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Speaker: The Honourable Greg Fergus



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HOUSE OF COMMONS

Monday, May 6, 2024

The House met at 11 a.m.

Prayer

PRIVATE MEMBERS' BUSINESS

• (1100)

[*English*]

FOREIGN POLITICAL INTERFERENCE, VIOLENCE OR INTIMIDATION

Mr. Sukh Dhaliwal (Surrey—Newton, Lib.) moved:

That:

(a) the House recognize that,

(i) Canada takes global security very seriously and has several cooperative agreements with various foreign states to share security intelligence, protect democratic institutions, maintain the rule of law, and prevent violence and terrorism,

(ii) recent events, including the credible allegations of a link between agents of the Government of India and the killing of a Canadian citizen, Hardeep Singh Nijjar, at a place of worship on Canadian soil, are examples of rising forms of intimidation, threats, and interference from countries such as India, China, Russia, Iran, and others; and

(b) in the opinion of the House, to ensure that diaspora communities are protected from acts of political interference, violence, or intimidation on Canadian soil, the government should immediately review its measures that hold to account any person or agents of a foreign state undermining democratic institutions, engaging in acts of violence, or violating human or international rights, in order to bar these persons from entering Canada, and report to the House on the progress of these actions.

He said: Mr. Speaker, today I rise knowing that what I say, and what we do as a result, will have profound impacts on Canadians across the country.

On the evening of June 18, 2023, Mr. Hardeep Singh Nijjar, a respected community leader from my riding of Surrey—Newton, was brutally murdered outside the Guru Nanak Sikh Gurdwara in Surrey-Delta. Following this heinous crime, on September 18, 2023, the Prime Minister rose in the House and shared with us the credible allegations of a potential link between agents of the Government of India and the killing of a Canadian citizen at a place of worship on Canadian soil.

Just this past Friday, the RCMP announced the arrest of three individuals who investigators believe were tasked with the killing of Mr. Nijjar.

I commend the work of the law enforcement agencies for their collaboration in laying charges against the alleged killers. I also want to thank the family of Mr. Hardeep Singh Nijjar and the leadership of Guru Nanak Sikh Gurdwara and B.C. Gurdwaras Council for their continued advocacy. We must continue to highlight the importance of unity during these challenging times. It is crucial that we come together to condemn this heinous crime, support the grieving family and stand up for the principles of the rule of law.

The assassination of Mr. Hardeep Singh Nijjar has shaken communities across the country. I can recall the fear and anxiety in the days that followed, fears and anxieties that, for many of our constituents, have not yet gone away.

With that in mind, along with the help of my caucus colleagues, I got working on Motion No. 112, which I introduced on February 13. To ensure that diaspora communities in Canada are protected from the acts of political interference, violence and intimidation, our government must review its measures that hold to account any person or agents of a foreign state undermining our democratic institutions, engaging in acts of violence or violating human rights or international rights in order to bar these persons from entering Canada.

I know that many, particularly those from our diaspora communities, are being targeted and are feeling scared. I want to assure Canadians that we are a country governed by the rule of law and that our government will not tolerate foreign interference or threats against Canadians. Denying individuals from entering or remaining in Canada in order to prevent them from engaging in foreign interference is an important aspect of countering the threat.

The integrity and administration of inadmissibility provisions, both abroad and at our borders, contributes to defending against the threat of foreign interference in Canada.

While not all activities are conducted in person and many occur online or via Canadian proxies, a portion of foreign interference activity stems from the ability of foreign actors to travel to Canada. Effective screening, refusal or cancellation of immigration documents are important defences against foreign interference.

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This motion would help protect our democratic institutions and would raise awareness around rising forms of intimidation, threats and interference. However, it also expresses, in no uncertain terms, the need for the government to review its measures in protecting diaspora communities. Foreign interference threats take many forms and they do not come from one state. The killing of Mr. Hardeep Singh Nijjar is just one of many examples of rising forms of violence, intimidation, threats and interference from countries around the world, including India, China, Russia, Iran and others.

● (1105)

While some foreign states advance their interests in legitimate and transparent ways, many others act with hostility that can threaten our national interests and place Canadians and their families in danger. These covert, deceptive and sometimes violent actions are damaging, and they undermine our national security.

Foreign interference poses one of the greatest threats to Canada's way of life and our sovereignty. The threat is not new, but in recent years it has increased in both volume and complexity, coming from hostile foreign states and actors, and disproportionately affecting diaspora communities.

As an advanced economy and open democracy, Canada is a target of foreign interference. Protecting our democracy is not a partisan issue. All Canadians, irrespective of political stripe, have a role to play in ensuring our democratic institutions and values remain strong. Every Canadian deserves to feel safe. Canada is a country of diversity, peace and inclusion. We cannot, and we will not, tolerate hate and violence.

We must remain committed to addressing the threat of foreign interference by modernizing Canada's policies and legislative framework in ways that align with our national values, respect Canadian rights and freedoms, and account for a wide range of perspectives and experience.

In this age of disinformation, misinformation and foreign interference, we must continue to do everything in our power to ensure that fair and transparent democratic processes are upheld. As part of the commitment to combatting this issue, I am glad to see that our government has already held public consultations to modernize the Canadian Security Intelligence Service Act, the Criminal Code, the Security of Information Act and the Canada Evidence Act, which enhance our ability to address foreign interference threats.

With the appointment of Justice Hogue, we established a public inquiry into foreign interference, which recently released its initial report. A final report will be released before the end of 2024.

We have established the security and intelligence threats to elections task force, which identifies foreign threats, including those that aim to interfere with Canada's democratic processes.

I know that our government is working tirelessly to protect national security and public safety. We have provided \$48.9 million to the RCMP to protect Canadians from harassment and intimidation by foreign actors. This funding will also help the RCMP increase its investigative capacity and co-operate more proactively with communities that are most at-risk of being targeted.

The Canadian Security and Intelligence Service, CSIS, is key to protecting Canadians from foreign interference threats through its intelligence operations in Canada and around the world. Through budget 2024, our government is investing \$656 million over eight years into CSIS to enhance its intelligence capabilities, which is critical in our fight against foreign interference.

In order to build resilience, CSIS continues to work closely with diaspora communities to raise awareness of foreign interference threats. Some, including certain members of the House, may claim that this motion divides Canadians or that it pits diaspora communities against one another. That is completely false.

I brought this motion forward to protect all Canadians, so that we have the mechanisms in place to defend our democratic institutions, maintain the rule of law and prevent violence and terrorism.

● (1110)

I am proud to share that this motion has been jointly seconded by members from all recognized political parties. It is a product of my interactions with constituents and others across this nation, many of whom came to this country in search of a life free from political intimidation and interference. To those who came before us, and to many around the world still, Canada promises a life where a person can live with dignity and where a person's fundamental freedoms can never be taken from them.

However, I am afraid that the potential implications of Mr. Hardeep Singh Nijjar's murder confirm the worst fears of many Canadians. While people can come to Canada in search of a better life, while they can raise their children safe from the dangers faced by their parents and grandparents, it might not be enough. Perhaps the threats and intimidations of the past will follow them here.

Let us remain calm and steadfast in our commitment to democratic principles and our adherence to the rule of law. This is who we are, and what we do as Canadians. Our constituents trust us to do our best to protect them from any and all types of foreign interference, and so we must stand united against foreign powers that seek to undermine our fundamental freedoms and our sovereignty.

All Canadians have the right to feel safe and secure in their communities, and our government remains committed to taking the necessary steps to combat threats of foreign interference. Simply put, we cannot and will not allow these hostile activities to go on. We must continue our efforts while strengthening measures to hold to account any person or agent of a foreign state who undermines our democratic institutions, engages in acts of violence, intimidates diaspora communities in Canada or violates human or international rights.

Once more, I thank all the members from all the recognized political parties who have come together and encouraged me to stand in the House to defend Canadian values. For these reasons, I urge all members to support this motion.

• (1115)

[*Translation*]

Mr. Yves Perron (Berthier—Maskinongé, BQ): Mr. Speaker, I thank my colleague for moving this motion and I commend him on his speech. It is good. We will be voting in favour of the motion. As he said, all of the parties support it. However, I would like to ask him whether the motion is sufficient.

Part (b) of the motion suggests that maybe it is not. Unfortunately, there is no getting around the fact that the Liberal government has been dragging its feet on this from the beginning. It took a lot of pressure from the opposition for the government to finally launch a commission of inquiry into interference. We are starting to see results from that, but the work is not yet finished. What does the member have to say about that? What more could be done?

I would like him to talk about the foreign agent registry, which the government has talked a lot about but has not yet produced any results.

[*English*]

Mr. Sukh Dhaliwal: Mr. Speaker, I would like to thank the hon. member from the Bloc Québécois for supporting this motion.

As I mentioned, some steps that our government has taken include the appointment of Justice Hogue to lead a public inquiry, with a final report due by the end of the year; investing in our national security agencies to help them detect and stop malicious activities, including nearly \$50 million for the RCMP to combat foreign interference; and establishing a national counter foreign interference coordinator to coordinate efforts to combat foreign interference. These are some of the things, but I can tell members that there is more to come from the government to make sure that our sovereignty and integrity are protected and to protect Canadians.

Mr. Peter Julian (New Westminster—Burnaby, NDP): Mr. Speaker, I commend the member for Surrey—Newton for bringing forward this important motion. As he mentioned, it has the support of all the recognized parties in the House. It has been seconded by members of Parliament from each of the parties. This is an important initiative.

No one, no Canadian should have to fear being involved in their community in their own country. The tragic and horrendous murder of Mr. Nijjar indicates to all of us the importance of taking foreign interference seriously.

Justice Hogue has put forward her interim report. She indicates the importance of putting measures in place immediately. One, of course, is the foreign agent registry; another is having protocols.

What is the member's reaction to putting these elements in place immediately?

Mr. Sukh Dhaliwal: Mr. Speaker, I had the privilege of working with the hon. member for New Westminster—Burnaby for many, many years. In fact, when I first landed in B.C., it was in New

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Westminster. To answer his question, yes, I am also actively advocating that the foreign registry should come into effect immediately.

I would also like to thank the hon. member from the NDP for seconding this, as well as the NDP for supporting the motion.

• (1120)

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, something that needs to be emphasized is that, when we talk about interference, there is not one single country; there are a number of countries. We have a responsibility to protect our citizenry.

