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Speaker: The Honourable Anthony Rota



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HOUSE OF COMMONS

Monday, December 6, 2021

The House met at 11 a.m.

Prayer

GOVERNMENT ORDERS

• (1105)

[*English*]

CRIMINAL CODE

The House resumed from December 3 consideration of the motion that Bill C-3, An Act to amend the Criminal Code and the Canada Labour Code, be read the second time and referred to a committee.

Mrs. Karen Vecchio (Elgin—Middlesex—London, CPC): Mr. Speaker, this is my first opportunity to stand in this House of Commons in the 44th Parliament to deliver my speech. To begin, I would really like to thank all of the constituents of Elgin—Middlesex—London who re-elected me to come and be their voice here in Ottawa.

I am going to switch right into the debate today because it is a very important debate that we are having. Bill C-3 has been introduced. It has a lot of merit when it comes to some of the important efforts that we are trying to make. I will start by reading a quote that I read on Facebook. This quote is from September 13 and was posted by the London Health Sciences Centre.

“We are the people who deliver your babies. We are the people who heal your injuries. We are the people who help you live with chronic diseases. We have worked tirelessly through the pandemic to keep you safe.

The vast majority of Londoners have shown appreciation for our work and respect for our people. But a small minority has taken its protests to our hospitals, putting our patients, staff and physicians at risk.

While everyone has the right to free speech, our patients, staff and physicians have an equal right to seek and provide health care without harassment. We have important work to do to care for our patients. We have therefore enhanced security and are working with London Police Service to keep patients, visitors and staff and physicians safe during today's planned protests. We are closely monitoring this situation to ensure the continuity of patient care.”

I bring this forward because occurred in my region back on September 13, just days before the federal election. As COVID continued to grow, we continued to see these types of things. In Ontario, there were protests at 10 different hospitals that day.

The post was brought to my attention by Jason DeSilva, a friend of my husband. He was diagnosed with cancer, and thought, “What am I going to do?” When we see places like this and we are in pain and suffering and in critical illness, it is important to know that there is access to those types of buildings.

It was brought to my attention, and all I could think of were the people being impacted. I continued to read through all of the different comments. There were something like 968 comments, and I cannot even imagine the number of retweets. People were talking about this. Following that, there was a comment made by one of the patients, who said:

“Never ever protest at a hospital.

I've lived out the worst days of my entire life inside of a hospital when I needed health care workers the most.

I've had my insides cut apart, ovarian cancer painstakingly scraped out of my abdomen, multiple organs cut apart and stitched back together, a crushed femoral nerve as I took each step in agony to make it into the car for my long ride home after cancer surgery, all while wearing a diaper as my insides continued to bleed and leak.

Never ever protest at a hospital no matter how you feel about things right now. People going through the hardest days of their lives, and the staff that care for them, shouldn't have to deal with you. (There are other places to go if you feel you need to do that.)”

With this, it had “#beatcancer” and “#beagoodhuman”.

Another message that came from the post was this:

“Thankfully, my husband's appointment at the London cancer clinic was the next day.... Please know that the majority of people were appalled that such a protest would be carried out at any hospital...and we all know that the very people that showed up at this protest would be welcomed and treated with compassionate care in their time of any medical need at the very place where they protested...that's what makes it even more sad.... I hope they realize that this was a mistake and will never do this again....hank you to all our London hospitals for being there for us all.”

Government Orders

This has been a very trying time. When we talk about things like protests at hospitals, we all can agree that when someone is going to the hospital, in many cases it is their family and the individual who are driving. There is a great concern as they are driving there. Who knows what type of treatment they are going for? Maybe they are going to speak to a doctor to get a treatment plan, looking forward. Maybe it is cancer. Maybe they are having a new baby. Who knows what it may be? We recognize that this time is extremely stressful. Not being able to get into that type of facility is extremely concerning for so many people.

We can thank our health care providers. Throughout this pandemic and the last 20 months, we have seen the finest of the finest really step up. I think of the health care workers at the St. Thomas Elgin General Hospital; I think of the people at the London Health Sciences Centre and all across this great country, all of those people who stepped forward.

● (1110)

They heard there was a virus and a potential of being killed, and we saw health care workers put extra gear on and take extra caution. They served at the time when people needed them the most, when there was so much unknown and so much angst. Those people stepped up for us.

This is why I am so passionate in ensuring that those health care workers, who during the last 22 months have been there on the front line helping us, are not put in this situation. It is not fair to the health care workers, it is not fair to the staff who work there and it definitely is not fair to the patients and their families.

I also want to say it is not just those people who have helped us out. Across this country we have seen volunteers and organizations that have really stepped up. Because it is my first time being able to really talk about this, I want to thank my staff: Cathy, Jena, Scott, Jillian, Charli and Raghed. We really believe in service over self, and that is exactly what we see here. We see, in our Parliament, in our health care fields and in anybody who has stepped up during this pandemic, this service over self.

Returning to the debate on Bill C-3, I want to talk about a rational discussion, where we can recognize that we can have peaceful protests, but never lose critical services. The protests in London took place on September 13. I was going through the newspapers looking at those days and I was reminded of something. This is a quote from a London Free Press article on September 13, written by James Chaarani, “When asked why they chose to protest at a hospital,...the executive director of the London chapter of Vaccine Choice Canada, said it was a busy intersection and the group wanted to show support for health care workers. 'It's an opportunity for people of London to drive by this intersection and see that not everybody agrees with what the government is doing, and often our voice is not heard'”.

I am not here to try to debate whether they are right or wrong; that is not my choice for today. I recognize we have to look at the big picture. We have to look at what happens when this is critical infrastructure and what happens when this is going to have an impact on our people.

I would like to inform the House that I will be splitting with the member for Barrie—Springwater—Oro-Medonte.

These are ultimately critical times for families. I think about myself, because following this protest my mom fell ill. She fell ill two days before the election. It is very personal, because when I talk about the health of my mother, that is what always comes first to me. I apologize to my mom because I know she is watching today. When I went to see her that day, I thought she was dead. I walked in there and kept rubbing her to get her awake. When I finally got her awake, I called my sister who said to take her temperature. I called the MPP Jeff Yurek, who said to take her temperature. However, what I needed to do, ultimately, was get her to the hospital.

I wonder what it would have been like. I know what I am like. Anyone in this chamber, as well as anyone at home, knows the passion I have for my loved ones. I think about what would have happened to me personally and what would have happened to others, and I cannot even imagine being in that type of situation.

These are feelings that are very strong. I know that throughout Canada, protests continue to happen. It is important to have the right to protest, but there is a time and place, and when it comes to projects and people's health and safety, that is not the time to put people at risk.

I am going to quickly switch gears and talk about the other part of this, about extending health benefits for sick days to federally regulated employees. Here in Canada we have approximately 910,000 federally regulated employees, and the majority of them are here in our government. We know that there are 18,000 employers whose labour rights and responsibilities are defined by the Canada Labour Code, and these types of organizations include our Crown corporations, Canada Post operations, port service, marine shipping, ferries, tunnels, canals, bridges and pipelines.

I think it is very important, as we saw through this pandemic, that when we are sick we have the ability to take time off. It is very important that when we are looking at this we understand that, if somebody is sick, they do not go to work. We do need to have some sort of backup plan. I know in many of the federal government policies that there is time and space for that, but for others, not so much. I think it is a great opportunity to have this discussion.

● (1115)

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, we owe a great deal of gratitude to our health care professionals. In fact, thousands of people from Saskatchewan and Manitoba came to Winnipeg yesterday to witness the Western Semi-Final where the Bombers were very successful and prevailed in beating the Saskatchewan Roughriders. It is so encouraging to see my friend and colleague from across the way, the member for Regina—Lewvan, wearing a Bomber jersey, and if I could ask him a question I would.

However, to my colleague across the way, would she not recognize that this wonderful game took place yesterday because, in good part, of the health care professionals and the fine work that they did, and the fact that Canada is doing so well on full vaccination?

By the way, let us look forward to the Grey Cup next Sunday.

Mrs. Karen Vecchio: Mr. Speaker, that is the nicest question I have ever had from this member, but he has to remember that I am from Ontario, so “go Ticats”.

However, it is absolutely the case that, because of our scientists, health care workers and all of those essential services, we are able to be here today and that so many of our children are able to go back to school. I would like to thank each and every health care worker and everyone on the front lines throughout this pandemic.

Mr. Charlie Angus (Timmins—James Bay, NDP): Mr. Speaker, I think what is happening in Canada is deeply troubling.

We pride ourselves on our willingness to be good neighbours, that is who we are as Canadians, and yet we are seeing with the anti-vax protest a really disturbing rise in toxic behaviour. This past weekend in Edmonton, a mob attacked a children's store. What is with that? In my region, a small-town doc who was a hero to so many people shut her practice because of online harassment. We have had young mothers attacked at vaccine clinics in my region. I could never have imagined in a thousand years that a mother and her child would be attacked and shouted down by a mob for trying to keep her child safe.

We have legislation here for our frontline health workers, but I want to ask my hon. colleague about the larger level of toxicity and this kind of anti-science violence that we are seeing that is targeting families and people who are trying to get through a really difficult time.

Mrs. Karen Vecchio: Mr. Speaker, I believe all members probably went through the same thing throughout this election. In my riding of Elgin—Middlesex—London, unfortunately, one of my constituents is being charged for throwing gravel at the Prime Minister, and I should not say “unfortunately”, because he needs to be charged. This is just not the behaviour that gets things done. This is toxic behaviour, and it needs to be dealt with. Those are things that I do not support. We saw that type of temperament throughout the entire campaign in Elgin—Middlesex—London, and we had to be aware of it.

Safety of Canadians has to be first, and if we could get back to less divisive discussions and more of a willingness to work together, we would have a better country once again.

Mr. Dan Albas (Central Okanagan—Similkameen—Nicola, CPC): Mr. Speaker, some areas in my riding, such as the Kelowna General Hospital and the Penticton Regional Hospital, have been built up to the footprint of the road, and there is not a lot of space. Again, I am very supportive, as is the member, of freedom of expression and the ability to share one's political views regardless of what they are. We are a free and open society, but let us bear in mind that these particular infrastructures are not built for those kinds of protests.

Government Orders

I would like to hear whether the member has other examples of infrastructure where it may not be appropriate for people to utilize those spaces.

• (1120)

Mrs. Karen Vecchio: Mr. Speaker, any time we have critical projects that are going to be good for this country, we have to very cautious, and safety is one of those things.

It is interesting when we watch people who start to protest, because it can start off very soft and calm and then the next thing we know we have a person up in a tree throwing stones. This is about common decency. I wish people would recognize that when they want to have their voices heard they should do so, but just be respectful.

Mr. Doug Shipley (Barrie—Springwater—Oro-Medonte, CPC): Mr. Speaker, it is an honour to rise here today for my first speech in the 44th Parliament as the member for Barrie—Springwater—Oro-Medonte.

As this is my first time rising to speak during this new session of Parliament, I would like to use this opportunity to share my sincere thanks to my wife, Lisa, and my sons, Wyatt and Luke, for their unwavering support. I would also like to thank my campaign team and the many volunteers who selflessly gave countless hours of hard work, my dedicated EDA, and the residents of Barrie—Springwater—Oro-Medonte for once again placing their trust in me to represent them here in Ottawa. I am and will remain committed to working tirelessly on behalf of my community, both locally and in Parliament.

I am pleased to be speaking today to Bill C-3, an act to amend the Criminal Code and the Canada Labour Code.

Barrie—Springwater—Oro-Medonte is home to the Royal Victoria Regional Health Centre, also known locally as RVH. RVH is known as a place for receiving safe, compassionate, advanced care. It is a place of exceptional health care, led by an unwavering commitment to safety and quality. RVH was awarded accreditation with exemplary standing in 2019 by Accreditation Canada. That is the highest level of recognition awarded, and it is achieved by only 20% of Canadian health care organizations.

Among many other local, provincial and national recognitions, RVH has also received a gold quality health care workplace award from the Ontario Hospital Association for its continued focus on fostering a healthy and safe workplace that promotes a positive work-life balance.

The current president and CEO of the Royal Victoria Health Centre, Janice Skot, has led the health centre for 17 years and has recently announced her much-deserved retirement. I personally want to wish her the very best in her future endeavours. Alongside Ms. Skot are a visionary board of directors, an exceptional senior team and leaders, skilled physicians and nurses, compassionate volunteers and a supportive community.

Government Orders

Hospitals across Canada, including RVH, are places of healing. They are places where we face difficult days, seek treatment, and say hello and goodbye to loved ones. They are places of solemn solace and of beautiful beginnings.

My wife, Lisa, and I were thankful to welcome our two sons in the birthing unit of RVH. When my youngest son required immediate neonatal care, it was the wonderful health care workers of RVH who supported and cared for our family. During my son's 17-day stay in the neonatal intensive care unit, it was imperative that we had unencumbered and free access to the hospital throughout the day to provide our son with much-needed nourishment. I am pleased to say that over 16 years later and completely healthy, he will be graduating high school next year.

Hospitals should remain peaceful places for staff, patients, visitors and volunteers alike. I truly believe that harassment of our frontline nurses, doctors and health care workers is completely unacceptable. We all owe a huge debt of thanks to these frontline workers, who have been health care heroes both before and throughout this pandemic. They deserve unending appreciation and respect.

Unfortunately, this is not always the case. Katharine Smart, president of the Canadian Medical Association, said just last month that this past year, there has been an unfortunate escalation of hate directed towards the medical profession and all health care workers.

Linda Silas, president of the Canadian Federation of Nurses Unions, said that before the pandemic, 90% of nurses reported being exposed to physical violence at work, and during the pandemic, 60% of nurses reported that the level of violence had increased.

Shamefully, as recently as September of this year, staff, patients, visitors and volunteers were faced with a rally against COVID-19 restrictions, which took place outside of the hospital's doors. Regrettably, RVH was among the hospitals that were targeted.

Janice Skot, president and CEO of RVH, said the following in a statement:

People have a right to peacefully express their opinions, but these rallies in front of hospitals are disheartening, frustrating and offensive to health-care workers who have worked tirelessly throughout this gruelling pandemic.

While protesters lined our sidewalk opposing the safety measures intended to keep our communities safe, exhausted staff and physicians inside RVH continue working long hours under extremely difficult conditions, caring for sick patients—including those with COVID-19.

Skot went on to say that a crowd of largely unmasked protesters is also extremely intimidating for the patients coming to RVH to seek care. Dedicated health care workers should not be the target of angry protests. A global pandemic is a time when Canadians should, said Skot, “stand with our health-care workers, not protest outside the building in which they are doing heroic work.”

• (1125)

Since the pandemic began, RVH has cared for over 600 COVID patients. Skot says many of them have been critically ill and some have spent months recovering in hospital. Sadly, 98 have died due to COVID-related complications. She says, “Our employees and physicians have seen first-hand the tragic and heartbreaking im-

pacts of this virus, and RVH supports any effort to keep our patients, our team, and our community safe.”

Dr. Colin Ward, the chief of surgery at RVH, echoed Ms. Skot's concerns regarding Bill C-3. He said, “The last two years have been extremely challenging for the health care community as we have worked tirelessly to provide health care under difficult and sometimes heartbreaking conditions. We appreciate the efforts made by Bill C-3 to help protect both the patients and all of the workers who provide care for them.”

RVH was not the only hospital affected by these protests. Hospitals in Toronto, Ottawa, Sudbury and London were also targeted by protesters.

Our health care centres are essential infrastructure. Access to them must not be blocked for any reason. The staff delivering critical care in these centres must be allowed to access the resources required to deliver necessary life-saving care, without threats, intimidation or harassment. Jaime Gallaher, a Canadian emergency room nurse, shared her experience working as a nurse while protests were taking place outside of hospital doors. She said, “One of our patients actually passed away in emerge, behind a curtain with his family, which was gut-wrenching because that should never, ever happen. They had no privacy to mourn.” Ms. Gallaher also explained that the protesters could be heard in the ER and called the disruption “a slap in the face” to grieving families and patients in need of emergency care.

Likewise, Dr. Rod Lim, a pediatric emergency room physician in London, Ontario, had this to say about protests outside of hospitals:

The protests are demoralizing. There's a lack of common decency, to protest in front of a hospital, to delay people who are trying to get the care that they deserve. They have nothing to do with the protests, nothing to do with government policy, and they're being adversely affected. This is absolutely maddening.

As a past member of the Barrie area physician recruitment task force, I am aware how difficult it is to recruit medical staff. With current labour shortages, human resources teams are currently facing a very competitive job market, which is a challenge for recruiting new frontline employees. Vicki McKenna, president of the Ontario Nurses' Association, said, “Prior to COVID, we had hundreds of RN vacancies. That hasn't improved—it's gotten worse. RVH is no different than any other hospital; they have vacancies. It's tough out there.”

Government Orders

Having protesters outside of health care settings does not help this issue. I know freedom of speech is an important right for Canadians, but the foundational principles of Canada are peace, order and good government. When protests turn into blockades and threaten people's ability to access services critical to their lives, the government must appropriately step in, not to diminish or destroy our liberties, but to ensure that people are living to enjoy them.

The staff at RVH and at hospitals across Canada have been working tirelessly throughout this pandemic to care for our communities. Staff from RVH and other health care settings across Barrie—Springwater—Oro-Medonte spent their off hours during the pandemic staffing COVID-19 testing centres and vaccine clinics. They have risen to the challenge of supporting us through this pandemic, and they deserve our support, now and always.

Health care settings are not an appropriate place for protests that threaten patients' well-being, disrupt quiet recuperation or block access to much-needed medical services. Slowing down or not permitting health care professionals to gain access to their places of employment is completely unacceptable. We need to respect the health care heroes who have supported and cared for our communities before and throughout this pandemic and who will be there for us long after this pandemic.

[*Translation*]

Mr. Luc Thériault (Montcalm, BQ): Mr. Speaker, since I have not yet had the opportunity to do so, I would like to congratulate you on your appointment. I am sure that you will be up to the task of ensuring that the debates run smoothly.

I would like to hear my colleague's comments on something that I have been thinking about.

Does he not believe that, had the government not taken so long to bring Parliament back after calling an election ostensibly because there were things that had to be taken care of right away, we would not be here two months later dealing with a bill that covers two completely different areas?

Is it because the government is determined to pass two bills in one?

If the government had brought the House back right away after the election, about two weeks after, for example, then we could have been debating two different bills. With regard to the Criminal Code, the bill is redundant because the offences already exist.

● (1130)

[*English*]

Mr. Doug Shipley: Mr. Speaker, I will go one step further: We do not feel there should have been an election called in the first place. We should have remained here working throughout all of that, so yes, we should have been here working over the summer and much earlier in the fall. I agree that we could have been here dealing with this over many weeks prior to this.

Mr. Gord Johns (Courtenay—Alberni, NDP): Mr. Speaker, during the pandemic, medical health professionals were really clear that they wanted us to social distance and wash our hands, but they also wanted politicians to implement paid sick days and people to

get vaccinated. Here we are, 20 months later, and finally we have Conservatives and Liberals implementing paid sick days.

I think about the other health crisis that was happening previous to COVID, which is the opioid overdose crisis that is taking place in our country. Health professionals have been saying they want to see decriminalization and a safe supply as immediate first steps, and we need to listen to the sound advice of these health professionals.

Does my colleague agree politicians have failed in listening to medical health professionals and that we have lost lives as a result, whether it be by not implementing paid sick days or not implementing policies to address this overdose crisis happening in our country? I would like to hear his perspective on this.

Mr. Doug Shipley: Mr. Speaker, hindsight is 20/20 on a lot of issues. We can look back and say we failed on many things, but as long as we are trying to do our best, that is very important.

Speaking of the opioid pandemic, Barrie—Springwater—Oro-Medonte has been devastated by this. Right now, the City of Barrie is looking at opening up a supervised consumption site. I will take all information into account regarding that and try to make a proper decision, while keeping good words like the ones my fellow colleague mentioned today. I always try to get all the information I can together for making valid, true and honest decisions, and I will go forward that way. That is the way I have always tried to conduct myself, and I will continue to do that going forward.

Mr. Damien Kurek (Battle River—Crowfoot, CPC): Mr. Speaker, it is good to be able to enter into debate on this important subject today.

I have heard from a number of colleagues and a number of parties, who have raised concerns that this bill addresses two very different issues. Although both are very important to discuss and debate in this place, the fact is that they are quite different. One is related to protecting health care workers from being restricted from entering hospitals and whatnot, and then the other is regarding paid sick leave.

I am wondering if my colleague has any comments about whether these two distinct issues should be debated separately and if there is value in that to ensure it has the fulsome discussion required to make good policy that comes from this place.

Mr. Doug Shipley: Mr. Speaker, we sometimes have to deal with what we have been given, and they are together in this one so we will do our best to come together and deal with them. Hopefully, if and when they go to committee, they will be able to be dealt with properly.

We do have to look at what we have been given, and I concentrated more on the health care portion today. I am looking forward to getting that implemented. Knowing there is such a large health institution in my area that was given a very rough ride in the summer with protests, I am looking forward to seeing that get passed as soon as possible.

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Mr. Arif Virani (Parliamentary Secretary to the Minister of International Trade, Export Promotion, Small Business and Economic Development, Lib.): Mr. Speaker, I am glad to be speaking here in Ottawa from the unceded territory of the Algonquin Anishinabe people. My riding of Parkdale—High Park, which I am proud to represent in this chamber, rests on the traditional territory of the Haudenosaunee, the Wendat, the Métis, and most recently, the Mississaugas of the Credit. Toronto is now home to many first nations, Inuit and Métis people.

These past 22 months, it goes without saying, have been defined by the global COVID-19 pandemic. These past 22 months have also been defined by exemplary work on the part of health care professionals working extremely hard to keep all of us safe. The first thing I want to say in addressing Bill C-3 is a very heartfelt and sincere thanks to all health care professionals who have been doing so much for all of us in our time of need.

I am speaking of doctors. I am speaking of nurses. I am speaking of auxiliary health staff. I am speaking of researchers who have brought us vaccines. I am speaking of the people in my riding of Parkdale—High Park at St. Joseph's hospital, at the Parkdale Queen West Community Health Centre, at Four Villages and at Runnymede rehab. I am speaking of all of the countless nurses, practitioners, doctors and other health care professionals who call my riding home.

I am also speaking very personally about my wife and her team at the Public Health Agency of Canada. I have spoken about Suchita before. She has the distinct duty, during this pandemic, of being in charge of quarantine and border health controls for the Public Health Agency in all of Ontario and for the north. It is a critical job at the simplest of times, but during a pandemic it is a pivotal job for what we do and keeping all of us safe. I thank Suchita for what she has been doing consistently for the past 22 months.

All of these people deserve our appreciation, our gratitude and our respect, yet things have unfortunately been inverted in these last several months. Those who should have been receiving praise are receiving scorn. Those who should be empowered to keep us safe are being actively prevented from entering hospitals and clinics. They are sometimes being threatened, harassed or even assaulted.

It extends beyond just those who provide health care. It also applies to those who are seeking health care. Patients are being intimidated and prevented from entering some of these health care facilities. The impact is severe. Health care professionals feel they have gone from heroes to villains, and it is indeed demoralizing.

I will be sharing my time with the member for Sackville—Preston—Chezzetcook. We can tell it is a new Parliament because I am off my game.

I was talking about the impact. The impact is that health care professionals feel they have gone from being heroes to villains, and it is demoralizing. It is also an impact that has been borne by Canadians who are seeking to do the right thing in following public health guidelines, in accessing care to keep themselves and our communities safe. They are at the same time being vilified for daring to follow those public health imperatives.

How has it come to this? How have we gotten to this state of affairs in Canada in December 2021? There are those who have embraced the science behind COVID, the public health measures that are needed to help keep all of us safe, and the utility of vaccines in the fight against this virus. There are those who have not and those who challenge the utility of vaccines, science, scientists and all of the health care professionals who support these endeavours.

Let me be clear about one thing that is pivotal in this chamber of all places: the democratic right to disagree and to dissent. That is what freedom of assembly, freedom of association and freedom of expression mean as protected under section 2 of the Canadian Charter of Rights and Freedoms, which I had the privilege of defending for 15 years while I was a practising lawyer. That is the hallmark of any democracy, let alone this democracy.

There are and always have been limits to such expressive rights. There is an old legal adage that says a person has the right to swing their arm, but that right ends at my nose. The notion that it conjures up is that one's expressive rights end when they can cause harm to another individual. It encapsulates the idea that threats, harassment and physical assault have always been against the law and remain against the law in this country.

Through this important piece of legislation, Bill C-3, we are proposing to enhance these very protections, particularly in the case of health care workers and those who seek access to health care. With Bill C-3, we are proposing to take decisive action by amending the Criminal Code as well as the Labour Code. I am speaking today of the Criminal Code amendments.

The amendments to the Criminal Code would ensure significant consequences for those who use fear to prevent health care professionals from doing their jobs and for those who prevent patients from receiving such care. Bill C-3 would create a new, specific offence for intimidation of health care workers and those who seek health care, as well as an offence that would prohibit someone from obstructing a person from accessing health care facilities.

• (1135)

Individuals who intend to use fear to stop health care workers from performing their duties, or to prevent people from accessing health services, could be charged with this proposed new offence.

In the Criminal Code, aggravating factors are considered for sentencing. An aggravating factor would be added to require courts to consider more serious penalties for any offender who targets health care workers engaged in their duties or who impedes others from accessing health services.

Government Orders

A new sentencing provision would also be created that requires courts to consider more serious penalties. There would be up to a 10-year maximum, compared with the current five-year maximum in the Criminal Code, for offenders who target health care workers engaged in their duties or who impede people from obtaining health care services.

In precise terms, that is what Bill C-3 would capture. For those who are still skeptical, let me be crystal clear about what Bill C-3 would not capture. It would not capture peaceful demonstrations, or the right of health care professionals to protest to improve their own working conditions. Instead, it would protect such people from the unfortunate violence they are currently facing and would help to ensure safer workplaces than they have right now.

The freedom of Canadians to voice their concerns and protest in a safe and peaceful manner is critical, as is obviously the ability of health care workers to take labour action and organize themselves. That would be respected by these proposed changes in the criminal law, because a communication defence is being entrenched in Bill C-3. That would help ensure that there is a balance, as there has always been due to how the charter was designed in 1982. There would be a balance between the protections we need and the protection of the expressive rights of Canadian citizens, including the health care workers and those who would peacefully protest against them. That balance is the legislative change we need to see in this country, because what we are seeing unfortunately is an escalation of hate. Let us call it what it is. It is hatred directed toward these workers and those who would access their services.

The right to protest and to dissent is one thing, and as I have outlined it is critical. However, obstructing patients and health care personnel and trying to strike fear into their hearts and minds is something that cannot and should not be tolerated in this country in 2021. We have seen people getting in the faces of vulnerable patients who are trying to access care, yelling and spitting at them, or following health care professionals to their cars and vandalizing their vehicles. We have seen health care professionals targeted by death threats: those same health care professionals who are always working not only to keep us safe, but to keep us alive in this pandemic. These death threats, whether made in person or through social media campaigns, are designed to intimidate and frighten those people. It is an unacceptable state of affairs.

What I would inject in these final two minutes is that we are not just talking about COVID. When we talk about the health care apparatus, we have to think about all the health care services that are provided and not just those that address the pandemic. The impacts extend to all those who seek other medical treatments at hospitals and clinics across this country: those who rely on nurses, physicians and surgeons to perform things such as transplants, hip surgeries and knee replacements. The list goes on. Right now, those Canadians are being victimized by the type of escalating hatred we are witnessing around the country, because these surgeries are being delayed or cancelled outright because of the chaos being unleashed at health care facilities around the country. The result is that Canadians awaiting such surgeries are forced to wait that much longer, prolonging their pain and suffering. It is an untenable situation.

Health care workers have taken the Hippocratic oath. I am sure that 22 months ago, they thought they understood the contours of that oath to serve other people, to care for them and provide them assistance. That has been turned on its head over these past 22 months with COVID. I want to underscore this, and we have heard it from other speakers in this chamber: At this time in particular, these people deserve our gratitude, appreciation and respect. If I see somebody wearing scrubs in my riding, I have made it my personal mission to point them out, to stop them and ask them where they work and to thank them for what they are doing, because these people are always brave in the face of adversity. They are always selfless and devote extended hours to their craft. Now they need our support more than ever. That is what Bill C-3 would achieve, which is why I hope all members of the House can get behind this important bill.

• (1140)

Mr. Ziad Aboultaif (Edmonton Manning, CPC): Mr. Speaker, thank you for giving me my first opportunity to speak in the House since the election.

I would like to take this opportunity to also thank the health care workers who serve us all the time, and especially during this difficult time with COVID.

The hon. member said that Bill C-3 would provide a balance between the rights of people and the protection of health care workers, the facilities and so forth. Where does he see the bill strike that balance? Could the hon. member advise us on that?

• (1145)

Mr. Arif Virani: Mr. Speaker, I welcome my friend opposite back to the House and congratulate him on his re-election.

The balance is both in the legislation and in the Constitution. That is the twofold answer. The legislation entrenches a defence of communication, and communication for the sole purpose of expressing dissent in a peaceful format is entirely protected within the contours of this bill. It is also subject to what is called the “saving clause” in the charter. The charter has section 2 expressive rights that are protected, and the saving clause in section 1 allows for reasonable limits on such expression. That is the balance carved in the Constitution as it has been interpreted by the jurisprudence of our Supreme Court.

[*Translation*]

Mr. Denis Trudel (Longueuil—Saint-Hubert, BQ): Mr. Speaker, obviously no one is against apple pie. We are legislating this morning to put an end to the intimidation and harassment being faced by health care workers outside of hospitals. I think everyone agrees on the principle.

However, I am wondering why the government chose to talk about this this morning. We are in the midst of a global pandemic. Quebec's health care system, like those of the other provinces, has been gutted. There is not enough funding. We have been talking about the underfunding of the health care system for a long time.

Government Orders

The Bloc Québécois thinks it is time to reinvest massively in health to take care of people. Health care workers are leaving the health care system in droves because they are overworked. If we really want to take care of Quebec's health care workers, is it not time to do what the Bloc Québécois has been calling for and reinvest massively in health care?

The federal government is currently only paying 22% of costs. Should that not be raised to 35% to take care of health care workers?

Mr. Arif Virani: Mr. Speaker, I appreciate the question from my colleague opposite, and I congratulate him on being re-elected.

I would say it makes perfect sense to talk about this bill now. Earlier this fall, during the election campaign, we promised to start working on some of our priorities right away. One of those priorities was making sure we provide better protection to Canada's health care workers. We are keeping a promise we made.

I think my colleague's suggestion about health care system funding is a good one worth examining.

We support health care workers. We are always listening to them so we can help them and meet their needs.

[*English*]

Mr. Gord Johns (Courtenay—Alberni, NDP): Mr. Speaker, throughout the health crisis we heard from health professionals who said two really critical things. The first was that people should get vaccinated. The second was that governments should bring in paid sick days, so that people were not making the difficult choice of not paying their bills or going to work sick and spreading sickness to their colleagues. As a result of this, people actually died.

I think about the parallel health crisis that is taking place: the overdose crisis due to fentanyl poisoning. Medical health professionals have made it very clear that the first steps are decriminalization and safe supply.

Would my colleague support moving forward with his own Health Canada expert task force on substance use and support decriminalization, or is the government going to wait for more people to die? The government needs to take action. It needs to listen to the health professionals giving it guidance on policy, and it needs to take action on the steps that are recommended.

Mr. Arif Virani: Mr. Speaker, in terms of paid sick days, obviously we legislate in areas of our jurisdiction.

Many of the responsibilities the member has identified relate to the provincial level of jurisdiction. What we are doing for the federally regulated sector is offering 10 paid sick days, as promised. We are committing to that promise.

With respect to opioids, our perspective has always been with respect to safe supply, safe injection sites and meeting people where they are with a harm reduction model. That is the policy I will continue to advocate for.

[*Translation*]

Mr. Darrell Samson (Parliamentary Secretary to the Minister of Veterans Affairs and Associate Minister of National Defence, Lib.): Mr. Speaker, congratulations on your new role in the 44th

Parliament. I know it will be an unforgettable experience. I wish you four good years of service, assuming that is how it plays out.

• (1150)

[*English*]

I am very happy to speak to this bill. I feel it is a very important bill about peace, order and good government.

I am very pleased with the comments and questions by the opposition, as it is clear that all members of the House are looking at the bill as being an extremely important bill to move forward. We will be making amendments to the Criminal Code to protect health care workers and those who are accessing their services. I will speak at length about that as well. The second piece is the change to sick leave with the Canada Labour Code amendments, which would allow us to implement sick leave.

However, before I go into the bill in depth, I want to share with the House some comments about the pandemic. As my colleague said earlier, 22 months of a global pandemic have been challenging on every country in the world and have been challenging on every Canadian. It has been difficult not just for those who have had bad luck, but also for all of the families, friends and colleagues around them.

When I think back, I remember my dad telling me many years ago about the Spanish flu that hit Canada and the world between 1918 and 1921. That was a really big challenge. What has come out of all the pandemics we will talk about is, of course, the heroes: the health care workers, the individuals who have done their part and more to support Canadians and their neighbours, families and friends. This was crucial, and I want to talk about it a bit.

I remember my dad telling me that in our community, if someone was exposed to the Spanish flu, they could die within days. However, there were people in the community putting their life and their families' lives at risk to try to help their neighbours and friends. That by itself is just unbelievable. I cannot say enough about those individuals and the health care workers.

I also want to talk about polio between the twenties and the fifties. Most Canadians would have heard about polio as well. This was a global pandemic. We have seen and heard all kinds of stories on it, but I have a personal one to share, because as my mom would tell me often, my grandfather was a doctor and some felt he should have been able to do more. I am sure he wanted to do more, and that is one of the challenges.

Government Orders

My mom's brother, whose name was Leo Patrick, contracted polio, and contamination exposure could lead to death. Two people eating from the same spoon was noted as a possible transmission process. I remember my mom telling me that when she would feed her little brother, once in a while, because he did not want to eat since he was not feeling well, she would have a bite to show him how to do it. Then he would laugh and take a bite as well. I lost my uncle, whom I have never seen of course, but I remember the story from my mom like it was yesterday. She said for some reason she never got polio even though she had done things like sharing a spoon.

I guess the family always tries to keep life going to some extent, so one of my brothers is named Leo Patrick. They wanted to continue it, I believe, and he is a very special person as well. There are heroes everywhere in our country and in the world.

I read an article on April 20, 2020, of a lady in Halifax, Gloria Stephens. She was a nurse in Halifax at the Victoria General Hospital. She talked about her experience as a nurse, a job she did for 46 years, if members can imagine. There were similarities between polio and the global pandemic, and she shared some of them. I was really touched by that. She would wear a mask, a gown and gloves, and she would work 12 hours a day and then remove all of that clothing. When polio took place, similar to the pandemic, in some pockets of the country schools and playgrounds were closed. It brings us back to those times and also reminds us of our health care workers and what they have been through.

In April, May, June, July, August and September 2020, people were scared to leave their homes. They did not know what they were risking. However, every day, doctors, nurses and frontline workers would leave their homes and do their jobs. That is special, and those are the individuals I want to thank personally. It is one thing for them to risk their lives, but it is another thing when it is at a job they are doing every day where exposure could lead to greater difficulties for themselves and their families. It is just unbelievable.

I think about the people protesting and stopping workers from going into hospitals to help others and offer services, and even the individuals wanting to access health care and being unable to do so. This is unacceptable, and the bill would allow us to move forward. Intimidating health care workers or individuals who are accessing care is unacceptable. Obstructing their access is unacceptable. This bill deals with that.

We have also increased the sentencing to up to 10 years rather than five years, which is extremely important. I know there are lots of questions around the Charter of Rights and Freedoms, but again, there are places to protest, and doing it to health care workers and to people accessing health care is absolutely unacceptable.

In closing, on the 10 days of sick leave, people are asking if there is a link. There is absolutely a link between both parts of the bill, which touches on the Criminal Code and on the Canada Labour Code. The Canada Labour Code is about sickness during the pandemic, going to work and the possibility of bringing the illness to co-workers and colleagues in a department. That is not what we want. We want people to stay home if they are sick. By moving forward on this, we would ensure that the safety of Canadians is our top priority.

• (1155)

Ms. Elizabeth May (Saanich—Gulf Islands, GP): Mr. Speaker, I want to put on the record how strongly I support this bill and the Greens support this bill.

The hon. member spoke so movingly of the Spanish flu. I am named, actually, after my great-grandmother, who died in the Spanish flu epidemic. I am really concerned in the here and now with our nurses. I am concerned with health care professionals, and particularly the nursing profession, which is feeling beleaguered and unappreciated. We are losing nurses because we have not done a good enough job as a society to thank them and support them. This bill may be even more important for what it says to nurses across Canada about our respect and gratitude.

Does the hon. member have any thoughts on the current situation of nursing in Canada?

• (1200)

Mr. Darrell Samson: Mr. Speaker, exactly as my colleague said, this would be, in my opinion, one quick way of showing nurses and frontline workers that the role they play is important. We need to do this as a government to keep them safe and keep all Canadians safe. This is another indication of how we appreciate our health care workers.

[*Translation*]

Mrs. Julie Vignola (Beauport—Limoilou, BQ): Mr. Speaker, the bill before us today is important because it will protect health care workers as well as patients. The scope of this bill extends well beyond vaccination. For example, it will also cover intimidation that takes place at family planning clinics.

Nevertheless, intimidation is still a crime regardless of a person's status or job.

Why the hurry to specify that this applies to health care services now, especially considering that it should apply to everyone, everywhere, period?

Mr. Darrell Samson: Mr. Speaker, I thank my hon. colleague for her important question.

The bill we are introducing, Bill C-3, is meant to protect all Canadians. Yes, it targets the health sector for the moment, but we are talking about a bill that will help all Canadians. We need to ensure that no Canadians are subjected to intimidation, and we need to be there to protect everyone.

[*English*]

Ms. Lisa Marie Barron (Nanaimo—Ladysmith, NDP): Mr. Speaker, unfortunately, for almost two years workers have been forced to work sick. As is the case in many constituencies, in my riding of Nanaimo—Ladysmith many constituents rely on their wages to feed their families and keep a roof over their heads.

