnerable Canadians are not being coerced, neglected or abused because of Bill C-7.

We need to offer Canadians our best when it comes to important legislation. That means listening to their concerns, considering them, offering them multiple options and avenues, and continuing to refine the legislation. This is especially the case with Bill C-7 because we can never bring back those people who have received MAID. This is something that is final.

The previous MAID legislation required a parliamentary review of the law five years after it was passed. This review was to provide the opportunity to hear from Canadians about how MAID is working and to see if any changes should be made. It was expected that this review would start in 2020.

I would point out that 2020 has come and gone. We now find ourselves in 2021. We have not seen any such review, and we are here debating a wide expansion of eligibility for MAID with the removal of safeguards for the vulnerable. The government has acted hastily and ignored the legislative review process in which safeguards for the vulnerable could have been strengthened. It chose to

not undertake a proper review and went ahead with removing important safeguards.

We have heard from several witnesses who have attested to the fact that under the current MAID legislation they have been taken advantage of and made to feel increasingly vulnerable. We heard from Roger Foley. He is a man living with serious disabilities, a caretaker for his father when he battled cancer, who became subjected to coercion into assisted death by abuse, neglect, lack of care and threats.

We also heard from the national executive director for the Disabled Women's Network Canada, who told Ruth's story. It was a story of a woman living with a disability who is not dying, but her inability to access proper care has left her considering MAID.

● (1055)

Moreover, the executive vice-president at Inclusion Canada told us that Bill C-7 is the disabled community's worst nightmare. Their biggest fear has always been that having a disability would become an acceptable reason for state-provided suicide. The disabled community has made it clear time and time again that they feel directly targeted by this new MAID legislation, that their lives are worth so little that they are better off to be dead than to live with a disability.

Despite the review of the MAID legislation never happening, here we are debating its expansion through Bill C-7, with the rationale being this bill is stated to reflect a societal consensus informed by views and concerns raised by Canadians, experts, practitioners, stakeholders, indigenous groups as well as provinces and territories during public consultations undertaken in January and February 2020. As Bill C-7 was originally proposed in February 2020, how could we have accessed a societal consensus on this in such a short period of time?

This brings us to the actual survey the Minister of Justice so often references in defending this bill. Many Canadians were deeply concerned about the ambiguity of the survey and online consultation that took place. Many of the questions were very ambiguous, and some people had an incredibly difficult time answering the questions, as they had to consent to different premises from what they believed.

Dr. Heidi Janz of the Council of Canadians with Disabilities gave her thoughts on the consultation process, stating:

I believe the consultation was moderately extensive; however, I believe that the consultation was geared towards a predetermined outcome. That is evident by the types of questions that were asked in the online survey and which seemed to be assuming that MAID would be expanded.

### *Government Orders*

The government has missed the review of its prior legislation, having removed safeguards, and according to Dr. Janz, had consultations that seemed to have a predetermined outcome. We really have to wonder if proper consultations took place and the feedback given was acted on, or if the outcomes may have been predetermined.

The government must know that this is a deeply flawed piece of legislation by now. We know that the Minister of Employment, Workforce Development and Disability Inclusion realizes the serious issues with this bill in reference to Roger Foley's story and of other vulnerable Canadians when she said before the Senate committee:

I absolutely acknowledge and am quite preoccupied by the power imbalance between practitioners and patients, particularly patients who have been in systems that have discriminated against them and ignored their voices their entire lives. I have grave concerns with the particular circumstances of the individual that you spoke of. Quite frankly, I can tell you, he is not alone. I regularly hear from families who are appalled by the fact that they take their child, potentially their older child [in] and are offered unprovoked MAID. I think that has to stop. That's a matter of practice, I would suggest, and we need to get at that through our regulations, through working with our medical associations.

What does it say when the minister tasked with inclusion of the disability community in Canada makes a statement like that, yet the government carries on full steam ahead with this bill while rejecting good amendments? What does that say to Canadians who are living with a disability? Does it reaffirm their inherent human dignity or does it say that we do not particularly care about them or their opinions?

It seems like the member for Thunder Bay—Rainy River, who sits on the government side of the House, gets it. He is concerned for the well-being of the vulnerable and the potential victims of this bill. He said, "I don't like voting against my party, but as someone with a medical background and somebody who has dealt with this issue over the years a lot, I think morally it's incumbent upon me to stand up when it comes to issues of health and life and death."

● (1100)

He went to say:

My biggest concern, as somebody who has spent my whole life trying to avoid accidentally killing people, is that we don't end up using MAID for people who don't really want to die.... I think, with a bit of time, people may come around to the fact that there are reasons they want to live.

Members can see that Kristine Cowley, who injured her spine 33 years ago, now has a doctorate and is a professor at a university, was a wheelchair track Paralympian, is married and has three children and has travelled extensively, all of which was done after her accident. She shared that it took her five years after her spinal cord injury to feel great again. She said:

To all outward appearances, I am a 'successful' person living and contributing to our community. But I'd be lying if I told you...that I was good to go within 3 months of my injury when I was discharged from the hospital. In fact, it was a few years before I was able to open my eyes in the morning and feel good.

Then there is the story of David Shannon. David suffered a spinal cord injury in a rugby scrum when he was 18 years old. After his accident, he said that he lay in bed close to death more times than he wished 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. David wrote:

...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.

How many stories like those of Kris or David will not happen because of this dangerous bill? How many stories of resilience and great Canadian comebacks will not happen because people will be offered death before proper care when they are at their lowest?

The Minister of Justice called my colleagues and me who are standing up and speaking for the voiceless and the vulnerable a "rump element" of the Conservative caucus. Now, that rump represents nearly one-third of this Parliament and represents Canadians from the Maritimes to the west coast and all points in between who will always stand up for the vulnerable. I would remind the minister that he and his colleagues have silenced the voices that we are speaking for. He can try to silence the disabled community who cry in fear for their future, but he cannot silence our voices. He will not silence my voice.

Does the minister believe that the people we are fighting for are also a rump of Canadian society? Does he believe that Canadians living with a disability are a rump element? That is what it looks like to me. The disrespect and the eye-rolling coming from the Liberals when the disability community has tried to voice their concerns really is something to behold.

Death will be offered to Canadians before they are given proper access to meaningful care, the care they need to feel good again. We need to re-evaluate our priorities and shift our focus to reaffirming the inherent human dignity of all people, and especially those who are vulnerable. It is our duty to keep their preferential option in mind as we make decisions in this place. It is quite clear that Bill C-7 does not have the preferential option for the vulnerable in mind and does absolutely nothing to affirm the human dignity of the vulnerable.

● (1105)

We will offer death to people when they are at their lowest, after an injury resulting in a disability when hope seems lost and they are in the depths of despair. Instead of offering help and treatment and care, we will offer death. Despair can be transient. It can come and it can go. During the low points, people need support. Really, it is as simple as that.

We must ensure that people have access to the care they need first, to ensure that they can make an informed decision when it comes to life and death. Anything short of that is not just, and may be a form of coercion in and of itself. That says nothing of the damage that will be done by the sunset clause added to this bill, that demands that provisions be made to administer MAID to those who have mental illness.

*Government Orders*

This came as a shocking revelation, given the difficulty people have in accessing mental health treatment across this country. Without adequate care, illnesses that are treatable can appear not to be. We, again, are seeing people being offered death before they are being offered care. Right now, 6,000 people with the most severe forms of mental illness are waiting up to five years to get the specialized treatment they need to reduce symptoms, learn to cope and to feel better.

Instead of working to better those systems, to give people the help they need when they need it most, the government is striving to offer them death. When appearing before the Senate, Dr. John Maher, a psychiatrist who works only with people who have the most severe and persistent mental illness, said:

Clinical relationships are already being profoundly undermined. My patients are asking: "Why try to recover when MAID is coming and I will be able to choose death?" Some of my patients keep asking for MAID while they are getting better but can't recognize that yet.

That speaks to the need for better and more accessible mental health treatments in this country. People with mental illness should not feel the need to end their lives for lack of treatment and the hope this can bring.

Dr. Maher went on to say:

Determining whether a particular psychiatric disease is irremediable is impossible; people recover after 2 years and after 15 years. I have repeatedly [have] psychiatrists refer patients to me where I am told they will never get better; yet they have all improved symptom control and reduced suffering when they finally get intensive care.

We need to help people get better and to give them hope, not do everything we can to make death the easiest path for them.

I urge my colleagues on all sides of the House to reaffirm the dignity that is inherent and inalienable in all people, in every person, and to keep the preferential option for the vulnerable in mind. That option is care and support, not death.

I will continue to fight and speak up for the voiceless and those who will be victimized by this bill. We must ensure that someone's worst day is not their last.

• (1110)

At this time, I move:

That the motion be amended by:

(a) replacing the words "agrees with amendment 1(a)(ii) made by the Senate" with "respectfully disagrees with amendment 1(a)(ii) made by the Senate because, in the Justice Department's own words, it 'could be seen as undermining suicide prevention initiatives and normalizing death as a solution to many forms of suffering'";

(b) deleting all the words beginning with the words "as a consequence" and concluding with the words "receive the report"; and

(c) replacing the words "section 6 be amended by replacing the words '18 months after' with the words 'on the second anniversary of'" with "section 6 be deleted".

• (1115)

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** The amendment is in order.

Questions and comments, the hon. member for Kingston and the Islands.

**Mr. Mark Gerretsen (Kingston and the Islands, Lib.):** Madam Speaker, is it possible, on one issue in the House, to not have the partisan rhetoric that comes from the Conservatives on this? It is all about "Liberals want this," and "Liberals want to take this away," on an issue as important as this one. The member uses it as an opportunity to promote partisan rhetoric in the House.

The member talks about lives on the line, as though the Conservative Party is suddenly the voice for the suffering. I have a question for him. My father-in-law was diagnosed with brain cancer and fought for many months to live. In December of last year, he was told that the fight was over and he would not be able to live much longer. He suffered for five to six days endlessly.

What does the member have to say to my mother-in-law and other people in that same situation? He should talk to them for a moment.

**Mr. Michael Barrett:** Madam Speaker, I offer my condolences and sympathies to the member opposite and his family.

With respect to the bill and the charge that it becomes a partisan issue, the lead minister on the bill, the Minister of Justice and Attorney General of Canada, accused those who have a differing view of being a rump of Canadian society. The government had the opportunity to introduce this legislation sooner, but instead shut down Parliament for the most partisan of reasons. It did not expand its efforts to hear from Canadians, other than those on the side of the issue it wanted to hear from, with a predetermined outcome.

I encourage more collaboration from the government going forward.

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** There are a lot of people who want to ask questions. I would ask members to keep their interactions to one minute.

Questions and comments, the hon. member for Montcalm.

[*Translation*]

**Mr. Luc Thériault (Montcalm, BQ):** Madam Speaker, I believe that partisanship has no place in a debate such as this. We respect everyone's beliefs, but we must be rational.

I do not understand my colleague. In a debate and a parliamentary process, there is a vote. This vote was held in December and the House decided to pass the bill. Today, the Senate is proposing amendments that would have a committee carry out an in-depth study of the Criminal Code provisions.

My colleague spoke at length about protecting Canadians with disabilities and the fact that they are worried. Some Canadians have irreversible diseases and experience intolerable suffering.

Why will the member not agree to examine these difficult issues, specifically the protection of persons with disabilities and palliative care in Canada? Why does he oppose the possibility of continuing the debate at a committee?

*Government Orders*

• (1120)

[*English*]

**Mr. Michael Barrett:** Madam Speaker, the original legislation that came before Bill C-7 required that a review be exercised by the government. That was not a suggestion: That was the instruction of this place, of parliamentarians, to the government. The Liberals did not complete the review the first time. It is concerning when we are being asked to advance legislation under the commitment that there will be a committee, there will be more review and more study.

Why do we not get it right before we pass the legislation? The government has tools in its toolbox to review this and to get it right in advance.

**Ms. Leah Gazan (Winnipeg Centre, NDP):** Madam Speaker, I agree with my colleague that many persons with disabilities are unable to live in dignity. We know that persons with disabilities often live in poverty, which becomes more pronounced in BIPOC communities, and we know that there is a direct correlation between poverty and mental health. However, every time I have asked members of the Conservative Party if they are willing to support a call from the disability community to ensure dignity with a guaranteed livable income in addition to disability benefits, affordable, accessible social housing, and the supports they need to survive, I am not given a clear answer.

Does the member support all three items I have mentioned in his discussion about dignity, to ensure people can live in dignity?

**Mr. Michael Barrett:** Madam Speaker, there is a tremendous amount of work to be done on ensuring that all Canadians and marginalized Canadians, the ones that the member described, have the access and the resources that they need: sufficient support from the government, financially; safe, reliable, affordable housing; and access to the medications that they need. Those are tremendously important discussions. I cannot speak for all of my colleagues. I can tell the member that I would be very happy to work and see where we can find common ground to advance those important issues for Canadians.

**Ms. Raquel Dancho (Kildonan—St. Paul, CPC):** Madam Speaker, my colleague spoke at length about the well-known and, frankly, growing concern of the disability community concerning this radical expansion of MAID. However, those concerns from Canada's disability community seemed to have been ignored by the Liberal government. The Minister of Justice, who is responsible for this bill, rarely seems to validate, answer or address those concerns at all.

Can my colleague share his thoughts on the Minister of Justice ignoring these real and legitimate concerns and fears of the disability community in Canada concerning this radical expansion of MAID?

**Mr. Michael Barrett:** Madam Speaker, a quote that I offered from one of the experts who testified said that it seems like there was a predetermined outcome in mind from the government and it took extensive lobbying meetings from organizations that lined up very tightly with what the government wanted to see. That is very discouraging. The government had dozens of meetings with the groups it was talking to, instead of hearing from the disability community and their advocates.

These are folks who have not lived in poverty, who have not struggled for access and who do not represent the side of the issue that we are speaking to today. That is why we need to make sure that we get this right, because we have not heard that perspective. The Minister of Justice has not recognized that perspective.

**Mrs. Jenica Atwin (Fredericton, GP):** Madam Speaker, I am concerned a bit about moving forward. The member talked about the importance of getting this right. I too want to get this right, especially for the disability community. However, I am really concerned about some of the rhetoric, some of the hyperbole and some of the examples that are given that do not align with what this bill outlines.

Coercion, for example, is illegal. One must be offered proper care. It is important to highlight the stories, as mentioned, of the positive aspects of following through on a life with a disability. That needs to continue to be talked about in a positive way and not add more fear and untruth to the conversation.

Does the member agree that we must be very careful with our wording around this?

• (1125)

**Mr. Michael Barrett:** Madam Speaker, I agree with the member. That is why I wanted to offer quotes. I wanted to put this in the words of those who are affected. I will go back, look at my remarks and ensure that I speak to the lived experiences of those who are affected by this legislation. We need to make sure that is how we frame the conversation and how I frame the conversation going forward.

[*Translation*]

**Mr. Luc Thériault (Montcalm, BQ):** Madam Speaker, I do not want to keep members in suspense for too long. The Bloc Québécois will support the government's motion, and I will explain why.

I would like to tell all my colleagues that we need to work across party lines on these sensitive issues and find a way to move forward.

I remind my colleagues that Quebec's end-of-life legislation has often been cited as an example, not only because it is a good system, but also because of the way all members of the Quebec National Assembly worked together to create that system. Quebec's act came into force in 2015. The Select Committee on Dying with Dignity was created in 2009. The legislation was passed in 2014 and assented to in June 2014. This means that there was a process that ultimately involved debate. The Quebec National Assembly was able to consider all the differences and find common ground, which served as the foundation for the act. At the end of the process there were very few people against the act. There was broad consensus on this piece of legislation, both in the National Assembly and among Quebecers.

In Ottawa, members have always taken action in response to court rulings. The amendments that need to be made to the Criminal Code in order to incorporate all of these sensitive issues are related to a court ruling. In this case, the legislators finally need to take action because the law has been deemed unconstitutional and found to violate fundamental rights.

*Government Orders*

According to Boudouin and Carter, Bill C-14 deprives people of the right to life. For example, it was depriving Ms. Carter, Ms. Gladu, Mr. Truchon and Ms. Taylor of their right to life because they were being forced to shorten their lives. That is not a trivial matter. It is serious.

My Conservative colleagues are saying that we need to protect human dignity and life. I completely agree, but it is important that we not create the opposite effect of what we claim to defend through government paternalism. Vulnerable people are capable of defending and exercising their rights.

However, it is rather appalling to see that, since Bill C-14 was introduced and since a decision was rendered in Carter, we have placed on the shoulders of vulnerable people, people with irreversible diseases, people who are enduring unbearable suffering, the burden of defending their case before the court in order to get access to medical assistance in dying.

Why are we agreeing to vote in favour of the motion? We are doing so because we need to make progress in a debate like this.

I have said this before and I will come back to it again later. Even though we said that we agree with the underlying principles of Bill C-7, we would have liked for the bill to go a little further. However, we still need to recognize that Bill C-7 responds to situations like those of Ms. Gladu, Mr. Truchon and Ms. Parker.

• (1130)

Bill C-7 also makes it possible for people in the terminal phase of life—I am not talking about the terminal stage of an illness when death is not foreseeable—to avoid waiting the mandatory 10 days with two witnesses before finally proceeding. Many people with cancer go through a long process. Even in the most aggressive cases, it takes a few months. People wait until the last minute to proceed because nobody wants to die. Everyone wants to wait until the last minute and push the limits of what they can tolerate. Once they reach that limit, these people want help.

Once in the terminal phase of life, a person who had been receiving palliative care at home may be taken to the hospital urgently, where health workers will note their rapidly deteriorating condition. Consider a person who, for the past two years, six months or three months, has always told their therapists that they want medical assistance in dying because they do not want to suffer. This person has been receiving palliative care and medication at home, but their condition is deteriorating. Why should they have to wait 10 days for access to medical assistance in dying in the terminal phase of life when the process of dying has begun and is irreversible? Bill C-7 covers this situation and offers this option. That is a step in the right direction.

There are of course other sensitive issues to be addressed, such as mental illness as the sole underlying medical condition. In my remarks last December, I had the opportunity to say that, as a parliamentarian and legislator, I did not have the expertise to reach a decision on that point. I think it is wise that the motion implies two things and that an independent panel of experts is being set up. The panel will have to look at the recommended protocols, guidelines and safeguards for MAID requests from patients with mental illness as their only condition.

Earlier, my Conservative colleague was talking about the requirement to have safeguards that protect the individual and help prevent abuse. Our Conservative colleagues would have us believe that we are in some sort of house of horrors, as though the health care system itself were inherently evil, and we need to protect persons with disabilities because our prejudices about these individuals might cause health care professionals to give up, as though people are going to be coerced and euthanized without their consent. I find it very difficult to understand that kind of rhetoric.

A similar independent panel of experts was set up in Quebec and a report was prepared. I think we should carry on with this work to get a clearer picture. Not only will the panel of experts deal with this issue, but there will also be something else we have been asking for for a long time, and that is the creation of a review committee for the entire body of work. Bill C-7 could have included amendments to C-14, An Act to amend the Criminal Code, which could have led to a new review of the legislation in two, three or four years. In just 30 days a special joint committee will study the issues of mature minors, advance requests, mental illness, palliative care in Canada and the protection of Canadians with disabilities.

• (1135)

Whether or not an election is triggered and there ends up being a change in government this committee is enshrined in law and will begin sitting in 30 days. It will work for a year before tabling its recommendations. We may reach a consensus or hold discussions for at least 12 months, which the court-imposed deadlines did not allow Parliament to do in relation to Bill C-7 and its previous version, Bill C-14. I think it is necessary.

To come back to the social acceptance of Bill C-7, I would point out to my Conservative colleagues that an average of 80% of people across the country approve it, from 88% in Quebec to 77% in Alberta. I think moving forward is a reasonable compromise. If in 24 months MAID is made available to people with mental illness, this deadline will help determine the necessary safeguards to make practitioners comfortable with this as well. In fact, we need to hear their point of view on this.

On the issue of advance requests for medical assistance in dying, I find it timely that the committee will start sitting in 30 days and that its members will work hard across party lines for the benefit of people who are suffering, like Sarah Demontigny. We will not forget these people, and we will establish a process to ensure that the advance requests they are drafting today will apply once our work is done. That is my hope.

Without making assumptions about the results of our efforts, I think we can come up with something better than the amendment proposed by the Senate if we have meaningful discussions and hear from witnesses. This would make it possible for Quebec, which is responsible for implementing this practice of advance requests, to properly regulate it. We could identify how to best amend the Criminal Code to allow for this.

*Government Orders*

I spoke about the legal aspect, but I will now come back to the fundamental principles. We are in the process of reaching a compromise because reason dictates that we must move forward. Bill C-7 represented a step in the right direction with the official commitment of an expert panel on mental health. I think it would be a good idea that the special committee I mentioned be a joint committee. This would ensure that everyone is doing the same work and hearing the same witnesses at the same time to eventually arrive at a conclusion, rather than having a game of ping pong between the two chambers—one of which is outdated, in our opinion. Let us rally together.

We are doing this for those who are suffering, who have waited too long and who, today, have hope that we will finally complete this work. I believe that the government's motion represents the light at the end of the tunnel for these people, because there is a deadline and we will get there if we all act in good faith and without partisanship.

Bill C-7 already contains fundamental principles, which I will repeat. First, death—my death, just like my life—belongs to me. Why did I say that and why did I say earlier that the Conservatives are practising government paternalism?

● (1140)

I said those things because my own death is a very personal thing, and the state must not tell me what to do or make decisions for me. The state should be creating a framework to protect my decisions. I do not think people should be pressured or forced to go into palliative care until their last breath or to request medical assistance in dying.

During any clinical study, the patient is the standard. When someone who is ill has determined their own limit of what is tolerable, but in reality, it is a continuum and they complement each other. Later in my speech I will define the notion of human dignity.

I find it very disturbing that in the debate on medical assistance in dying, MAID and palliative care are always pitted against each other. Later in my speech I will define the notion of human dignity.

Who would not want to receive palliative care before dying from a serious degenerative disease that causes intolerable suffering? We all want relief; no one wants to suffer.

When it comes to end-of-life care, the least you can give someone is palliative care. Unfortunately, for the past 50 years, palliative care has not been the only answer for everyone, unless one is ideologically committed and determined to prove it. At that point, someone comes to the patient's bedside and imposes some religious or other ideology. No, that is not it.

We are in a process where it is imperative that we consider that palliative care can be successful even when a patient's request for MAID emerges. Why? Because the patient is at peace and ready to let go. In fact, I hope all my colleagues are at peace and able to let go when the time comes. This could also be an example of very good palliative care. Palliative care is about support when someone is dying, the easing of suffering and psychological support. It is possible that some will die after suffering until the end, but it is also

possible that some are ready to let go. That is when they can be supported.

It is not up to the family or the state to make decisions on behalf of the dying patient or the person suffering from a serious and irreversible condition causing intolerable suffering. The underlying principle of Bill C-7 puts into perspective what is enshrined in law for every human being, namely self-determination.

The law guarantees everyone the right to self-determination. Why take this right away from me at the most intimate moment of my life, meaning my death? Why should the state be allowed to take away my right to self-determination in my decision to suffer until I die in palliative care or to seek MAID? It would be utterly absurd for the state to assume that power.

● (1145)

The state must provide us a framework to be able to do this. I often hear members talk about human dignity. Human dignity implies that we must absolutely—

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** I am sorry, but time is up. The hon. member will have 10 minutes to answer questions, which will allow him to add a few comments.

The hon. member for Sturgeon River—Parkland.

[*English*]

**Mr. Dane Lloyd (Sturgeon River—Parkland, CPC):** Madam Speaker, I listened with interest to my colleague's statement and he said that it is his life and he should be able to choose his own death. When I look at the member, with all due respect, he is a privileged, able-bodied person, so it is easy to make those kinds of statements. I ask the member to put himself in the shoes of a disabled person with the pressures they face, such as Roger Foley. He wants to live and wants the choice to live, but the medical system has put pressure on him to end his life. Disabled people are telling us that they are facing so much pressure.

Clearly this is not just a matter of choice. There is a lot of pressure being put on members of marginalized communities and they fear that the bill is making them second-class citizens. I ask the member to put himself in the shoes of a disabled person and ask himself the same question.

[*Translation*]

**Mr. Luc Thériault:** Madam Speaker, I am not sure if the hon. member asked a specific question. Nonetheless, I would remind my colleague that Senator Petitclerc is the sponsor of the bill amended in the Senate that would make MAID available to everyone, including persons suffering from mental illness.

I would also remind my colleague that the lawyer for Ms. Carter and Ms. Taylor was himself in a wheelchair and, during testimony in committee, he said he was sick of being infantilized and that his capacity for self-determination made him fully capable of standing up for himself.

I do not deny that persons with disabilities are anxious, but while we say that I think there are provisions when it comes to legal proceedings—



*Government Orders*

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** I must interrupt the hon. member because there are many questions.

The hon. member for Kingston and the Islands.

[*English*]

**Mr. Mark Gerretsen (Kingston and the Islands, Lib.):** Madam Speaker, I noticed that during the member for Montcalm's speech, he referenced some of the comments he has heard members make, and specifically, as I have been hearing, the concept that a doctor is just going to say, "You have a disability? Maybe you should consider MAID, then." The reality of the situation is that no doctor operating under the ethical principles we have in our great health care system is going to operate in such a manner. I believe this is more of a fear tactic than anything.

Would the member agree with me that it is extremely troubling when members make those kinds of suggestions?

[*Translation*]

**Mr. Luc Thériault:** Madam Speaker, Mr. Foley filed a court action and he can exercise his rights. If someone in the health system is proven to have done harm, the necessary sanctions must be imposed.

If, in the health system, someone does harm rather than doing good, let us show them the door. I do not believe that there is an organized group of people who want to euthanize people en masse. People want to save lives and respect the will of patients.

I hope we will get back to a rational discussion. I believe that everyone can be represented. We do have courts.

• (1150)

[*English*]

**Mr. Alistair MacGregor (Cowichan—Malahat—Langford, NDP):** Madam Speaker, the member for Montcalm indicated that the Bloc will be supporting the government's motion in response to the Senate amendments, and I want to ask him specifically about the sunset clause. I listened with great interest to his arguments, but he would know full well that Bill C-14 mandated a legislative review, which was supposed to have begun at the beginning of the fifth year, in June 2020. We are already way past that date.

The government's charter statement raised concerns about extending this law to mental illness, and even the justice committee's review of the bill showed that safeguard protocols do not exist and that it would take a significant amount of time to develop them. I am not necessarily against this, but would the member not agree that it would probably be a better approach to have a full review before we actually engage in an amendment to the legislation?

[*Translation*]

**Mr. Luc Thériault:** Madam Speaker, I believe we must move forward.

Bill C-7 already makes it possible to cover situations such as those of Ms. Gladu, Mr. Truchon and Ms. Parker. We can go further by trying to specifically address the delicate issues not resolved by Bill C-7.

I know we can do it especially since we will be informed by a panel of independent experts that will also table its report and that we will be able to invite to committee. Given the terms of the motion, I believe that we can do this in one year.

**Ms. Marie-Hélène Gaudreau (Laurentides—Labelle, BQ):** Madam Speaker, my colleague's remarks and explanations were amazing. I truly appreciate him.

I want everyone who is concerned about abuse, victims or the process to know that I was with my father at the end of his life, with my uncle and with a quadriplegic friend who wanted nothing more than to live and who is now an engineer. They never told us that they did not want to live.

I would like to ask something of the House and of all those who will vote on creating this special committee, which I see as an extraordinary committee for debating and exploring the potential for abuse. I would invite all of my fellow parliamentarians to talk to someone they know, maybe even someone close to them, and ask them to truly share their experience so that when the time comes to vote on the motion, we can have an entirely rational and non-partisan vote.

I would like my colleague to tell me if the special committee will consider the extreme vigilance that must be in place to ensure appropriate care for people with disabilities in particular.

**Mr. Luc Thériault:** Madam Speaker, with respect to the part of the motion that is about including the issue of people with disabilities and related safeguards, I think my colleagues on the committee will be able to discuss measures that should be taken to reassure everyone.

However, first and foremost, we have to acknowledge that health care providers are well-meaning and caring. None of this makes sense if we believe some people do not mean well and will not do right by their patients.

If they are ill-intentioned and uncaring, they need to go. A societal debate does not hinge on exceptions. That is what the courts are for.

• (1155)

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** We have time for another brief question.

The hon. member for Thérèse-De Blainville.

**Ms. Louise Chabot (Thérèse-De Blainville, BQ):** Madam Speaker, I thank my colleague and applaud his eloquent speech.

One part of his speech stood out to me. My colleague said that we will continue to move forward, and I would say that we must move forward. I would even say that society is more advanced than we are in this debate today.

I heard a Conservative member say this bill offers death. I deeply resent that remark, because our job as parliamentarians is specifically to move forward with the right to die with dignity in keeping with society's wishes.

I have the same question for my colleague. How can the committee help us move further ahead with Bill C-7?

*Government Orders*

**Mr. Luc Thériault:** Madam Speaker, without presuming what the committee will find, I think that advance requests for neurocognitive diseases will be possible, but we will also be able to make some technical amendments to the existing law to make it fairer.

That is what I would say, since Bill C-7 was a closed bill that could not be used to make amendments to Bill C-14. We can now look at this issue and see how the law can be improved. The concept of advance requests can be dealt with, with all of the necessary safeguards to reassure everyone, including practitioners, because this is a new practice—

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** I am sorry to interrupt, but the member's time has expired.

[*English*]

Resuming debate, the hon. member for Cowichan—Malahat—Langford.

**Mr. Alistair MacGregor (Cowichan—Malahat—Langford, NDP):** Madam Speaker, we certainly are dealing with a very sensitive subject matter with today. This Parliament and the last Parliament both have had quite a long journey in dealing with the substance and subject matter of medical assistance in dying.

I know that I along with many of my colleagues in all parties have been recipients of a huge amount of correspondence on this subject matter, both from organized groups across the country and our very own constituents. It can be hard as a member of Parliament to find one's own way through all of that, because the feedback we receive and the strong passions are evident on both sides of the argument. I was a witness to that with Bill C-14 and, of course, it has been replayed for Bill C-7.

There have been difficult conversations with constituents. I have constituents who feel the government legislation does not go far enough. They felt that way for Bill C-14 and some feel the same way for Bill C-7. Others feel it goes too far and establishes dangerous precedents. It can be tough, but in those conversations I have had with my constituents, I have always tried to guide myself with the difference between sympathy and empathy. With sympathy, we can feel sorry for one's situation in life, but we are still looking at another person's situation with our own biases and world view, whereas true empathy, which is very much required when we are dealing with medical assistance in dying, is to try to put ourselves into that other person's shoes, to try to see the world from their point of view, to see exactly why these issues and matters are so important to them.

I also try to use section 7 of the charter to guide myself, the fact that it is explicitly written that everyone has the right to life, liberty and security of the person and the right not to be deprived thereof, except in accordance with the principles of fundamental justice. Essentially it means that people have a right to control their own bodily integrity. It is engaged whenever the state tries to interfere with personal autonomy.

This is really the crux of the matter. It is personal autonomy, a person's decision on how he or she is going to meet the end of his or her life. For those of us who are blessed to lead healthy lives, who are not intolerably suffering from a grievous and irremediable medical condition, we really cannot know what other people's lives

are like. We do not know what it is like for those people to not have autonomy over their own bodily functions or their bodily integrity, so to speak.

In today's debate, one thing should be very clear. The House of Commons has already spoken to Bill C-7. We have already decided on what we want to do as the people's elected representatives. Of course, the Senate has reviewed the final third reading version of the bill that we sent to it and the Senate sent it back to us with some of its recommendations. This is not the time or the place to go over old arguments that were already dealt with by the House. This is really a time for us to focus exclusively on what the Senate has brought to us.

It is important to note that nothing in Bill C-7 is going to change the very high standards set out in the original Bill C-14. To receive medical assistance in dying, patients need to have a condition that is incurable. They must be in a state of irreversible decline and they must be facing intolerable suffering. The door is not being opened wide, as some have suggested. Those basic parameters are still in place.

When we are dealing with this subject matter, it is important to note that most Canadians know someone who has been affected by intolerable suffering at the end of his or her life. Generally, my caucus has been supportive of this bill because it does respond to the need to reduce that unnecessary suffering at the end of life. As I alluded to, section 7 of the charter helps to preserve the autonomy of decision-making for individuals.

• (1200)

I made reference to the fact that most Canadians know someone who has been affected by a disease and intolerable suffering. I have had that personal experience as well with a close family member, and that happened at a time before we had medical assistance in dying. It was a long-drawn-out battle with cancer. It can be hard on the family members too, because they have to watch a beloved family member suffer, in some cases for several months, before the end mercifully does come.

It is a very weighty subject matter, and I want to approach today's debate with that firmly in mind.

I was first elected in 2015, so I was a member of the 42nd Parliament. I was there for all the Bill C-14 debate, which was forced upon Parliament at the time by the Supreme Court of Canada's decision in Carter. We, as New Democrats, ultimately did not support Bill C-14, because we felt the bill at the time was too restrictive. I remember referring to the fact that the courts would force this bill back before Parliament, and that happened with the Quebec Superior Court.

I do not want to dwell too long on this history, but one thing that is very important to mention, in the context of today's debate, is that Bill C-14 had a provision in clause 10, which mandated that a legislative review had to happen at the beginning of the fifth year. I will read it out for my hon. colleagues. Clause 10 reads as follows:

At the start of the fifth year after the day on which this Act receives royal assent, the provisions enacted by this Act are to be referred to the committee of the Senate, of the House of Commons or of both Houses of Parliament that may be designated or established for the purpose of reviewing the provisions.

*Government Orders*

That is very clear language, and the beginning of the fifth year was in June 2020. We are almost at the end of February 2021.

The reason I raise this is that this important legislation review would have dealt with a lot of the questions the House is now considering and debating. It almost feels like we are building parts of the plane as we are flying. Many of these debatable items that are going on with Bill C-7 need a very careful study. They need to have the timeline afforded to them so we can hear from Canadians across the country, from expert witnesses and actually craft a law that responds to those very important bits of feedback.

I also want to take this opportunity to recognize my friend and colleague, the member for Esquimalt—Saanich—Sooke, a neighbouring riding of mine. He has long recognized this legislative requirement of Bill C-14. He has raised it with the Minister of Justice on several occasions.

Due to his frustration at the government's inaction on this front, he introduced Motion No. 51, which would establish a special committee of the House to include a review that would not be limited to but would expand on several issues. It would have looked at requests for medical assistance in dying by mature minors, advanced requests and, most important, requests where mental illness was the sole underlying medical condition. The committee would also be charged with looking at the state of palliative care, the adequacy of safeguards against pressure on the vulnerable and so on. If we had such a committee in place, already looking at these issues, then we may have had some answers to these important questions by this point.

I will move on to what the Senate has sent back to the House. I was reviewing some of the transcripts from the Senate, some from its legal and constitutional affairs committee, but also from its third reading of the bill.

● (1205)

The Senate legal and constitutional affairs committee decided to report back to the main body of the Senate with no amendments to the bill but some observations. The substantive amendments to the bill all came at third reading. For example, there was a proposed change to the wording of subsection 1(2) for mental illness to include a neurocognitive disorder, looking at advanced requests and so on.