Could my colleague amplify the fact that we all need to take responsibility for ensuring that we are talking about more than one country?

Mr. Sukh Dhaliwal: Mr. Speaker, I have run into many different members from different communities, such as people from the Iranian community and people of Chinese origin, who have come to me and said they have been victims of foreign interference. In fact, members of Parliament from different diasporas have been victims of intimidation and acts of political interference.

This motion says that we should focus on every nation that tries to interfere with our sovereignty, not only India, China, Iran or Russia but also many other nations.

Mr. Jasraj Singh Hallan (Calgary Forest Lawn, CPC): Mr. Speaker, we are here today because of the real and serious issue of foreign interference happening here in Canada. After nine years of the Liberal-NDP Prime Minister, the Canadian dream of being able to live in this country with freedom of expression, freedom of religion and freedom of thought is broken. Diaspora communities across this country are feeling less safe than ever because of fear of extortion, intimidation and, in fact, assassination.

We are glad there have finally been arrests that will bring some justice for Hardeep Singh Nijjar's family and the community. Those responsible should face the full consequences of their crimes; no foreign agent should be able to kill a Canadian, let alone on Canadian soil. We call on the Indian government to co-operate with authorities as they investigate this murder, because the truth must come out.

Canada's law enforcement and intelligence agencies must relentlessly pursue any other person or entity that was involved in this murder so they can be held accountable and brought to justice. We wish the government was able to foil this plot and stop this murder from happening in the first place, as was the case in the United States. In the U.S., authorities laid allegations; within one week, arrests were made of those who were going to commit that crime.

Private Members' Business

The Liberal member who brought this motion forward mentioned Iran in the motion, even though his government refuses to list the IRGC Quds Force as a terrorist organization. The Prime Minister allows 700 agents from Iran's terrorist regime to operate freely in Canada and terrorize Canadians. Now the regime operatives are recruiting Canadians to terrorize our allies. This terrorist organization shot down flight PS752. The families and communities of those on that flight are still living a nightmare without justice for their loved ones.

It was voted on in the House to ban the IRGC in June 2018. Members should make no mistake: A common-sense Conservative government, under the leadership of the member for Carleton, will list IRGC as a terrorist organization and ban it so it can no longer use our country as its safe haven to recruit, fundraise and hide from any accountability.

The Communist regime in Beijing is another threat that the government ignores. It is the same Prime Minister and his entire cabinet who showed their cowardice by abstaining on a vote to recognize that there is a genocide being committed by the Communist regime against the Uyghur Muslims. The foreign interference inquiry commissioner confirmed that agents from Beijing interfered in the 2019 and 2021 Canadian elections. The election of our former colleague Kenny Chiu was impacted by foreign interference, as we found out from the recent findings by the commissioner. My colleagues have had real threats to their safety and their families' safety because of foreign interference and the lack of any courage to stand up to it by the Liberal-NDP government.

That same regime also intimidates and threatens Canadians who exercise their right to freedom of speech and to vote. Instead of standing up for Canadians, the government was dragged, kicking and screaming, to call a public inquiry into foreign interference in the first place. Police stations run by the Communist regime in Beijing are intimidating others here who are pro-democracy. This only demonstrates that the Liberal-NDP government must take further action to protect our country, including by immediately implementing a foreign influence registry. This is something that, for a long time, the Conservatives have been calling for. We believe paid agents of foreign governments should have to be registered. If a Canadian food bank must register to lobby a Liberal minister, paid foreign agents should have to register as well.

• (1125)

Even the Prime Minister's senior bureaucrats recommended he set up a registry, but nothing has been done. Conservatives brought an opposition day motion in May 2023 calling on the government to create one. All the opposition parties here voted in favour of it as well. Canadians are still waiting to have a registry implemented. This House adopted that motion a year ago. For the sake of Canada's democracy, the Liberal government cannot continue to dismiss the impact this interference has had on our elections. This was further confirmed by the recent findings by the commissioner.

Conservatives will continue to fight any foreign interference from any country and put an end to any attempts by foreign governments to target Canadians and our elections. This issue is one of the most important we speak about in this House, because fundamen-

tally it is about protecting our country and protecting our people from foreign governments that seek to target them.

The duty of government to protect Canada and Canadians is one of its most important responsibilities, and yet, sadly, as we have seen over the past nine years, the government has failed to do this. We have seen unprecedented foreign interference for years in our democracy and in our communities, and yet the Liberal government has refused to take the action necessary to bring it to an end and send a message to foreign countries that Canada will not tolerate it anymore.

Many immigrants who came to this country, like my family, came here for a safe future. Many immigrants came here because they left countries where they did not have freedom of speech, freedom of religion or freedom of thought and were not allowed to vote the way they wanted to vote. However, when they came to this country, it was like the Canadian dream they came here for, to live freely and to be able to express themselves through their religion, their thoughts and their words, was not there. They do not feel like they are in a country where they are able to do that. It is almost like they left a country and then came to one where they ask themselves what they left their old country for when they cannot freely express themselves here either. That is after nine years of the Liberal-NDP government failing to protect Canadians and failing to protect our democracy.

Make no mistake, a common-sense Conservative government, under the leadership of the next prime minister, the member for Carleton, will do just that. We will restore the Canadian dream. We will act to secure our democracy, protect our people and end foreign interference anywhere within our borders. We will restore the hope that if people come to this country, they will be able to express themselves freely through their religion, their thoughts, their speech and their expressions. We will bring the once lauded Canadian dream back to this country once again.

• (1130)

[*Translation*]

Mr. René Villemure (Trois-Rivières, BQ): Mr. Speaker, I will keep the public interest in mind while making my remarks rather than uttering sentences in the future tense about some potential future government.

No one can be against virtue. This is hardly a new idea. In fact, the greatest philosopher ever, Socrates, once said that "no one knowingly does evil". Let us bear that in mind. This morning we are studying Motion No. 112, which deals with interference and violence. The motion is divided into three parts, which I will summarize to ensure that our arguments are placed in the proper context.

The first section moves that the House of Commons recognize that “Canada takes global security very seriously.” As we know, Canada is part of the Five Eyes. Canada is maybe the fifth and a half country, but it is nevertheless a member of the Five Eyes and, as such, it receives and provides information on the national security of member states. In recent years, questions can certainly be asked about the effectiveness of this, because it seems that when it comes to interference, we have not reacted in a very timely way. Nevertheless, there is a desire to see Canada take global security seriously.

The motion also discusses the killing of a Canadian citizen, Hardeep Singh Nijjar, in a place of worship on Canadian soil. This is an example of threats and interference by a country. India, Iran, Russia, China and many others are recognized for their practice of interfering in some way or another in the affairs of numerous states.

The motion goes on to say that “the government should immediately review its measures that hold to account any person or agents of a foreign state undermining democratic institutions, engaging in acts of violence, or violating human or international rights, in order to bar these persons from entering Canada, and report to the House”. No one is against virtue.

Reading Motion No. 112 made me smile a bit, I have to say. The motion—and it is a good motion—calls on the government to play the role it should have been playing. There should be no need for Motion No. 112 because these measures should already be in place. In concrete terms, Motion No. 112 talks about reviewing the measures Canada takes to hold to account foreign agents seeking to undermine democracy. No one can be against that.

When it comes to ignoring measures, the government is number one. We have only to think of the National Microbiology Laboratory in Winnipeg, the incidents involving Chinese interference, the incidents during the election that Justice Hogue commented on last week and the harassment of certain members of the diaspora. It seems to me that we should have started demanding accountability a long time ago. When we talk about accountability, we have to differentiate between matters of influence and matters of interference. Influence is leading someone to come on side of their own accord. Interference is meddling in someone’s affairs.

We know that, since 2015-16, the Canadian Security Intelligence Service warned the government on a few occasions that there were risks or information that had to be taken into account. We know that in November 2020, the House of Commons adopted a motion to create a foreign agent registry, but that has still not happened. Actually, last November, I proposed introducing a bill to create such a registry, which would have some teeth and a very broad scope, but so far we have not seen anything. It has not yet happened.

The interference issue, however, has been known for a long time. We could say that the government had a slightly naive view of China and was a bit complacent toward that country. Indeed, in all these years they have not done much, other than denying the bill or attempting to dodge the issue. This struck me in the case of the Winnipeg laboratory. Six hundred pages of the report were redacted, and now the equivalent of about 14 remain. That is certainly cause for concern.

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The same goes for the federal election. They said that nothing happened, but they realized that something perhaps did happen in the case of the member for Don Valley North and the former Conservative member for Steveston—Richmond East.

In fact, it is interesting, because, although this report says there was interference, it also says there was no impact on the outcome of the election and that the same party would have come to power. However, it might not have been the same member sitting in the same place. It is important to realize that.

• (1135)

These types of missed opportunities include the 2023 Rosenberg report. There was an investigation into interference and the Trudeau Foundation. It is funny that just 23 out of the 23,000 words in the report referred to interference or to China. Here again, this looks like a missed opportunity or an attempt to dodge the issue.

In the case of the Trudeau Foundation, cheques were written in Mandarin, donations were reimbursed and the board of directors was a bungling mess; in short, this was a crisis. The Trudeau Foundation is not the government, let us be clear about that. However, there is a connection, and there is a need to rebuild trust. In a democracy, trust is key. Trust is the act of delegating one's future to someone else. That requires a relationship of trust. Otherwise it does not work.

Morris Rosenberg filed his report. I was rather dissatisfied with it. After that, we figured there would be an independent special rapporteur appointed. We recognized Mr. Johnston’s capabilities. However, we challenged his independence. We did not approve. He said that there was nothing there and that there were documents that could not be made public because they were classified as secret or top secret. Pressure was applied to help us get to the bottom of things. In short, Mr. Johnston resigned.

Then there was the Hogue commission, which promised transparency and did a thorough job. It recently tabled a report confirming foreign interference, with nuances, of course.

It was only once it had lost the people’s trust that the government agreed to take action. That is not reassuring. It does not build public trust in the government, since Canadians do not know whether our elections are working, if the nomination system is working, or if—getting back to my initial point—everything was done to protect national security.

Personally, I like Motion No. 112. However, I cannot say that the government was quick to take action. Rather, it tried to make us believe that the Prime Minister was doing something. Not doing anything is not exactly taking action.