Government Orders

We have lost too many lives as a result of government inaction. Does my colleague find it acceptable to have forced workers for almost two years to report to work while unwell by refusing to provide them with the sick leave they need to keep everyone safe?

Mr. Darrell Samson: Mr. Speaker, I want to share with my colleague that in 2019 we moved forward on three-day sick leave and then we had the sick leave benefit. Here we are moving it to 10 days, so I believe we are doing exactly what she is proposing.

Mrs. Karen Vecchio (Elgin—Middlesex—London, CPC): Mr. Speaker, I am wondering if this legislation would help people who have contracts. Does it extend to people who have contracts with the Government of Canada, or would it be just the employees of the government?

Mr. Darrell Samson: Mr. Speaker, I had an opportunity to listen to my colleague's speech this morning, which I much appreciated. I know she does great work in the House, and I want to thank her for that.

My understanding is that federal employees are already getting these benefits. These would be for federally regulated employees, so this would be an extension. The objective of our government is to have discussions with the provinces and territories so that we can move forward with the private sector to find ways to support all Canadians so they have access to sick leave.

Mr. Chris Lewis (Essex, CPC): Mr. Speaker, I would ask that the House allow me to share my time with the hon. member for Mégantic—L'Érable. I also congratulate you on your appointment as Deputy Speaker. I think it is fantastic, and I think that you are doing a fantastic job.

We are here, and some of us have already spoken in the House, but some have not had the chance to yet. This is my maiden speech of the 44th Parliament, and it has been quite a journey over the past two years. It was also quite a journey just getting to this place last night. Many of us are probably going on two and a half or three hours of sleep, but we are here, regardless. We are tired, but we are here.

Before I get into Bill C-3, it is important that I thank a few people.

First and foremost, as I did in the 43rd Parliament, I thank my Lord and Saviour for the opportunity to serve Essex and for my health. Without my God, I would not be here.

I thank my family. Probably my greatest supporter is my mother, but she is also my biggest critic, and she is probably watching right now. I love my Mom and thank her for keeping tabs on me and for all that she does.

I also thank my wife. I am only afraid of three people in this world, and they are in this order: my Lord and Saviour, my wife and my mother. My wife, Allison, is probably not watching, as she is most likely taking care of Levi, our grandchild. However, I love Allison dearly, and I thank her for giving me the freedom and the opportunity to come here to represent Essex and do what I know in my heart of hearts is right. I thank her for the sacrifices she has made for this country along the way. I love her so dearly.

I thank my staff, who have been working tirelessly. They are tired, and have had two years of being tired, with hundreds of thousands of phone calls, emails and text messages. Each and every one of them is absolutely fantastic, and I thank them for serving our constituents so well.

I thank my colleagues, those I have grabbed dinner with in the House, and I do not necessarily mean just Conservative colleagues, but those across the aisle as well. They have made a difficult time a little easier and a bit more enjoyable, so I thank my colleagues. As well, I congratulate all those re-elected. I encourage those who have been elected for the first time to hang on because it is a lot of fun up here. They will be able to do some great things. I congratulate each and every member.

I thank our Hill staff. The onboarding during a pandemic, compared to the onboarding during normal times in Ottawa, was second to none. To our Hill support, for the onboarding process, I thank each one of them. I thank them for their sacrifice and for making our jobs a whole lot easier on the Hill.

Most important, besides my Lord, are my constituents in Essex for giving me the honour to serve them in their seat. It is not my seat. It is theirs, and I thank them for the honour. I thank them for sending me back to Ottawa, and I promise my devotion to each and every one of them.

Bill C-3 should also have a Bill C-3.1 because, in my opinion, it really should be two bills. The bill talks about harassment, which falls under the Criminal Code, and it also talks about labour, which falls under the Canada Labour Code. I will speak to harassment first, and then I will finish with the labour issue.

● (1205)

On the day of the election, I had an unfortunate accident when, just so the world knows, I fell off my horse. I was spending time with my wife, and I was a little more banged up than perhaps even she knew. Long story short, I went to the hospital in Leamington, the Erie Shores HealthCare. The doctors were second to none. The nursing staff was second to none. I have actually had meetings with the CEO of the hospital to try to advance this forward.

Then I went to the Windsor Regional Hospital. In a couple of months, I will go to get shoulder surgery. My orthopaedic surgeon is second to none.

I was a firefighter. I know what frontline service is all about. I am really blessed to say that my aunt Eva was nurse of the year on a couple of occasions. My mother was a nurse as well.

Government Orders

Before I jumped on the plane that finally got me here, after hours and hours, through no fault of Air Canada, I held onto my grandchild, Levi, for about an hour. As he slept there so peacefully and innocently, I thought about this debate today and the influence I could have to leave the world a better place than I found it. I thought about what I could do for Levi today to ensure that he comes into a world that has less hatred and less harassment, and that respects all genders and respects our frontline workers.

I am excited about the harassment side of Bill C-3. It is something that we, as a generation, have perhaps lost a little focus, or perhaps a lot of focus, on. I also think, to a greater extent, that we all, in this place, agree with. That is something very monumental.

I am also a freedom fighter. I believe in the freedoms of Canadians. I believe that Canadians have the right to voice their opinions. I believe they have the right to protest. I also know that with that freedom comes nothing less than responsibility. What is absolutely vital, right now, is that people are not shamed into doing something against our frontline workers who are ultimately taking care of our parents and grandparents and, in my case, me. We need to give them full access and full support. It is absolutely not acceptable for the folks in this profession to have anything less than this House's support.

With regard to the Labour Code, in my capacity as deputy shadow minister for labour, I am very happy to be able to stand here and speak to this today. I started my speech saying that many of us are tired. I can only imagine how tired our frontline workers are, the ones who get us on the planes, our air service personnel and the ones who get us here on Via Rail. They are not only tired physically. They are also tired mentally. This is to ensure there is a floor of 10 days, but many of these companies already have more than 10 days, so quite frankly it would not affect them.

They also deserve nothing less than this House's support. We are all tired. I am not saying that from a function of, "Oh, boo hoo. Chris had to spend some time on a plane." No, I am saying that as a country, as a world, we are tired. Now is the time to bring the support forward, whatever that support looks like, and ensure that it gets done.

Rest assured, Conservatives will certainly be here for labour. Conservatives will be here for physicians, nurses and support staff. I am very proud to be back in the House. I thank Essex for sending me back to this place.

● (1210)

Ms. Lori Idlout (Nunavut, NDP): *Uqaqtittiji*, in Nunavut, we do not have much access to health care. We only have one hospital for all of the 25 communities, so the rest of the 25 communities have to get health care services through health centres. Not many of them have doctors. Most have health nurse practitioners.

A lot of the patients from Nunavut, when they are looking to access the same level of health care as everybody else in this room, just as the member spoke so eloquently about before, they have to go on medical travel and be sent to places like Ottawa, Edmonton, Winnipeg or Yellowknife. When these strikes are happening in these other major centres, they are also impacting patients from my constituency, so this is an important issue for me.

Knowing health care professionals in the south are being impacted by protests and are not being able to take up to 10 days of paid sick leave is a great concern. Does the member agree it is time for a 10-day paid sick leave?

● (1215)

Mr. Chris Lewis: Mr. Speaker, that is a dynamite question.

Just yesterday WECHU, the Windsor-Essex County Health Unit, and I believe this to be true, was the first in Canada to come down with more restrictions for Windsor and Essex, which is a very sad thing.

The Erie Shores HealthCare I was speaking of earlier is actually pleading with people to go to a different area to get care if they can do so. It is brimming and flowing over the top.

All of Canada, quite frankly, deserves to have proper health care and proper physicians. We need to ensure we put the proper guards in place to make sure everybody is dealt with equally. I really hope, for the member's sake, the situation in her riding gets better.

Mr. Ziad Aboultaif (Edmonton Manning, CPC): Mr. Speaker, I congratulate my friend from Essex on his re-election.

What I heard in his speech was a message of unity dealing with the challenges we are all facing together as a country. If he could somehow elaborate on that, it would be great.

Mr. Chris Lewis: Mr. Speaker, my hon. colleague nailed it. It is exactly what I am talking about.

I congratulate my colleague on the fantastic outreach he does, not only in Canada, but also across the world. I thank the member for that.

Absolutely, if there was ever a time for unity, a time to rally the troops, or a time to pull together and stop the divisiveness, now is the time. That is our responsibility. It is one of the things we can actually bring to our country through this House. With his help, we will all endeavour together to ensure that takes place moving forward.

[*Translation*]

Mr. Mario Beaulieu (La Pointe-de-l'Île, BQ): Mr. Speaker, congratulations on your re-election, as well as your appointment to the chair.

Bill C-3 does not really change much. The offences in question are already covered by the law. As stated earlier, intimidation is illegal everywhere, and this bill simply reiterates that. It seems that Bill C-3 is really more about creating the perception that the government is doing something on the health care file.

Government Orders

However, there is something far more important the government could do, namely, restoring health transfers and increasing them to 35% of total spending, as Quebec and all Canadian provinces are calling for. What are my colleague's thoughts on that?

[English]

Mr. Chris Lewis: Mr. Speaker, at the end of the day, it kind of goes like this: If there had not been a \$600-million election, which nobody wanted, we would be in committee discussing these things, and we would be moving this agenda forward. Unfortunately, that has not happened. I would strongly suggest we get back to committee, back to the business of the House. Then we could perhaps address many of the things my hon. colleague has brought up.

* * *

BUSINESS OF THE HOUSE

Mr. Arif Virani (Parliamentary Secretary to the Minister of International Trade, Export Promotion, Small Business and Economic Development, Lib.): Mr. Speaker, there have been discussions among the parties and if you seek it, I think you will find unanimous consent for the following motion:

That, notwithstanding any Standing Order, special order or usual practice of the House, at 4 p.m. on Tuesday, December the 14th, 2021, the Speaker shall interrupt the proceedings to permit the Deputy Prime Minister and Minister of Finance to make a statement followed by a period of up to 10 minutes for questions and comments; after the statement, a member from each recognized opposition party may reply for a period approximately equivalent to the time taken by the minister's statement and each statement shall be followed by a period of 10 minutes for questions and comments; after each member has replied, or when no member rises to speak, whichever comes first, the House shall adjourn to the next sitting day.

• (1220)

The Deputy Speaker: This being a hybrid session, all those opposed to the hon. member moving the motion will please say nay.

Hearing no dissenting voice, it is agreed.

[Translation]

The House has heard the terms of the motion. All those opposed will please say nay.

Hearing no dissenting voice, I declare the motion carried.

(Motion agreed to)

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CRIMINAL CODE

The House resumed consideration of the motion that Bill C-3, An Act to amend the Criminal Code and the Canada Labour Code, be read the second time and referred to a committee.

Mr. Luc Berthold (Mégantic—L'Érable, CPC): Mr. Speaker, this being December 6, I will take a few moments to acknowledge the anniversary of the awful tragedy at Polytechnique Montréal where 14 young women lost their lives.

It is important to always take a few minutes on this day to reflect on what happened at the time and what continues to happen in our society. Violence against women still exists, now more than ever. Taking the time to commemorate this horrible tragedy makes us look at the present to see what has been done and what we are doing at home, in our neighbourhoods and across the board to ensure

that such things never happen again. This includes small gestures when a man or a woman is in an unacceptable domestic violence situation. Women tend to end up vulnerable, without resources and without help, because they simply do not have the means and the necessary resources at hand to report and flee domestic violence.

I want to give everyone, especially the women in my riding, the phone numbers they can use if they find themselves in a difficult situation. In the Appalaches RCM, the La Gîtée shelter can be reached at 418-335-5551. In the Granite RCM, people can contact La Bouée at 819-583-1233. I commend the women in the Granite RCM who are marching today to speak out against violence against women and to advance the cause. In central Quebec, the La Volte-Face women's shelter can be reached at 819-795-3444. Anyone in need anywhere in Quebec can contact the domestic violence service SOS Violence Conjugale at 1-800-363-9010.

Resources are available, and people are there to help. It is just a matter of getting to a phone to ask for help. This is something each and everyone one of us should be more conscious of.

I also want to address Canadians who are currently living with domestic violence. Far too often, these people are overlooked or ignored, and others act as though nothing is going on. There has been an unusually high number of femicides since the beginning of the pandemic, and this trend is continuing. If every one of us took the time to recognize what is going on, to do something and to try to help people who are dealing with violence against women, we could surely make a difference and potentially prevent someone from becoming a victim. Anyone could be a victim at any time, in any place, because others turn a blind eye and pretend as though nothing is going on.

I wanted to say a little something given that today is December 6. It is extremely important and is directly connected to the bill we are debating today. This bill would provide meaningful protections against intimidation and harassment of health care workers. This type of intimidation has no place in our society.

The Thetford police force has released its 2020 annual report, and I bring this up because we will be calling on police officers to enforce a law that would eliminate or reduce instances of harassment of health care workers, essential workers and our guardian angels who have been there for us since the beginning of the pandemic.

• (1225)

The police are very aware of the situation and the problems, and they too wish they had the means to intervene. For example, they intervened 315 times in situations involving people with mental health issues, which is an increase of 17% from 2019 to 2020. Even though the number of suicides and attempted suicides decreased by 3% in the region during the same period, police expect an increase in this type of intervention in the coming weeks and months, as indicated in the report.

These police officers have been there from the beginning. I think we should spare a thought for them, as they will have to enforce these laws and implement these measures, while respecting people's right to protest peacefully.

Looking at everything that has happened since the beginning of the pandemic, many of our health care workers, our guardian angels, shared with us that they were exhausted dealing with an illness that they knew practically nothing about. They were not sufficiently protected and feared for their family members and friends. They also had to work overtime, sometimes 16 hours straight. It was extremely exhausting for all health care workers.

As the situation evolved, we unfortunately saw more and more people protesting against these very workers who were putting their heart and soul into trying to save people, our neighbours, our uncles, our aunts, our grandmothers and grandfathers from this horrible virus, which has been gripping our society since March 2020. That is on top of the stress at work caused by this unknown virus and professional burnout. I think it is about time that the government intervened to protect and, above all, to recognize these workers.

I, too, want to recognize the entire profession. I am thinking of the nurses, who have done an extraordinary job and who are also stretched thin. It is not only them, however; I am also thinking of the orderlies and the support staff. I am thinking of those who disinfect our hospitals. We do not often talk about them, but they are directly on the front lines of the battle against COVID-19. I am thinking of the administrative staff who are there to greet us in hospitals and who surely have also had to go through a very difficult time. I am thinking of the lab technicians who handle this virus to determine which of us have come into contact with it.

All these individuals deserve the respect and, most importantly, the protection of the government and fellow members of the public. They should not be harassed or threatened. I am thinking of the dedicated physicians and specialists. I am also thinking of the child care workers who, in taking care of our children, must also deal with the additional stress of the pandemic every day, because young children do not have access to vaccination and are a potential target of this accursed virus, even though its effects on them are not as serious.

I am thinking of teachers, of police officers, whom I mentioned earlier, and of paramedics and social workers, who also have to go out and see a lot of people because of mental health issues. At the very least, all of these workers should be protected by their government against harassment and intimidation.

Government Orders

For these reasons, I will certainly support this initiative, especially since it was included in the platform proposed by the member for Durham, the leader of the official opposition, during the last election campaign. He wanted to introduce a bill to protect critical infrastructure, including in health care.

I am also doing this for my daughter, who is currently studying to be a nurse. She has the calling and the drive, and she wants to help and to serve. I think that we should support and encourage her, not discourage her.

• (1230)

Mrs. Julie Vignola (Beauport—Limoulu, BQ): Mr. Speaker, I think that we agree on how important it is to protect the full complement of health care workers, including orderlies and custodians, as my colleague was saying. These people are extremely important. It is unacceptable that these workers are being harassed when all they want is to do their job.

However, Bill C-3 has another part to it, namely 10 days of paid sick leave for federally regulated workers. My colleague has not said anything about this, and I would like to know what he thinks.

Mr. Luc Berthold: Mr. Speaker, I would like to reiterate that, for the benefit of all health care workers, this bill must be passed, yes.

The government also wanted to include in this bill 10 days of sick leave for federally regulated workers.

During a pandemic like the one we are going through, all workers, not just those under federal jurisdiction, should have access to sick leave and whatever else they need to help them continue working, take care of their families, and, most importantly, take care of themselves.

[*English*]

Mr. Dane Lloyd (Sturgeon River—Parkland, CPC): Mr. Speaker, my grandmother works at the hospital. We have seen the intimidation during these protests. Could the member speak to the importance of ensuring that we stand behind our health care workers during this very difficult time?

Mr. Luc Berthold: Mr. Speaker, that is a very important question. They are counting on us to do the right thing, to protect them from the bad attitudes we see in public sometimes. If we are not there for them, how can we count on them to protect us and take care of us? I totally agree with my colleague that we need to do what we can to achieve the goal of protecting them from the bad behaviour that we see are seeing in our society.

Ms. Elizabeth May (Saanich—Gulf Islands, GP): Mr. Speaker, I want to ask my colleague a larger and broader question. I think we can all agree that we need to ensure that our nurses, our health care professionals and all frontline workers know how grateful we are and how much we support them.

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Does the member have any reflections on what it says about us as a society that anyone would attack nurses, or try to block them or ill patients in an ambulance from making it to a hospital? What on earth has happened to us? I cannot believe we need a bill like this, even though I recognize we do.

[*Translation*]

Mr. Luc Berthold: Mr. Speaker, I thank my colleague for her question. However, I would need more than 30 seconds to try and analyze our current society.

I will therefore go back to what I was talking about at the very beginning of my speech, namely, violence against women, which is still happening in our society today.

Despite tragedies like the one at the Polytechnique and the fact people are talking more and more about this type of violence in the media, it seems that some still suffer from this hard-to-treat disease.

Society needs to address this and find ways to protect victims. Most importantly, we also need to work to prevent this from happening, before women become victims.

There are groups that work to prevent violence, and some focus on abusive men. These men have access to certain resources, but they must first recognize that they need them.

It all comes back to what I said earlier. Each of us has a duty to go see our neighbours and let them know what resources are currently available. We must no longer turn a blind eye, but rather take action and direct these individuals to the appropriate resources.

• (1235)

Hon. David Lametti (Minister of Justice and Attorney General of Canada, Lib.): Mr. Speaker, this is my first time rising in the House since the election, so it is my turn to thank the voters of LaSalle—Émard—Verdun for placing their trust in me for the third time. I will do my best to represent them as their MP.

I would also like to draw everyone's attention to the fact that today is December 6. As a Montrealer, a Canadian and a Quebecker, the memory of what happened in Montreal on December 6 never fails to move me. Fourteen young female engineering students lost their lives. I will do my best to make sure nothing like that ever happens again.

[*English*]

I am pleased to speak at the second reading debate on Bill C-3, an act to amend the Criminal Code and the Canada Labour Code, which I introduced alongside the Minister of Labour last week. I will focus my remarks on the Criminal Code amendments contained in the bill.

I am proud of Bill C-3, but I will be honest. I am disappointed, as was the member for Saanich—Gulf Islands a moment ago, that we are having to propose criminal law reforms to explicitly protect health care workers and patients against intimidation and obstruction.

Since the start of the global pandemic 20 months ago, the health sector in Canada has faced unprecedented challenges. Health professionals have been working relentlessly and under extraordinarily

difficult circumstances to save lives. A Statistics Canada survey revealed that seven in 10 health care workers reported worsening mental health due to the pandemic. However, that is only part of the story.

On top of the strain on mental health, our health professionals are also facing violence in the workplace.

Dr. Katharine Smart, president of the Canadian Medical Association, told Canadians, during a news conference on this bill, that preliminary results from the 2021 National Physician Health Survey suggested that three out of four physicians had experienced intimidation, bullying and harassment in the workplace. She went further to say, “one in three say that this happens regularly. This number jumps to 80% of female physicians.” These numbers are telling me a deeply disturbing story, especially when we look at the impact on people who identify as female in the health profession.

[*Translation*]

Most Canadians have shown tremendous respect for our health care workers and have followed the guidance of public health authorities. Unfortunately, a small number of individuals refuse to believe the authorities or follow evidence-based public health measures. An even smaller group has even uttered threats, including death threats. These people have also committed acts of violence against health workers who were simply doing their jobs by providing essential care to Canadians.

Violence against health care workers is a long-standing problem. Ever since the pandemic hit, health care workers have expressed concern about their ability to keep doing their jobs. Some have even been forced to quit. Moreover, people who need health care services have expressed similar concern about their ability to keep accessing health care facilities safely.

I cannot stress enough how disappointed I was to learn of this behaviour. There is simply no place in Canada for such conduct, and we will not tolerate it. The ability to express ourselves and to protest what we do not believe is right is a cherished freedom in this country, but Canadians understand the difference between expressing our views and threatening those we disagree with.

• (1240)

[*English*]

We have seen the consequences of this abuse. For example, Dr. Gretchen Roedde of Latchford, Ontario has decided to retire early due to online abuse. This small town could lose a doctor because of this kind of behaviour.

Shockingly, this abuse and harassment even extends to children. Nolan Blaszczyk, a seven-year-old boy, faced a torrent of verbal abuse when he went with his mother to get his vaccine. Abby Blaszczyk was told that she was murdering her son and she was committing genocide. How is this acceptable?

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[Translation]

As everyone knows, the Criminal Code includes a broad range of general offences to protect all Canadians. The Criminal Code already prohibits some of the despicable behaviour we have seen over the past year, including assault, criminal harassment, intimidation and threats. Today we see just how urgent it is to go even further.

[English]

Enhancing these existing measures by explicitly prohibiting this conduct in the health care sector has become necessary and urgent.

During the recent election campaign, as COVID-19-related protests began to intensify around health facilities, the Prime Minister committed to protecting our health care workers and ensuring all Canadians had access to health care without fear of threat or intimidation. The measures introduced in Bill C-3 would fully address these commitments and ensure a broad range of responses to various forms of harmful conduct facing the health sector.

The bill would create two new offences specific to the health context.

First, a new intimidation offence would be enacted to protect both health workers and health seekers. Intimidation is already criminalized as a general offence, but these amendments would give police and prosecutors additional tools to specifically protect our health care workers and users. Furthermore, they would provide for a higher maximum sentence for intimidation of 10 years. The current intimidation offence carries a maximum sentence of five years.

This new offence would extend to health care workers similar protections to those justice system participants, people like judges, jurors, witnesses, as well as journalists who report on organized crime. Intimidation is treated as a more serious offence when committed to impede them in their important functions.

That specific intimidation offence was created in response to a series of incidents in which prosecutors, witnesses and others were intimidated by criminal organizations to destabilize the criminal justice system. Similar to what we are doing now, Parliament's response then was to enhance criminal law protections for such intimidation with a distinct offence and an enhanced penalty. It is important to protect those who are working to improve our country, whether through the health care system or legal system.

The new intimidation offence would prohibit any act intended to promote fear in health care professionals in order to stop them from performing their professional duties. As noted above, this includes health care professionals working at abortion clinics, other frequent target of threats and intimidation. Anyone who works to assist health professionals in the performance of their duties would also be protected by the intimidation offence. Depending on the circumstances, this could be a professional support worker or clinic staff working alongside a physician or nurse.

It takes a community of health workers to deliver health services in our country, so those who assist health care professionals in carrying out their duties are rightly covered by this offence.

[Translation]

The proposed offence would also protect anyone seeking or receiving health care services. Any behaviour intended to incite fear in individuals seeking health care services, for the purpose of dissuading those individuals from obtaining services, would be expressly prohibited.

Creating this new offence will also allow us to increase the maximum penalty for this behaviour. The new offence will be a hybrid offence and will carry a maximum penalty of 10 years in prison, on indictment. This is a harsher penalty than the general offence of intimidation, which is five years.

Increasing the penalty in this way sends a very clear message that Parliament strongly condemns these forms of behaviour directed at the health sector.

There is another point that I want to be very clear about. The proposed intimidation offence can be committed in person or through electronic means, including social media and other online channels. Media outlets across the country are reporting that health care providers are being threatened and intimidated on social media. Medical associations, including the Canadian Medical Association and the Ontario Medical Association, have confirmed that threats and intimidation are occurring not only in person, but also online. The offence of intimidation would apply regardless of the means of communication.

• (1245)

[English]

In addition to protecting the heroes in the health care sector, the bill also creates a new offence that would prohibit intentionally obstructing or interfering with a person's ability to access a health facility. The offence would protect access to any and every place where health services are provided, including a hospital, a mobile clinic, an abortion clinic, a vaccine clinic, a doctor's office and even doctors' homes if that is where they provide their services. This new offence is hybrid and will carry a maximum penalty of 10 years of imprisonment.

I want to be very clear about one thing. Nothing in the proposed legislation would undermine workers' ability to strike or Canadians' ability to peacefully protest. Our government stands by the charter and the freedoms it guarantees, including freedom of speech and the right to strike. That is why this offence would expressly exclude communicative activity that remains peaceful and lawful, such as strike action or peaceful protest, even if it has a minor impact on access. Minor inconvenience for those seeking to get into buildings is a fair price to pay to protect our cherished liberties, but behaviour that is threatening or violent or that creates a major impediment to access is rightly criminalized. This is the current state of our criminal law and the bill would only enhance that.

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The legislation provides for a definition of “health professional” to clarify the scope of the offences and how they are intended to be applied to police and prosecutors. A health professional would be defined as a person who is entitled, under the laws of a province or territory, to provide a health service, such as doctors or nurses. Given that the provinces and territories are responsible for the health sector and regulation of health professionals and services, the definition is intended to be broad and capable of being applied in accordance with each jurisdiction’s health system.

[*Translation*]

I would now like to talk about the sentencing reforms in Bill C-3. These changes address the concerns that health professionals have had for a while now, and, in fact, parliamentarians from all sides have presented similar reforms in the past through private members’ bills.

The bill would require that, in cases where there is evidence showing that the offence was committed against a health care provider who was carrying out their duties, sentencing courts treat this evidence as an aggravating factor. Aggravating factors will also apply if the offence involved impeding another person from obtaining health services. Individuals on both sides of our health care system must be protected, meaning health care providers and their patients.

Support workers, also referred to as orderlies, are also vulnerable to violence in the workplace. Even though they are not regulated in many regions across the country like health professionals are, they still provide care and essential support to many Canadians. Therefore, the aggravating factors proposed in this bill expressly include personal care services.

• (1250)

[*English*]

These sentencing reforms are based on long-standing calls from stakeholders. Indeed, during our news conference following the introduction of the bill, the presidents of the CMA and the Canadian Federation of Nurses Unions affirmed the importance of these measures to our health workers.

The aggravating factors also implement a recommendation of the 2019 report conducted by the House of Commons Standing Committee on Health entitled “Violence Facing Health Care Workers in Canada”. The report requested the Government of Canada amend the Criminal Code to require a court to consider the fact that the victim of an assault is a health care sector worker to be an aggravating circumstance for the purposes of sentencing. The same report documented that health care workers have four times the rate of workplace violence than any other profession, despite most of this violence being unreported due to a culture of acceptance.

While the pandemic has created new challenges for health care workers and exacerbated the violence they face, as I mentioned before, those who provide abortion services and the women who access them have also experienced unacceptable threats and violence. It was not so long ago, in the 1990s, that several physicians in Canada were shot because of their work providing abortion services. Abortion clinics have been attacked and blocked. Those seeking abortion services have been harassed, threatened and intimidated by

individuals opposed to abortion. The safety and security of abortion health care workers and patients continue to be a troubling issue. Our government will protect abortion service providers alongside other health professionals. We support the rights of women to control their bodies and have unimpeded access to abortion services along with other health services.

[*Translation*]

I hope—like all members here today, I am sure—that health care workers will one day be able to do their jobs free from violence and can feel safe and valued when they are caring for us. The pandemic is not over, as we know, and neither is the need to protect our health care workers.

These workers play a very important role in the lives of all Canadians. Thanks to them, we have been able to fend off this devastating pandemic and make recovery plans for our society and our country. The proposed reforms will enhance existing measures in the Criminal Code and they have broad support within the medical community. For these reasons, I urge all members to support Bill C-3, which is urgent, important and necessary.

[*English*]

Mr. John Barlow (Foothills, CPC): Mr. Speaker, I appreciate the fact that the minister was talking about the importance of these protests in that we need to protect the rights of Canadians. I could not agree more. My private member’s bill, Bill C-205, went through the parliamentary process in the last Parliament, made it very close to the finish line and was about protecting the rights of farm families and ranch families from protests on farms and on their properties.

When we talk about the rights of Canadians, I think that goes both ways. I was honoured to have the support of the Liberal Party at committee as well as having the agriculture minister be in support of that initiative during the election.

I am wondering if the justice minister will also support Bill C-205, if I am able to bring it back this Parliament.

Hon. David Lametti: Mr. Speaker, it is always wonderful to field a few pucks from the hon. member’s part of the House.

We were open as a party in the last Parliament, as the government in the last Parliament, to that bill. While I cannot commit as a minister of my cabinet to doing that right now, I can assure the hon. member that we will be open.

There is a general protection, as the hon. member knows, against intimidation and violence, which I mentioned in the course of my speech. It carries a five-year penalty. We have taken specific measures in the judicial sphere, we are now proposing to take specific measures in the health care sphere, and I would assure the hon. member that we would be open to considering this measure in other places and spaces.

[*Translation*]

Mr. Luc Thériault (Montcalm, BQ): Mr. Speaker, the Quebec government did not wait for the Liberal government to pass a law to deal with these types of protests held near institutions. That said, I would be remiss if I did not remind my distinguished colleague of the reason why we find ourselves discussing Bill C-3 about two weeks before Christmas.

Earlier, the government referred to the 2019 report from the Standing Committee on Health on violence faced by health care workers. The report, issued two years ago, pointed out that seven out of 10 workers were experiencing deteriorating mental health. The fear and intimidation is only going to worsen their situation if they return to the system.

We are clearly in favour of the principle of such a bill. However, why do we find ourselves today with a government that called an election, dragged its feet on recalling Parliament after the election, and consequently delayed other very important bills, in particular the bill in memory of Émilie Sansfaçon, which sought to give people with cancer up to 50 weeks of EI sickness benefits?

This also had an impact on the work of the Special Joint Committee on Physician-Assisted Dying. It had one year to submit its report, but it will have barely four months to discuss such a critical issue. Does my colleague not find it hard to be part of a government that puts off critical and important problems like these?

• (1255)

Hon. David Lametti: Mr. Speaker, I thank my hon. colleague for the question. It is always a pleasure to work with him on different projects, including on medical assistance in dying.

In a democracy, it is always important to canvass the people directly. That is what we do when we have an election. We have a Westminster parliamentary system, and it has been working well for Canada and the provinces for years. Elections are part of that system.

I can assure my colleague that we will work hard on Bill C-3 and on all of our common goals in other areas, such as medical assistance in dying, which we want to improve by taking another look at what we did in 2016 and 2020. I can assure my colleague that we are here to work together.

[*English*]

Mr. Peter Julian (New Westminster—Burnaby, NDP): Mr. Speaker, as the Minister of Justice knows, the NDP is supportive of the principle of protecting health care workers, and the member for Burnaby South, the NDP leader, and the NDP caucus have been the strongest advocates for the 10 days of paid sick leave in Parliament. We fought to have the temporary sick leave program brought in. The government implemented that badly, I think it is fair to say. In

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this bill, although we support it very much in principle, there are two weaknesses that need to be addressed.

First off, in terms of protecting health care workers, there is no amendment that has been accepted by the government that would explicitly protect legal union activities from the risk of prosecution under the new Criminal Code amendments. Then, in terms of paid sick leave, as members know, we actually would have a delay, even if the program in the bill is implemented, that would mean that the first day of paid sick leave would take over a month for a person to access, and it would take 11 months for a worker to access the 10 days of paid sick leave that are so important to protect the worker, the family and also to protect the public.

Will the government explicitly say that it will accept those amendments at committee stage?

Hon. David Lametti: Mr. Speaker, with respect to the question on sick leave, I will defer to my colleague, the Minister of Labour, who I believe spoke in this place on Friday, to work with members of the opposition, with respect to making sure the bill is in a satisfactory form to achieve the goals we have in common.

With respect to the Criminal Code amendments and the right of labour to organize, I would like to assure the hon. member that we actually crafted the bill with the language from the jurisprudence in the cases that explicitly protect a worker's right to picket, go on strike, organize and express their political and social views in that format.

Of course, I am open to working, if there is a way to make the language more precise, but we do feel we have taken the actual wording from the cases that enshrine this right.

Mr. Yasir Naqvi (Parliamentary Secretary to the President of the Queen's Privy Council for Canada and Minister of Emergency Preparedness, Lib.): Mr. Speaker, I want to thank the Minister of Justice along with the Minister of Labour for bringing forward this very important piece of legislation.

I think a lot of us can recount horrible incidences that we saw during the peak period of vaccination, when our hospitals that are so critical for the health and well-being of our communities were being picketed by individuals who were just trying to prevent people from getting access to medical care. In my riding of Ottawa Centre, where the Civic Hospital is located, we saw picketing taking place with the sole intention of preventing people from getting important health care. This type of legislation would ensure that members of our community can get health care, whether to get a vaccine or just to visit their loved ones.

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My precise question to the minister is around protecting abortion services, as well, which I fully support. When I was the attorney general in Ontario, we brought a similar piece of legislation called the Safe Access to Abortion Services Act. I was wondering if the minister could elaborate as to how this particular piece of legislation, if passed, would interact with provincial legislation, such as in Ontario, British Columbia and Quebec, which are the provinces that have similar protections for women to access abortion services.

• (1300)

Hon. David Lametti: Mr. Speaker, I congratulate the hon. member for his recent appointment to the position of parliamentary secretary.

First of all, to repeat, abortion services are health care services and abortion clinics are health care clinics. Hence, they are protected. With respect to the larger interoperation between the federal use of the criminal law power and provincial use of property and civil rights protections and other heads of provincial power, the answer is that they interoperate very well. Provinces can enact measures to protect spaces. What we would be doing with the criminal law power is protecting the impeding of access, as well as the threat of intimidation. Each has its own standards, both in terms of the mental and *actus reus* elements of crime, and they fit very well with what provinces have done.

Ms. Lori Idlout (Nunavut, NDP): *Uqaqtittiji*, this is a very important discussion, and I would like to ask the Minister of Justice about an issue that is very important to Nunavut.

How was Johannes Rivoire allowed to leave Canada? He is now protected in France. I would like to hear from the minister what the government plans to do about this criminal who is hiding in France at the moment.

Hon. David Lametti: Mr. Speaker, I thank the hon. member for her question.

As I have stated a number of times publicly, and has been stated publicly, the specific proceedings against Johannes Rivoire were stayed by the Prosecution Service. I cannot resurrect the stay; however, there is always the possibility that further evidence might be brought forward by other complainants or other witnesses. It would at that point be something that the police, the Prosecution Service and ultimately the Justice Department and the International Assistance Group would have to look at.

[*Translation*]

Ms. Louise Chabot (Thérèse-De Blainville, BQ): Mr. Speaker, I would first like to inform you that I will be sharing my time with my esteemed colleague from Beauport—Limouilou.

Furthermore, as today is December 6, the 32nd anniversary of the tragic Polytechnique massacre, in which 14 women were killed just for being women, I would like to offer my support and solidarity and say that we remember.

Let us return now to Bill C-3, which is currently under consideration. This is a two-pronged bill: it amends the Canada Labour Code, and it amends the Criminal Code. These two statutes do not address the same issues.

What we do know about this bill is that it stems from a commitment the government made during the last election campaign, the one that should not have happened. During that campaign, the government stated that it wanted to increase the number of sick days for workers who have none and strengthen the Criminal Code with more severe penalties for people who impede the provision of health care or intimidate health care workers.

Since we are talking about two jurisdictions here, and since this bill will definitely be worth studying in committee, I am wondering which would be the best committee to study it.

The government thought it would be a good idea to significantly strengthen the measures set out in the Criminal Code that penalize people who intimidate or harass patients and health care workers, but is that the right solution to this problem?

We will need to examine this bill to be able to answer that question properly. We understand the purpose of the measure, which is to make it clear to health care workers and those who need access to medical care that we will never allow them to be intimidated or afraid to get care. I think everyone understands the message, which may have been necessary.

However, as a health care worker, even though it has been some time since I worked in the field, what I am wondering is whether our labour laws, our workplace health and safety laws, also protect the workplace from acts of violence, intimidation and harassment.

Perhaps that should have been considered. Besides the incidents that we all witnessed in Quebec and the provinces, the major unions have been long calling for stronger measures against violence, intimidation and harassment to be included in our labour laws, because employers also have an obligation to provide a safe workplace.

In Quebec, anti-vaxxers have protested in front of primary schools. They have also protested to a lesser extent in front of hospitals and vaccination clinics. The Government of Quebec did not wait for the federal government before it significantly increased fines and public safety measures. That is why we wonder if strengthening the Criminal Code is the right solution.

• (1305)

The Canadian Labour Congress made it clear, and we agree, that we must avoid depriving individuals of the fundamental right to associate, to unionize, to strike, to picket and to mobilize. It is a major right guaranteed by the Constitution, and we must ensure that it is included in this bill.

As for the Canada Labour Code, the Minister of Labour stated in his speech on Friday that there are gaps in the social safety net. That is not news. Canada's antiquated labour laws are sorely in need of attention. Fifty-eight per cent, or 580,000, of Canada's workers do not have paid leave, and it is time to give them 10 days of paid sick leave. We could also amend the Canada Labour Code to increase the minimum wage as the government promised in the last budget. That would send a clear message in the current circumstances that we are protecting workers, who should have good working conditions and good wages.

Speaking of gaps in the social safety net, the government has forgotten one important aspect, namely, the employment insurance system. I am thinking specifically of people who are sick. The government is failing thousands of people who have no paid sick leave, no wage loss program and only 15 weeks of sickness benefits. This really is a gap in the social safety net.

Why is the government introducing a bill that targets the Canada Labour Code and the Criminal Code, which are two different systems, rather than strengthening labour laws and the EI system to protect people who are sick and have nothing to fall back on when they become seriously ill?

Why did the government not ensure that the constitutional right to protest and to freedom of expression were properly protected in the Criminal Code, if that were its intention? It will be important to study those two matters in committee.

We support the bill in principle, with a bit of fine-tuning.

• (1310)

[English]

Mr. Gord Johns (Courtenay—Alberni, NDP): Mr. Speaker, I want to thank my hon. colleague for talking about the importance of protecting workers.