Today, we are dealing with the government's response to those amendments. The government has crafted a motion for the House to consider on what amendments it agrees with, those it does not and those it wants to amend. The Senate disagreed with the expanded definition for the exclusion of mental illness. The government's motion disagrees with the advanced request part of it.

However, as a quick summary, the government motion agrees to the sunset clause for the mental health exclusion. Instead of 18 months, the government has proposed it be expanded to two years after royal assent. Essentially this legislation, once it becomes a statute of Canada, if passed in this manner, will have a ticking clock of two years for a committee to come up with the appropriate safeguards in place.

The government's motion in response to the Senate also mandates that the minister is to set up a committee of experts to work on mental health protocols. It requires a voluntary collection of data based on indigenous identity, race and disability. It sets up a joint committee to do the legislative review, starting 30 days after royal assent.

The most substantive part of the government's motion that really stands out to me is the fact the government is agreeing to the sunset clause on the mental health exclusion. The reason it stands out for me is because when Bill C-7 was originally proposed to the House, the government's own charter statement made some very strong references to why mental health, as an underlying condition, was to be excluded. For the government to backtrack on that and agree to a sunset clause stands out to me.

I acknowledge that we will have two years, but with such a substantive change to the law, it would make sense to me as a legislator to have a specific committee set up to look at all the things we need to look at to make this bill appropriate and proper so it fits will all the important safeguards we need to have in place. I am a bit wary of having that timeline put on the House and forcing us to do these things.

My Conservative colleague before me has now proposed an amendment to the government's motion. Basically, the Conservatives are proposing to get rid of the sunset clause. That is the most substantive thing. At first glance, that seems reasonable, but because I have only really had about 10 minutes to adequately review what the Conservatives have proposed, I would like more time to refer back to that in later days.

I mentioned the charter statement the government initially brought out for Bill C-7. I would like to read a highlighted section of that charter statement where it reasons why it wants to exclude the mental health provisions in the bill. It says, "evidence suggests that screening for decision-making capacity is particularly difficult, and subject to a high degree of error." It further says, "mental illness is generally less predictable than physical illness." It also highlights some concerns from other countries that permitted medical assistance in dying for mental illness, namely Belgium, the Netherlands and Luxembourg.

● (1210)

I want to make it clear that I am not necessarily of the opinion that mental health should be excluded, full stop. What I am saying and what I am arguing is that we need to have an appropriate review of all of this incredibly weighty subject matter before we dive into actually changing the legislation.

*Government Orders*

This is backed up by the work that was done in the House of Commons' very own Standing Committee on Justice and Human Rights. The justice committee heard that the protocols and safeguards for medical assistance in dying for those with mental illness do not exist and that it would take a significant amount of time to develop them from a clinical perspective. The fact is that if the committee's work on mental health is not complete within two years, that clause will be sunset. I have a real problem with us putting that part up front before we do the hard work at committee.

If I were to summarize my speech, the real issue I have is that I do not believe we should have a substantive expansion of what Bill C-7 purported to do when the bill was passed by the House. I do not think we should have any expansion to it before we have had those reviews in place.

I realize that in some cases, the Senate does like to provide feedback to the House, and there have been several instances of amendments being proposed by the Senate. The real issue I have, the elephant in the room, is that the Senate is still an unelected and unaccountable body.

As members of Parliament, we have to face our constituents. We are accountable to the people who elected us. Whenever the next election comes, the people of my riding of Cowichan—Malahat—Langford are going to judge me on how well I did my job. It is the same for every single member of Parliament who sits in the House of Commons. We have to be accountable for the things we say in the House and how we vote. Senators do not have to do that. I know there are a lot of honourable people who serve in that institution, but they are free from that accountability mechanism. The real problem I have is that I firmly believe the House must always be the final arbiter in the decisions that are made, because the people of Canada elected us to make the laws on their behalf.

In response to the many concerns I have heard raised, both in the House and in correspondence from the disability community, I would like to leave my colleagues with some thoughts. If we are rightly concerned about how persons with disabilities are currently living in Canada and what their quality of life is like, rather than focusing so much on Bill C-7 and medical assistance in dying, why do we not take this opportunity to start enacting reforms and enacting policies to make their lives better? If we look at the income supports that are out there for persons with disabilities and the amount of money they get to scrape by every month, we see a shameful record on our country, and it is something that we need to fix.

We have already acknowledged through the pandemic and through COVID-19 response measures that individuals should be receiving \$2,000 a month to get by, but we do not afford that to persons with disabilities. Even when the House had an opportunity to get financial aid to that group of people in Canada, it took us over six months to do so. That is a shameful record, and it is something that the House really needs to concentrate on if we are going to adequately and meaningfully address that issue.

I appreciate having had this opportunity to speak to Bill C-7 and I welcome any questions and comments that my colleagues may have.

• (1215)

**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 have a couple of quick comments.

We recognize that there have been literally hundreds of hours of debate and discussion on this issue since 2016. We are once again making some changes in response, in good part, to appeal courts, whether the Supreme Court of Canada or Quebec's supreme court. The member, I believe, is not too far off. Is it time that we get this thing through the House of Commons and maybe even reflect on the role that the Parliament of Canada can play in regard to issues like long-term health care standards and mental illnesses?

Could the member expand upon what he believes our role should be?

**Mr. Alistair MacGregor:** Mr. Speaker, I certainly appreciate the parliamentary secretary's comment about the many hours of debate on both Bill C-14 and Bill C-7 and I am also sensitive to the court deadlines.

That said, it was the government's choice to bring forward a motion that is going to, in my view, substantially alter Bill C-7 with the sunset clause on mental health. By that very action, the government is probably going to provoke much more debate in the House because, as the parliamentary secretary will know, the House already took time to pass a version of the bill. The very fact that the government chose to bring in a sunset clause is going to provoke a lot more debate. That is beyond my control.

The other thing I would note is that I wish the government had been a bit more respectful and had introduced this bill for debate tomorrow so that individual caucuses could have had the opportunity to have a thorough discussion of their concerns around the table.

[Translation]

**Ms. Louise Chabot (Thérèse-De Blainville, BQ):** Mr. Speaker, I have a question about people with disabilities or mental illness, both of which can present in many forms and to varying degrees. Some people are fully competent to request medical assistance in dying, and we need to respect their choice.

The member said that we should instead be focusing on current issues that affect these people, but I think the two go hand in hand.

Why is the member hesitant to adopt the amendments proposed today?

• (1220)

[English]

**Mr. Alistair MacGregor:** Mr. Speaker, when we look at the disability community and persons suffering from mental health issues, it is important for us to remember that they are not one solid bloc of people. There are a variety of opinions and approaches to this subject, both within the disability community and among persons who suffer from mental health challenges. I am very wary when a group says it speaks on behalf of an identifiable group, because we know that opinions on the subject are quite varied.

*Government Orders*

In terms of how we go forward, I am not ultimately going to be able to decide that. That decision is going to be up to the House, but I would refer my hon. colleague back to the answer I gave to the parliamentary secretary: The government chose to bring in a motion that agrees with a substantive amendment, and I think that in itself is going to provoke much more debate and may even serve to ultimately delay the passage of Bill C-7.

**Mr. Charlie Angus (Timmins—James Bay, NDP):** Mr. Speaker, this past weekend I said goodbye to a dear friend. The pain was becoming too much and the cancer was unbeatable, and she passed through medical assistance in dying. However, we are not talking about those cases anymore. We are talking about a dramatic rewriting of the law.

I hear my Liberal colleagues saying we should just get this bill through and that we have talked about it a lot—this when there are serious concerns from the disability community about making them second-class citizens in this country on this issue, when the unelected and unaccountable Senate has now said we should add people who are depressed and have mental illness.

We have fought so hard to make the government stand up on issues. On the national suicide action plan, it has done nothing. We have talked about mental health supports; it has done nothing. We have talked to the government time and time again about disabled people living in poverty; it put it off for another day. Now the government is telling us it is time to rush legislation. It is creating a second track of humanhood in this country for disabled people who do not have the support or ability to live the lives they fully deserve, and now the Senate is willing to say we should include people who are depressed.

Does my hon. colleague think that maybe we need to draw a line here and say we actually have to discuss these issues because they are fundamental to who we are as a nation, rather than go along with the Liberals and the Senate, who say we should just pass this bill and not talk about it?

**Mr. Alistair MacGregor:** Mr. Speaker, I would like to first recognize that the member for Timmins—James Bay is such a stand-up MP for his constituents, and I always appreciate his interventions, especially on this subject matter.

He is very right that we are not here to relitigate the main provisions of Bill C-7, but we do have to discuss what is a very substantive amendment to the bill by the unelected and unaccountable Senate, and that essentially is what is provoking debate on whether or not we agree as a House that the mental health exclusion section of this bill needs to be sunsetted.

If Liberals and Conservatives honestly cared so deeply about the plight of persons with disabilities, they would have agreed to the letter sent by the member for Elmwood—Transcona and the member for Esquimalt—Saanich—Sooke when they wrote to the minister asking that a monthly amount of \$2,200 be awarded to all persons with disabilities to make their lives measurably better.

**Ms. Elizabeth May (Saanich—Gulf Islands, GP):** Mr. Speaker, my colleague from Cowichan—Malahat—Langford speaks of our constituents and their concerns.

A resident of North Saanich within my riding was named Sue Rodriguez, and we know her brave struggle. We know she took it to the Supreme Court of Canada and ultimately had to have medical assistance in dying illegally with former NDP member of Parliament Svend Robinson at her side.

I appreciate what the member for Cowichan—Malahat—Langford has said. I wish we had more time in this place, but the court decision is standing there and the better course is not to have two sets of laws between Quebec and the rest of Canada.

At this point, as it appears from comments that have been made thus far, does the NDP caucus plan to support the government motion in this matter?

• (1225)

**Mr. Alistair MacGregor:** Mr. Speaker, I do not think that I indicated we are in support of the government motion. We have some very real concerns with what the government is doing in supporting that substantive Senate amendment.

I would note that it appears from the comments of my Bloc colleagues that they are going to support the government motion. I can do my math quite clearly and see that the votes add up to a general support of the government's motion. I am cognizant of that fact.

Again, I am looking forward to having a very timely discussion with my caucus colleagues tomorrow, because I know a lot of them have very strong opinions on this matter.

**Mr. Dane Lloyd (Sturgeon River—Parkland, CPC):** Mr. Speaker, I have some concern about the amendments related to mental health. There are very substantive amendments coming out of the Senate. My concern is related to the idea that a mental illness is incurable. In my experience and in listening to the testimony of Dr. Sonu Gaiind from the Canadian Psychiatric Association back in 2016, the association is very hesitant to endorse the idea that a mental illness could be incurable. It could certainly be treatment resistant, but not incurable, and the concern was that as soon as we start saying that mental illnesses are incurable, we are going to be plunging people into despair and people will no longer seek treatment.

What is the threat of labelling mental illnesses as incurable with this legislation, and the potential to end people's lives prematurely?

**Mr. Alistair MacGregor:** Mr. Speaker, that is why I took great pains during the course of my speech to point out that the mandated legislative review, as was spelled out in Bill C-14, has not yet happened, which is why my colleague from Esquimalt—Saanich—Sooke brought in Motion No. 51 to set up a special committee to study the matter.

I really believe, especially with mental illness and the fact that the Standing Committee on Justice and Human Rights said that adequate protocols and safeguards are not yet in place, that we need to have a very substantive review before we change the legislation.

*Government Orders*

Again, I made reference to building the plane as we are flying it. I really believe we need to hear from a committee before we make recommendations as to how the legislation should proceed.

**Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC):** Mr. Speaker, I have appreciated the opportunity to listen to the interventions from various members. It seems the government has, in some sense, brought some members together, though not entirely on the government's side.

I found myself nodding and clapping along to the comments from the member for Timmins—James Bay, and that is something that has never happened before. Never have I agreed so much with the member for Timmins—James Bay as when he talked about how this bill would make people with disabilities—

**The Deputy Speaker:** Order. There is a point of order from the hon. member for Timmins—James Bay.

**Mr. Charlie Angus:** Mr. Speaker, I thank my colleague for recognizing me, but he may want to retract the comments about how impressed he is by me, because I know he is going to be impressed by many other things I say as well.

**The Deputy Speaker:** I think that is sort of in the category of debate at this point.

We will carry on with the hon. member for Sherwood Park—Fort Saskatchewan.

**Mr. Garnett Genuis:** Mr. Speaker, miracles never cease. Maybe this is the beginning of a dramatic change in things. Time will tell.

Regardless, the specific comments by the member for Timmins—James Bay that really were kind of “aha” moments for me was when he said that Bill C-7, even as previously written, and certainly with these proposed amendments, would make people living with disabilities in some sense second-class citizens when accessing our health care systems, as we would put them on a different track. He said it would create “a second track of humanhood in this country”, which is something that all of us should be seized with, especially in response to the repeated testimony of many organizations that represent Canadians with disabilities, as well as organizations representing Canadians dealing with mental health challenges.

We are here debating Senate amendments to Bill C-7, and specifically debating an amendment by my colleague that would try to change the government's response to the largest substantive amendment by the Senate that the government is proposing to agree with. I will delve particularly into the issues of that amendment. However, first of all, the government is using all kinds of arguments today, and previously, about how this has been a long time coming, that it has been debated extensively. I want to respond specifically by commenting a little on the journey that brought us here with this legislation, because we have really taken all kinds of twists and turns far from where this conversation on this particular bill started.

Allegedly, the genesis of this conversation was a lower court decision in Quebec that dealt specifically with the issue of reasonable foreseeability, and not the issue we are talking about today. It is a different issue that dealt with the issue of whether somebody should be able to access euthanasia if their death is not reasonably foreseeable. This court said that a person should be able to access euthanasia in that case. The government, contrary to advice from us, decid-

ed not to appeal that ruling. Importantly, the government could have proceeded with appealing that ruling and then used the window of time available to consider a different legislative response. However, the government created for itself a sharp timeline through its decision to not repeal that ruling.

Subsequent to that, this justice minister brought forward a piece of legislation that deals with many issues related to euthanasia far beyond the parameters of that court decision. The court decision dealt with reasonable foreseeability. I believe that if the government had proposed a piece of legislation that dealt with, and only with, the question of reasonable foreseeability and left other issues for other pieces of legislation, then that bill would have long passed and we would not be talking about fourth extensions, new court deadlines and so forth.

The reason we are in a situation where the bill has not yet passed is that, effectively, the government created an omnibus bill by tacking onto the issue of dealing with reasonable foreseeability many other, unrelated issues: questions of advance consent, questions of removing existing safeguards, questions around the 10-day reflection period. There were many different issues that had to be discussed as the result of the government's decision to put forward legislation, most of which were completely unrelated to the Truchon decision.

I think that, in a very misleading way, the government tried to create this artificial timeline link to the Truchon decision for all sorts of issues that have absolutely nothing to do with the Truchon decision, and there is very little basis for debating that reality. The government could have focused its response to the Truchon decision on the issues raised by that decision, and likely would have been able to justify a more aggressive timeline with respect to the bill, because there would not have been so many issues that needed to be discussed.

The government put all of those additional issues into Bill C-7 while failing to move forward with a mandated legislative review. The previous bill, Bill C-14, had mandated that there would be a legislative review. The government has not moved forward on that at all, and instead packed all of these other issues into Bill C-7. Then we had debate in the House, we had committee hearings and all the way along the government was trying to create as much urgency as it could, saying that “We have to move this forward because of the Truchon decision”, even though there was extra content riding on that issue, far more than was dealt with in the original Truchon decision.

● (1230)

The justice committee held a very limited number of hearings, I think it was only four, on all of the issues raised by Bill C-7. Despite that limited time, many people came forward to express significant concerns and opposition. There were physicians, mental health experts and people representing those in the disability community, and not a single stakeholder representing the disability community expressed support for this legislation. Not only were so many people coming forward to those committee hearings, but there also were over 100 written briefs submitted to the justice committee by individuals or groups who took the time to express their perspective and, generally, their concern about this legislation.

*Government Orders*

The justice committee moved so quickly that it is a veritable certainty that members did not have any reasonable opportunity to review those briefs. In fact, many of those briefs were initially rejected by the committee; then subsequently, thanks to the good work of my colleague from St. Albert—Edmonton, those briefs were formally received, but the committee then immediately proceeded into clause-by-clause consideration of the bill without allowing time to review the content of the briefs.

We had this urgency created by the government's decision to pile issues on top of the Truchon decision that were unrelated to the decision. Then we had extremely limited consultations by the justice committee, as the government tried to use this trick as a justification for pushing the legislation through as quickly as possible.

However, throughout those conversations at the justice committee, the government was clear that its bill and its policy was not to allow euthanasia when the primary underlying complaint is mental health challenges. The Parliamentary Secretary to the Minister of Justice and others have repeatedly spoken about this aspect of the legislation, namely, that it includes an exception clearly specifying that mental health challenges should not be a basis to receive euthanasia.

On that point, the government was right, and even if members have questions about the substantive value of that position, they should appreciate how the question of whether those dealing with mental health challenges as their primary complaint should receive euthanasia is a completely separate question from the issues raised by the Truchon decision.

The bill then went through committee, came back to the House and Conservatives expressed their perspective. The vast majority of our caucus voted against this legislation. We voted in favour of report stage amendments. There was an extension of hours to accommodate the speeches. The bill then went to the Senate and the Senate has now tried to dramatically further expand the bill.

As we all know, the unelected Senate, made up now overwhelmingly of individuals who have no party affiliation and who were appointed by the current Prime Minister, undertook a study that went far beyond the scope of the existing bill and recommended a radical expansion, certainly beyond what stakeholders and the public were looking for, and beyond what had ever been considered or debated by the House of Commons.

Whatever very legitimate criticisms one might have of the old model of the Senate, made up of non-elected people with strong party affiliations and who are not directly accountable, at least there was some mechanism of accountability through political parties. However, now we have in the Senate a vast majority of individuals who are not connected to any political party, who are not identifiable in terms political affiliations, and who are appointed by the Prime Minister without any consultation with other parties, without any kind of oversight, and who then exercise a defining power over legislation. That is a huge problem that we have to grapple with.

Part of how we could grapple with it in the House of Commons is by having the courage, when we receive amendments from the Senate that go far beyond the scope of anything considered in the original debate on the bill, never mind what was in Truchon, to say

“no” to them. We could say that we appreciate the review work that has taken place, but at the end of the day, Canadians elect members of the House of Commons who are empowered to study issues in detail and to hear from Canadians and to come to conclusions.

● (1235)

The Senate can study and make recommendations, but, at the end of the day, what the government is now proposing by adopting the amendment proposed by the Senate with respect to mental health as its position is that the people's House, the House of Commons, should adopt in a single day something that the government had up until now said was not its policy, something that is clearly very complex and requires further study.

Not only is it unrelated to Bill C-7, but it is also completely unrelated and light years away from anything contemplated in the Truchon decision, which dealt very narrowly with the question of reasonable foreseeability.

We have this particular issue of the Truchon decision, with Bill C-7 piling many other issues on top of it, and now we have the Senate piling so many additional issues on top of that, including its proposed amendment on advance directives for those who are healthy. Somehow we, in the House of Commons, are supposed to change our position on this fundamental issue, with no study and no review at committee and the government seems to want this to happen in a single day.

I will go further than that in terms of the process. I was up last night preparing information, looking for the data. It was certainly well after 9:30 p.m. Eastern time, closer to 10:00 p.m. that the Order Paper was published. It was only then that it was evident what the government's position was. The government expects that if it takes a position on this substantive, really earth-shattering issue for Canadians dealing with mental health challenges and their family members, that members will see it and adopt that position, or in any event vote on it, all within a single day.

What a profound degeneration of our democratic institutions the government is trying to preside over. There are many other examples that we could talk about. We could talk about the lack of respect by the government for motions passed by the House of Commons on various other issues.

What we see before us right now is a government, that did not win the popular vote in the last election, telling us to, in a single day, adopt a series of changes that were proposed by a Senate made up of independents that the Liberals appointed primarily, and is complaining about members wanting to engage in these issues at greater depth.

*Government Orders*

The direction the government is taking our democracy is very troubling. I hope that members would stand with us, at least members from all opposition parties, in insisting that the government do so much better on this and support the amendment put forward by my colleague that we are debating right now that rejects this very substantive amendment from the Senate and, instead, say that if the government wants to change its policy with respect to euthanasia for those dealing with mental health challenges, it should at least propose that as part of a legislative package not constrained by a court timeline, and that the House could take the time required to study it at committee, to assess those issues and to move forward, instead of this artificial timeline created by the pairing of the Truchon decision with all of these other issues.

Those issues of process are of critical importance, but I now want to comment on the specific issues raised by this amendment, that is, the government's proposal now to allow euthanasia for people whose primary and only health challenge is a mental health challenge.

All of us, including me, have people in our lives who are close to us, either friends or family members, who have suffered from or are suffering from mental health challenges. I am sure many, if not most, if not all members of the House have had a conversation with someone in their life who comes to them and says, "I don't think I can go on. The pain I am experiencing..."

In those situations, I think for all of us, how we love those people and try to support them is by trying to show them that are loved and valued and that their lives are worth living.

• (1240)

We invest so much time and energy into suicide-prevention education. We try to tell younger people, older people and people of all ages that their lives are valuable, that they are loved and that their lives are worth living. We recognize that for those who are really in the depths of experiencing mental health challenges, it may feel like there is no treatment and there is no going on. However, mental health authorities have said in this country that mental health challenges are not incurable, that it gets better, that there are ways forward and that there are ways of managing, responding to and even fully addressing these kinds of challenges. We as individuals try to send the message to others in these moments of real, existential pain that they are loved and valued, and that there are ways of managing and addressing their pain.

This amendment would radically change that reality. It would take us from a world in which the emphasis is on suicide prevention for those who experience these challenges to a world in which a person who feels that they are in the depths of despair can go to a health care practitioner and say, "This is what I am experiencing. I think I cannot go on." Instead of affirming to the person that life is worth living, that they can be supported and that it does get better, the person would be told that their options are having a practitioner work with them to try to make things better or having the state facilitate their desire for suicide.

What message does it send if we go from a dynamic of suicide prevention to one in which some people experience suicide prevention and others experience suicide facilitation? What if somebody who is in the real depths of existential pain and going through deep

challenges is called upon to choose between suicide prevention and suicide facilitation?

We had a unanimous consent motion adopted by the House to have a national 988 suicide prevention line. What message would it send to people if Parliament were to pass the amendment proposed by the Senate? What message would it send to people in that situation? I wonder what message it would send to young people who are dealing with these challenges.

Of course, the current legislative framework is that euthanasia is only available to those who are 18 years of age and older. That is also being considered as part of a review, so we cannot bank on that remaining a reality if this passes.

I asked what kind of message it would send to young people facing these challenges if we told them that it was acceptable to society for the state to facilitate suicidal ideation for adults, and that the solution was some kind of state-coordinated suicide facilitation. It really is horrible, in terms of the direction it would take us and the example that it would send.

Former Liberal MP Robert-Falcon Ouellette spoke eloquently and shared his perspective, from his indigenous culture and values, about what was so wrong about the government's original Bill C-14. He and I had a town hall in my riding together: a Liberal MP and a Conservative MP. We talked about many issues, most of which we disagreed on but some of which we agreed on. He made the point of asking what message it would send to younger people when older people are told that death is the solution. The values that he brought to the table underline the need for listening to Canadians on this issue. They underline the need for stronger consultation with indigenous communities.

As one previous witness told the committee on Bill C-7, indigenous Canadians are looking for medically assisted life. People with disabilities and mental health challenges would say the same thing: What they are looking for is medical assistance in living, not this rushed track, for those who are dealing with mental health challenges, toward suicide facilitation.

This needs more debate. I believe the amendment from my colleague should be supported to defeat the Senate amendment so that we can do more to protect people in vulnerable situations across the spectrum of challenges, and so that we do not, as the member for Timmins—James Bay spoke about, create a dynamic in this country where those living with disabilities are viewed or treated by our medical system as second-class citizens.

I look forward to the continuing conversation and to questions from my colleagues. Again, we need to do something like that.

• (1245)

**The Deputy Speaker:** Questions and comments, the hon. member for Edmonton Strathcona.



*Government Orders*

**Ms. Heather McPherson (Edmonton Strathcona, NDP):** Mr. Speaker, my colleague and next-door neighbour's passion on this topic is impressive. He is correct that this is probably some of the most important, if not the most important, legislation parliamentarians can contemplate.

While I have not had adequate time to thoroughly review the amendments put forward by his colleague, I will say that I am a supporter of medical assistance in dying. As many other people in the House have mentioned, I have watched family members deal with intolerable suffering. I have watched them lose their dignity and capacity. I support this legislation because everyone deserves self-autonomy. We must make sure that everyone can live their lives with dignity. That means affordable housing, livable income supports and proper access to mental health supports.

I would like to know what the member would say about the need for extended support for people living with disabilities, such as a federal guarantee for support for people living with disabilities.

• (1250)

**Mr. Garnett Genuis:** Mr. Speaker, I agree that we need to look for ways of doing better to support Canadians living with disabilities, to remove barriers that they face and to work collaboratively across jurisdictions to realize those objectives. I hope there will be opportunities to debate some of the specific proposals that the NDP puts forward. I think we would certainly agree on the substance of the desire to do better. There might be some disagreements about the mechanics of how we get there.

The member is right to pinpoint the issue of the importance of autonomy and also the social architecture of choice. An individual's ability to exercise that autonomy depends substantially on the context. If people receive messages when they access the health care system about their life not being worth living, it really undermines their autonomy as well.

**Mr. Arif Virani (Parliamentary Secretary to the Minister of Justice and Attorney General of Canada, Lib.):** Mr. Speaker, first, the notion that there is homogeneity with respect to persons with disabilities on this issue is far from the truth. The Senate's sponsor of the bill is a woman with a disability who supports the initiative of the government, as does a former minister in the Conservative government of Stephen Harper, a gentleman named Steven Fletcher.

Second, hopefully the unfortunate insinuation will not be left on the record that somehow appointments by the current Prime Minister to the Senate are doing work as an end run around what the government's position had been all along. What the Senate is actually doing is taking a sober second thought, as it is constitutionally charged to do.

My question for the member is this. The notion that the Senate amendments are being taken on holus-bolus is inaccurate. What is being contemplated is with respect to taking the mental illness exclusion from 18 months to 24 months for the sunset. Within those 24 months, there would be within one year a task force of experts charged with providing recommendations about how this could be done appropriately, and there would be a further 12 months for Parliament to consider how to do so and whether to do so.

Do those kinds of safeguards address the concerns that the member is raising?

**Mr. Garnett Genuis:** Mr. Speaker, I am very disappointed to see how the parliamentary secretary seems to have changed his position from having argued in the past about the importance and value of a general exclusion for those dealing with mental health. I would encourage him to consult his previous remarks on precisely these issues.

To the member's initial comment about there not being homogeneity in the disability community, there is not homogeneity in any community. There is not homogeneity in the Muslim community or the Christian community. There is not homogeneity among people in Alberta, but there are obviously issues where an overwhelming majority of people from a particular community express themselves through organizations that are empowered to represent them. It would be absurd, on any other issue, for me to ignore what organizations representing people from a particular community were saying, and to say that we had found a couple of people who think differently. Of course there is diversity of thought, but that does not mean we do not listen to stakeholders who represent groups that have these concerns. This is what —.

**The Deputy Speaker:** Questions and comments. The hon. member for Longueuil—Saint-Hubert.

[*Translation*]

**Mr. Denis Trudel (Longueuil—Saint-Hubert, BQ):** Mr. Speaker, I am having a hard time figuring out exactly where my Conservative colleagues stand this morning.

They think the process is being rushed and that things are moving too fast, yet the process itself includes a two-year period to thoroughly examine issues related to people with mental illness. I cannot tell if things are moving too quickly or too slowly for the Conservatives.

The other thing that is so exasperating about my Conservative friends is their use of the word “euthanasia”. In a debate on a topic this delicate and sensitive, people need to be careful about their word choices. Medical assistance in dying is a comprehensive approach to caring for people. The word “euthanasia” has a harsh, cruel connotation.

Here is my question. The Conservatives seem to think we should not pass Bill C-7 now. However, there are people suffering from very serious neurodegenerative diseases who are waiting for the go-ahead from Parliament to move forward in a complicated, complex and sensitive process. What does my colleague have to say to those people today?

• (1255)

[*English*]

**Mr. Garnett Genuis:** Mr. Speaker, there are many issues in there. What we have heard overwhelmingly from people in the disability community and people who are suffering from mental health challenges is that they are looking for supports to stay alive. They are looking for supports to be able to live in a way that affirms and recognizes their innate human dignity.

*Government Orders*

It is frustrating for me to hear members say that people are suffering, so we need to rush to ramp up this death option. I say let us have that same urgency to instead ramp up the life option. Let us have urgency, as parliamentarians, to give people suffering from mental health challenges and people living with disabilities the recognition, the accommodation and the rights that they need and deserve.

I will just comment on the language quickly. The etymological origin of the word “euthanasia” is “good death”. Clearly, we cannot speak of medical assistance in dying anymore because this legislation has taken us far beyond people who are in the process of dying. This is talking about the state or the health care system providing death to people who are not dying.

If the member does not like any of the existing terminology, he at least has to recognize the problem with the medical assistance in dying terminology. Perhaps we can come up with yet another word to use.

**Mrs. Cathay Wagantall (Yorkton—Melville, CPC):** Mr. Speaker, I always appreciate the perspectives and rationale of my colleague. In regard to the issue around providing euthanasia to individuals who simply have mental illness issues, one of our psychiatrists, Dr. Maher, who does extensive work with those who are greatly ill in that particular area, indicates that treatment takes a very long time. Therefore, it is irrational to be offering or providing MAID to these individuals when it takes three to four years of treatment to get symptoms under control, and then the next years are to thrive. Even if symptoms remain, there is the capability to do more than survive, but to cope and have a satisfying life.

I would like his comments on that.

**Mr. Garnett Genuis:** Mr. Speaker, in a 2017 position paper with respect to the previous bill on this issue, Bill C-14, the Canadian Mental Health Association said, “As a recovery-oriented organization, CMHA does not believe that mental illnesses are irremediable.” Again, “CMHA does not believe that mental illnesses are irremediable.” By adopting this amendment as proposed by the government, we would be directly contradicting what the Canadian Mental Health Association is saying with respect to mental illness. This is a government that talks about being guided by experts and science. That has become a totally meaningless talking point for it now. We have all of these organizations and the experts come forward to say that some people disagree. Come on. The evidence is very clear and the experts agree. Let us listen to the Canadian Mental Health Association and support the initiative of—

**The Deputy Speaker:** Time for one last short question in response. The hon. member for New Westminster—Burnaby.

**Mr. Peter Julian (New Westminster—Burnaby, NDP):** Mr. Speaker, the issue raised by the member for Edmonton Strathcona was disability supports: a guaranteed livable basic income, a right to housing and universal pharmacare.

Would the member not agree that these are fundamentally important to improve the quality of life of Canadians with disabilities across the country?

**Mr. Garnett Genuis:** Mr. Speaker, I will agree with the principle that we need to do more and do better to support individuals living with disabilities. There was a private member's bill from my col-

league from Carleton, for example, to ensure access to work for people living with disabilities. I think we need to be thinking about the full spectrum of issues: access to work, access to housing, access to supports when people are not able to work and necessary supports, in any event.

To go into all of the depth required would be another debate, but I look forward to a time when we can have a discussion about how to do better to strengthen the living option, instead of these challenges always being used by the Liberal government as an excuse to ramp up the dying option. We should be talking more about how to facilitate assistance in living, as opposed to in dying. The priorities the government has when it is putting things before the House are so frustrating. In the middle of a public health crisis, the focus on trying to create an urgency around the death ramp, as opposed to the life ramp, is—

● (1300)

**The Deputy Speaker:** The time has expired, so we will now resume debate with the hon. Parliamentary Secretary to the Minister of Justice.

[*Translation*]

**Mr. Arif Virani (Parliamentary Secretary to the Minister of Justice and Attorney General of Canada, Lib.):** Mr. Speaker, I am very pleased to participate in the consideration of the amendments proposed by the Senate to Bill C-7, which seeks to amend the Criminal Code provisions on medical assistance in dying.

Our colleagues did a lot of work on Bill C-7 and proposed reasoned amendments following careful deliberations. The Standing Senate Committee on Legal and Constitutional Affairs heard from a variety of witnesses as part of two different studies. I followed the debate at second and third reading and thought that the speeches given in the Senate reflected the range of perspectives shared by the many witnesses.

It is therefore with great respect for the work of the Senate that we are examining the amendments it is proposing to Bill C-7. As the minister explained, there are three amendments that we plan to support, with some adjustments.

[*English*]

The first relates to the collection and analysis of data about the race of persons seeking MAID. Let me say here that we have heard extensively in the House of Commons and the Senate about the need for better and more robust data collection with respect to MAID. That data has been collected since MAID first entered into the legislative landscape, but certainly improvements can be made.

It is important now, especially during Black History Month, to note that one of the Senate amendments proposes tracking the analysis of data on the race of persons who are accessing MAID. This is important because we have clearly seen a light shone on the important issue of systemic racism in Canada, North America and around the planet. We need to understand how racialized persons, because of their inherent vulnerability, may be disproportionately impacted by MAID and address that vulnerability with our legislative response.

I would say, however, as articulated by previous speakers, including the minister, that the amendment the government proposes to make to this portion of what the Senate is suggesting would make it more inclusive in light of all of the witness testimony given in both the House and the Senate. By that I mean in addition to race-based data, data about disability and indigenous identity would be collected and analyzed. This, of course, is important, especially and specifically as we broaden the MAID regime to circumstances where death is not reasonably foreseeable, in response to the Truchon decision, which creates the real possibility that people will seek and obtain MAID because of vulnerabilities in their lives as opposed to their health conditions. I am grateful to the Senate for proposing this important legislative change.

The second Senate amendment the government supports, with some adjustments, is the sunset clause that attaches to the mental illness exclusion. We heard extensively about this from the previous speaker and in other interventions that have been made. The Senate amendment proposes a sunset clause of 18 months. The government is suggesting that the sunset clause be extended to 24 months.

Second, and very importantly, we are requiring that the Minister of Justice and the Minister of Health ask a group of experts to make recommendations on safeguards, protocols and guidance for MAID on the basis of mental illness alone. Those experts would be required to report back to the ministers within one year, which would leave an additional year for the government to consider what safeguards should be legislated and for Parliament to consider things when enacting any subsequent legislation.

I want to give some context surrounding the sunset clause because it is obviously a pressing matter for today's debate and a pressing issue for all parliamentarians.

The government's position is that it needs more time to consider and enact safeguards for the population of people whose sole underlying condition is a mental illness. The Minister of Justice was always clear that the questions of whether MAID for mental illness should be allowed and, if so, what safeguards were needed would be studied in the course of an upcoming parliamentary review.

What the sunset clause would do, in combination with a requirement for an expert review, is commit to a definite timeline for eligibility of persons whose only medical condition is mental illness. This would reduce the risk that some Canadians would feel the need to challenge the exclusion before the courts should they believe it is unconstitutional. It would also provide them with the certainty that two years following royal assent of Bill C-7, eligibility on the basis of mental illness would be considered with the requisite safeguards attached.