With a foreign policy that, in my opinion, is vague at best, and perhaps even naive, we cannot manage these incidents piecemeal. We need a coherent vision to be able to provide a coherent response. For now, we appear to respond only when we are forced to do so, on a case-by-case basis. I believe we need to think about the rogue states around us, because there is an increasing number of them, and see what we can do.

Private Members' Business

Since it would be hard to be against virtue, the Bloc Québécois will support motion Motion No. 112, despite the fact that it is a timid measure at best.

Mr. Peter Julian (New Westminster—Burnaby, NDP): Mr. Speaker, as I explained earlier, the NDP will support Motion No. 112, which seeks to prevent political interference, violence and intimidation on Canadian soil. I would like to thank the member for Surrey—Newton for moving this motion in the House.

This is a very concerning issue for us. The Hogue commission, and particularly its first report, confirms it. Although Justice Hogue said that foreign interference had not impacted past elections, foreign actors could play a role in future elections. Consequently, we believe that the government should act immediately and establish a foreign agent registry.

Protocols should also be put in place to facilitate the sharing of information. Clearly, information was not passed on during the 2019 and 2021 elections. Although this did not change the outcome of the election, it did in some way erode the trust Canadians might place in the electoral process. For this reason, protocols must be implemented. Procedures should be put in place to ensure that information flows and the government and authorities make decisions and take action, rather than simply observe what is going on.

● (1140)

[English]

We will be supporting Motion No. 112. The horrific murder of Mr. Nijjar, a Canadian citizen, that took place in Canada just a few kilometres from my home, is something that I think has been a wake-up call for Canadians right across this country. There is an ability for foreign governments to intervene in our country in a way that can be profoundly destructive to democracy, and in the case of Mr. Nijjar, it cost him his life. Our condolences go out to his family, friends and everyone who was associated with him. This was a horrible and tragic killing that can never be repeated. We commend the intelligence agencies and our police for having arrested the hit squad that was sent to kill him, and justice will be done. It is encouraging to know that justice will be served one day, and our thoughts are with his family.

First and foremost, the NDP spoke up about foreign interference. It was in February that our leader, the member for Burnaby South, first raised the issue of having a public inquiry into foreign interference. Members will recall that at the procedure and House affairs committee the NDP brought forward a motion that eventually was debated and passed in Parliament with the support of four of the five political parties in the House.

We then moved forward with an opposition day motion expressing non-confidence in the government's original intent around dealing with foreign interference and the appointment of a very distinguished special rapporteur, David Johnston as the appointment process simply did not have the confidence of the House. Members will recall that it was the NDP members who put forward that motion expressing non-confidence. I said at the time, as did the member for Burnaby South and a number of other NDP MPs, that if the House expressed non-confidence, we were confident that Mr. Johnston, out of his respect for Parliament and for democracy, would choose to step down. Indeed, Parliament adopted it, with four par-

ties out of five voting in favour, and we expressed that non-confidence in the special rapporteur process, not in the individual. A week later, Mr. Johnston chose to respect that vote and resign.

That opened the door for what we believed, since February, needed to happen, which was putting in place a public inquiry. Working very diligently over the summer, the House leaders were able to come up with the recommendation around an appropriate justice, Justice Hogue, who then began her work last fall and has issued the preliminary report that will lead to a final report by the end of this year.

All these things came because the NDP felt very strongly that all types of foreign interference needed to be treated seriously. I think it is fair to say that the government has finally come around to that fact. All the recommendations that will be made by Justice Hogue by the end of this year need to be implemented. We have also been very vocal about implementing some measures immediately, such as putting in place a foreign agents registry. It is absolutely essential, and it needs to happen right away. We are going to continue to push the government to do this.

In terms of the protocols within the information that comes to light with the government, it is very important that protocols be established. How to communicate that information to electoral authorities, potentially to candidates in an upcoming election and certainly to law enforcement in the horrific case of the murder of Mr. Nijjar, the information that comes forward, the intelligence, needs to be vetted and acted upon. The communication around that information needs to be handled effectively and carefully, of course.

The reality is, I think, from the preliminary report of Justice Hogue, that it is not clear that this was the case and that the government seemed to be working with a very informal and not effective set of protocols. That needs to change. Motion No. 112 does speak to that, the importance of reviewing all the measures and taking new measures. I think it is fair to say that members from all corners of the House support that.

I will raise concerns. I stood up to ask a question when one asked for questions on the official opposition response to this private member's bill, because it seems that there are some kinds of foreign interference that the official opposition condemns but others that it is less ready to condemn. I find that very disturbing. All forms of foreign interference should be condemned.

We, of course, spoke out. The member for Vancouver East spoke very eloquently in the inquiry about interference from China. We have spoken very determinedly. Our foreign affairs critic from Edmonton Strathcona has spoken about interference from Iran. It is also equally important to condemn foreign interference coming from India and from Russia. Indeed, the public inquiry is looking into all of this.

I note Balpreet Singh's comments around the official opposition and the member for Carleton, saying this last October: "I'm very disappointed to see His Majesty's loyal opposition leader", the member for Carleton, "siding with a hostile foreign government against Canadian intelligence, Five Eyes intelligence and frankly the memory of a dead Canadian citizen."

Private Members' Business

We have also seen the unwillingness, just in this recent speech, to condemn what was a horrific murder and the ongoing interference that is coming from India as well.

There is the issue around Russian interference, which played such a preponderant role in overthrowing the 2016 election, which led to the election of Donald Trump, and throughout the Brexit election, of which the people of the United Kingdom are still contending with the fallout from that foreign interference. To suggest that Russia, because of its massive social media reach into each and every Canadian home, is simply not something we should condemn is something I find quite disturbing.

Unlike the official opposition, we condemn all forms of foreign interference. We are very concerned about the rise in foreign interference. It is for that reason, and to commemorate the horrific murder of Mr. Nijjar, that we will be voting in favour of this motion.

We will continue the fight in the House of Commons to ensure that the government takes action on all forms of foreign interference and takes action now.

• (1145)

Mr. Parm Bains (Steveston—Richmond East, Lib.): Mr. Speaker, I rise today in support of this very important motion, Motion No. 112. I would like to thank the member for Surrey—Newton for bringing this motion before us and, of course, for his dedicated service.

Democracy has always been at risk and has been tested throughout history. Living here, in one of the world's greatest democracies, it is easy to forget how fragile it is. These are real threats posed by foreign governments who seek to intimidate diaspora communities in Canada. We need to combat these threats with new tools and resources to protect our democracy, our institutions and our way of life.

Our government has taken some strong measures, like creating a National Security and Intelligence Committee of Parliamentarians so that MPs could be briefed with gathered intelligence and sensitive information they can work with to make recommendations to government. Additionally, the security and intelligence threats to elections task force was installed to maintain the integrity of our electoral process.

In budget 2024, we are committing \$655.7 million over the next eight years, and \$114.7 million in ongoing funding, to the Canadian Security Intelligence Service to enhance its intelligence capabilities, in addition to increased funding for the RCMP. These efforts demonstrate the commitment of the government to push back against the threats of foreign interference.

While these are necessary steps, we recognize that they are not sufficient, and we need to modernize our approach and fight to protect ourselves. As Justice Hogue's recent report made clear, more work needs to be done to protect Canada's democracy and institutions from foreign interference. The murder of Hardeep Singh Nijjar in front of the Guru Nanak Sikh Gurdwara in Surrey is proof of how far some foreign actors will go to achieve their objectives, to harm opposing ideologies or to attempt to destabilize our strong and free nation.

Canadian police and intelligence authorities need the necessary tools to track, and they must be equipped with the tools to expose threats from foreign state actors or from individuals from within Canada. I was encouraged to hear, during the recent RCMP press conference, that co-operation between the RCMP and its counterparts in the Five Eyes allied nations, particularly the United States, helped make these arrests possible. This is why Motion No. 112 specifically references the sharing of information and security intelligence to protect democratic institutions, to maintain the rule of law and to prevent violence and terrorism.

However, we must do more to protect vulnerable diaspora communities and the integrity of our democracy. Gone are the days when the Conservative government thought it was a good idea to invite Chinese police officers to come here, to strike fear in the Chinese diaspora community and to repatriate people back to China.

Motion No. 112 calls on the government to review its measures that hold to account any person or agents of a foreign state undermining democratic institutions, engaging in acts of violence or violating human or international rights in order to bar bad actors from entering Canada.

At the Standing Committee on Access to Information, Privacy and Ethics, we completed a study on foreign interference last year. We heard valuable testimony on steps Canada could take to address foreign interference, including a foreign agent registry. The registry has been mentioned a couple of times. The registry is another tool that could have the ability to protect our intellectual property, academic institutions, research and development, industry and innovation, but the registry lacks the strength to target clandestine actors.

I reached out to CSIS officers for support and protection advice, and they recognized that a registry has its limits. Dan Stanton, the former executive manager at CSIS, told the committee that it still does not solve the issue of a proxy acting out illicit activities. When asked if a registry would blunt the attempts of the PRC to influence Canada's elections, he said that it would not.

Stanton did recommend that the government should focus on the Security of Information Act. That is why I was encouraged to see our government take another strong step forward, this past November, to launch the consultations to amend the Security of Information Act and the CSIS Act to modernize our response to the ever-evolving threats.

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• (1150)

The findings from the public safety consultations on amendments to the CSIS Act proved to be productive and thoughtful. The report found strong support for proposed amendments to section 16 of the act. Section 16 would close the gap created by technological evolution and regain the ability for CSIS to collect, from within Canada, foreign intelligence about foreign states and foreign individuals in Canada. The amendments proposed in the consultation for the Security of Information Act provided investigators and prosecutors with new categories of offences in response to the reality of modern, clandestine activity, in order to pursue hostile foreign actors from Iran, Russia, China, India or any hostile state.

Notably, the Department of Justice received strong support for increasing the penalty for the preparatory acts offence in section 22 and expanding its scope of application to other Security of Information Act offences, as well as to the new foreign interference offences being proposed under the act. Rightly, the report was conscious of the risks these changes could pose to the charter and provided warnings to the government that safeguards are necessary to ensure that these powers are used only against foreign actors. I look forward to seeing revisions to the CSIS Act and the Security of Information Act in the House very soon.