I have asked other parties this same question. Throughout the health crisis, medical health professionals said the top two things that could be done to stop the spread of COVID were for people to get vaccinated and for governments to implement paid sick days. The government chose to drag this legislation out. Here we are 20 months later, and it is finally implementing paid sick days. In the meantime, people have lost their lives.

A parallel crisis is happening in our country: the overdose crisis. Medical health professionals are saying that we need to decriminalize the personal possession of illicit drugs and to provide safe spaces, which are the first steps to end the stigma against people who are using illicit drugs.

Does my colleague agree that the government has failed to listen to health professionals' guidance on the overdose crisis because of the stigma? Does she also agree that they can end it, and that we need to listen to health professionals when it comes to guidance to respond to emergencies much faster? People are dying as a result of inaction.

[Translation]

Ms. Louise Chabot: Mr. Speaker, a number of issues could have been raised, but the government determines the legislative agenda, so I will not comment on what could have been done. Many things

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could have been done, but they are well outside the scope of this bill.

Granting sick leave is the bare minimum. Quebec already does it. Other provinces do not. Granting sick leave will send a clear signal, but workers need more protection. Amending the Criminal Code is a start, but this issue is much bigger than that.

Ms. Lisa Marie Barron (Nanaimo—Ladysmith, NDP): Mr. Speaker, I thank my colleague for her speech.

We are still in the midst of a pandemic, and many medical associations are recommending that employers not require a doctor's note for people who may have contracted COVID-19. However, this bill gives employers the power to require a doctor's note, regardless of how many days of leave are taken.

Does my colleague not believe that this requirement could reduce the number of leave requests and increase the risk of spreading COVID-19?

• (1315)

Ms. Louise Chabot: Mr. Speaker, there are questions about the terms and conditions of the sick leave provided for in the bill, which contains only two clauses pertaining to the Canada Labour Code. For example, how does a person accumulate 10 days of leave?

With regard to the doctor's note, I have always said that the attending physician is the one who is in the best position to decide whether a patient should be on leave. In my opinion, the employer should respect the doctor's opinion.

[English]

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, I want to note the importance of the two issues with which we are dealing. The first is to recognize the important role our health care workers play. In addition, whether one is a patient or a health care worker, the underlying principle is that they should be able to go to a facility and feel safe and secure in doing so. All members of the House should be supporting that principle.

Could the member provide her thoughts on why that is so important?

[Translation]

Ms. Louise Chabot: Mr. Speaker, that is always an important issue.

Health professionals who devote all of their time to the health care system and who have been fighting against COVID-19 deserve recognition and protection all the time. We cannot recognize them just because they are essential to the health care system right now. We need to support them all the time, which is why it is important to ensure that the labour laws properly protect them at all times. The bill sends a clear message to offenders in cases involving serious threats and intimidation. However, this message of recognition must be ongoing.

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Mrs. Julie Vignola (Beauport—Limoilou, BQ): Mr. Speaker, today is December 6, and I want to join my colleagues in taking a few moments to think about the victims of the École Polytechnique massacre and their loved ones. I was 12 years old at the time, and I, fortunately or unfortunately, have an excellent memory, especially when my emotions are involved. I clearly remember, at 12 years old, the feelings of stress, distress and disbelief when I learned that women could be murdered simply because they were women. I thought that was something rare, out of the ordinary, but I now realize that it unfortunately happens far too often.

I have been asking questions in the House since the beginning of this Parliament, but since today I am making my first speech, I want to take the time to thank the people of Beauport—Limoilou for electing me and allowing me to continue serving and representing them. I also want to thank my volunteers, whose support was invaluable during this campaign, my second. When I say their support was invaluable, I think back to my first campaign and how there were just two of us. I thank my volunteers from the bottom of my heart because they did so much, even showing up during a heat wave. That is amazing.

Lastly, I want to say hello to the loves of my life: Pierre, Zoé, Louis, Benoît and Simon. They are extraordinary, and without them my life would be empty. I love them very much.

I could speak at length about the support I received during the campaign and how grateful I am to each and every person, from 18 to 77, who donated their precious time. Now, just as they helped me, it is my turn to help improve the lives of others by adding my thoughts about Bill C-3, an act to amend the Criminal Code and the Canada Labour Code.

I have to admit that when I read the bill's preamble and eight clauses, I initially wondered how this bill could actually help people. Here is the brief analysis I did as I read the bill.

The first clause adds a definition of intimidation in health services to the definitions of offence. In short, it indicates that intimidation in a health services setting constitutes an offence. This is just one addition to the long list of what is considered to be an offence. This could certainly be simplified by indicating that any form of intimidation, regardless of a person's status or job, is an offence. However, I recognize that this was an election promise. Accordingly, stipulating that the intimidation becomes an offence based on who specifically is being targeted makes the government look good, given the current situation.

The second clause of the bill inserts a new provision into the Criminal Code, subsection 423(2). It specifies that intimidation is an offence when committed against a person seeking health services—a patient—a health professional, or any person working to assist a health professional. This includes orderlies, administrative assistants, custodians, and so forth.

In short, it would be an offence to intimidate anyone in order to prevent them from receiving or providing health services. In my opinion, this clause makes sense, not only with respect to vaccination, but also with respect to other terrible situations that patients and health care personnel could experience.

Take, for example, women who go to a family planning clinic and are confronted by people who are angrily screaming and shouting. Think of those people and the clinic's staff, whose workplace is vandalized or who have their car tires slashed. All of these acts are unacceptable and lack the minimum civility, respect, or dignity, in addition to negatively affecting the physical and psychological health of the victims being targeted.

• (1320)

The new section 423.2, in the second and third subsections, makes it an offence to obstruct access to a place at which health services are provided, and a maximum sentence of 10 years can now be imposed on a person guilty of this offence. Here, I wondered about this: What about workers striking outside of their workplace? Will their right to strike be respected, or will it be considered a form of intimidation?

The question bears asking, especially since Bill C-3 specifies that a person cannot be found guilty if they go to the location of a demonstration for the purpose only of communicating or obtaining information. This might include a journalist, for instance. If a person who is going to communicate or obtain information is specifically exempted from being found guilty of an offence, why is it not specified that a person exercising their right to strike cannot be found guilty of an offence either? After all, a strike is a form of demonstration in front of a place where health services are provided.

The third clause adds a definition to part XV of the Criminal Code on special procedures and powers, specifically forensic DNA analysis. This addition makes subsection 423.2 also fall under the definition of a secondary designated offence. All the bases are covered to ensure there is no way out for anyone using intimidation against health services. However, I wonder about the need for DNA analysis in the case of intimidation. The link is not clear.

The fourth clause amends subsection 515(4.1), which sets out the aggravating factors of a charge. It adds intimidating a health professional as an aggravating factor. That is good.

The fifth clause states that the offence was committed against a person who was providing health services, including personal care services, and had the effect of impeding another person from obtaining those services. That covers anyone who is directly or indirectly connected to a health service. I have nothing to add, but what does that mean exactly?

What it all means is that from now on, as Quebec has been doing for a few months now, demonstrations will not be allowed in the vicinity of places where health care services are provided, and intimidating a health professional will be prohibited, as will be intimidating a person who decides to receive health care, regardless of their age or the nature of the health care.

As I said earlier, I think this makes sense because intimidation is indecent, unacceptable, degrading and stressful, no matter the target, and is an act devoid of dignity and respect. I am repeating this because I think it is important to keep it in mind. Such acts should never be committed against anyone, regardless of their social or employment status.

That said, intimidation is already an offence under the Criminal Code. Why are these clarifications needed? I am still wondering about that. If intimidation is prohibited and is an aggravating circumstance, that applies to everyone. Are we not all equal before the law? Was it really necessary to draft a bill to clarify that intimidation in the health care sector is criminal? Everyone is equal before the law. Anyone who is the victim of intimidation, regardless of their age, social status or job, is the victim of a criminal act.

Bill C-3 also amends the Canada Labour Code to eliminate part of subsection 206.6(1), specifically paragraph (a), which states that every employee is entitled to up to five days of sick leave per year for the purpose of treating illness or injury. That paragraph is being eliminated, because now it will be up to 10 days with a medical certificate. This will affect many employees across Canada. Here is my question. If this matter is under federal jurisdiction, could it affect negotiations with unions and workers? It is important to ensure that unions' right to strike and to negotiate their working conditions are not subject to this bill.

To sum up, the Bloc Québécois agrees with the principle of protecting federally regulated workers and health care workers. However, the committee will have to amend the bill for clarity to ensure respect for workers' other rights, such as the right to protest and the right to negotiate collective agreements in good faith.

• (1325)

[English]

Mr. Mark Gerretsen (Parliamentary Secretary to the Leader of the Government in the House of Commons (Senate), Lib.): Mr. Speaker, I listened carefully to the intervention by our Bloc colleague today. I submit to her that there should be a distinction for those who are trying to protect public safety when it comes to the issue of protests and, quite frankly, aggravated protests, which have been happening in front of hospitals. As we are seeing during the pandemic, a certain level of intimidation and fear is being aimed at individuals who are, by their most basic function, trying to protect society.

Would the member not agree that it is extremely important to make sure these individuals are not being subject to that during a time when their sole responsibility is to ensure and promote public safety?

[Translation]

Mrs. Julie Vignola: Mr. Speaker, the member should not try to put words in my mouth.

Everyone has the right to be protected. Intimidating people who are dedicating themselves, who are giving their lives, risking their lives, is unacceptable. That also applies to teachers, who also give their lives in service to others, and to us as parliamentarians. No form of intimidation is acceptable.

Government Orders

What I said was that it is important to protect health care workers and it is important to distinguish between a violent, intimidating protest and a strike.

[English]

Ms. Lori Idlout (Nunavut, NDP): *Uqaqtittiji*, as I said in my earlier intervention, Nunavut does not have very much access to physicians and health services. More than one-third of the Government of Nunavut's departmental budget is spent on costs associated with medical travel, at \$109 million, with physical and hospital services outside of the territory costing \$69.5 million. As such, I have quite an interest in how workers are treated outside of Nunavut.

In relation to the Bloc's positions, with its demand to suspend the CRB and its silence on the 10-day paid sick leave, the gap between the demands of workers and the position of the leader of the Bloc continues to widen. Why is the party's position regressing on its defence of workers' rights?

• (1330)

[Translation]

Mrs. Julie Vignola: Mr. Speaker, I grew up in Fermont, and I got viral meningitis when I was six years old. Since there is no hospital in Fermont, I had to wait for an air ambulance to be available to be urgently transferred, so I know what it means to have to wait when your life is in danger because certain services are not available.

The CERB has already been suspended. We asked that it be extended for the cultural and tourism industries, so I do not know why we are being accused of demanding that it be suspended.

We agree with the principle of 10 days of paid sick leave. What we are saying is that the government also needs to take into account the realities of SMEs, which have needs just like workers. That being said, health is the most important thing.

The government needs to reinvest so that the people of Nunavut and anyone else who is in a situation like I was in when I was six years old are able to quickly get access to proper health care, even if they live in a remote area. It is long overdue.

Mr. Denis Trudel (Longueuil—Saint-Hubert, BQ): Mr. Speaker, I thank my colleague for her fine speech and I congratulate her.

We are currently in the midst of a serious housing crisis. In Quebec alone, 500,000 households are in core housing need. In addition, we have a global climate crisis hanging over our heads, and there are some really significant issues related to the health care crisis. For example, we need to overhaul the way the health care system is funded.

In addition, we are experiencing a major language crisis in Canada. We are not talking about this issue yet, but it will be addressed in the House soon, I hope. In Quebec, we are witnessing a major decline in the French language. In short, these are all very important issues that we should be tackling now.

Government Orders

I would like my colleague to talk a little bit about the appropriateness of talking about Bill C-3 here today, when there are so many other pressing issues that we could be discussing.

Mrs. Julie Vignola: Yes, Mr. Speaker, it is important to talk about protecting health care services and all the other issues my colleague raised, because they are important in relation to health too.

Being underhoused or undernourished, belonging to a financially vulnerable household, these things directly affect our physical and mental health. Mental health also impacts physical health. It is a vicious cycle, and it is hellish.

There was an election. Some people said it was useful, but it is obvious it was useless, and it took forever for Parliament to return. Now here we are discussing this issue instead of moving forward on equally important bills.

[English]

Mr. Gary Anandasangaree (Parliamentary Secretary to the Minister of Justice and Attorney General of Canada, Lib.): Mr. Speaker, I will be sharing my time with the member for Kingston and the Islands.

Let me start by acknowledging what an important day today is. It is a day of action to end violence against women, and I recognize all the women who have died in Canada and around the world and the incredible women who continue to fight each and every day. As a society, we have a long way to go to end violence against women, but it is a day for us to redouble our efforts in this regard.

I am glad to speak today to Bill C-3, an act to amend the Criminal Code and the Canada Labour Code. I will be speaking primarily about the amendments to the Criminal Code of Canada.

The last 19 months or so have been difficult for frontline workers, particularly those in the health care sector. They have been working around the clock to help Canadians get through the pandemic. In many ways they have been putting their families at risk and have been away from their families during this period. We are very grateful for their service.

In my home community of Scarborough, I know that members of the Scarborough Health Network and those at the TAIBU Community Health Centre and many other local organizations have been instrumental in supporting us. However, sadly, the work of many of our frontline workers, especially those in the health care sector, has been the brunt of a great number of issues over the past few months, and I want to speak to that. I believe the amendments that are proposed today would address this.

It should be a fundamental right to go to work free of harassment and free of any form of disruption by the public, but sadly, because of anti-vaxxers and many others, health care workers are scared to go to work. I have been able to speak to many nurses, PSWs and physicians who are at their wit's end. They are stressed and are going on leave or are considering it because they can no longer bear what is happening to them.

I think all members would agree that it is unsettling to see reports in the media of bullying, threats, violence and intimidation directed toward health care workers and those seeking care. I was shocked

to see reports of individuals in Canada using online platforms to incite others to shoot health care service providers who vaccinate children. Let me be clear: Such conduct is criminal and has no place in our society.

This past weekend I was able to get my second daughter vaccinated. She had her first dose. It was administered by Dr. Jaya, who has been at the forefront of the fight against COVID. I know she and her colleagues want to work in an environment where they are free and safe. We are very thankful for what they have done so far.

Bill C-3 seeks to provide enhanced protections to health care workers and those seeking care at a time when the fight against the COVID-19 pandemic is ongoing. Unimpeded access to health services is critical to moving Canada beyond the pandemic. As Ontario right now has reached the important 90% mark of vaccination for those over the age of 12, it is more important than ever that we extend these protections to all Canadians who are working in the health care sector.

While Bill C-3 would create two new offences in the Criminal Code, namely a new specific intimidation offence and an offence of obstructing access to health care facilities, I want to focus my remarks today on the sentencing amendments advanced in the bill that relate to the proposed aggravating factors.

In short, aggravating factors are facts present in any given case that increase the gravity of the offence or the offender's degree of responsibility. Existing Criminal Code examples include when an offence is motivated by hate or prejudice and when an offender abuses a position of trust. To arrive at a fit sentence when sentencing, the court must weigh all aggravating and mitigating factors present in the case at hand.

Before speaking to these proposed legislative changes in more detail, I want to provide some additional context in relation to the sentencing amendments being advanced.

● (1335)

In 2019, the House of Commons Standing Committee on Health studied the prevalence of violence faced by health care workers in Canada. It reported that the rate of workplace violence against health care workers was four times higher than any other profession. What is particularly alarming about this figure is that stakeholders in this area also reported that most of the violence that workers experienced remained unreported due to a culture of acceptance.

Government Orders

In its report entitled “Violence Facing Health Care Workers in Canada”, the House of Commons Standing Committee on Health made several recommendations, including that the Government of Canada amend the Criminal Code to require courts to treat an assault against a health care sector worker as an aggravating factor for sentencing. In advancing this recommendation, the committee heard testimony from the Canadian Federation of Nurses Union that such an amendment would serve as a deterrent for individuals perpetrating violence against health care workers.

The sentencing amendments in Bill C-3 would respond to the long-standing calls from health care sector stakeholders and to the recommendation of the committee to codify assaulting health care practitioners, who are acting in the course of their duties, as an aggravating factor at sentencing and would reflect the common law in this area.

Let me take a moment to explain why. Existing sentencing laws already provide sentencing courts with the broad discretion to account for all relevant aggravating and mitigating factors in determining a sentence that is proportionate, having regard to the gravity of the offence and degree of responsibility of the offender. The list of aggravating factors provided in section 7(1)(a)(ii) of the Criminal Code is not exhaustive and courts can, and do, expand the list by recognizing new aggravating and mitigating factors at sentencing. In fact, reported cases in Canada have already recognized assaulting persons working in the health care system as an aggravating circumstance at sentencing.

Consistent with this existing treatment by courts, Bill C-3 would create two new aggravating factors applicable in the health care context, which would apply when a person is being sentenced for any criminal offence.

The proposed measures in the bill would include an aggravating factor where the offence was committed against any person who, in the performance of their duties and functions, was providing health services. The concept of health services would not be defined in the bill, but the courts would have the flexibility to apply it in appropriate cases. The aggravating factors also make clear that personal care services are captured within the concept of health services for aggravating factors.

Personal support workers provide health services that are essential to the well-being of all patients. The House of Commons Standing Committee on Health reported that an alarming 89% of all personal support workers had experienced physical violence on the job based on a poll commissioned by the Ontario Council of Hospital Unions. Codifying this aggravating factor signals Parliament's view that criminal conduct directed at personal support workers must be recognized and denounced.

There is a great deal more I could say on this issue, but I want to emphasize that this is important legislation that stands up for health care workers who are essential for Canadian society to recover and thrive, especially during a global pandemic. This bill is long overdue and delivers on an important commitment the government made to Canadians.

For all the reasons identified above, I urge all members of the House to support the swift passage of Bill C-3.

• (1340)

Mr. Glen Motz (Medicine Hat—Cardston—Warner, CPC): Mr. Speaker, I want to congratulate my friend across the way on his new role and wish him well. I am sure we can work well together.

I am curious to know this. As I am sure the member knows, we support the health care workers who have worked so diligently over the last couple of years and the need to protect our hospitals so they can freely go to and from work. I wonder whether there would be consideration by the justice department, the member and the minister to extend those same sorts of protections to our infrastructure, such as pipelines and rail facilities, along with hospitals, to ensure those projects and the livelihoods around them are also protected.

Mr. Gary Anandasangaree: Mr. Speaker, I want to emphasize the need to protect health care workers and facilities that are served by the health care sector. It is such an important aspect of the fight against COVID. Physicians, nurses, PSWs or any support staff going to work in the morning to help Canadians should not be facing intimidation, risk or threats to their lives. That is why we are bringing forward this important legislation.

The matters that the hon. member is discussing can be put forward in other legislation, but for the purpose of today it is very important that we pass this as soon as possible.

• (1345)

Mr. Gord Johns (Courtenay—Alberni, NDP): Mr. Speaker, I certainly agree with the part of the legislation that protects our health care workers, and I appreciate the member speaking about it.

We know that the government has been guilty of outsourcing at a rapid rate, especially at Veterans Affairs, for which I used to be the critic. The Liberal government promised to restore the jobs cut by the Conservatives in the previous government, yet it has continued to hire people on short-term contracts. Those who have been impacted by contract flipping practices could lose their paid sick days accumulated in their previous contract. That is what is going to happen to a lot of those workers.

Would my colleague be open to amendments that would ensure that all federal sub-jurisdictional workers have access to the 10 paid days of sick leave? Also, will the Liberals do something to stop their government from outsourcing?

Mr. Gary Anandasangaree: Mr. Speaker, I would like to emphasize what is in the legislation, and that is to ensure health care workers and health care facilities are protected. During this pandemic, it is important that the federal government play an essential role in ensuring that our frontline workers, our essential workers, and our health care workers are protected against those who would intimidate and abuse them. That is exactly what we are doing in this legislation.

Ms. Elizabeth May (Saanich—Gulf Islands, GP): Mr. Speaker, I want to zero in on something that has not been discussed yet on Bill C-3. As I have been able to state previously, I am very supportive of protecting our wonderful nurses and health care workers.

Government Orders

I want to focus on another aspect of sentencing, which is the flexibility that a judge will have. I noticed some commentary in the media that this may be too harsh a way to protect our nurses by having as much as a 10-year sentence.

I wonder if the hon. member could comment on the fact that the judge will have a lot of discretion. It can be an offence by summary conviction. It can also be an indictable offence of up to 10 years. There are no mandatory minimums here.

Mr. Gary Anandasangaree: Mr. Speaker, I want to emphasize that the legislation in front of us does give judges the discretion and allows them to look at aggravating and mitigating circumstances in sentencing. It is an essential tool that judges are able to use. We believe the judiciary is well positioned to make those decisions and impart sentences at those points in time.

Mr. Mark Gerretsen (Parliamentary Secretary to the Leader of the Government in the House of Commons (Senate), Lib.): Mr. Speaker, it is an honour today to rise to speak to Bill C-3, very important legislation that covers two aspects of providing for our health care workers, especially during this pandemic.

The latter half of the bill specifically addresses the issue of paid sick leave and how important it is to ensure that people do not have to choose between paying their bills and going to work. When people are sick, as we have learned through this pandemic, we do not want them going to work and participating in an environment where they could potentially be passing along illness to other people. When we are sick or do not feel well, it is important we stay home. To that end, we need the proper legislation in place to protect workers and give them that flexibility so they can take the proper measures to protect themselves.

The other part of the bill, which I will focus a little more on, specifically ensures that proper measures are put into our Criminal Code to protect individuals from being harassed on their way to and from work, in particular, health care professionals. When the bill was introduced, I was extremely happy to hear about the measures that would be put in place.

There was an extremely unfortunate incident at Kingston General Hospital at the beginning of the election campaign, when protests were gaining speed and traction. A group of people chose to protest not just in front of Kingston General Hospital, but right in front of the cancer clinic at the hospital. Folks going to receive their cancer treatments and then leaving were being harassed by a protest group that yelled insults. In addition, those serving on the front line, the nurses and doctors, were being harassed as they were going in and out of the hospital. It is absolutely ridiculous that we even need to have this debate or that we have a requirement for legislation. However, unfortunate incidents have been popping up, such as the one most recently in my community of Kingston and the Islands.

Perhaps it was the nature of the election taking place at the time that really added fuel to the fire. The unfortunate part about the campaign was that it was taking a political lens. The People's Party of Canada was really promoting this event. People's Party of Canada signs were in front of the hospital during this protest. By and large, on Twitter, it was the People's Party and its supporters who were promoting this event to take place. Of course, they did it all in the name of civil liberties, believing that somehow liberties

had been breached during the pandemic, which I find extremely alarming.

Even though the People's Party did not win any seats in this place, I still find it concerning when members of the House attempt to play footsies with the issue of civil liberties being in jeopardy during the pandemic. Unfortunately, I am reminded of the more recently formed Conservative liberties caucus, the freedom fighters caucus, whatever it is called, which consists of approximately 15 to 30 Conservative members of Parliament and senators, who somehow find it their job to stand up for the liberties that have been infringed upon during the pandemic. I believe that every person in the House believes strongly that people are entitled to certain rights afforded them under the charter and that, indeed, no person's rights have been infringed upon during the pandemic. However, this is not the way it is being interpreted. When leaders are helping to fuel the fire through their actions and words, it only further instills within the people who are leading these protests to go out there, to charge and suggest they somehow need to be protected.

• (1350)

We end up with what I described in my riding of Kingston and the Islands in front of the Kingston General Hospital: an event where there were about 50 people yelling, screaming and hurling insults and accusations toward not just health care professionals, the nurses and the doctors coming and going from the hospital, but indeed people entering the cancer clinic at Kingston General Hospital and people who were leaving immediately following treatments.

Members can imagine the public outcry against this type of activity that was going on. It was quite a bit, and there was a lot of anger and frustration from the community, but at the same time it provided an opportunity for a certain degree of empowerment in this group.

This legislation specifically seeks to make this type of activity something that is not permissible in the Criminal Code and indeed that people can be held accountable for. I am extremely happy to see this legislation that we committed to during the election come forward so quickly. I want to see this get to committee as quickly as possible so it can be properly studied. As I have been listening to the debate today, some of my colleagues have raised questions about the content of the bill and how that will be affected. I think back to the previous question from the NDP member, and these are good questions and things to study at committee, where we can hash out the details to ensure that this legislation is the best it can be.

The reality of Bill C-3 is that it is a commitment to Canadians. It is a commitment that we will not tolerate this kind of behaviour around health care facilities that are providing services. The front-line workers are there to provide services to our communities. We will not allow people to participate in activities that intimidate, harass or threaten their ability to move freely in and out of such a facility in order to provide these frontline services.

I know I am close to question period and I am happy to begin my five minutes of questions, but I want to say I am very glad the bill is before us. I want it to move quickly to committee so it can be thoroughly examined and reported back to the House and we can pass it into legislation.

• (1355)

Mr. Damien Kurek (Battle River—Crowfoot, CPC): Mr. Speaker, I appreciate the opportunity to once again ask a question in this important debate. I want to note that the bill addresses two very distinct areas and that I asked earlier whether or not it would be relevant to split the bill into two separate ones.

However, specifically regarding health care facilities, it brings up a very important point. No Canadian and no health care professional should be hindered from being able to access their workplace or from being able to access care.

Specifically, I wonder if the member would support that being expanded to include something like critical infrastructure, pipelines and railways and so on. Especially at a time when there are serious supply chain challenges within this country, I am wondering if the member would be open to including that in this legislation.

Mr. Mark Gerretsen: Mr. Speaker, only a Conservative would suggest that the security of the work of our frontline workers should be compared to that of a pipeline.

Mr. Chris Bittle (Parliamentary Secretary to the Minister of Canadian Heritage, Lib.): Mr. Speaker, I have heard a couple of times from the Conservatives that they are likening hospitals, vaccination centres and abortion clinics to pipelines. I am a cancer survivor. Many of my constituents go daily to the St. Catharines General Hospital to receive treatment. I would like to ask if the hon. member agrees how ridiculous this argument from the Conservatives is, to liken a hospital, a cancer centre or a vaccination centre to a pipeline.

Mr. Mark Gerretsen: Mr. Speaker, either it is in documentation they have been provided in advance of this debate or it is just a common theme among Conservatives, because the last two members have literally asked questions comparing the security around pipelines to that around health care facilities.

As I indicated in my speech, in my own constituency during the election, there were People's Party of Canada candidates and antivaxxers protesting out in front of the cancer clinic of Kingston General Hospital. How ridiculous is it that we even have to bring forward this legislation?

Ms. Lisa Marie Barron (Nanaimo—Ladysmith, NDP): Mr. Speaker, health care workers have worked tirelessly throughout the pandemic and provide life-saving care for our loved ones. As a result of underfunding and underprioritization through the Liberal government, health care workers in my riding of Nanaimo—Ladysmith were already overworked and underpaid. Adding to this, we have seen an increase of bullying and hatred of health care workers. Our health care workers are tired and deserve better.

When will this government support the NDP's plan to increase health care for workers and increase training, recruitment and retention of health care workers?

Statements by Members

Mr. Mark Gerretsen: Mr. Speaker, I can respect the fact that the question is slightly off the topic of this particular debate, but the member raises a good point. If we have not learned from this pandemic that we need to strengthen the resources around hiring, recruiting and bringing more frontline workers on board, then I do not think we have truly learned the lesson from this pandemic. If the NDP is set to make proposals in this regard, I would be interested in hearing what they are.

STATEMENTS BY MEMBERS

• (1400)

[*Translation*]

VIOLENCE AGAINST WOMEN

Ms. Elizabeth May (Saanich—Gulf Islands, GP): Mr. Speaker, 32 years ago, 14 women were killed at École Polytechnique in Montreal. We remember Geneviève Bergeron, Hélène Colgan, Nathalie Croteau, Barbara Daigneault, Anne-Marie Edward, Maud Haviernick, Maryse Laganière, Maryse Leclair, Anne-Marie Lemay, Sonia Pelletier, Michèle Richard, Annie St-Arneault, Annie Turcotte and Barbara Klucznik-Widajewicz.

[*English*]

We must end misogyny, end patriarchy and stop violence against women.

* * *

FILIPINO HERITAGE COMMUNITY

Mr. Kevin Lamoureux (Winnipeg North, Lib.): Mr. Speaker, I want to talk about diversity. Do members know one of the fastest-growing communities in Canada today is the Filipino heritage community, at approximately one million strong and growing?

Winnipeg, which I would suggest is the heart of the Filipino community, is after all where we got our very first Jollibee here in Canada. I have more good news when it comes to diversity and businesses. Winnipeg, not the first this time, as Edmonton beat us, now has Potato Corner, another successful franchise that comes from the Philippines.

It speaks volumes that one of the things that gives Canada its greatest value is our diversity, so let us give a hand for Canada's diverse community and the Filipino heritage community.

* * *

BENNO FRIESEN

Hon. Kerry-Lynne Findlay (South Surrey—White Rock, CPC): Mr. Speaker, I want to warmly thank the good people of South Surrey—White Rock for re-electing me and give an enthusiastic shout-out to the friendship of many volunteers and my campaign manager, who made it all possible.

Statements by Members

Public service is both a solemn duty and a great honour, and today I remember the wonderful Benno Friesen. He represented my community for a record five terms as MP, from 1974 to 1993, and passed away in September at age 92.

He remained very sharp when it came to politics, history, literature and theology. An eloquent English literature professor and founder of Trinity Western University, he was highly respected in this place. He was predeceased by his wife Marge, and my sympathies go to his daughters, Cyndi and Lynne, and their families, including seven grandchildren.

Benno was a mentor and friend. I am truly blessed to have received his wisdom and advice.

* * *

HAMILTON EAST—STONEY CREEK

Mr. Chad Collins (Hamilton East—Stoney Creek, Lib.): Mr. Speaker, I rise today for the first time in the 44th Parliament to say thanks. I thank the residents of ward 5 in Hamilton East—Stoney Creek for their 26 years of support when I was their city councillor. It was an honour and privilege to serve them for so many years.

I thank those very same residents in Hamilton East—Stoney Creek who elected me this past September as their new member of Parliament. I look forward to addressing the challenges and opportunities that face our community and our great city. As all elected representatives know, we owe our success in large part to our families, friends and volunteers. Oftentimes our service to the community conflicts with special occasions at home or simply spending time with those we care about the most.

I thank my wife, Mary, and our children, Chase and Reese, for their unconditional love and support and the sacrifices we have made as a family to support my time in public office.

I thank my parents, Shirley and Bob, and my sister Candace and her family for being there every step of the way. I could not have done it without them.

As for my friends, volunteers and supporters in the community, many of them like part of an extended family, it continues to be an honour and a privilege to serve them.

* * *

[*Translation*]

GUN VIOLENCE

Ms. Kristina Michaud (Avignon—La Mitis—Matane—Matapédia, BQ): Mr. Speaker, exactly 32 years ago today, a man obsessed by his hatred of feminists opened fire at École Polytechnique in Montreal, killing 14 women and injuring several others. For the past 32 years, this sad anniversary has been a time to condemn violence against women, as well as gun violence. We condemned it last year, and the year before that, and the year before that. I do not think that there are words to describe the exasperation of the survivors who have been fighting for over 30 years. The more time passes, the more it seems like we are making no progress or even going backwards.

In memory of all those who have been gunned down over the past 30 years, and those who have been killed on the streets over the last few months, as recently as last week in Montreal, it is our duty to work harder for gun control, but we will need the government's help. The federal government cannot wait for another fatal shooting before taking action.

On behalf of the Bloc Québécois, I urge the government to do more to curb gun violence. We owe it to the victims.

* * *

● (1405)

[*English*]

HALIFAX EXPLOSION

Andy Fillmore (Halifax, Lib.): Mr. Speaker, today marks the 104th anniversary of the Halifax explosion. On the morning of December 6, 1917, the SS *Mont-Blanc*, an incoming munitions vessel, collided with the SS *Imo*, an outgoing Belgian relief vessel in Halifax harbour. Hundred-foot flames erupted from the ships as the volatile cargo violently exploded, the largest human-caused explosion until the atomic bomb.

Two thousand people were killed, 9,000 people were injured and every structure in an 800-metre radius was flattened. The hearts of Haligonians were shattered too, as they mourned the loss of their loved ones and neighbours. The explosion also damaged the tower clock and bell of Halifax city hall, but this year that bell was repaired and triumphantly returned to service, where it can now be heard at Grand Parade, a testament to the enduring efforts to rebuild our city.

It was community and love of place that helped us build back better following the explosion, and a century later we have not forgotten.

* * *

AGNES MACPHAIL

Mr. Alex Ruff (Bruce—Grey—Owen Sound, CPC): Mr. Speaker, it was 100 years ago today that the first woman, Agnes Macphail, was elected here to the House of Commons. Born in Grey County, Agnes was first elected to represent the riding of Grey South East and later represented the riding of Grey—Bruce. She worked hard to represent farmers and rural interests here in Ottawa. She knew what mattered to rural communities and was instrumental in the establishment of old age pensions and the reform of our Canadian prison system.

Agnes's achievements did not end with being elected to the Canadian Parliament. She was the first woman to represent Canada at the League of Nations and was the one of the first two to be elected to the Ontario legislature in 1943. Today, her legacy and work continue with organizations like electHER Now that aim to increase women's representation in municipal politics across my riding of Bruce—Grey—Owen Sound by connecting aspiring women with some of the great role models in the riding.

I hope all members will join me today in recognizing the historic and inspiring contribution Agnes made to Canada and here in the House of Commons.

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CHILD CARE

Mr. Peter Fragiskatos (London North Centre, Lib.): Mr. Speaker, as I rise for the first time in the 44th Parliament, I want to express my sincere and profound gratitude to the residents of London North Centre for electing me to be their member of Parliament for a third time.

A concern consistently brought to my attention by those constituents is the affordability of child care. The average London family is paying more than \$15,000 annually per child. This hits close to home, as my wife Katy and I welcomed our first child at the end of September, a healthy baby girl named Ava. We are currently planning for what is next. Though we are in a very privileged position, many parents are struggling with how to pay the child care bill.

It is time for \$10-a-day child care in London, in Ontario and across Canada. I therefore implore the Ontario government to get a deal done with the federal government now. It is time to join other provinces and territories that have signed on to make child care affordable for all. Doing so is vital for equality of opportunity, gender equality and economic betterment.

* * *

[Translation]

VIOLENCE AGAINST WOMEN

Mrs. Alexandra Mendès (Brossard—Saint-Lambert, Lib.): Mr. Speaker, today is the 32nd anniversary of the massacre at École Polytechnique. I do not think there are many Canadians who do not understand what this event represented for the country, but I think this is particularly true for the 50% of Canadians who are born female.

Femicide is now recognized for what it is: the intentional killing of a person because of their gender. There are many murders in Canada, a large number of which are connected to organized crime. However, what remains particularly worrisome about the event that took the lives of 14 young women who wanted to become engineers is that their only crime was that they were women. The primary motivation behind femicide is the fact that the victim is a woman. I find this incomprehensible and deeply troubling.

I am a grandmother to two boys. My dream for them is a growing awareness of the intrinsic equality of all individuals and a society that recognizes that every single one of us is responsible for promoting equality.

* * *

● (1410)

[English]

PETERBOROUGH PETES

Ms. Michelle Ferreri (Peterborough—Kawartha, CPC): Mr. Speaker, today I am very proud to share the story of #CoachCal, a

Statements by Members

six-year-old from my riding of Peterborough—Kawartha. Cal was selected after auditioning for the next gen program. He was granted a single-game contract with our OHL team, the Peterborough Petes, to give the pre-game pep talk. His pep talk went viral on social media and has been trending across North American media. It has over three million views on the NHL's TikTok.

I cannot deliver the speech as well as Cal, but I want to share some of my favourite words from his passionate speech: "Everyone in this room has a dream, but those dreams don't just come to you, you have to earn it. This is a team and each one of us brings something to the team." Cal's words are a powerful reminder of what we should be focusing on, both on and off the ice. As his MP, I am very proud of his hard work, and I will do whatever it takes to get the "W" for Peterborough—Kawartha.

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NUCLEAR INDUSTRY

Mr. Bryan May (Cambridge, Lib.): Mr. Speaker, it is a pleasure to rise to speak to the recent accomplishments by the Canadian nuclear industry.

Ontario Power Generation has announced that Darlington will construct a small modular reactor, SMR, in partnership with GE Hitachi Nuclear Energy.

This is a significant step in the development of SMRs. It delivers jobs and helps us meet the climate crisis. In addition, the Canadian Nuclear Association recently signed MOUs with Romania and the French nuclear energy society to promote the growth of civil nuclear energy.

These are decades-long relationships that will continue to grow as Canada works to address climate change with its international partners. These announcements demonstrate the leadership of OPG, CNA and the nuclear industry's creation of jobs and economic, environmental and technological benefits for all Canadians. Please join me in helping welcome them and congratulating them on their incredible work.

* * *

FLOODING IN BRITISH COLUMBIA

Mr. Dane Lloyd (Sturgeon River—Parkland, CPC): Mr. Speaker, since the flooding began in British Columbia, Canadians have stepped up.

The heroic efforts of first responders, members of the Canadian Forces and just regular people have helped save lives and protect property. Faith groups and civic organizations have also stepped up in a big way to provide food and shelter to evacuees.

Statements by Members

As we work to rebuild the Fraser Valley, Canadians want to know what is going to be done to ensure something like this never happens again. They want to know why critical infrastructure that could have prevented this disaster was not built. They want to know that the government will have their back and will act proactively to mitigate these disasters in the future.

Whenever trouble arises, Canadians never fail to live up to our reputation. We are a generous people, always ready to help those in need, even when it means putting our own lives at risk.

Conservatives are committed to a team Canada approach. We will work hard to rebuild and to protect British Columbians for generations to come. It is time to get the job done.

* * *

VIOLENCE AGAINST WOMEN

Mr. Eric Melillo (Kenora, CPC): Mr. Speaker, in Canada 50% of women have been victims of sexual or physical violence. Last year, on average, a woman or girl was killed every two and a half days, with indigenous women being disproportionately targeted. The vast majority of identified perpetrators are men, and in many cases are current or former intimate partners.

As we mourn the losses, we must direct our efforts into preventing future tragedies. We must ensure abusers face real consequences while providing vulnerable women and girls with access to safe housing and other support services.