### *Government Orders*

This point about potential constitutional challenges is not an academic point alone. We know this is a complicated issue that balances competing constitutional rights. Obviously we know from the Truchon decision that there has been litigation with respect to the old Bill C-14, and virtually all observers recognize that there is very likely to be constitutional challenges related to the current bill, Bill C-7, should it be enacted. In fact, we heard testimony about this at a House of Commons standing committee. Some witnesses said the exclusion of mental illness alone could perhaps give rise to a section 15 challenge. We are trying to ensure that Canadians who are concerned about this exclusion would have a remedy that is not via the court process, but rather through the task force of experts and the parliamentary study that would follow therefrom.

We heard a lot from the previous member about evidence and whether the government believes in evidence-based approaches. I would reiterate for the record that absolutely we do, and some of that evidence relates to a very specific document in the submissions that were made by the Association des médecins psychiatres du Québec.

• (1305)

[*Translation*]

In November 2020, the Quebec association of psychiatrists, or AMPQ, published a very informative discussion paper on access to medical assistance in dying for people with mental illness, which underscores the reasons that the government believes that a 24-month sunset clause is needed.

The work of this association will no doubt be foundational to the expert review of this issue. It points to some possible solutions, but they are fairly complex. That is why we need to carefully consider solutions that could work nationally.

[*English*]

The association is of the view that whether a mental illness is incurable or not can “only be determined at the end of a long process, after attempting several treatments and assessing their effects.” The association further notes that before coming to a conclusion on eligibility a psychiatrist “should explore other aspects that shape the patient’s life experience and consider strategies to improve the social circumstances that add to the suffering.” This dovetails exactly with some of the interventions made in the last portion of the debate by members of the NDP, who talked about supports that surround a person's life circumstances, such as income security, housing security and so on.

Going back to the submission from the association, it notes, “Psychiatrists must be involved as both the first and second assessors”, and also notes, “access to psychiatric care varies significantly from one region to the next.”

### *Government Orders*

In light of all of these considerations, the Association des médecins psychiatres du Québec suggests that we create a new administrative body with regional offices dedicated to MAID on the basis of mental illness that would coordinate such requests, identify MAID assessors and providers, and ensure access to psychiatrists. It also suggests that such an administrative body could monitor the assessment process in real time instead of after the fact.

I highlight this in some detail because I believe the association's discussion paper is focal to why we as a government believe that a 24-month sunset clause is needed. The work of the association will no doubt be foundational to the expert review of this issue. The paper points to possible solutions, some of which are fairly complex in nature, which underscores the need for careful consideration of what could work nationally. Further, I underscore that government and Parliament will need time to make decisions about which safeguards should be codified in federal MAID legislation as a matter of criminal law relating to mandatory access across the country.

I will now turn to the third amendment.

The third amendment being proposed by the Senate, which the government proposes to support with some modifications, relates to the notion of the parliamentary review. The government has repeatedly committed to facilitating the start of the parliamentary review required by Bill C-14 as soon as possible following the adoption of the current Bill C-7. Our proposed adjustments to the amendment proposed by the Senate would ensure that all of the relevant issues are front and centre for the joint parliamentary committee that would undertake this work. I underscore the notion that it is joint, because it would be a combined study by the Senate and the House of Commons, similar to what we saw prior to the advent of the original Bill C-14. Its mandate would look at things that were contemplated by the original intended review of Bill C-14, such as requests by mature minors and issues that relate to advance directives.

- (1310)

In addition, we would include palliative care and safeguards for persons with disabilities within the scope of that mandatory joint parliamentary review by the Senate and the House. We also proposed to adjust the timelines, so they are both realistic in a pandemic environment but still ambitious, given the seriousness of the issues at hand. These are important features we feel would enable us to move forward in a collaborative manner involving the work of both Houses of Parliament, as well as the work of all legislators from various parties.

I would note parenthetically that, obviously, the member for Esquimalt—Saanich—Sooke has been very instrumental in leading the charge and a call for a study in Parliament of the previous bill, Bill C-14. Some of what we are proposing incorporates his views on the scope of what that review should look like.

Finally, there are two Senate amendments that, in the government's view, cannot be supported.

The first is the amendment to the mental illness exclusion itself. While I appreciate that some have advocated for greater clarity around what mental illness means in this context, the government is concerned that this particular amendment, as drafted by the Senate,

implies that neurocognitive disorders are ordinarily understood as being mental illnesses, which, in fact, may not be the case. The federal government will work with its provincial and territorial counterparts to ensure a consistent application of the mental illness exclusion until it sunsets.

The second Senate amendment we propose to reject is the amendment to expand the waiver of final consent. Providing MAID in the absence of final consent is extraordinary and carries risks, and we acknowledge that. The Senate amendment goes beyond the scope and principle of Bill C-7, which would permit the waiver of final consent only in narrow circumstances that present the fewest risks. Any expansion of advance consent or proposal for advance requests, which are sometimes called advance directives, will involve greater risks and should be the object of careful consideration by the parliamentary review.

It has always been the notion that the issue of advance directives should be contemplated only after consideration by the broader parliamentary review. This was the case with the previous Bill C-14, and it is certainly the case now with what we are proposing as a government with respect to the parliamentary review that should ensue herefrom.

In the time I have remaining here, I would like to canvass a couple of points.

One is the notion that has arisen during the discourse of today's debate that somehow the government and de facto the Senate are somehow pursuing a route that is putting undue focus on facilitating an end of suffering, including facilitating the passing of an individual, as opposed to making the condition of life more viable and also more supported. That assertion is categorically false. The government's record over the last five and a half to six years speaks for itself in terms of the supports we have put in place, whether they are in long-term care, home care or supports for mental illness.

It relates to, as the previous member mentioned, a unanimous consent motion being passed regarding a suicide hotline. The supports we have put in place, such as the Canada health and social transfer, and a few intensive efforts to address home care and palliative care, are significant investments. We are ensuring that people are making such significant decisions based on the full understanding of what options are available to them and what supports are available to them. Can more be done? Of course, more can be done. I think that is what is important about what arises from a debate such as this.

The second thing I want to underscore is something that arose many times when Bill C-7 was in our chamber the first time, meaning its second and third readings prior to being sent to the Senate, which has again arisen today in the context of today's debate, and that is this idea that persons with disabilities are somehow being victimized, targeted or unfairly treated by this particular bill. I will raise a couple of important points, which I think are really important for all members of Parliament to understand. I have raised these points before, but I will reiterate them.

*Government Orders*

What we are talking about here is autonomy and the autonomy of individuals to make choices about the end of their lives and their passing, and that butts up against the need to protect vulnerable people. It is an important balance, and that is what is at the heart of this. This makes it probably the most difficult issue any of us have dealt with, at least it has been for me in my five and a half years as a parliamentarian. That being said, people need to understand that the case that was brought before the courts that we are responding to now was brought by two individuals: Monsieur Truchon and Madame Gladu.

• (1315)

Both suffered from disabilities, but because they were not near the end of their lives, they were prevented from accessing the MAID regime under Bill C-14. This is because it was, at that point and even now, until the law is potentially changed, an end-of-life only regime.

I want to read for members what the court analyzed with respect to that, because we have heard a lot in this discussion that somehow what we are trying to do in Bill C-7 is discriminatory of persons with disabilities. The notion of discrimination under section 15 was squarely in front of the court in the Truchon case, and what the court said is quite the opposite. I am quoting from paragraph 678 of the Truchon decision. The court said:

The requirement at issue reveals a legislative regime within which suffering takes a back seat to the temporal connection with death. Where natural death is not reasonably foreseeable, the consent in suffering of the disabled are worthy only of the sympathy of Parliament, which has adopted a protectionist policy toward every such person, regardless of his or her personal situation. As soon as death approaches, however, the state is prepared to recognize the right to autonomy. This is a flagrant contradiction of the fundamental principles concerning respect for the autonomy of competent people, and it is this unequal recognition of the right to autonomy and dignity that is discriminatory in this case.

The judge went on, in paragraph 681:

By seeking to counter only one of the stereotypes that the disabled face—vulnerability—the challenge provision perhaps perpetuates another probably more pernicious stereotype: the inability to consent fully to medical assistance in dying. Yet the evidence amply establishes that Mr. Truchon is fully capable of exercising fundamental choices concerning his life and his death. As a consequence, he is deprived of the exercise of these choices essential to his dignity as a human being, due to his personal characteristics that the challenged provision does not consider. He can neither commit suicide by a method of his choosing nor legally request this assistance.

I read this into the record to remind parliamentarians that discriminating against anyone in Canada should not be countenanced. However, what was squarely before the court was whether the old regime was discriminatory against persons with disabilities who want to make autonomous choices about their passing, but were not near the end of their lives. The court found, conclusively, that the old regime was discriminatory. That is what prompted this and other changes to the legislation.

I think it is very important to understand that. When I, and others, talk about the heterogeneity among people with disabilities, that is what we are driving at. It is not for Parliament, in my respectful view, to impede, limit or curtail the competence and autonomy of persons, including persons with disabilities, who want to make significant choices about how and in what manner to end their suffering.

I think a compassionate response by this Parliament, a response that entrenches dignity, requires us to do the opposite. I know it is difficult. I know it is moral. I know it is an issue fraught with a lot of personal conviction, and that it is a difficult task for many of us, but that is the task before us as parliamentarians. As somebody who is familiar with discrimination law, I wanted to correct the record, in terms of what I have heard in today's debate and previous debates, about how discrimination plays into the analysis.

**Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC):** Mr. Speaker, my colleague spoke about autonomy, and we have to listen to the disability rights organizations that speak about autonomy within a social context. When we talk about expanding autonomy, but we do so in a way that undermines the social context that people with disabilities will experience when they access the health care system, that is precisely what people are complaining about. It is just not good enough to say we have three or four litigants who think differently from the vast majority of the community. These are concerns the government should be taking seriously.

I want to ask a question specifically on the issue of the amendment from my colleague that we are talking about. The government's proposal for a 24-month sunset and an expert consultation predetermines the outcome, because it predetermines that the expert analysis will lead to a point of, in some sense, allowing MAID in cases where mental health is the primary complaint. We have seen how the government has failed to meet timelines before, as a result of prorogation, issues around the pandemic and other things that intervene. Why does the government not simply reject this amendment? Then, at some future point, it would be welcome to bring forward legislation after doing the required consultation, but not when they are—

• (1320)

[*Translation*]

**The Deputy Speaker:** Order. Quite a few people would like to ask questions.

The Parliamentary Secretary to the Minister of Justice and Attorney General of Canada.

[*English*]

**Mr. Arif Virani:** Mr. Speaker, I thank the member opposite for his contributions today and in the past to this debate over the last many years.

The issue with respect to the social context and listening to disability rights organizations is one I concur with, and one I think our government would concur with. We cannot look at the perspectives and statements made by persons with disabilities without understanding the social context they are in, and the jurisprudence in the way the courts interpret discrimination bears that out.

I agree with him in that regard, but the point I made today and previously is that there is as much differentiation in the disability community as there is in many other communities, to echo the words of the member for Sherwood Park—Fort Saskatchewan, whether that relates to other marginalized groups, other vulnerable groups, etc.

*Government Orders*

With respect to the sunseting and having a wide open study as opposed to a study that relates specifically to the mental illness condition, I have confidence in what we will hear from stakeholders. That is why I spent some time with the Quebec association of psychiatrists review. It provided extensive analysis about what it believes would be required should it be entertained, but it never presumed the end result of such a study. The medical establishment would—

**The Deputy Speaker:** I ask hon. members to keep their interventions to about one minute.

We will continue with questions and comments. The hon. member for Montcalm.

[*Translation*]

**Mr. Luc Thériault (Montcalm, BQ):** Mr. Speaker, the Conservatives talk about affirming human dignity. However, this affirmation is embodied in treating people as an end, never as a means. This is about affirming patients' capacity for self-determination and freedom of choice. Individuals are the sole masters of their own destinies.

The Conservatives are making sweeping generalizations and imputing motives by victimizing and targeting specific groups. Does the parliamentary secretary not think that our Conservative friends are violating respect for human dignity by exploiting the people they claim to be protecting?

**Mr. Arif Virani:** Mr. Speaker, that is a very interesting observation and a criticism that I have heard many times.

Instead of addressing the question directly, I would like to begin by saying that I appreciated the member's work during our committee study.

I also want to emphasize that we need to listen to all members of the disability community, not just a few. That is what we are doing and that is what we will continue to do.

[*English*]

**Mr. Charlie Angus (Timmins—James Bay, NDP):** Mr. Speaker, in 2019 I brought forward a motion on a national suicide action plan. As an elected member, I went across the country, engaged with people and spoke to people. That is the democratic process. The Liberals voted for it and then did nothing.

I ask members to imagine a member of Parliament bringing forward a motion that if someone is depressed they can die immediately, that they can have the right to die. There would be debate and a national outcry. Instead, we have the Senate, the unelected and unaccountable Senate, put this motion in. With any dramatic change to any kind of law, the Liberals say that it is their friends in the Senate and that we should talk about this in two years.

This is not how these kinds of decisions are to be made. The fact that the unelected and unaccountable Senate could dramatically change legislation and cut a deal with the Liberals that it would be brought forward at a certain period of time, to me, is an insult to the democratic process. It is a greater insult when I hear the Liberals say that we should just get this bill passed, that we can worry about it down the road and that they trust what the committee will do.

To allow people who are feeling depressed to die is a major change to MAID. Liberals need to admit that and say it is well beyond the scope of this legislation.

• (1325)

**Mr. Arif Virani:** Mr. Speaker, I thank the member for Timmins—James Bay for his contributions to the national suicide action plan. That is exactly the type of initiative we need more of.

I reject the insinuation, which seems to be repetitive of that of the member for Sherwood Park—Fort Saskatchewan, that somehow the Senate has been instrumentalized to do an end run around the House of Commons. Nothing could be further from the truth. The Senate has engaged in a study. It has engaged in a sober second thought.

The Senate has presented something to this House, and the accountability in a democracy such as ours is via the vote that will take place on these amendments. That is how we are held accountable to our electors, the voting populace in Canada, and that is exactly the purpose of today's debate and the forthcoming votes on the motions.

To insinuate something otherwise is entirely inappropriate and unparliamentary, in my respectful view.

**Ms. Raquel Dancho (Kildonan—St. Paul, CPC):** Mr. Speaker, I greatly appreciate the academic and legal vigour that my hon. colleague applies to his arguments.

My question is about my colleague's personal beliefs. He mentioned that the government will expand or extend the Senate amendment of 18 months on review for mental illness to 24 months and then provide another year to consider whatever an expert panel recommends. Therefore, within three years we may be debating mental health and whether people in the depths of a mental health crisis can access death. I would like to know if the member personally believes that it is ethical for Parliament to legislate access to death for people in the grip of depression.

**Mr. Arif Virani:** Mr. Speaker, I know this is personal for others, just as it is personal for me. Obviously mental health touches all of us and all of our families, and it has touched my family.

That is a difficult question to answer, but what I would say is that I am comfortable trying to proceed incrementally as we have done, starting with Bill C-14 and now with Bill C-7, but doing it on the basis of having a lot of input from those in the medical community whose jobs are to diagnose, treat and provide support to those who are suffering from a mental illness.

What I cannot do, obviously, is put myself in the shoes of another person who, in terms of manifesting their autonomy, might be contemplating and considering taking such a step. That is difficult for me to do personally, but what I can do is ensure that I, as a parliamentarian, try to provide equal access to different options, including end-of-life options, to Canadians, should they choose to end their suffering.

*Government Orders*

**Ms. Elizabeth May (Saanich—Gulf Islands, GP):** Mr. Speaker, I want to thank the hon. parliamentary secretary for a very helpful, thorough review of the government's views on what has now come to this place from the other place.

I also wanted to focus, as his last remarks did, on some of his personal beliefs around the situation and the context for people in the disability community, the context for people who are experiencing extreme depression. We have to put that context in economic terms. We know that people who are in the disability community are far more likely to fall below the poverty line than able-bodied Canadians. It is a really significant crisis.

We experienced in CERB the ability to send a cheque for \$2,000 to people across the country. I want to ask the hon. member if it is not time to look at guaranteed livable income as part of the package of public health measures, because poverty is the single largest component of health. As a social determinant of health, poverty is the largest measure. I know it is slightly unrelated to the debate on Bill C-7, but can we not move to eradicate poverty?

**Mr. Arif Virani:** Mr. Speaker, I thank the member for Saanich—Gulf Islands for her extensive contributions to Parliament, including in terms of this debate.

Absolutely, the CERB issue raised the notion of a guaranteed income or a universal basic income. That idea has not left the scene and remains something that needs to be actively considered. I would point to the all-party anti-poverty caucus as evidence that this idea has cross-party support. Its time has come as an idea, and I lament that a pilot project to gather evidence in Ontario was unfortunately eliminated midstream by the provincial Conservative premier in Ontario, despite having been started by a provincial Liberal premier in Ontario who preceded him. Developing that evidentiary base through some sort of pilot project makes eminent sense, from my perspective.

• (1330)

**Mrs. Tamara Jansen (Cloverdale—Langley City, CPC):** Mr. Speaker, it is 100% guaranteed that we will kill people who would have gotten better. That is a statement made by a well-respected Canadian psychiatrist this weekend at an emergency Bill C-7 meeting I cobbled together in response to this Frankenstein bill that we are now debating here in the House. How the Senate managed to change the bill from what it was to what it is completely boggles the mind.

The bill is now so deadly that not only are the disability community and the indigenous community crying out against it, but the mental health community and the geriatric professionals have joined in sounding alarm bells against the extreme danger this bill poses to the most marginalized in our communities.

Some in the Senate in the Liberals' group of wealthy, worried well people have decided that their wishes far outweigh any harm that may come to the vulnerable who cannot afford or cannot access the kind of care that powerful individuals can.

Let us take the issue of advance directives. Senator Pamela Wallin stated, "As someone with a history of dementia in my family, I seek the peace of mind that an advance request—and consent to it—will provide." I would like to pose a question. Does Senator

Wallin's peace of mind carry more weight than the premature deaths of frail seniors that will result if this amendment becomes law?

Imagine a person—for example, Senator Wallin—possibly dealing with dementia at some future time who has reached the stage at which her advance directive authorizes her death. Imagine that she is completely unaware of her cognitive deficits and is living happily with her loving family or in a top-notch residential setting somewhere in Canada. Who will give the MAID order? How will Ms. Wallin's caregivers explain this to her? Will that directive take precedence over her current wishes and those of everyone around her?

Imagine now a family that is less loving, one that is fighting over the inheritance while mother is still alive, fighting over how much is spent in paying for nursing care. This is a common scenario, as many professionals witness. Now who will give the MAID order, and in whose interest?

Now imagine there is no family and that the administration at the nursing home is under orders from the ministry to find beds for patients to be transferred from the hospital. There are already horror stories from around the world where advance directives for euthanasia exist as an option, stories of doctors trying to sedate their patients by putting sedatives in their coffee or stories like that of a 74-year-old Alzheimer's patient from the Netherlands whose family had to hold her down as she was struggling so that the doctor could administer the lethal cocktail.

I learned in a conversation with Dr. Catherine Ferrier, who works with dementia patients, that often when a person is suffering with dementia, it is their family who are most distressed. Patients themselves are often content, even happy. The point I am trying to make here is that it is impossible to know the exact wishes of someone who is suffering with dementia. Someone who is young and healthy can imagine what they would want for themselves if they were to decline in that way, but they do not know what that future self, in a state of mind that they do not understand, would actually wish for.

I am terrified for vulnerable Canadians who want to live despite an earlier wish to die. They will not be able to communicate their desires, and their families and caregivers may pressure them to die to remove a burden from their own lives. I implore my colleagues to remember that our duty is to promote the safety and well-being of all Canadians, especially those most marginalized, not to calm the worried well.

### *Government Orders*

The Council of Canadian Academies' expert panel working group on advance requests for MAID found that relatives of patients with dementia generally support euthanasia if an AED exists, but when they are faced with a decision to follow an AED, most decide against it. Many experts now favour, instead of a directive giving specific instructions, a process of reflection on broad health care goals, conversations with loved ones and the designation of a proxy decision-maker.

Listening to those who advocate MAID by advance request for patients with dementia, our first reaction should be horror at the demeaning and discriminatory terms in which they are depicted. To state that people who no longer recognize family members, are bedridden or are dependent for hygiene or feeding have lost their dignity is a marginalizing and ableist depiction. Dignity is never lost, but it can be either affirmed or denied.

● (1335)

Let us tackle the first myth, the myth that people deserve death with dignity and that MAID provides that. The fact is that this debate has distorted what dignity means. Dignity means to deserve honour or respect. What MAID advocates mean by "loss of dignity" is a loss of control, a loss of superficial appearance, a loss of self-critical judgment. They have tragically subverted the most dignified acts of all: unflinching love and deep respect for each other in all life circumstances. Bathing my dying grandmother, whispered conversations on the threshold of death, silent reflection and presence through a long night waiting for a last breath: These are the moments of greatest dignity. Dignity is found within our relationships. It is about whether someone looks at us and treats us with respect, rather than with subtle disdain or prejudice or by making us feel that we are bothering them.

Dignity is not about the means of death. Dying with dignity means dying in a milieu of care, love, kindness and respect. Anyone who says all these things are not present in a natural death setting simply does not understand what dignity is.

However, wait; the senators, the Liberals, Jocelyn Downie and all their friends at Dying with Dignity will cry, "No one will be euthanized under this legislation who has not already freely consented to it."

The notion of consent by advance directive is not that simple. The vulnerability and power imbalance that is present between the parties is glaringly obvious. However, advertising campaigns and media have been busy creating a fantasy world for Canadians that pretends that the use of a physician in ending the life of someone not near death is compassionate and respects autonomy. We read in the paper about parties being organized to celebrate the last moments of life with balloons and symphony music playing in the background. We can see by the few statistics that are being reported that the glorification of euthanasia provides encouragement for those who are already unsure of their value or feel a burden to their loved ones, regardless of the fact that they are not near death.

In actual fact, what we are able to provide families with amounts to moral absolutism. With this bill, we are offering to make legal what is illegal in every other country around the globe. Let me repeat that: There is no other country on the planet that allows death administered by a doctor to someone who is not imminently about

to die if they have not first been given treatment. Canada, with the implementation of this legislation, will be the only country in the world where access to alternative treatments is not even required in order to qualify for death by physician.

Not only are the changes to the euthanasia regime that will come with the Senate amendments unprecedented from a legal and moral perspective, but they are also unheard of from a medical perspective. This bill would require doctors who work with patients suffering from mental illness to prescribe death, with no evidence, no data, no statistics to prove that it is an effective or beneficial treatment. There has been no due diligence done by the medical community to support the idea that MAID belongs in the tool box of mental health professionals. It is politicians, motivated by ideology and not by evidence, who have forced it upon them.

I have been told by doctors who support MAID in principle that this bill will force them to act against their conscience and their Hippocratic Oath. It is one thing to conscientiously object, but it is something much worse when there is a lack of faith in the treatment they are forced to provide. To make the concept more clear, they explained that doctors do not prescribe cigarettes to patients because the health risks far outweigh the calming benefits of nicotine. These same doctors know that there is no evidence to support the idea that MAID is an acceptable medical treatment for mental illness. Thus, if this bill passes, doctors will be forced to provide, against their conscience, an unproven treatment that causes the demise of their patient.

● (1340)

Further, allowing MAID for mental illness in this bill makes the bill incoherent. On the one hand, it says that MAID can only be offered to those who are not dying if their condition is grievous and irremediable. On the other, it fails to acknowledge what psychiatrists know to be true; that it is impossible to know if a mental illness is irremediable. There are many cases of doctors who have thought that a patient's condition was irremediable, only to find that the patient got better. This means that the entire entry point of accessing medical assistance in dying is not satisfied for those who suffer from mental illness. That is why doctors are pleading with us, telling us that they are 100% certain that if we accept this amendment, we will kill people who would have gotten better. This bill would ensure that people would no longer be seeking to avoid a painful death, but, rather, to escape from a painful life.



*Government Orders*

It is also important to tackle the second myth being propagated by the Liberals and their friends at Dying with Dignity, and that is the myth that Bill C-7 is not discriminatory. Here are the facts. Canadian disability organizations, mental health organizations, indigenous organizations and the United Nations all say that Bill C-7 is absolutely discriminatory. The bill singles out vulnerable Canadians and offers them physician-assisted death without offering adequate disability supports or treatment to help them live full lives, free of the suffering caused by poor health care, poverty and stigma. It singles out persons with disabilities who are not terminally ill as fit for suicide completion. This will become a choice of desperation, not autonomy.

Let us understand what discrimination really is. It is pretending that all Canadians are equal in all ways. The obvious reality is that some of us face profound life challenges. We need laws that protect the disadvantaged. A law that offers death to one group and support and treatment to all others is the paradigm of discrimination. This law proclaims that a disabled Canadian or someone suffering with a mental health challenge should consider death instead of recovery. Vulnerable patients need protection from politicians and doctors who want to make it easier for them to die, while simultaneously denying access to appropriate health care supports. This is true discrimination.

Let us face it, there is a myriad of reasons that many organizations have come out opposing the bill.

Take as another example the testimony from Tyler White, CEO of Siksika Health Services, who stated:

MAID with its administration of a lethal substance with the intent to end a person's life is countercultural to our indigenous culture and practices. Our concept of health and wellness does not include the intentional ending of one's life. We recognize the dignity [of life] from its beginning to natural death, and efforts to suggest to our people that MAID is an appropriate end to life is a form of neo-colonialism. Extraordinary efforts have been made in suicide prevention in our communities and the expansion of MAID sends a contradictory message to our peoples that some individuals should receive suicide prevention, while others suicide assistance....

...Bill C-7 in its current form is the absence of protection for individuals working in our communities who do not wish to participate in MAID. We believe that our people should not be coerced to participate in non-indigenous practices against our conscience and will. And it is the kind of oppression that has been the source of much trauma in our history. The Truth and Reconciliation Commission of Canada calls upon those who can effect change within the Canadian health care system to recognize the value of aboriginal healing practices and for respecting indigenous people's right to self-determination in spiritual matters, including the right to practise our own traditions and customs. Bill C-7 should be amended such that those who opt to abstain from participating in MAID directly and indirectly will be protected to do so without discrimination in their employment in the health care system.

How about Margaret Eaton, national CEO of the Canadian Mental Health Association, who stated the following in a recent press release:

Anyone living with mental illness knows it can absolutely be grievous and...unbearable. However, what sets mental illness apart from all other types of suffering is that there always remains the hope of recovery. That's why the Senate's amendment to C-7, the assisted dying bill, is so concerning.

People with a mental health problem or illness need assistance to live and thrive, not hasten death.

The Canadian Mental Health Association...is urging MPs to vote against the amendments made by the Senate to C-7. In particular, the clause to start the clock on eventually allowing people to seek medical assistance in dying...with mental illness as a sole underlying cause.

• (1345)

Then there is the petition I received this morning from 130 psychiatrists, psychotherapists and mental health professionals, calling on us to reject the amendment which would include mental illness as a sole criterion for medical assistance in dying. It states:

Some persons with mental illness, that often includes symptoms of hopelessness and suicidal thinking, have long been recognized as potentially vulnerable to suicide inducement and, until now, have rightfully been excluded from eligibility for MAiD. Suicide prevention is recognized as a critical mental health service necessary to preserve life. Review of evidence...found that, unlike with MAiD for terminal illness, we cannot distinguish between those seeking MAiD for mental illness and suicidal individuals.

Over and over again, we have heard from medical professionals how disastrous the bill will be to the safety and security of their patients.

Therefore, the question begging to be asked is this. Why the rush? During the pandemic, the Liberals have made the passage of Bill C-7 their priority. However, the bill is not a high priority for Canadian citizens and it is safe to assume that the majority of Canadians know very little about Bill C-7 or its implications.

Canadians have been preoccupied with more pressing matters, such as keeping themselves and their loved ones alive during this pandemic. They have been concerned with keeping financially afloat, making rent and mortgage payments, keeping their jobs and keeping their businesses from going under.

However, throughout this time, the Liberals have been concerned with driving Bill C-7 to the post, perhaps with the hope of slipping one by a distracted public. This is one of the most serious changes of legislation in law undertaken in a long time, with far-reaching implications. It will surely change the character of the country and how life and death are viewed. It has, at the very least, the potential to cause individual and social harm and open up abuses that no safeguards can guarantee against.

I will end with one final quote from the Washington Post this week under the title "Canada is plunging toward a human rights disaster for disabled people". It said:

This month, the Journal of Medicine & Philosophy found that in the 18 years since Belgium permitted this sort of euthanasia, the laws and regulations meant to protect patients from abuse "often fail to operate as such." Much like in the Netherlands, the eligibility criteria had steadily expanded to the point where more and more people pursued it not for medical reasons but simply for "tiredness of life."

Legalizing assisted death for disabled people only fortifies the underlying problem: Canada has long mistreated its disabled citizens. This bill is a workaround for that problem, not a solution.

*Government Orders*

I ask this one more time. If this bill is so good, why are the vulnerable, the poor, the disabled, our indigenous brothers and sisters feeling so threatened? Why do we want our hospitals to offer suicide prevention programs through one door and doctor-assisted suicide through the other? I beg my colleagues to hear the cries of those most vulnerable among us and reject the discriminatory and dangerous bill, Bill C-7.

**Mr. Mark Gerretsen (Kingston and the Islands, Lib.):** Mr. Speaker, I listened with great interest to this member's intervention, particularly when she talked about at the end of life and the dignity that one should have. She talked about those sweet moments of somebody lying on their bed just before passing away swiftly into the beyond death, as though it could only ever be this incredible experience for family and friends to sit around and to take great solitude in the dignity of what was happening.

Let me paint another scenario. The end of November of last year, my father-in-law had an operation for a tumour on his brain. After coming out of that operation, the doctor said, "I am sorry Don, there's nothing we can do for you. Unfortunately, you're going to die." Don spent about seven to nine days in the hospital, with his wife at his side, often having seizures and going through some very intense pain before he finally passed away. He did not have that opportunity of which she spoke. Where was his dignity?

• (1350)

**Mrs. Tamara Jansen:** Mr. Speaker, the death of a parent is a very difficult thing. That is why we have been calling for better palliative care. Things can be peaceful and different.

My father-in-law passed away also. We as family were able to be around him and sing psalms from the Bible. It was a wonderful time in our lives where we could reconnect and remember the history my father-in-law passed down to us and our grandkids. Palliative care must be our first goal. We must ensure that all Canadians can access it. Right now only 30% of Canadians can access good quality palliative care. I ask the member to please support that.

[*Translation*]

**Ms. Louise Chabot (Thérèse-De Blainville, BQ):** Mr. Speaker, I have a question for the hon. member.

With all due respect, I take exception to her comments.

She provided a definition for dignity and the word "respect" stood out to me. Dignity is also humanism.

As a parliamentarian, does the hon. member not think that refusing to pass the bill, amended or not, is disrespectful of the will of a majority of the public who went before the courts to ask to make this choice with regard to their life?

[*English*]

**Mrs. Tamara Jansen:** Mr. Speaker, what is really shameful is that we did not ask for this lower court decision to go to the Supreme Court. One lower court judge from Quebec should not decide a complete change in the way Canadian law works and the way our mental health and disabled patients are treated. Again, I beg that we have a thorough discussion and go all the way to the Supreme Court with this.

**Ms. Leah Gazan (Winnipeg Centre, NDP):** Mr. Speaker, I want to make remarks on the use of the very ableist and possessive language my colleague used when speaking about "our" indigenous and disabled people. I want to remind her that we are sovereign, independent individuals capable of making our own decisions and owned by nobody.

In her arguments, the member used the term "self-determination". I agree that indigenous and disabled people have a right to self-determination as referred to in the UN charter of human rights. I wonder if she applies the same right to self-determination, particularly for indigenous people, when she refers to resource extraction projects, which include things like pipelines, mining, any sort of resource extraction. Does she provide them the same level of respect for self-determination?

**Mrs. Tamara Jansen:** Mr. Speaker, I would point out that I was reading a quote by Tyler White, the CEO of Siksika Health Services. Therefore, everything I said when I used that terminology were not my words; I was simply reading from what Tyler White said.

It is inappropriate, at a time when we are discussing such a massive change to our health regime and euthanasia, to talk about pipelines.

• (1355)

**Mr. Marc Dalton (Pitt Meadows—Maple Ridge, CPC):** Mr. Speaker, palliative care is where the emphasis should be. In talking to people who have been in distress, they have been able to manage the pain mentally and physically through that.

However, the bill and the amendment do not talk much about medical assistance in dying. Rather, they talk about people who are not dying. This amendment talks about unfettered expansion of euthanasia, of assisted suicide, which we have seen nowhere else in the world. This is a very deep concern.

Right now, 4,000 people die by suicide each year. Of the people who attempt that, 7% die. This will allow thousands more a year to accomplish suicide. Three times more men than women commit suicide though two times as many women make the attempt. We are finding through MAID that two times more women are going through it. This really impacts women as well.

My question for the member is this. Does she find it perverse that what is being offered is death prior to treatment? That is what is necessary and it is lacking?

*Statements by Members*

**Mrs. Tamara Jansen:** Mr. Speaker, yes, it is absolutely perverse to imagine that we would be the only country that is going to offer a service such as euthanasia before treatment has been accessed. We need to ensure that people are not choosing this because they are desperate. We need people to be supported by health care and mental health care so that we are not seeing them die unnecessarily.

We have heard that from all of the different professional groups and I think we need to listen to those voices.

**Mr. Tom Kmiec (Calgary Shepard, CPC):** Mr. Speaker, the member gave a great speech, laying out a very empathetic case for why the Senate's amendments should be rejected. The debate I have heard so far is not about the amendments the House has already made within Bill C-7 to the original Bill C-14. I disagreed with the House and voted in the minority because I felt that our response to the Truchon decision went too far at the time.

What the Senate has done is to go far, far beyond what the original debate was in the House and the witness testimony that we heard and the considerations in the justice committee. Could the member perhaps just comment on that point?

**Mrs. Tamara Jansen:** Mr. Speaker, I have to say that it was shocking to see what sort of a “Frankenstein” bill the Senate back to us. We have not even had a chance to discuss or debate any of those other things and here they are in the bill. It is absolutely unbelievable and we need to stop it in its tracks.

**Mr. Mark Gerretsen (Kingston and the Islands, Lib.):** Mr. Speaker, this is just in response to the back-and-forth intervention with the previous member about palliative care.

Out of curiosity, does the member believe that the pain of all people who are at the end of their life can be relieved through palliative care measures? Does she believe that every person's pain can be relieved by various palliative care measures?

**Mrs. Tamara Jansen:** Mr. Speaker, what I do believe is that because only 30% of Canadians can access palliative care, we are failing our seniors. We need to make a change. We have been begging and asking. My dear friend, Mark Warawa, was begging for us to look at palliative care and the needs of seniors. We need to get on that right away.

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## STATEMENTS BY MEMBERS

• (1400)

[English]

### LONG-TERM CARE

**Mr. Peter Fonseca (Mississauga East—Cooksville, Lib.):** Mr. Speaker, during these challenging times of the pandemic, I have heard from many families, friends and loved ones who cannot see or speak with their dying parents living in Ontario's long-term care homes.

I feel as strongly as my residents do regarding the long-term care crisis. I strongly agree that things need to change. Understaffing, COVID-positive residents sharing rooms with COVID-negative residents, and a lack of basic care, including feeding, toileting and dressing are unacceptable and cannot happen again. Canadian fami-

lies will live with these painful memories forever. The lives lost in long-term care homes during COVID is one of Canada's greatest tragedies.