Foreign interference ranges from direct hostile action, such as the murder of Mr. Hardeep Singh Nijjar, to the spread of online misinformation and disinformation. The ethics committee is currently studying the effects of misinformation and disinformation on the work of parliamentarians. We heard fascinating testimony last week from Ben Nimmo, a threat investigator at OpenAI, who spoke about the range and success of various foreign interference plots. He spoke about some efforts that had tremendous impact, such as the Russian “hack and leak” operations in 2016 that targeted the United States. However, there are other initiatives, like the Russian operation Secondary Infektion between 2014 and 2019 that posted hundreds of pieces of content across hundreds of platforms, where very little of it was seen by real people, that did not have the intended impact.

Again, foreign threats have been real for a long time. Russian state actors may have pioneered mass information activities, but other states are now emerging as leaders in these campaigns. We learned this recently from Justice Hogue's interim report and her findings. Although attempts to interfere in recent elections were not successful, we need to be increasingly vigilant about the intentions of hostile nations and make sure our security intelligence agreements with foreign states work to protect Canadians.

As Abraham Lincoln once said, “The dogmas of the quiet past are inadequate to the stormy present.” We must adapt our thinking and our actions to new realities, which is why I call on all members of the House to support Motion No. 112.

• (1155)

The Speaker: Is the House ready for the question?

Some hon. members: Question.

The Speaker: The question is on the motion.

If a member participating in person wishes that the motion be carried or carried on division, or if a member of a recognized party participating in person wishes to request a recorded division, I would invite them to rise and indicate it to the Chair.

Mr. Kevin Lamoureux: Mr. Speaker, we request a recorded vote, please.

The Speaker: Pursuant to Standing Order 93, the division stands deferred until Wednesday, May 8, at the expiry of the time provided for Oral Questions.

The hon. member for New Westminster—Burnaby is rising on a point of order.

Mr. Peter Julian: Mr. Speaker, there have been discussions and I hope you will find unanimous consent for the following motion that, notwithstanding any standing order, special order or usual practice of the House, (a) the amendment to the motion at second reading for Bill C-64, an act respecting pharmacare, in the name of the MP for Cumberland—Colchester, be deemed withdrawn, and (b) Bill C-64, an act respecting pharmacare, be deemed read a second time and referred to the Standing Committee on Health.

The Speaker: I heard someone indicate that they do not give the motion unanimous consent, so there is not unanimous consent.

On a point of order, the hon. member for New Westminster—Burnaby.

Mr. Peter Julian: Mr. Speaker, just to clarify, the Conservatives said no to the unanimous consent motion?

• (1200)

The Speaker: I cannot clarify that at all. There was not unanimous consent given by the House.

On a point of order, the hon. member for Perth—Wellington.

Mr. John Nater: Mr. Speaker, to clarify, the NDP is trying to bring time allocation to a bill using a point of order.

The Speaker: That sounds very close to debate, but I thank the hon. member for the point.

GOVERNMENT ORDERS

[English]

BUDGET IMPLEMENTATION ACT, 2024, NO. 1

Hon. Patty Hajdu (for the Deputy Prime Minister and Minister of Finance) moved that Bill C-69, An Act to implement certain provisions of the budget tabled in Parliament on April 16, 2024, be read the second time and referred to a committee.

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Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, what a pleasure it is to rise to start the debate on Bill C-69.

Governments have an opportunity every year to set down in legislation initiatives that could have a wonderful impact. I look at Bill C-69 as a budget implementation bill that would really make a difference in the lives of Canadians. I would like to think that all members of the House would get behind the legislation and the budget for the many positive initiatives the budget would put in place for the benefit of all Canadians, no matter what region of the country they are in.

I personally think there is a theme to be taken from the budget, which I hear many of my colleagues talk about, whether it is the Prime Minister or members of caucus, and that is a sense of fairness. We need to think about generation X and the millennials, and how the government can ensure there is a higher sense of fairness. We saw a good example of that in 2015-16 when we brought in our first budget. Taxation policy is important. Through the legislation and the budget, we will see there is a higher sense of fairness as we look to the wealthiest in the country to pay a fairer share.

This is not the first time. In fact in 2015-16, we put a special increase on the tax on Canada's wealthiest 1%. Today it is even a smaller percentage. We recognize there is a need for us to provide the good-quality programming the government has had over the last number of years, much of it being enhanced in the budget and legislation. Some of the programs we are seeing for the first time, and others are a continuation. What it really means at the end of day is that we have a government that very much cares about the well-being of Canadians and wants to support them in a fair fashion.

If we look at overall government policies over the last eight-plus years, we will see that, in comparison to other countries in the world, Canada is doing relatively well. I will highlight a few of them. However, before I do that, I want to talk about the last few times the Prime Minister came to Manitoba. In my opinion, they highlight three areas Canadians understand and the fact that they very much appreciate the government's making them a high priority.

Last year, the Prime Minister visited Stanley Knowles School in Manitoba, which is pretty close to the heart of Winnipeg North, to highlight child care. He visited a child care facility at Stanley Knowles School, and the reception was exceptionally positive as people understood what the Government of Canada was doing. For the first time, we have a national child care program that ensures \$10-a-day day care. It has had a profoundly positive impact in the province of Manitoba and, indeed, in all of Canada.

The Province of Quebec instituted it many years ago. We took the idea and turned it into a national program. As a direct result, not only are we making child care more affordable for Canadians but we are also enabling more women than ever, on a percentage basis, to get engaged in the workforce. It is no real surprise, as we anticipated that would happen. There are many benefits, as we have seen, of the \$10-a-day child care program, the first ever by the national government. Every province and territory has now signed on, recognizing the true value.

• (1205)

For the second visit from the Prime Minister, I was able to participate in a press conference. The single greatest issue I have seen over the last 30-plus years as a parliamentarian, in my constituency and, I would argue, across Canada, is the issue of health care. We love our health care system. We are passionate about it. In fact, when I talk to many people and ask them what makes them feel good about being a Canadian, our health care system is often what comes up as the thing that helps us identify as and feel good about being Canadian.

As members know, working with all the different provinces, the federal government came up with a generational commitment of \$198 billion, not million, over 10 years. That would enable long-term financial planning in an area that Canadians are genuinely concerned about. At that particular press conference, we had not only the Prime Minister but also the national Minister of Health, the Premier of Manitoba, the provincial minister of health and the most important people, the health care workers there to witness the announcement for the Province of Manitoba.

What took place in Manitoba is taking place across the country because, for the first time in over a generation, we have a Prime Minister who is committed to ensuring that we have a world-class health care system that deals with the issues we are hearing about at the doors from people. There are concerns about family doctors; concerns about health care workers; concerns about how we are going to be able to get things, such as credentials, recognized; concerns about how we can ensure that health care workers are being valued; and concerns about how we can bring additional health care workers and support staff into the system so that we are able to meet the expectations Canadians have.

We are looking at ways in which we can expand into mental health like we have never done in the past. This is a government that cares about health care and is looking at the Canada Health Act and the benefits it provides every Canadian in every region.

I made reference to child care and gave credit to the province of Quebec. For health care, a great deal of credit goes to the province of Saskatchewan, where it originated. More recently, we had the Prime Minister come to Winnipeg, and this time we were involved in a press conference that included not only the national Minister of Housing but also the premier of the province, provincial ministers and the mayor of Winnipeg. At that particular press conference, we dealt with the issue of housing.

We are very much aware of the needs for housing. I have stood in this chamber on numerous occasions to talk about the importance of the issue of housing. It is somewhat hypocritical of the official opposition to stand in its place and criticize the federal government for not doing enough on housing. I compare what the Conservatives did when they were in government, and in particular the current leader of the Conservative Party, who I think built six non-profit housing units in total. He spent hundreds of millions and was able to get six built, but I did not necessarily want to get to that. It is a bit off track.

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The point is that we had a wonderful press conference with different stakeholders out in Transcona, where we had great participation from a wonderful housing complex, and we had the opportunity to talk about some of the things the federal government is doing. Working with the different levels of government, we are going to have an optimum impact on dealing with an issue that is so critically important to all Canadians.

● (1210)

What is providing a great deal of comfort is the fact that it is something we have been talking about for months now, even longer. I would not be surprised if we went back a couple of years, when members might have heard me talking about the issue of housing and how the best way to deal with housing issues in Canada is to have all three levels of government, and other stakeholders, engaged. That is the only way. It is not one level of government that cures all. It is going to take all levels of government working together, as well as the non-profit organizations.

I often talk about Habitat for Humanity. Habitat is a wonderful organization. It has likely done more in building affordable housing than any other non-profit organization, at least that I am personally aware of. In the province of Manitoba, we are talking about hundreds of homes over the years. I believe we are somewhere in the neighbourhood of 600 homes built, all of which are affordable. These homes were provided to individuals who never would have had the opportunity to have housing.

We had the stakeholders, the premier, the mayor and the Prime Minister in Winnipeg talking about things such as accelerating funding, providing supports to the City of Winnipeg so it can speed up its process, working with the province to ensure there is going to be more non-profit housing units built and that the province would be at the table, both in a financial fashion and with other forms of resources. This is to complement other budgetary measures, which dealt with, for example, the GST removal on purpose-built rentals for the country. These are initiatives for which Ottawa is not only taking upon itself and demonstrating leadership on but also working with the different levels of government. We are talking somewhere in the neighbourhood, through this budget, of just over four million new homes as a target in the coming years. That cannot be done by the federal government alone, and we have demonstrated our willingness to work with the different stakeholders, including our partners.

There is also our commitment to indigenous housing and working within indigenous communities. In Winnipeg, indigenous communities stepped up and worked with the Hudson's Bay Company to develop housing in downtown Winnipeg. There is also what is taking place in rural communities across the country.

The budget shows how important it is that we not only have a higher sense of fairness but also that we move forward with a healthy, stronger economy, which is in the best interest of all.

One of the things I took away from the budget, which the Deputy Prime Minister made reference to, is something I want to highlight because, to me, it really does matter. It puts things into perspective. No matter how much the Conservatives want to spread misinformation, the reality is that, in comparison to other countries around the world, Canada is doing exceptionally well.

I will give an example from the Deputy Prime Minister's speech and the stats on foreign direct investment. People and companies around the world looking at where to invest their hundreds of millions and billions of dollars will often look at Canada. Not only will they look at Canada, but they will also invest here. With direct foreign investment, on a per capita basis, Canada is number one out of the G7 countries. That is number one in direct foreign investment.