In our personal lives, we must stand against domestic violence, abuse and coercion. We must hold ourselves and our friends accountable, listen to the survivors in our lives and offer support to women looking to leave abusive partners.

We all have a role to play in ending violence against women.

* * *

RETIREMENT CONGRATULATIONS

Mr. Kody Blois (Kings—Hants, Lib.): Mr. Speaker, I rise today to recognize an exceptional Maritimer, someone who has had a lasting impact on journalism in Canada.

Earlier this week, Steve Murphy delivered his last sign-off as anchor CTV Atlantic News at Six after a broadcasting career that spanned four decades. He has taken us through many historic moments during his time, tragedies like the crash of Swissair Flight 111, massive storms and weather events like hurricane Juan and White Juan, historic visits from the Queen and American presidents, and milestones like the opening of the Confederation Bridge.

Steve has also reported on many elections. His interviews were known for being tough but fair. Indeed, he has held the feet of many prime ministers and MPs to the fire on the issues of the day. In fact, Steve's interviews were seen as a rite of passage for elected officials. One of my own regrets as a young MP was to not have had one of those interviews and to not have been questioned by Steve.

I would like to ask that all members of this House wish Steve Murphy all the best in his retirement and the days ahead.

• (1415)

[*Translation*]

VIOLENCE AGAINST WOMEN

Mr. Alexandre Boulerice (Rosemont—La Petite-Patrie, NDP): Mr. Speaker, Geneviève Bergeron, Hélène Colgan, Nathalie Croteau, Barbara Daigneault, Anne-Marie Edward, Maud Haviernick, Barbara Klucznik-Widajewicz, Maryse Laganière, Maryse Leclair, Anne-Marie Lemay, Sonia Pelletier, Michèle Richard, Annie St-Arneault and Annie Turcotte, 14 young women with bright futures, had their lives taken from them just because they were women. Thirty-two years ago, they were shot and killed by a man who hated women, particularly those who could hold their own.

That was 32 years ago, but have we made any real progress as a society? It is hard to tell. This year, there have already been 18 femicides in Quebec alone. Eighteen women died at the hands of their violent partners. We need to do more. We need to continue to focus on education, putting resources on the ground and limiting access to guns in our communities. We owe it to our sisters, our friends, our daughters and those 14 young women who left us far too soon 32 years ago.

* * *

FRANÇOIS HÉBERT

Mrs. Marilène Gill (Manicouagan, BQ): Mr. Speaker, on December 4, Quebec lost one of its literary giants. François Hébert co-founded the publishing house Les Herbes rouges in 1968. When we think about Quebec literature and poetry, we cannot help but think about the almost mythical Hébert brothers: Marcel, who died in 2007, and François.

With François' death, we have suddenly lost over half a century of literary memory. He gave up his role as CEO in the spring but continued to work as an editor until this past Saturday, just as he wanted to.

Les Herbes rouges started out as a literary magazine before becoming a publishing house with 600 titles. It promotes avant-garde literature and serves as a forum for discussion and renewal, where anything is possible. Les Herbes rouges is one big family.

François, my editor, boss, mentor and friend, I thank you on behalf of the Bloc Québécois. I love you.

[English]

VIOLENCE AGAINST WOMEN

Mrs. Karen Vecchio (Elgin—Middlesex—London, CPC): Mr. Speaker, on this day 32 years ago, 14 women were murdered at École Polytechnique in Montreal. The lives of 14 bright, young women were senselessly cut short. These women were explicitly targeted because of their sex. They were murdered for no reason other than the fact that they were women.

The blatant sexism that motivated the attack continues to haunt Canadians and the women who still face unacceptable high volumes of violence. Today, on the National Day of Remembrance and Action on Violence Against Women, Canadians must unite against sexism, remember the victims of the dark day in 1989 and resolve to do better.

We need to work together to create a Canada that is free from violence against women. We owe it to the victims and it is time we make it a reality.

* * *

[Translation]

VIOLENCE AGAINST WOMEN

Ms. Rachel Bendayan (Outremont, Lib.): Mr. Speaker, this year, like every year, I will be at this afternoon's vigil, surrounded by my grieving community.

Thirty-two years ago to the day, 14 female students at Montreal's École Polytechnique lost their lives. I want to pay tribute to those 14 brilliant young women whose whole lives lay ahead of them and to the survivors, such as Nathalie Provost, who was shot that evening and who works with PolyRemembers to advocate for better gun control here in Canada.

[English]

On this very solemn day, I commit, in this House of Commons, to the survivors of Polytechnique, to the families of Meriem and Thomas, and all those who have been impacted by gun violence to continue to fight for stronger gun control measures. Whether it is a mandatory buyback for assault weapons or a national ban on handguns, the mandate my community sent me to Ottawa with will guide my every step.

● (1420)

[Translation]

On December 6, 1989, 14 exceptional young women were brutally gunned down. May we never forget.

* * *

[English]

VIOLENCE AGAINST WOMEN

The Speaker: Following discussions among representatives of all parties in the House, I understand that there is an agreement to observe a moment of silence.

Oral Questions

[Translation]

I invite the members to rise and observe one minute of silence in memory of the victims of the tragedy that occurred 32 years ago at Montreal's École Polytechnique.

[A moment of silence observed]

ORAL QUESTIONS

[English]

GENDER-BASED VIOLENCE

Hon. Candice Bergen (Portage—Lisgar, CPC): Mr. Speaker, the number of women who are victims of violence simply because they are women should be decreasing, but the evidence shows that it is just going up. Since the beginning of the pandemic, incidents of domestic violence have drastically increased. Many women have been victims of violence and abuse. Many have suffered at the hands of intimate partners. Violence against women, in all of its forms, tears families apart and the impact goes beyond the victims to hurt children and our society.

Today, as we mark the 32nd anniversary of the École Polytechnique massacre, one of the most horrific examples of gender-based violence, can the Deputy Prime Minister please update the House on what the government is doing to combat violence against women?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, let me thank the deputy leader of the Conservative Party for that very important question, and while we disagree about many things in the House I hope that on this very sombre anniversary we can all agree that violence against women is simply unacceptable.

[Translation]

Today, it is very important that we remember the 14 young women from Montreal's École Polytechnique who were killed just because they were women.

[English]

Our budget made unprecedented investments in fighting violence against women.

We have just had a moment of silence in the House, but I wonder if people would think it appropriate, and if you, Mr. Speaker, would think it appropriate, for all the women MPs to rise for one moment now to remember them.

[A moment of silence observed]

* * *

THE ECONOMY

Hon. Candice Bergen (Portage—Lisgar, CPC): Mr. Speaker, I thank the Deputy Prime Minister for that answer.

Inflation is out of control and, with Christmas just around the corner, Canadians are really feeling it. All it seems the members of the Liberal government can do is throw up their hands and say, "There is nothing that we can do."

Oral Questions

I want to remind the Minister of Finance that the government does have a say in setting the inflation-control target. Will the Liberals do the bare minimum to address inflation and stick to the 2% target of the Bank of Canada? If they will not do that, why not?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, the renewal of the mandate of the Bank of Canada, which happens every five years, is indeed a serious and important moment for our economy. The Bank of Canada has undertaken an extensive process to consider this decision, and there have been very good discussions between the government and the bank. We look forward to announcing our agreement with the bank on the mandate in due course.

• (1425)

Hon. Candice Bergen (Portage—Lisgar, CPC): Mr. Speaker, we hope “due course” is soon, as even the Governor of the Bank of Canada said Canadians can be confident we can control inflation. It seems it is only the finance minister who either does not understand that part of her job or does not care. There are things the government can do to get inflation under control.

We have been asking this question for a week now, and we are going to keep asking it: What is the government going to do to stop out-of-control prices that are affecting Canadians right across the country?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, our government has every confidence in the Bank of Canada and we respect its independence. We also happen to know, on this side of the House, the difference between fiscal and monetary policy. We would never cast aspersions on the Bank of Canada such as those we have heard from the Conservatives, who have described it, for example, as an ATM.

[Translation]

Mr. Alain Rayes (Richmond—Arthabaska, CPC): Mr. Speaker, since 2015, the government has been borrowing money and spending it recklessly, telling us repeatedly that nothing can be done about the inflation problem. In reality, because of Liberal mismanagement, we are stuck with skyrocketing gas, food and housing prices. The cost of living is now a concern for the vast majority of Quebecers and Canadians, but not for our Prime Minister.

When will he present a real plan to tackle inflation, which is hitting all Canadian families so hard?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, we understand quite well that affordability is an important issue for Canadian families. We also understand, as does Stephen Poloz, the former governor of the Bank of Canada appointed by Stephen Harper, that inflation is a global phenomenon. Here are some numbers to back that up: In October, the inflation rate was 4.7% in Canada and 6.2% in the U.S. Germany, in turn, just announced a 6% inflation rate.

Mr. Alain Rayes (Richmond—Arthabaska, CPC): Mr. Speaker, here is the reality, based on the numbers. In Quebec alone, the inflation rate is 5.1%. Prices have skyrocketed. Gas prices have gone up 35% and housing prices have increased by 20%.

According to the latest calculations, Canadian families will have to spend an additional \$695 on groceries next year, in 2022. As the

holiday season approaches, requests for food bank assistance are exploding.

I repeat my question to the Prime Minister. When will he introduce a real plan, with concrete measures, to tackle the rising cost of living that is affecting families, seniors and especially those less fortunate?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, while the Conservatives continue with their irresponsible fearmongering and attempts to talk down the Canadian economy, Canadians are smart and know the facts.

Our GDP grew 5.4% in the third quarter, exceeding market expectations and the performance of the U.S., Japan, the U.K. and Australia. In addition, Canada has now recovered 106% of the jobs lost during the COVID-19 recession.

* * *

GENDER-BASED VIOLENCE

Mrs. Claude DeBellefeuille (Salaberry—Suroît, BQ): Mr. Speaker, 32 years ago today, Quebec bore witness to a femicide that left 14 students dead at Polytechnique.

Against the background of the 18 femicides this year and the wave of shootings that have shaken Montreal, the lack of progress on gun control since this massacre took place is even more glaring.

One Polytechnique survivor, Nathalie Provost, said, “It is a disaster. We are less protected in 2021 than in 1989.”

When will the government finally assume its responsibilities on gun control?

• (1430)

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, I want to thank my colleague for the question and her words on the anniversary of the Polytechnique tragedy.

Our government has taken meaningful action on gun violence. At the same time, we recognize that we have to do more and look for tangible solutions. We have to collaborate with the Government of Quebec and every member of the House to ensure that everyone can be safe in their community.

Mrs. Claude DeBellefeuille (Salaberry—Suroît, BQ): Mr. Speaker, according to the coordinator at PolyRemembers, “There is a weakening of gun control while we are witnessing an increase in femicides and several shootings.”

Thirty-two years later, we are regressing instead of progressing. It is so discouraging. That is what the Polytechnique survivors are telling us today. We owe a debt to those women.

What strong action will the Deputy Prime Minister take today to give the victims a reason to believe the federal government will do something?

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, my colleague is right, and that is why we will continue to work with the victims' families and the Government of Quebec.

Last week, I held two virtual meetings with the leaders of PolyRemembers, as well as my Quebec counterpart, in order to improve our collaborative efforts and find tangible solutions to tackle this problem.

We will continue to work in close collaboration with everyone.

* * *

HEALTH

Mr. Alexandre Boulerice (Rosemont—La Petite-Patrie, NDP): Mr. Speaker, opioids are wreaking havoc in Quebec and everywhere. There has been an overdose crisis for years. Hundreds of people have died as a result of substance abuse.

According to just about everyone who has studied this issue, including police forces, public health agencies and the World Health Organization, the solution is simple: We must decriminalize the simple possession of drugs. The people affected do not need to go to jail; they need help.

Several major cities, including Toronto, Vancouver and Montreal, are calling for the federal government to act. What are the Liberals waiting for? When will they get serious about addressing the overdose crisis?

Hon. Jean-Yves Duclos (Minister of Health, Lib.): Mr. Speaker, I am obviously very pleased and grateful to be able to answer this question.

Since we have spoken about this several times, my colleague knows very well how invested we are in taking action on several fronts, including harm reduction and the safe supply of medications and drugs. We naturally want to work with the community so that services are available for those who need them most.

My colleague, the first-ever Minister of Mental Health and Addictions in Canada, is actively working with stakeholders across the country. She will be pleased to provide further details soon.

[English]

Mr. Gord Johns (Courtenay—Alberni, NDP): Mr. Speaker, the Public Health Agency of Canada reported an 88% increase in opioid-related deaths last year. The Prime Minister has repeatedly said we need to listen to public health officials to get through the pandemic. However, when it comes to the overdose crisis, he is ignoring those same health officials who are clearly saying that decriminalizing personal possession of illicit drugs and providing a safe supply are essential first steps in ending stigma and saving lives.

The stigma starts with the Prime Minister. It has been six years, and over 20,000 people have died from a poisoned drug supply. When will he finally take action?

Oral Questions

Hon. Carolyn Bennett (Minister of Mental Health and Addictions and Associate Minister of Health, Lib.): Mr. Speaker, our government recognizes that substance use is a health issue. We are looking at ways to divert people who use drugs away from the criminal justice system and toward supportive and trusted relationships. We will carefully review any request to decriminalize the personal possession of drugs on a case-by-case basis, as well as new ways to address the toxic drug supply. We will continue to use every tool at our disposal to end this national public health crisis.

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HOUSING

Mr. Matt Jeneroux (Edmonton Riverbend, CPC): Mr. Speaker, do you know how many buildings the federal government owns? It owns 37,246. Do you know how much land the federal government owns? It owns almost 41 million hectares. Conservatives had a plan in the last election to tie infrastructure dollars to housing prices. The Liberals' plan creates more housing inflation.

Can the minister tell us how a 20% rise in housing prices is actually helping Canadians?

• (1435)

Hon. Sean Fraser (Minister of Immigration, Refugees and Citizenship, Lib.): Mr. Speaker, every Canadian deserves a safe and affordable place to call home. With respect to the hon. member's question, I would point out that is precisely why our government brought in the national housing strategy, which has seen more than \$72 billion planned to help ensure Canadians get the housing they need. Since 2015, in just the past six years, our government supported the creation of nearly 100,000 new units and has repaired over 300,000 more across all housing programs, representing \$27.4 billion.

There is no shortage of investments we have made to make sure Canadians have places they can afford and that are safe to call home.

Mr. Matt Jeneroux (Edmonton Riverbend, CPC): That is unreal, Mr. Speaker. Does the member not realize that in downtown Toronto, the average price of a single detached family home is \$1.8 million?

Let us compare Canada with the rest of the G7. Housing supply is the highest. It is the lowest, but housing inflation is the highest. New builds are up. They are down 5.2%, and house prices are up 20%. Under what metric in the world is this plan working?

Hon. Sean Fraser (Minister of Immigration, Refugees and Citizenship, Lib.): Mr. Speaker, it is hard to figure out what metric the member is pointing to when we are confused about which is higher and which is lower.

Oral Questions

With great respect, what has not wavered is our commitment to ensuring that we are investing in building supply and investing in programs. There is a new rent-to-own program so people who are renting can afford a place to call home, which will have generational impacts. These are investments that are going to make homes more affordable for first-time buyers.

Whether it is housing affordability or building more affordable housing, our government has been committed, like no other government in the history of Canada from the moment we first formed government, and that is not going to cease. We know it is a problem and we are going to continue to address it.

Hon. Pierre Poilievre (Carleton, CPC): Mr. Speaker, despite the fact that Canada has the second-biggest housing bubble in the world, according to Bloomberg, and Vancouver and Toronto are the second and fifth most unaffordable housing markets on earth, according to Demographia, the Liberal media and the Liberal government want me to stop talking about housing inflation. Who does not want me to stop talking about it? Raj, who is an IT worker from Brampton. He has had to drive Uber in order to save up over 15 years to make a down payment on the average house in his community.

Will the minister tell Raj and other Canadians whether we have a housing bubble, yes or no?

Hon. Sean Fraser (Minister of Immigration, Refugees and Citizenship, Lib.): Mr. Speaker, we have to acknowledge that there has been a rapid and serious rise in the cost of housing across Canada, but we were wise to this fact long before the pandemic. That is why we advanced the national housing strategy beginning six years ago, which did not seem to get the support of the opposition parties at the time. We are going to continue to make the kinds of investments that have already seen 100,000 new units constructed and 300,000 units retrofitted.

We are going to continue to make the kinds of investments that will increase supply and reduce costs so more Canadians like Raj can enter the housing market in Canada.

Hon. Pierre Poilievre (Carleton, CPC): Mr. Speaker, it is no surprise that the finance minister is running away from her record on housing inflation. After all, since she took the job, prices are up by 20%. Since this government took office, they are up 58%, almost \$300,000. They really started to rise when the government started to flood financial and mortgage markets with \$400 billion of easy money, which has raised not only house prices but also land prices.

Now that we have the second-biggest housing bubble in the world, will the finance minister finally recognize that Canada has a housing bubble, yes or no?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, once upon a time, the Conservatives liked to cast themselves as the party of sound economic management, but now they have a finance critic who, as one columnist recently put it, “has breezily bent facts past the breaking point, notably by asserting that Canada has run the largest budget deficit in the Group of 20, and that Canada’s inflation rate is far higher than all its peers except the United States.”

Neither assertion is true, of course, so why should we listen to anything the member for Carleton has to say?

Hon. Pierre Poilievre (Carleton, CPC): Mr. Speaker, the member loves to quote the Liberal, state-funded media to defend herself. Well, let us do that. Let me quote *The Globe and Mail*, which wrote, “The Liberal government is asking Parliament to approve billions of new spending during a brief four-hour sitting in Ottawa but is facing questions because it has not released a full accounting of how it spent more than \$600 billion last year”.

We do not know how this deficit ranks because the Liberals will not release the public account. All we know is that they have flooded the economy with over a half trillion of deficit spending, driving up housing prices to be the second highest in the world.

I will go back to the same question: Does Canada have a housing bubble, yes or no?

● (1440)

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, maybe the Conservatives’ truth problem starts at the top. After all, a recent press conference by the Leader of the Opposition was littered with misleading statements about the economy. I will not get through all of them, but I will start.

He said that Canada has the lowest growth. The truth is that Q3 GDP numbers show our economy is growing faster than those of the U.S., U.K., Japan and Australia.

He said that Canada has the worst record on employment. The truth is that we have recovered over 106% of jobs lost since the pandemic, compared to just 83% in the U.S.

I could go on, but I have run out of time.

Hon. Pierre Poilievre (Carleton, CPC): Mr. Speaker, I wish she would go on because she loves to quote Liberal media commentators. One of the articles she quoted earlier actually talked about how she put manipulative media on Twitter, making history as the first minister in Canadian history to be sanctioned by a social media company for sharing misinformation online, so enough with the misinformation.

[*Translation*]

The question was about housing prices. According to Bloomberg, we have the second-largest housing bubble in the world.

Will the minister acknowledge that there is a housing bubble in Canada, yes or no?

[English]

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, it turns out it is not just the member for Carleton or the Leader of the Opposition who have a truth problem. Last week, the member for Kootenay—Columbia claimed that we are experiencing hyperinflation, but hyperinflation happens when inflation gets to 50% a month. The member for Lambton—Kent—Middlesex claimed that we are experiencing stagnation, but in the third quarter, our economy grew by 5.4% a month.

The Conservatives are yet again showing Canadians that they just cannot be taken seriously.

* * *

[Translation]

PUBLIC SAFETY

Ms. Kristina Michaud (Avignon—La Mitis—Matane—Matapédia, BQ): Mr. Speaker, this morning, La Presse published some disturbing stories from anonymous people, including a mother who wants to get a firearm to defend herself. This mother said, “Guns have become so commonplace in my community, that I’m wondering whether I should learn about them and get one to stay safe at home”. Even mothers are now wondering whether the only way to protect their children is to get a gun.

Does the minister understand how urgent it is to do something about firearms trafficking?

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, I thank my colleague for her question, especially on this solemn anniversary. We must work extra hard to address this issue, which is why our government has already taken meaningful action, such as banning assault-style weapons, adding resources at the border and working closely with the Government of Quebec to create spaces that are safe for everyone.

That is our government's commitment, and we will continue with this approach.

Ms. Kristina Michaud (Avignon—La Mitis—Matane—Matapédia, BQ): Mr. Speaker, we are at a crossroads. When members of the public come to believe that the solution to gun violence is to arm themselves, we have reached the limit. In this area, the federal government has failed miserably.

The minister consults, discusses, and sits back, while American gun culture takes hold in Canada. We are finally seeing our society sliding toward the ugliest aspect of our neighbour to the south because of the federal government's inaction.

What will it take for the government to wake up?

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, I share my colleague's concerns. That is why, last week, I had two virtual meetings with my Quebec counterpart and the leaders of PolyRemembers. Especially today, when we must acknowledge all the challenges we face in this area, we must work even harder and keep searching for concrete solutions.

Our government is committed to working with all members of the House on this issue.

Oral Questions

Ms. Kristina Michaud (Avignon—La Mitis—Matane—Matapédia, BQ): Mr. Speaker, this is urgent. Many assault weapons are prohibited, but everyone who owns one can keep it. This is urgent, but the government has not made a mandatory buyback one of its first priorities. This is urgent, but the government has not made banning handguns a priority either. The government wants to off-load that responsibility onto the provinces.

Today, 32 years to the day after what happened at the Polytechnique, does the minister realize that the women who survived are sick and tired of commemorations and pious words that are not backed up by action?

● (1445)

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, I can assure my colleague that mandatory buyback is one of the government's priorities. That was one of our promises during the election campaign. We will keep looking for other solutions, adding resources at the border, and finding and creating safe spaces for everyone. On this solemn anniversary day, in particular, that is our government's promise.

* * *

HEALTH

Mr. Luc Berthold (Mégantic—L'Érable, CPC): Mr. Speaker, the Liberal government seems to have learned nothing during the 20-month pandemic. It is not enough just to announce border restrictions to protect Canadians. We need to make sure they work.

Let us talk about the ArriveCAN app that is supposed to protect Canadians but is actually making things worse at the border. People are being misinformed. No one is answering the telephone to help them. Seniors without smart phones cannot travel. We are hearing stories of mandatory quarantines for triple-vaccinated people.

Can the Prime Minister come back down to Earth and get his border guidelines in order?

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, I want to reassure my colleague. The government is taking the necessary steps at the border to protect all Canadians. That is why we have put restrictions in place for travellers. That is also why we need more testing at the border to protect everyone.

With respect to ArriveCAN, over the past week, I have been talking with the CBSA about providing further instructions and more options for workers arriving at the border.

*Oral Questions**[English]*

Ms. Raquel Dancho (Kildonan—St. Paul, CPC): Mr. Speaker, in order for Canadians to cross the land border from the U.S. into Canada, they have to upload their proof of vaccination to the government's official app ArriveCAN, but this requirement has been poorly communicated, to say the least. Now, Canadians are finding out at the border upon returning home that, if someone fails to do this, they will be punished by their government with a mandatory two-week quarantine, and there is absolutely no recourse for them. MPs have received hundreds of complaints about this.

Canadians deserve reasonable accommodation at their own land border. When will they get it?

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, I want to assure my colleague and all members in this chamber that this government will never hesitate to put in place the public health care measures required at the border to protect all Canadians, particularly now, as we continue to learn more about the variant of concern, omicron. It is absolutely necessary that we exercise an abundance of caution at the borders to protect everyone so we can protect the progress we have made thus far.

With regard to ArriveCAN, I want to assure my colleague that I have spoken with CBSA, so there has been additional guidance to provide the opportunity for travellers to provide the information that is necessary on ArriveCAN in person at the borders.

Ms. Raquel Dancho (Kildonan—St. Paul, CPC): Mr. Speaker, if a person has received mandatory quarantine for spending, say, 30 minutes at the grocery store in the U.S., there is the government's response. It has no plan to help and is, by all accounts, pleased with its punishments of Canadians.

We need to look at the facts. The ArriveCAN app has crashed for some users. Many cannot access it because of poor cell service. Many seniors do not have smart phones, and for others, costly data plans are out of reach. I ask members to keep in mind that all of these people are double-vaccinated Canadians, yet there is no recourse for them. They were forced into quarantine because of poor communication from the government.

Something needs to be done about this, and something needs to be done about it now. Again, Canadians deserve reasonable accommodation. When will the Liberals start treating Canadians with respect?

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, I can assure you the best way to treat Canadians with respect is to protect them and to ensure that we are producing the necessary public health care measures at the border in the wake of the variant of concern, omicron.

Perhaps my colleague will just simply discard evidence and science. On this side of the House, we use that as the North Star to ensure we are protecting the health and safety of Canadians. We have done that throughout the pandemic, and we will continue to do so going forward.

Some hon. members: Oh, oh!

The Speaker: I would like to remind hon. members, as it was going so well, but suddenly I am trying to hear the question and an-

swer. I do not want to tax the hon. minister and ask him to repeat himself so that I can hear it, so I am going to ask everyone to be quiet, both when the questions are being posed and when the answers are being put forward.

The hon. member for Edmonton Strathcona.

* * *

● (1450)

SENIORS

Ms. Heather McPherson (Edmonton Strathcona, NDP): Mr. Speaker, the guaranteed income supplement is designed to help seniors living below the poverty line pay for rent, groceries and medications. Losing the GIS because they received the CERB they were entitled to means that the most vulnerable, the poorest seniors in every riding in this country, can no longer afford to get by.

While Canadian seniors are losing their homes, the Liberal government continues to drag its feet rather than fix this problem. Will the minister immediately exempt CERB income from the GIS calculations so Canadian seniors can stop suffering?

Hon. Kamal Khara (Minister of Seniors, Lib.): Mr. Speaker, I think we can all agree just how challenging this pandemic has been for our seniors, but every single step of the way, our government has been there to support seniors, especially those most vulnerable, by strengthening their GIS. We moved extremely quickly to provide immediate and direct financial support for seniors.

When it comes to CERB and GIS, we know it has been hard on some seniors this year. I can assure the hon. member that we are working hard to find a solution to ensure that those affected will have the supports they need. We have always been here for seniors. We are going to continue to be there for them.

* * *

HEALTH

Mr. Taylor Bachrach (Skeena—Bulkley Valley, NDP): Mr. Speaker, Canadians want travel rules that keep us safe from the omicron variant. Instead, the government has introduced measures that are unclear and inconsistent. This has caused chaos at the airport, and it puts travellers' safety at risk.

Last week, the U.S. introduced stricter testing requirements for Canadians, and omicron has now been identified in over a dozen states, but Canada's new testing rules do not apply to flights coming from the U.S. Could the minister explain why?

Oral Questions

Hon. Jean-Yves Duclos (Minister of Health, Lib.): Mr. Speaker, every opportunity to answer such questions is a welcome opportunity. I thank the member for providing one. He is right that we need to be focused on the health and safety of Canadians. We need to do this in a science-based manner, and we also need to follow public health advice.

While I hear some interesting comments from the Conservative MPs, I would like to ask them whether they have heard about the science of vaccinations. Maybe they would like to commend that in their own party.

* * *

[Translation]

GENDER-BASED VIOLENCE

Ms. Anju Dhillon (Dorval—Lachine—LaSalle, Lib.): Mr. Speaker, 32 years ago today, Canadians were shocked and horrified to learn that 14 young women with a promising future ahead of them had been murdered in a senseless act of misogyny, hatred and gender-based violence. Those women were robbed of the chance to achieve their dream.

Can the Minister of Public Safety tell the House what our government plans to do to prevent such a tragedy from ever happening again?

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, I thank my colleague for the question, and I join her in honouring the 14 young women who were murdered in a cowardly attack just for being women.

Our government has taken action by implementing background checks to prevent people with a history of domestic abuse from obtaining a firearm. We are still considering other measures we could take to end gender-based violence and allow women to achieve their full potential every day.

* * *

[English]

PUBLIC SAFETY

Hon. Ed Fast (Abbotsford, CPC): Mr. Speaker, last week, I asked the government when it would make a decision on banning Huawei. I have received no answer, so I am going to try again. Canada's most trusted security partners, including the U.S., have banned the use of Huawei technology in their 5G networks. Our country is the only one yet to say no to Huawei.

The Prime Minister promised to make this decision before the 2019 election. Here we are three years later, with another election behind us, but still no decision. When will the government and the minister make a decision?

Hon. Mary Ng (Minister of International Trade, Export Promotion, Small Business and Economic Development, Lib.): Mr. Speaker, our government will continue to ensure that Canadian networks are kept safe and secure. Canadians can be assured that we will not compromise on matters of national security.

While we cannot comment on specific companies, an examination of emerging 5G technology and the associated security and economic considerations is under way. We have been clear that this

analysis will take into account important domestic and international considerations, and we will make the best decision for Canadians.

• (1455)

Hon. Ed Fast (Abbotsford, CPC): Mr. Speaker, failing to act is compromising national security. Last month, the minister met with President Biden's technology adviser to collaborate and talk about national security. There was a lot of talk but no action by the minister. Meanwhile, our telecoms have spent close to a billion dollars on Huawei equipment and now want to have taxpayers compensate them for that. Can members imagine that?

Will the minister say no to compensation? Will she finally say no to Huawei?

Hon. Mary Ng (Minister of International Trade, Export Promotion, Small Business and Economic Development, Lib.): Mr. Speaker, we have been clear that the work under way takes into account the important domestic and international considerations. We will ensure to always make the best decision for Canadians. We will not compromise matters of national security.

[Translation]

Mr. Pierre Paul-Hus (Charlesbourg—Haute-Saint-Charles, CPC): Mr. Speaker, this side of the House has been telling the government for three years now that Huawei poses a threat to Canada's national security. In 2019, Ralph Goodale, who was the minister of public safety and emergency preparedness at the time, was ready to address this. That was two years ago. All members of the Five Eyes have banned Huawei, except Canada. Even the Canadian industry has severed all ties with that company.

Will the Prime Minister finally make up his mind, or will he leave the decision up to the next Conservative government?

[English]

Hon. Mary Ng (Minister of International Trade, Export Promotion, Small Business and Economic Development, Lib.): Mr. Speaker, our government will always ensure that our Canadian networks are safe and secure. Canadians can be assured we are not going to compromise on matters of national security.

We are not going to comment on specific companies, but members should know that the examination of emerging 5G technology and the associated security and economic considerations is under way. We will always act in the best interests of all Canadians.

*Oral Questions**[Translation]*

Mr. Pierre Paul-Hus (Charlesbourg—Haute-Saint-Charles, CPC): Mr. Speaker, I have to wonder whether the minister has the information. All the proper Canadian agencies have already conducted their investigations and national security audits, and the reports have been filed. We all know the answer, and everyone knows that Huawei poses a threat to 5G and to Canada's national security.

Could the minister be honest and set a date for when Canada will finally say no to Huawei?

Hon. Mary Ng (Minister of International Trade, Export Promotion, Small Business and Economic Development, Lib.): Mr. Speaker, our government will continue to ensure the security of Canada's networks, and Canadians can be assured that we will not compromise on matters of national security. As we have clearly indicated, our approach will take into account important domestic and international considerations, and we will make the best possible decision for Canadians.

* * *

GENDER-BASED VIOLENCE

Ms. Andr anne Larouche (Shefford, BQ): Mr. Speaker, Quebec has announced that it plans to require tracking bracelets to keep perpetrators of domestic violence away from their victims. This is good news, but the federal government must follow suit. The coroner recommended the use of this bracelet in response to the brutal killing of Maryl ne Levesque in 2020.

If Ottawa does not also require the use of a bracelet, Ms. Levesque's murderer would never have had to wear one, since his parole was managed at the federal level. Will Ottawa follow Quebec's lead and require that violent men wear a tracking bracelet?

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, I assure my colleague that I have recently discussed the implementation of the electronic bracelet with my Quebec counterpart. We are committed to continuing that discussion and to finding investments and additional resources to combat violence against women. We will continue to work together.

Ms. Andr anne Larouche (Shefford, BQ): Mr. Speaker, enough with the lip service. If the federal government does not step up here, then perpetrators of the most serious crimes against women will not be required to wear a tracking bracelet. Quebec wants to make criminals under its jurisdiction, meaning offenders sentenced to less than two years, wear a bracelet, but perpetrators of more serious crimes that fall under federal jurisdiction, who represent the greatest danger, would not be required to do the same. It is hard to imagine a clearer example of a double standard. This bracelet can save lives.

Will the minister make a commitment today to require that offenders under federal jurisdiction wear a tracking bracelet?

• (1500)

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, as I already said, I will continue discussions with my Quebec counterpart about implementing the tracking bracelet, but we will not stop there. We will continue to look for other ways to work

together on combatting domestic violence and keeping communities safe for everyone.

* * *

*[English]***IMMIGRATION, REFUGEES AND CITIZENSHIP**

Mr. Jasraj Singh Hallan (Calgary Forest Lawn, CPC): Mr. Speaker, Afghan refugees who managed to escape to third countries are being deported back into the hands of the Taliban because their visas are expiring. This Liberal-made immigration backlog is delaying their applications and putting their lives at risk. Canada had months to prepare for the situation in Afghanistan, but the Prime Minister called a selfish election, abandoning those who serve Canada and avoiding any accountability.

On what date will the promised 40,000 Afghan refugees come to Canada, or will they become another abandoned Liberal promise?

Hon. Sean Fraser (Minister of Immigration, Refugees and Citizenship, Lib.): Mr. Speaker, the situation in Afghanistan is nothing short of heartbreaking. The reality is that we have made a substantial contribution by committing to bringing in 40,000 Afghan refugees, and I point out to the member that the effort is well under way. More than 4,000 Afghan refugees are living in Canada today, another 1,200 in third countries have been approved to come to Canada and another 9,500 who are still in Afghanistan have been approved for onward travel.

I am pleased to take this occasion to share with the hon. member that on Thursday evening of last week, the first cohort of privately sponsored refugees landed in Toronto, with 243 new Canadians who will be calling our country their home going forward.

Mr. Brad Redekopp (Saskatoon West, CPC): Mr. Speaker, on August 15, Afghanistan fell to the Taliban, endangering thousands of Afghans who worked and fought beside Canadian Forces. It is the same Taliban that has hunted and killed our soldiers over the past 20 years. The government has committed to taking in 40,000 Afghans but to date has taken less than 10% of that number. In the meantime, another 10,000 Afghans are frantically wondering who will get to them first: the Canadian government processing their paperwork or the Taliban.

Why is the immigration minister playing roulette with 10,000 Afghan lives?

Hon. Sean Fraser (Minister of Immigration, Refugees and Citizenship, Lib.): Mr. Speaker, I take enormous exception to the allegation that any member of the House is playing roulette with the lives of some of the world's most vulnerable people. The reality is that Canada stepped up to make a world-leading commitment to bring 40,000 Afghan refugees here. As the member pointed out, there are more than 4,000 here today, 1,200 more in third countries and 9,500 more in Afghanistan.

The hypocrisy behind the question is something the member should be ashamed of, as he campaigned on a commitment months ago during the election to completely eliminate the government-assisted refugee stream altogether, which brought 4,000 people here.

Mr. Marc Dalton (Pitt Meadows—Maple Ridge, CPC): Mr. Speaker, an Afghan refugee in my riding has been struggling for years to get her husband to Canada. The Taliban has now frozen their funds. My staff have been communicating with another hopeful refugee. On August 16, when the Prime Minister called an unnecessary election, her little girl was tragically trampled to death in the chaos at the Kabul airport, where our government was utterly unprepared.

When can these desperate people, who have endured such terrible suffering, expect the Liberals to finally clear bureaucratic backlogs and get them safe passage to Canada?

Hon. Sean Fraser (Minister of Immigration, Refugees and Citizenship, Lib.): Mr. Speaker, with great respect, the attempt to politicize the question of the resettlement of 40,000 Afghan refugees is entirely inappropriate. The reality is that every morning when I wake and every night when I go to bed—

Some hon. members: Oh, oh!

The Speaker: Could I ask the hon. Minister of Immigration to start from the top? I have someone yelling in my ear and I cannot hear a thing.

Hon. Sean Fraser: Mr. Speaker, I hope the hon. members opposite will take the occasion to allow all members to speak when it is their turn.

The opposition is asking questions about the timing of an election when we are dealing with the worst humanitarian crisis that could be happening in the world today. We have made one of the most substantial commitments to resettle 40,000 Afghan refugees in our country. More than 4,000 are here today. In the election the member referred to, he personally campaigned on a commitment to eliminate the government-assisted refugee stream.

With respect, during extraordinarily challenging circumstances last year, Canada resettled more than one-third of the global total of refugees settled anywhere on the planet. This is a good story. Our commitment will not waver.

* * *

• (1505)

[*Translation*]

PUBLIC SAFETY

Ms. Emmanuella Lambropoulos (Saint-Laurent, Lib.): Mr. Speaker, gun violence is becoming more and more of a problem in Montreal, and women and youth are the victims.

We must reduce illegal access to firearms to improve public safety. As a government, we owe it to Canadians to implement measures to prevent firearms from being illegally diverted and to address all the ways in which that is happening. It takes investments and government collaboration to deal with theft, straw purchases and cross-border smuggling.

Can the Minister of Public Safety inform the House of the measures the government is taking to protect Quebeckers from illegally smuggled firearms?

Hon. Marco Mendicino (Minister of Public Safety, Lib.): Mr. Speaker, I thank my colleague for her question. I stand with her

against the gender-based violence and misogyny that led to the tragedy at École Polytechnique.

I recently spoke with members of PolySeSouvient, and I promised to continue to work closely with them.

The guns that we banned, like the one used at École Polytechnique, will be subject to a mandatory buyback or rendered inoperable. We cannot change the past, but we must learn from it.

* * *

[*English*]

HOUSING

Mr. Adam Chambers (Simcoe North, CPC): Mr. Speaker, over the weekend, the former CEO of CMHC claimed that the government should tax Canadians' primary residences to cool the housing market. This policy would devastate millions of Canadians and many in my riding who rely on their home equity to fund their retirement.

Will the Minister of Finance commit today in the House to Canadians that the government will not impose new taxes on primary residences to fund the government's runaway spending?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Yes, I will, Mr. Speaker, and any suggestion otherwise is absolutely false.