Vulnerable seniors deserve to be safe, to be respected and to live with dignity. As Prime Minister said about national standards for long-term care, we have a responsibility to make sure that all Canadians are safe. Although long-term care falls under provincial and territorial jurisdiction, I will support seniors while working alongside our provinces and territories, and I know that Canadians stand with us on this righteous cause.

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### DESNETHÉ—MISSINIPPI—CHURCHILL RIVER

**Mr. Gary Vidal (Desnethé—Missinippi—Churchill River, CPC):** Mr. Speaker, when it is appropriate again, my riding in northern Saskatchewan is prepared to give a much-needed boost to the tourism industry.

Northern Saskatchewan's natural landscapes offer something for everyone. Prince Albert National Park is an all-season, natural playground. The many regional parks and the Candle Lake, Narrow Hills and Meadow Lake provincial parks all provide a variety of camping and family-friendly options. Places like Stanley Mission, Île-à-la-Crosse, Cumberland House and the Methye Portage offer visitors a historic reminder of the role of the fur trade in our early economic prosperity. Creighton, Denare Beach and many other communities are situated in the Canadian Shield, an outdoor enthusiast's dream. The tri-communities of the La Ronge and Missinippi area are the jumping-off point for world-class canoe trips. The unique geological features of the Athabasca sand dunes and the Saskatchewan River delta are bucket-list-worthy destinations.

On behalf of the residents of Desnethé—Missinippi—Churchill River, we look forward to seeing tourists again soon.

\* \* \*

### BLACK CANADIANS

**Mr. Tony Van Bynen (Newmarket—Aurora, Lib.):** Mr. Speaker, since 2018, the Newmarket African Caribbean Canadian Association, or NACCA in short, has played a vital role in building a community network based on education and on celebration of Black Canadians and neighbours.

It was NACCA's chairperson, Jerisha Grant-Hall, who once told me that in order to have a genuine dialogue with the Black community, we need to be prepared to have some difficult and direct conversations. It is thanks to these conversations with Jerisha that, since becoming the MP for Newmarket—Aurora, I have been able to build a much better understanding of the stories, concerns, contributions and achievements of Black Canadians in our community and in our country.

*Statements by Members*

Today I want to thank Jerisha and the NACCA team for their leadership and contributions in making our community much more diverse and connected, and I want to remind all that while February is recognized as Black History Month, it is our collective duty to celebrate Black Canadians by listening and learning all year round.

\* \* \*

[*Translation*]

**TÉMISCAMING**

**Mr. Sébastien Lemire (Abitibi—Témiscamingue, BQ):** Mr. Speaker, it is an honour for me to mark the 100th anniversary of the founding of Témiscaming. The recognized strength of our builders made this flagship town located south of the Témiscamingue-Ontario border, a prosperous town close to nature, lakes and forests, a great place to live.

Upstream on the Ottawa River, also known as the rivière des Outaouais, Témiscaming is referred to as the garden city because of its countless public gardens, its artful urban landscape and its fruit trees that give this mountain town a distinct feel.

The city's primary economic activity stems from its major forestry plant, Rayonier Advanced Materials. Témiscaming is also known for its rich tradition in hockey, and four of its own have made it to the NHL, which is exceptional for a population of 2,500 inhabitants. This tradition of sports excellence continues with our team, the Titans.

By honouring our roots, we can build our future. I hope there will be some way to celebrate Témiscaming's centennial the way it deserves to be celebrated.

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**CANADA'S AGRICULTURE DAY**

**Mr. Angelo Iacono (Alfred-Pellan, Lib.):** Mr. Speaker, in my riding of Alfred-Pellan, I am very fortunate to have a lot of family farms that feed my community. At the height of the pandemic, these families demonstrated unrelenting determination and great resilience in order to continue providing us with quality produce.

On Canada's Agriculture Day, I want to applaud the outstanding work of local farmers. What better way to celebrate our farmers than buying local? By choosing local products, we are helping families with strong roots in our community. Most importantly, we are proudly supporting Canada's agricultural expertise.

I invite my colleagues and all Canadians to mark this day by buying local, not just today but every day.

Let us be proud of our Canadian agriculture.

\* \* \*

● (1405)

**APPALACHES RCM YOUTH**

**Mr. Luc Berthold (Mégantic—L'Érable, CPC):** Mr. Speaker, the youth of the Appalaches RCM in the riding of Mégantic—L'Érable are taking the lead, becoming involved in the community and making things happen.

Our young people are active, proactive and creative. They are go-getters. They are concerned about everything that is going on. They want to express their views and are doing so in their community.

The Stratégie ADN jeunesse was created by and for young people between the ages of 15 and 29 in all municipalities of the Appalaches RCM to help youth take their place, have a voice and tell the older generation that they are there and want to participate.

I invite everyone to watch the Rendez-vous jeunesse engagée monthly meetings on Facebook Live, where our youth tell us about the issues that concern them, such as mental health, Internet coverage in the regions, the LGBTQ+ community, recreation and much more. They have things to say. As elected members, we must listen to them.

That is not all. Our youth are innovators. The very first Desjardins youth summit is scheduled for March 13 and will be held entirely in virtual reality, not on Zoom. Every participant will have a virtual reality headset to discuss the future of our region.

I congratulate all members of the Appalaches RCM youth committee for their involvement. The future is in their hands. It is up to them to seize it and to make this a better world for all.

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[*English*]

**HEALTH CARE WORKERS**

**Hon. David McGuinty (Ottawa South, Lib.):** Mr. Speaker, as the son of a nurse, it is a very special privilege for me to thank health care workers in my riding and across Canada. Since the beginning of this global pandemic, they have worked day and night to help their patients.

From the bottom of my heart, I want to thank everyone at the Perley and Rideau Veterans' Health Centre, the Children's Hospital of Eastern Ontario, the Ottawa Hospital-General Campus, the Riverside hospital, St. Patrick's Home, the COVID care centre on Heron Road; and all of the front-line health care workers at our region's hospitals, clinics and long-term care facilities.

Their dedication, commitment and courage deserve our deepest gratitude. We will never forget the sacrifices they are making to help us get through this crisis. Their professionalism and kindness are unparalleled. We can simply never thank them enough for their service.

*Statements by Members*

[Translation]

**BLACK HISTORY MONTH**

**Mrs. Élisabeth Brière (Sherbrooke, Lib.):** Mr. Speaker, February is Black History Month, and this month I have met with a number of leaders in this community to acknowledge the important work they do.

Two of the people I spoke to are Aïssé Touré and Angélique Goguen-Couture. They are nurses fighting COVID-19, and they also founded Black Estrie, an organization that spotlights inspiring Quebecers from the Black community. I also met with Mariame Cissé, who has lived in Sherbrooke for more than 30 years and is a project coordinator at the Fédération des communautés culturelles de l'Estrie, which works to combat the non-recognition of credentials, domestic violence and gender inequality. I also want to mention Mélé Temguia, an incredible soccer player who is currently playing for FC Edmonton while pursuing his studies at the Université de Sherbrooke.

Black History Month is an opportunity to highlight these initiatives and success stories so that we can unite our communities and build a stronger, fairer and more inclusive Canada.

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[English]

**COVID-19 EMERGENCY RESPONSE**

**Mrs. Cathy McLeod (Kamloops—Thompson—Cariboo, CPC):** Mr. Speaker, there is an old saying that the best predictor of future behaviour is past behaviour.

Historically, the government has responded to problems with simple symbolism and wishful thinking as opposed to well-executed plans. Similarly, its vaccine strategy has been based on one thing: hope. It hopes the Chinese CanSino vaccine comes through, hopes there is not a second wave, hopes there is not a third wave and hopes that countries counting on COVAX do not notice we are stealing their vaccines.

The reality is that I am hearing from Canadians who have lost all hope. The more the government talks about how it plans to deliver millions of vaccines, the farther we seem to move down the list compared with the rest of the world. Clearly, hope is not a strategy. Failure on the vaccine rollout means more lockdowns and more time until we can get our economy back on track.

Canadians deserve better. Canadians can trust the Conservative Party to save jobs and secure the future.

\* \* \*

● (1410)

**FOOD POLICY ADVISORY COUNCIL**

**Mr. Lloyd Longfield (Guelph, Lib.):** Mr. Speaker, last week the Minister of Agriculture and Agri-Food joined us virtually at the University of Guelph's Arrell Food Institute to announce the first-ever Canadian Food Policy Advisory Council.

[Translation]

Guelph's own Evan Fraser will co-chair the council, which will have 22 other members from across Canada, including scientists, nutritionists, food producers and processors, and academics.

[English]

In Guelph, we are already leading the way in developing Canada's first circular food economy. The Food Policy Advisory Council will help guide us in this work by advising on current and emerging issues and providing data. Modelling its work around the theme "everyone at the table", it will work on safe, nutritious and sustainable solutions around food waste, food security and innovative policies to guide the government to become a world leader in global food to feed nine billion people by 2050.

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**AGRICULTURE DAY**

**Mr. Alex Ruff (Bruce—Grey—Owen Sound, CPC):** Mr. Speaker, today is Canada's Agriculture Day, when we show our appreciation to our resilient and hard-working farmers and farm families. I have heard first-hand from farmers in my riding how they have overcome immense adversity since the start of the pandemic, with processing delays and border restrictions affecting the movement of workers and products.

The government has the opportunity now to take action and reduce the burdens on our farmers by implementing rapid testing at the border to reduce the isolation period for temporary foreign workers, thus allowing workers to start on time; by adopting Bill C-206, which would cut costs for farm families by exempting propane and natural gas from the carbon tax for farmers; and by adopting Bill C-208, in order to maintain the strong tradition of family farms in Ontario and Canada. Finally, the government must stand up for Enbridge's Line 5, as it is a crucial lifeline for our farmers, other industries and the environment. Replacing this pipeline would require 2,000 trucks or 800 railcars daily to meet the current need.

On Canada's Agriculture Day, I urge the government to implement these tangible measures to support our farmers. For all they do for us, it is the least we can do for them.

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**AGRICULTURE DAY**

**Ms. Lianne Rood (Lambton—Kent—Middlesex, CPC):** Mr. Speaker, today is national Agriculture Day, and it is my honour to recognize the work of farmers, farm families and all those who are part of the agriculture supply chain. Their knowledge, skills, innovation, hard work and dedication put the world's highest-quality food on our tables every day.

### Oral Questions

Producing food is not just a job: It is a way of life. For generations farmers, including three generations of my own family, producers and ranchers have used their passion and skill, rain or shine, through summer's heat and winter's cold, enduring floods, droughts and fluctuating markets to meet the heavy responsibility of feeding Canadians.

These are some of the most resilient people one will ever meet. There are no days off. It is a 24/7 job. Today we recognize their vital contribution to the welfare of our country and to the well-being of Canadians. The love they put into our food should never be taken for granted. Today and every day, I encourage all Canadians to thank a farmer.

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### AGRICULTURE DAY

**Mr. Alistair MacGregor (Cowichan—Malahat—Langford, NDP):** Mr. Speaker, today we mark Canada's Agriculture Day, which was launched in 2016 and allows us to pay tribute to the hard-working men and women in agriculture and their important role in putting fresh food on our plates.

As the owner of a small-scale farm, I am incredibly proud to represent a region that is continually making a name for itself as a place capable of producing a wonderfully diverse range of high-quality, farm-fresh produce, artisanal foods and beverages.

Across this great country, Canadian farmers have what it takes to be world leaders in agriculture, sustainability and the use of technology and innovation to tackle the great problems of our time, such as climate change and food security.

As the NDP's critic for agriculture and agri-food, and on behalf of my entire caucus, I want to wish everybody a very happy Agriculture Day.

\* \* \*

[Translation]

### FEDERAL-PROVINCIAL RELATIONS

**Mr. Stéphane Bergeron (Montarville, BQ):** Mr. Speaker, in 2000, the current U.S. President, Joe Biden, remarked that Canada's foreign policy was limited to a single issue, namely fighting Quebec, in his words. Now, documents declassified by the U.S. State Department prove he was right.

After the Parti Québécois was elected in 1976, then prime minister Pierre Elliott Trudeau spoke to Washington about his plans to sabotage Quebec's economy in order to undermine René Lévesque's government. The documents reveal that Trudeau asked billionaire Paul Desmarais to move his operations and investments out of Quebec in order to double the unemployment rate. He encouraged Desmarais to make things "as tough as possible" for Quebec. A prime minister of Canada plotted against Quebec's economy with the stated intention of making Quebecers lose their jobs.

Pierre Elliott Trudeau brought shame upon himself. Quebec recognizes that and will not forget it.

• (1415)

[English]

### COVID-19 EMERGENCY RESPONSE

**Mr. Scot Davidson (York—Simcoe, CPC):** Mr. Speaker, small businesses, families and seniors in York—Simcoe and across Canada have been feeling the strain after months of lockdowns and restrictions. These restrictions have separated families from loved ones, kept kids out of classrooms and threatened the livelihoods of millions. We have to get the vaccine rollout right in order to secure jobs and secure our future, but the Liberals' inability to get vaccines to Canadians and their repeated failures to manage the pandemic mean our future remains uncertain.

How much longer can the great small businesses in our communities hold out before they are forced to shut their doors for good? How much longer can we expect seniors to be confined to their homes? When can we expect life to get back to normal?

To get there, more must be done. We need a plan that goes beyond restrictions. We need a path forward that reopens our economy, protects our most vulnerable and, above all else, gives Canadians confidence and hope for the future. Fear may be contagious, but we must always remember that hope is contagious too.

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## ORAL QUESTIONS

[English]

### FOREIGN AFFAIRS

**Hon. Candice Bergen (Portage—Lisgar, CPC):** Mr. Speaker, the only thing necessary for the triumph of evil is for good men and women to do nothing.

Yesterday, while the Prime Minister and his cabinet did nothing, the House united under the leadership of our Conservative Party and we did something. With one voice, we said genocide is happening in China. What we do next matters. We have used Magnitsky sanctions against some others, but never against members of the Chinese government.

Will the Prime Minister admit his approach to China has failed to defend Canadian values? Will he impose sanctions against those running Uighur detention camps?

**Mr. Robert Oliphant (Parliamentary Secretary to the Minister of Foreign Affairs, Lib.):** Mr. Speaker, our government takes any and every allegation of genocide extremely seriously.

Yesterday's vote in Parliament ensured that every member in the House could make a determination for themselves on available evidence, and express that honestly and clearly.

The government welcomed the voice of Parliament yesterday and the voice of parliamentarians united on this issue, but the government has additional responsibilities and will continue to work with international partners and multilateral bodies to ensure we find a way to bring health, justice and fairness to Uighur people in western China.

**Hon. Candice Bergen (Portage—Lisgar, CPC):** Mr. Speaker, the government's lack of a voice yesterday, and its lack of speaking out, spoke volumes. It was very weak and it was disappointing.

Yesterday the health committee heard that the Liberals' vaccine response is slow and a risk to national security. It is a chaotic process that has left Canadians 54th in terms of vaccinations. Other countries are planning their reopening in the next several months, while Canadians are stuck in lockdowns with no end in sight.

How in the world are 300,000 Canadians going to get vaccinated every day at this rate? Does the government know how many Canadians need to be vaccinated so the lockdowns can end?

**Hon. Anita Anand (Minister of Public Services and Procurement, Lib.):** Mr. Speaker, 643,000 doses of vaccines are arriving in Canada this week, the majority of which have been delivered. This is our largest shipment to date.

By the end of the week, 2.5 million doses will have been delivered and another 3.5 million are arriving in the month of March. We will see six million doses cumulative this trimester. We will see 29 million doses cumulative in the second quarter, and 84 million doses of Pfizer and Moderna prior to the end of September.

All Canadians who wish to have a vaccine will—

**The Speaker:** The member for Portage—Lisgar.

**Hon. Candice Bergen (Portage—Lisgar, CPC):** Mr. Speaker, Canadians have been locked down now for almost a year.

Mental health is at a breaking point, business is dying, there is no hope for opening up, and now new COVID variants are starting to spread across the country.

The Prime Minister's plan would only see 8% of Canadians vaccinated by April. This is the plan, so it is up to the Liberals to be clear and honest.

Could the health minister tell us if she has any idea how many Canadians need to be vaccinated before we can begin to open up, as other countries are already planning to do?

● (1420)

**Hon. Anita Anand (Minister of Public Services and Procurement, Lib.):** Mr. Speaker, I take issue with the initial part of that question, which suggests that the Liberals do not have a plan.

On the contrary, the plan has been in place for months. We have negotiated seven agreements with leading vaccine suppliers for a total of up to 400 million doses from approved suppliers alone. Canadians are all going to have access to a vaccine prior to the end of September, if not before. That is the promise that the government has made and it is a plan we are sticking with.

### Oral Questions

[Translation]

**Mr. Gérard Deltell (Louis-Saint-Laurent, CPC):** Mr. Speaker, the government has come up with only one excuse for the mess it made of the infamous hotel booking system for Canadian travellers. It is blaming people for booking too early.

Every day, thousands more people join the growing line of those already waiting. In my riding, Ms. Oblin, from the Des Saules area, has been on the phone since Friday trying to book a hotel room for her son, who is currently in Paris. She calls and gets cut off. She calls back and is told to remain on the line. She calls but is unable to talk to anyone.

Can the government tell Ms. Oblin that it will look after her? If not, what does it have to say to her?

[English]

**Hon. Patty Hajdu (Minister of Health, Lib.):** Mr. Speaker, since the beginning of the pandemic, we have added layers of protection at our border crossings to protect Canadians from the importation of COVID and, indeed, most recently from the variants that have arisen across the world. Part of the process now, as the member opposite knows, is that anyone who is returning to Canada must take a PCR test upon arrival and quarantine until the receipt of a negative test, and then go on to complete their quarantine in their own home. Quarantine has been a very important process for keeping importations low, and the screening will allow us to track variants as they affect our Canadian progress.

[Translation]

**Mr. Gérard Deltell (Louis-Saint-Laurent, CPC):** Mr. Speaker, that is unfortunate for Ms. Oblin's son. He did exactly what the minister said, but no one answered the phone. If he cannot get through by tomorrow, then, unfortunately, he will be unable to return to Canada.

There is a problem that the government could solve right now, and that is the much-touted \$1,000 for non-essential travel by Canadian workers. That issue still has not been resolved.

I am reaching out to the government for the seventh time. Is the government prepared to introduce the bill so that we can debate it, amend it as needed and pass it?

**Hon. Pablo Rodriguez (Leader of the Government in the House of Commons, Lib.):** Mr. Speaker, passing this bill is a top priority for the government.

Unfortunately, the Conservatives refused to give unanimous consent, despite how important this bill is. We are therefore looking at other alternatives. Also, Canada now has one of the strictest traveller screening programs in place. Do the Conservatives support such strict measures?

*Oral Questions*

**Mr. Alain Therrien (La Prairie, BQ):** Mr. Speaker, the hotel quarantines are a fiasco that could easily have been avoided.

The government should have foreseen that by announcing the telephone booking system just three days before the quarantines were to come into effect, tons of people would be stuck waiting. There were 45,000 calls over the weekend, but only 2,300 people managed to make reservations. Some people were on hold for 25 hours, and only 5% of callers managed to book a room.

What has the government done since yesterday to change the situation?

**Hon. Pablo Rodriguez (Leader of the Government in the House of Commons, Lib.):** Mr. Speaker, we implemented a very restrictive system, so obviously there were going to be challenges at first. There were 45,000 calls in the first few days. Some of the callers needed general information, but they do not need it anymore because the details of the program are out there. Some were making reservations months in advance, but our message is that they should book when they are about to leave, a day or two ahead of time.

This is all a result of our decision to implement some of the strictest rules in the world, and I would like to know if the Bloc Québécois supports them or not.

**Mr. Alain Therrien (La Prairie, BQ):** Mr. Speaker, we are not asking for the moon, we are asking for someone to answer the phone. That is what we are asking for. It is not that hard.

It took two months for the government to wake up. In the lead-up to Christmas, the government was asked to ban non-essential flights, but it did not. It was asked to impose a quarantine on people returning from abroad, but it did not. On January 29, it woke up and said it would institute a quarantine starting on February 4. That got pushed back to February 22, but there are flaws. It is a fiasco. When will the government wake up?

• (1425)

**Hon. Pablo Rodriguez (Leader of the Government in the House of Commons, Lib.):** Mr. Speaker, I understand that the Bloc Québécois is looking for some love and attention. It is seeking attention on these issues, which is pretty much par for the course.

However, we did not wait for the Bloc Québécois to act, by implementing a multitude of economic programs, stopping flights heading south, imposing a quarantine for returning travellers, requiring mandatory tests, hotel stays, and so on.

It is working. We have the strictest system in the world. Again, will the Bloc support our efforts or not?

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**INTERNATIONAL TRADE**

**Mr. Jagmeet Singh (Burnaby South, NDP):** Mr. Speaker, the Prime Minister has let down workers again and again. He promised to increase the minimum wage to \$15, but he broke that promise.

Workers are already hard hit by COVID-19, and now they are worried about the impact of the buy America initiative. Will the Prime Minister ask for an exemption for Canadian products when he meets with President Biden?

[English]

**Hon. Mary Ng (Minister of Small Business, Export Promotion and International Trade, Lib.):** Mr. Speaker, I want to assure the member and all Canadians that we will always stand up for Canadian workers, for Canadian businesses and indeed for the best interests of Canadians. The Prime Minister, in his conversations with both the President and the Vice-President, committed to strengthening our trading relationship and avoiding any unintended consequences of buy America policies, to the benefit of both countries.

We are looking forward to continuing to work with our American neighbours to ensure that we are supporting a sustainable recovery, creating good jobs—

**The Speaker:** The member for Burnaby South.

**Mr. Jagmeet Singh (Burnaby South, NDP):** Mr. Speaker, the Prime Minister has let down workers again and again. He promised to increase the minimum wage to \$15 an hour, but he broke that promise. Workers are already hard hit by COVID-19 and now workers are worried about the impact of the buy America initiative in the United States.

Will the Prime Minister stand up for workers and fight for workers, when he meets with President Biden, by making sure that there is an exemption for Canadian products to protect Canadian workers and their jobs?

**Hon. Mary Ng (Minister of Small Business, Export Promotion and International Trade, Lib.):** Mr. Speaker, our government will always stand up for Canadian businesses and for Canadian workers. Our countries will continue to work closely together, just as we have in the last five years, to make sure we avoid any measures that could constrain our bilateral relationship and the economic growth between our two countries. We will continue to work closely to support the sustainable economic recovery, create jobs and grow the middle class in Canada and the United States.

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**EMPLOYMENT**

**Hon. Pierre Poilievre (Carleton, CPC):** Mr. Speaker, a year after the great financial crisis began, Canada had lower unemployment than the United States of America. That was under a previous Conservative government. Today, the Prime Minister has the humiliating job of meeting with the U.S. President while Canada's unemployment is a third higher than in the United States and higher than in Germany, Japan, the U.K. and all of the G7 countries combined.

What are the 800,000 Canadians without paycheques going to do to pay the bills, while they watch workers around the world get back to their jobs?



*Oral Questions*

**Mr. Sean Fraser (Parliamentary Secretary to the Minister of Finance and to the Minister of Middle Class Prosperity and Associate Minister of Finance, Lib.):** Mr. Speaker, it is ironic that the hon. member would cite Stephen Harper's economic record as a measure of success when he had the worst economic growth rate since the Great Depression and was the only government in the G7 to actually re-enter a recession in advance of the 2015 election.

I point the hon. member to the fact that 71% of job losses from the peak of the pandemic have recovered in Canada, compared with 56% in the United States. Under any objective measure, Canada's economic recovery is well ahead of that of our American counterparts.

**Hon. Pierre Poilievre (Carleton, CPC):** Mr. Speaker, under any objective measure, we had lower unemployment than the Americans did during the Harper era and we have a third higher unemployment right now. This is if we line up the measurements of unemployment, apples to apples, between the two countries.

There are 800,000 Canadians who have lost their jobs and not regained them and our unemployment is significantly higher than that of the Americans, which means either we have not recovered as many jobs or we went in with a much higher jobless rate to begin with. Either way, the parliamentary secretary should stop making excuses and tell these Canadians when they will get their paycheques back.

• (1430)

**Mr. Sean Fraser (Parliamentary Secretary to the Minister of Finance and to the Minister of Middle Class Prosperity and Associate Minister of Finance, Lib.):** Mr. Speaker, I am happy to inform the hon. member that labour force participation in Canada is 64.3%, compared with only 61.3% in the United States. However, what is most important in this conversation is the fact that the recent job losses we have seen in Canada are tied to the restriction of economic activities that would spread COVID-19 and cause further economic consequences for the economy.

If the hon. member and the Conservative Party's approach would have businesses continue to be open to enable a further spread of the virus, I invite them to say so and take that to the polls.

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**PUBLIC SERVICES AND PROCUREMENT**

**Hon. Michelle Rempel Garner (Calgary Nose Hill, CPC):** Mr. Speaker, that is a great segue.

While countries around the world are projecting a drop of COVID cases even with the variants, the Liberals are projecting a spike and calling for deeper lockdowns. This is because the Liberals' failure to get vaccines over the last three months has left Canadians vulnerable. Officials have admitted that the Liberals do not have contracts secured for boosters that are under development to better protect against the variants. The Liberals' first vaccine failure has made Canada one of the most vulnerable countries in the developed world against the spread of variants, and now we have found out that they do not have contracts for boosters.

Have the Liberals learned nothing from their failures, which have cost Canadians their lives and jobs?

**Hon. Anita Anand (Minister of Public Services and Procurement, Lib.):** Mr. Speaker, I thank the hon. member for her question. However, it is riddled with inaccuracies.

To begin, Canada was one of the first countries to sign with Moderna and Pfizer, one of the first countries to get vaccines into the country and one of the first countries to secure the largest number of doses per capita in the world. In terms of contracts for boosters, we have been in direct contact with suppliers on this issue and are engaged with them at the current time.

**Hon. Michelle Rempel Garner (Calgary Nose Hill, CPC):** Mr. Speaker, just to correct the minister, Canada is one of the last countries in the developed world to have our population vaccinated. That is what matters.

This week, Dr. Anthony Fauci was saying that COVID might be moving from pandemic to endemic status and that we need to be managing it from a chronic perspective. Boosters for variants are going to be a key part of this over time to make sure that Canadians can live normal lives free of restrictions while being healthy. The Liberals have put us three months behind the rest of the world in vaccinations and have no plan to safely reopen the economy. We need hope.

When will the Liberals have a contract for boosters?

**Hon. Anita Anand (Minister of Public Services and Procurement, Lib.):** Mr. Speaker, as I just mentioned, we are engaged with suppliers on this issue, and many of the suppliers we spoke with said that the science is not there yet in terms of their production of boosters. We are, therefore, engaged with them to ensure that Canada is prioritized when that science is ready and when they are offering boosters in terms of contractual negotiations. As usual, we are placing Canadian interests at the very forefront of vaccine production.

Did I mention that we have had 600,000-plus vaccines delivered into this country to date this week? Our largest shipment—

**The Speaker:** The hon. member for Charlesbourg—Haute-Saint-Charles.

\* \* \*

[*Translation*]

**HEALTH**

**Mr. Pierre Paul-Hus (Charlesbourg—Haute-Saint-Charles, CPC):** Mr. Speaker, yesterday, the media reported on a couple who had spent 14 hours waiting on hold trying to reserve a hotel room. They could not reach anyone.

Another person stated that they had called repeatedly over three days.

*Oral Questions*

Another couple moving from Bangladesh to Regina was forced to cancel their flight because they could not book a hotel room.

What are the government and the Prime Minister doing to fix the chaos they have created?

**Hon. Pablo Rodriguez (Leader of the Government in the House of Commons, Lib.):** Mr. Speaker, as I mentioned earlier, we established one of the strictest systems in the world. When people return to Canada, they must undergo an assessment, then be tested here and quarantine in a hotel by making reservations in advance. There were about 45,000 calls in three days. The situation is getting better on its own, in part because people are getting the information but also because we have added more staff to answer questions and take reservations.

**Mr. Pierre Paul-Hus (Charlesbourg—Haute-Saint-Charles, CPC):** Mr. Speaker, I have a hard time believing the government, because from the beginning, every time we have asked questions about the border, some new problem has come up.

In the beginning, we called for the government to stop flights from China, and we were called racist. We then asked for rapid testing, but we were told that it was pointless. Border services officers were even asked to simply provide information, without taking any other action, but that did not work.

Now the problem is that the government seems to be improvising on the fly. It makes no sense to implement a system for thousands of people without any other solutions.

What, exactly, is the government doing, other than waiting for this problem to fix itself?

● (1435)

**Hon. Pablo Rodriguez (Leader of the Government in the House of Commons, Lib.):** Mr. Speaker, my colleague seems to be the one improvising with his question.

Everything we are doing now is part of a plan that we have been gradually implementing for quite some time. We started by halting flights south, limiting the number of airports, reserving hotels for quarantines and making sure we had tests available for travellers returning to the country. This is a huge operation being carried out in partnership with numerous stakeholders at all levels, and it is part of a system that is one of the strictest in the world.

\* \* \*

**PUBLIC SAFETY**

**Ms. Kristina Michaud (Avignon—La Mitis—Matane—Matapédia, BQ):** Mr. Speaker, there has been a lot of talk, and rightly so, about the failure of the mandatory quarantine hotline. It is also important to talk about the security gaps.

When people arrive at the airport, they can drive away in their car without an escort. They can run errands, drop by their home and even say a quick hello to loved ones. The only supervision measure in place is that if they never show up at the hotel, an alert is eventually sounded.

What is the government doing to correct this poor planning?

[English]

**Hon. Bill Blair (Minister of Public Safety and Emergency Preparedness, Lib.):** Mr. Speaker, just to be clear, the rules are very explicit. A quarantine has proven to be one of our most effective measures and everyone entering this country is required to enter quarantine and to follow all of the rules. When directed by our border services officers and PHAC to go to a designated hotel, they have to do so directly. Failure to do that can result in very significant consequences in terms of fines and even criminal prosecution. We are prepared to enforce the rules and the rules are working to keep Canadians safe.

\* \* \*

[Translation]

**HEALTH**

**Ms. Kristina Michaud (Avignon—La Mitis—Matane—Matapédia, BQ):** Mr. Speaker, I would remind the member that the hotel quarantine system is a solution to a problem that was raised before Christmas.

After two months of delay, the government did not plan for a list of essential travellers. It did not plan for a website to reserve rooms. It did not plan to set up a telephone line with sufficient lead time before the quarantines came into effect. It did not plan for enough telephone operators. It did not plan for adequate supervision between the airport and the hotel. It did not plan to share information with hotel operators.

What was the government doing during those two months of inaction?

**Hon. Pablo Rodriguez (Leader of the Government in the House of Commons, Lib.):** Mr. Speaker, the Bloc Québécois has only one thing to plan: the questions they are going to ask during question period.

Meanwhile, for months now, the government has been planning for the return of travellers. This has involved limiting flights south and planning hotel reservations, traveller transfer capacities and testing upon return. This is all part of an extremely strict system to control the pandemic, and it is one of the strictest systems in the world.

\* \* \*

**OFFICIAL LANGUAGES**

**Mr. Alain Rayes (Richmond—Arthabaska, CPC):** Mr. Speaker, here are the unanimous requests of official languages advocacy organizations across the country: set up an administrative tribunal, centralize enforcement powers at Treasury Board and provide financial support for francophone education in minority communities. Those are all things that our leader has pledged to support in the first 100 days of a Conservative government.

Today, rather than spouting her usual rhetoric, can the minister answer this extremely simple question: Does she agree with the three things I just mentioned, yes or no?

*Oral Questions*

**Hon. Mélanie Joly (Minister of Economic Development and Official Languages, Lib.):** Mr. Speaker, I will not take any lessons from my colleague or the Conservative Party, which has no credibility when it comes to official languages. Why? It is because every time a Conservative government takes office, at either the provincial or federal level, francophone rights are set back.

That being said, I agree with my colleague that we need a central agency, and that is included in the reform. I agree with my colleague that the powers of the Commissioner of Official Languages must be enforced via the Federal Court, as in an administrative tribunal, and that is part of the reform. I also agree that we need to protect our post-secondary institutions, and that is also included.

Do my colleague and the Conservative Party support our reform?

**Mr. Alain Rayes (Richmond—Arthabaska, CPC):** Mr. Speaker, we could not care less about the minister's reform. What we need is a law.

The Liberals have been in power for five years, and the minister has been in cabinet that whole time. They have been consulting people for five years, yet there is no bill for us to debate as we figure out what would be best for all minority francophone communities in Canada.

Francophones are fighting to protect their language, but the way things are going, by the time Canadians go to the polls, this country's linguistic minorities will be no better off than they were before. I have another very simple question for the minister because she seems to have forgotten that she is a member of the government, not the opposition. It is the opposition's privilege to ask questions, and it is her responsibility to take action.

When will a bill be introduced?

• (1440)

**Hon. Mélanie Joly (Minister of Economic Development and Official Languages, Lib.):** Mr. Speaker, my colleague just said that he could not care less about the government's official languages reform.

Here is my question. Is the member for or against linguistic reform that has the support of francophone organizations across the country, the Chamber of Commerce of Metropolitan Montreal, other chambers of commerce across the country and the Conseil du patronat du Québec, yes or no?

That is a question, and I want an answer.

\* \* \*

[English]

**NATURAL RESOURCES**

**Mr. Greg McLean (Calgary Centre, CPC):** Mr. Speaker, media reports from yesterday say that the Prime Minister will not be raising any specific energy projects when he meets with the President today. No, this is not a *Seinfeld* episode. We do not need a meeting about nothing when our public health and economic security are at risk. The Michigan governor is threatening to cut off Enbridge Line 5 in contravention of an international treaty. Jobs are at risk. The economy of Canada is at risk. As we all know, budgets do not balance themselves and this issue will not fix itself.

Millions of Canadians who depend on Line 5 are wondering, what is the Prime Minister waiting for?

**Hon. Seamus O'Regan (Minister of Natural Resources, Lib.):** Mr. Speaker, no other two countries have their energy sectors as closely linked as we do, with 70 pipelines and three dozen transmission lines crossing the border, and over \$100 billion in annual energy trade. We will raise opportunities for further collaboration with our American counterparts on security of energy infrastructure, resilience of supply chains and our common mission to lower emissions in the net-zero future. The Canada-U.S. bilateral energy relationship is the strongest in the world. Today, we will make that relationship even stronger.

**Mr. Greg McLean (Calgary Centre, CPC):** Mr. Speaker, if ministers were rewarded for words, this minister would be an outperformer. However, the government's results on energy are dismal. On Trans Mountain, its proponents left Canada, and it is now years behind schedule. Northern gateway was cancelled. Energy east was cancelled. Teck Frontier was cancelled. Keystone XL was cancelled while the government sat on its hands. If we leave Line 5 in this minister's hands, we know the likely result: more apologies for failure, more jobs lost and more investments leaving Canada. Will the Prime Minister please step up and rescue Line 5 from this minister?

**Hon. Seamus O'Regan (Minister of Natural Resources, Lib.):** Mr. Speaker, to quote another *Seinfeld* episode, that is a lot of "yada yada yada".