● (1215)

Throughout the world, per capita, Canada is number three. I would suggest that people, businesses and corporations around the world that are taking a look at where to invest are looking at Canada, and that is not an accident.

Let me elaborate on that. No government in Canada's history has signed off on more trade agreements than this government, under this Prime Minister, has. No government in the history of Canada has signed off on more trade agreements than this government has. Canada is a trading nation. We need trade. All of us benefit from it. That is one of the reasons why, I would argue, people around the world are not only looking at Canada but also investing in Canada. They are doing that because they see the stability that is here, along with a myriad of other positive attributes.

Members can take a look at the investments. The Conservatives have been critical. They do not like the fact that we are helping Volkswagen, for example—

Hon. Ed Fast: Madam Speaker, I rise on a point of order. There appears to be so little interest in this budget on the Liberal side of the House that we do not have quorum.

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): I will ask the clerk to count the members present.

And the count having been taken:

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): We now have a quorum, and the debate will continue with the hon. parliamentary secretary.

Mr. Kevin Lamoureux: Madam Speaker, I do not know how many times, when I was sitting on the opposition benches and Stephen Harper was the then prime minister, I could have called for a quorum count because there were no Conservatives in the chamber. I am talking about nine years ago when the Conservatives had a majority government.

I will stay away from the games that the member opposite wants to play because I know he is a little sensitive about the issue of just how well Canada is doing in comparison to countries around the world, contrary to what the Conservatives say. The Conservatives have been going around the country with misinformation. They want to say that Canada is broken. If they really and truly believe that Canada is broken, what does that say about the world, when Canada is doing so much better in so many ways than the rest of the world? The bottom line is that the Conservatives are like a dark cloud, going all over the place to spread nothing but bad, sad news, which is often, consistently, based on misinformation.

Where was I? I was talking about investments in Volkswagen. On the one hand, there are the far right Conservative Party members saying that they do not support the Volkswagen investment. Members can imagine a manufacturing plant that would take up the size of 200 football fields. It is going to be the largest manufacturing plant in Canada, in terms of land usage, and they are all to be green jobs. Doug Ford, the Progressive Conservative Premier of Ontario, is also putting up substantial financial support. At least he recognizes the value there. Just the other day, Honda made another huge investment in Canada. I believe it is Honda's largest investment ever in North America, and it deals with the electrification of vehicles.

The government sees that green jobs are good jobs. We are investing in them in a very real and tangible way. We are going to see thousands of direct and indirect jobs. This is a government that understands the value of a healthy economy. Since being elected, we have generated well over two million jobs. In the same amount of time, we have had more than double the number of jobs that were created under Stephen Harper. We understand the benefits of a strong, healthy economy and of supporting Canadians.

• (1220)

Mr. Jasraj Singh Hallan (Calgary Forest Lawn, CPC): Madam Speaker, the current Prime Minister has put more debt on Canadians' heads than has every single prime minister before him, combined. That led to doubling of the national debt and gave Canadians 40-year highs in inflation with the most rapid interest rate hikes, not seen in Canadian history. Now we see students living under bridges. We see that people like nurses and teachers, with well-paying jobs, are now having to live in their cars. There are food bank lineups, with two million people going to a food bank in a single month. With this budget, \$54.1 billion will go to servicing just the interest on the debt that the Prime Minister accumulated, when it should be going to doctors, nurses and our health care. More is going to bankers, bondholders and the finance minister's Bay Street buddies than to health care transfers. Why?

Mr. Kevin Lamoureux: Madam Speaker, it was not that long ago when we had a worldwide pandemic. We literally spent billions and billions of dollars to support Canadians. Through CERB, we supported more than nine million Canadians. We supported hundreds of thousands of businesses, both directly and indirectly, again, costing billions and billions of dollars. The Conservative Party voted in favour of those expenditures. Therefore, with respect to much of the debt that the Conservatives criticize today, they actually voted in favour of our spending that money. It is like giving a kid a candy bar and then criticizing the kid for eating it. Really? The Conservative Party knows no bounds when it comes to hypocrisy and shame. Canada's debt is very much under control—

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): Questions and comments, the hon. member for Longueuil—Saint-Hubert.

[*Translation*]

Mr. Denis Trudel (Longueuil—Saint-Hubert, BQ): Madam Speaker, my colleague just talked at length about housing in his speech. In 2017, the Liberal federal government launched its major national housing strategy, which would span a decade and cost \$82 billion. It should have addressed all the housing needs of Canadi-

ans. Today, the latest CMHC reports say we need to build 5.8 million homes in Canada by 2030.

Over the three weeks leading up to the budget, the Liberal government made daily housing announcements. Across Canada, the Liberals announced new programs and new spending. However, we noted substantial interference in provincial jurisdictions, to the tune of some 50 pages in the budget on housing—which we welcome. Does the fact the budget contains 50 pages on housing not constitute an admission of failure with respect to the \$82-billion decade-long national housing strategy?

• (1225)

[*English*]

Mr. Kevin Lamoureux: Madam Speaker, I think of the commitment in terms of working with the different stakeholders, provinces and territories building a stronger and healthier Canada. This is the big difference between me and members of the Bloc: I do not see the federal government strictly as an ATM; I believe that the federal government has a role to play, for example in things like a national pharmacare program and a national school food program. We have the Canada disability benefit, which I would love to have been able to expand on. We have the Canada dental program. There are so many things in which, as a progressive government, we are supporting Canadians in a very real and tangible way. That means working with people and working with different jurisdictions in order to have that profoundly positive impact, and I am very proud of that.

Mr. Alistair MacGregor (Cowichan—Malahat—Langford, NDP): Madam Speaker, I would like to refer to the part in this bill that would double the volunteer firefighter tax credit and the search and rescue tax credit. The hon. member for Courtenay—Alberni has really been pushing on this issue. He introduced a private member's bill, Bill C-310. He has introduced countless petitions, and I have tabled a few of them. We have spoken to volunteer firefighter and search and rescue organizations right across the country, and this is a really meaningful impact that the NDP successfully pushed the Liberals to adopt.

Can the hon. member just talk about what the doubling of this tax credit and the NDP pressure to do so would mean for volunteer firefighters and search and rescue personnel who, in many rural communities, including mine in Cowichan—Malahat—Langford, do all that important work? What would it mean for them to be able to continue to serve our communities in the honourable way that they do?

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Mr. Kevin Lamoureux: Madam Speaker, I appreciate the question, but I can honestly say that the strongest advocate I have ever seen with respect to firefighters is my friend the former deputy House leader, now parliamentary secretary to the Minister of Emergency Preparedness.

What I like about the budget is that it is a true reflection of what Canadians have been advocating for to parliamentarians, both opposition and government members. I truly believe that. Therefore, when we look at the budget, what we see is a reflection of the values and thoughts of Canadians with respect to the type of budget they want to see. That is why, in my previous response, I made reference to things such as pharmacare, the national school food program and other types of social programs, along with economic policies that are going to help build a stronger and healthier economy.

Mr. Mike Morrice (Kitchener Centre, GP): Madam Speaker, I appreciate that the member for Winnipeg North, the parliamentary secretary, recognizes that we are in a housing crisis.

Back in budget 2022, there was a funding stream called the rapid housing initiative. It allocated \$750 million a year over two years so that non-profits could apply to build non-market housing. Obviously, it was not enough. As a result of the crisis we are in, we need to see the government go further and faster.

Non-profits in my community, from the YWCA to the House of Friendship and The Working Centre, are looking to this budget expecting dollars for them to build non-market housing. What do we see in budget 2024? It is down to \$195 million a year, from \$750 million. The \$750 million was not enough, and this year's budget cuts it dramatically.

Why does the parliamentary secretary think this is going to be enough to address the housing crisis we are in?

Mr. Kevin Lamoureux: Madam Speaker, it is important that we look at it from a holistic approach. At the end of the day, as a national government over the last seven or eight years, we can say that no government in Canada's history has invested more into housing, and we have done it in different ways. In this budget, we continue to amplify the need to get homes built as quickly as possible. That means, for example, working with the municipalities. I referred to the city of Winnipeg. I think it was around \$192 million back in December, when we had a major announcement to try to speed up the processing of permits and so forth.

Sometimes the money that is allocated benefits not only for-profit, but also not-for-profit organizations. I know that I, for one, continue to want to promote and encourage more development in the whole housing co-op area.

● (1230)

Mrs. Sherry Romanado (Parliamentary Secretary to the President of the King's Privy Council for Canada and Minister of Emergency Preparedness, Lib.): Madam Speaker, this week is Emergency Preparedness Week. With that, I would like to ask the member, my good friend from Winnipeg North, to talk a bit about the investments in budget 2024, not only with respect to the \$800,000 for the International Association of Fire Fighters to help train wildland firefighters, but also with respect to first nations communities, to help build resilience. We are also funding our de-

fence system. Can my colleague explain a bit more about what we are doing in terms of preparedness for Emergency Preparedness Week?

Mr. Kevin Lamoureux: Madam Speaker, all of the investments we have put into our Canadian Armed Forces, if not directly then indirectly, are a great way to prepare for all the different types of emergencies that take place in Canada. Many years ago, I participated with members of the armed forces in the city of Winnipeg to battle floods. During the pandemic, members of the forces, who are well trained, helped take care of seniors. Therefore, any sort of investment in the forces is always a good investment, from my perspective.

When we talk about volunteer firefighters, the tax incentives and the dollars allocated to support them are a very powerful step in the right direction. However, knowing my colleague who asked the question, she will continue to be at the table to want more yet.

Mr. Jasraj Singh Hallan (Calgary Forest Lawn, CPC): Madam Speaker, before I begin, I would ask for unanimous consent to split my time with the hon. member for Niagara West.

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): Does the hon. member have unanimous consent to split his time?

Some hon. members: Agreed.

Mr. Jasraj Singh Hallan: Madam Speaker, this is another budget bonanza, with \$40 billion of new net inflationary spending. That is only going to add to the already doubled debt after nine years of the Liberal-NDP Prime Minister that caused 40-year highs in inflation and the most rapid interest rate hikes, not seen in Canadian history, which put Canadians most at risk in the G7 for a mortgage default crisis.