* * *

DISASTER ASSISTANCE

Mr. Dane Lloyd (Sturgeon River—Parkland, CPC): Mr. Speaker, Canadians were shocked to learn that the government failed to engage the Americans through the International Joint Commission to find a solution to repeated flooding in British Columbia. The flooding of the Nooksack River in Washington state has spilled over into Canada, resulting in billions in damages to British Columbians. Reports indicate that a mere \$29-million investment could have prevented this damage.

Why did the Liberal government fail yet again to engage our closest ally to protect Canadians from this disaster?

Hon. Bill Blair (President of the Queen's Privy Council for Canada and Minister of Emergency Preparedness, Lib.): Mr. Speaker, while I commend the member opposite for the clarity of his hindsight, the reality is that there are always ongoing important discussions between ourselves and our American partners with respect to keeping our communities safe.

Oral Questions

With respect to the flooding of the Nooksack River, there have been and will continue to be ongoing discussions and work to ensure that water overflowing from the river does not impact upon our communities. That work is going on now.

* * *

SMALL BUSINESS

Mr. Gerald Soroka (Yellowhead, CPC): Mr. Speaker, there is a massive labour shortage across this country, especially in my riding. Local and small businesses in Edson and Hinton are challenged to fill positions in convenience, clothing and hardware stores, to name a few. Small businesses are major contributors to local employment and they are hurting. Some have closed; others have lost their business.

When will the Liberal government start making all local and small businesses a priority in our communities?

Hon. Carla Qualtrough (Minister of Employment, Workforce Development and Disability Inclusion, Lib.): Mr. Speaker, small businesses are absolutely a priority of our government. In fact, it is thanks to them that Canada gained 154,000 jobs last month. Our employment rate has gone down for the sixth consecutive month in a row, and in fact, we have gained 106% of the jobs lost during the pandemic.

We do have labour shortages, but we have a plan to address them. We have made the largest investment in training, we are investing in child care, we are investing in youth employment and we are investing in bringing talented workers to Canada. We will not rest until we address this.

* * *

GENDER-BASED VIOLENCE

Mrs. Rechie Valdez (Mississauga—Streetsville, Lib.): Mr. Speaker, 32 years ago, 14 young lives were taken at École Polytechnique, and Canada was changed forever. My thoughts are with the families of each victim as we remember this sombre anniversary. Gender-based violence has devastating impacts, and the pandemic has increased existing challenges for women fleeing violence.

Can the Minister of Women and Gender Equality and Youth share with the House how we are addressing the rise of gender-based violence in Quebec and across Canada?

• (1510)

[Translation]

Hon. Marci Ien (Minister for Women and Gender Equality and Youth, Lib.): Mr. Speaker, I would like to thank my hon. colleague for his hard work.

[English]

When the world shut down from COVID-19, frontline workers did not stop. They rolled up their sleeves and they got to work; they were there. That is why our government moved quickly, we saw what was happening in real time, to support more than 1,200 women's shelters and gender-based violence organizations, including sexual assault centres.

Through budget 2021, we are building on that work; \$3 billion in five years to advance those initiatives.

* * *

AUTOMOBILE INDUSTRY

Mr. Brian Masse (Windsor West, NDP): Mr. Speaker, the Liberal government has spent years reacting to automotive announcements, like plant closures and job losses, after the decisions were already made. Here we go again, with the government reacting to news that the U.S. incentive on electric vehicles will effectively penalize our local workers and Canadian products.

While workers are left worrying about their futures, the Liberals are waiting to start a lengthy court case that will take years to resolve.

It is well past the time to protect Canadian workers and our auto industry. If the U.S. implements discriminatory policies, will the Prime Minister remove American vehicles from continuing to receive the currently publicly funded Canadian vehicle incentive program? Will the Prime Minister do that and stop the American incentives from Canadian taxpayers?

Hon. Mary Ng (Minister of International Trade, Export Promotion, Small Business and Economic Development, Lib.): Mr. Speaker, just a few days ago, I returned, along with colleagues on all sides of the House, to advocate in the U.S. on this issue, standing up for Canadian workers, standing up for Canadian businesses. This work continues.

I want to thank all my colleagues on all sides of the House for this advocacy. Over 50 meetings took place. We are going to continue to do this really important work for our workers and for our businesses.

* * *

JUSTICE

Mr. Mike Morrice (Kitchener Centre, GP): Mr. Speaker, last week, we had another overdose alert in Waterloo region.

In just three days, frontline workers responded to 42 suspected overdoses. So far this year, we have lost 120 community members to a poisoned drug supply. Each one was a preventable death.

Even the Canadian Association of Chiefs of Police has joined calls to decriminalize simple possession of illicit drugs. They have recommended removing mandatory criminal sanctions, replacing them with harm reduction and treatment services.

When will the government move forward with decriminalization and save lives?

Hon. Carolyn Bennett (Minister of Mental Health and Addictions and Associate Minister of Health, Lib.): Mr. Speaker, I congratulate the member on his election to the House.

Our government will do anything it takes to save lives and reduce the harms of the worsening toxic drug supply in opioid and overdose crisis. On the section 56 exemption from British Columbia, as well as Vancouver, we are reviewing them on an urgent basis. Our government knows that other jurisdictions are also looking at health-based approaches, and we are working with our partners to find innovated solutions.

We know there is much more to do, including addressing issues like safe supply, and we will remain engaged with the member and his community to advance these health-based approaches.

Mr. Richard Cannings: Mr. Speaker, I rise on a point of order. There have been discussions among the parties and if you seek it, I hope you will find unanimous consent for the following motion: That given that entrepreneurs are the heart of the Canadian economy, creating jobs and supporting local economies and that poor program design has resulted in start-ups that opened at the beginning of the pandemic being unable to access most federal COVID supports, forcing them to struggle through the pandemic on their own—

The Speaker: One moment, please. The hon. member for La Prairie is rising on a point of order.

• (1515)

[*Translation*]

Mr. Alain Therrien: Mr. Speaker, the interpretation was not working and we did not hear the French version of my NDP colleague's comments.

The Speaker: I thank the member for his intervention. It was not a problem with the interpretation, but a problem with the system.

[*English*]

I will ask the hon. member for South Okanagan—West Kootenay to start from the top with his request for unanimous consent, and then we will go from there.

Mr. Richard Cannings: Mr. Speaker, there have been discussions among the parties and if you seek it, I hope you will find unanimous consent for the following motion: That given that entrepreneurs are the heart of the Canadian economy, creating jobs and supporting local economies and that poor program design has resulted in start-ups that opened at the beginning of the pandemic being unable to access most federal COVID supports, forcing them to struggle through the pandemic on their own while facing competition from established businesses that had access to multiple supports, the House call on the government to provide supports for these start-up businesses that have been left out of the government help as the pandemic continues.

The Speaker: All those opposed to the hon. member moving the motion will please say nay.

Some hon. members: Nay.

Routine Proceedings

ROUTINE PROCEEDINGS

[*English*]

ÉCOLE POLYTECHNIQUE

Hon. Marci Ien (Minister for Women and Gender Equality and Youth, Lib.): Mr. Speaker, on this day 32 years ago, an unspeakable tragedy shook Canada to its core. A gunman walked into a classroom at Polytechnique Montréal, separated the women from the men then opened fire on the women. Fourteen women were murdered, 13 more wounded and many communities shattered.

[*Translation*]

Today, we remember Geneviève Bergeron, Hélène Colgan, Nathalie Croteau, Barbara Daigneault, Anne-Marie Edward, Maud Haviernick, Maryse Laganière, Maryse Leclair, Anne-Marie Lemay, Sonia Pelletier, Michèle Richard, Annie St-Arneault, Annie Turcotte and Barbara Klucznik-Widajewicz.

[*English*]

My heart goes out to the families and friends who lost a loved one on December 6, to those who were wounded and to all those whose lives were turned upside down by this tragedy.

[*Translation*]

Today and every day, we pay tribute to the incredible courage of the survivors, who found the strength to keep on living.

[*English*]

All Canadians deserve to feel safe in their communities, but gun violence is on the rise in Canada's largest cities. We have taken strong action on gun control, but we recognize that there is still much work to do.

[*Translation*]

Nobody should have to face violence because of who they are, yet that is the terrifying reality for far too many women, youth and people of every gender identity and expression.

[*English*]

I stand in solidarity with all survivors and families of those impacted by gender-based violence.

As we reflect on the ongoing impact of gender-based violence, I want to acknowledge that some communities are impacted more than others. I think of women and girls, notably women and girls who are indigenous, Black, racialized, newcomers; women and girls living in northern, rural and remote communities; women with disabilities; seniors; and LGBTQ2 people. The devastating impacts of gender-based violence expand beyond those who directly experience it. Violence has long-lasting health, social and economic effects that can span across generations. This creates cycles of violence within families and sometimes among communities.

Routine Proceedings

The COVID-19 pandemic has amplified the inequities in society and the urgency for a national action plan to end gender-based violence.

I want to inform Canadians that we are on track to getting it done. We have heard from survivors, advocates and experts across the country that we need to do more. That is why we swiftly supported Canadian organizations providing life-saving services for anyone experiencing violence during the pandemic. Our government committed to \$300 million in funding to more than 1,200 organizations. This has meant that 1.3 million women, mothers and young children had a safer place to turn to. We supported women's shelters, indigenous off-reserve shelters, sexual assault centres, women's organizations and other organizations providing supports and services to those experiencing gender-based violence, and we are committed to doing more.

In the past few weeks, I have met with gender-based violence and equality-seeking organizations in Halifax, in Toronto, in Ottawa and more. I have listened to them. I have listened to the needs of partners right across the country, and I am determined to continue supporting survivors. These organizations have worked tirelessly to serve women and families in city centres and in rural and remote areas throughout the harshest months of this pandemic. They did not get a break. They rolled up their sleeves, put their masks on and went straight to work. I assured them, and I assure all members here today, that our government will be by their side. We will ensure they have the necessary resources to sustain strong, viable and inclusive services for survivors.

Our work does not stop here. After all, it is on all of us to be part of the solution, because everyone, in fact, has a responsibility to stand against misogyny, sexism and hate.

As my hon. colleagues know, we are nearing the end of the 16 Days of Activism Against Gender-Based Violence, which runs until Human Rights Day on December 10. This year's theme, "16 Days and Beyond", challenges every single person in Canada to step up, to speak out and to take action against acts of gender-based violence, not just during the 16 days of activism but each and every day. Gender equality benefits all of us and everyone has an important role to play in advancing it.

Across Canada, thousands of men and boys are joining the cause for gender equality and we must continue to grow their ranks by calling men into the movement and by having these important conversations with our sons. Men and boys are an important part of this conversation, not just as allies in the struggle for gender equality but because they too are impacted by gender-based violence. We need positive role models to ensure a culture of respect, a culture that values every individual and every community.

The 14 young women who died at École Polytechnique 32 years ago will be always in our thoughts, always in our hearts. They will live on as a constant reminder of what misogyny and hate can do. Everyone has the right to live free from violence and we will continue to work with Canadians to end it in all its forms.

• (1520)

[*Translation*]

Mrs. Dominique Vien (Bellechasse—Les Etchemins—Lévis, CPC): Mr. Speaker, on December 6, 1989, a horrific event took place at Montreal's École Polytechnique. On that day, 32 years ago, 14 women were murdered because they were women.

The victims of the tragedy were Geneviève Bergeron, Hélène Colgan, Nathalie Croteau, Barbara Daigneault, Anne-Marie Edward, Maud Haviernick, Barbara Klucznik-Widajewicz, Maryse Laganière, Maryse Leclair, Anne-Marie Lemay, Sonia Pelletier, Michèle Richard, Annie St-Arneault and Annie Turcotte.

I cannot help but think of the horror, the violence and the fear those women experienced. It is our duty to remember.

• (1525)

[*English*]

These young women, many in their twenties, had their whole lives ahead of them, but hatred and misogyny shattered their dreams and stole their lives. On this day, we remember those women. We also commemorate women in Canada and around the world who have been victims of hate and violence in all its forms: domestic violence, harassment and sexual assault.

[*Translation*]

On December 6, 1989, the Polytechnique massacre shook the entire country, wounding it to the core. That day, Canadians realized that gender equality was far from a given. That tragic event also showed us how fragile progress can be. It is a daily battle. We must fight that battle on behalf of the victims, their families and their colleagues, as well as the women who are even now victims of violence.

The memory of the Polytechnique victims is alive and well. It lives on in ambitious girls and young women who are not afraid to move ahead in their lives, to overcome obstacles, and who strive to make their dreams come true. It also lives on in the female students who graduate from college or university and succeed in having the engineering or professional career they have always wanted.

Their memory also lives on in the women who are here in the House today, those who chose to enter politics to stand up for people, to protect the most vulnerable or to advance just causes. It lives on in indigenous women who are not afraid to speak out against racism and prejudice and who are building safe communities. Their memory lives on in the frontline workers who assist victims and help them find a new home.

Their memory also lives on in the hearts of their parents, families, colleagues and activists who fight every day for greater social equality. Their memory lives on here, today, in Parliament in Ottawa.

For the past two years, our country has been going through an unprecedented health crisis. In many households, the pandemic has exacerbated mental health issues. It is more important than ever that we be there to help victims. We must continue to take action to fight another pandemic, the shadow pandemic. The shadow pandemic is the rising violence against women and the increasing rate of femicide across the country. Too many women continue to be bullied by their abusers every day. This spring, Senator Boisvenu and the member for Lévis—Lotbinière introduced a bill to better monitor men accused of domestic violence. Everything we do contributes to making our society more just, more equal and more humane. That is our mission.

[English]

The memory of the victims of the Polytechnique massacre is a reminder that we must not give up. Thirty-two years ago, 14 women were murdered because they were women, but on this dark day, let us continue this fight in their names. We must unite, act and replace words with action. Together, let us put an end to misogyny. Together, let us ensure that no one else is left in distress. Together, let us ensure that violence against women is never again tolerated, whether it is online, in schools or in the workplace.

[Translation]

It is time to focus on the victims. There have been too many tragedies and too much violence, and it is our duty to put a stop to it. Today, Canadians and Quebecers remember the victims of the École Polytechnique massacre. This type of tragedy must never happen again. We owe it to the victims.

In closing, I want to highlight the determination of one young woman, Willow Dew, a student at the University of Alberta, who received the Order of the White Rose, created in memory of the École Polytechnique victims. This order is given to a Canadian engineering student who chooses to pursue graduate studies. Like her mother before her, who is also an engineer, she has overcome obstacles and proven that women have a place anywhere and that they can realize their dreams.

• (1530)

Ms. Andréanne Larouche (Shefford, BQ): Mr. Speaker, what goes through a man's mind when he pulls out a gun to kill a woman simply because she is a woman? What goes through a man's mind when he orders young women who are strangers to him to line up against the wall, simply because they are women?

We have been asking the same questions for the past 32 years. The questions pile up, but we still have no answers. What goes through a man's mind today when he puts his hands around the neck of a woman he once loved? What is going on in his head? How did he get to the point of killing a woman? I do not understand. What goes through the minds of all these men when they read a newspaper or watch television and see that there have been 18 femicides in 2021? Do they feel the same fear, shame and anger that I do, that we do? Do they also feel like screaming, crying and vomiting? I think so. I do not understand.

A total of 14 women were killed by one man at Polytechnique in 1989. In 2021, 18 women have been killed by men. Are things getting any better? Does anyone think things are better? What lessons

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have we learned from Polytechnique? Honestly, what have we learned?

Geneviève Bergeron, Hélène Colgan, Nathalie Croteau, Barbara Daigneault, Anne-Marie Edward, Maud Haviernick, Barbara Klucznik-Widajewicz, Maryse Laganière, Maryse Leclair, Anne-Marie Lemay, Sonia Pelletier, Michèle Richard, Annie St-Arneault and Annie Turcotte: how many times will we have to name these young women before things change? Nothing changes. The tragedies continue, and the deaths, the candlelight vigils, the commemorations and the lists keep growing. Elisapee, Marly, Nancy, Myriam, Carolyne, Nadège, Rebekah, Kataluk, Dyann, Zoleikha, Lisette, Nathalie, Elle, Andréanne, Anna, Romane and Elle: every name is a tragedy, every name reminds us of pain, suffering, and our responsibility.

When a person, an individual, does something once, then it is their personal responsibility and we do not need to shoulder the burden of a one-time incident. However, when that thing keeps happening over and over, once, twice, 10 times, 18 times, ad infinitum, and we anticipate the inevitable next occurrence that will come every year, without fail, then the responsibility for these hundreds or thousands of individual acts is no longer individual, but collective. We owe it to these women to do something about this. We have an obligation.

• (1535)

As parliamentarians, we all have individual responsibility. We have a duty to take action, because we are in a position to take action.

Not many people have this power, but we do. I do not believe in unicorns, and I am not saying that if the House took action, that would be the end of violence against women. I am not naive. However, if we restrict access to guns, if we better protect victims from their assailants, if we take the situation of women in the army and indigenous women seriously, if we put our minds to it, maybe we could save one woman, then two, then 10, then 18, or maybe not, but we will have really tried.

I do not know what goes through a man's mind when he takes out a gun to shoot women because they are women, but I do know that we need to limit access to guns.

I do not know what goes on in a violent man's mind, but I do know that we must do everything we can to help a woman who feels threatened by him get away from him. I know that there are millions of men who read the papers or watch the news and feel ashamed. They fear that men will kill, hurt or break women simply because they are women. There are men who want to scream, cry and vomit out of fear for their sisters, their daughters, their mothers, out of fear for all women.

All of us, men and women, must come together to take action on behalf of the young women of École Polytechnique and all of the women who have died since. We can and must do something.

On behalf of the Bloc Québécois and, I would think, all members in this House, I want to say to the young women of École Polytechnique: “We will not forget you. We will not forget our obligation and our responsibility to you.”

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Now is the time for action.

Ms. Leah Gazan (Winnipeg Centre, NDP): Mr. Speaker, it has been 32 years since the femicide at École Polytechnique, in which 14 women were killed and 14 others were injured.

Communities, families and friends were plunged into grief when they lost a loved one to this massacre, this senseless act of violence.

[English]

This hate crime attacked the fundamental rights of women and girls everywhere, including our right to security, equality and education. It shook Canada's conscience to the core. It was a day of reckoning, forcing the country to accept this crisis of violence women are faced with, far too often absent of supports as a result of generations of systems that have chosen to turn a blind eye to this violence, a crisis of violence that continues to be perpetuated.

As we gather here today to mourn the massacre at the École Polytechnique, the crisis of violence against women and diverse-gendered peoples continues. In 2020 alone, 160 women were murdered, which means a woman is killed every other day on average, and girls younger than 11 years old experience the highest rate of homicides.

Tragically, rates of violence have increased even more since the pandemic and are 400 times higher in some areas. Inaction costs lives. Almost 50% of femicides are committed by an intimate partner, and women are five times more likely to be killed by their intimate partner.

This experience of violence impacts all age groups, including half of all women, who experience at least one incident of gender-based violence before the age of 16, 30% of women 15 or older, who report experiencing a sexual assault at least once, and the over 6,000 women and children who sleep in shelters on any given night because it is not safe at home.

This epidemic of violence is even more pronounced when viewed through an intersectional lens. Women with a disability are three times more likely to experience violent victimization compared to women living without a disability. Trans individuals are more likely to have experienced violence by the age of 15 and are also more likely to experience inappropriate behaviours in public, online and at work than cisgender individuals.

Indigenous women are killed at seven times the rate of non-indigenous women. This is a recognized genocide against indigenous women, girls and two-spirit individuals that has become so normalized in this country that when a young Gitksan woman's door was violently torn down by the RCMP using an axe and a chainsaw, it barely made the news.

Today I wish to honour all the women who lost their lives at École Polytechnique by calling on all members of this House to stop talking and immediately act. Gender equality is a human right, and failing to protect this fundamental right results in the loss of life, precious lives: our sisters, our mothers, our aunties, our grandmothers and our daughters.

• (1540)

[Translation]

My NDP colleagues and I want the families who lost a loved one in this tragic massacre to know that, today and every day, we honour Geneviève Bergeron, Hélène Colgan, Nathalie Croteau, Barbara Daigneault, Anne-Marie Edward, Maud Haviernick, Maryse Laganière, Maryse Leclair, Anne-Marie Lemay, Sonia Pelletier, Michèle Richard, Annie St-Arneault, Annie Turcotte and Barbara Klucznik-Widajewicz.

[English]

Enough is enough. We remember them. We will remember them through our actions. May they feel, for all eternity, the warm embrace of their ancestors. They are loved.

• (1545)

Mr. Mike Morrice: Mr. Speaker, I rise on a point of order to seek the consent of the House to deliver a reply on behalf of the Green Party.

The Speaker: All those opposed to the hon. member moving the motion, please say nay.

An hon. member: Nay.

The Speaker: I am afraid we do not have unanimous consent.

Mr. Charlie Angus: Mr. Speaker, on a point of order, I just wanted to get clarification on such a serious issue as this. I would be surprised if the Conservatives would play partisan games when we are talking about the memorial that needs to be done and that every member should be a part of.

There may have been a mistake from the member, but I think that she may be asked the question again because it shows really abominable politicization of such a horrific—

The Speaker: We are starting to get into debate. I am afraid the question was asked and we cannot ask it over and over again, but I want to thank the hon. member for his interjection.

* * *

[Translation]

INTERPARLIAMENTARY DELEGATIONS

Mr. Marc Serré (Nickel Belt, Lib.): Mr. Speaker, pursuant to Standing Order 34(1), I have the honour to present to the House, in both official languages, two reports of the Canadian Section of ParIAmericas.

The first report concerns its participation in the 17th ParIAmericas Plenary Assembly, which was held virtually on November 16 and 29, 2020. The second report concerns its participation in the 5th Gathering of ParIAmericas' Parliamentary Network on Climate Change, which was held virtually on June 4, 15 and 25, 2021.

[English]

PETITIONS

RUSSIA

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Mr. Speaker, I have a number of petitions to present to the House today.

The first petition is with respect to the human rights situation in Russia. The petitioners note the passage of the Sergei Magnitsky act in a previous Parliament. They note concerns about serious corruption in Russia, including the attacks on Alexei Navalny, a Russian opposition leader, and over 10,000 people being detained during peaceful protests against the unlawful imprisonment of Alexei Navalny.

The petitioners call upon the Government of Canada to impose sanctions such as the Special Economic Measures Act and the Sergei Magnitsky Law against individuals and entities involved in human rights violations in Russia, including those who were responsible for human rights violations and have been identified by anti-corruption and rights activists as enablers of the Putin regime. It also calls on the government to offer asylum to Russian activists and dissidents who face political persecution for expressing their political views or attending peaceful protests and to strengthen our work in defence of fundamental human rights and seeking the release of political prisoners in Russia.

• (1550)

SMALL BUSINESS

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Mr. Speaker, the second petition draws the attention of the House to challenges faced by small businesses during the COVID-19 pandemic. It calls on the government to adopt the 2017 recommendations of the Alberta skills for jobs task force.

CARBON CAPTURE AND STORAGE

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Mr. Speaker, the third petition calls on the government to support the expansion of carbon capture and storage technology as a critical force for responding to global carbon emissions. It calls on the government to recognize the role of that technology and support its use and deployment.

CONVERSION THERAPY

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Mr. Speaker, the next petition highlights concerns associated with the definition of conversion therapy that was used in Bill C-6, in the last Parliament. Those concerns persist with respect with Bill C-4. The petitioners call on the House of Commons to ban all practices designed to coerce or degrade persons into changing their sexual orientation or gender identity. It also calls on the government to ensure that the definition is accurate, reflects the correct definition of conversion therapy and does not ban, for instance, private conversations that would take place that are not related to conversion therapy.

CHINA

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Mr. Speaker, the next petition speaks to the genocide of Uighurs and other Turkic Muslims in China. It calls on the House

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of Commons and the government to formally recognize that Uighurs in China have been and are being subjected to genocide and to use the Magnitsky act to sanction those responsible for the heinous crimes committed against the Uighur people.

AFGHANISTAN

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Mr. Speaker, the next petition highlights the human rights situation in Afghanistan. This petition was certified prior to the fall to the Taliban, and obviously these human rights circumstances have become even worse. It particularly highlights the horrific abuse faced by the Sikh and Hindu minority community in Afghanistan. It calls on the Minister of Immigration, Refugees and Citizenship to create a special program to help persecuted minorities. I wish this had been done prior to the fall to the Taliban. We would be in a very different position.

ETHIOPIA

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Mr. Speaker, the next petition highlights the human rights situation in Ethiopia. It calls on the Canadian government to increase its engagement in the defence of fundamental human rights in Ethiopia. It highlights particular concern related to events in the Tigray region.

NATURAL RESOURCES

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Mr. Speaker, the next petition draws attention to the ongoing residual negative impact associated with the national energy program and the scars that program, put forward by then prime minister Pierre Elliott Trudeau, left on our part of the country. It therefore calls on the Prime Minister to issue an official apology for the national energy program and affirm the rights of provinces to develop, manage and market their natural resources.

HUMAN ORGAN TRAFFICKING

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Mr. Speaker, the final petition I am tabling today is with respect to Bill S-223. The bill has had a number of different names and numbers. It is the bill that seeks to make it a criminal offence for a person to go abroad and receive an organ taken without consent. The bill has been in the works for over 15 years, trying to address forced organ harvesting and trafficking. It has been put forward in every Parliament I have been a part of, under Bills S-240 and S-204. Now it has been retabled in the Senate as S-223, and I am hoping against hope that this Parliament will finally be the one that gets it done.

I commend all these petitions to the consideration of hon. members.

Privilege

HEALTH

Mr. Gord Johns (Courtenay—Alberni, NDP): Mr. Speaker, it is an honour to table this petition today on behalf of residents from Cumberland, Courtenay, Parksville and Port Alberni. They are calling on the government to address the preventable opioid overdose crisis resulting from fentanyl-poisoned sources. They cite that regulating to ensure safe sources with proper measures and bylaws will reduce the criminal element associated with street drugs, that problematic substance use is a health issue and is not resolved through criminalizing personal possession and consumption, and that decriminalization of personal possession is associated with dramatically reducing overdose deaths in the countries that have modernized their drug policies.

Therefore, the petitioners are calling on the government, first, to declare the current opioid overdose and fentanyl-poisoning crisis a national public health emergency under the Emergencies Act in order to manage and resource it, with the aim to reduce and eliminate preventable deaths; second, to reform current drug policy to decriminalize personal possession; and last, to create with urgency and immediacy a system to provide safe, unadulterated access to substances so that people who use substances experimentally, recreationally or chronically are not at imminent risk of overdose due to a contaminated source.

I thank these constituents in light of this health emergency and the lives that are being lost in the communities of my riding.

THE ENVIRONMENT

Mr. Mark Gerretsen (Kingston and the Islands, Lib.): Mr. Speaker, I rise today to present a petition on behalf of 261 constituents in my riding. They are calling on the government to enact just transition legislation that specifically aims to reduce emissions significantly, wind down fossil fuel subsidies and the industry in general, create good, clean green jobs that drive an inclusive workforce and development, expand the social safety net through new income supports, and pay for a transition by increasing taxes on the wealthiest corporations and financing through a public national bank.

• (1555)

INDIGENOUS AFFAIRS

Mr. Mike Morrice (Kitchener Centre, GP): Mr. Speaker, I rise today to present petition no. 10686748, wherein the petitioners call upon the House of Commons to commit to upholding the UN Declaration on the Rights of Indigenous Peoples and the Truth and Reconciliation Commission of Canada's calls to action by immediately halting all existing and planned construction of the Coastal GasLink pipeline project on Wet'suwet'en territory, ordering the RCMP to dismantle its exclusion zone and stand down, scheduling nation-to-nation talks among the Wet'suwet'en First Nation and federal and provincial governments, and prioritizing the real implementation of UNDRIP.

QUESTIONS ON THE ORDER PAPER

Hon. Kamal Khara (Minister of Seniors, Lib.): Mr. Speaker, I ask that all questions be allowed to stand.

The Speaker: Is that agreed?

Some hon. members: Agreed.

PRIVILEGE

ACCESS BY MEMBERS TO THE HOUSE OF COMMONS PRECINCT

Mrs. Cathay Wagantall (Yorkton—Melville, CPC): Mr. Speaker, under the Board of Internal Economy's decision on Tuesday, October 19, 2021, it fell to you, Speaker, to ensure that the decision was carried out in a manner that respected the inalienable rights of members to keep personal health information between themselves and their doctors private. I commend you in the way you did so. Clearly, the House sees you as fair in your decisions as the Speaker and affirmed that confidence by electing you to the chair for a second term.

I thank the House of Commons nurse, human resources, health and wellness and the Sergeant-at-Arms for their highly professional, non-partisan, reasonable and accommodating efforts to ensure the safety of all members of Parliament and those who serve in other capacities throughout the precinct. I assure you my intervention will be concise, as I have no desire to unfairly or unreasonably delay the business of the House.

My question of privilege challenges the government's motion passed in the House that imposed inappropriate conditions on the House of Commons nurse's professional ability and independence from political interference in determining whether a medical exemption should be provided to a member of Parliament. The House of Commons nurse made medical decisions that she, not politicians in this place, is professionally qualified to make, including being the one tasked to determine and follow up with parliamentarians who were in close contact with the member who contracted COVID. We are all glad to see him return in good health.

It is my deep belief that this action by the government to control outcomes sets a dangerous precedent. It enables political interference in what should be the objective decision-making of medical professionals serving us as parliamentarians. Furthermore, it opens the door to the further abuse of members' privileges at the whim of whatever political party or parties are in power.

What other actions could governing parties take to place arbitrary limitations on members of Parliament, if this self-awarded power to reduce or remove members' privileges continues to be allowed? I appreciate that you recognize my question of privilege as timely, due to the motion being implemented with directives at a very late hour on Friday, November 26.

I was unable to have the required documents properly processed by my personal physician until the following week. The House of Commons nurse and human resources needed time to consider my application in light of the government's change to the mandate. In addition, I thought it prudent to wait until your decision on the question of the BOIE's authority to set the requirements for medical exemptions was heard, and it affirmed that the actions of the BOIE were outside of its jurisdiction.

That being said, the government decided to move forward with a motion that mirrors the Board of Internal Economy's decision, while subjectively actually narrowing the acceptable reasons for medical exemptions that were already validated by the House of Commons nurse.

I humbly request that you review and make a decision on my question of privilege, and affirm that the government's motion passed in the House does actually impose inappropriate conditions on the House of Commons nurse's professional medical authority and independence from political interference to determine whether a medical exemption should be provided to a member of Parliament.

I thank you for this opportunity and certainly respect your deliberations and your decision.

• (1600)

The Speaker: I thank the hon. member, and I will be returning.

I notice the member for Timmins—James Bay is rising on a point of order.

Mr. Charlie Angus (Timmins—James Bay, NDP): Mr. Speaker, I rise on a point of order, because this is about the rights of all members to a safe work environment. It is about the obligations parliamentarians have to respect the law of Canada. The belief of some parliamentarians that they are above the law of Canada is troubling. We can look at the human rights rulings on privacy that have already been made. For someone to say that their right to keep their medical information private in a pandemic supersedes the right of a workplace to have a safe environment, those privacy rights do not trump the others. I did not use the word “trump” there deliberately, but it certainly had its effect.

I would ask the Speaker to also consider recent court rulings. The ATU ruling on the TTC, and the Quebec Superior Court ruling, have been very clear about the needs and rights of the employer, which is us as the collective members of the House, not just to each other, but to the staff who work here and the cleaners. The claim by the Conservatives, that they believe they have the privilege to ignore pandemic law and the human rights and privacy rulings that have come down and that have all been clear, and that there is a privilege in the House to override them and put people at risk, is an infringement of my rights as a parliamentarian and my obligation to ensure that everyone in the House is kept safe.

Privilege

This is bigger than us. This is bigger than the bickering and bantering among the Conservatives, the Liberals and the Bloc. This is about the message we are sending to Canada right now. It is a message that in the House of Commons, in order to preserve the privileges of an elite group, the Conservative members can override the pandemic standards and the rights of privacy that have to be balanced with the rights of safety. Mr. Speaker, I would ask you to consider what we have seen already coming down from the Human Rights Commission.

As for the issue of exemptions, I understand that it is not my business to look at the exemption of any member, but it is statistically ridiculous to suggest that a number of Conservatives can claim exemptions when we know that the medical exemptions are minutely small. We end up with parliamentarians coming in saying that they have pieces of paper stating they have an exemption, which is a ridiculous and unfair situation. A number of Conservatives are doing that.

I will close with this. I have to share a lobby with Conservatives who walk around without their masks on. I am being put at risk by the fact that I do not know if any of them have these paper exemptions or if they have been vaccinated. I do not need to know, but I need to know that the House will be there to protect my rights and those of all the staff who have to deal with the Conservatives who walk around without masks on.

The Speaker: I believe the hon. member for Yorkton—Melville has raised her hand. Then we will go to the hon. member for Banff—Airdrie. Looking at this, I believe I have all the information I need to come back to the House with a decision, but I will let the hon. member for Yorkton—Melville go ahead and then the member for Banff—Airdrie if they can be brief.

The hon member for Yorkton—Melville.

Mrs. Cathay Wagantall: Mr. Speaker, I would like to make one comment that the member is missing. The very statements he made indicate that he does not have respect for the role of the nurse of the House of Commons, or that she will do her job properly to ensure that all members of the House, as well as all of those who work in the precinct, are safe and protected. That includes all of us. I will leave it at that.

Mr. Blake Richards (Banff—Airdrie, CPC): Mr. Speaker, I rise on the same point of order very briefly to respond to some of the comments made by the member for Timmins—James Bay. He made comments that were completely and utterly false. Those comments were baseless of any facts at all. I want to make it clear that the Conservatives have followed, and will continue to follow, all of the public health guidance in this place.

• (1605)

The Speaker: I thank the hon. members for their input with respect to this point of privilege. I will return to the House with a ruling.

I wish to inform the House that because of the ministerial statement, Government Orders will be extended by 28 minutes.

*Government Orders***GOVERNMENT ORDERS***[English]***CRIMINAL CODE**

The House resumed consideration of the motion that Bill C-3, An Act to amend the Criminal Code and the Canada Labour Code, be read the second time and referred to a committee.

Mr. Earl Dreeshen (Red Deer—Mountain View, CPC): Mr. Speaker, I will be sharing my time with the member for Bow River.

As this is my first opportunity to address the chamber during debate, I will first express my appreciation to my fellow parliamentarians on selecting you, Mr. Speaker, as our Speaker. You have also selected an excellent group of parliamentarians to serve us in your stead, so thank you very much.

Before I proceed with my points on Bill C-3, please allow me to also thank the fine people of Red Deer—Mountain View, who have honoured me with the privilege to serve as their representative once again here in the House of Commons.

None of us makes it to this place on our own, and from that perspective, I wish to recognize not only the numerous volunteers and staff who have supported me, and many throughout the five campaigns I have been in, but also my devoted family, who have stood steadfast beside me. Although serving my community is a tremendous honour, it can also take a toll on my family, and I am eternally grateful for their support. My wife Judy; our son Devin and daughter Megan; our son-in-law Hanno; and our grandchildren Julian, Serena and Conrad are indeed the inspiration for my service to my community.

I would like to particularly highlight Julian, who will be turning eight this month, and put on my proud grandfather hat for a moment. Julian has a skill that I wish I had as a politician. When he asks someone their name, whether they are a clerk in a store, people at a library or teachers and students in his school, he knows and remembers their names and, with that, everything they would have spoken about in conversation. That ability is every politician's dream.

Throughout Julian's journey in the health care world, he has never hesitated to put a smile on the faces of those caring for him. He has bravely faced procedures that most would struggle with and has never complained. He can manoeuvre his electric wheelchair better than most truckers, and I have seen first-hand the impact his nurses and doctors have made on his physical health and sense of security while in their care.

It has been through this journey that Julian has given me the greatest pause to reflect upon the legislation that we have before us. I have a passion not only for everyone who seeks help in our health care system, but for those amazing individuals who help us through some of the most difficult and turbulent times of our lives. Indeed, they continually go above and beyond any part of their job description so that we can feel safe in our most vulnerable moments.

My family, like most, is no stranger to all sides of the health care system. Because of this, I have looked intently at the legislation presented by the hon. Minister of Justice and Attorney General of Canada, legislation that would enact amendments to the Criminal

Code of Canada to create offences around the intimidation, obstruction and interference of health care workers. The commission of such offences against a health care provider or against someone seeking to obtain such health services is to be treated by the courts as an aggravating sentencing factor, thus giving the courts specific directions at the time of sentencing.

Since the start of the pandemic, we have seen a more urgent need to protect those who care for our loved ones when they are defenceless in the face of illness. The stress that accumulates around health care professionals in the best of times is overwhelming, and we must have the full weight of the law behind us to stop intimidation, obstruction and interference as they work tirelessly to do their jobs. Working without the threat of intimidation should be the most basic of rights that we afford to the most valuable assets of our health care system.

We need to thank our health care workers with actions, not words. Even though the changes Bill C-3 seeks to address within the Criminal Code are not a new problem, we must send the bill to committee for further study and modifications to try to better protect our health care workers and patients. I am aware the Criminal Code already covers similar offences, such as intimidation, harassment, assault and incitement of violence, so if the courts already have authority and responsibility to assess the severity of the crime in sentencing, what are we really hoping to achieve?

Believe me, no one wishes more than I do that we ensure the safety of our medical professionals and reduce the stress they may endure. However, will this legislative tool help? We will not know unless we send it to committee to study it further and, if need be, amend it.

● (1610)

Recently I was sent the stories of 40 health care workers from central Alberta. What stood out was the number of times the words "stress", "harassment", "overworked", "burnout" and "anxiety" were used as they spoke about their work environments. If the pandemic is to teach us anything, it is that we must look in depth at the giant holes we have in our system, holes that fail to protect the people who help us navigate our health care needs. More than ever, we see the importance of studying the protections already outlined in the Criminal Code and discussing the consequences of those harassing and vilifying patients and workers.

With respect to the need to protest, it cannot come at the expense of our health care workers and patients. We cannot allow threats and bullying to limit access for those seeking and providing health care. We must study the bill at length and make sure we can strike a balance between our right to be heard and our right to be safe.

Getting to know so many nurses, doctors and staff motivated me to follow in my father's footsteps as the chairman of the Elnora General Hospital board. I speak from both my heart and my experience when I express the need for this bill to be sent to committee, as it is crucial that unintended consequences of potential laws are investigated.