Let us talk about how we support our oil and gas workers. We approved TMX. We bought it and are building it. Seven thousand jobs have been created, and more are to come. We approved the Line 3 replacement. It is built on the Canadian side. Seven thousand jobs were created. We approved NGTL 2021, with thousands of jobs to be created. There is \$1.7 billion for orphan and inactive wells, creating thousands of jobs in Saskatchewan, B.C. and Alberta.

We will always defend Canada's interests when it comes to energy security and our energy workers.

\* \* \*

[Translation]

**TAXATION**

**Mr. Alexandre Boulerice (Rosemont—La Petite-Patrie, NDP):** Mr. Speaker, in Quebec the mistreatment of seniors at CHSLD Herron is the stuff of nightmares.

### Oral Questions

Elsewhere in the country Revera is being flagged. I would remind hon. members that Revera is owned by the federal government. As if that were not enough, there is more bad news: apparently a subsidiary of Revera has engaged in the most despicable of tax evasion schemes. This is public money that is slipping through our fingers. As hon. members know, the Liberals are doing absolutely nothing to combat tax havens. Worse, they have signed new agreements with tax havens.

Could they at least have the decency to not be involved in the companies engaging in tax evasion?

**Hon. Diane Lebouthillier (Minister of National Revenue, Lib.):** Mr. Speaker, fighting tax evaders in Canada and abroad is our government's priority.

Budgets 2016 and 2017 included \$5 billion in additional tax revenue by 2022. In April 2020, we had already exceeded \$6.6 billion. Our government's historic investments in fighting tax evasion are bearing fruit.

I invite my opposition colleague to join me in acknowledging that our hard work has paid off.

\* \* \*

• (1445)

[English]

### INDIGENOUS AFFAIRS

**Mr. Charlie Angus (Timmins—James Bay, NDP):** Mr. Speaker, when it comes to denying rights to first nation children, the Prime Minister is clear that money is no object. The Parliamentary Budget Officer's report on his obstruction of the Human Rights Tribunal is shocking. Ten noncompliance orders later, as a result of the Human Rights Tribunal's being forced to issue maximum penalties to try to bring the Prime Minister to the table, the bill is now \$15 billion and has been paid in the lives of far too many first nation children. Those children deserve better. I am asking the Prime Minister, will he end his obstruction to the Human Rights Tribunal and pay the money that is owing to these most vulnerable children in Canada?

**Hon. Marc Miller (Minister of Indigenous Services, Lib.):** Mr. Speaker, let me be clear once again that this government is unequivocally committed to addressing the long-standing unmet needs of first nation children and resolving these cases. The member will note that we are continuing our mediation with the CHRT partners, two other class action partners, to the complaints first nations partners, provinces and territories to ensure that we fully implement Jordan's principle and resolve this wrong.

\* \* \*

### AGRICULTURE AND AGRI-FOOD

**Mr. Tim Louis (Kitchener—Conestoga, Lib.):** Mr. Speaker, our farmers and ranchers proudly work every day to feed Canadians and the world with their products. This past year has shown how strong our food supply chain remains and how resilient our agriculture sector is.

Today, February 23, we are celebrating Canada's Agriculture Day to highlight the important work producers do to keep food on our table.

Could the Minister of Agriculture and Agri-Food inform the House about this day, which honours the contributions of our nation's farmers?

**Hon. Marie-Claude Bibeau (Minister of Agriculture and Agri-Food, Lib.):** Mr. Speaker, today, I want to thank and celebrate our Canadian farmers, who stood strong during the pandemic to keep our grocery store shelves and also our food banks stocked with very high-quality products.

[Translation]

Today, I want to thank and celebrate our Canadian farmers, who continue to show up for work every day, pandemic notwithstanding, to cultivate their fields and take care of their livestock.

I urge everyone to support their local farmers.

\* \* \*

[English]

### NATIONAL DEFENCE

**Mr. James Bezan (Selkirk—Interlake—Eastman, CPC):** Mr. Speaker, yesterday, military justice expert retired Colonel Michel Drapeau told the committee that the defence minister had a duty to investigate serious allegations of sexual misconduct as soon as he learned of them. He said, "The minister had fundamentally two duties. One was to investigate. He had the tools to do so." The other was to share the results of his investigation with PCO.

Canadians deserve to know this. Did former defence ombudsman Gary Walbourne inform the defence minister of these allegations in 2018 and did he immediately launch an investigation?

**Hon. Harjit S. Sajjan (Minister of National Defence, Lib.):** Mr. Speaker, I can say with the utmost confidence that I took the appropriate action, because I have absolutely no tolerance for inappropriate sexual misconduct regardless of rank or position. Any insinuation otherwise is false.

Regarding the ombudsman, the conversations are actually kept private and are confidential. This is so people can feel comfortable coming forward to the ombudsman to lodge any sort of complaint.

**Mr. James Bezan (Selkirk—Interlake—Eastman, CPC):** Mr. Speaker, the defence minister's refusal to answer straightforward questions is looking more and more like a cover-up.

Our brave women and men in uniform are losing confidence in the minister. Sexual misconduct in the Canadian Armed Forces should never be covered up, and the defence minister had a duty to investigate. His failure to investigate these allegations calls into question his ability to continue serving as the Minister of National Defence.

*Oral Questions*

Will the defence minister end the cover-up and finally tell Canadians the truth of when he first learned of these disturbing allegations?

**Hon. Harjit S. Sajjan (Minister of National Defence, Lib.):** Mr. Speaker, I completely disagree with the member's assertions. I can say with the utmost confidence that I took the appropriate action, because I have absolutely no tolerance for any type of inappropriate sexual misconduct regardless of rank or position.

Maybe the member opposite would like to answer what he knew when he was the parliamentary secretary of national defence during the time when the former chief of the defence staff was being selected.

\* \* \*

• (1450)

**INTERNATIONAL TRADE**

**Mrs. Tracy Gray (Kelowna—Lake Country, CPC):** Mr. Speaker, the Biden administration has now stated that no changes are anticipated for its buy American policies, which will hurt Canadian businesses and affect jobs. It is crucial that Canada receives an exemption.

The Biden election platform policy fulfillment should not come as a surprise to the Prime Minister. What is the Prime Minister's specific plan to get an exemption for Canada, just as we have had before with the former U.S. administration?

**Hon. Mary Ng (Minister of Small Business, Export Promotion and International Trade, Lib.):** Mr. Speaker, I want to assure the hon. member and all Canadian workers and businesses that our government will always stand up for Canadian businesses and our workers.

The U.S. and Canada have agreed to consult closely to avoid any measures that could constrain our bilateral trade and economic growth between our two countries. We have worked with the administration and will continue to work with the administration while standing up for our Canadian workers.

**Mrs. Tracy Gray (Kelowna—Lake Country, CPC):** Mr. Speaker, thousands of Canadian jobs were lost due to the cancellation of Keystone XL, thousands of jobs are under threat due to the buy American policies and the livelihoods of thousands of farmers are on the line due to U.S. investigations of our produce and dairy sectors. Canadian workers need a victory, not more talking points.

On his call today with President Biden, will the Prime Minister stand up for workers who rely on trade with the U.S. and get a commitment for a buy American exemption?

**Hon. Mary Ng (Minister of Small Business, Export Promotion and International Trade, Lib.):** Mr. Speaker, at a time when our economy and the global economy are facing significant challenges from COVID-19, we all know the importance of maintaining market access to our closest trading partner.

Our government will always stand up for Canadian businesses and Canadian workers. The Prime Minister, in his conversation with the President and the vice-president, and indeed our entire government, is seized with working with the American administra-

tion to ensure we stand up for our Canadian workers and businesses.

\* \* \*

[Translation]

**TAXATION**

**Mrs. Julie Vignola (Beauport—Limoilou, BQ):** Mr. Speaker, 140,000 members of the Public Service Alliance of Canada were victims of the Phoenix pay system. Some were not paid for months. Some lost their homes, their mental health, their lives.

To make up for this fiasco, the government announced \$2,500 in compensation. Now we are learning that it wants to tax this amount. Compensation is supposed to be a financial apology to honest workers who went through hell for four years. It is not income.

Will the government change course and pay these employees the full amount?

**Hon. Diane Lebouthillier (Minister of National Revenue, Lib.):** Mr. Speaker, our government recognizes that the Phoenix pay system issue left many public servants in financial difficulty.

Some parts of the compensation agreement are subject to income tax and other deductions pursuant to the Income Tax Act and the Pension Act. The same is true for other compensation agreements with employees in various sectors across Canada.

**Mrs. Julie Vignola (Beauport—Limoilou, BQ):** Mr. Speaker, public servants already pay taxes on their wages. The compensation they are getting for the Phoenix fiasco is not wages, a bonus or a promotion.

They are being compensated because the federal government failed to pay its own employees and caused them hardship for years. The government should be ashamed for even thinking of taxing this money.

Will the government change course on March 3 and pay its employees every cent of the \$2,500 they deserve?

**Hon. Diane Lebouthillier (Minister of National Revenue, Lib.):** Mr. Speaker, as I said, our government recognizes that the Phoenix pay system issue left many public servants in financial difficulty.

In addition, I pointed out that some parts of the compensation agreement are subject to income tax and other deductions pursuant to the Income Tax Act and the Pension Act. The same is true for other compensation agreements with employees in various sectors across Canada.

*Oral Questions*

[English]

**AGRICULTURE AND AGRI-FOOD**

**Ms. Lianne Rood (Lambton—Kent—Middlesex, CPC):** Mr. Speaker, Ontario vegetable growers recently sent an urgent letter to the Minister of Agriculture asking her to implement AgriRecovery to offset losses from the pandemic.

There are vegetable farmers who have lost millions of pounds of fresh food. There are other farmers across the country who also are hurting from COVID-19 production losses.

Will the minister immediately implement AgriRecovery to help Canadian farmers with their catastrophic losses due to COVID-19—

• (1455)

**The Speaker:** Could I ask hon. members to mute their microphones. There was a disruption there. If the hon. member does not mind, I will ask that she ask her question again and then we will get an answer to the question, just to avoid any confusion.

**Ms. Lianne Rood:** Mr. Speaker, Ontario vegetable growers recently sent an urgent letter to the Minister of Agriculture asking her to implement AgriRecovery to offset losses from the pandemic.

There are vegetable farmers who have lost millions of pounds of fresh food. There are other farmers across the country who also are hurting from COVID-19 production losses.

Will the minister immediately implement AgriRecovery to help Canadian farmers with their catastrophic losses due to COVID-19 before the next growing season begins?

**Hon. Marie-Claude Bibeau (Minister of Agriculture and Agri-Food, Lib.):** Mr. Speaker, AgriRecovery is one of the important business risk management tools that we have to support farmers. The way it works is that the province has to make the request to the federal government, and then we will evaluate this request together.

I can assure my colleague that we are very open to support farmers in need, and this is exactly why I have made the proposal to my provincial counterparts to improve AgriStability by \$170 million. I am waiting for a response from some of them.

[Translation]

**Mr. Jacques Gourde (Lévis—Lotbinière, CPC):** Mr. Speaker, dairy farmers and processors have been waiting for months to get the compensation that the Liberal government promised them to make up for the market share they lost as a result of the free trade agreements signed with our trade partners.

Will the government provide some predictability and, most importantly, will it do so before March 31, 2021? Could the minister confirm that?

**Hon. Marie-Claude Bibeau (Minister of Agriculture and Agri-Food, Lib.):** Mr. Speaker, I am pleased to confirm to my colleague that we have committed to providing \$1.75 billion to dairy farmers for the first two agreements with Europe and the trans-Pacific region.

We are ahead of schedule on these payments. The vast majority of farmers got their second payment in the last few weeks, and they already know how much they will get next year and the following year. In addition, I will soon be announcing the details of the \$691-million compensation package for poultry and egg farmers.

[English]

**Mr. Dan Mazier (Dauphin—Swan River—Neepawa, CPC):** Mr. Speaker, on Canada's Agriculture Day, we recognize the immense contributions of our farm families. One in eight jobs is related to agriculture, so our Canadian egg industry will be vital to our economic recovery. Unfortunately, the government has restricted the ability for agriculture to prosper, due to its rising carbon tax, limits to market access and failed trading relationships.

How can Canadian agriculture reach its full potential when the government will not let it?

**Hon. Marie-Claude Bibeau (Minister of Agriculture and Agri-Food, Lib.):** Mr. Speaker, we are actually supporting the agricultural sector much more than the previous government did.

We have reinvested in science and innovation significantly. I have just proposed to my provincial counterparts to improve the AgriStability program by \$170 million. We have delivered on compensation for the supply management sectors. Last year was a record year in terms of exports, with \$74 billion in exports of Canadian food.

\* \* \*

[Translation]

**AEROSPACE INDUSTRY**

**Mrs. Sherry Romanado (Longueuil—Charles-LeMoine, Lib.):** Mr. Speaker, last week, the international community watched with admiration as the *Perseverance* rover landed on Mars. Dr. Farah Alibay, an aerospace engineer from Quebec, played a key role in this mission and received high praise for her innovative work at this historic moment.

Can the Minister of Innovation, Science and Industry give the House an update on the measures the government has taken to support space exploration?

**Hon. François-Philippe Champagne (Minister of Innovation, Science and Industry, Lib.):** Mr. Speaker, I thank my excellent colleague for her question.

I am well aware of how important the space exploration sector is for the people of Longueuil, particularly since the Canadian Space Agency is headquartered there.

Our government proudly reinvested in this vital sector, with \$2 billion for a national space strategy. Canadians were inspired by the *Perseverance's* historic mission and Dr. Alibay's work. I myself had the opportunity to speak to her. She is an inspiring leader of whom we are all extremely proud.

• (1500)

[English]

### FOREIGN AFFAIRS

**Mr. Kenny Chiu (Steveston—Richmond East, CPC):** Mr. Speaker, Chinese ambassadors have a history of degrading our nation, from accusing Canada of white supremacy a couple of years ago to now calling Canada's declaration against arbitrary detention no different than a thief shouting to catch a thief, calling us hypocritical and despicable.

Why does the government consistently refuse to refute these blatant fallacies and allow these so-called emissaries to trample on Canada without rebuke?

**Mr. Robert Oliphant (Parliamentary Secretary to the Minister of Foreign Affairs, Lib.):** Mr. Speaker, Canada always remains firm and resolute in defending our rights at home and abroad and the rights of Canadians at home and abroad. Canada has a complex and multi-dimensional relationship with China. It presents challenges for us, our international partners and people all around the world.

Our policy here and abroad is based on Canadian interests; fundamental values; our principles, including human rights; and a strategic understanding of the way we impose international rules-based order. We are firm and we are smart in this approach.

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### IMMIGRATION, REFUGEES AND CITIZENSHIP

**Mr. Jasraj Singh Hallan (Calgary Forest Lawn, CPC):** Mr. Speaker, Immigration Canada is reporting an increased number of visa applicants who are expressing thoughts or intentions of suicide because of processing delays. We have repeatedly heard heartbreaking testimony from separated families of the hardships they are facing due to these ridiculous delays. Parents are missing their child's first words, their first steps and, in some cases, even their births.

The minister is a father, just like me. Let us show some compassion and let us clear up these backlogs. How long will the Liberal government stall families from reuniting with each other?

**Hon. Marco Mendicino (Minister of Immigration, Refugees and Citizenship, Lib.):** Mr. Speaker, it has been a challenging time for loved ones and that is why we have reunited tens of thousands of families, notwithstanding the pandemic. This progress is the function of a carefully executed plan that has added resources to the border, introduced effective health protocols and created new pathways for unification. When it comes to our service standards, not only are we keeping our 14-day turnaround for complete applications, we are exceeding it.

It would be inappropriate to comment on any individual case but, of course, I am happy to work with the member, as we have done for quite some time to work through any problematic cases.

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### HEALTH

**Mr. Damien Kurek (Battle River—Crowfoot, CPC):** Mr. Speaker, more than a year ago we started asking questions about COVID, but a year into the crisis, on almost every front, Canada

### Oral Questions

has fallen behind. Yesterday the U.K. laid out a strategy to reopen. Israel has vaccinated 80% of its population, and the U.S. is vaccinating more Americans daily than the total number of jobs received here. Canadians are falling behind. They are unemployed and desperate for hope.

With failures stacking up, can the government finally admit and at least be honest with Canadians about when we can expect a return to some level of normalcy in this country?

**Hon. Patty Hajdu (Minister of Health, Lib.):** Mr. Speaker, every step of the way Canada has used science and evidence to respond to COVID-19. We have worked with provinces and territories. We have given billions of dollars to provinces and territories to help them in their health care responsibilities. We have funded research. We have acquired vaccines. In fact, as my hon. colleague mentioned, we acquired 650,000 this week alone.

We continue to be there for Canadians with financial supports. We will get through this together. I thank all Canadians who are working so hard during this difficult time.

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### OFFICIAL LANGUAGES

**Ms. Patricia Lattanzio (Saint-Léonard—Saint-Michel, Lib.):** Mr. Speaker, linguistic duality is a key part of what makes Canada great, and nowhere is this more apparent than in Montreal's anglophone community. We are proud to live in Canada's only French province, proud of our English heritage and proud to speak both official languages.

Can the Minister of Official Languages tell us how the language reform document tabled in the House last week protects the rights of anglophone Quebecers, as well as the official language minority communities across the country?

• (1505)

**Hon. Mélanie Joly (Minister of Economic Development and Official Languages, Lib.):** Mr. Speaker, the member has a great riding.

Of course our government will always stand side by side with the English-speaking community in Quebec and with francophones outside of Quebec to make sure they are able to defend their constitutional rights. That is exactly what we can do by supporting both official languages, and protecting French, but never to the detriment of English-speaking Quebecers.

We will make sure to protect English-speaking Quebecers' institutions, while protecting the court challenges program. Finally, we will be there—

**The Speaker:** The hon. member for Victoria.

*Statements by Members***THE ENVIRONMENT**

**Ms. Laurel Collins (Victoria, NDP):** Mr. Speaker, Volkswagen's diesel engine scandal is one of the worst environmental crimes committed in Canada, but the Liberal government's response was completely inadequate. No one from the government is able to answer questions about why they waited years before laying charges, or why the penalties were so small in comparison to what Volkswagen paid in the U.S.

Now, after Volkswagen lied about illegal levels of emissions and endangering the health of Canadians, the government is letting Volkswagen collect the wage subsidy while the company pays out billions of dollars to its wealthy shareholders.

Why is the government once again looking out for big corporations instead of Canadians and the environment?

**Mr. Peter Schiefke (Parliamentary Secretary to the Minister of Environment and Climate Change, Lib.):** Mr. Speaker, this investigation, related prosecution matters and the judge's approval of Volkswagen AG's penalty are independent of the minister's office, and the hon. member knows that very well.

The conclusion of this investigation has resulted in the company paying an unprecedented fine in Canada. It is 26 times greater than the highest federal environmental fine ever imposed in Canada, and monies from the fine will go toward projects that protect the environment. Once again, my hon. colleague knows this very well.

We are proud of the results because they show we will take action and there are penalties in place for those who break the rules.

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**AEROSPACE INDUSTRY**

**Ms. Yasmin Ratansi (Don Valley East, Ind.):** Mr. Speaker, a few weeks back, I met with representatives from De Havilland, one of the most innovative Canadian companies in the aerospace industry. The industry employs 20,000 people, including some from my riding of Don Valley East, and contributes \$25 billion to the Canadian GDP. COVID-19 has had a negative impact on this industry, and hence, employment within it.

Can the Minister of Innovation, Science and Industry advise the House what assistance he can provide so this industry stays vibrant?

**Hon. François-Philippe Champagne (Minister of Innovation, Science and Industry, Lib.):** Mr. Speaker, I thank the member for her work on behalf of the aerospace industry and its workers.

We are all saddened for the workers and families who have been impacted by the decision to halt production of the Dash 8 aircraft. Since being named Minister of Innovation, Science and Industry, I have been in constant contact with key stakeholders in the aerospace sector to make sure we chart a path forward together. We know how important the aviation and aerospace industries are to the Canadian economy, and we will continue to invest in the sector and its workers.

**POINTS OF ORDER**

## STATEMENTS BY MEMBERS

**Mr. Peter Schiefke (Vaudreuil—Soulanges, Lib.):** Mr. Speaker, I rise on a point of order.

It may have been a simple oversight, but I had planned to deliver an S. O. 31 as the 16th speaker on the roster today. I am hoping that I can still move forward with delivering that statement.

**Mr. Mark Gerretsen:** Mr. Speaker, I believe if you seek it, you would find unanimous consent to allow the member to give his S. O. 31.

**The Speaker:** All those opposed to the request will please say nay.

Hearing no dissenting voice, it is agreed.

\* \* \*

[*Translation*]

**FARAH ALIBAY**

**Mr. Peter Schiefke:** Mr. Speaker, from Montreal to mission control, I rise today on behalf of the House of Commons to congratulate Quebec's own Dr. Farah Alibay, who recently helped the *Perseverance* rover land safely on Mars.

Her academic achievements at the University of Cambridge and the Massachusetts Institute of Technology and her personal perseverance led her to play a key role in this mission, which could confirm whether there is life on another planet, knowledge that could change the way we see our place in our galaxy.

● (1510)

[*English*]

In addition to her interplanetary accolades, perhaps her greatest contribution is her commitment to paying forward the mentorship she herself received by giving her time as a Big Sister and mentoring women interns herself. Dr. Alibay is an inspiration to so many, including my four-year-old daughter Ellie, whose eyes opened wide as I told her that Dr. Alibay was controlling the rover on Mars. We are proud, Canada is proud and we wish her nothing but the best in carrying out the important mission.

**Mr. Garnett Genuis:** Mr. Speaker, I rise on a point of order.

I have no desire to object to the previous member sharing his S. O. 31, but I do want to observe that the right to speak is not dependent on any list; it is on the call of the Speaker. I do not want the impression to be delivered that the right to speak was dependent on a list.



**The Speaker:** I appreciate that, and it is true. It will go as a point of courtesy. Because we had gone over S. O. 31s, I just thought it would be courteous to consult with the chamber to make sure that we had consent, but I thank the member for bringing that up.

\* \* \*

## PRIVILEGE

### MEMBERS' PARTICIPATION IN ORAL QUESTIONS—SPEAKER'S RULING

**The Speaker:** I am now prepared to rule on the question of privilege raised on February 16 by the member for Saanich—Gulf Islands concerning the participation of independent members and unrecognized parties during question period.

During her intervention, the member reminded the House that one of the essential rights of members is to participate in the proceedings of the House and to ask questions in order to hold the government to account. She feels that this right is being violated because independent members and unrecognized parties are not able to participate in question period on Wednesdays, the day when the Prime Minister normally answers all questions. She said that she had had a number of unproductive discussions on this matter with the leaders in the House of the recognized parties.

The member for Saanich—Gulf Islands asked the Chair to confirm that all members of all parties, recognized or not, have the right to ask questions during question period on Wednesdays. She thus asked the Speaker to order the recognized parties to meet and hold discussions with the independent members and unrecognized parties to find a solution that works for everyone.

[*Translation*]

Before continuing, I would like to take a moment to remind the members of the difference between questions of privilege and points of order.

As Joseph Maingot puts it in the second edition of *Parliamentary Privilege in Canada*, at page 223:

...where the answer to the alleged "question of privilege" is contained in the rules or the practice of the House, it would unlikely involve a breach of the privileges of Members. ...A breach of the Standing Orders or a failure to follow an established practice would invoke a "point of order" rather than a "question of privilege." Allegations of fact amounting to allegations that proper procedures were not followed are by their very nature matters of order, and even if valid will not receive priority in debate as would a prima facie case of privilege.

[*English*]

With all respect, the matter raised by the member is not a question of privilege of the House; it is, rather, a point of order.

This is not the first time that the Chair has been called on to rule on the appropriate role of independent members and unrecognized parties during question period. My immediate predecessor, in particular, gave a major ruling on this matter on October 23, 2018. He pointed out that the participation of independent members during question period is based on the delicate balance of a number of factors.

Independent members and unrecognized parties are in a peculiar position, because Canadian parliamentary practices were, to a large extent, developed with recognized parties in mind. That does not, however, relieve the Chair of all responsibilities for independent

## *Speaker's Ruling*

members and unrecognized parties. The Chair has a definite role to play in protecting their rights. While exercising this significant role, it is important that the Chair find a balance between the rights and interests of the majority and of those of the minority. In doing so, the Chair must try to be equitable and fair, without tipping the balance too far on one side or the other.

● (1515)

[*Translation*]

Central to the question raised by the member for Saanich—Gulf Islands is the issue of the allocation of oral questions to allow independent members and unrecognized parties to put questions directly to the Prime Minister on Wednesdays.

The third edition of *House of Commons Procedure and Practice* has this to say on the matter, at pages 515 and 516, and I quote:

In reality, questions are directed to the Ministry as a whole, although customarily they are addressed to specific Ministers. It is the prerogative of the government to designate the Minister who will respond to a given question, and the Speaker has no authority to compel a particular Minister to respond. The Prime Minister...may respond to any or all questions posed during Question Period. ...Members may not insist on receiving an answer nor may a Member insist that a specific Minister respond to his or her question.

[*English*]

At present, it is the Prime Minister's practice to respond to all oral questions on Wednesday. It should be noted that there is nothing in the Standing Orders to oblige him to do so, just as there is nothing that prevents him from answering all questions on the other days of the week. Conversely, the Prime Minister can decide not to respond to all the questions put to him, even on Wednesday, if he feels, for example, that another minister is better able to answer the question. Thus, even if independent members were given a question on Wednesdays, the Prime Minister would be under no greater obligation to answer it, and the Chair could not compel him to do so. The relevant principle here is the principle of ministerial responsibility: Ministers assume collective responsibility for the policies and decisions of the government.

On a more practical level, the Chair must also deal with a time constraint with respect to the duration of question period as provided for in Standing Order 30(5). While it happens frequently that question period runs long, the fact remains that, as Speaker, I must enforce the rules that the House has established for itself and manage proceedings in the House as best as possible in order to attenuate as much as possible the impacts of the rest of the day's deliberations.

*Privilege*

The distribution of slots for debate, statements and questions has been determined in recent years by negotiations among the recognized political parties at the beginning of each Parliament. In light of this practice, the Speaker's role is to implement the negotiated agreement in a way that respects members' rights. The Chair cannot unilaterally change such practices. It can simply continue to reconcile the three fundamental elements, which are established parliamentary practices, the time provided for by the Standing Orders and the opportunity for independent members and unrecognized parties to address questions to the government.

[*Translation*]

What is more, in addition to question period, independent members and unrecognized parties have a number of opportunities to participate in the proceedings of the House and its committees so as to hold the government to account and influence the administrative policies put forward. As legislators, our rules allow them to participate in the review of the government's legislative agenda by proposing amendments at both the committee and report stages. They participate in the debate, less frequently it is true, but primarily during the questions and comments after the speeches at each stage of the legislative process. They can also put questions on the Order Paper and ask for a response from the government or take part in the adjournment debate.

● (1520)

[*English*]

Thus, in light of the information presented and the precedents in this matter, I cannot conclude that the point of order is substantiated nor see in it any breach of parliamentary privilege, inasmuch as the question, as I already stated, has more to do with our practices and customs than with privileges. The Chair is not convinced that the member, personally, or the other independent members, collectively, are hampered in their parliamentary function or treated inequitably by the current arrangement governing question period.

The Standing Committee on Procedure and House Affairs will perhaps want to look into the way that question period is conducted, including the participation of independent members. I encourage the member for Saanich—Gulf Islands to channel her efforts in this direction. I remain open to revisiting this issue if circumstances justify it.

I thank members for their attention.

We have a point of order from the hon. member for Saanich—Gulf Islands.

**Ms. Elizabeth May:** Mr. Speaker, I cannot say that I am not disappointed with your ruling, but of course I accept it. However, there was another point that I did not raise in the argument that I put forward to you. Since the time the rules were adopted, to which you just referred, the number of members of Parliament in the category of independents and non-recognized parties has doubled. As you said you are open to the matter, Mr. Speaker, I ask that you review, as a point of order, the notion that members in unrecognized parties and independent members have far fewer opportunities to put forward their questions. I submit to you that this does represent an impairment in our ability to fully represent our constituents.

**The Speaker:** I will take that under advisement.

## ALLEGED PREMATURE DISCLOSURE OF CONTENTS OF BILL C-22

**Mr. Mark Gerretsen (Kingston and the Islands, Lib.):** Mr. Speaker, on a point of order, I am rising to speak to the alleged premature disclosure of the content of Bill C-22, an act to amend the Criminal Code and the Controlled Drugs and Substances Act.

My colleague, the hon. member for Fundy Royal, rose in the House on February 19 to allege that the content of the bill was divulged by the government in a CBC news story during the notice period. In his intervention he cited a Speaker's ruling on March 10, 2020, respecting the premature disclosure of Bill C-7 and Bill C-14, both dealing with medical assistance in dying. In those cases, the government acknowledged that some content was disclosed during the notice period, and as a result, the Speaker found there was a prima facie breach of privilege.

The case before the House on Bill C-22 is indeed different. I have discussed this matter with the office of the Minister of Justice, and they have confirmed to me that a CBC reporter did inquire about the content of the bill while it was on notice. The office explained to the reporter that since the bill was on notice, they could not comment on the content of the bill until it had been properly introduced in the House.

The government, in 2015, promised to make public mandate letters for the ministers, a significant departure from the secrecy around those key policy commitment documents from previous governments. As a result of the publication of the mandate letters, reporters are able to use the language from these letters to try to telegraph what the government bill on notice may contain.

I take umbrage with the member for Fundy Royal's assertion: "We are being asked once again to deal with the contemptuous actions of the Minister of Justice and his justice team." The member should ensure that he has the facts on his side before casting such aspersions on any member of the House. It is neither decorous nor responsible.

Now let me deal with the matter directly.

Bill C-22 has three main policy thrusts: repealing mandatory minimum penalties in the Controlled Drugs and Substances Act and the Criminal Code, increasing the availability of conditional sentence orders and evidence-based diversion from simple possession offences. The article the member refers to and relies on for his argument was not correct in its description of all three elements and therefore resides in the realm of speculation.

When we get into the details of the article in comparison with the bill, the story gets the content wrong. Let me walk members through the content of the article.

On drugs, the article is rife with speculation. The 2019 mandate letter for the Minister of Justice states, “Make drug treatment courts the default option for first-time non-violent offenders charged exclusively with simple possession to help drug users get quick access to treatment and to prevent more serious crimes.” The reporting on this item seems to be speculative based on the title of the bill. Moreover, the bill does not contain measures dealing with drug treatment courts.

I will note for the benefit of members that the evidence-based diversion measures in the bill are entirely distinct from drug treatment courts. Drug treatment courts require non-violent offenders to plead guilty, and judge-mandated supervision has no relation to what is proposed in the bill. In fact, the bill seeks to avoid the laying of charges in the prosecution of simple possession cases in the first place, if appropriate.

The bill also proposes a principled approach for police and prosecutors to consider before laying or pursuing a charge of the offence of simple drug possession. This includes the possibility of referral to various treatment programs or social supports and/or empowering police and prosecutors to provide a warning or to take no action with respect to the potential offender instead.

On mandatory minimum penalties, the article states that the government will revisit the mandatory minimum penalties for drug-related offences. In fact, upon inspection of the bill, the government is proposing to remove all mandatory minimums related to the drug offences, as well as removing mandatory minimums for 14 other offences in the Criminal Code.

There is no mention in the article of conditional sentence orders, which are a key policy element of the bill. In addition, there is nothing in the bill that provides for reforms concerning restorative justice specifically. The article implies that the bill contains elements relating to restorative justice, based on the mandate letter commitment, previous public statements and commitments made in regard to the fall economic statement.

One can only assume two outcomes here based on the fact that the article did not accurately describe the contents of the bill. First, the reporter spoke to a government source who was not familiar with the content of the bill. The second outcome, which is perhaps more likely, is that the government did not publicly comment on the bill during the notice period and, as a result, the reporter had no other recourse but to speculate on the content of the bill based on previous policy statements.

• (1525)

I will turn now very quickly to the relevant precedents on the disclosure of the content of a bill during the notice period. In instances where government has acknowledged that an official of the government prematurely disclosed the content of a bill during the notice period, Speakers have found a prima facie case of breach of privilege. However, when the government has not disclosed the content of a bill during the notice period, Speakers have been reluctant to find a prima facie case of breach of privilege. On June 8, 2017, the Speaker referred to the distinction as follows:

When ruling on a similar question of privilege on April 19, 2016, I found a prima facie case of privilege in relation to the premature disclosure of Bill C-14, an act to amend the Criminal Code and to make related amendments to other acts (medical

### *Government Orders*

assistance in dying). In that particular case, the government had acknowledged the premature disclosure of the bill while assuring the House that this had not been authorized and would not happen again. In other words, the facts were undisputed.

That is not the case with the situation before us. The parliamentary secretary has assured the House that the government did not share the bill before it was introduced in the House but conceded that extensive consultations were conducted. Nor is the Chair confronted with a situation where a formal briefing session was provided to the media but not to members.

Finally, it is a long established practice to take members at their word, and the Chair, in view of this particular set of circumstances, is prepared to accept the explanation of the Parliamentary Secretary to the Leader of the Government in the House of Commons.

In conclusion, I submit that if the content of the bill was prematurely divulged during the notice period, it did not emanate from the government side.

• (1530)

**The Speaker:** I thank the hon. member and I will take his comments under advisement.

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## GOVERNMENT ORDERS

[*English*]

### CRIMINAL CODE

The House resumed consideration of the motion in relation to the amendments made by the Senate to Bill C-7, An Act to amend the Criminal Code (medical assistance in dying), and of the amendment.

**Mr. Damien Kurek (Battle River—Crowfoot, CPC):** Mr. Speaker, my hon. colleague did have a fantastic speech just prior to question period and I believe that her time wrapped up with the beginning of question period.

We once again find ourselves debating one of those issues that should cause each and every member of Parliament to take pause. These are literally issues of life and death. We are debating medical assistance in dying. I have had the opportunity to enter into discussion now a number of times on the subject and I am pleased to be able to do so again on the amendment that my colleague made to the report back from the Senate, some of whose changes I would suggest are troubling ones from the deliberations that took place in that other place.

Before jumping into this, I would like to discuss some context, as I do every time I discuss this issue. Early on in the last campaign when I was not even elected, I was door-knocking in a community in my constituency where I happened to knock on the door of a physician. This was pre-COVID times. It is hard to believe that we are now a year into the pandemic. The sort of campaigning we did in 2019 seems such a long time ago.

*Government Orders*

Nobody actually answered the door. I was walking back down the driveway to the front yard and somebody called out from the backyard. I went to the fence and ended up having a lengthy conversation. What I find very interesting is that this particular physician articulated some of the concerns regarding this and other issues that he faces in the medical profession as a doctor in a small, rural community in Alberta. He outlined some of the concerns regarding medical assistance in dying.

I will not deny that I have positions on this issue that I have developed over my time in both politics, studying this and on many other issues, but what was very interesting as I reflect back on these comments is this physician outlined a whole series of concerns. In politics, they say one should not spend more than a couple minutes at the door, but I wanted to give this gentleman the time to outline his concerns. He outlined to me, ironically, some of the concerns that we are debating today with a suggestion about the slippery slope argument.