It is hard to believe that we live in a country where there is going to be more money spent on paying the interest on the debt of the Prime Minister that Canadians are on the hook for, which is going to go to bankers, bondholders and the finance minister's Bay Street buddies, than what is supposed to go to the provinces in health transfers. There is more money for those who are sitting in ivory towers and less for the doctors, nurses and frontline workers who are supposed to be taking care of people in our health care system.

After nine years of the Liberal-NDP Prime Minister, all this debt has accumulated on Canadians that future generations will have to continue to pay for. Who is not affected by any of this at all? It is the Prime Minister's trust fund friends and those Liberal-connected insiders who get the cushy contracts and whose assets get inflated as the Prime Minister caused an inflation crisis that we have not seen in 40 years. They get an increased value in their assets, and Canadians end up paying the price with higher taxes, a higher cost of living and a higher rate of crime, chaos, drugs and disorder in the streets.

Food bank usage is at record highs. There are two million Canadians lining up at food banks in a single month, and a million more are projected this year. The sad part about all of this is that a third of those going to food banks are children.

There are homeless encampments all across the country. People cannot afford housing. After spending \$89 billion on housing, the government caused housing prices to double. Mortgages and rents have doubled. It takes double the time to save up for a down payment on a house. We hear stories about students who came here for a better future and have to live under bridges or in tents. We are hearing about nurses and teachers having to live in their cars because they cannot afford to eat and to heat and house themselves.

Crime is ravaging our country.

Back in the day, families like mine were promised something by Canada, that we could leave the countries we came from and experience what was sold as the Canadian dream. It is this illustrious thing that we used to hear about before we came to this country, where people could afford to buy groceries and eat, live in a nice house, and not just live in a nice house but be able to afford to buy a house, and walk down the street without fear of something happening to them.

That was the promise of Canada, that people could run a business and not have the government interfere by putting up more red tape and bureaucracy and taking even more from them, that the government would not kick people while they are down and would give people a hand-up rather than handouts.

That was the promise of this country before, but after nine years of the Liberal-NDP government, that Canadian dream is broken. The dream of home ownership, the dream of owning a business, the dream of having a safe future for our kids and having a place where groceries are affordable, it is all broken. It is an absolute nightmare. This is what we hear all across the country.

This budget did nothing more than give the Liberal-NDP government more opportunities for photo ops and for travelling the country on the taxpayers' dime and taking photos beside projects that are already under construction while taking credit for them. The government's own housing department, the CMHC, has made it clear why there is a housing hell here in Canada. Housing starts will decline this year and next year. In fact, fewer homes will be started this year than in the 1970s, when we had half the population.

The most incompetent immigration minister in history, who is now the housing minister, was told by his own department two years ago that if the government followed through with its policies, the already existing housing crisis would get worse. What did he

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do? He ignored the department's warning. He ripped it up, ignored it, and housing costs got even more expensive.

● (1235)

Not only that, the promise that people came here for is broken; it is gone. More and more young people, nine out of 10, in fact, have given up on the dream of home ownership. Five million more homes need to be built in the country than what is already projected to be built. However, it is because of the government's gatekeeping that houses are not being built.

I used to be a home builder before this political life, and I do not know any tradesperson or builder who says that they want more government interference, that they want more government red tape and bureaucracy, that they want the government to take more from them and give Canadians a lot less. In fact, in a free market, we should let the market decide what kinds of homes need to be built, and let builders build and let buyers buy.

It is these high interest rates that have been caused by the government, the most rapid that we have seen in Canadian history to fight the inflation that the government created, which is keeping builders from building, developers from developing and buyers from buying. This is the crisis after nine years of the Liberal-NDP government's failed policies. Household debt is the most in the G7, the most we have ever seen. This is from a government that brags about its photo-op slush fund, that it has spent \$89 billion to create the crisis we see in Canada.

There is another emerging crisis here, and that is the productivity crisis. In fact, it was a big deal. It is a stark warning by the Bank of Canada's deputy governor, Carolyn Rogers, who said that productivity in our country is a "break glass" crisis. It is a big deal when the Bank of Canada says that. If it is saying that it is raining, there is probably a big storm brewing that will hit Canadian.

With a six consecutive GDP-per-capita decline, we see less growth in our economy success per person, or what we call "GDP-per-capita", than what it was in 2017. After nine years of making billions of dollars run away from our economy, not having any new investment come in and not letting projects get built, the result is that Canadians are poorer than they have ever been before.

Let me be clear that Canada was not like this before the Liberal-NDP Prime Minister and it will not be like that after he is gone. Under a common-sense Conservative government, led by our Conservative leader, we will bring the Canadian dream, the Canadian hope, back to our country. If people work hard, they will be able to see a better future for themselves, their kids and future generations.

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How are we going to do that? We are going to get some of the large-scale projects, green-light green projects and stop getting in the way of our resource sector so we can have more powerful pay-cheques for our people and not give more dollars for dictators abroad.

We recently saw Japan, Greece and other countries come here for LNG, and the Prime Minister said that there was no business case. Under such a radical, ideological-obsessed government with the carbon tax, of course there is no business case. However, we will bring Canada back on the world stage with our low-carbon, responsible, clean energy sector. We are going to axe the tax.

We are going to bring in four very simple things. A common-sense Conservative government will axe the tax to bring down the cost of gas, groceries and home heating. We are going to build the homes by requiring municipalities to increase their permitting by 15% to get more supply into the market. We are going to fix the budget. We all know now that budgets do not balance themselves. We will bring in a dollar-for-dollar law to cap government spending so that interest rates and inflation can come down and Canadians can stay in their homes. We are also going to stop the crime. We are going to bring in jail, not bail policies, and help those who need treatment to get back on their feet so we can help our brothers and sisters recover from addictions and ensure that we have safer streets in our country once again. We are going to bring home the Canadian dream.

• (1240)

Mr. Chris Bittle (Parliamentary Secretary to the Minister of Housing, Infrastructure and Communities, Lib.): Madam Speaker, I want to congratulate the hon. member on the other side. I think he hit every single one of the Conservative slogans that he was required to by the whip. Nothing was really said, but all the slogans were hit.

I have asked a number of members about this, and the hon. member brought it up. He says that cutting the price on pollution will reduce the price of groceries. However, when we look to the United States, which does not have a national price on pollution, grocery prices have increased at the same rate as they have in Canada.

I wonder if the hon. member can explain why it is happening in the United States without a national price on pollution. Is it not truly just a misleading fact that cutting the price on pollution will have in impact on groceries, like he has said?

Mr. Jasraj Singh Hallan: Madam Speaker, let me tell the House what is misleading. The Liberals sold this carbon tax scam to Canadians, telling them that it would reduce emissions. However, their own environment department said that this was false because it was not even tracking it. They know, just like this carbon tax, that the Prime Minister is not worth the cost. In fact, emissions went up again in the country.

They also sold this scam by saying that more Canadians would get more back in these phony rebates than what they pay into it. However, their own Parliamentary Budget Officer proved that wrong when he said, multiple times, that a majority of households would pay more into this scam than what they would get back in these phony rebates.

We will not take any lessons from the government. We will green-light green projects and bring down emissions, while keeping more money in the pockets of Canadians.

Mr. Alistair MacGregor (Cowichan—Malahat—Langford, NDP): Madam Speaker, my Conservative colleague missed a real opportunity in his speech, which is to call out the real elephant in the room when it comes to inflation, and that is corporate greed.

Those members like to go on and on about the carbon tax, but conveniently ignore that, since 2019, oil and gas companies have seen their net profits go up by over 1000%. Grocery retailers have seen their profit margins double, their net profits double.

If we look at our farmers, their input costs have gone up. That is why farm debt has gone up so much over the last 20 years and that is why the consumers at the other end are getting screwed.

When are the Conservatives going to get serious about calling out the corporate greed? Are they going to be like the Liberals and continue the deference that we have seen over the last 40 years through successive Liberal and Conservative governments?

Mr. Jasraj Singh Hallan: Madam Speaker, it is too bad. It is the NDP that will never miss an opportunity to prop up the most corrupt, incompetent government in Canadian history. The NDP is literally the reason why there is not enough competition in our country. It is literally the reason why Canadians are going into food banks. It has propped up and supported the NDP-Liberal Prime Minister, all for the greed of its leader's pension.

Those members need to put that aside and think about the suffering that they are helping cause on Canadians by teaming up with the Liberal-NDP Prime Minister. It is time to step out of the way.

Why does he not do the right thing and stop propping up the government? Let us go to a carbon tax election and let Canadians decide whether they want to keep this carbon tax scam or not.

• (1245)

[*Translation*]

Ms. Louise Chabot (Thérèse-De Blainville, BQ): Madam Speaker, I listened to my Conservative colleague's speech, and I would like him to set the record straight regarding the housing crisis we are experiencing. I heard him say something that I thought was simplistic, about letting builders build and letting buyers buy.

Does he think that it is fair to rely solely on market forces in a housing crisis of this magnitude? Does he think that the market will respond to the urgent need for social and affordable housing? What measures does my colleague's political party intend to adopt that will truly prioritize social and affordable housing?

Government Orders

[English]

Mr. Jasraj Singh Hallan: Madam Speaker, nothing is sustainable right now. It is these high interest rates that are stopping builders from building and buyers from buying. In fact, it is these high interest rates where, now, 2.2 million mortgages are up for renewal. There is a mortgage default crisis looming, according to the IMF. That is literally what is keeping builders from building and people from getting into homes in the first place.

It is too bad. The Bloc is continually supporting the government and—

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): We are out of time.

Resuming debate, the hon. member for Niagara West.

Mr. Dean Allison (Niagara West, CPC): Madam Speaker, as always, I am honoured and proud to stand in this place and speak on behalf of the constituents of Niagara West.

I want to start by reading a quote. It states:

One of the biggest pressures on people right now is housing. Young Canadians – particularly Millennials and Gen Z – are being priced out of their communities. Families are finding it difficult to get a good place to settle down. Rising rents and the high cost of buying a home are making it more difficult for younger generations to find a place to call their own. We need more homes in Canada, and we need to keep them affordable.

Where did I find this quote? In one of the government's news releases last week.

After nine years of bungling the economy, inflation, taxation and housing, the government finally has acknowledged that what it has been doing is not working. It is acknowledging that it has done generational harm to millennials, gen Z and other younger folks. It is that simple and it is written down. The government has admitted it in that very statement.

What the Liberals say after are their usual promises about to be broken. By the way, they are recycling their promises from nine years ago. If they have not been able to get things done in nine years, who is going to believe that they will be able to get things done now? Absolutely no one.