There has always been an ongoing debate about omnibus legislation and, sadly, this bill is a shining example of how this process can sometimes be abused. However, we cannot let this technicality limit the wide-reaching potential the bill has and interfere with opportunities for debate and scrutiny. We must not lose sight of the one basic principle which ties together all of the proposed enactments: the principle that our health care professionals deserve more.

I want to thank Sarah, a registered nurse providing care for patients in rural Alberta hospitals. She reached out to say that she did her very best throughout every single understaffed, overworked, stressful mandated shift, even when supplied with inadequate PPE. We owe Sarah our very best for further scrutiny of Bill C-3.

Although she wishes to remain anonymous, my gratitude goes out to a registered nurse of 22 years who currently works at the Red Deer Regional Hospital Centre. She expressed that the last 18 months have been eye-opening, heartbreaking and exhausting. However, despite the difficult year, she has never wavered from her work at the labour and delivery unit. Not once did she put her fears and needs above those of her patients.

I also thank Suzanne, who told me that being hired as a social worker at the Red Deer Regional Hospital Centre was one of the proudest moments in her life. Despite the unprecedented stress and anxiety she faces, she still loves her job as much as the first day she started.

These are the stories of the heroes we could honour and further study with this bill. These are the voices that encourage me to stand here today and speak. As I mentioned earlier, I know from a profound personal place the importance of caring for those who care for us. We must ensure their safety and reduce the stress and anxiety that our medical professionals endure. It is time to send Bill C-3 to committee so that we can vet it at every possible stage.

In closing, I once again thank you, Madam Speaker, for your service and for allowing me to thank the people who are most special to me. I thank you for letting me highlight the health care professionals who took the time to share their stories.

I hope that as parliamentarians we can look for common-sense solutions to the potential overreach and unintended consequences regarding places where medical services are provided. I also hope the well-being of all involved is taken into consideration so that our doctors and nurses can concentrate on the myriad diseases and conditions that are taking their toll on the physical and mental health challenges facing society today.

We must remember who we are fighting for and that they have never failed in fighting for us in our times of need. Health care workers may be human by birth, but they are heroes by choice.

Government Orders

• (1615)

[*Translation*]

Ms. Marie-Hélène Gaudreau (Laurentides—Labelle, BQ): Madam Speaker, once again, congratulations on your appointment.

I have been listening to the debate for several hours now. I believe everyone knows the Bloc Québécois is in favour of this bill. We are always there to support workers.

I would like to ask my colleague a question. What does he think of our legislative agenda? We waited 65 days to be back in the House of Commons despite the urgent need for action. Today is December 6. Anyone who, like me, listened carefully to question period can see that we have a lot of problems to address.

Why can we not get moving on these urgent matters right away?

[*English*]

Mr. Earl Dreeshen: Madam Speaker, truly, the fact that the government decided we would take a number of months off for the most expensive cabinet shuffle we have had in a long time is rather frustrating because there are so many things we could have continued with and done. There are many issues, and perhaps some of the bills the government would have come forward with would have helped us in a lot of different areas.

I was happy to hear these particular motions and that we have the chance to talk about them. The irony, of course, is that we do not have our committees set up yet. Our intent is to get to that as quickly as possible. It is just another one of the unintended consequences of having an election.

Ms. Lisa Marie Barron (Nanaimo—Ladysmith, NDP): Madam Speaker, since the beginning of the pandemic, the Conservative Party has not pushed for nor won anything for workers. In fact, the Liberals and the Conservatives have consistently opposed paid sick leave. For almost two years, the Conservatives did nothing to push for 10 days of paid sick leave.

Why did the Conservatives abandon workers when they needed help? Have they now seen the light in supporting 10 days of paid sick leave?

Mr. Earl Dreeshen: Madam Speaker, the bill sets a floor for paid sick days, with 10 days for federally regulated private sectors such as airlines, banks, telecoms, etc. We are looking at this. It is something that of course we would need to study at committee to find out whether it really affects a lot of people. That is one of the things we have been told.

It might make some difference, but the intent would be to push it back onto the plate of the provinces for them to have to worry about. If we want to respect all levels of government, we should make sure they are in that discussion as well.

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Mr. Damien Kurek (Battle River—Crowfoot, CPC): Madam Speaker, I appreciate my hon. friend and colleague's comments regarding the irony that the government, which promised a number of elections ago to never introduce omnibus legislation, is in fact addressing two very, very different types of issues within this bill.

The member for Kingston and the Islands said earlier that it was not important to address access to other critical infrastructure such as pipelines, ports and maybe schools. It is unfortunate to see that the bill does not go further in ensuring that Canadians can not only have access to their workplaces and health care, but can also feel safe going to other critical infrastructure across our country.

Mr. Earl Dreeshen: Madam Speaker, one thing we need to be aware of, which is part of the discussion of course, is how we will pay for some of the things we have. When we have the overall discussion about trying to keep our economy going, comments like the one the member mentioned are really to the point.

When it comes to what we are going to do to look at these particular circumstances, that is what we have in front of us and it is the thing we will have to deal with today.

• (1620)

Mr. Martin Shields (Bow River, CPC): Madam Speaker, it is an honour and always a privilege to rise in this House. This is the first time that I have been able to do this in the 44th Parliament. This being my first official speech, we all need to remember that there are 338 seats in this House and every seat is a great seat, other than yours, Madam Speaker. That one is special and we understand that the Speaker has that exception and a different seat.

Please allow me to give thanks to the many people who helped me earned the trust of the great people of the Bow River riding for the third time, particularly my family for their support.

Allow me to indulge a little and share some of the great things I am proud of in my riding. There are 60 communities covering approximately 24,000 square kilometres and home to over 115,000 proud Albertans. Bow River is truly a pearl of the country because of the people in this riding. We are fortunate, for example, to have the largest irrigation districts in Canada. Irrigation ag farms make up 4% of the arable land in Alberta, but they produce 28% of the Alberta ag GDP.

It is an energy-rich area. When the railroads were built through in the early 1980s, they would have had camp fires to cook their food. They would have done a little digging and found they had more fire than expected. This was not because of the wood, because there was a lack of wood in the Bow River riding, but because of the natural gas so close to the surface. They had huge fires to cook with just by poking in the ground. This riding is rich in natural resources.

When people talk about electric vehicles, the proponents need to understand that these types of vehicles have much more plastic than the current ones that we drive. Where is that plastic going to come from? It will come from natural resources.

There are new technology investments in our riding. The largest solar farm is being built in this riding. There is carbon capture, utilization and storage. There is drilling for helium, which my friend's

rig is doing in my riding currently. I will be visiting it soon to see how they are drilling for helium. It is much better than having his rigs working in Texas. They are working here. However, he is short of truck drivers, which is a challenge these days in my riding. On the horizon, clean energy projects like hydrogen are coming.

However, my riding has not been without strain, especially in the last few years. Urban Canadians need to understand where their food comes from; no, not just from a grocery store. I have a very upscale farming operation that grows heritage carrots and tomatoes in my riding. During the summer, they provide tours. On one of those tours, they dig the carrots and give them to the people to eat. The owner of this property was really set back when someone said, "I have never eaten anything that has come out of the ground before."

Food ag producers and natural resources are not located in urban Canada. About 60% of this country's infrastructure, the roads and bridges, are in rural Canada, like the Bow River riding. Rural riding infrastructures bring production to urban ridings to consume and export. That is in the Bow River riding. The government and urban people need to understand this much better. The work we have done for the betterment of this nation has been thanked with demonization of Albertans and energy, and the castigation of our farmers and ranchers.

During COP26, there was an academic who said we should not have cattle on the great Prairies of North America, we should grow trees on it. They have to be kidding me. The buffalo mowed that Prairie land for thousands of years, it grows Prairie grass, and he thinks they can have trees on the Prairies. It is a challenge when people do not understand the environment in my riding.

Nevertheless, our people are steadfast in their pursuit of achievement, bold in their ambition, and caring for their neighbours and friends. We have some large populations like centres in Chestermere, Strathmore, Taber and Brooks, and also smaller villages and hamlets like Milo, Looma and Patricia. If someone has not gone to the Patricia bar, they should go. It is an experience in itself. I am proud to call this exceptional riding home and represent this riding in the House.

• (1625)

I see my friend for Kingston and the Islands is wondering if I am going to talk about Bill C-3, and yes I am going to. Bill C-3 is an act to amend the Criminal Code and the Canada Labour Code regarding protests and medical leave.

In 1935, the Alberta Health Insurance Act was the first Canadian health insurance act to provide public funding for medical services. It is considered an early step toward the medicare system and toward laying the groundwork for the 1969 universal health insurance program.

The history of nursing in our province dates back to 1895 where programs to train nurses began close to the Bow River riding at the Medicine Hat General Hospital and at the Calgary General Hospital. The success of these training programs led other Alberta hospitals to bring their own training programs. By 1915, there were 10 programs in existence across Alberta. These training programs prepared nurses to work in both hospital settings and private practice. Today, nursing is both a degree and diploma program offered in universities and post-secondary institutions across the country. They provide specialized training for these careers that are so vital to our health care system, which brings me to the issue regarding the legislation before us.

Canada's protection for the freedom of peaceful assembly is enshrined in our charter and in our legal status. In recent years, it seems as though we have seen the lines between peaceful protests and riot being blurred. However, it is important to note that peaceful protest is a right.

I have experienced some of those challenges that we had in the 1960s. I remember being on Parliament Hill in 1967 in a protest against the Vietnam War. Not long after that, I was in Detroit where the riots basically destroyed much of that city, and some of it has never recovered. These riots had to do with the Vietnam War and civil rights issues in the 1960s. I saw, numerous times in the United States, where it degenerated from protest to riot.

Speaking of nurses and doctors, my neighbour is a nurse who just retired in the last month. Over the years, I had the opportunity to have many conversations with this nurse. She is a fantastic person and a great neighbour with stories of working in the health system, and it was a challenge during COVID. This is a person who was in charge of the ER and saw the challenges before COVID in emergency care and during the COVID pandemic in the ER. We had conversations about the challenges, and it was always interesting and gratifying to listen to her commitment to the patients in our community.

My doctor, Dr. Erik, is one of many who came from South Africa, and whom I have known very well from the first day he came. Dr. Erik, his wife and small child had to leave South Africa with nothing, because South Africa would not allow them to bring anything. Both sets of grandparents were left behind in South Africa. Dr. Erik is not only my doctor, but he is committed to the community and service in the community. Our rural GP doctors are incredible with the services they provide. During COVID, there was a lot of stress and many challenges.

Respect of law and having some moral high ground would presume that protests should not be occurring in front of health buildings. We saw people out banging pots at different times of the day, we saw the parades and we saw the banners, but we also saw people getting more restless during the pandemic, not knowing which way the rules were going. It was a frustrating time. However, protesting in front of hospitals may prevent those who really need

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to access this critical piece of Canadian infrastructure from getting the care they need, which is the critical piece for me.

I trust my health care friends and neighbours. In the election campaign forums, I spoke in anger against hospital and health facility protests. We do not have laws to protect, but I want to stand to say again in this place: Do not protest at health facilities or against our health care workers.

● (1630)

Mr. Mark Gerretsen (Parliamentary Secretary to the Leader of the Government in the House of Commons (Senate), Lib.): Madam Speaker, I heard the member speak a little about Bill C-3, but I was really intrigued about the comments he was making before that. The reason I had my face in my hands when he looked over at me was because I was thinking about the comment he made about how electric vehicles, and I drive one, use a lot of plastic to make. Indeed, that is the case. There is no doubt a lot of petroleum products go into that process.

Does the member not agree that with incredible human ability we might be able to strive to develop new technologies that do not require petroleum or does he think we are just inevitably forever stuck in this state of needing oil? Does he not think that perhaps we will be able to evolve our way out of this dependency?

Mr. Martin Shields: Madam Speaker, one of the things we have always talked about regarding industry is transition. The guys with the buggies and the buggy whips transitioned.

One of the things we do know is natural resources will be used for decades. What I know is in my riding and in my part of the country, those resources are huge in the amount of GDP they create for our country and our citizens.

[*Translation*]

Mr. Martin Champoux (Drummond, BQ): Madam Speaker, I want to congratulate my colleague from Bow River. I had the pleasure of serving with him on the Standing Committee on Canadian Heritage last year, and I have a great deal of respect for him, even though we differ on some issues.

My colleague from Bow River mentioned that he trusts the health care system, health professionals and his doctor and is opposed to protests against health restrictions outside health care facilities. Do his views on prohibiting demonstrations and the obstruction of health professionals also apply to other areas of care? I am thinking, for example, of abortion clinics. Does he agree that these rules should also apply to people trying to enter abortion clinics?

[*English*]

Mr. Martin Shields: Madam Speaker, I served on committee with my colleague and we had many different comments to make, and many of which we agreed on. We also share a common name, which is also great.

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As I stated earlier, I have been involved in protests. I know how to carry a placard. It is a critical charter right. We have to be able to guarantee people have the right to lawfully protest against things they feel are not right for them, but they need to do it in a lawful way.

I learned a long time ago throwing rocks at windows and breaking things unlawfully does not further the cause. We need to do it respectfully, like the debate we have in this particular forum.

Ms. Lisa Marie Barron (Nanaimo—Ladysmith, NDP): Madam Speaker, I always appreciate the opportunity to learn more about the uniqueness of other ridings and the constituents' needs within those ridings.

Unfortunately, people know the Conservatives have always made life harder for working people. Constituents in my riding of Nanaimo—Ladysmith still remember the Conservatives getting in the way of unemployed workers who need help.

Can the member name one single gain his party has made for workers since the pandemic began?

Mr. Martin Shields: Madam Speaker, I thank my colleague for learning more about constituents in our country. A great thing in this particular forum is that we are able to learn about where our colleagues are from and about life in their particular part of Canada, because it is a great country. When she talks about what I do, I will give her this: I was a negotiator for a union and negotiated a lot of things for employees.

• (1635)

Mr. Taleeb Noormohamed (Vancouver Granville, Lib.): Madam Speaker, I will be sharing my time with the member for Nickel Belt.

Before I begin my formal comments, I would like to tell the member for Bow River that he does indeed represent a beautiful riding. I have enjoyed many trips to his part of the country, and it is a beautiful part of Canada.

I am thankful for the opportunity to discuss Bill C-3, an act to amend the Criminal Code and the Canada Labour Code, which I am proud to support. As we continue the fight against COVID-19, this legislation is particularly important. It is important because it protects federally regulated workers when they get sick with 10 paid sick days. It is important because it serves to protect those who have served tirelessly and continue to do so, preserving and protecting the health of each and every one of us.

[*Translation*]

The Criminal Code amendments proposed in this bill have become an unfortunate necessity given the behaviour of a small number of Canadians who are not supportive of the public health measures put in place to protect the health and safety of our communities and to ensure our future recovery.

[*English*]

The vast majority of Canadians have shown tremendous appreciation, gratitude, kindness and support for our health care workers, just as all members of this House have done and continue to do. They, like us, believe in the right to peaceful protest, but those out

there who have chosen violence and intimidation have put the mental and physical well-being of our health care workers at grave risk.

I am certain that many members of this House find it hard to fathom that at a time like this, during a pandemic, when health care workers have given everything for us, in some cases their lives, that anyone would threaten or harass them as they try to care for us. I find it difficult to understand why anyone would seek to obstruct their fellow citizens from getting vital treatments, whether for critical emergency cases, cancer treatments or necessary surgery.

My riding of Vancouver Granville is home to many of Vancouver's health care workers and hospitals, such as Vancouver General Hospital, BC Women's Hospital and Health Centre and BC Children's Hospital. It is the epicentre of British Columbia's health care infrastructure. Those who work in the health care field seek nothing more than the ability to do their jobs safely.

This summer, my community, Vancouver Granville, was ground zero for anti-vaxxers and anti-maskers, who harassed and threatened health care workers and patients at VGH. They endangered the safety of our exceptional health care workers by making threats, inciting others to violence, obstructing passage into health facilities and intimidating patients from accessing vital health care services. In short, they decided to put themselves, and their selfish views, ahead of their fellow Canadians. This type of behaviour is intolerable, particularly at a time when access to health care services is more essential than ever before. We cannot have our health care workers driven from their profession due to unsafe working conditions.

Like many in this House, I have spoken to health care workers in my riding who have shared the unacceptable violence and harassment they have experienced on the job. One nurse told me that she had never, in 23 years, feared for her life until this summer. Trying to get through a protest to her shift, she was jeered, called a sheep and a traitor. She was coughed on, pushed and physically prevented from entering VGH. She told me that she does not want to be made a hero. She just wants to be able to do her job safely.

Another health care worker, a recent immigrant to this country, told me he thought that in Canada we believed in science and in taking care of one another. That was why he escaped to come to Canada for a better life. He said he just could not believe what he was seeing around him. He shared that he had been harassed verbally, shoved while trying to help a doctor get through to the doors of the hospital and had his mask ripped off his face a number of times.

These are the kinds of acts that the existing Criminal Code and the proposed measures in Bill C-3 target. No Canadian should fear for their safety when seeking or providing health care services, especially those who have been on the front lines of the COVID-19 pandemic. The incredible health care workers at VGH, the BC Women's Hospital, the BC Children's Hospital, and all facilities across Vancouver Granville and Canada, deserve our gratitude, our care and our protection.

While the pandemic is the immediate context of concern, these forms of harmful conduct in the health care sector are not new. Studies show that health care workers experienced high rates of on-the-job violence long before the pandemic. We know this problem is widespread and well established. The measures proposed in Bill C-3 aim to provide better protection for these workers and to secure safe access to their services of all of us who depend on them.

• (1640)

[*Translation*]

The measures proposed in the bill are designed to strengthen existing protections in two primary ways. First, two specific new offences are being added to the Criminal Code. The first new offence is intended to prevent intimidation of health care workers when they are performing their duties and of individuals requiring care or obtaining a health service.

The second new offence would prohibit obstructing any individual from entering a health care facility, because every Canadian has the right to unimpeded access to health care services.

The second set of measures would add aggravating sentencing factors, because the health care sector has advocated for years to protect its workers in the event of assault.

[*English*]

These measures respond to the concerns of health care workers across the country. As we continue to address the evolving challenges of COVID-19, we need to support our health care workers by ensuring they have an accessible and safe working environment, one free from harassment, intimidation and violence.

The COVID-19 pandemic has put a major strain on our health care system. We must ensure that the people who work in this sector can continue to provide critical care to keep Canadians healthy and safe. This is exactly what these Criminal Code amendments would do.

I would be remiss not to mention again another important piece of this bill, which would ensure that all federally regulated workers would have access to 10 paid sick days. No one should have to make the difficult decision between going to work sick and not feeding their families. Paid sick leave would provide vital support to workers, their families and the health of our communities, as we continue to face new challenges in the fight against COVID-19.

Access to paid sick leave is crucial to our economic recovery and to strengthening the social safety net Canadians rely on. Together, these measures would help Canadians as we come out of this pandemic.

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I know all members of this House care deeply about our health care workers, and I ask each and every member of this House do what we know is possible and come together across party lines to pass this important piece of legislation without delay.

Through this pandemic, we have referred to our health care workers as heroes. Now let us do our part to protect them.

Mrs. Karen Vecchio (Elgin—Middlesex—London, CPC): Madam Speaker, one of the concerns I have is for those people who are working with a federal contract and ensuring that they too are covered by this.

If a person under a federal contract were to go out and work, would they still be protected?

Mr. Taleeb Noormohamed: Madam Speaker, I do not know the answer to that question, but I am sure we will be able to get back to the hon. member with an answer.

If we are working together on this legislation, we should be able to protect those workers as well.

[*Translation*]

Mr. René Villemure (Trois-Rivières, BQ): Madam Speaker, Bill C-3 is obviously very interesting. I would like to add a few comments to the debate. Health care workers have risked their lives and overcome danger to protect us.

It is unacceptable for the majority to be controlled by a certain minority that wants to rule the streets. In this case, health care workers need to be protected. The right to demonstrate is very important. It is a form of freedom of expression that we hold dear. However, one part of the population cannot be held hostage for the sole purpose of expressing disagreement that is not unanimous.

• (1645)

[*English*]

Mr. Taleeb Noormohamed: Madam Speaker, the hon. member makes an important point.

We are in a place right now where we do need to be thinking about those people who are taking care of us. Health care workers have put themselves on the line, tirelessly and constantly, throughout the pandemic. They have done so before and will continue to do so after the pandemic.

It is our job as parliamentarians to ensure that those health care workers are protected at their place of work, and that those who are coming to access services feel safe and secure. Our job is to make sure that Canadians are able to access the rights and the care to which they are entitled.

Mr. Charlie Angus (Timmins—James Bay, NDP): Madam Speaker, we are all deeply concerned about these attacks on health care workers, particularly those who are already suffering through the pandemic, as they are on the front lines. We have certainly seen it across the country at hospitals and with paramedics.

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It now looks as though the anti-vax extremists are shifting gear and moving away from hospitals. We saw a horrific incident in Edmonton this past weekend where they attacked a toy store. The idea of these brutes showing up at a toy store at Christmastime with their anti-vax conspiracies suggests to me there is something more insidious taking place with extremist behaviour in Canada.

How do we as parliamentarians start addressing this if, after we protect our hospitals and frontline workers, they decide to shift to schools or toy stores? This is a serious issue. I would ask my hon. colleague for his comments.

Mr. Taleeb Noormohamed: Madam Speaker, the hon. member is absolutely right. It is becoming insidious. During the last election, many of these very same protesters chose to attack our office. They harassed young people who were volunteering in the office. They intimidated people who were trying to come to have conversations with us.

I think all of us need to do exactly what the hon. member said. We need to recognize that this is a very serious and real problem. It is going to require all of us to come together, regardless of the party we belong to, to say with a firm voice that it is unacceptable to harass people this way, particularly when we are talking about our health care workers and when it comes to giving children a hard time. It is unacceptable as Canadians for us to think that, in this day and age, we would obstruct these people from doing what they are trying to do, which is help Canadians stay healthy.

[*Translation*]

The Assistant Deputy Speaker (Mrs. Carol Hughes): Order. 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 Victoria, The Environment; the hon. member for Langley—Aldergrove, Infrastructure; the hon. member for Fort McMurray—Cold Lake, The Economy.

Mr. Marc Serré (Parliamentary Secretary to the Minister of Official Languages, Lib.): Madam Speaker, first let me congratulate you on your appointment.

I would also like to take this opportunity, in this 44th Parliament, to sincerely thank the constituents of Nickel Belt for placing their trust in me for a third time. I also want to thank my wife, Lynn, for her unconditional support. It is not always easy to be the spouse of a member of the House of Commons. We also work very hard in the community. I want to give a big thank you to my mother, family, all the many volunteers who worked in the community, and my staff, Rebecca, Anne, Kaylie, Sheri, Sabrina and Stéphanie, for their support.

It is an honour to follow in my father's footsteps as the member for Nickel Belt and also to take up my new duties as the parliamentary secretary to the Minister of Official Languages.

Today, I am pleased to speak to Bill C-3, an act to amend the Criminal Code and the Canada Labour Code, at second reading stage.

[*English*]

Bill C-3 proposes reforms to the Criminal Code that would respond to the issues that have come to the forefront of the pandemic.

The bill would seek to enhance protection to health workers and those who need their services at a critical time in Canada. I firmly believe that the proposed reforms show restraint in dealing with the very difficult circumstances that have arisen, particularly due to the small minority of COVID-19-related deniers and individuals engaging in serious and harmful conduct during anti-vaccination protests targeting the health sector and, as indicated earlier, retail and other sectors. I am proud of the way this government has dealt with this issue.

Bill C-3 proposes reforms that are targeted in nature and demonstrate the utmost respect for our Canadian Charter of Rights and Freedoms.

Today, I would like to speak about the events that we have all witnessed and that have led us to this important reform to criminal law. I will also speak to why our government's commitment to enact these reforms is crucial in protecting not only our health care workers, but each and every Canadian who is in need of health services.

Currently, the Criminal Code provides a wide range of general responses to threats, intimidation and other forms of violence directed at all persons. However, new explicit offences are critical to send a clear message that such conduct is never appropriate.

We have all seen what has been reported in the media, stories about health workers being targeted directly and threatened over social media platforms, including Twitter, because of their work in promoting public health measures and treating those fallen ill to the pandemic. Health care facilities across the country were specifically targeted last summer and early fall, with images and reports of some ambulances being surrounded by a crowd and health care professionals being confronted when accessing their workplaces, as well as patients needing police escorts to access certain facilities.

In a November 5 tweet by Anthony Dale, president of the Ontario Hospital Association, he reported that one hospital CEO had received death threats because of the implementation of a mandatory vaccination policy. Other physicians and medical associations are reporting death threats against health care professionals. I am deeply troubled by these accounts.

Vaccine misinformation has unfortunately caused many to distrust and attack the medical community.

Examples are popping up near my riding of Nickel Belt and other parts of northern Ontario. Recently, Dr. Gretchen Roedde, a family physician from Latchford, a small community in northern Ontario, was victimized online, at home and reported by a growing anti-vaccination movement. Dr. Roedde has given in to these pressures and has decided to close her practice, leaving many in the community without adequate care. This is a chilling reminder of the challenges faced by our health care providers.

The Ontario Medical Association, OMA, and the Canadian Medical Association, CMA, have recently said that abuse and harassment of doctors during the pandemic is growing and is unacceptable.

• (1650)

[*Translation*]

Another worrisome trend we are seeing is that parents and children going to vaccination clinics are being subjected to threats and intimidation. On November 28, a woman from North Bay went to one of these clinics with her seven-year-old son, who had just become eligible for the COVID-19 vaccine. She later reported that she had been subjected to a torrent of verbal abuse from anti-vax protesters while entering and leaving the clinic. The protesters went so far as to shout that she was committing genocide and poisoning her son, and they yelled out false information about the vaccine in front of the seven-year-old child. Such behaviour must stop.

I know that the members of the House support the right to protest. However, we must all agree that this is neither the way nor the place to do it. It is totally unacceptable.

• (1655)

[*English*]

While I believe all Canadians accept that we have differences of opinion, very few Canadians accept this behaviour toward health workers and people who try to obtain health care services. While the charter protects the right to express opinions and conduct peaceful protests, it does not protect against violent forms of speech and activity. I am confident the bill reflects the rights and freedoms enshrined in the charter by ensuring that activity that is purely for the purposes of communicating a message and that remains peaceful is not criminalized.

We must ensure that every Canadian can safely get vaccinated, especially children who are now eligible for the vaccine. Every Canadian also deserves to have safe access to essential health services and not fear being attacked or intimidated as they make their way to a hospital or vaccination clinic. This bill is about federal leadership to ensure that our health care heroes can safely do their jobs, free from obstruction, intimidation and threats.

I would like to touch on another matter that is important to me and many in our country. We cannot forget the significant struggles and hardship that women have faced, both legally and practically, in accessing abortion services. Many of those challenges continue, as women encounter barriers in accessing abortion services, including aggressive, intimidating, disturbing and even violent anti-abortion protest activity. Abortion service providers and their families have also been subject to similar conduct in Canada during its history. The bill applies to health services in general and the amendments will support and protect women in making their decisions for their own bodies without obstruction, intimidation or fear.

[*Translation*]

The bill would also make it an offence to impede another person from accessing health care facilities. No one should be prevented from accessing health care.

[*English*]

I firmly believe that the Criminal Code amendments proposed in Bill C-3 are imperative to give protections to those who undertake to care for Canadians during their most dire time of need. There is

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no doubt that Bill C-3 proposes reforms that are carefully crafted and responsive to the harms facing the health sector in Canada.

For those reasons, I urge all members to support Bill C-3.

Mr. Damien Kurek (Battle River—Crowfoot, CPC): Madam Speaker, the member talked about how this bill very clearly articulated some of the challenges that existed, but on Friday, November 26, the Minister of Justice said that the challenges the bill tried to address were not a new problem. As I read through the bill and some of the challenges it attempts to address, terminology like “minor disturbances” raises concerns. There is a lack of clarity—

The Assistant Deputy Speaker (Mrs. Carol Hughes): Somebody who is online virtually seems to have the microphone on. I would ask those online to be very mindful of whether their microphone or video is on.

The hon. member for Battle River—Crowfoot with a brief ending to his question.

Mr. Damien Kurek: Madam Speaker, I have no doubt that the member was passionately suggesting that he had the same question I do.

I have some concerns about how terminology like “minor disturbances” might be widely interpreted. It is a term that could be very subjective. I wonder if the member has any comments about that term and maybe some of the other challenges where in committee this terminology might be able to be tightened up.

• (1700)

Mr. Marc Serré: Madam Speaker, I thank the member for the work he is done on the health side.

As to the question about terminology in the bill, that is why we have to get it to committee. Then we can look at specific concerns about certain terminology, the legal terminology, which is why it is important to get this through the House. At the committee level, I am looking forward to ensuring we review some of this terminology and make it right. We will work together to ensure the legislation passes.

[*Translation*]

Mr. Martin Champoux (Drummond, BQ): Madam Speaker, I want to start by congratulating my colleague opposite on being appointed Parliamentary Secretary to the Minister of Official Languages. He can count on the Bloc Québécois to keep him busy with work.

Bill C-3 does not really change things, since the offences that the government claims are being added to the Criminal Code already exist. They are not being added.

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What this bill does do, however, is bring in harsher penalties for some criminal offences. Paradoxically, in 2018, the Liberal government introduced Bill C-75, which, unlike today's bill, was designed to reclassify about a hundred offences to relax the penalties.

How does the Liberal government justify or explain this about-face? Is it just following the latest trends and keeping with the times, or did it have an epiphany about the need to make the punishment fit the crime?

Mr. Marc Serré: Madam Speaker, I thank my hon. colleague. I look forward to working with him on the official languages file as we take a closer look at the status of French across Canada, including in francophone minority communities.

Regarding Bill C-3, a question about terminology has already been raised. This bill offers progress on the health care file. Some things have been split off and others have been brought in, such as provisions governing court decisions.

I look forward to working with my colleague in committee as we examine certain details and make sure we improve this bill to protect health care workers.

[*English*]

Mr. Charlie Angus (Timmins—James Bay, NDP): Madam Speaker, I appreciate my hon. colleague recognizing Dr. Gretchen Roedde, who gave up her practice because of harassment. I called her before the story broke. I could not believe how tired and dispirited she was. This is a woman who has gone through child soldier roadblocks in Africa to get medical supplies, a doctor who would take the freighter canoes up Lake Temagami. She has never been tired or intimidated and she loves the north.

I want to ask my colleague what he thinks is happening when in small towns like ours, this kind of disinformation and extremism is causing such damage to frontline medical workers like Dr. Roedde, paramedics and the nurses who are just so tired of what they have faced throughout the pandemic.

Mr. Marc Serré: Madam Speaker, I thank the hon. member for the work he does in all of northern Ontario. I do not have a specific answer other than I know people have anxiety and are concerned. Social media plays a role with hate and misinformation, which we have to address. In smaller areas, maybe rural towns, the reliance on social media is probably more prevalent, but we have to find ways together at the federal, provincial and municipal levels to ensure we look at the misinformation being shared through social media.

Mr. Matthew Green (Hamilton Centre, NDP): Madam Speaker, one of the first privileges we have when rising in these opening weeks of a new Parliament session is to be granted the opportunity to acknowledge the honour that has been bestowed upon us by our respective constituents as either newly elected or re-elected members of Parliament.

With the Speaker's indulgence, allow me to begin my intervention, as many of us already have, with a brief reflection on the deep gratitude I owe to the people of Hamilton Centre, who have put their trust in me to return to this 44th Parliament to continue the important work of ensuring that the working-class values of Hamilton Centre continue to be well represented in the House of Commons—

[*Translation*]

The Assistant Deputy Speaker (Mrs. Carol Hughes): Order. The hon. member for Drummond on a point of order.

Mr. Martin Champoux: Madam Speaker, there is no interpretation, and I wonder if that might be because my colleague is not wearing the headset required by the House of Commons, which may be a problem for the interpreters.

• (1705)

The Assistant Deputy Speaker (Mrs. Carol Hughes): I too thought there was something different about the sound.

[*English*]

I am not sure if the problem is because of the headset the hon. member is using. It does sound different at this end, so there is a problem with interpretation. The member might want to unplug his headset and then plug it in again to see if the computer is picking up the right microphone.

Mr. Matthew Green: Madam Speaker, is this better now?

The Assistant Deputy Speaker (Mrs. Carol Hughes): The sound is not good enough.

I have some points of order to address.

The hon. member for Battle River—Crowfoot.

Mr. Damien Kurek: Madam Speaker, I understand the member's frustration. I would simply ask for unanimous consent to allow him to switch places with the next speaker. That would give him 15 minutes or so to work with IT in order to figure out the technical difficulty and address it accordingly.

The Assistant Deputy Speaker (Mrs. Carol Hughes): I have another point of order before I go back to the hon. member for Hamilton Centre.

The hon. member for New Westminster—Burnaby.

Mr. Peter Julian: Madam Speaker, if we are not able to sort out the technical problems for the member for Hamilton Centre, we have the member for Courtenay—Alberni, who would be prepared to take his place and give a speech. We would not agree to passing on the NDP slot for this important debate.

The Assistant Deputy Speaker (Mrs. Carol Hughes): We are going to try one more time.

The hon. member for Hamilton Centre.

Mr. Matthew Green: Madam Speaker, I appreciate your indulgence and the suggestion from the hon. member from the Conservative side. Is my microphone okay now?

The Assistant Deputy Speaker (Mrs. Carol Hughes): No, it is not working. The hon. member will have to get a House of Commons headset.

There is a point of order from the member for Don Valley East.

Mr. Michael Coteau: Madam Speaker, can you explain what the problem is? I can hear him perfectly.

The Assistant Deputy Speaker (Mrs. Carol Hughes): The problem is for translation.

Mr. Peter Julian: Madam Speaker, on a point of order, I would suggest that as the member for Hamilton Centre does his work to try to get a better level of sound, we simply move to the member for Courtenay—Alberni.

The Assistant Deputy Speaker (Mrs. Carol Hughes): Because of where the time slot is, I will go to the hon. member for Courtenay—Alberni.

• (1710)

Mr. Gord Johns (Courtenay—Alberni, NDP): Madam Speaker, I am honoured to rise today to speak to this important bill, Bill C-3. It is great to see both the Liberal Party and, it seems, the Conservative Party coming around to see the importance of paid sick leave. I have talked about this in the House quite significantly and so has my party. In fact, the leader of my party raised this 22 times throughout the pandemic. Here we are, 20 months after the top medical health professionals in our country decided that outside of social distancing and washing our hands, the top two things we could do to stop the spread of the virus and combat COVID-19 were to get vaccinated and for governments to implement paid sick days. It is really great to see that everybody is coming together today to do that, to protect workers, so that people are not spreading the virus.

We talk about people going to work while knowingly showing symptoms of COVID-19 or being unsure whether they should go to work or not. For many of these people, their spouses have perhaps lost their jobs because of COVID-19 or are unable to work, or they are the sole breadwinners in their homes and are scraping to get by even at the best of times. Whatever their circumstances, they are worried about how they are going to pay their bills, like most Canadians. Fifty per cent of Canadians were within two weeks of insolvency prior to the pandemic. We can think about how many families were terrified at the beginning of and throughout the pandemic about missing any work at all and how they were going to pay their bills and feed their families. Paid sick days are absolutely critical.

There is one thing we have not talked about a lot here. I was really honoured to be the small business and tourism critic for the federal NDP for the last six years, and to stand up and fight for small business. We do not talk about how important paid sick days are, not just for workers but also for employers and small business. I was always mystified when Conservatives would not support paid sick leave, because they say they are strong defenders of the economy and small business. I know Liberals were always patting themselves on the back throughout the pandemic on the important needs of small business, but throughout the pandemic, whether it be on the CERB or another program, we had to fight to make sure small businesses would be included. Initially, proprietors were not even going to be allowed to collect CERB.

Initially, people were going to get \$1,200. New Democrats were able to put pressure on the government so that people could get \$2,000. We brought forward the idea of a commercial rent assistance program. Of course the Liberals bungled it initially. They made sure it was set up and designed so that people had to have a mortgage to be able to apply for rent support. It was landlord-driven instead of tenant-driven. It was a completely broken program.

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We found out that there were some Liberal insiders delivering the program for the government and we were glad to put pressure on the government to fix that broken commercial rent program. My colleague from New Westminster—Burnaby and I brought the idea to the government. I am glad to see that it finally fixed it.

When it comes to paid sick days, people were going to work unsure of whether they had the virus or not. They were terrified and governments at different levels did not have their backs to make sure people stayed at home instead of bringing COVID-19 to the workplace and possibly infecting co-workers.

Whether it is in the private sector or in government, it is extremely costly when people get sick and spread the virus in the workplace. One would think it would make economic sense to provide a social safety net, so that people who were sick would stay at home, not spreading the virus in the workplace or ending up having to close throughout the country and shut down government services to Canadians. We do not talk enough, not only about the workers, but also about the impact on businesses and the economy. That is a really important argument for why this is absolutely critical.

• (1715)

As much as we appreciate the legislation before us, there are flaws that are apparent in it, such as a person having to work for 11 months to get access to the 10 paid sick days.

The Liberal government said it would restore the cuts to the federal public services that the Conservatives made. I mean, we can look to Veterans Affairs as a great example. The Conservatives gutted one-third of Veterans Affairs Canada under the Harper government. As a result, the backlog has grown to over 40,000 veterans who have been injured serving our country.

The Liberals said they were going to fix it. What did they do? They outsourced and brought people back in on temporary contracts instead of hiring people and sending the message to veterans that they are committed to them in the long term and are going to end the backlog forever and not just outsource for temporary jobs.

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The Liberals are notorious for this and do it all the time. They are outsourcing throughout the government, and this is creating a huge problem, because we have contract flipping going on. Obviously, we do not want this practice to continue. We want the government to hire people and make sure they have job security and benefits they can rely on so that the people they are serving, like veterans, can count on the services being delivered to them. We want to make sure the government is open to amendments that all federal sub-jurisdictional workers have access to the 10 paid sick days. It is very important that we cover that.