I followed closely some of the debates that took place in the last Parliament and issues around the initial court cases that led to Parliament being tasked with creating a framework in the last Parliament, and then some of the continuation of that. What I find very interesting is how accurately this doctor predicted some of the significant challenges that we are now facing. This is me paraphrasing this conversation from a number of years ago now, but he outlined that very activist, vocal causes are skewing the national conversation on ensuring that those who need protection most in our society are protected.

Here we are today. I had the honour of being elected and have a seat in this amazing chamber, the place of democratic discourse in our country. Here we are and I look at both the contents of what came back from the Senate and the various discussions had regarding Bill C-7 over the last number of months. It is very troubling that this gentleman was almost prophetic in the way he talked about these issues and some of the groups of people who are being affected in this framework that could lead to direct discrimination and how some of their voices are being ignored.

• (1535)

I find it very interesting. In fact, I had the opportunity earlier today to ask the Minister of Justice, after his opening remarks, a question about consultations. I was troubled by his response, although it was passionate, and I grant him that passion. We are all passionate about various issues, especially ones of such a personal nature as this. The minister went on to talk about how we need to address the suffering, but failed to truly answer why the government did not go down the path of appealing this decision to a higher court, which would have allowed for greater certainty on the type of legislation that would be enacted and ensure that it could be done in a way that we do not find ourselves here again in maybe a number of years, or sooner than that.

It is troubling, again in the words of the physician back in that driveway during my first campaign running for office about a year and a half ago, that the very vocal activist causes are getting a disproportionate amount of airtime. I bring that up because we have seen an evolution in this debate from what was discussed in the last Parliament and the very valid concerns that some of my current and

former colleagues had, some of whom have retired, or whom I count as friends, like the member whose board I sat on while going to university, the late Mark Warawa, all of whom have defended life with passion in this place. However, where we find ourselves today is the definition of a slippery slope, and that is incredibly concerning to me.

It is incumbent upon all of us to ensure that we take seriously our obligation to debate, discuss and try to come up with the best outcome possible to serve, protect and ensure that Canadians are not placed in a position they should not be in. This issue would probably be in the top five and maybe even the top three of the issues I hear about. I hear feedback on every side of this debate, which is good. That is called democracy. It is called discourse and is exactly what the point is. It is why we are organized into parties and represent different regions of the country.

Each of us brings a different level of expertise, and I joke often that the only job requirement for a member of Parliament is that one happens to get more votes than the other guy. It is incredible the strength of our democracy is in the diversity that results from that. It is that diversity of opinions that forces us to take pause and debate these very important issues.

I will go back now to the consultations that the minister undertook on this issue back in the early sitting weeks of Parliament before prorogation. I spoke to many constituents, was sent emails and cc'd on others, and I found it very troubling to hear from a number of them that the so-called consultations were being conducted in a way that would confirm the objective of those who wrote the consultation piece. That is the antithesis of what we try to do here. In some cases, individuals with passionate perspectives on this subject felt they could not even participate in the consultations because of the way they were formatted. I find that was a troubling start to this process.

We have seen saw the Minister of Justice's comments, in addition to those of others in the government, about this as we have been going through this process. It was debated after prorogation, which of course slowed everything down. We lost about 35 sitting days. Whenever the government says that the Conservatives ought to hurry up because they are delaying the process, I will point out that 35 legislative days were lost in this place for it to do its job.

*Government Orders*

● (1540)

It is not just the two days that the members opposite like to suggest; it is 35 sitting days. The context for that deflates any argument that the other side would suggest on this, that we should simply rush something like this. There was the ability to appeal this to a higher court. When discussing this matter with one of my colleagues, it seems like the Liberals were not even aware that it could have been appealed to a higher court, among some other notable instances where there is a troubling lack of information.

An evolution has taken place from when the minister first stood up. When questions first started being asked last fall, he said that they had found the consensus, making clear definitive declarations, saying that they had consulted, that they had listened to the consultations and they did their job. That was being said by the government and the minister.

As questions were asked and as committee discussions went on both in the House of Commons and the committee, and then the pre-study and debate of the bill in the other place, we saw the government language change quite a bit. There was acknowledgement of a diversity of opinions. A lot of the diversity of these opinions was not respected in the beginning until there was a groundswell of concern. My office received hundreds, maybe thousands, of pieces of correspondence showing concern on this issue.

There are very few issues that garner this type of correspondence, but this was one of those issues. In fact, people would call and tell me that they did not vote for me, but that they were concerned with the direction the government was taking. I heard from indigenous people. They told me that this went against the very fundamentals of their world view. Disability advocates are deeply concerned about an ableist-type mentality within the country, which could have very troubling consequences. We have the utmost responsibility to take these things very seriously.

This debate is very personally for a lot of us. I know there has been some emotion expressed in that regard, and this is part of an issue that is as important as this. As Conservatives, we have a free vote on this issue and we see a diversity of opinions within our caucus. That is great; that is democracy.

I do not know exactly where other parties stand on this, but certainly the autonomy of the member of Parliament is a constitutionally enabled thing here, which is often forgotten, certainly by our media and in the education of our parliamentary system. I emphasize for all those listening and on Zoom that the autonomy of the member of Parliament is one of the keystones of our democratic system. It needs to be respected. However, that is a bit of a segue.

This is an incredibly personal issue. Everybody has had an experience. I too have sat with loved ones during some of their last breaths. I have seen the consequences and I understand why this can be so emotional.

When I look at this in terms of the context of what we are debating today and the amendment that has been proposed in the government's response to the Senate amendments, important steps are taken to ensure that those among us who are most vulnerable are protected. My colleague from Leeds—Grenville—Thousand Islands and Rideau Lakes spoke to that. It strikes at a good-faith attempt by

the Conservatives to try to move the dial on a host of what many have pointed out are problematic aspects of what took place in the other place.

● (1545)

Let me take a brief moment to commend some of my Conservative colleagues in the other place. I have spoken with them about the process and in some cases their great disappointment and utter surprise at what they hoped to accomplish going into those deliberations and what resulted. I do commend the Conservatives who sat around that table. I will note that they have some of the most personal connections to this issue. When hearing those stories, it certainly strikes right at the heart.

We are now tasked with having to come to a place where we develop a framework. The government likely has the support to get the bill passed. We have introduced an amendment to the government's response to try to address some of the challenges that we have heard. This is not about some ideological parade to try to make our points known. This is about trying to address some of the challenges that we have with the bill and specifically the response.

When we introduce an amendment, it is important for debate in this place to acknowledge the ability to improve upon legislation, to address deeply problematic aspects of it, to try in good faith to add a level of protection to the most vulnerable within our society, to ensure that we are not creating a situation where a medical assistance in dying regime ends up pushing people to a decision that there is no coming back from, trying to take some small steps to help move the bill in a direction that at least addresses some of these very serious concerns. For those who are watching, I would refer them to some of my earlier speeches on the matter.

This is what we are attempting to do today. Specifically, I would mention the irony in which we find ourselves. The House unanimously supported a motion for a 988 suicide prevention helpline, which was absolutely the right thing to do. I was proud to support that. However, this is not just an ideological thing, but many have suggested the bill moves medical assistance in dying, assisted suicide, euthanasia, however it is defined, in a direction that many, including myself, suggest is very concerning. There is an irony between supporting suicide prevention and a regime that may unintentionally, I certainly hope unintentionally, result in what could be catastrophic for our country.

There is a need for palliative care. I mentioned the late Mark Warawa. He is an example of living his faith. He announced he would not run in the next election. He was going to become a chaplain to help people through the end of their life. He ended up being diagnosed with a very fast-moving cancer. He ended up living out the very example of why palliative care is so important.

*Government Orders*

We find ourselves in the middle of a pandemic where disproportionately those affected are our seniors and those most at risk, yet we are debating something where we need to ensure there are safeguards in place. That the tragic irony is certainly not something I think anyone here would like his or her legacy to be, that while discussing and debating COVID supports in response, that we would also enable something that could be abused and would result in the end of life for vulnerable Canadians.

● (1550)

**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, this has been debated quite extensively. The former prime minister, Stephen Harper, was unable to deal with the issue even though there was a Supreme Court of Canada decision. That ultimately led to a bill being introduced, with debates and standing committees starting at the beginning in 2016. There have literally been thousands of hours of consultation, debates, committees and so forth.

Does the member think it is time to move on?

**Mr. Damien Kurek:** Madam Speaker, we are doing exactly what all of us were elected to do, which is to debate issues thoroughly. I hope the member listened to the beginning of my speech, because I emphasized this. I made an inference to one of the questions he asked me the last time I debated this subject.

When it comes to issues of life and death, where there is a diversity of opinions and no clear consensus like the minister at times has suggested, and the fact that there are those of us within this chamber attempting to, in good faith, address some of the challenges we hear about from Canadians, from indigenous peoples and from disability groups, that deserves debate in this place. We will continue to ensure those voices are heard within this place.

[*Translation*]

**Mr. Sébastien Lemire (Abitibi—Témiscamingue, BQ):** Madam Speaker, among the amendments introduced by the Senate is the idea of a joint committee made up of 11 people from the House of Commons and five people from the Senate.

The Conservative member raised a number of points for consideration regarding the importance of working collaboratively. What does he think of such a committee? Would that not be an opportunity to hear different points of view and improve care for the benefit of people who are suffering and at the end of life?

[*English*]

**Mr. Damien Kurek:** Madam Speaker, I have outlined the problematic precursor to some of the areas of debate and the situation in which we find ourselves today. There is a need for this to be debated, studied and wholesomely discussed. Consultation that does not direct a specific outcome is key. All these things are vitally important.

It is unfortunate and a bit ironic that there would be a suggestion for a new committee to address what is a very problematic aspect of this bill with respect to mental illness and a desire to see that addressed in the future when the place we are at today has quite prob-

lematic origins. Debate needs to take place and we need to continue to do that in this place.

**Mr. Gord Johns (Courtenay—Alberni, NDP):** Madam Speaker, one thing we have heard about are the challenges created by the current medical assistance in dying legislation with the requirement for final consent at the time the assistance is rendered. We know that this requirement often forces those who are already assessed and approved for medical assistance in dying to make a cruel choice when faced with the possible loss of competence that would make them unable to give consent. They are either forced to go early or risk not being able to receive the assistance they need to avoid continuing to live with intolerable suffering.

I think about Julie Briese in my riding, who has brought to attention concerns around her husband Wayne, who is challenged with Alzheimer's. In that camp, they are making that difficult decision of whether to go early. We know Audrey Parker campaigned to make Canadians aware of this problem and that Bill C-7 would fix that by creating a waiver of consent.

Does my colleague agree, and do the Conservatives support Audrey's amendment and support helping those facing end of life to avoid this cruel choice?

● (1555)

**Mr. Damien Kurek:** Madam Speaker, I would point out or remind the member, as I mentioned in my speech, that this is a free vote for Conservatives. The autonomy of the member of Parliament is key to our democratic system, and I am certainly speaking on behalf of myself and the perspectives of many of my constituents, although, as I said, there is a diversity of opinion on the matter. It is exactly the issue that the member has brought up and it is the reason for this debate by all parties in good faith. I will not presuppose that anybody would enter this conversation without coming to it in good faith; at least, I certainly hope not. I also hope we have an honest, transparent and wholesome discussion about whether it safeguards the issues that got us to this point, including why this decision was not appealed and why there was not an opinion of the Supreme Court. The court sought to ensure that this legislation would not come back to us again if challenged.

There are a myriad of concerns surrounding us, ensuring that we do our due diligence, and that is why we need to continue to do that in every way possible.

**Mrs. Cathay Wagantall (Yorkton—Melville, CPC):** Madam Speaker, I would like to mention Dr. Sonu Gaiind, who is the co-director of the division of adult psychiatry and health systems and an associate professor in the department of psychiatry at the University of Toronto, where he has been a member of the faculty since 1999. During a consultation with medical professionals that I attended this past weekend, he indicated that the number of elderly people requesting MAID since COVID restrictions have been causing isolation and growing depression has grown from 1,200 to 21,000.

Does this not illustrate the exact concern of the member in regard to Bill C-7 being brought forward to this House during such a challenging time for all Canadians, and especially for our most vulnerable?

**Mr. Damien Kurek:** Madam Speaker, I will start by thanking that hon. member for the work she has done surrounding this issue, as I know other colleagues have as well, to try to bring light to some of these serious concerns.

That is why I talked about the irony. We are talking about what has been spent collectively in COVID response by different levels of government in this country. It is more than a trillion dollars. We are talking here about enabling a regime that may not put effective safeguards in place to protect the most vulnerable among us. That is setting us up for a national tragedy, and I hope that every person in this place takes this issue seriously. We need to ensure that we are putting in place the measures to protect the most at risk within our society: the elderly, indigenous peoples, and those who are disabled. That is certainly something I take very seriously.

**Mr. Paul Manly (Nanaimo—Ladysmith, GP):** Madam Speaker, I would like to ask my hon. colleague whether he thinks we should be doing more for people who are in crisis in terms of things like mental health. Would he support a national mental health strategy to bring mental health services fully into the Canada Health Act and to ensure that anybody who needs counselling services could get those counselling services without having to pay out of pocket for them?

Does he see a need for greater support for mental health services in this country?

**Mr. Damien Kurek:** Madam Speaker, I think the member touches upon an important point, and that is the full spectrum of what health care is today. I happen to have an affinity for going through really old newspapers. I think it is interesting to look back and see how often history repeats itself. When we look back to what medicine was prior to the introduction of the Canada Health Act and look at its evolution since, we see that health care has changed dramatically. I think that it is important to ensure that this is part of the debate surrounding this conversation. Somebody's worst day should not be their last day.

I know that some other members have articulated very well some of the issues surrounding that reality. We must ensure that there are supports and the ability to get treatment, counselling or whatever that looks like in the wide spectrum of health care, recognizing that each individual will be different and each circumstance will be different. We must ensure that folks can get the supports necessary so that they are not forced to consider anything as final as the end of their life.

• (1600)

**Mr. Ted Falk (Provencher, CPC):** Madam Speaker, as I reviewed the amendments to Bill C-7 that have been proposed by the Senate, I was struck by how quickly some legislators have embraced radical, unstudied changes to Canada's medical assistance in dying. In many cases, the direction these amendments take Canada's MAID laws was rejected just a few short years ago.

When Parliament legalized medical assistance in dying in 2016, there was a commitment included in that legislation to review the

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impacts of the law five years after it received royal assent. That was June 17, 2016. We have not yet arrived at that five-year mark. We have not yet done a proper and thorough review of the original MAID legislation, yet now, before this review is even under way, not only are some in this place pushing to expand the accessibility and availability of MAID without the benefit of that study, but we are also considering amendments that disregard all the thoughtful and considered debate of this House, the Senate and the committees of each place that wrestled with this complex subject matter and initially chose not to go down the road that many of these new untested amendments would take us.

The Council of Canadian Academies considered some of the amendments now being proposed, producing several reports in 2018. Former MP and health minister Dr. Jane Philpott and the member for Vancouver Granville wrote in a Maclean's article about the council's conclusions. The article states, "...there is very limited guidance on these issues because there are not enough places in the world that have allowed broader access to assistance in dying."

That is the context in which we are having this discussion, so it is troubling that the Liberal government has essentially accepted the amendments to throw the doors wide open to MAID for patients with mental disorders, something the justice minister previously had said there was no consensus on. This is a significant reversal that the Liberals ought to explain to the thousands of Canadians who have expressed concerns about the expansion of MAID to those with mental illness.

I am certainly mindful of the fact that COVID-19 and the restrictions imposed by governments as a result have created a tenuous mental health situation in Canada. Loneliness, social isolation and reduced care for vulnerable populations are all very real concerns.

Law professor Trudo Lemmens and Leah Krakowitz-Broker wrote this in a piece for the CBC:

Introducing a social experiment by expanding MAID when people are more vulnerable than ever is not progressive policy making — it is reckless. In its desire to accommodate some who want to control the timing and manner of their death, it puts others at risk of premature death.

I am reflecting on the question of why we are even here at all. Why are we having this discussion before meeting the five-year commitment for the MAID review? It is because the Liberals chose not to appeal the ruling of a Quebec judge.

As Senator Plett said:

Bill C-7 is a result of the federal government choosing to cave in to the opinion of one judge in one province who decided to unilaterally strike down legislation which had been extensively debated and passed by both houses of parliament.

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I am speaking, of course, about the Truchon decision in Quebec. The Liberals could have simply appealed the decision in recognition of the upcoming review. It would have allowed for a substantive and careful discussion about the impacts of opening the door to MAID for seriously vulnerable individuals. Even in the Truchon decision, the assumption was that there would be enforcement of strict requirements that ensure the capacity and informed consent of those requesting MAID. Bill C-7 removes some of those very safeguards, including the requirement that the patient remains competent until the very end.

Truchon was also premised on the conclusion that medical assistance in dying, as practised in Canada, is a strict and rigorous process that in itself displays no obvious weaknesses, but that simply has not been shown to be true. According to the chief coroner of Ontario's review of 2,000 MAID cases, case reviews have demonstrated compliance concerns with both the Criminal Code and regulatory body policy expectations, some of which have recurred over time. As well, according to the Quebec end-of-life commission, at least 62 cases in Quebec between 2015 and 2018 did not fully comply with federal and/or provincial law. How can we move forward like this without properly responding to these serious failings?

In one of our last debates in the House, when I suggested that if Bill C-7 were to pass as it was, even before the amendments by the Senate were added, it would be believed to be the most permissive bill with respect to MAID in any country in the world, one of my colleagues expressed surprise that I did not think it was a good thing, as if being the most permissive jurisdiction was somehow inherently a good thing. A law's success should be judged by its outcome, not its permissiveness.

● (1605)

Any time life is devalued or death is made easy, clearly, is not good. Life is to be valued and treasured as the gift it is, which is why we need to put our energy into supporting positive alternatives, such as strengthening a patient-focused palliative care service for all Canadians. There was unanimous agreement from the special joint committee studying physician-assisted death on the need for a pan-Canadian strategy on palliative care with dedicated funding.

Those suffering deserve the best possible care. After all, there is no real choice for Canadians facing end-of-life decisions without adequate palliative care options available to them.

As parliamentarians, we have a high calling to actively listen. Our obligation is to protect our most vulnerable citizens. Unfortunately, none of the proposed amendments addresses the serious concerns raised by disability advocates. As many in the House have mentioned during these debates, over 70 of Canada's leading disability rights organizations and advocates have expressed deep concerns regarding this bill. Therefore, so should we.

We should be especially concerned for disabled Canadians who lack socio-economic means and face a greater risk of coercion. If there is even a tacit suggestion that their lives are not worth living, we should care about the implications of that. Their lives matter. Canadians should never feel pressured or as though the law perceives their lives as a burden.

The Christian Legal Fellowship writes that by singling out life with a disability as the only existence deserving state-sanctioned termination, Bill C-7 perpetuates ableism in a most dangerous way.

We have already discussed in the House what UN experts have highlighted as a contradiction in Canada's international human rights obligations. We do not want to create a two-tiered system in which some would get suicide prevention and others get suicide assistance based on their disability status and specific vulnerabilities.

The justice committee was faced with very difficult stories where some of our most vulnerable felt pressured to accept MAID. Numerous groups were represented. Fifty religious organizations and faith leaders, including Jews, Muslims and Christians, expressed their opposition. Nine hundred physicians and 145 members of the legal community stated their positions.

It is not just the disabled who are vulnerable. Practising physicians fear that they will face legal charges if they refuse to participate in the deaths of their patients. There are blatant inequities and legitimate anxieties with this legislation.

Let us be clear: any inequities of support, systemic discrimination, family network or specific community should be addressed before people choose death. We need to make every accommodation for people to choose life, which is why I am perplexed by the Liberal government's decision to support the Senate amendments based on race-based data collection.

There is nothing wrong with collecting data to better inform policy, but we are sure going about this in an odd way. Rather than considering how expanded access to MAID would impact marginalized communities today, this amendment suggests we should investigate the impact when it is already too late for those many who have already accessed MAID.

This amendment seems to acknowledge that, but data may have a troubling story to tell us while opting to study that impact on the fly, before we understand what it will mean for the life-and-death decisions of the members of marginalized communities.



That being the case, we should refer back to the Council of Canadian Academies' expert panel, which identified a number of concerns associated with expanding MAID in this way. Its claim suggests that the data is predictable, as having a mental disorder is strongly correlated with certain social, economic and environmental inequalities such as poverty, unemployment, homelessness, social isolation, stigma and discrimination, and that people with mental disorders face impediments to accessing appropriate mental health care in Canada. Let us not wait for people to feel forced to make the choice of death to collect this data.

It has not taken long for us to forget the safeguards that we put in place for the protection of our most vulnerable just a few short years ago. I have expressed my deep concern for this bill a few times in the House. My conviction is that life is a gift to be valued. These amendments only heighten my deep concern.

Life is a gift. I am reminded of when my kids and grandkids brought home gifts that they had made at school. Sometimes they were not very attractive and, quite frankly, perhaps I was not the proudest to put them on my mantle or display them on my fridge, but they were gifts.

• (1610)

Life is a gift. I did not then take those gifts and give them back, saying that I did not really want their gifts because they did not look very nice. No matter what the gift looked like, no matter in what condition it was, it was a gift and I recognized the gift. I showed appreciation to my grandchildren for the expression of their love toward me. For each and every Canadian, life is a gift and we need to appreciate it for what it is. They do not all look the same and some life circumstances put some of our constituents and fellow citizens in situations that are not desirable, yet we have to recognize that life is precious and life is a gift.

**Mr. Randall Garrison (Esquimalt—Saanich—Sooke, NDP):** Madam Speaker, I want to thank the hon. member for his sincere comments. He and I rarely agree on many things in Parliament, but I never question his sincerity and his great attempts to represent his constituents. It is strange that the Liberals have driven us to a point where the member and I now agree.

I agree with the hon. member that, in accepting the Senate amendment, the Liberals have short-circuited the review that they were supposed to be doing of MAID legislation. In fact, they have gone farther and I wonder if the member would agree with me. By creating a special panel to set up supposed safeguards for those with mental illness, the government is prejudging the outcome of that study and suggesting that we are going to approve those with mental illness as their sole underlying condition for medical assistance in dying.

Does the member agree that the Liberals are actually prejudging this program in the way that they have stated their motion?

**Mr. Ted Falk:** Madam Speaker, my hon. colleague is probably correct. On a lot of issues we do not agree, yet there are a lot of times when we actually do agree. I know we share certain passions and have talked about those that revolve around the animal kingdom.

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His question about prejudging the outcome of where this legislation would be going is an accurate assessment. The Liberals could have done two things. They could have appealed this legislation to the Supreme Court. Only one judge in Quebec made this ruling, and they could have immediately appealed it to the Supreme Court. They have put very qualified and competent people on the Supreme Court, and they could have asked them to render an opinion on this. They could have also provided a situation where it could have been properly debated in the House by the review that the Liberals were legislated to do in 2016.

[*Translation*]

**Mr. Luc Desilets (Rivière-des-Mille-Îles, BQ):** Madam Speaker, I thank my colleague for his presentation.

I was really struck by and really appreciated one thing he said: Those suffering deserve the best possible care. I completely agree with him, but not necessarily for the same reasons.

He also said that life is a gift. I will expand on that and say that death is not always a gift. Within the past two years, I experienced the death of my father, who received MAID. It was an extraordinary end and departure, despite the pain we were feeling. I also lost my brother, who suffered excruciating pain as a result of cancer.

How does my colleague respond to the extreme suffering some people experience at the end of their journey?

• (1615)

[*English*]

**Mr. Ted Falk:** Madam Speaker, I want to extend my sympathies to the member on the passing of his brother and his father. Those are difficult things. Both of my parents passed away from cancer as well. My mom passed shortly after I was elected to the House. She had a very difficult cancer: lung cancer, although she was never a smoker. I had many conversations with the doctor and the palliative care nurse who provided her with medical assistance, and they both assured me and my siblings that we had the proper medications available to us to take away pain and also take away anxiety, so that the final moments in one's life did not have to be filled with anxiety and pain, but they could have a nice transition into the next world.

**Mr. Gary Vidal (Desnethé—Missinippi—Churchill River, CPC):** Madam Speaker, I want to share comments I received in an email from a gentleman who has spent his life serving underprivileged people as a captain with the Salvation Army in my community. He wrote a couple of days ago that “The reality of what is happening with this already profoundly flawed Bill, is nothing short of the abdication of what little moral authority our Government and Senate had—it truly signals the blindness to, the utter contempt and indifference of, this Government to those most vulnerable—and the present and future ramifications that will be borne by those most at risk—and indeed to the collective conscience of our entire nation.”

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I want to give my hon. colleague the opportunity to speak to what some of the future ramifications to the most vulnerable of our society might be because of this legislation.

**Mr. Ted Falk:** Madam Speaker, that is a great question. Probably the most powerful, the most compelling and the loudest voices that we heard at committee, both in the House and also in the Senate, were from the group of individuals and professionals representing those with disabilities. We also had people with disabilities who presented how they absolutely feared this legislation, that their lives would be deemed less valuable than someone else's, and that they would experience a tremendous amount of coercion and influence to access medical assistance in dying.

I think for the most vulnerable in our society this legislation poses a very high degree of risk as it is presently.

**Mr. Mark Gerretsen (Kingston and the Islands, Lib.):** Madam Speaker, the member spoke about palliative care. He talked about the drugs that were available for pain, suffering and anxiety while in palliative care. Indeed, those drugs exist, but the member must know that they are not effective treatment in every scenario. There are scenarios where the drugs provided are not adequate to relieve the pain or the anxiety somebody is facing.

Is the member willing to acknowledge that this is a reality, or is he steadfast in his belief that all pain can be alleviated through drugs when it comes to end of life?

**Mr. Ted Falk:** Madam Speaker, I think the member recognizes that I am not a medical expert. We know that the Liberals always say they want to base everything on the science, so that is what I have to go back to.

I go back to the discussions I had with the doctors who treated both my mother and father and the nurses who provided palliative care. They said we have the drugs available to us today, in our arsenal, to address issues of both pain and anxiety, and that those are the two predominant issues people are concerned about when facing the end of life.

[*Translation*]

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** We have time for a quick question.

The hon. member for Montcalm.

• (1620)

**Mr. Luc Thériault (Montcalm, BQ):** Madam Speaker, I am a little surprised that my NDP and Conservative colleagues hold the same view about the outcome of a debate that has not yet happened.

It would seem that my colleagues are not used to doing the work before a ruling is handed down by the court, and that they would prefer a ruling that will dictate what we should think instead of defining what is right and what is best for everyone.

That is a comment. I will stop there because I have run out of time.

[*English*]

**Mr. Ted Falk:** Madam Speaker, the issue here is that when we look at the commitment and the legislation from 2016, there was a requirement for the government to conduct a review. That review

would have brought forward all kinds of empirical information, which is absolutely required in making the right decisions. In the absence of that review, people are shooting from the hip. The experts who provided testimony at committee told us where things were going. They could see it.

We can rely on expert opinion from testimony at committee to tell us where some of the legislation is headed. The panel that the Liberals want to propose in no way, shape or form replaces the review that was scheduled to happen after the five-year period of legalization.

**Mr. Mark Gerretsen (Kingston and the Islands, Lib.):** Madam Speaker, it is indeed an honour to rise today to speak to such an important topic. I had the opportunity to speak to this bill back in December when it was voted on before it was sent over to the Senate.

I will say from the outset that I do not pretend to be an expert on this matter, but I certainly have had a lot of personal experiences that have informed my opinion over the last few months. I think it is safe to say that before that, although I have always been an individual who supports people's right to choose when it comes to their own health and their bodies, I did not really take a strong position one way or the other on this particular legislation. That was until I had those personal experiences, which perhaps I will touch on in a few minutes.

First, I will talk a little about how we got here. I think it is important to talk about this, because it has come up a number of times from the other side of the House in questions about the rush. I mean, the number of times I have heard about the rush today could make my head spin. I would argue that there has been very little rushing going on when it comes to this issue. Let us go back to the start of this.

The Supreme Court made a ruling. Stephen Harper was the prime minister then, and he, as the prime minister, and the government were tasked with coming up with legislation that could address and respect that ruling. However, he chose not to do anything about it. I think it is quite clear he did that because of his political motivations.

It would have exposed him to a lot of what we are seeing now. He probably figured it was best to put this on the back burner and not do anything about it. Politically speaking, it was probably the best thing to do. Certainly, it was not the responsible thing to do. Certainly, it was not the thing a responsible government would do. He should have tackled this head on as he was charged to do by the Supreme Court. Nonetheless, he really did not act on it.

However, when the Liberal government was first elected in 2015, the first committee it set up, if I remember correctly, was a committee to study this issue. This was so we could respond in due course to the Supreme Court's ruling and bring forth legislation.

That happened, and there was obviously a lot of controversy about it at the time. Some said it was not going far enough. Some said it was going too far, and people voted as they saw fit. Ultimately, the legislation was passed. Now, here we are addressing the fact that a Superior Court in Quebec has ruled that it was unconstitutional, and we are tasked with making amendments in order to reflect that.

To the point that it has taken so long to get here, well, come on. This has been going on since 2014. We are seven years into this. Do not say that this is taking a long time and that there is a sudden rush. If there is a rush to get this done now, it is quite clear that is because we are responding to the Superior Court's ruling, which has already been extended as a result of COVID-19.

I have heard a number of Conservatives criticize us and say, "Why wouldn't you take it to the Supreme Court?" Well, it is very obvious what to do when a government goes to its lawyer and that lawyer says that we could go to court but we would be wasting money in doing that because, in the lawyer's opinion, we would probably not win.

Usually one listens to one's lawyers. That is why we get lawyers. They give advice on how to move through a process. If the lawyer says, "Guys, it's probably not in the best interest to go to the Supreme Court, because you're probably going to lose", one listens.

Maybe the Conservatives would like to see taxpayer money tied up in the legal fees associated with that. Alternatively, we could take the realistic, rational approach to respond to it and do what we think is right.

For the Conservatives to stand up and say that we should have taken this all the way to the Supreme Court is a misuse of the Supreme Court. We go to the Supreme Court when we feel as though we are in the proper position and that the legislation is correct. We saw the government reflect on the Superior Court's ruling and decide that, yes, maybe we do need to fix this and that maybe we do need to make some adjustments to this. Going to the Supreme Court would have wasted taxpayer money, and it would have wasted time.

• (1625)

However, we will do the hard thing, which is to bring this very sensitive topic back before this House so that people, including me, can get emotional and talk about this in order to make the legislation better and make the lives of Canadians better.

Members will recall that a few moments ago I spoke to Stephen Harper's approach, which was basically not wanting to deal with this and pushing it out of the way. This government could have done that. It could have gone to the Supreme Court, tied it up, did this and that to really slow down the process, and pump this a few years down the road to feel better about itself. This was the approach that Stephen Harper took, but that is not the approach this government took.

Instead, this government said that the Superior Court is right. We need to respect it. We need to do the right thing, not just because we want good, proper laws that are constitutional, but also because we want to do the right thing in the name of Canadians.

Therefore, for me to hear Conservatives question why this was not challenged all the way to the Supreme Court just goes to show that they would have done anything to slow this down or block this all the way along. That is how we basically got here.

One of the other issues I find very troubling, having sat here and listened to the debate, is the number of people who have gotten up and said, "All that needs to happen is for somebody with a disabili-

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ty to go into a hospital and just like that the doctor can prescribe MAID. Do we really want to create a scenario like that?"

That is fearmongering. That is absolute fearmongering. That behaviour is illegal, unethical and completely improper, but that is not the picture the opposition members want to paint. They want to paint a picture of disabled individuals' rights being stripped away from them, with doctors suddenly able to say, "Oh, you have a disability. Well then, you should get MAID." Come on.

To suggest that a doctor is going to act in bad faith like that is a completely unfair characterization of the incredible work that doctors do throughout this country. By the way, if a doctor does act in bad faith, there are laws in place to take care of them, to bring them before their professional bodies to make sure they are properly brought to account for their actions. This is a red herring, at best. This is a false notion that doctors are going to suddenly act irresponsibly is ludicrous.

I will accept the argument that there could be a slippery slope and that we need to put proper safeguards in place to make sure that people are properly taken care of. Most important, we need to make sure that people get all the information they need in order to make these very important decisions. This is the information that comes with talking and consulting with one's doctor and perhaps going for another opinion.

People need information to make decisions, and we should not neglect giving people information. We should definitely be investing in making sure that people have the information they need, and the proper tools and resources to make these decisions on their own, because they are their own decisions to make.

I also would like to address the issue of palliative care. It is the default go-to argument of the Conservatives that if we had palliative care, then all the problems would be solved. To the previous speaker, I said that surely he must agree that not all cocktails of drugs can alleviate pain for people in their last days. The response was that they had been told by doctors that they can do whatever it takes to alleviate anxiety and pain so people can be in a comfortable state during their last days.

I will tell the story of my father-in-law from just two months ago. This is not disconnected from me. I saw this with my own eyes. My father-in-law was diagnosed just after the 2019 election with colon cancer. In July of this year, they found a tumour in his brain. They removed the tumour, but everybody knew that it was still only a matter of time.

At the end of November, he went back into the hospital and the doctors operated again. This man wanted to live. He wanted to live, and he would have fought to stay one more day for his grandchildren, but it just was not going to happen.

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• (1630)

My father-in-law never would have accepted MAID. He would have said, “Are you kidding? I don't want that.” He would not have accepted it under any circumstance. After they operated on him again and removed as much of the tumour as they could, they said, “Don, we're really sorry to inform you that you're going to die very soon. We cannot do anything else for you.”

It was at that moment, at the end of November in 2020, he realized the end was near. He told my wife, his daughter, that the fight was over. For 10 days, the tumour raged on. He lay in a bed in palliative care, getting all the medicine that supposedly, according to Conservatives, puts people in a state of ease.

He received all this medicine, and I am telling members right now, it did not help him. He was convulsing in the bed and having seizures at times. He was in pain. My mother-in-law sat next to him the whole time and watched it all.

For Conservatives to paint this narrative all the time that it is a peaceful moment of someone lying in bed at home with their wife by their side as they slowly slip away into the night is absolute baloney. It does not always happen like that.

Is the member standing on a point of order in the middle of my speech?

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** One moment, please.

There is a point of order from the hon. member for Battle River—Crowfoot.

**Mr. Damien Kurek:** Madam Speaker, I rise on a point of order. I understand emotions run high in a debate like this, but the mischaracterization of members related to what has been said during this debate is certainly a—

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** That is not a point of order.

I would like to remind the hon. member for Kingston and the Islands that I know what my role is. I do not need anybody to tell me what to do. If I need assistance, I will ask the clerks.

The hon. member for Kingston and the Islands can continue his speech.

**Mr. Mark Gerretsen:** Madam Speaker, I apologize for that. I obviously find this to be a very personal issue. I think it would have been best for the member not to say anything rather than try to defend himself.

I have been sitting here all day, since the House started at 10 o'clock. I have heard the arguments and I am responding to what I have heard. I heard a Conservative member talk about how wonderful it was to sing songs with their mother and then she slipped away in the night. It does not always happen like that. My father-in-law was a perfect example of this.

I want to be very clear, and this is where I was going before I was interrupted. I am not suggesting that my father-in-law would have chosen MAID. My father-in-law was a hunter, a real rugged man. He took on his responsibilities and took great pride in everything he did. I do not know if he would have selected MAID, but

what I do know is that he did not have an option. He did not have the choice. Instead, people got to sit by his side and watch him suffer. Most importantly, he suffered.