At this point, Canadians no longer believe the Liberals. Millennials and gen Z do not believe them. Why? According to reports, nearly 60% of retirees are supporting their adult children financially. What does this do to the finances of their parents? Of course, it is having a negative impact.

Whether younger or older, the Liberals are making everyone poorer. How much poorer? The average Canadian family is poorer by \$3,687. Families that used to donate to food banks are now going to food banks for themselves. We have record visits to food banks, two million visits in a single month.

To make matters worse, Canada will spend \$54.1 billion to service its national debt: \$54.1 billion is a lot of money to pay just on interest; \$54.1 billion is more money than the government is sending to the provinces for health care. This was entirely self-inflicted. The Liberals will blame the world, they will blame Conservatives and they will blame everyone and anyone they can think of. They

call them horrible names. We know the Liberal playbook and Canadians are wise to it as well.

It is time for the government to take responsibility for the financial mess it has created, a mess that many Canadians can no longer endure. People are leaving Canada. Immigrants come to our country and realize it is impossible to afford a life, and oftentimes leave and take their skills elsewhere.

● (1250)

The Liberals admitted their failures in a statement, so there is no backtracking anymore. It has been nine years of abject failure on the housing file and many others. Young folks cannot afford to buy a home. Most have given up and think of owning a home as only for the rich. Eight out of 10 believe that owning a home in Canada is now only for the rich. This is a staggering statistic.

It is the first time in Canada when young Canadians will be worse off than their parents were, and it is not just now. Unless a younger person purchases a home, they are unlikely to build significant equity. This would result in much smaller retirement savings down the road. Therefore, young folks may be worse off for the rest of their lives because of the Prime Minister and his policies. It was not this way when the Prime Minister was elected in 2015, and it will not be this way when he is gone. Let us be frank: If the Liberals caused it for the past nine years, they do not know how to fix it. It is very clear, and their record speaks for itself. It is a photo op government, but that is where it ends: at photo ops. Conservatives will be the getting-things-done government in due time.

Still on the topic of housing, interest rates are also a major factor as to why folks cannot buy homes. Last week at committee, the Governor of the Bank of Canada once again confirmed that the Prime Minister's spending is "not helpful" when it comes to bringing down inflation and lowering interest rates. That is just a toned-down way of saying he should stop the spending. That is what the Governor of the Bank of Canada really wants to say, but he cannot because of the political waves he would create. However, Canadians are wise and can read between the lines. The fact is that \$61 billion in new spending is making inflation worse and causing interest rates to stay higher for longer. This spending is the equivalent of pouring fuel on the inflationary fire.

Folks watching at home should keep in mind that inflation is just another tax on them. It is not enough that the Liberals increased the disastrous carbon tax by 23% and will make sure to increase it every year on April 1. They cannot help themselves, and this will only make things worse with inflationary budgets.

Government Orders

If the government members do not believe me, they should listen to their fellow Liberals. What are some of their Liberal pals saying about how things are going? According to one article, former finance minister Bill Morneau said that this budget is a “threat to investment [and] economic growth” and companies will “think twice about investing in Canada.” Another Liberal, David Dodge, former governor of the Bank of Canada, said that the budget is the “worst budget since...1982.” Former Liberal finance minister John Manley told the Prime Minister that he was pressing on the inflationary gas pedal with his spending, which ballooned interest rates.

I mentioned the carbon tax. Let us go back to that for a second. The carbon tax is the government's notoriously bad signature policy. Almost every provincial premier has publicly come out against it. The carbon tax makes everything more expensive without having any impact on the environment. What is happening with this? The government hiked the carbon tax, but emissions still go up. According to the government, if carbon taxes go up, emissions should go down. That is false. That is not the case, and that is not true. What is true is that the carbon tax is just another cash grab for the Liberals, and everyone knows it. The Liberals just refuse to admit it.

The Parliamentary Budget Officer has also been very clear that the majority of Canadians will pay more of their money in carbon taxes than they will get back in rebates. In other words, the Liberals take more than they give back, and they expect Canadians to thank them for this rip-off. Canadians are wiser than the Liberals think. Seventy per cent of Canadians are against the carbon tax, because they see it for the scam that it is.

The Prime Minister and his party, though, through their disastrous policies of the last nine years, are playing with people's lives and do not seem to care that folks are hurting. They are hurting badly. The Prime Minister has doubled their rent, their mortgage payments and the down payment necessary to purchase a home. He is making Canadians pay higher taxes for food and heating, while doubling housing costs. Family budgets are broken. There is nothing extra, or even a negative amount, at the end of the month when all the bills are paid.

Conservatives have had three demands for the budget: axe the carbon tax on farmers and food; build homes, not more bureaucracy; and cap spending with a dollar-for-dollar rule to bring down interest rates and inflation. All three are common-sense policies. All three would make life more affordable for Canadians, but the Liberals refuse to do any of them.

Are Liberals too blinded by the ideology of big ballooning government gone out of control to see that what they are doing is hurting Canadian families and their wallets? They are also hurting small businesses, investment and productivity.

• (1255)

One knows that things have gotten very bad when, among Canadians who do not own a home, over seven in 10 say that they have actually given up hope on ever owning one. That is not the Canada I know.

Business insolvencies surged by 87% year over year in the first quarter of 2024, while consumer insolvencies rose by 14%. BNN Bloomberg reported, “The Canadian Association of Insolvency and

Restructuring Professionals...said that's by far the largest year-over-year increase in business insolvencies in 37 years of records.” The association's chair, André Bolduc, said, “A perfect storm of economic challenges is brewing, with high mortgage renewal rates, soaring rental prices, and elevated costs of everyday necessities”. He added, “The high cost of servicing debts is also compounding the financial strain for many Canadians and leaving them grappling with insurmountable debt burdens.”

What the government has given Canadians is consistently increased carbon taxes, high inflation, more taxes, more inflation, housing shortages, a housing crisis and a cost of living crisis. When does this financial debacle end? One thing is for sure: It will not end with the current government and the current Prime Minister at the helm.

Their disastrous policies have to end with an election, which would allow for a strong, stable majority Conservative government. We are ready to go on day one. There is a lot for us to fix. The government has created this mess, and it will not be easy to clean up, but we are committed. Our leader is committed.

I would like to add an amendment.

I move:

That the motion be amended by deleting all the words after the word “That” and substituting the following:

“the House decline to give second reading to Bill C-69, An Act to implement certain provisions of the budget tabled in Parliament on April 16, 2024, since the bill fails to implement a commonsense budget that would:

(a) axe the carbon tax;

(b) build the homes, not bureaucracy, by requiring cities to permit 15% more home building each year as a condition for receiving federal infrastructure money; and

(c) cap the spending with a dollar-for-dollar rule to bring down interest rates and inflation, by requiring the government to find a dollar in savings for every new dollar of spending.”

The Assistant Deputy Speaker (Mrs. Alexandra Mendès):
The amendment is in order.

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, it is interesting that the Conservatives would incorporate the issue of housing into the amendment itself. All one needs to do is take a look at the leader of the Conservative Party. When he was minister of housing, it was virtually a disaster. Hundreds of millions of dollars were spent, and I think six non-profit housing units were actually built during his term as minister. We have a government today that is bringing in budgetary measures and working with municipalities, provinces and different stakeholders to build more units.

Government Orders

What more does he believe the Conservative Party could actually do to see more houses built? Is he suggesting that we go back to the way it was when his leader was the minister of housing?

• (1300)

Mr. Dean Allison: Madam Speaker, one thing my colleague talks about is the hundreds of millions of dollars they are spending, and my challenge with the government is its competence level. At the end of the day, the government has no problem spending money. The challenge is actually getting results.

We do not have to go back very far. There was a previous question talking about the fact that the government had spent all this money under COVID and all these other kinds of things. I want to remind the member that there was a sole-source contract for \$720 million for ventilators, and \$237 million went to one of their former colleagues, Frank Baylis.

We talk about spending money. We also need to keep in context accountability, transparency and making sure that we are getting the job done. Any government can promise to spend money; the current government is awesome at spending and making promises. What it is terrible at is actually delivering, and what it is absolutely incompetent at is managing taxpayers' money in a responsible way.

What happened to all those ventilators? Some are still in their packaging and still on docks, and they are actually being sold for six dollars for their parts. This is the height of incompetence.

[*Translation*]

Mr. Alexandre Boulerice (Rosemont—La Petite-Patrie, NDP): Madam Speaker, I thank my colleague for his speech, though I do not agree with much of it. I have a very specific question for him.

We in the NDP worked hard to get a new dental care program in place so that the most disadvantaged people and seniors could access dental care practically for free, starting this year.

As of last week, we have already started to see people going to the dentist and having their bill paid in full, or 90% of it. That will be a game-changer for the millions of Canadians and Quebecers who are suffering terribly because they have not able to go to the dentist for years.

Will my colleague's party commit to maintaining the dental care program for the middle class and the most disadvantaged if it wins the next election?

[*English*]

Mr. Dean Allison: Madam Speaker, some things we will commit to are getting spending under control, making sure that how we spend money is transparent and making sure we get value for our money.

Quite frankly, the member and his party are the ones propping up the government. At the end of the day, they can raise any concern they want; they can huff and puff or do whatever, depending on what their concern is. However, they still support the government and the bad decisions the Liberals make on a regular basis.

If we are looking for ways to help people, one way would be to learn to live within our means, so we can continue to make sure that

our cost of living comes down. Interest rates can then follow after that.

Mr. Eric Melillo (Kenora, CPC): Madam Speaker, I am thankful to my colleague for bringing forward a common-sense motion. He spoke about how the government has been great at spending money but falls short on results. To address housing, the government brought forward a bunch of programs. It doubled the cost of housing to try to address the cost of groceries. It spent a lot of money, and recent grocery prices increased along with inflation. That has caused a lot of economic hardship for Canadians across the country.

Does my colleague have any stories he could share, from what he has heard in his own riding, about how the Liberal tax-and-spend agenda is making life more difficult for Canadians?

Mr. Dean Allison: Madam Speaker, as a matter of fact, just this past Friday, I was at a round table on poverty with people from the community, which gave me an opportunity to hear from people who are struggling. They shared their stories about how they are having a hard time paying their property taxes and rent; they are having a hard time paying for their groceries. The fact remains that, ever since the government came into power, people have been struggling as they have at no other time in history.