The other thing I have not talked about is the fact that women are being disproportionately impacted. With a lot of the outsourcing and temp jobs in our country, women have been disproportionately impacted by COVID-19. Social services have failed people across Canada, and the lack of child care has had a huge impact. CBC reported that 100,000 working-age women have completely left the workplace since COVID-19, which is 10 times the number of men. We talk about having an employee work approximately a month to achieve one paid sick day, but this is disproportionately going to impact women if it takes 11 months to accumulate 10 days' sick leave.

I really hope the government will consider amending this situation, because we know that people who have been working at a job need that security. Also, we do not want them coming to work sick. We do not want them spreading the virus. We are in the fourth wave right now, and we do not know what the omicron virus, which is spreading quickly, is going to look like. We want to make sure we have workers protected throughout.

We also saw how fractured the health care system became throughout the pandemic. I could speak all day about the things we saw that were highlighted in the pandemic. However, when it comes to paid sick days, it is absolutely critical. This is a victory today for health care workers, workers across this country and professionals.

We are going to continue to ensure that workers across this country have support from us as parliamentarians, but I question why it took so long. Why did Liberals and Conservatives sit on their hands against medical health professionals' advice? Members have heard me talk a lot about the government failing to listen to medical health professionals, like in the opioid crisis. The medical health professionals have made very clear and sound recommendations. Even the government's own officials are asking it to decriminalize and provide a safe drug supply, but it has not done that.

The government does not listen to its health professionals when it comes to sick days or to the other crisis that is happening, which has taken more lives than we have seen in generations. However, I am hoping the government will act swiftly, start listening to its health professionals when it comes to developing policy, and act with much more urgency in the future.

Mr. Mark Gerretsen (Parliamentary Secretary to the Leader of the Government in the House of Commons (Senate), Lib.): Madam Speaker, a lot has been said today about the need for such legislation. However, given that it has come out of the rise of this anti-vax movement and people who are so dead set against accepting the realities of what is going on in our country right now, I have to be honest: I cannot help but think that some of it has to do with

the fact that there are so many people out there who are willing to play footsies, so to speak, with the proponents of these conspiracy theories that suggest that their liberties are being taken advantage of.

I am curious to hear the member's comments on what he sees as a leadership role when it comes to the anti-vax movement. How important is it for members of this House to stand up and say what is right and what is wrong, and how important is it to lead by example?

• (1720)

Mr. Gord Johns: Madam Speaker, the reality is that we need people to get vaccinated, and not just to protect each other. For example, in this place I am thinking about all the staff: the security, the pages and the clerks who are here. It is our duty to protect each other.

One part I really like in the legislation is about protecting health care workers at their workplaces so that people are not protesting outside of them. This is also about their patients and ensuring that people get safe access to the hospitals or where they need health services.

It is absolutely critical that we stand up and defend each other, and make sure that people are getting vaccinated and that we are protecting health care workers along the way. I appreciate the point the member made.

[*Translation*]

Ms. Sylvie Bérubé (Abitibi—Baie-James—Nunavik—Eeyou, BQ): Madam Speaker, I thank my colleague for his speech.

He mentioned that the bill is not quite good enough. I would like him to go into more detail about why it should be improved.

[*English*]

Mr. Gord Johns: Madam Speaker, it is a good question. There are a number of improvements. We want to ensure that workers do not have to wait 11 months to access 10 paid sick days. As I said, this would disproportionately impact women, for sure, and workers who have been outsourced.

With regard to ensuring that workers have access to their first day of sick leave after a continuous period of employment of at least 30 days, the goal of unduly delaying access to the first day of sick leave is not okay. The government needs to relax the requirement to provide a medical certificate so as not to discourage applications for sick leave. This has been supported by medical health professionals.

We need to listen to medical health professionals. The Liberals continue to not listen to medical health professionals in a timely fashion and it is costing lives. If they mean to table this legislation so that it actually benefits those whom it is targeting, they need to make sure they are listening to health professionals and need to do it in an expeditious way.

Mr. Mike Morrice (Kitchener Centre, GP): Madam Speaker, is the hon. member for Courtenay—Alberni open to elaborating specifically on the point about women's participation in the workforce and paid sick days? Would he like to elaborate on an amendment that he thinks would improve the legislation?

Mr. Gord Johns: Madam Speaker, I want to congratulate my colleague, as I have not had a chance to do that in the House.

I have articulated fairly clearly that women have been disproportionately impacted by COVID-19. Again, women are disproportionately more likely to do temp work and to be outsourced. That being said, they are going to be recycled through this and will miss the opportunity to get 10 paid sick days if they do not work for 11 months straight. We need to amend the bill so that workers do not have to wait 11 months and so they can do the right thing should they have signs and symptoms of COVID-19 or be exposed to it. They should not have to wait six months.

We cannot afford this, actually, as a society, and their workplaces cannot afford it. Certainly no one wants to go to work and potentially infect one of their colleagues with COVID-19.

Mrs. Laila Goodridge (Fort McMurray—Cold Lake, CPC): Madam Speaker, I remember very clearly that a couple of weeks into September, about a week before the election, we saw protests happening at the hospitals and health care centres across this country. As a brand new mom and a federal candidate, I remember thinking about how scary it would be if I were going into labour and trying to get to a hospital that was blockaded by protesters. I know many watched in horror as these protests happened all across the country.

In Alberta, we saw those protests happen at two of our major hospitals: the Royal Alexandra in Edmonton and the Foothills Medical Centre in Calgary. I am very proud to say that luckily we did not have any of those protests in my riding of Fort McMurray—Cold Lake at our amazing health centres and hospitals. However, we very easily could have.

One thing I am really proud of is that the Conservatives' campaign plan actually had a protection proposal for Canada, the critical infrastructure protection act. It would have prevented any protesters from blocking infrastructure such as hospitals, roadways, rail lines and pipelines.

As some members in the House have already pointed out in this debate, these protests are evolving. A few months ago the protests were happening in hospitals, but this weekend we saw protests in the West Edmonton Mall. We do not really know what the next place for these protests will be, and while I believe that all members on this side of the House support the idea of peaceful protests and understand that it is a fundamental right here in Canada to peacefully protest, many of these protests, unfortunately, have been very violent. It is these violent protests that are the problem.

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I remember watching as traffic was being directed around the Royal Alexandra and the Foothills hospital. I watched it on the news. Police officers were allowing ambulances to get through, and I cannot imagine what that would have meant for me had I had a family member who was trying to access one of those hospitals at that point in time and was delayed in getting there. I think there is overall agreement on this, but the bill is a bit too narrow because we are only protecting certain small locations.

One thing that is critically important to do is thank our health care workers. Our health care workers have stepped up. They have brought us through this pandemic by smiling through their masks, by protecting us and by serving us to the best of their ability, often working extra shifts to make sure that all patients had the very best of care.

I am someone who is generally quite healthy and I do not go to hospitals. However, having been pregnant this last year, I probably went to the hospital more often than I had gone in the 10 years prior. I was very grateful that each and every time I went to the hospital, I was greeted by friendly, amazing health care workers who really did step up. That is one of the big pieces.

In my hometown of Fort McMurray, we saw countless acts of kindness toward our health care centre, the Northern Lights Regional Health Centre. At the very beginning of the pandemic, flooding hit the community of Fort McMurray and hundreds of people stepped up, filled sandbags and protected the hospital from flood damage. We saw people putting the needs of the many well ahead, and it was spectacular to watch.

We also had some pretty unexpected health care heroes who stepped up and helped us in a way that really hit close to the heart of so many, me included. We had help come from far away. We had a team of seven spectacular health care workers: two doctors, four nurses and one nurse practitioner. They flew to Fort McMurray all the way from Newfoundland and Labrador to help us in our surge capacity.

● (1725)

We welcomed them with open arms. We did everything we possibly could as a community to make sure these health care professionals knew they were supported and welcomed in our community. I think there needs to be more done in general to show our thanks.

I remember chatting with Brian, a constituent of mine, during the campaign. He decided that he was going to show his support for our health care workers, so he and his company bought hundreds of donuts from Tim Hortons on the National Day of Truth and Reconciliation and brought them to our hospital to thank our nurses and doctors. He said it was a double win because the money went toward amazing charitable organizations to help further truth and reconciliation, and it was a tangible way of thanking our nurses and health care professionals. Little acts like the one by Brian need to be done more often. We need to show kindness, compassion and a level of respect.

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I am blessed to have some amazing friends who are nurses working at our hospital. They are always there. I know many of them have given up their evenings and weekends and have taken on extra shifts. They do that gladly because they are there to serve.

I think of one particular friend, Katie, and all of the amazing work she has done in going from team to team to make sure that our health care centre, our hospital, has all of the nurses in the right places at the right time and with the right training. I think about the nursing students who joined our hospital before finishing all of their schooling so they could help in our time of need. It is these kinds of things that really are important. It is about compassion and kindness, and they need to be shown. Often when these protests were happening, they turned quite violent, and respect and kindness were not witnessed. It is therefore critically important to make sure we find a balance so that peaceful protests can happen.

However, I do not think a hospital or health care centre is necessarily the best place to have protests of any form, to be perfectly clear. Most people who go to hospitals are not going because they choose to go, unlike our health care workers. Most people are going because they are under some kind of duress or in distress. They would rather not be there, so seeing these protests probably does not make their lives any easier.

The bill, as some of my colleagues have mentioned, is a bit of an omnibus bill that clashes together many pieces, and I think we should bring it to committee to explore all of its different pieces and consider its intent. I have heard some great speakers on the other side explain some of the rationale behind the bill, but I really think it would benefit from further exploration at the committee stage to ensure that we are always putting forward the best possible legislation for all Canadians so we can serve Canada as a whole.

• (1730)

Mr. Mark Gerretsen (Parliamentary Secretary to the Leader of the Government in the House of Commons (Senate), Lib.): Madam Speaker, I congratulate my colleague on being a new mother. I understand she was previously in the Alberta legislature, so I welcome her to the House.

When we talk about what fuels the individuals who engage in harassment-type activities in front of hospitals, I cannot help but think there are certain elements about this relating to the roles that leadership play. I think of the new caucus that has been formed in the Conservative Party, the liberty caucus. I wonder what the member's thoughts are on that caucus and what it tends to promote. Does it fuel the rage and frustration of the people who participate in these activities?

Mrs. Laila Goodridge: Madam Speaker, I think the member's question was very misplaced, but I will thank him nonetheless.

Our caucus has shown a great deal of leadership, as have all members of the House, in following all of the rules and acting with that leadership space. I was previously a member of the provincial legislature in Alberta. I shared some of my personal medical history. I actually got my first dose of the vaccine when I was 20 weeks pregnant. I very proudly did so, because I thought it was important for women across the province of Alberta, as well as across the country, to see that their leaders were making those decisions. Based on medical advice that I had received from my health care

team, I made that decision. I encouraged others to talk to their doctors. That is one of the things I think is really important: to make sure that everyone is taking that time.

• (1735)

[*Translation*]

Mr. Martin Champoux (Drummond, BQ): Madam Speaker, unless I missed something, it is hard to determine whether our Conservative colleagues are going to vote for or against Bill C-3.

After all, there are a few contradictions. The English-language media has been reporting that the Conservatives consider it unnecessary to amend the Criminal Code. In the French-language media, however, we sometimes heard the member for Mégantic—L'Érable bring up the notion of prohibiting demonstrations near hospitals and key infrastructure like railroads or pipelines, which is part of the Conservatives' platform.

Furthermore, we have not really heard anything from the Conservatives about the proposed 10 days of paid sick leave. I would therefore like to know if my colleague can shed a little more light on these issues, because I would really appreciate it.

Mrs. Laila Goodridge: Madam Speaker, during the last election campaign, we included protecting critical infrastructure such as hospitals, pipelines, highways and railroads in our platform.

It was a really popular issue, as we saw in many provinces across the country, including Alberta, where I am from.

[*English*]

Ms. Lori Idlout (Nunavut, NDP): *Uqaqtittiji*, as I mentioned earlier today, another example of the lack of health services has to do with three communities in Nunavut: Igloodik, Gjoa Haven and Sanikiluaq. Each of those communities has a population of over 1,000 people.

The services I have been talking about and the paid sick leave are all very important. I am trying to hear how difficult it might be for paid sick leave days. My question is very similar to what the other member just asked about paid sick leave.

Does the member agree that it is time for 10 days of paid sick leave for our workers?

Mrs. Laila Goodridge: Madam Speaker, the member has raised a very important question in regard to this bill. It is a question that we really need to take to committee to be able to study further and to see some of those answers.

We have not been able to have members from the other side of the House give us any clarification as to whether this piece would actually apply to contractors or other federally mandated and regulated employers. That is important—

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): Resuming debate, the hon. member for Langley—Aldergrove.

Mr. Tako Van Popta (Langley—Aldergrove, CPC): Madam Speaker, I am here to talk about the government's proposal to amend the Criminal Code to criminalize certain behaviour, which I believe most Canadians thought was already against the law.

Before speaking to Bill C-3, I would like to take this opportunity to thank the fine people of Langley—Aldergrove for endorsing me for a second term. It is a great honour to be re-elected. I have promised my constituents that I will be a clear voice for them in this Parliament.

I want to thank my wife, Inga, and my extended family for their ongoing support. I also want to thank the many volunteers who helped me throughout the campaign and made my success a reality. Politics is a team sport.

Moving onto Bill C-3, an act to amend the Criminal Code and the Canada Labour Code, I am going to focus on the Criminal Code aspect of the bill, which would make harassing health care workers illegal if the intent is to prevent them from doing the work of serving the public.

As I said, many people think that this is already against the law. There are provisions in the Criminal Code that the police and prosecutors could rely on to prevent this type of anti-social behaviour. One thing we have learned through the pandemic is that we must value our health care workers as they are essential to the full and proper functioning of our society and our communities. We owe them a debt of gratitude.

Everybody in this House knows a health care worker, is related to somebody who is a frontline health care worker, or is a neighbour to one. I have two family members, a daughter and daughter-in-law, who are. One is a care aid in a seniors home and the other is a nurse in a hospital. Every day they go to work, and they are eager and happy to serve their patients to the best of their abilities.

Sometimes they are in very stressful situations, such as situations of understaffing or having to be moved from one ward to another on very short notice. Sometimes they have to work extended shifts due to a shortage of health care workers. Sometimes they have to work in the COVID ward. I think not only of the health care workers, but also of the family members, who share the risks, stresses and strains of health care work.

This law is a step in the right direction. It is a gesture in support of our health care workers. A more constructive and substantive way to support our health care workers would be by hiring more nurses. The shortage of nurses is a long-term problem that we knew about long before the COVID pandemic, but it has been exacerbated by that.

I met with members of the Canadian Federation of Nurses Union. I have a quote here from a publication they shared with me. It states, “Many risk factors for burnout have been exacerbated during the pandemic, including increased patient acuity, understaffing...increased overtime...reassignment to unfamiliar roles”. It goes on to say, “Prior to the COVID-19 pandemic, severe burnout was typically found in 20%-40% of healthcare workers.” In the spring of 2020, at the commencement of the pandemic, that percentage increased to between 30% and 40%, and by the spring of 2021, it was more like 60%.

The publication goes on to say that job vacancies for registered nurses had the largest increase of all occupations over a two-year period. This is what is happening to our health care workers. There is a shortage of them and that shortage is increasing stresses and

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strains. The best thing that we could do for our health care workers would be to hire more health care workers.

I asked the people with whom I met with whether there is a shortage of people who want to be in the nursing industry, and I was told absolutely not. There are many applications to universities and to nursing schools across the country, but not enough seats in these nursing schools. I am thinking of Trinity Western University in my riding. The nursing school has a very good reputation across the country and around the world, and it would love to open up more chairs. That is what we need to do. We need to increase the supply of nurses.

Let us go back to Bill C-3. I am happy to listen to the debate. There seems to be a consensus developing that we are all in support of this bill. I am happy to hear that we want to support our health care workers, but I am hoping there is also a consensus forming around the right of protest.

● (1740)

Long-standing democratic rights in our society include the rights to freedom of expression, freedom of assembly and freedom to protest; however, they need to be done in a balanced way. No rights under the Charter of Rights and Freedoms are absolute. They are always subject to such reasonable limitations as defined in law and as are demonstrably justifiable in a free and democratic society. The question for the committee would be to determine whether we have found that right balance in Bill C-3. It is an open question.

The effective paragraph in the bill states:

No person is guilty of an offence under [the relevant] subsection...by reason only that they attend at or near, or approach, a place referred to in that subsection for the purpose...of obtaining or communicating information.

We are allowed to have information pickets. I agree with that. I think everyone in the House is going to agree with that, but the right of protest does not extend to interfering with the proper functioning of society.

I am going to pivot to something that was in the Conservative platform in the last election. Reference has been made to it by several of the previous Conservative speakers. We are proposing to introduce a critical infrastructure protection act that would prevent protesters from interfering with infrastructure projects, whether they are hospital construction, transit construction or pipeline construction. Yes, we have a right of protest. No, we do not have a right to interfere with legal projects that Canadians have determined are essential for our society. I am very pleased that we are introducing Bill C-3 because not only would it protect health care workers, it would also set a good precedent for us going forward.

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I look forward to an opportunity, at some point, to introduce something like what the Conservatives were proposing: a critical infrastructure protection act. The work that the committee would do, and that Parliament is doing right now around Bill C-3, is going to be precedent-setting for legislation going forward that would regulate how protesting is to be done. Peaceful protesting is allowed, but getting in the way of society's functioning is not.

• (1745)

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, the member made reference to our health care workers. It goes without saying just how much we collectively appreciate how our health care workers have stepped up to the plate.

Many years ago, I was the health care critic in the Province of Manitoba. We found that for many health care workers it was more than just the demand of getting more nurses into the profession. It was the way in which human resources often allocated staffing years and things of that nature at different institutions.

I am wondering what the member thinks of the Standing Committee on Health looking at this as a possible study, going forward, on health care workers and how Canada can provide some national leadership on the whole health care resources file, with a special focus on nurses.

Mr. Tako Van Popta: Madam Speaker, it starts with having enough people in the workforce. Right now, there is a shortage of health care workers. We are focusing particularly on nurses. We need to solve that problem. We need to get enough people in the workforce working in hospitals and in the many other fields where nurses serve their patients and keep Canadians safe. That is where we need to start. I would certainly be open to any suggestions about how hospital administrators allocate those resources, but the resources need to be there first.

[*Translation*]

Ms. Marie-Hélène Gaudreau (Laurentides—Labelle, BQ): Madam Speaker, I am having a hard time understanding what is going on. We hear about the need for health transfers and funding. I hear my colleague talking about what can be done to address the labour shortage, to maintain and respect the work of nurses, but we know that the solution is to increase health transfers and let the appropriate jurisdictions do their work.

On the subject of protests, which we heard a lot about during the election campaign, what happened? Quebec took the bull by the horns. As recently as September 2021, the National Assembly took direct action on protests.

What does my colleague think of the solution of increasing health transfers and giving Quebec and the provinces the authority to respect our health care workers?

• (1750)

[*English*]

Mr. Tako Van Popta: Madam Speaker, the member's question gives me an opportunity to talk about jurisdiction and Canadian constitutional law. I am not talking about the federal government taking over jurisdiction. Of course, we are going to work with the provinces. Health care is a provincial matter. The federal govern-

ment needs to work with the provinces to find the best way to increase health care resources.

Ms. Lisa Marie Barron (Nanaimo—Ladysmith, NDP): Madam Speaker, since the pandemic, the NDP asked the Prime Minister 22 times to fix the old version of the paid sick leave so more workers could access it. Constituents in my riding of Nanaimo—Ladysmith have had to choose between their health and paying rent. This is a choice that no one should have to make. The Conservatives and the Liberals have also voted against making life-saving medications more affordable through pharmacare.

Could the member share when they will start putting the health and wellness of workers, and families first and will my colleague support the much-needed 10 paid sick days for workers?

Mr. Tako Van Popta: Madam Speaker, as other speakers have said, this needs to go to committee to be studied. We do not have a lot of detail about the government's plans in that regard. I do know that many unionized workers working in federally regulated industries have paid sick leave in their contracts, and I believe in the sanctity of contracts. I would certainly be willing to look at gaps where further assistance is required. However, that is for the committee to look into.

Mr. Frank Caputo (Kamloops—Thompson—Cariboo, CPC): Madam Speaker, it is a pleasure and an honour to speak while you are in the chair. I congratulate you on your appearance before the House.

In short, I support the bill going through second reading and moving on to committee. Like my colleague for Langley—Aldergrove, after a few brief comments I will focus on the proposed Criminal Code amendments.

Canada's Conservatives, and our recent platform on this point really bore it out, will continue to be the voice for working Canadians, especially those who have been left behind by the current government.

I will now move on to what is very important not only in my riding but in a number of ridings, which is the implication of Bill C-3 when it comes to health care workers.

It is a pleasure to appear here on behalf of the people of Kamloops—Thompson—Cariboo. Our riding is geographically diverse. Places like 100 Mile House, which has a small hospital, or places like Barrière and Clearwater are often underserved and it is important that we recognize and protect not only the contribution those health care workers in that area make, but also recognize the tremendous importance they have.

In my own experience, during the election, I drove through a protest at Royal Inland Hospital. Two of the fellow candidates, the candidate for the Liberal Party and the candidate for the Green Party, had partners who were critical health care workers, so this was very close to my heart and mind during the election. It really emphasized the strain that the pandemic had placed on health care workers.

I want to emphasize for my colleagues in the House that time and again I commend what our frontline health care workers have done. We have seen them step up. I know at the beginning people would go outside and would frequently ring the bells every night as a commemoration to the health care workers. Slowly, those things started to disappear. Then, I believe it was nightly, there would be a procession of all first responders, such as the police, the sheriffs and the ambulances. Then that went to weekly. It can be very easy to forget the sacrifices that have been made by our frontline health care workers. I want to appreciate them as the member of Parliament for Kamloops—Thompson—Cariboo as well as simply a citizen of Canada. I appreciate all the work they have done.

A number of people in my riding have really risen to the occasion during this time, for instance, the workers in specific facilities with outbreaks, seniors homes and the Royal Inland Hospital in Kamloops. Nurses in 100 Mile House stayed in hotel rooms in order to protect their families. Volunteers ran immunization clinics smoothly. People like Dr. Shane Barclay and Laura Bantock lobbied for and obtained a testing centre in Sun Peaks, which is vital to our community, our tourism, our fabric and our recreation in Kamloops—Thompson—Cariboo. It is critical that we see tourism thrive in a place like Sun Peaks and eradicating the pandemic from Sun Peaks is obviously of critical importance. With that, it is a pleasure that people do not have to travel to Kamloops to have a safer place to work, worship and play.

The Criminal Code offers protections to a number of groups. There are already provisions with respect to threatening and intimidating, but Bill C-3 goes one step further. Even in these discussions, the Hansard that is created is important to reflect what the House believes. As somebody who practised law for a number of years and spoke about sentencing on these types of issues, it is important that what we say here reflects the consensus and the issues before the House.

The Criminal Code already reflects that it is an aggravating feature to threaten, assault or intimidate certain groups. I think about section 270 of the Criminal Code with respect to assaulting a peace officer. It is an offence to assault anybody, but Parliament has said that when one assaults a peace officer, one has gone one step further and the offence is recognized with a greater level of seriousness for obvious reasons.

• (1755)

It is the same thing for children. There are offences that relate specifically to children to reflect the seriousness of committing an offence against a child. Similarly, when it comes to intimidation and obstruction of justice, there are offences that protect justice system participants, reporters and people who carry out their justice system practice.

Government Orders

With what I have already said, health care workers are integral to the functioning of our society. Various colleagues on both sides of the House have noted already the strains they are under, so I will not repeat them. However, I wish to note that it is very important that we do protect these groups.

I am in favour of studying these issues further at committee. I am therefore speaking in support of the bill going to committee.

Mr. Mark Gerretsen (Parliamentary Secretary to the Leader of the Government in the House of Commons (Senate), Lib.): Madam Speaker, during the course of the debate today, we have heard at least a couple Conservative colleagues try to draw a parallel between the protests that are happening outside hospitals with those that occurring along pipelines.

I wonder if the member thinks that when this does get to committee, we should draw that comparison and try to further the legislation to include looking at protests along pipelines.

Mr. Frank Caputo: Madam Speaker, Canada relies on infrastructure. At this point, what is before the House is the protection of health care workers. I certainly would be in favour of looking at legislation that protects any critical infrastructure, not just pipelines. Infrastructure is just as critical to Canadians as health care is, so I am in favour of any legislation that extends protection to our system functioning smoothly.

• (1800)

Ms. Lori Idlout (Nunavut, NDP): *Uqaqtittiji*, first, it is my first opportunity to congratulate the member for Kamloops—Thompson—Cariboo on his election. I noticed that his speech was silent on the amendments to the Canada Labour Code, yet he spoke passionately about the importance of health professionals.

According to Statistics Canada, my riding of Nunavut has the lowest ratio compared to the rest of Canada for the national average of doctors to residents, which is 85 doctors per 100,000 people. Because of the many issues that we have facing health care in Nunavut, I am particularly interested in what the member's position is on allowing medical certification to be relaxed. Bill C-3 talks about the requirement for medical certification and I would like to hear his position on relaxing the provisions set out in Bill C-3.

Mr. Frank Caputo: Madam Speaker, I live in a riding where there is a significant doctor shortage, but it is nowhere near the shortage that my colleague from Nunavut mentioned.

With that, I support anything that is going to get more people into health care facilities. I am open to discussing this at committee so we can dive into it more. Hopefully, we can all come to a consensus so there can be more doctors and nurses. It would be helpful because, simply put, we are just not turning out enough doctors and medical practitioners.

Government Orders

[*Translation*]

Mr. Martin Champoux (Drummond, BQ): Madam Speaker, I have to just shake my head when I hear my colleague talk about finding solutions to help regions experiencing a shortage of health care workers.

There is a very simple solution. Health falls under provincial and Quebec jurisdiction. We therefore reiterate the unanimous request of Quebec and the provinces to increase health transfers, without conditions. That is the best way for Quebec and the provinces to take charge of recruitment and ensure that all regions in each Canadian province and in Quebec will be well represented and have the staff they need.

Does my colleague agree that the government should commit to an immediate and unconditional increase in health transfers, as called for by Quebec and the provinces?

[*English*]

Mr. Frank Caputo: Madam Speaker, a part of our Conservative platform was actually an increase in health transfers. As my colleague for Langley—Aldergrove pointed out, this is a jurisdictional issue, health care is provided by the provinces, and the federal government does provide funding for that. As set out in our platform in the most recent election, we were all for increasing health transfers to the provinces given our aging population and the need for ongoing care.

Mr. Damien Kurek (Battle River—Crowfoot, CPC): Madam Speaker, it is certainly an honour and privilege to once again rise and enter into debate in this place.

If members will indulge me, I will share a few thanks and a few thoughts prior to getting into the substance of what we are here to debate today, which is the Liberal's new bill, Bill C-3. It truly is an honour to serve, and along with that there are some thanks that I need to pass along.

First, I need to thank my wife Danielle, who has stood through what has been a very interesting first term in Parliament. Of course, when we had that discussion about whether or not I would let my name stand again, she was very supportive, and we hope that we can see a return to at least some level of normalcy as we move forward. I send my love to my wife, Danielle, and to my boys Matthew, Emerson and Winston. I love them, and I am so thankful for the support that they give. Even though sometimes it may be a little hard for the boys to understand, as they are five, three and soon to be six months, I am so thankful for that love and support.

I thank my staff, my campaign team, my EDA and all those who help make an election happen.

I would also like to take a moment to thank, in what was undoubtedly a difficult election in many ways, those other candidates who ran and showed up. There was one party that notably did not even show up in this last election, and that was a travesty for democracy in central Alberta. Anyone who puts their name on the ballot deserves thanks and respect, and I have that for those who ran in Battle River—Crowfoot.

I thank all those poll workers and local individuals who helped to make sure that an election could happen, even though it was an

election, I would suggest, that nobody really wanted except for the Prime Minister who sits across the way. However, they also deserve our thanks.

Of course, I am deeply grateful for the people of Battle River—Crowfoot for once again sending me to be their voice in our nation's capital to ensure that the interests of rural, east central Alberta are heard, and that is certainly what I plan to do.

I will share a few thoughts and observances from the election. I found it very interesting that just two or three months prior, the Prime Minister's itinerary came out saying that there was a visit to the newly appointed Governor General's residence, and I could not help but think that he would be going back on his word. Now, it would not surprise many within this place and many Canadians that we cannot take the Prime Minister's word all that seriously. The signs were already there for a fourth wave, yet he put his personal political interests before the lives of Canadians. It is a shame. I have some unparliamentary language that comes to mind, but I will spare members that.

Over the course of the summer and during the election, I had a chance to speak with many constituents who brought up a myriad of concerns. One constituent, a man by the name of John Dillon, brought forward something that I told him I would share in this place. I had spoken with him during the previous election, and I was reminded when I went to his door again. This 40-year Air Force veteran asked a question about why parliamentarians get preferred treatment over the men and women who wear our nation's uniform. Why does it take him decades to qualify for his pension while it takes a politician six years? We continued to talk over the course of a fairly extended period of time about some of the frustrations that he has, and about the hypocrisy and the frustration with the political status quo in this country.

I hope to get to as much in as possible in 10 minutes, which is not a lot of time. I also spoke to constituents who were frustrated beyond belief on all sides of the political spectrum, and about how divisive and polarized politics are in this country. A number of times, I would encourage constituents I was speaking with to make sure that they looked a little beyond Facebook in terms of making sure that we were having dialogue. Certainly, there is politics and partisanship in the House, and that is okay, but we also need to make sure that we are always working for the best interest of Canadians.

● (1805)

The concerns around western alienation are very real. I have talked to many people who have given up hope on Canada. It is heartbreaking to speak with many constituents, more than I can count, who suggest that an independent path forward is the only option. I pleaded with them. We spoke about the issues and talked about how it is not too late, and to not give up hope on this country in spite of the many frustrations.

We heard rumours that the Liberals would be mandating a reduction in fertilizer, which could very well take away the livelihoods of farmers in my constituency. We heard rumours about further activism when it comes to the oil and gas sector, which turned out to be more than accurate when the Prime Minister appointed a criminal activist as his environment minister, and the Prime Minister went to COP26 and decided that the only justice in a transition was to put my constituents out of work. That is shameful.

From COVID challenges to the challenges with our economy, it is Canadians who are paying the price. I certainly look forward to being able to stand up for their interests.

Now on to the substance of Bill C-3. It is interesting that we see an issue that Conservatives have actually talked a fair bit about and provinces have taken action on, and that is access to critical infrastructure. Almost all Canadians would agree that a health care professional going to work or a patient needing care should not be denied access to a hospital. I would hope that is simply common sense, although as I am often reminded by many, including my father, common sense seems to be not so common anymore.

What I find interesting is that in the midst of this debate being part of this two-part bill, and I will get into that in a second, it is in the political interests of the Liberal government to now bring forward something that it saw a political opening for, whereas Conservatives had actually called for this sort of action when critical infrastructure had been placed at risk. Supply chains had been put at risk in the past, and a number of Conservative governments across the country have actually taken action to ensure that critical infrastructure is protected.

I would suggest that is a good thing, although I do have a few concerns about some of the ambiguous wording. I found it interesting that the Liberals are quick to defend the appropriate balance that needs to be had to ensure freedom of speech but also to ensure safety of health care workers. I am glad that there are some Liberals who are encouraging that discussion to take place. Certainly, when it does not fit their political best interests, they will try to shout down any freedom of expression that they can. As this bill, I would suspect, goes to committee, it certainly is one of those issues that we need to keep at the front of our minds.

Before I get into the substance of part two of this bill, I think it is interesting that we have what is kind of a mini piece of omnibus legislation. We have two very different subjects that are addressed within this one bill. I would suggest that this goes against, certainly the spirit, if not directly against what the Liberals promised back when they ran for election first in 2015.

There are two very distinct issues, and I would certainly be encouraged if the Liberals were willing to send it to the two different committees where this could be addressed. When it comes specifically to the issue of paid sick leave, I have some very basic questions. How many people does this affect? One would think that, if the government is planning on implementing paid sick leave for all federally regulated industries within the country, that question would be one of the first to be answered. However, I have yet to hear a Liberal member articulate the answer to that question.

Government Orders

There is some further ambiguity about what this actually applies to in terms of contractors or simply federally regulated services, but if a contractor works in a federally regulated service but that service itself is not regulated, what is the application? That is, quite frankly, why it is concerning that these two very distinct issues are put together in one bill. Had they been separate, it would have been certainly more—

• (1810)

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): It is time for questions and comments, but before we go there, I would like to remind the hon. member to perhaps think before accusing certain members of the House of certain things.

Questions and comments, the hon. parliamentary secretary to the government House leader.

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, I will stay away from what the member might be trying to impute with his comments.

Within the legislation, we have the 10 days of paid sick leave, and no doubt there are a number of questions regarding that. We are hopeful it will go to committee, where those questions will be posed and responded to. It is important that we recognize that Ottawa plays a strong national leadership role on this. In British Columbia, I understand the provincial NDP government is now proposing five days of paid leave.

Does the member not recognize or see the value in Ottawa implementing legislation such as this, and the positive role and impact it could have on other jurisdictions?

• (1815)

Mr. Damien Kurek: Madam Speaker, if that member can clearly articulate some of the questions I have expressed about this particular part of the legislation and is willing to see it split up and sent to both committees to be studied, he is absolutely right: Ottawa plays a role.

I also hear daily from constituents, who are quite frankly sick and tired of hearing an Ottawa-knows-best strategy about all aspects of public policy within this country. There certainly is a great deal of frustration with how the Liberal government seems to only call for a team Canada approach when it has failed. I am fearful that is exactly what we are starting to see as this legislation goes through the process.

[*Translation*]

Ms. Marie-Hélène Gaudreau (Laurentides—Labelle, BQ): Madam Speaker, we have heard a lot about urgency, about the importance of various issues. We heard about it during the election campaign and we prepared for 65 days. Considering the legislative agenda of election promises, I would like to hear my colleague's thoughts on whether Bill C-3 has come at the right time, when there are other emergencies.

Government Orders

[English]

Mr. Damien Kurek: Madam Speaker, my colleague from the Bloc is absolutely right. In fact, I find it tragically ironic that the day of the election was meant to be the day the House was back in session. That took weeks upon weeks, let alone the administration required to set up committees and whatnot. Even at this point, that sees us with only a few committees being set up and months of delays.

This is in addition to the prorogation the Prime Minister promised he would never do and all of that, but the Liberals will say that is simply old news and it was different because they are Liberals. Delays have cost Canadians and have probably cost Canadians' lives. I would suggest that Canadians demand leadership. They certainly have not seen it from the Liberal government.

Mr. Gord Johns (Courtenay—Alberni, NDP): Madam Speaker, I want to thank my colleague for recognizing his own family. It is really important to recognize the service of people serving the public.

My colleague talked about urgency, and he talked about people's lives being lost. Medical health professionals, again, have decided that people need to get vaccinated and governments need to implement paid sick leave.

We have not heard from the Conservatives when it comes to whether they support paid sick leave. Are they going to stand up for workers or are they going to let them continue to go to work sick and make that difficult choice? When it comes to vaccines, we still have not received a clear answer from them on that, either.

Mr. Damien Kurek: Madam Speaker, I find it very troubling that we would have the Liberals' coalition partners, the NDP, playing into the divisive vaccine politics we saw during the election. This caused a level of division and, quite frankly, mistrust when it comes to such an important issue and is something that should have been the definition of not political. The government decided it was more important to play politics than to do what was right for Canadians.

When it comes to the reality faced by so many Canadians, including workers, I find it rich that the NDP is standing up and saying it supports workers. Thousands of workers within my constituency are having their livelihoods shut out because of the activism of a Liberal-NDP coalition.

In fact, more Canadians decided Conservatives would be a better option than any other party in this country when it came to a plan that would get our economy working again. It is unfortunate that the Liberals would rather play politics and put people out of work than stand up for what is best for Canadians.

Ms. Elizabeth May: Madam Speaker, I rise on a point of order. I was listening attentively to my hon. friend from Battle River—Crowfoot, and I thought I heard him say something very unparliamentary. I did not interrupt the course of questions and comments because I was not sure I had heard it. I would ask you, Madam Speaker, to check the record.

If our hon. colleague referred to the Minister of Environment and Climate Change as a criminal, then that does violate our rules. It is not only inaccurate; it is spurious. I do not know if it is possible at

this point to get a ruling or if the Speaker heard it. It certainly was unparliamentary.

● (1820)

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): I thank the hon. member for the point of order. I did actually call up on the member, right after his speech, concerning the subject.

Mr. Damien Kurek: Madam Speaker, if I said anything that was not true, I unreservedly apologize.

Mr. John Brassard (Barrie—Innisfil, CPC): Madam Speaker, I am very pleased to rise on Bill C-3 this evening. It is a very important piece of legislation that requires not just the attention of Parliament, but also committee scrutiny.

Let me begin by saying that I believe that Bill C-3 should have been split into two separate bills. We are dealing with two separate issues here, one as it relates to health care workers and protests outside health facilities, the other as it relates to federally regulated sick days and the provision of 10 days for federally regulated workers. I am hopeful that, when this does get to committee, it is going to get the scrutiny that it deserves.

Let me also say that we are so fortunate in central Ontario to have an incredible regional health facility. The Royal Victoria Hospital is world class in its ability to provide care, not just acute care but all kinds of care led by Janice Skot, who is the CEO of the hospital. She recently announced her retirement next year and I wish her all the best. She certainly has seen the transition of the Royal Victoria Hospital over the 17 years that she has been there into this world-class facility.

In fact, just recently I was fortunate that we were in Innisfil to talk about the expansion of the Royal Victoria Health Centre into the southern tier of our municipalities of Barrie and Innisfil. It is expected that, by the time it is fully functional, it could service up to 250,000 people a year. This is an important part of our community. It is an important part of all of the regions of central Ontario and does a great service to our communities.

I consider many of the people who work there friends of mine; doctors, nurses, great people who do terrific work and have been there on the front lines since this pandemic started with great adversity, great anxiety. I cannot imagine, at the height of the COVID-19 situation, these doctors and nurses and all of those who work in this health care facility not only having to worry about looking after the patients coming into the facility, but also having the anxiety about how to protect themselves and their families. I heard many stories of health care workers going home and changing in the garage. They had moved their washer and dryer into the garage so that they would limit the risk of potentially transmitting COVID-19 to their family members.