I understand there are various positions on this on all sides of the House. I get that people can be charged by this. I am a Catholic and this goes against a lot of what many of my supporters and, in particular, my church would advocate for. However, I will say again, as I said at the start of my speech and will say at the end, that I strongly believe people need choices. When we have a world in which our medical system has advanced so much that we can literally keep people alive now who we could not 10 or 15 years ago, there have to be other options.

I hope I am never put in a position to contribute to making one of these decisions, but at least I take comfort in knowing that options need to be available to people. Unfortunately, the rhetoric that I have heard today does not support that.

• (1635)

**Mrs. Tamara Jansen (Cloverdale—Langley City, CPC):** Madam Speaker, my colleague said it was not possible for someone to get MAID if they were in an emergency. I wonder if he could speak to the story of Candice Lewis, a 25-year-old woman with a significant disability who lives in Newfoundland with her mother, Sheila Elson. Elson reported that when Candice was receiving emergency medical care treatment in a hospital in 2017, a doctor approached her to propose MAID for her daughter. According to Elson, when she firmly stated that she would not consider MAID for Candice, the doctor accused her of being selfish.

I understand that no one has been charged in this case. You mentioned this would normally happen but we are not seeing it. Could you comment on this particular case?

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** I remind the member that she is to address all questions through the Chair, not directly to members.

The hon. member for Kingston and the Islands.

**Mr. Mark Gerretsen:** Madam Speaker, I am not familiar with this particular case, so I am not going to speak directly about the circumstances of it. Even if I did read about it or hear about it, as this member has, I do not believe I could have an objective opinion on it.

What I will say is that if what I have heard from the member is happening, a doctor should be held accountable for it. No doctor should be doing what she just described, just as no doctor should be doing other unethical things. Should a doctor be held accountable for doing something that, by her definition, sounds borderline illegal? Absolutely. We should hold that doctor accountable, but let us not try to change this entire piece of legislation, which is for the betterment of 37 million people, based on one example.

[Translation]

**Mrs. Louise Charbonneau (Trois-Rivières, BQ):** Madam Speaker, I want to thank my colleague from Kingston and the Islands for his very heartfelt and personal speech. He has demonstrated compassion with regard to this bill.

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Everyone has their own experience with death and the choices that can be made. The Bloc Québécois finds that the Senate amendments to expand medical assistance in dying are relevant.

However, given that health transfers are being reduced, does my colleague believe that the current government should perhaps increase them so the provinces can provide adequate health services for end-of-life care?

[*English*]

**Mr. Mark Gerretsen:** Madam Speaker, this is an issue the Bloc continually brings up, and I can respect that given its position on the matter.

I think there is a role for the federal government to play in assisting the provinces with their health care, whether that is through a direct transfer increase or through assistance in other programs that are geared toward specific issues or policy options. We need to make sure we are doing our part with the provinces to make sure they can give people the care and treatment they deserve.

● (1640)

**Mr. Matthew Green (Hamilton Centre, NDP):** Madam Speaker, today we have heard a lot of speeches about choice and the idea of having options in life. We heard about how end of life was about the idea of pain and anxiety, and it is very clear, through many of the witness reports, that this anxiety is about not having choices in dignified living.

What is the government doing to adequately address some of the critiques and outstanding questions for the UN special rapporteur on the rights of persons with disabilities.

**Mr. Mark Gerretsen:** Madam Speaker, I apologize to the member because I cannot thoroughly answer his question. It is outside the realm of what I was talking about today, so I do not have an answer off the top of my head.

I will say there is always a role for the government to play with regard to people with disabilities. As a society, we have come a long way, even in the last number of years. I will be the first to admit that I did not really understand this. If someone had mentioned disability to me 10 or 15 years ago, I would have assumed they were talking about somebody who needs a wheelchair. However, indeed, the term “disability” means so much more than that. It is everything from hearing impairment to people affected by various other disabilities.

There is always going to be a role for the government to play. I think we live in a world where we are continually seeing an increase in society's interest to take care of people with disabilities, and we will certainly continue to do that.

**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, my friend and colleague demonstrates very clearly that medical assistance in dying is, in fact, very complicated and is a deeply personal issue. I want to thank him for sharing his story with the House.

What I take away from his message is that many people, as they go through the process of life, want to have the option to access

MAID. I am wondering if my colleague could expand on why that was one of the most important points, as I could detect, he was trying to emphasize.

**Mr. Mark Gerretsen:** Madam Speaker, at the fundamental core, this is about freedom of choice. We live in a society where we believe in freedom. We believe in choices and making our own choices. When I go to a hospital, I can make a choice to be treated for something. I should also be able to make the choice, when I have been treated for a long time and recognize that I am at the end, to be assisted in moving on and passing away.

The core of this is about individual choice. Freedom is what our entire country is based on: the freedom to make these decisions on our own.

● (1645)

**Mr. Damien Kurek (Battle River—Crowfoot, CPC):** Madam Speaker, I took a great deal of time in my speech talking about how this personally affects each and every one of us and that we all have very emotional stories about what end of life looks like and the importance it plays in the perspective here.

The member mentioned the government's lawyer providing advice about what to appeal and what not to appeal. Certainly, that very point emphasizes some of the challenges we are faced with here, the fact there is a wide divergence of opinions. Moreover, the former attorney general, who is an independent member of the House, had a very different perspective on this issue than the current Attorney General. It is that divergence of opinions that actually is important to ensure that we get this right, because it is so important that we do get it right.

Does the member believe that this divergence of opinions is important to ensure that we are able to get this legislation right?

**Mr. Mark Gerretsen:** Madam Speaker, I would trust my current lawyer before I would trust a previous lawyer. That is the reason I have the current lawyer, so I do not understand the premise of the question. If the member had a lawyer and then he went to court and said “I hear your advice, but let me go back to talk to my previous lawyer”, I think the question is baseless.

The reality is that there is going to be a difference of opinion and the opinion of the justice minister was that the government should not go to the Supreme Court, but amend the legislation.

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** We have time for a very brief question.

The hon. member for Victoria.

**Ms. Laurel Collins (Victoria, NDP):** Madam Speaker, I have heard from so many people in my riding, especially seniors, in support of the bill because it responds to the need to reduce unnecessary suffering, but I have also heard from people in the disabled community who are deeply concerned about the removal of “reasonably foreseeable” conditions and who want to ensure that the bar remains high for accessing MAID.

Specifically around the mandatory statutory review, this should have begun already. Does the member agree that we should do this under an expanded mandate to consider the question of safeguards to protect the vulnerable in this legislation and—

*Government Orders*

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** I have to allow time for a response, and when I say a “brief question”, I would like members to just pose their question.

The hon. member for Kingston and the Islands.

**Mr. Mark Gerretsen:** Madam Speaker, very briefly, yes, I do agree that with something as sensitive as this, we should be coming back to it routinely. I think we have had some unique circumstances in the last year that may have prevented that, but yes, we do need to come back to it and look at this type of thing.

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** 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 Sherwood Park—Fort Saskatchewan, Foreign Affairs; the hon. member for Vancouver East, Housing; and the hon. member for Kenora, Telecommunications.

**Mr. Phil McColeman (Brantford—Brant, CPC):** Madam Speaker, I will be sharing my time with the member for St. Albert—Edmonton.

I have spoken to this issue twice in the House, the last time being December 4. I entitled that speech “Stay safe, my son”, because I do tell the personal story of being a father of a 34-year-old developmentally and intellectually disabled son who lives with us and is cared for by us. His name is Jordan.

In a larger way, my speech dealt with the removal of the safeguards for Canadians with disabilities and how the government is choosing to ignore and dismiss the concerns of disability groups across this country who have joined in arms in opposition to Bill C-7 because it fails to protect them and their safety in the long term. A quote that is most often used and referred to by the disability organizations is that this is the worst possible scenario.

After that speech, I discovered the United Nations office on human rights has stated that legislation extending euthanasia and assisted suicide to persons with disabilities “would institutionalize and legally authorize ableism”. For those who may need help with the word “ableism”, as I did, I went to the Oxford Dictionary and this is the official definition in it: “Discrimination in favour of able-bodied people.”

For full disclosure, I am a parliamentarian who sees Bill C-7 for what I think it is: the next step on the slippery slope in the MAID debate created originally by Bill C-14 in 2016. Today we are being asked by the Senate to make amendments to further remove safeguards for those living with mental illness. The Canadian Mental Health Association's CEO and spokesperson, Margaret Eaton, wrote to all parliamentarians, saying that “The exclusion of mental illness as the sole underlying cause for medical assistance in dying must be maintained to safeguard those living with mental illness.”

Understand that the Canadian Mental Health Association is the most extensive community in mental health across Canada, with a presence in 330 communities across every province and one territory. It provides advocacy, programs and resources that help prevent mental health problems and illnesses, support recovery and resilience and enable all Canadians to flourish and thrive. She goes on to explain the three compelling reasons that the exclusion of mental illness, as the sole underlying cause, was justified and urges

all parliamentarians to oppose the Senate amendment that proposes to drop that protection for people with mental illness.

The slippery slope is the continual easing of restrictions and expansion of euthanasia to a day when society will be conditioned to accepting death upon request. Many of—

• (1650)

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** I will interrupt the member. We will stop the time. I would ask the member to unplug his microphone and plug it back in. There is an issue with the sound.

The member can continue and if there is an issue with the interpreters, we will stop him again.

**Mr. Phil McColeman:** Madam Speaker, I apologize that the equipment is not quite correct.

I was on the point of the slippery slope argument. I will go off my notes here for a second.

Since this legislation came into existence in 2016, I have spoken with everyone I can who has major concerns regarding end-of-life issues. One was a colleague in previous Parliaments who is in a wheelchair. I asked him to give me a compelling argument that this is not a slippery slope, because I was open to accepting that. He could not. He wanted it for himself and I understood that. I might be in the same boat as him at that point myself, but let me talk about the effects on the larger society.

When society is conditioned to accepting death upon request, many of the advocates for open expansion of euthanasia will say that will never happen. I hope they are right, but the international data and experience with euthanasia and assisted-suicide laws is both revealing and startling. Belgium and the Netherlands have expanded the scope of their laws and, in practice, the safeguards have failed. In 2002, Belgium had 24 cases. The latest statistics in 2019 are 2,656 cases. In 2002, the Netherlands had 1,822 cases. In 2019, it had 6,361 cases. In practice, being tired of life is an accepted reason.

Doctors are also able to bypass the law by diagnosing so-called polyopathy. This refers to multiple complaints that occur in old age, such as loss of vision and hearing, chronic pain, rheumatism, weakness and fatigue. This comes from the Vienna-based Institute for Medical Anthropology and Bioethics.

*Government Orders*

I would also like to address the indigenous community, because it represents the single largest first nation in Canada, the Six Nations of the Grand River. Indigenous leaders recently came from across Canada to say they have grave concerns about efforts to expand the availability of assisted suicide, warning that it will have a “a lasting impact on our vulnerable populations” and that “Bill C-7 goes against many of our cultural values—”

● (1655)

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** We have either lost the connection or we have lost the video. The hon. member for Brantford—Brant is back on, but his mike is not on. We will stop the clock for a second and add a bit more time. I would recommend a House-issued headset.

**Mr. Phil McColeman:** Madam Speaker, this is the House-issued headset.

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** We can hear the member now. If the member would like to continue, he has two minutes left.

● (1700)

**Mr. Phil McColeman:** Madam Speaker, that is a major deflection of the momentum that I was trying to create.

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** The screen had frozen a while ago, but we could hear you talking. Now we seem to have everything in order. We had stopped the clock, but you are now able to continue. I am sorry you lost your rhythm.

The hon. member for Brantford—Brant.

**Mr. Phil McColeman:** Madam Speaker, when we had to stop, I was addressing the views of the indigenous community across Canada. There were 15 first nations represented in my comments. They addressed the senators, federal and provincial politicians and health care regulators at the federal level and signed the letter. I can provide those names to anyone who would like to have them.

In the earlier speeches and debate, many members on both sides of the House felt that this moment in time was of critical importance for our country. I hear the emotion on both sides, and we must have compassion on both sides. However, when we come to make this decision, let us make it based on the balance of protection for the most vulnerable in our society. Let us make it, with clear minds, about the slippery slope that is proven internationally to be happening and in existence today. We do not wish to go there.

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** Again, I am sorry for the technical issue the member is experiencing. I know that Internet issues are huge. I hear it almost every day from people in my riding as well.

Questions and comments, the hon. member for Victoria.

**Ms. Laurel Collins (Victoria, NDP):** Madam Speaker, many of the members in the Conservative caucus have opposed the bill as a whole. My concern is specifically around Audrey's amendment, those who are facing end of life and are faced with a very cruel choice, specifically around the people who may actually choose to end their life earlier than they would have liked because the legislation would not allow them to put it off and to die with dignity and avoid continuing to live with intolerable suffering. I want to hear the member's comments on this piece.

**Mr. Phil McColeman:** Madam Speaker, again, I will relate a personal story. A very close friend chose to end her life after a terminal diagnosis. I had a very long discussion with her about MAID and about my views on it, which I have shared with the House today.

We must have compassion for individuals, but let us not go down the road of what the advocates are doing, which is setting up that situation where all protections are lost. Let us not go down the road of the most vulnerable, those who are some of the people whom we must care for in this society.

**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 am sure the member is aware that there is an expectation from the court that later this month we will have the new law in place. If it were up to some, this debate could continue for months, if not years.

I wonder if my colleague would agree that it is important, given that we have had court extensions, that we seriously look at meeting this deadline at the end of the month and get the legislation through, recognizing that we literally have had hundreds, if not thousands, of hours of debate in the chamber and the committee rooms. Tens of thousands of Canadians have contributed in one way or another. Should we not be attempting to get this thing through to meet the court deadline?

● (1705)

**Mr. Phil McColeman:** Mr. Speaker, that is an easy answer, absolutely not. A court such as this should not dictate to the House of Commons on a matter so important. I characterize it as the most important matter in my 13 years in Parliament. There has not been an issue that is more important than this.

Yes, let us make time of the essence at one level, but let us not bend to a Quebec court and one judge who says we must have it done on a certain time frame. We need time. Canadians need to be involved in the discussion.

Although the member says that we have had enough time, we have not had enough. In fact, I could go on about prorogation and other things his government did to delay the debate on this, but I will not. Suffice it to say, time needs to be given to this issue.

**Mr. Matthew Green (Hamilton Centre, NDP):** Madam Speaker, the hon. member talked about dignity in life and finding out about ableism.

We know an amendment has come through that will list different data which will hopefully help us better understand the impacts on this. We have heard people talk about dignity and life. I wonder if the hon. member would support or has considered class and things like access to housing and programs in life as being on foot and on par and equally important to all the other considerations he and his Conservative caucus have given.

*Government Orders*

**Mr. Phil McColeman:** Madam Speaker, I am really confused by that question. It seems he is trying to interweave a lot of other social issues with this debate on life and death. Frankly, I do not see the connections.

**Mr. Michael Cooper (St. Albert—Edmonton, CPC):** Madam Speaker, I am rising to speak on Bill C-7.

The legislation illustrates the dangers that arise when a government puts blind ideology ahead of evidence-based decision-making. The nightmare of this bill and that road that has led to it today began when the Quebec Superior Court judge issued the Truchon decision. In that decision, that lower court judge determined that the most important safeguard in Canada's medical assistance in dying regime, namely that death be reasonably foreseeable, was unconstitutional.

That decision, again, was by one judge in one province. It is not binding in any other province. It does not bind the Quebec Court of Appeal. Indeed, it is a non-binding decision.

In the face of that, one would have thought that the Attorney General, whose responsibility it is to uphold laws passed by Parliament, would appeal that decision. After all, we are talking about a decision that removes the most important safeguard that was part of the legislation was passed a mere three and a half years prior to the issuance of the Truchon decision.

Instead, the Attorney General put ideology ahead of the interests of vulnerable persons, and did something that is virtually unprecedented. The Attorney General did not appeal the decision and, instead, recklessly tabled Bill C-7, which eviscerates key safeguards, including the most important safeguard, namely that death be reasonably foreseeable. In so doing, the Attorney General seeks to radically transform Canada's medical assistance in dying regime from something where such assistance is deemed appropriate to deal with or address suffering in death to now providing death to deal with suffering in life.

In seeking to so radically transform Canada's medical assistance in dying regime, the Attorney General has pre-empted a mandated parliamentary review provided for under Bill C-14. The Attorney General has preceded with completely inadequate consultation, ignoring important voices that represent vulnerable Canadians and, most importantly, that represent Canada's disabilities rights community.

When 72 national disabilities rights organizations wrote to the Attorney General and pleaded with him to appeal the Truchon decision, he ignored them. Their pleas to this Attorney General have fallen on deaf ears.

Why is the disabilities rights community so concerned with Bill C-7 and, in particular, the removal of the criterion that death be reasonably foreseeable? Very simply, when that criterion or safeguard is removed, it means that someone who suffers from a degenerative disability could be eligible for that very reason, despite the fact they may have years, if not decades, to live.

The disabilities rights community, on that basis, has said, in clear and unequivocal terms, that they believe this bill stigmatizes persons with disabilities.

• (1710)

As Krista Carr, the executive vice president of Inclusion Canada, said, this “is our worst nightmare.” As Catherine Frazee, disabilities rights advocate and former Ontario human rights commissioner, said to the justice committee with respect to Bill C-7, “Why us?”

Why, in asking that question, is the government proceeding to discriminate against the rights of persons with disabilities by depriving them of protections against premature death afforded to all other Canadians outside of an end-of-life context? In so depriving those rights, specifically to persons with disabilities, significant questions have been raised about the constitutionality of Bill C-7 and whether it would, in fact, by discriminating against persons with disabilities, violate Section 15 of the charter. However, those questions and concerns were completely ignored by the Attorney General, who puts the ideology of ableism first.

So blinded is the Attorney General that he ignored not only concerns from the disabilities rights community, but also from the UN Special Rapporteur on the rights of persons with disabilities, who has said that this bill violates international human rights norms. So blinded by ideology is this Attorney General that he ignored the UN Commission on Human Rights, which the government is rather fond of, which has stated that this bill runs afoul of the Convention on the Rights of Persons with Disabilities, in particular article 10.

Just when one thought it could not get any worse, we learnt today with respect to the motion the Attorney General tabled in the House that it would, among other things, essentially accept, with some very minor tweaking, radical Senate amendments, including one that would provide that someone would be eligible for medical assistance in dying for having solely a mental illness. This is a radical change, and, despite the fact this issue has not been appropriately studied, the Attorney General has said it is now a *fait accompli*. This is despite the fact that we do not know how to predict irremediability in the case of mental illness; despite the fact that we do not know if someone's mental illness is the basis for their request or a symptom of their mental illness; and despite the fact that we do not know whether someone's mental health suffering could be alleviated by health and other social supports.

This bill is a reckless, dangerous piece of legislation that would put some of the most vulnerable persons in Canadian society at risk. It must be defeated.



*Government Orders*

• (1715)

**Ms. Laurel Collins (Victoria, NDP):** Madam Speaker, the Senate, in this case, has exceeded its mandate. It is extremely concerning. It has prejudged the review. I think it is extremely concerning for people in the disability community. People in the disability community have also expressed the point that they do not have adequate income supports. It makes this whole issue even more complex, and I am curious if the member would agree that the Senate has exceeded its mandate in this case, and that we need to have a national income program for people with disabilities, to bring them up to a livable income at this time.

**Mr. Michael Cooper:** Madam Speaker, I concur with the hon. member for Victoria that the Senate has exceeded its mandate in going far beyond the scope of Bill C-7.

I have to say that I am shocked that the Attorney General did not reject outright the amendment with respect to mental illness being a sole criterion for eligibility for medical assistance in dying. Despite the fact there are a lot of things we do not know, one thing we do know is that of the 4,000 Canadians each year who die of suicide, 90% of them suffer from mental illness. The question becomes: How many persons with mental illness will suffer a premature death as a result of this legislation?

[*Translation*]

**Mr. Luc Thériault (Montcalm, BQ):** Madam Speaker, I have heard my colleague make many interventions on this issue. He took part in the clause-by-clause review of the bill and he is very eloquent.

However, the Conservatives voted against the former Bill C-14. According to my colleague, this bill contained an unbelievable safeguard, but Justice Baudoin declared it unconstitutional. The Conservatives also voted against the current Bill C-7.

Am I wrong to say that the Conservatives' position is that palliative care is the only acceptable option for end-of-life?

• (1720)

[*English*]

**Mr. Michael Cooper:** Madam Speaker, I want recognize the contributions by the member for Montcalm to the debate and to the justice committee during the study of Bill C-7 as well as Bill C-14.

With respect to the Conservative position, it is one of a free vote both on Bill C-14 and Bill C-7.

I did oppose Bill C-14, because I had some significant concerns at the time that it did not go far enough to protect Canadians who are at risk, and we have seen evidence of that. We heard from witnesses to that effect, including Roger Foley, who was pressured into undertaking medical assistance in dying, because his health care workers determined that he was too much of a burden. I think that case illustrates the fact that Bill C-14 did not provide sufficient safeguards to protect the vulnerable, and the legislation before us does away with them almost entirely.

**Ms. Jenny Kwan (Vancouver East, NDP):** Madam Speaker, a constituent wrote to me about this situation. He had lost his mother through MAID, and while the family was thankful that they were all there when she passed, he advised me that there is a fundamen-

tal flaw in the legislation. In his case, his mother wanted to stay for Christmas but had to choose beforehand out of fear that she would not have her faculties sharp enough to get permission later; hence, Audrey Parker's fight.

Does the member agree with Audrey Parker's amendment?

**Mr. Michael Cooper:** Madam Speaker, in short, I have concerns about providing for advance consent. I say that because people do change their minds. The expert working panel of the Council of Canadian Academies said there was a lack of consensus, so I think that at the very least this deserves a lot more study.

**Mr. Mark Gerretsen:** Madam Speaker, on a point of order, there have been discussions among the parties, and if you seek it, I think you will find unanimous consent to adopt the following motion: That notwithstanding any standing order, special order or usual practice of the House, this evening after Private Members' Business, the House shall continue to sit beyond the ordinary hour of daily adjournment for the purpose of considering a motion respecting Senate amendments to Bill C-7, an act to amend the Criminal Code (medical assistance in dying), and when no member rises to speak or at 12 a.m., whichever is earlier, the debate be deemed adjourned and the House deemed adjourned until the next sitting day; and during the debate tonight, no quorum calls, dilatory motions or requests for unanimous consent shall be received by the Chair.

[*Translation*]

**The Assistant Deputy Speaker (Mrs. Carol Hughes):** All those opposed to the hon. member moving the motion will please say nay.

**Some hon. members:** Nay.

[*English*]

**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 am glad to share with members a few thoughts on the very important legislation before us.

I was pleased to see the government, through a unanimous consent motion, attempt to get the consent that would allow us to continue the debate on this legislation. I found it interesting that some members chose not to allow that to take place, and I am somewhat disappointed. If their intent was to have an ongoing debate on this very important issue, we should have seen the unanimous support necessary to allow the debate to continue. One can only imagine the real agenda of the Conservative Party.

*Private Members' Business*

I previously asked one of the Conservative members about issues with the court. It has a deadline that has now been extended to, I think, February 26. It is the Superior Court in Quebec. He was asked if he felt there was any obligation for us to pass the legislation, recognizing that it has gone through first reading, second reading, report stage and third reading. This is legislation on an issue that we have been talking about primarily because Stephen Harper could not get the job done back in 2015.

As a direct result of that, since the Prime Minister was elected we have had to deal with this issue. We brought forward legislation, and various forms of consultation took place. If we were to weigh the amount of debate here and in committees and the dialogue on this, it really is incredible. We are talking about literally thousands of hours in committees of the House, the chamber, the Senate and the Senate committees. Every possible aspect of debate has happened.

My worse fear is that now we are going to see the Conservative Party play games to try to use this legislation as a tool to ultimately prevent other bills, such as Bill C-14, from coming to a vote, as the Conservative Party tries to set the House agenda. In essence, it is trying to get the government to go on its hands and knees and beg to try to get things passed through the House. The way the official opposition, the Conservative Party, continues to play an obstructive role inside the House is incredible. In some sort of twisted way, it will say that I am trying to limit debate on this important issue.

I recognize that medical assistance in dying is exceptionally complicated and is a deeply personal issue. That is the reason I believe this debate could go on indefinitely. There are some members within the Conservative caucus who would like that. They would like to see this never come to a vote. There are also some within the Conservative caucus who likely will be voting in favour of it. However, there are some who do not want it and will be voting against it. If it is left up to them, they will continue this debate indefinitely.

In a minority situation, things become very difficult. The Conservatives will say they want more debate and will try to justify having additional debate by noting the very significance of the issue we are debating: life and death. That is why if they were genuine in regard to the issue itself and the importance of having debate on it, they would have allowed us to continue debating the issue tonight. However, because they were not prepared to allow that to take place, I am very suspicious that, once again, we are seeing destructive games being played on the floor of the House of Commons on an important issue. This speaks volumes about the leadership of the Conservative Party and their sense of commitment to Canadians in allowing for business to be carried out in a reasonable fashion.

• (1725)

We have opposition days, private members' bills and all sorts of votes that are opposition-oriented. However, the government does have some responsibility too. This legislation is critically important. It is life or death. We are looking for opposition parties to recognize the importance of it and allow it to pass.

With just a few seconds left, I will express to my colleagues in the Conservative Party that if they wanted to debate the issue, they should have allowed the debate to continue tonight. I am disappointed that the Conservative Party has once again chosen the path

it has chosen: a very destructive role for the proceedings of the House of Commons.

• (1730)

**The Deputy Speaker:** The hon. parliamentary secretary to the government House leader will have 13 minutes remaining in the time for his remarks when the House next debates the question.

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## PRIVATE MEMBERS' BUSINESS

[English]

### AERONAUTICS ACT

The House resumed from November 30, 2020, consideration of the motion that Bill C-225, An Act to amend the Aeronautics Act, the Fishing and Recreational Harbours Act and other Acts (application of provincial law), be read the second time and referred to a committee.

**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, Bill C-225 is a bill that causes a great deal of concern, as it would amend certain acts to subordinate the exercise of certain powers to the applicable provincial laws concerning land use, development and environmental protections. This concerns me greatly, and I suspect it concerns anyone who feels that the Government of Canada should play a strong role in land development or anything of that nature.

The off-loading of powers is what I find interesting. I believe it is a member from the Bloc who has brought the bill forward, and I think it embodies the principle of what the Bloc is trying to do in the House of Commons, which is to decentralize the national government. In essence, it would take away anything the government does with one exception, which is, of course, to give money. If the Bloc has to participate in Canadian Confederation, it would be quite happy if the only role for the Canadian government would be to provide money to individual provinces, or at the very least to the Province of Quebec. In fairness to the people who might want to follow this debate, that would give a sense of why the Bloc has proposed the legislation before us.

In essence, the federal government does play a role, and we saw that with Bill C-69, which we introduced a couple of years back. It shows that the federal government does have a role when it comes to issues such as land, our environment and the mutual benefits of ensuring that there is a proper process in place to protect the interests of the nation.

*Private Members' Business*

I believe that in essence it has been working quite well. We have seen provincial governments, municipal governments and the national government working together on numerous projects, and there is a great deal of consultation that takes place. I think in terms of things like projects that are proposed for funding by Canada's infrastructure programs and provisions to incorporate provincial legislation by reference in Canada. We could talk about the Canada Marine Act. There is also a good-neighbour policy for federal real property. All of this is critically important. We need to recognize, at least from my perspective, that the national government plays a role in a wide variety of areas of jurisdiction, and there is an expectation from Canadians that we live up to our jurisdictional responsibilities.

I have not heard anyone in my political career talk about what the Bloc would hope to accomplish with this piece of legislation. However, I often hear from constituents who talk to me about how the federal government should be fulfilling its responsibilities in the many areas where we have jurisdictional control, and the best example I can use is health care.

• (1735)

Often we will talk about the federal government having a role in health care. There is some irony here. If we take a look at it, the Bloc will say that it does not want Ottawa in this but the province, and yet it is Ottawa's jurisdictional responsibility. The Bloc will say that it does not want Ottawa there, but on the other hand, when it is a provincial jurisdiction, it will again say that it does not want Ottawa to interfere because it is a provincial jurisdiction.

There are areas of co-operation where Ottawa may have the primary jurisdiction but there still is an obligation, at least in part, to work with other jurisdictions, whether provincial, municipal or indigenous. There are all sorts of ways in which Ottawa can co-operate with the areas in which it ultimately has jurisdictional responsibility.

Equally, I think, the reverse applies, with the best example being health care. There are a couple of debates we have been having during the pandemic and the bill we just finished discussing. Both of them are related to health care and the importance of the national government playing a role. One of them was with regard to long-term standards, while the other was with regard to assisted dying legislation and that area of mental health. I can talk about what I believe the majority of my constituents would like to see: a national pharmacare program.

All of those things I just cited can only be done to the benefit of all Canadians, no matter where they live, if we have the two levels of government prepared to work together. It is important that we recognize jurisdictional responsibility, as this government has done. When it comes to health care, we will do that. When it comes to the issue of land usage and our environment, we do not tell the provinces or the municipalities that that aspect is completely or 100% federal jurisdiction and that we do not need to hear from them at all on it. We continue to work with the different levels of government because we are in a confederation. Canadians expect us to be working in partnership with the different levels of government.

I would not say that the Bloc has a hidden agenda, but it is an agenda that is not healthy for the Canadian confederation, for those

who see the value of living in the best country in the world, and those who are so proud of the French factor that we really identify with and have a great deal of pride about, like I especially do. We are appealing for governments to work together on the important issues that Canadians want us to work co-operatively on. Even if a government has primary jurisdictional responsibility, it should still work with the different levels of government for the benefit of all Canadians.

• (1740)

**Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC):** Mr. Speaker, despite your optimistic introduction, I do not have a French text prepared today. In future I will, but I will be speaking in my first language tonight.

I always appreciate the opportunity to speak to the private members' bills that come forward from members of the Bloc. Even though I am not supporting this one, they provide a good opportunity to reflect on these questions of centralization versus decentralization, and the appropriate competence and balance of different orders of government. That appropriate balance has been a defining question in our national life since Confederation, and is as much alive today as it has ever been.

I think we see some parties in the House with reflexive tendencies one way or the other. We see the Conservative Party trying to strike a thoughtful and principled balance that integrates a recognition of the value of an engaged national government and the engagement of other orders of government as well.

What we see clearly from the government, and the Liberals in general, is the tendency toward hyper-centralization: a general lack of respect for the competence of the provinces and the sense that they want to assume for themselves control over areas that are properly in the sphere of the province or even the municipality, the community, the individual or so forth. A strong centralizing tendency is part of the approach of the Liberal Party of Canada.

With the Bloc, we see a kind of centralization in provincial capitals as its objective. It is not advocating for complete decentralization. In fact, we see various cases where its members advocate for provincial governments to be able to significantly interfere in people's personal lives in a way I would personally see as crossing the appropriate bounds of individual autonomy, but theirs is certainly a decentralization away from Ottawa.

*Private Members' Business*

Where do we stand as Conservatives? Our approach is to emphasize a balance characterized best by the principle of subsidiarity. I looked up various definitions online before speaking to try to capture what others have said about it. One definition I found said, "Subsidiarity is a principle of social organization that holds that social and political issues should be dealt with at the most immediate or local level that is consistent with their resolution." There is an implied tendency toward decentralization, but it is not a limitless call for decentralization. It calls for social and political issues to be resolved at a level most immediate or local that is consistent with the effective resolution of those problems. Calling for municipal militaries as opposed to a national military, for example, would not be consistent with the principle of subsidiarity, but on issues where it is practical and effective to find those solutions there is a tendency, in embodying that principle of subsidiarity, to call for a more localized solution.

Another definition I found is, "The principle of subsidiarity is a teaching according to which a community of a higher order should not interfere in the internal life of a community of a lower order, depriving the latter of its functions, but rather should support it in case of need." That definition of subsidiarity implies an important link with the principle of solidarity. A belief in subsidiarity, localized solutions to problems, should not lead us to lose sight of the importance of a universal kind of solidarity. Solidarity is the universal principle that we are concerned about the well-being of all people everywhere. Subsidiarity is a recognition that as much as we might be concerned with solving problems and seeing problems solved in other places, most practically the best solutions that are responsive to local needs are developed locally.

We should think about these principles as we define the balance that should be struck within our country. We want a national government that operates effectively within its areas of jurisdiction, and within areas where it is uniquely placed to solve problems. That should be informed by the sense of solidarity that we share as Canadians: a common concern for each other in every part of the country and a desire for Canadians to do well wherever they live.

• (1745)

At the same time, we need to appreciate the fact that people in the national government, people in another region, may not be in the best position to think through the particular solutions that are required in response to a local situation.

We are not trying to find the Goldilocks-inspired middle path. We are trying to find a principled balance between the tendencies of the Liberals and the tendencies of the Bloc to one that emphasizes principles of national and beyond that universal solidarity, but also operationalizing the principle of subsidiarity, recognizing that smaller organizations, local communities are often better placed to understand and respond to problems that are particular to their own areas.

We have in front of us a private member's bill that effectively seeks to give provincial governments vetoes over national infrastructure that would otherwise fall within federal jurisdiction. As colleagues of mine have said, the need for the federal government to respect provincial jurisdiction exists in tandem with the need for provincial governments to respect federal jurisdiction.

When we look at big national questions around building infrastructure projects, around how we develop our country, how we build ourselves up collectively, those are questions on which our nation as a whole has to consider and come to conclusions. We cannot create a situation in which individual provinces or communities can veto the collective decisions that we make together.

The impact on all people has to be considered, but it seems proper to me, in line with the principle of subsidiarity, that some issues do require a national government to think in the national interest and to aggregate the feedback that different people provide from different perspectives and different regions. That is why some things fall within federal jurisdiction.

We are talking about natural resource projects. Members can imagine a range of other examples where that national leadership is important. We cannot have provincial governments controlling their own international borders. We do have some engagement of provincial governments in immigration and that has generally been worthwhile, such as the provincial nominee programs. However, there still obviously has to be a federal role in immigration, because we are one country. Once people are in Canada, they are in Canada and they can move around between regions.

Some members of the House, especially in the Bloc, would like us to move in this direction, but we are not and should not become divided into separate nations. We are one nation and we have one common national interest, and that has to be realized through a federal government that can think about that in certain cases in areas of federal jurisdiction. That is why, fundamentally, I do not support this bill.

On so many other individual questions of practical policy, of responses to social and community challenges, the federal government should be willing to work more with provinces, with local communities, with individuals and organizations outside of government. We, generally speaking, deliver better services and develop better policy if we are respecting this principle of subsidiarity and respecting local communities.

While we see a loss of balance on these questions from both the Liberals and the Bloc, a tendency to move to one extreme in the one case and to move to the other extreme in the other case, the Conservatives are committed to articulating this principled balance that tries to operationalize both subsidiarity and solidarity as guiding principles for our policy. This bill does not strike that balance.

• (1750)

There have been other cases, such as a Bloc private member's bill allowing Quebecers to file a single tax return, where we have supported what they are putting forward, but in this case we will be voting against it.

**Mr. Taylor Bachrach (Skeena—Bulkley Valley, NDP):** Mr. Speaker, I am pleased to speak today to Bill C-225, introduced by the member for Jonquière. A similar bill, Bill C-392, was put forward by the Bloc in a previous Parliament by the member for Repentigny.

*Private Members' Business*

Bill C-225 would amend seven acts to require infrastructure projects currently within federal jurisdiction to be subject to provincial laws and municipal bylaws concerning land use and environmental protection. This would affect infrastructure ranging from airports, ports and harbours through to telecommunications infrastructure such as radio masts and cell towers. It would also impact any project funded through the Canada Infrastructure Bank and federal property administered by the National Capital Commission in Ottawa and Gatineau.

The NDP supports co-operative federalism. We believe that decision-making should be multilateral, reflecting the unique values and perspectives of provinces and local communities. We made it clear to Canadians in the last election that we would work to limit the federal government's unilateralism and promote mutual respect between levels of government. When it comes to big infrastructure projects, we believe that social licence must be a key requirement before projects proceed. A co-operative approach between different levels of government would mean better policies. Canadians are better served when the federal government is listening and respecting provinces and municipalities.

This bill raises other important questions concerning federalism in Canada. While there will always be projects that are in the national interest, federal jurisdiction over areas such as airports, ports and communications towers too often means that local values and concerns are not given adequate weight in federal assessment and decision-making. At worst, these processes can be perceived as a rubber stamp for projects the federal government already intends to approve, projects that overlook the work of community leaders who seek to protect the environment or conserve important aspects of a community or region.

New Democrats believe in empowering local communities to have a stronger say concerning development that affects them. After all, communities and residents live with the long-term impacts of infrastructure projects. It is only right that we ensure their voices are heard in the decision-making process. By putting the onus on the federal government to meet the bar set by provincial laws and local bylaws, this bill would give a greater voice to the orders of government closest to the people and, as such, we believe it deserves further study at committee.

This bill would not render federal projects impossible. Rather, it would set a high standard for the government to prove that there was a true national interest required to override local laws. It is not reasonable to assume that, because the federal government is the proponent, a project is automatically in the national interest.

For projects that truly are essential to Canada's interests as a country, the well-established legal principle of paramountcy, which holds that when federal and provincial laws are found to be in conflict federal law prevails, could be used as a last resort. It should not be assumed that local people cannot understand or appreciate the national interest. After all, it is local people who make up our country. Likewise, both local and provincial governments have an interest in the well-being and prosperity of the nation as a whole and are able to consider these factors when crafting their laws and bylaws.

We have seen that the Liberal government's centralizing approach to major infrastructure decisions fails to account for regional perspectives and has furthered divisions between provinces. Too often we see federal decisions imposed on communities without giving them a say. From cellphone towers to new aerodromes on farm land, we need a government that engages with communities in a more meaningful way.

The Liberals keep saying that we need to respect the division of powers in Canada, but perhaps we should better think of federalism as a balance of powers and not a division, one in which the voices and ideas of local leaders are just as valid as the views of Ottawa. This bill could help resolve these tensions by ensuring that development plans and municipal regulations adopted by local authorities are better respected by the federal government.

I must say it is a bit unclear why this bill includes reference to all projects funded by the Canada Infrastructure Bank, since it seems that the vast majority of the projects funded by the CIB should already be subject to provincial and local legislation and regulations. Perhaps this is something that could be clarified should this bill make it to committee.

● (1755)

It is not that we do not have serious concerns about the Canada Infrastructure Bank. Of particular relevance to this discussion about respecting local needs is the CIB's insistence on public-private partnerships that emphasize the returns of private investors over the long-term needs of communities. We support the notion that CIB-funded projects should respect local and provincial legislation; however, it is unclear why this would not otherwise be the case.

Just as the rationale for including CIB-funded projects is somewhat unclear in this Bill, so is the exclusion of pipelines, which were included in the bill's previous iteration. Recent pipeline proposals clearly demonstrate the failure of the federal government to adequately address the concerns and values of other orders of government. The federal government can hardly claim that Northern Gateway and Trans Mountain were approved through a harmonious process that respected all three orders of government. The government approved Northern Gateway despite opposition from over a dozen local governments in British Columbia and many first nations up and down the B.C. coast.

*Private Members' Business*

The Trans Mountain Expansion project was thrown out by the Federal Court of Appeal, because it found that the federal government's consultations were woefully inadequate and that it failed to consider the environmental impact of increased marine traffic in the Salish Sea. Not only did a second run at consultation fail to meet the expectations of many communities and first nations, the federal government then fought in court B.C.'s attempts to legislate environmental protections that would prevent oil spills from damaging the environment. It is indeed difficult for the government to claim it has satisfied local and provincial concerns regarding TMX.

In the cases of both Northern Gateway and Trans Mountain, the federal government announced its support for what it claimed were projects in the national interest before the assessment processes were finalized. With the federal government acting as both booster and arbiter, the concerns of communities, first nations and even provincial governments did not stand a chance of influencing the inevitable outcome.

To conclude, Bill C-225 poses interesting ideas that would help rebalance federalism to better reflect the perspectives of regions and provinces. It would empower local communities by giving them a say on infrastructure projects that would have been unilaterally imposed on them in the past, and it would force the federal government to do a better job of considering the environmental impacts of infrastructure projects before it approved them.

There remain some outstanding questions raised by this legislation that deserve further study. Analysis from the Library of Parliament suggests that this bill would be legally viable as the courts would likely interpret it as incorporating, by reference, provincial laws into federal statutes. This is a legislative technique that is frequently used and accepted in jurisprudence, and we believe this idea merits further study at committee.

I look forward to debating these ideas in the future, and I thank the member for Jonquière for bringing forward this bill.

• (1800)

[*Translation*]

**Mr. Alexis Brunelle-Duceppe (Lac-Saint-Jean, BQ):** Mr. Speaker, I am extremely pleased to speak in the House today to the bill introduced by my colleague and friend the hon. member for Jonquière.

Almost everyone thinks the environment is important. In fact, the environment means as much to people as apple pie. I think everyone likes apple pie, therefore everyone likes the environment.

Since we have limited time to debate I will get to the point. The environment is a jurisdiction that is exclusive to Quebec and the provinces. Again, I want to reiterate that time is limited because it seems clear to me that the government would rather waste time than take action while we still can. Our window of time to deal with the environment is getting smaller by the day. Instead of taking real action, the government is still wondering about the possibility of a pan-Canadian framework. In fact, however, the governments of Quebec and most of the provinces are already taking action.

The federal government, regardless of its political stripe, has a poor track record in this regard. For example, rather than analyzing

the risks associated with offshore oil drilling, the Liberal government chose to approve such activity. The same is true of a large number of other projects. However, we are not fooled. If the Liberals really cared about the environment and thought it was important to act, they would have done so a long time ago.

It is crystal clear to me that we need to protect the environment, but the best way of doing that is not to greenwash the government's record with lip service. Instead, we need to take the tools that exist in Quebec and the provinces and apply them to federal projects. We also need to listen to scientists, the very people that the Liberals keep saying over and over that they rely on when making decisions.

It is 2021. We are past the point of asking all these questions that scientists have already asked and answered. My colleagues who are listening may have good intentions and may still believe their government's claims of environmentalism. However, I am telling the House that, if there were oil in Lac Saint-Jean, the government would surely come up with a good reason to extract it.

That is why it is especially true that no one is better placed than Quebec and the provinces to deal with environmental issues. Not only does each province have its own environmental ministry with competent expert scientists, but they are also responsible for managing natural resources, water resources and other resources within their borders. That is why the federal government should start by respecting Quebec and provincial environmental laws. It needs to respect the jurisdictions set out in our Constitution, which have been clear for over 150 years.

It is significant that a sovereignist is the one reminding the government of the basics of federalism.

With the House's permission, I would like to make a suggestion. A few weeks ago, during the debate on the Canada water agency, I pointed out that the Bloc Québécois introduced Bill C-225, sponsored by the eminent member for Jonquière, on Quebec's environmental sovereignty. What I am saying today is practically copy-paste, because instead of analyzing federal laws, Bill C-225 would amend them and make them more effective. I will therefore vote in favour.

Let us be pragmatic for a minute. If we admit that it is important to protect the environment, we also have to admit that it is urgent. If it is urgent, let us choose the fastest, most effective way possible. In our case, that is the rules made by Quebec and the provinces because they are the toughest and they already exist.

*Private Members' Business*

Logically, if my colleagues behave in accordance with their desire to protect the environment, they will agree with me that the federal government should make sure its own infrastructure and laws respect the provinces' and municipalities' rules instead of squabbling with them over jurisdiction and always trying to decide who should be making the laws. It is simple: Provincial legislators should be responsible for everything related to the environment because that is what they are there for.

There is another question we must ask ourselves: Who do we work for? I want to remind the House who I work for and why I am here. I work for my constituents, for the people of Lac-Saint-Jean. When it comes to the environment, I work for my children's generation in particular. I work for young people who, as recently as a few weeks ago, were telling me that they are sick of the bureaucratic quagmire and tired of the federal government stalling on everything and accomplishing nothing. What is the point of sitting around a table wondering how to put out a fire when the firefighters are outside with the hoses and nozzles?

• (1805)

Being responsible parliamentarians also means delegating certain aspects to our Quebec provincial counterparts when the time is right, instead of always ignoring their existence or considering them inferior. Now is the time.

Where is the federal government's credibility in relation to multinationals when it authorizes offshore drilling? Where is the federal government's credibility in relation to riverside communities when it allows pipelines and trains to spill into those rivers? Where is the federal government's credibility in relation to municipalities struggling to provide safe drinking water to their residents when the feds cannot provide safe drinking water to indigenous communities? Where is the federal government's credibility in relation to endangered marine mammals when it allows the marine industry to regulate itself? Where is the federal government's credibility, full stop? We are still looking for an answer.

In North America and around the world, there is only one government that is looking after its environment properly and that has credibility, and that is Quebec. Quebec is committed to preserving its collective treasures. It does not do so by waffling, but by taking action. For example, integrated watershed-based management allows Quebec to plan measures for the protection and use of water resources. The Government of Quebec achieved that by focusing on collaboration between all decision-makers, users and civil society. This did not happen by holding a brainstorming session 25 years later about how to delegate jurisdictions that do not belong to us.

The proof that Quebec and the provinces are managing very well without the federal government is that when watersheds straddle the Canada or U.S. border, Quebec collaborates and establishes agreements, such as the Great Lakes-St. Lawrence River Basin Sustainable Water Resources Agreement. The federal government should respect that.

To tackle climate change, Quebec includes measures to foster the conservation and protection of water resources and the resilience of ecosystems and associated species. The federal government should respect that.

When other countries want to build a dam, they turn to Hydro-Québec and its expertise. The federal government should respect that.

We should look to the provinces for inspiration. As federal legislators, we should be creating legislation that reinforces provincial jurisdictions.

If the House passes the bill introduced by my colleague from Jonquière, Quebec's laws concerning land development and environmental protection will apply across all of Quebec, regardless of jurisdiction. This means that airport developers' privileges will not be put ahead of Quebec's Act respecting the preservation of agricultural land and agricultural activities or municipal bylaws. It also means that telecommunications giants will have to come to an agreement with municipalities and respect the wishes of local residents when putting up their towers and antennas. As with all other similar projects, infrastructure under federal jurisdiction will be subject to the assessment process of the Bureau d'audiences publiques sur l'environnement du Québec, or BAPE, and other provincial assessment processes. Developers will require a certificate of authorization from these governments before going ahead. Federal government property will have to comply with development plans and municipal bylaws adopted by local authorities, on top of providing better environmental protections and more cohesive land development.

Bill C-225 will establish legal certainty for developers, residents and environmental protection groups. It will settle the many legal disputes over shared jurisdictions. If the federal minister authorized a project that violated a provincial law, the minister would be violating a federal law. This would resolve the issue of jurisdictional disputes and it would save time and money.

I hope this helped clear things up for many a member of the House. Once again, I thank the member for Jonquière for this very important bill.

• (1810)

**The Deputy Speaker:** Resuming debate.

The hon. member for Jonquière has five minutes for his right of reply.

The hon. member for Jonquière.

**Mr. Mario Simard (Jonquière, BQ):** Mr. Speaker, that is a disappointment that I saw coming.

I would like to come back to what the parliamentary secretary said earlier. He wanted to know what the Bloc Québécois is trying to accomplish with this bill. What we are trying to accomplish with this bill is political autonomy. Obviously, there is not a party in the House, with the exception of my own, that understands what political autonomy means.

Two days ago, on *Tout le monde en parle*, a fairly popular show in Quebec, we heard the Minister of Official Languages recognize that Quebec is a nation.

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What does a nation require? It requires political autonomy. Back in the day, the Conservatives recognized, by means of a motion, that Quebec was a nation. Once again, what a nation requires is political autonomy.

I would like to quickly respond to the parliamentary secretary, who went so far as to give an analogy about health care, which is in a disastrous situation. I do not know whether transfer payments and fiscal imbalance mean anything to him, but this is a disaster created by the Canadian federation. He has the nerve to make a comparison with the health care system and say that we are never happy. That is beyond insulting.

The bill I introduced touched on two of Quebec's biggest concerns. I just talked about political autonomy, but there is the environmental issue too. As a young student, I learned about Quebec's social and economic development. There is an expression that has stuck with me ever since: "maîtres chez nous", or masters in our own house.

In the 1960s, Quebec nationalized electricity, which until then had been owned by big American corporations. That was one element that drove its emancipation. My father's generation accomplished that. Today, I am convinced that my son's generation will one day liberate us from the Canadian federation, which tells us what we should do on our own land. To me, that is insulting. If the government recognizes that Quebec is a nation, it cannot also tell us that we will never have the means to liberate ourselves and grow the way we would like.

I also made note of the intervention by my colleague from Sherwood Park—Fort Saskatchewan, who talked about the Liberal government's centralization on the one hand and a kind of centralization from the Bloc on the other. I suppose that would make us the centralists of the province of Quebec.

That is just the same old empty rhetoric. Let me repeat that no one in the House, except for the people in my party, understands what political autonomy entails. It is deeply disappointing.

Every nation, whether it is an indigenous nation or the Quebec nation, is calling for this political autonomy. What I am seeing this evening is a kind of contempt. The government should just be honest and say that it is not prepared to grant Quebec political autonomy. Enough with the pretences and excuses.

This was a missed opportunity, but Quebec is used to that. We saw it with the development of multiculturalism. At first, there was talk of biculturalism and bilingualism. The federal parties got scared. They were scared to give Quebec any power or autonomy by acknowledging that this country was formed by two nations. They threw us aside, and biculturalism was rejected in favour of multiculturalism.

The same thing happened with the Clarity Act. We were not allowed to decide our political future for ourselves; it was up to them. Time and again, the federalist parties have tried to crush us to validate a political system that has been imposed on us. I would like to point out that we never signed the Canadian Constitution.

Huge problems with oil and gas are now going to emerge, and we will never get to have our say because the government is not

prepared to give even one iota of credence to this important principle of political autonomy.

• (1815)

**The Deputy Speaker:** The question is on the motion.

If a member of a recognized party present in the House wishes to request a recorded division or that the motion be adopted on division, I would invite them to rise and indicate it to the Chair.

The hon. member for Jonquière.

**Mr. Mario Simard:** Mr. Speaker, I request a recorded vote.

**The Deputy Speaker:** Pursuant to order made on Monday, January 25, the division stands deferred until Wednesday, February 24, at the expiry of the time provided for Oral Questions.

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## ADJOURNMENT PROCEEDINGS

A motion to adjourn the House under Standing Order 38 deemed to have been moved.

[*English*]

### FOREIGN AFFAIRS

**Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC):** Mr. Speaker, since this is the first time I have had a chance to speak about Canada-China relations since the adoption of the motion yesterday, I want to congratulate all my colleagues who were involved in that vote. I recognize especially my colleague from Wellington—Halton Hills as well as my co-chair and the vice-chairs of the Canada-Uyghur Parliamentary Friendship Group. I know some of them are listening. I unfortunately cannot remember their riding names, but I am very pleased by the success of that motion and hope to see the government adopt that policy as well and advance it in following the will of the House of Commons.

When we speak about some of these issues of human rights in China, whether we are talking about the situation in Hong Kong, the situation with Uighurs or other situations, very often the community groups affected by these issues will raise with us as well the significant threat of foreign state interference here in Canada and intimidation of them here in Canada. This is the substance of the question I asked. It was about the steps the Government of Canada must take to protect Canadians from foreign state interference and to prevent elite capture; that is, to prevent the phenomenon by which the government of China tries to use money, blackmail or other kinds of tools to co-opt and control the direction of Canadian institutions.



These are very serious and significant issues. Various committees, such as the review committee of parliamentarians, have flagged the issue of foreign state interference being a defining issue. When I put forward a motion on this topic, Motion No. 55, I was joined on Parliament Hill by a number of Canadians who have been victims of foreign state interference. They spoke of intimidation, threats of violence, threats of sexual violence and just being barraged with intimidating calls and messages in response to their advocacy for democracy and human rights.

It should concern us greatly that the freedoms we cherish in Canada are threatened not only in other countries but also here in Canada for some of our fellow Canadians who are involved in speaking up about these kinds of issues. Questions of foreign state interference, of elite capture, of intimidation of Canadians who are speaking out about human rights issues in China and other countries overseas are very important.

The House of Commons has already passed a motion put forward by our leader that calls on the government to put forward a robust plan to deal with foreign state interference. We have not seen that plan yet, a plan that rises to the level of the challenge we face, in my view. I followed up with Motion No. 55, which calls on the government to work collaboratively with provinces, territories and municipalities in response to foreign state interference and also to offer support to victims.

As part of this issue of elite capture, we recently had John McCallum at the Canada-China committee. When asked questions about what clients he may have worked with previously and the questions that his work might raise about his independence, he told us that he was not able to divulge clients but that he would comply if the federal government brought in a foreign agents registry that tracked some of those questions of potential influence.

We also raised the question of Dominic Barton, our ambassador to China, who previously worked for McKinsey. McKinsey has worked with Chinese state-owned companies, and again there has been no information given. The names of those clients that our ambassador has previously worked with, which may include Chinese state-owned companies, have not been divulged.

In the midst of these legitimate questions about elite capture, the government is not providing information. I wonder if it is prepared to start doing that.

• (1820)

**Mr. Robert Oliphant (Parliamentary Secretary to the Minister of Foreign Affairs, Lib.):** Mr. Speaker, I will begin by thanking the member for Sherwood Park—Fort Saskatchewan for his leadership this week on the important motion that was passed yesterday in the House of Commons, which is obviously under active consideration by the government.

We recognize as a government that foreign interference presents a strategic long-term threat to Canada, to the rights of Canadians and our democratic values, to our economic interests and to our national security and sovereignty. Canadians should know that their government takes all allegations of hostile state activities seriously. The Government of Canada values transparency as a core value and

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works diligently to ensure that Canadians are protected from foreign influence.

As members are aware, the Lobbying Act recognizes that the public should know who is engaged in lobbying activities of public officials and it also regulates those activities. The Commissioner of Lobbying further supports these efforts through investigatory powers to ensure that there is compliance. The Conflict of Interest Act establishes clear rules for public office holders in order to minimize the possibility of conflicts arising from private interests and public duties. The Conflict of Interest and Ethics Commissioner and the Senate Ethics Officer actively work to ensure that public officer holders respect these rules. Moreover, the Canada Elections Act clearly prohibits foreign involvement in any kind of political activity regarding elections and during pre-election periods.

With respect to the exact question, the government is focused on protecting Canadian democracy from foreign influence, and a registry of foreign agent is something that we are actively considering. We are aware that some of our allies, namely, the United States and Australia, already have foreign agent registries in place and we are studying that. We want to make sure that we have a Canadian solution for a Canadian problem.

The safety and security of Canadians at home and abroad is, and always will be, our number one priority.

**Mr. Garnett Genuis:** Mr. Speaker, it is interesting that the parliamentary secretary would say that a registry of foreign agents is something that is being actively considered by the government. I wonder if the parliamentary secretary could clarify the timeline for that consideration. There are a variety of issues that we hear from the government that are under consideration, but it is important for us to know if that consideration will be brought to a conclusion at a certain point and when.

Second, what does the parliamentary secretary think of the situation we have with people like John McCallum and Dominic Barton, in one case, a former public officer holder and in the other case, a current public officer holder, where they or the company they work for has an issue with client confidentiality and we are therefore not able to scrutinize and know which companies, potentially state-owned companies, they have worked for or with in the past? Does the parliamentary secretary think that is a problem, especially in the case of a current public officer holder? Should the public not be able to know and judge for itself whether or not those past client relationships put the person at risk of undue influence?

**Mr. Robert Oliphant:** Mr. Speaker, with respect to the registry, all good things come in good time and due course of thorough consideration to ensure that no stone is left unturned and that we have, as I said, a made in Canada solution for Canadian problems.

*Adjournment Proceedings*

With respect to other issues, our government continues to be seized with all activities related to potential interference. As I said, we have laws in place with respect to lobbying, with respect to conflict of interest, with respect to elections. Those are pieces of legislation with appropriate authorities and appropriate people responsible, who will follow up anything they consider to be inappropriate.

The government is focused on protecting Canadians and democracy here in Canada from foreign influence, and we will continue to be actively engaged in this. We will continue to take a whole-of-government approach to address foreign interference and we pledge to keep Canadians safe.

• (1825)

HOUSING

**Ms. Jenny Kwan (Vancouver East, NDP):** Mr. Speaker, the federal government chose to end the rental assistance program for co-ops and social housing projects whose operating agreements expired prior to April 1, 2016.

They have been excluded from phase two of the federal community housing initiative under the national housing strategy. It is inexplicable why tenants whose co-ops happen to have paid off their mortgages are not entitled to continued support, despite no change whatsoever in the tenants' need. A total of 277 co-ops are negatively impacted by this arbitrary decision, which affects over 7,500 households in Alberta, British Columbia, Ontario, P.E.I. and Quebec.

Equally disturbing is the fact that co-ops with operating agreements established under CMHC's then called urban native housing program are also excluded from receiving continued rent subsidy through FCHI-Phase 2.

We should not have to remind the government that one out of eight households in Canada lives in unstable, overcrowded, mouldy, cold or unaffordable housing. In fact, the Parliamentary Budget Officer's report confirmed that close to 20% of urban, rural and northern indigenous households in Canada are in an unaffordable or unsuitable housing situation, a rate far above the national average.

The report identified 124,000 indigenous households in housing need, including 37,500 homeless in a given year. Equally disturbing is the finding that the annual affordability gap for indigenous households is \$636 million. It is laughable that the Prime Minister claims that the new nation-to-nation relationship is the most important relationship, when the parliamentary budget office revealed that only a measly 0.8% of the funding in the national housing strategy's 10-year plan is allocated to indigenous housing programs, and that funding is just ongoing subsidies for projects built before 1993.

Equally insulting is the fact that funding for new construction under the national co-investment fund earmarked to target indigenous housing only amounts to 0.5%, and 0% for all other major programs. Indigenous peoples are 11 times more likely to use a shelter. In Vancouver East, we have the largest homeless encampment in the country, where 40% identify as indigenous. It is disgraceful how the Liberals fail to follow through with their promise that adequate housing is a basic human right, and their empty promise of a

dedicated for-indigenous by-indigenous housing strategy has gone on for years.

By choosing not to provide rental assistance to the co-ops, the federal government is actively displacing low- and limited-income families, and putting them at risk of homelessness during a housing crisis in the middle of a pandemic. This flies in the face of the government's declaration in 2017 that adequate housing is a basic human right. It further contradicts the Liberal government's express wish to end chronic homelessness. The loss of these units will add to the overall loss of low-income housing stock across the country.

It is estimated that 322,000 units of affordable housing were lost between 2011 and 2016. The last thing we need is for the federal government to add to that problem. Data collected by the Co-operative Housing Federation of Canada says that this fate has already befallen some co-op housing members. A patchwork of provincial and municipal programs have provided some temporary stopgaps to prevent member residents from losing subsidy, but those temporary agreements are set to expire this year.

Alberta has been impacted. Ontario has been impacted. British Columbia and many other communities have been impacted. Half measures will not do, and the 12-month one-time funding initiative recently announced is not enough.

• (1830)

**Mr. Adam Vaughan (Parliamentary Secretary to the Minister of Families, Children and Social Development (Housing), Lib.):** Mr. Speaker, there is a whole lot to correct there, starting with the fact that it was a \$15-million announcement, not a \$12-million announcement. This was done without any suggestion from the NDP that money was needed. I would further add that it is not our government that allowed those agreements to expire; the previous Conservative government did. While we have picked up all other agreements in the meantime through the national housing strategy, we have now announced an interim measure to re-enrol lapsed agreements in the provinces identified and have committed to enrolling all of them in the upcoming budget.

All of that said, the indigenous housing program to which the member speaks of, which is identified as a key core need in the national housing strategy, is currently being studied at committee after we made a commitment in the throne speech to fulfill the commitment to deliver an indigenous-led urban, rural and northern housing strategy. That work is under way and those funding opportunities are under way.

I wish the member opposite had attended committee to hear the Parliamentary Budget Officer answer questions. He said the bulk of the funding is transferred by the federal government to provincial governments, but he has failed to provide us with the details of exactly how that has impacted indigenous households, 53% of which live in subsidized units. Those dollars are funded through a provincial-federal accord, which is also accomplished under the national housing strategy.

The national housing strategy now stands at \$70 billion, and it is immediately addressing needs through a rapid housing initiative, with a \$1-billion investment to get more than 3,000 units of housing into the hands of housing providers across the country to meet the needs of the homeless. We are on the verge of launching the next three chapters of the national housing strategy, which are to fortify the co-op sector; build the urban, rural and northern indigenous housing stream; and fulfill our commitment to end chronic homelessness in this country.

I will add one last thing to this point, and it is very critical. What is going on in Vancouver East is serious, and for the member opposite to bring issues to our attention on a daily basis is good work on her part to represent the needs of her constituents. She says we are walking away from the commitments we are making and are not addressing them, and she characterizes them as insufficient. That is fine insofar as we need to do more, as I will never disagree that more is better. However, to pretend that we have not done what we said is wrong, and to pretend that we did not take the initiative to fix the co-op sector that had lapsed is wrong as well.

In the question she asked that led to this late show discussion, she suggested it was just end-of-year funding. It is not. It is bridge funding to get to a permanent solution. She criticized us for having it end in 2028. The reality is we will put the entire co-op sector into one funding envelope so that the practice the Conservatives had of allowing operating agreements to expire in the middle of the night will, thankfully, come to an end in this country.

The co-op sector is stronger because of our government and stronger because of the national housing strategy, and I really wish the NDP would help us build it instead of just criticizing it.

**Ms. Jenny Kwan:** Mr. Speaker, the Parliamentary Budget Office's information is clear. I had a private briefing with the office and it indicates the facts. The facts are clear. There is a lack of support for indigenous people from the government.

With respect to the co-op program, I ask the parliamentary secretary to check with the minister regarding the letters I wrote to him. I have even raised the co-op sector at committee directly with the minister and CMHC, so I have been advocating for it.

With respect to section 95, where co-ops have been excluded, the government did not take action until most recently with this half measure. We can call it bridge funding or whatever we want to call it: at the end of the day what we need to see is permanent, sustainable funding so people can know their housing will be protected.

I am glad the parliamentary secretary has acknowledged the crisis in Vancouver East. We have asked the federal government for fifty-fifty cost-sharing to directly address the crisis at Strathcona Park. So far, there has been no response.

### *Adjournment Proceedings*

We need the federal government to step up and help us solve this problem. I am more than happy to work with the government to get that done.

**Mr. Adam Vaughan:** Mr. Speaker, solving this crisis is not as easy as booking a ticket to Disneyland for one's family. It takes a lot more work and dedication.

Let me quote what the Co-operative Housing Federation of Canada said about our announcement. It states:

"We are very pleased by this news, which closes the final gap in our 'You Hold the Key' campaign objectives," said CHF Canada President Tina Stevens. "Supporting vulnerable households is more important than ever, so we thank [the] Minister...for this decision."

The co-op housing sector knows what we are doing and is thanking us for it. The homeless sector knows what we are doing and is thanking us for it.

What is completely unclear to me is why the member opposite chooses not to report the facts and build on truth as opposed to skewing the numbers to prosecute an argument. Let us deal with real numbers and let us get real results. Like the national housing strategy has delivered, let us deliver real housing to real people in real time with real investments.

Quite frankly, the parliamentary budget office misses the key component of the national housing strategy, which is that it has opened the door to every single indigenous housing provider to apply every single component of the national housing strategy in order to receive funding.

We will not stop until we properly house every Canadian we possibly can. The goal is to eliminate chronic homelessness and get everybody who needs housing housed by the end of the national housing strategy's first chapter as we prepare to write the second one.

• (1835)

### TELECOMMUNICATIONS

**Mr. Eric Melillo (Kenora, CPC):** Mr. Speaker, in 2017 the government announced a partnership with Bell Canada to upgrade the Internet in northwestern Ontario. Over \$4 million in funding was announced to bring this high-speed connection to a number of communities, including Madsen and Shoal Lake 39 in the Kenora riding. These communities were explicitly promised a high-speed connection by the Liberal government. Now, four years later, many residents have been telling me that they have not seen any progress, that there has not been any improvement in their connection.

The Liberals talk very often about how much money they have shovelled out the door to support different broadband projects. I am sure that we will hear some of that in the response to my question, but it seems that time and time again they would get an "A" for the announcement but an "F" for the delivery.

*Adjournment Proceedings*

We know that rural and remote northern communities are used to being left behind by the government, especially when it comes to the issue of reliable Internet access. It seems that the government is very happy to get credit for the announcement of the funding but are not so keen on implementation. That is why I raised this issue back in January in question period. I asked the government where that promised money had gone, if it was not to bring Internet to northwestern Ontario, because we know that it has been allocated, yet we have not seen the results. Unfortunately, I was not able to get a straight answer at that time.

The bottom line is that residents in my riding and across northwestern Ontario need to see some transparency. More importantly, they need to see some results.

I would like to take this opportunity to simply ask again where the \$4 million was actually spent and why it has not resulted in better Internet service for the residents in my riding and across northwestern Ontario who were promised it.

**Ms. Gudie Hutchings (Parliamentary Secretary to the Minister for Women and Gender Equality and Rural Economic Development, Lib.):** Mr. Speaker, tonight I am happy to highlight for the hon. member for Kenora our government's progress in improving connectivity for all Canadians.

Today, as we all know, high-speed Internet is essential for all Canadians, no matter where they live. My colleague across the way has raised some very important projects in his region. I am pleased to let him know that the work is progressing well and is close to being completed. In fact, the portion of the project in Stratton and Nigigoonsiminikaaning first nation is operational, and the remaining elements are due to be completed by the end of next month.

We are committed to the principle that no Canadian household will be left behind and we are on track to meet our goal of connecting all Canadians by 2030. That is good news, but we knew that more work needed to be done, so we accelerated our timelines and are now on track to connect 98% of Canadians by 2026, years earlier than previously ever thought possible.

A recent example of our success is with our Connect to Innovate program. By the end of this program in 2023, nearly 400,000 households will have benefited from these investments. In fact, 100 communities are already benefiting from these important investments, with high-speed access now available. Canadians can also track the status of the projects in their areas with the new online tracker we launched this past fall. Not only does it share what stage the development of their project is in; it also provides the expected completion date.

However, the most significant tool we have is the recently announced universal broadband fund. The \$1.7-billion UBF is the program Canadians have been asking for. It will fund broadband infrastructure projects to bring high-speed Internet to rural and remote communities. It will support whatever network infrastructure is needed, whether backbone or last mile, and it will be the best to meet the diverse geographical and regional connectivity needs all across our beautiful country. I am pleased to say that we have already begun announcing projects under the rapid response stream that will have folks connected by November of this year.

Earlier this month, the minister announced \$6.7 million to connect 1,977 homes in five communities in rural B.C.; particularly in Pemberton, Steelhead, Ryder Lake, northwest of Princeton and the north Sunshine Coast. In Starland County and Stettler County in Alberta, 7,179 underserved households will be connected, and northeast of Sudbury, 74 underserved households, including 68 indigenous households, will be connected. Furthermore, 190 households in the Perth—Wellington region and 120 households in the Niagara region will be connected too. These are all exactly the types of projects this stream was intended to fund: small local projects that will make an immediate impact.

We will be making more announcements in the coming weeks and we always look forward to continuing to work closely with a variety of partners in every part of Canada to achieve our ambitious objectives. Canadians can count on us. Canadians will be connected.

• (1840)

**Mr. Eric Melillo:** Mr. Speaker, the parliamentary secretary seemed like she was about to answer my question, but then was not quite able to get there, so I will try again.

I am happy to know that this is, in her words, “progressing well”, but at the same time it has been four years. This promise was made quite some time ago and many residents in my communities, again Madsen and Shoal Lake 39, which I do not believe were specifically mentioned in her comments, are still waiting for this connection. It is all about the delivery, as I am sure the parliamentary secretary knows. She spoke about many projects and a lot of funding allocated by the government, but it is about delivering in a timely manner for people in rural and remote communities.

I wonder if the parliamentary secretary can tell us on what date residents in Madsen and Shoal Lake 39 specifically can expect to have access to this reliable, high-speed Internet as promised by the government.

**Ms. Gudie Hutchings:** Mr. Speaker, I want to remind my hon. colleague that we launched the universal broadband fund to get Canadians access to high-speed Internet. The rapid response stream in particular will allow us to move forward with projects that are well advanced and shovel-ready as quickly as possible. With these projects, many Canadians will have improved service by November 2021. The impact of these projects will be felt quickly by Canadians living in rural and remote communities who do not now have access to high-speed Internet.

We will continue to provide Canadians with transparency on existing programs, like connect to innovate, and approved projects under the universal broadband fund. As to my hon. colleague's mentioning of Madsen and Shoal Lake 39, I am told that the remaining parts of those will be completed by the end of March.

My colleague, and any colleague in the House, can reach out any time. Our goal is to get all Canadians connected.

**The Deputy Speaker:** The hon. member for Spadina—Fort York has his hand raised. I do not know whether it is a question or a point of order. We do not take points of order during adjournment debate, but I will recognize the hon. member. Clearly, he has something he wishes to add.

The hon. parliamentary secretary.

**Mr. Adam Vaughan:** Mr. Speaker, it is a point of order. Because this is a virtual Parliament and because usually late shows are not governed by the same rules, the member opposite, who asked me the question, repeatedly interrupted me during my answer. I am sure that while the question will get a lot of social media replay, I have the equal right to have my answer uninterrupted. I would like to restate my answer to the question.

**The Deputy Speaker:** Unfortunately, we will not be able to permit that as this point. I have noted that this has happened on occasion when we have virtual proceedings in the House. We caution hon. members who are online not to use their online presence to

#### *Adjournment Proceedings*

heckle. The moment they do it cancels the signal to all other members who are joining online.

I note the hon. parliamentary secretary's complaint and concern about this and I will share with other Chair occupants going forward. Unfortunately, there is no process to permit points of order. In this case, I let him say his piece because I know we are in unusual and different circumstances here. We need to leave it at that for tonight. We will take his concern to heart and ensure we caution members about doing that very thing.

• (1845)

**Mr. Adam Vaughan:** Mr. Speaker, I appreciate the courtesy, and I wish the other member was just as nice.

[*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 6:45 p.m.)



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