Government Orders

When vaccines came, it was a sense of relief for many health care workers. There was a challenge in the beginning. I recall having a discussion with the then minister of health, in fact I would call it an emergency meeting, when our community was running out of vaccines, not just for health care workers, but also for long-term care facilities. We can talk about anxiety. Many health care workers who were in the process of getting their second vaccine were told that their appointments had been cancelled. I called the health minister to ask her on an emergency basis if we could get the vaccines that were needed within our community not just for health care workers, but also for the long-term care providers as well.

Let us not just look at the health care workers and the work that they have done and how they should be free of intimidation and harassment in their workplace, but let us also acknowledge the long-term care workers within those long-term care facilities because they had equally anxious times during the height of COVID-19.

I want to focus on a couple of things, not the least of which is the divisive rhetoric that has gone on. We saw this at the height of the election campaign when there were not just protests in front of health care facilities, but there were also protests on the political front as well. We saw some of those protests play out on the nightly news. We saw them in health care facilities. I believe that every health care worker should be free of any form of harassment, particularly when they are going in to do the job.

How did we get here? There is this divisive rhetoric, and we are now in a position where we are talking about implementing legislation to protect health care workers when we have never been in this point before.

• (1825)

Obviously, we have heard through other speakers today that we have criminal legislation on the books for dealing with protests, much of which is dealt with at the local level. Regarding this divisiveness that has gone on, I certainly saw it through the election campaign. There has been misinformation, and I would suggest that there has not been enough information on the part of government to allow people to make an informed decision on the issue of vaccines. I happen to think that everybody should be vaccinated. I am vaccinated; in fact, I have my booster shot scheduled for December 19. Vaccines are an important tool in the tool box in ensuring that people are safe.

However, there are many people out there, almost five million Canadians over the age of 12, who have not received a vaccine at this point for various reasons. I have been dealing with this in my office, with people calling. They are not anti-vaxxers; they are just concerned about their health and the potential risks associated with vaccines. Perhaps they do not have enough information to make an informed decision.

This is where the role of government comes in, to provide as much information as we can to people so that they make the right decision, to get vaccinated. Many of them right now are in a position where they are at risk of their lives and livelihoods being lost and actually being unable to provide for their families.

A year ago, when we did not have vaccines, we had lots of other tools in the tool box. We were talking about rapid testing, physical

distancing, wearing a mask and washing our hands. Rapid testing seems to have fallen off a cliff right now. To accommodate those who perhaps still have that vaccine hesitancy and are not getting a vaccine, it is an important tool in the tool box that we need to be using.

I talked to someone in my riding about this recently. His entire family is vaccinated at this point, but he still has that hesitancy. I am using this example among many that I have received. He was told recently by his employer, after working there for 25 years, that as of this past November 1, he would have lost his job because he was unvaccinated. He has actually been extended now to January 29, and the reason he was extended is that his company is entering into a very busy Christmas period, so it cannot afford that loss of employment. In the meantime, the company has told him that it is going to rapid test him throughout that whole process.

Therefore, he is living with the backdrop of losing his employment and, quite frankly, he is scared, because he has family, including grandchildren. That reasonable accommodation that I spoke about still needs to happen today when it comes to making sure we are reasonably accommodating those individuals who at this point have vaccine hesitancy. We can do a much better job of educating and encouraging people to get vaccinated.

The other part of this legislation relates to the federal regulation on providing up to 10 sick days. I would agree with my hon. colleagues that people should never have to choose between going to work and staying home without pay when sick. Making sure we can accommodate those people who are in the unfortunate position of making that decision needs to be addressed as well.

As it relates to federally regulated industries having this requirement, there are many collective agreements that cover sick leave, but a small percentage do not. Those collective agreements can speak for themselves when dealing with this issue, but I will be interested to see, when this goes to committee, what we hear from all the stakeholders as it relates to the sick days.

In conclusion, a tremendous amount of anxiety still exists among everyone in this country, whether they are vaccinated or not. We have to tone down the divisive rhetoric. We have to make sure that in all cases, unequivocally, we are supporting our health care workers, who are doing such tremendous work to keep us safe. However, we also have to tone down the rhetoric and make sure we educate people that it is important to be vaccinated in order to deal with this crisis.

• (1830)

Mr. Mark Gerretsen (Parliamentary Secretary to the Leader of the Government in the House of Commons (Senate), Lib.): Madam Speaker, the member asked how we got here, and he seemed to imply that the reason there is a lot of misinformation out there has to do with the lack of ability or desire of the government to share information. I will be the first to say that information sharing is critical, and we should always do as much as we possibly can. However, the member seems to have completely glossed over the fact that there are a lot of people who are providing misinformation and who are questioning the science.

Government Orders

With all due respect, he gave a very reasonable speech today, and I am so glad he got vaccinated and he is getting ready for his booster shot, but there are so many people within his own caucus that feed this misinformation. I am wondering if he has had the opportunity to look inward and have these conversations with some of the members who, quite frankly, are in his caucus and spreading—

Some hon. members: Oh, oh!

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): Could members please give other members the opportunity to ask their questions?

The hon. member for Barrie—Innisfil.

Mr. John Brassard: Madam Speaker, to my point about this divisive rhetoric, there is no greater example than what we just saw.

I will go ever further. The Prime Minister has fed into this divisiveness. Members may recall when earlier this year the Prime Minister said that there would be no requirement for mandatory vaccines. Then, the day before he called an unnecessary election, he said there would be a requirement for mandatory vaccines.

One thing I have found out in my life is that the more we push people, the more they lean back. Instead of the divisive rhetoric, which we just saw a perfect example of, why are we not working with people to better educate them and encourage them even more? If they are still hesitant, why are we not accommodating them? Why are we not accommodating them even more?

[*Translation*]

Mr. Martin Champoux (Drummond, BQ): Madam Speaker, I am also confused by my colleague's comments, especially on what we should do with people who are still hesitating.

I am in favour of dialogue, and I think that we must have discussions and educate people. There are scientifically proven methods for dealing with the COVID-19 virus, including mask wearing, vaccination and ventilation systems. The COVID-19 vaccine is the most tested vaccine in the history of vaccination. More than 7 billion doses have been administered around the world. The numbers from the scientific community, reliable scientific sources, show how effective the vaccine is against COVID-19. At this stage, I do not see what more it will take to convince those who are hesitating to get the vaccine. In a way, I wonder if it is a lost cause.

What does my colleague think we should do with those who are going to reject the vaccine no matter what? We are putting ourselves at risk.

[*English*]

Mr. John Brassard: Madam Speaker, I made it very clear in my speech this afternoon just how important vaccines are. It was important for me in terms of my community and my family. I believe in the efficacy of vaccines, but the difficulty lies in the fact that there are still people who are unconvinced. I do not know what their reasons are. I use Scott as an example. His whole family is vaccinated and yet he is still a little concerned from a health standpoint.

Why are we not encouraging those people with more information, encouraging them to get vaccinated with proper information

instead of this divisive rhetoric? That is the point I am making. There is too much divisiveness. Let us work to encourage people to get vaccinated. That should be the role of leaders in this country.

• (1835)

Ms. Lori Idlout (Nunavut, NDP): *Uqaqtittiji*, it is clear now that my whole focus in my line of questioning has been to find ways to ease the burden on the health system. Nunavut has three main regions. Kitikmeot is one of them. With Kitikmeot, Cambridge Bay is the regional hub. Outlying those communities are Qikiqtaaluk, Kugluktuk, Kugaaruk and Gjoa Haven. They all rely on visiting doctors. There are no full-time doctors available to them. They do have available to them on-call physicians, who are available by phone to assist the nurses.

This bill, the amendments to the Canada Labour Code, would give the employer the power to require the employee to provide a medical certificate for any paid sick leave, regardless of the number of days—

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): I apologize, but I have to give the hon. member the chance to reply, and we are already over time.

Mr. John Brassard: Madam Speaker, there has been growth in the ways in which medical assistance has been provided. We have certainly seen that through COVID, where we have seen more on-line or phone call assessments. Those things have played a very important role throughout COVID.

Mr. Charlie Angus (Timmins—James Bay, NDP): Madam Speaker, it is a great honour, as always, to stand in the House, representing the people of Timmins—James Bay, and to be here in the House tonight as we, from all parties, attempt to pass legislation on what is coming close to the second anniversary of the pandemic.

If someone had said to me in March 2020 that we would be in the House debating the need to get 10 days of paid sick leave or to have laws in place to stop the harassment and threats of medical professionals by people who are our neighbours, I would have said it was simply impossible.

COVID has taught us, and COVID is a very hard teacher, but it has been clear from the get-go that it is something bigger than anything that was within our human imagination. Our generation has never seen anything like this. Throughout COVID, I find myself going back to Albert Camus's *The Plague*. I have been reading it and rereading it. He wrote:

Our townfolk were like everybody else, wrapped up in themselves.

He went on:

They disbelieved in pestilences. A pestilence isn't a thing made to man's measure; therefore we tell ourselves that pestilence is a mere bogey of the mind, a bad dream that will pass away. But it doesn't always pass away and, from one bad dream to another, it is people who pass away, [especially those who] haven't taken their precautions.

When we are talking about the need to have 10 days of paid sick leave two years into a pandemic, I feel like we have found ourselves in some kind of dark, dystopian *Groundhog Day*, that what we are repeating again and again are the same mistakes, and we are still having difficulty learning the lessons of a pandemic. The pandemic does not care whether we believe in it or not; the pandemic does not care if it is fair, and the pandemic certainly does not care about the short-term goals of various political leaders like Jason Kenney, who decided to announce that last summer was going to be the greatest summer ever, because he was simply going to ignore health protocols in order to make his party look good. He plunged Alberta into medical chaos and caused the deaths of too many innocent people.

I think of Doug Ford. As people were dying in warehouses in Peel, Brampton and the 401 and 905 areas, he was not willing to put paid sick leave in. In fact, he recently said he believed that come January there would be no need for vaccine mandates. This is a man who is still refusing to learn lessons.

We know here of the culpability of the Canadian government in fighting at the WTO against the right of the global south to create vaccines. Did anyone think that omicron would not happen, and that we would allow ourselves first-wave and second-wave boosters and protect ourselves but not ensure adequate vaccination in other parts of the globe, and that somehow the pandemic would not go there and come back? Now we are dealing with omicron.

Camus says that we have learned that the pandemic has made us all share the same collective fate. It is a hard lesson we are learning.

I remember how everyone rose up in the first wave and how hopeful it was. People took up hobbies and people were going to get themselves physically fit. Camus said, “At first, the fact of being cut off from the outside world was accepted with a more or less good grace, much as people would have put up with any other temporary inconvenience that interfered with only a few of their habits. But now they had abruptly become aware that they were undergoing a sort of incarceration.”

I think, in the isolation and difficulties, the vast majority of people carried on. This morning, when I walked through the snowstorms in Ottawa, I saw almost every single person wearing a mask. The vast majority of people have taken up what they know is going to be a difficult and maybe long-term issue. Sure, they complain. They have a right to complain, but they carry on.

● (1840)

In the first and second waves, people phoned our offices daily. We tried to help, we tried to give them answers and we tried to keep businesses going. Those people had legitimate fears, fears about the future of their business, fears about health care, fears about all the disinformation and falsehoods. They were all legitimate questions because we were dealing with something bigger than ourselves.

I found by the fourth wave that things had shifted to a sullen tiredness in the vast majority of people. However, a small minority of people had gone to a different place, a kind of radicalized sense of self-isolation and self-entitlement, a belief that somehow the government, the medical institutions and their neighbours were all against their right to go and do what they had always wanted to do.

Government Orders

They were not doing their share, so the rest of the population was doing it.

Then we started seeing these terrible images that compared the mass murder of the Jewish families in Ukraine with the fact that Buddy could not go to East Side Mario's because he refused to get a vaccine. Then they began to turn on frontline medical workers. I talked to paramedics who said to me, “What is it about us?” These paramedics were out in the middle of the night on the highways at accidents, or were helping during the opioid crises, or were on the front lines at the hospitals. They wanted to know why they were being targeted. In my region, a doctor was harassed and gave up her practice.

There is something deeply wrong when we have to come here at this point. Finally, after two years, we recognize the fundamental medical principle that if people are feeling sick, they should not go to work. That is the most common-sense way to stop the spread, particularly now with omicron variant.

The fact that we need to have a law to protect workers from harassment is deeply concerning. We will stand up for the medical workers and we will bring that law in. However, in doing that, let us not forget and let us not diminish the fact that there is incredible fortitude among the Canadian people.

I was very disheartened to hear my Conservative colleague talk about how we had to accommodate people who denied science, people who denied the need to have a collective responsibility for their neighbours, as opposed to saying no, that we stand for the right of people to go to work and be safe, that when people go to work, school or the hospital, they can go home at the end of the day even in these hard and uncertain times because they know their government is taking every step possible. That is part of what we are here to do tonight.

We need to address the need to change the TRIPS waiver. Canada has to stop being a laggard on the international stage. It has to show leadership. We are, as Camus says, all collectively in the same boat when it comes to the pandemic.

I would like to end by quoting Camus again, because what isolation has taught me is the power of family, the power of community and certainly, for me, the power of live music, which I hope comes back. Camus writes about the people in the village and says, “They knew now that if there is one thing one can always yearn for, and sometimes attain, it is human love.” He said that out of the plague that affected the people in his town, that he realized there was so much more to admire in people than to despise.

Finally, and I find this so powerful because I am so tired and disheartened and hurt by what COVID has done to the fabric of our communities and our sense of confidence and our ability to see each. Camus says, “What's true of all the evils in the world is true of the plague as well”, because it helps people “rise above themselves.”

Government Orders

We are in the fourth wave or the beginning of a fifth wave, I do not know how many waves, but we are not out of the COVID pandemic. It is with us now, but we do not have to give in to it. We do not have to give in to fear and we do not have to give in to stupidity. There are smart ways. It is the only way we can take on COVID and restore that sense of human community and the bond that keeps us together.

I urge my colleagues to support the legislation.

• (1845)

Ms. Elizabeth May (Saanich—Gulf Islands, GP): Madam Speaker, I want to compliment my friend from Timmins—James Bay for an excellent speech that makes a number of really important points. I wish I had time to delve into all of them. I hope he will forgive me for using the opportunity of asking him a question to make something very clear. There have been a lot of allusions in today's debate that somehow equate non-violent civil disobedience against pipeline construction, which is an effort to protect human health and to save our planet and why I was arrested in that activity, and harassing health care workers.

I would like to ask the hon. member if he does not agree that the equivalency is around the kinds of protests and that no protest should be in any way threatening or violent to any kind of worker. That is where we draw the line. It is not about whether it is infrastructure or a hospital. It is about the activity of the protesters. For some reason, anti-vax protesters have been allowed to conduct themselves in ways that were appalling while indigenous protesters were violently arrested.

Mr. Charlie Angus: Madam Speaker, I found it deeply concerning that my Conservative colleagues throughout this discussion, where we were all coming to terms with the need to protect health care workers, have continually insinuated that there is something reasonable about anti-vaxxers and that we should accommodate them when we have threats being made against children at toy stores, and then equating that with the right to protest of indigenous peoples.

The right of indigenous peoples to defend their lands and their territories is a fundamental principle that we have to stand up for in this House. I will always stand up in this House and say the right of indigenous peoples to defend their territories is a fundamental, universal principle whether the Conservatives and some of their anti-vax supporters like that or not.

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, there are two aspects to the bill. I agree with many of the words the member has said about health care workers, the whole idea of the protests, how our health care workers stepped up to the plate and the revolting treatment that some people feel they are entitled to give them.

My question is with respect to the other aspect of the bill and that is with the paid sick days. The NDP have implied that they have some concerns in regard to it. Can the member give any indication, from his perspective, if there are some specific amendments that they already have in mind? What are the concerns that the member would have with regard to that aspect of the bill, assuming that the member does support the bill in principle?

• (1850)

Mr. Charlie Angus: Madam Speaker, certainly, I think the deepest concern we had was that our leader pushed the Prime Minister 20-some times in the House on the need to have 10 days' paid sick leave as the first, second and third waves were hammering people. We saw such massive deaths, particularly in the for-profit, long-term care system, and we saw no action. It was not until the election was called that the Prime Minister suddenly had that come to God moment where he realized, "Please re-elect me and I will bring in something" that we had been asking for all along.

I am glad that we are bringing it in now. I am glad that we will get to committee to make sure that it works, but I think of all the people in long-term care who could have used this when the government refused to act.

Ms. Lianne Rood (Lambton—Kent—Middlesex, CPC): Madam Speaker, I want to congratulate my colleague for his great speech. I just want to take an opportunity to thank all the health care workers who are in my riding and our frontline workers who have been working so diligently through the pandemic over almost two years now. On Friday, I actually had the opportunity to be in Wallaceburg where the Chatham-Kent Health Alliance has announced that we are going to be building a new hospital in the riding. It is very exciting to see great health care coming into the riding to replace the old infrastructure.

I am just wondering if the member opposite shares the same sentiment that I have of thanking health care workers and making sure that we protect critical infrastructure, whether it is hospitals or beyond, and if he thinks that we should take this bill to committee so that we can study that to make sure that we are protecting all critical infrastructure.

Mr. Charlie Angus: Madam Speaker, let us always remember the incredible work the health care workers are doing. In Parry Sound the paramedics are going door to door right now to help people. They are doing home visits. That is how we step up in Canada. We have to be there for all our health care workers and all our frontline workers in every capacity to protect them from the kind of harassment that is ongoing.

Mr. Dane Lloyd (Sturgeon River—Parkland, CPC): Madam Speaker, it is a pleasure to rise and debate this important motion. I want to break it down because it really should be two bills. We are dealing with a Criminal Code matter and also a paid sick leave matter.

I listened with some amusement when a Liberal MP stood and said these bills should be connected because we are talking about protecting hospitals, but people also get sick and they need sick leave, so really it should just be one bill. By that justification, maybe we only need one bill in the House for the whole session because everything deals with money, so just one bill is needed. That is an aside.

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This legislation is important. I will start off by saying that our doctors, our nurses, the clerks and all of the staff at hospitals work incredibly hard. I have a lot of family in health care. Both of my grandmothers were nurses and my father is a nurse. Having a safe workplace is a right for all people.

During the last election, we heard a great deal of rhetoric in this country over the issue of vaccines. This rhetoric led to unacceptable activities. People crossed the line from peacefully protesting whatever their viewpoint was on a subject. We have the constitutional right to peaceful protest protected in this country. I was pleased to see language in the bill that emphasized that Canadians have a right to peacefully protest: they have a right to take placards to events to state what they believe. That is a fundamental right in this country.

However, when someone is harassing or intimidating health care workers, and in some cases we saw that health care workers were assaulted, that really crosses the line. We have Criminal Code laws that deal with this, but it is critically important that this legislation sends a strong message that this is unacceptable activity.

Thankfully, we have not seen these protests continue in recent days and in the weeks since the election ended, but if people feel the need to forcefully protest, I invite them to come to my office. I am a politician. We are here in the House, and this is where we make the decisions. It is not the nurses and the doctors who make the decisions, it is the politicians. Whatever my stance is on a subject, come to my office. People can protest at my office. I will invite them any day. I will argue with people. I will debate with people. That is what democracy is all about. Come to my office and leave the health care workers alone. That is a really important part of this bill.

We also have to talk about unnecessary rhetoric leading into this thing. We just need to lower the rhetoric on this situation so that we can bring Canadians together again. We had a divisive election. The pandemic crisis is causing people to suffer from mental health issues. This has been talked about by all members in the House, and I think we need a lot more understanding.

A lot of times when I listen to the Liberals, it seems like they are not understanding or recognizing the fact that they say in the House all the time that there is a mental health crisis, there are people who are feeling left out, there are people feeling lonely and there are people who have lost their jobs because of this pandemic. There is not a lot of understanding coming from the government.

It does not mean that I agree with the stances that people take, but when we have a government that is raising the rhetoric and demonizing individuals, it is no surprise that we see unacceptable activity like this happen. We need to talk about uniting Canadians again. On the Conservative side, we are focused on uniting Canadians.

The second part of this bill is talking about paid sick leave. We have heard a lot about 10 days of paid sick leave in the House. I was perusing the Internet, and the wonderful thing about the Internet is that once something is on there, it never really goes away. The first time I could find the government talking about paid sick leave was May 26, 2020. For those who were not here, that was a couple of months after Friday, March 13. I remember that day. I

was giving an S.O. 31. That is when the Prime Minister's wife contracted COVID.

That woke everyone up in the House to the fact that the pandemic was a really serious thing. It was starting to hit us and we needed to take action. There was a lot of scrambling. People did not understand what was going on. It was just a couple months later that it was recognized. The NDP fought for this and said that people needed 10 days of paid sick leave in Canada because people felt like they needed to go to work, but they might be sick with COVID, and the NDP did not want these people going to work and spreading that sickness around.

It was also around the same time that we were talking about bringing in a virtual Parliament. The NDP stood up very strongly and said they were not going to approve this virtual Parliament unless the Liberal government supported 10 days of paid sick leave. Here we are, well over a year later and in an entirely different Parliament, and we are debating this piece of legislation. It is literally just one page.

● (1855)

How difficult was it for the government to come up with this legislation? In the May 26 article, the government said it would be implementing this without delay. It has been over a year and a half. We have had an election, and we have had two throne speeches. The government has still not implemented the legislation. We are just targeting it now.

The Liberals were saying they had to work with the provinces about this. I do not see anything in this legislation to indicate why it would take the government over a year to negotiate with the provinces to get 10 days of paid sick leave. Now we have this one-page document, which is not even important enough to the government for it to warrant its own legislative number, as it has been grouped with a Criminal Code amendment. Obviously, it was not that complicated.

Why did it take the government over a year to implement paid sick leave? I think it is a bit ridiculous that it was talking about this May 26, 2020, and it is now December 6, 2021. There has been an election and two speeches from the throne. Now that we are talking about this in the House, Canadians are finally seeing action.

ADJOURNMENT PROCEEDINGS

A motion to adjourn the House under Standing Order 38 deemed to have been moved.

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[English]

THE ENVIRONMENT

Ms. Laurel Collins (Victoria, NDP): Madam Speaker, the last few weeks have seen devastating flooding in British Columbia. After a summer of extreme heat and climate fires, the climate crisis is here. It is real, and this is just the beginning. Canadians are already feeling the impacts. They want to see concrete action to address this emergency with the urgency required.

However, the Liberal government continues to delay. Canada remains the highest emitter per capita and is the country with the 10th-largest share of historical emissions. Since the Liberals formed government in 2015, Canada has become the worst performer of all G7 nations.

The environment commissioner has released a series of scathing reports on Canada's inaction, saying, "We can't continue to go from failure to failure; we need action and results, not just more targets and plans."

The Liberal government is not on track to achieve the targets it has committed to. The commissioner looked at the Liberals' emissions reduction fund, and despite its name, he found that this emissions reduction fund is not actually reducing emissions at all. The Liberals are using faulty greenhouse gas emission estimates to fund the oil and gas sector, putting at risk not only our emission reduction targets, but also the health of all Canadians.

Two out of three companies stated in their application that the program would allow them to increase production levels, which would lead to increased emissions, and more than half of the total claimed that reductions had already been accounted for under federal methane regulations.

Any funding aimed at oil and gas companies should at least, at the bare minimum, be tied to delivering emission reductions. Otherwise, they are undermining efforts to fight climate change and meet our climate targets. They are fuelling the climate crisis.

Not only did the government not link this funding to actual emissions reductions, it did not make sure it was getting value for money to help maintain employment or attract investments, which were the other aims of the program. Simply put, the Liberals are not showing the climate leadership that they repeatedly told Canadians they could expect.

The Prime Minister likes to talk about how his plan gets an A, and that his promises get top marks, but the sad truth is that the Prime Minister does not follow through on his promises. When one misses every single climate target and delays climate action in the middle of a climate crisis, one gets an F. It is failing.

Canadians cannot wait any longer while the Liberals drag their feet. Canada will not meet our climate targets if the government continues to subsidize oil and gas rather than investing in a credible plan for workers in a clean economy.

Why is the government continuing to give billions of dollars to big oil and gas? When will the Liberals stop dragging their feet on laying out a credible green jobs plan? When will they stop dragging their feet on investing in climate solutions? When will they take action that matches the scale and urgency of the crisis? When will we

finally have a government that not only acknowledges we are in a climate crisis, but also acts like it?

- (1900)

Hon. Steven Guilbeault (Minister of Environment and Climate Change, Lib.): Madam Speaker, I beg to differ on many of the assumptions that the member has made, but I will speak specifically to the issue of fossil fuel subsidies.

I will say to this House and to the member that Canada remains committed to phasing out inefficient fossil fuel subsidies, as was committed to by G20 countries in Pittsburgh in 2009, and that we committed to do so two years earlier than our G20 partners. These countries had committed to do this by 2025, and we will be doing this by 2023. To support Canada's efforts to fulfill its commitment, we have committed to undergo a peer review of those subsidies under the G20 process. Argentina will be doing that on behalf of Canada. Once the process is completed, the results will be communicated in a transparent and timely manner.

Canada has already made significant progress towards meeting its commitment to phasing out inefficient fossil fuel subsidies. Since 2007, the government has taken action to phase out eight tax measures supporting the fossil fuel sector.

However, beyond Canada's commitment to phasing out fossil fuel subsidies, the government also believes that creating good, well-paying jobs in the low-carbon economy and ensuring that workers have the right tools and skills essential to building a sustainable and prosperous future for Canada is a priority. Simply put, we cannot achieve climate action and the transition to a low-carbon economy without putting people first.

To empower workers and communities through the transition, we must address the immediate challenges of jobs and economic growth in ways that establish the foundation for long-term economic, social and environmental sustainability. The Government of Canada is delivering on this commitment by continuing to support workers and communities impacted by the phase-out of coal, and we are launching engagement on just transition legislation to ensure that workers and communities will thrive in a carbon-constrained world. We are also making significant investment in skills training to ensure workers are able to succeed in the low-carbon economy.

The measures detailed in budget 2021 are expected to deliver almost 500,000 new training and work opportunities for Canadians. Canada cannot reach net-zero emissions by 2050 without the participation, know-how and innovation ideas of all Canadians.

Adjournment Proceedings

• (1905)

Ms. Laurel Collins: Madam Speaker, when confronted with the failure of the emissions reduction fund to reduce emissions, the Minister of Natural Resources said that the program did not qualify as the kind of fossil fuel subsidy that the government has promised to eliminate by the end of 2023, despite 27 of the first 40 projects funded by the program claiming that they would be increasing production.

If handing out taxpayer money to oil and gas companies with no strings attached, and no assurances of reduced emissions, does not count as a subsidy, can the minister explain what does?

Hon. Steven Guilbeault: Madam Speaker, let me reassure the hon. member that the commitment of our government is to phase out fossil fuel subsidies that are aimed at increasing the production of said fossil fuels. Going forward, we will support every industrial sector, every sector of our economy, to decarbonize. We will be helping the cement sector, the aluminum sector and the auto sector. We will also be helping the oil and gas sector to decarbonize and reduce emissions so that Canada can reach its net-zero target and obviously our 2030 target.

INFRASTRUCTURE

Mr. Tako Van Popta (Langley—Aldergrove, CPC): Madam Speaker, last week I had a question for the Minister of Emergency Preparedness about the recent flooding in the Fraser Valley and in particular in Abbotsford, which touches on my riding. I pointed out in my question that the Sumas Prairie diking system needs repair. We have known that for a long time. That is not news, and we knew that the price tag would be roughly \$500 million, which seems like a big amount of money, but the cost to repair it if there was a flood would be significantly higher. Our worst nightmare came to pass a couple of weeks ago.

I was happy to hear the Minister of Emergency Preparedness say that there would be money. The federal government sees the responsibility there, so I hope he brought his chequebook today because I have a specific ask.

Here is a bit of background first. Sumas Prairie used to be Sumas Lake. It is a wetlands area. It was subject to annual flooding twice a year: a spring freshet and, in the fall, heavy rains such as we saw. About 100 years ago, it was diked off, canals were put in and big pumping stations pumped it dry. It is very fertile farmland.

There is another area of Abbotsford, which I am sure the minister is aware of because he visited there recently. It is called the Matsqui district. It is also low-lying land subject to annual flooding, but there is a diking system there. It held back the water this time around. That is a good thing because it is holding back the mighty Fraser. When that breaks, we have a really big problem.

I met with Mayor Braun on the weekend, together with my colleague the member for Abbotsford. We said to him that we were going to be meeting with the Minister of Emergency Preparedness, and asked him what specifically we needed. Mayor Braun said we needed money. Those two diking systems still need to be repaired at roughly \$500 million for each of them, and they need to be seismically upgraded. It is a lot of money and I recognize that. Therefore, we are asking for some money.

However, here is a second question for the minister, which is more complicated. We need to negotiate with the United States of America, because the Nooksack River, which runs solely within the state of Washington in Whatcom County, also contributed in a very significant way to the flooding this time.

This is also a problem that we have known about for many years. I read a report recently that talked about the complexity of it. It is complex. It is the harder question, and the harder problem to solve. I wonder what the Minister of Emergency Preparedness says about that.

The first issue is money, and the second is negotiating with the United States.

Hon. Bill Blair (President of the Queen's Privy Council for Canada and Minister of Emergency Preparedness, Lib.): Madam Speaker, I would like to thank my friend from Langley—Aldergrove for his collaboration on this really important issue.

He is absolutely correct: I recently travelled to Abbotsford. It is not the first time I have been to Abbotsford, nor the first time I have met with Mayor Braun. I am aware of the extraordinary impact the recent flooding events have had on that community and the many other parts of the Lower Mainland of B.C. that have been impacted.

I regret to tell my friend that I did not bring a chequebook with me today, but I have some other good news that I think will respond to his inquiry.

When this terrible event began, I was in regular contact with the B.C. government about it. In the earliest hours, the Canadian Armed Forces responded. To provide some critically important labour, 650 members of the Canadian Armed Forces arrived in the Abbotsford area and have helped with diking, repairs and sandbagging. I went there and witnessed the exceptional work they were doing, and they were doing it alongside the people of the communities that were impacted. Frankly, it made me proud, as I am sure it does my friend from Langley—Aldergrove, to be a Canadian to watch how people responded in these very difficult times.

I acknowledge that important work needs to be done. However, one of the things we have seen over the past several years is an increase in the amount of money the Government of Canada has been expending on disaster financial assistance, through the arrangements we have with the provinces and territories, in response to flooding events. In fact, some of the analysis shows that we can expect it, as a direct result of climate change, to rise exponentially, to five times its current level of expenditure. It is so important that we invest significantly in disaster mitigation and adaptation in all of those areas to ensure we have resilient infrastructure. The diking system to which my friend refers is a very important part of that.

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As I am sure he is also aware, the diking system was initially the responsibility of the provincial government, but it was downloaded to the municipality. Mayor Braun shared with me, as I suspect he shared with my friend, that because the municipality draws its resources from property taxes, it was unable to make the investments and do the work that was necessary. I spoke with the Premier of British Columbia and he said that was a mistake.

We have also set up a joint committee with the provinces and the territories, and I am insisting that municipalities be involved in it as well. We will invest federal dollars to accompany provincial dollars, and will work with the municipality to repair those dikes to ensure that we build a greater resilience for the community. Building back is not good enough; we need to build back better. I know that is sometimes an overused phrase, but we recognize the importance of investing in that.

Last year, in budget 2021, we committed \$1.4 million to the disaster mitigation and adaptation fund. We know where those dollars will need to be spent, and although there is no chequebook today, I want to assure my friend that we will be there with the people of British Columbia. That is a very important community in this country given the farm work that goes on there. We have seen the resilience of its people, and we need to make sure their community is resilient as well.

● (1910)

Mr. Tako Van Popta: Madam Speaker, spending \$1.4 million on a study is important of course, but we are talking about \$1 billion. If the minister did not bring the chequebook today, will it be in the budget? It is absolutely essential. It is existential to the Fraser Valley.

The minister did not make any reference to negotiating a treaty with the United States regarding the Nooksack River and the Columbia River, through the International Joint Commission. This is very important. We cannot do this alone. We need our American allies with us on this. I would like his comments on that.

Hon. Bill Blair: Madam Speaker, I have a point of clarification, as perhaps I did not make myself clear in my articulation. What we put in budget 2021 was \$1.4 billion for the disaster mitigation and adaptation fund. This is not for a study, but to begin to do some of the important work. I will also tell the member that in Lower Mainland B.C. and Abbotsford, as well as in many places right across the country, we know that work needs to be done.

Let me also acknowledge that parts of the United States, which in many ways has been ahead of us on this, have invested in creating a more resilient infrastructure to deal with the potential of disasters in its communities. However, this work is ongoing, with collaboration between our two countries.

We recognize that water does not respect international boundaries. It does not flow north to south; it flows downhill. When the Nooksack River overflows its banks, the water tends to head right up the Sumas Prairie. It was not solely responsible for the flooding that took place but was a part of it.

We will work with the Government of the United States, Washington state, the B.C. government and the communities impacted to make a difference.

THE ECONOMY

Mrs. Laila Goodridge (Fort McMurray—Cold Lake, CPC): Madam Speaker, I am very happy to rise today as I do not feel I received a satisfactory answer from the Minister of Families, Children and Social Development when I asked my question originally.

Not only does a child care deal not kick in for about five years, according to the government's own plans, it is completely separate from the issue of inflation. Yes, child care costs are high, but it is not why the cost of gas, home heating, groceries, diapers and pretty much everything else is going up faster than it probably should be. In fact, I would expect that the rising prices across the entire economy will probably get worse as government spending continues to increase.

Quite frankly, child care providers will have additional costs put on them if inflation continues to increase. They have to buy groceries for the children. They have to heat their facilities. There are many additional expenditures that will go onto those child care providers, and I am very curious how they will make ends meet.

Lowering child care costs is incredibly important for families that have children in need of care, but let us face some very important facts that this is a very small percentage of the population. It will not help people who have no children or families that have older children. It will not help seniors. It will not help the family with the stay-at-home mom or stay-at-home dad. It will not help a family that works shift work whose children need overnight care.

So many families are being left behind by those answers, and I really do want to hear what the government is doing with the very real issue that is inflation. Families are coming to me and sharing their concerns about making ends meet this month.

While it is wonderful to hear that some plans are in place to help some families, this does not help the senior down the street who is really struggling with the fact that groceries have gone up in price exponentially in the last little while. It does not help the families that are struggling today. Therefore, I really want to hear an answer from the government on how it plans to address this very real concern around inflation.

Adjournment Proceedings

• (1915)

Hon. Karina Gould (Minister of Families, Children and Social Development, Lib.): Madam Speaker, we recognize that inflation is certainly a challenge that families, indeed all Canadians and almost everyone around the world is grappling with right now. It is important to understand the basic premise around inflation. It is not that this is a uniquely Canadian issue. It is happening right around the world. It is caused by challenges with regard to the supply chain, by rising demand, by the fact that we are hopefully coming out of, although continue to be in, one of the worst global health crises that we have ever seen.

There are a lot of reasons we are in this challenging situation, but it is abundantly clear that this government has been there for Canadians both before the pandemic and during the pandemic, and we will be there after the pandemic. One of the very first things that we did when we came into office was bring forward the Canada child benefit, which meant we were not sending cheques to millionaires, like the previous Conservative government, but to families who needed them most. Before the 2019 election, we indexed the Canada child benefit to inflation because we knew how important it was for families to make ends meet. I have heard from countless constituents and families across the country about the difference that the Canada child benefit has made for their families, whether it meant they were buying groceries or able to afford diapers in a world that they were not able to before.

When it comes to seniors, it is one of the reasons we lowered the age of eligibility for old age security from 67 to 65. Let us not forget that the previous Conservative government would have put millions of Canadian seniors into poverty with that policy change. That was one of the very first things that we did when we were elected in 2015. In the pandemic, we also issued a one-time payment for all OAS recipients to help them with the additional costs they had, and another payment for families that received the Canada child benefit, understanding that costs were going up. This government has been there for Canadians of all ages, all backgrounds, all persuasions and all families, no matter how old their children are and we will continue to do that.

Let me talk a bit about child care. Child care is good for kids and it is good for families. Having affordable day care is going to help families deal with the rising costs of everything else around them, but it is also going to help the economy writ large. Let me provide one statistic: 240,000. That is the number of women who will likely enter the workforce because we are making child care more affordable. That means that we are going to be helping address some of the labour shortages, but it also means that families are going to be able to have both parents or a single parent working and hopefully

earning a better income. These are good things for kids, for families and for the economy writ large.

Finally, let me talk about the supports that we provided through the pandemic. My hon. colleague and members of the Conservative Party continue to talk about money into the economy as if it were a bad thing. At the height of the pandemic, nine million Canadians were on the Canada emergency response benefit. Let us just imagine if we had not done that. What would poverty in this country look like? This was very important. We were there for Canadians and we will continue to be there.

• (1920)

Mrs. Laila Goodridge: Madam Speaker, at the beginning of the minister's speech, she talked about the fact that inflation is a worldwide problem. Yes, it is a worldwide problem. However, it is worse in Canada than almost any country around the world. That is really important to know because, quite frankly, we need to make sure that what we are doing is actually taking care of all Canadians. The concern that I brought up around inflation is a real concern that is facing many families.

When I shared the clip on my social media, seniors reached out to me and sent me personal messages. They are very concerned that the question was important, was dismissed by the minister and that the real concerns about inflation and the cost of groceries going up were not being addressed. I live in northern Canada. I live in northern Alberta and groceries are more expensive—

Assistant Deputy Speaker (Mrs. Alexandra Mendès): The hon. minister.

Hon. Karina Gould: Madam Speaker, one thing I will not do and one thing our government will not do is pit different age groups of Canadians against each other. This is exactly why we know that supporting young families through affordable child care is not just good for young families, it is good for the entire economy. It is why we know that increasing old age security and the guaranteed income supplement, again, is not just good for seniors, it is good for the entire economy.

When it comes to lifting Canadians out of poverty, we will be here for them no matter what their age, no matter what their background, because it is good for all of us.

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): The motion to adjourn the House is now deemed to have been adopted. Accordingly the House stands adjourned until tomorrow at 10 a.m. pursuant to Standing Order 24(1).

(The House adjourned at 7:23 p.m.)

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