[*Translation*]

Mr. Jean-Denis Garon (Mirabel, BQ): Madam Speaker, I would like to seek the unanimous consent of the House to share my time with the invaluable member for Thérèse-De Blainville.

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): Does the member have unanimous consent to share his time?

Hon. members: Agreed.

Mr. Jean-Denis Garon: Madam Speaker, this budget is unacceptable to the Bloc Québécois because it is unacceptable to Quebecers. Let us keep the suspense for the movies: We are voting against the budget.

This is a budget that, in many ways, feeds on human misery. It is a budget of fiscal imbalance. This budget is the soul of the federal spending power, through which the federal government assumes the right to impose conditions on Quebec in its own areas of jurisdiction. These are areas in which the federal government does not have the right to legislate, such as housing and health care, among others. It is unacceptable.

Quebec has denounced the Liberal government, along with its NDP allies. Last week, the National Assembly unanimously adopted a motion. Not a single Quebec MNA refused to vote in favour of this motion, which called for the right to withdraw with full financial compensation for Quebec in the event of interference into its jurisdictions, as is the case with this budget. These are what we call Quebec's traditional demands.

Government Orders

Every Quebec government dating back to well before I was born made this demand, in particular the Jean Charest-led government, which included the member for Bellechasse—Les Etchemins—Lévis. Had she been in Quebec, she probably would have voted in favour of this motion, rather than voting against last week's proposal by the Bloc Québécois to give Quebec that right of withdrawal.

Last week during question period, a minister, whose name and title I shall not mention since this was partially private, yelled from one side of the House to the other to ask me what was a unanimous consent motion by the National Assembly worth. According to this individual, there is one every month, since the National Assembly is always unanimously criticizing the federal government.

This helps us understand just how wide the gap is between Canada and Quebec from a budgetary standpoint. Rather than turning to Quebec and showing the province a modicum of understanding and respect, Ottawa says Quebec is wrong to ask for respect in its own areas of jurisdiction. There we have it, the Liberal ministers showing the depths of their contempt. Above all, they are showing their total inability to admit that they are wrong and that they should not interfere in areas outside their jurisdiction they are incompetent to manage. No jurisdiction and no competence makes for an incompetent federal government.

This is an omnibus bill. Right off the bat I expect that the member for Winnipeg-North, an outstanding debater, will likely rise shortly, although my saying so now might dissuade him. He is going to tell me there is something or other that is good in the budget, that there are not just bad things in the budget, that some of what it contains is acceptable. Fine, except that this is an omnibus bill, a bill that has everything and anything and that amends numerous acts and regulations.

In such instances, our values must guide us and we must draw a red line. We in the Bloc Québécois have been transparent. We signalled this red line to the government before it tabled the budget. We told the Liberals that if they wanted, then maybe they could possibly consider seeking the Bloc's support. One never knows, the NDP might leave their side.

In exchange for this support, we wanted the right to opt out of programs under Quebec's jurisdiction with full financial compensation. Is that included in the bill? Not only is it not included, but the Conservatives, the Liberals and the NDP voted against the amendment to the amendment that we moved to add it to the budget. They voted against Quebec's National Assembly and against all the Quebec governments that have made this request since the 1950s. What the NDP and Liberals are telling us is that they do not think the Quebec government is doing a good enough job in its own areas of jurisdiction and that they do not trust it. However, some of the problems that Quebec is having with health care, education and housing are due to the fact that it does not have full freedom to act, because the federal government is standing in the way.

We asked for old age security to be increased starting at age 65, but that is not in the budget. We asked for an end to the fossil fuel subsidies, but there are fresh subsidies in this budget, and the government is promising a plan. The Minister of Environment said that the government had abolished inefficient fossil fuel subsidies. However, when we asked him what "inefficient" meant, he could

not even define it. The reality is that the tax incentives took on a different form.

• (1305)

The federal government owes Quebec \$900 million. As François Pérusse put it, "a debt is a debt" and must be repaid. The federal government owes Quebec \$900 million because we had to give asylum seekers integration classes, French classes, health services and so on. Quebec incurred these expenses and paid for them with Quebecers' money. This budget is a slap in the face for Quebec.

Instead of granting unconditional housing transfers, the federal government decided to impose even more conditions. Quebec has had permanent housing construction programs for decades. Now, at a time when people are living on the streets, sleeping in tents or in their cars, the government got the brilliant idea to add even more red tape. The Liberals seem to think this is the best Liberal idea this year.

The consequences are serious, tragic and inhumane. For ideological reasons, this government is determined to crush Quebec and its desire to take action in its own areas of jurisdiction. The other provinces can do what they want, but this urge to crush Quebec is having tragic and inhumane consequences. The same is true when it comes to health.

This may not be the worst part, but what makes this bill even more unacceptable is the part about open banking. Banks have changed. The big banks have basically become financial product factories, selling loans, insurance and other financial products. Consumers often use third-party apps to deal with banks. The banks manufacture the financial products, and the apps handle the customer service for those products. This needs to be regulated. These transactions involve personal and private information.

The government had three choices. First, it could have opted for the Interac model, where the industry regulates itself. For instance, take Desjardins in Quebec, provincially regulated financial institutions, and credit unions in the rest of Canada. They coordinate with the banks so that the information that is shared is regulated, customers receive their product and their information is protected. This involves some self-regulation. We are not huge fans of this model, but it could have worked. However, the government said it was not interested.

Then there was the second approach, which is more collaborative and involves securities commissions. This is where Ottawa sits down with Quebec, in particular. Not only is Desjardins the biggest employer in Quebec, but it is also its biggest financial institution. The idea would be to harmonize our laws and regulate the exchange of information to protect consumers, while ensuring that they receive quality service and that new banking services meet their needs. Ottawa, which says it is still working with Quebec, has closed the door on that option.

The government has therefore decided to introduce legislation that will lead to a plan next fall, under which federal financial institutions will be included in the legislative framework. Desjardins and other Quebec co-operatives are literally being told that they have the choice of ignoring Quebec's Consumer Protection Act, ignoring Quebec's Bill 25 on privacy protection and that, if they want, they can come into the federal fold. They will fall under Ottawa's jurisdiction, which contradicts the most basic spirit of co-operation.

That is exactly how the federal government behaved. It not only stomped all over Quebec's jurisdictions, it held a knife to Quebec's throat. It behaved a bit like that when it imposed a securities commission that was supposedly national, but in reality centred on Toronto, before the Supreme Court ruled against it. The government is not open to talking with Quebec.

The Liberals can go ahead and list all the good things they want about Bill C-69. They can try to convince us that Ottawa knows better than Quebec when it comes to managing hospitals, operating child care and fixing teeth, but that will not change the fact that this is a bad budget. It goes against Quebec and Quebec's interests as framed by every Quebec government throughout history.

Once again, I am announcing that not only will the Bloc Québécois vote against, but I will be pleased to rise and vote no.

• (1310)

[English]

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, I am sure the member would not be surprised that I disagree with him.

Looking at this budget, there are many progressive aspects to it, whether it is pharmacare, the national school food program, the disability benefit or the expansion of the Canada dental program. These are all programs that would benefit Canadians in every region of the country.

The issue my friend brings up is in regard to giving cash to provinces. From my experience of being a provincial MLA for almost two decades I can say that, for a lot of the provinces and a lot of provincial politicians, that is all they want from Ottawa. They want the government to give them money and they do not want to be held accountable for how they spend the money. They just want the money. However, the expectations of the people we represent are higher than Ottawa just being an ATM machine.

I wonder if the member would recognize that one of the ways we could have programs that help lift all Canadians is by instituting a national program. Does the member not recognize there is value, for example, in a national school food—

• (1315)

[Translation]

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): I will give the hon. member for Mirabel time to answer the question.

The hon. member for Mirabel.

Government Orders

Mr. Jean-Denis Garon: Madam Speaker, the immigration minister is in the bad habit of saying during question period that we take the federal government for an ATM. That may be because it is our money, drawn on our account, that is in this ATM. Quebecers' national government is in Quebec City. I have no interest in what Manitobans think about this. If they want centralized programs, fine. Quebec, for its part, is asking for the right to opt out.

There is nothing progressive about being bad. There is nothing progressive about setting up a dental care system that already exists in Quebec, while the infrastructure already exists in Quebec. There is nothing progressive about not recognizing that drug insurance is provincial and that everyone in Quebec is already covered in some fashion or another. There is nothing progressive about not recognizing that unilateral measures cannot be put in place. There is nothing progressive about doubling and tripling red tape for housing programs or to build affordable housing units. This just adds delays. There is nothing progressive about that.

What is progressive is to listen to Quebec and let it act in its own areas of jurisdiction.

Mr. Jacques Gourde (Lévis—Lotbinière, CPC): Madam Speaker, I listened closely to my colleague's remarks. There is a double standard when it comes to the Bloc Québécois. It is true that in the past, the Bloc voted against the budgets, but they voted in favour of the budgetary appropriations. We are talking about \$500 billion in inflationary, centralizing spending.

Why does the Bloc Québécois always vote in favour of the budgetary appropriations? Will the Bloc vote for the budgetary appropriations associated with this year's budget?

Mr. Jean-Denis Garon: Madam Speaker, the Member for Lévis—Lotbinière talks about a double standard, and yet he always votes against Quebec and for Alberta. He votes against the right to opt out with full financial compensation for Quebec, but he has no problem giving oil companies \$55 billion or \$60 billion in financial incentives. This is paid for with Quebecers' money meant for day care, health, education, social programs, housing and refugees but it ends up in the pockets of oil companies. Is that not a double standard?

In the Bloc Québécois, for as long as I can remember, we have not supported any of Ottawa's budgetary policies because we always set conditions. As far as we are concerned, common sense is set out in black and white. Our conditions are clear and reasonable. That is why Quebecers vote for us.

Mr. Alexandre Boulerice (Rosemont—La Petite-Patrie, NDP): Madam Speaker, I thank my colleague for his fiery and passionate speech. I want to talk about more than just motions, institutions and parliaments. I want to talk about Quebecers. Some four million Quebecers have no dental coverage, whether private or public.

People voted for us, the NDP, to come to Ottawa and fight to give people access to a dentist, and we did. We used our balance of power and we delivered.

Government Orders

What does my colleague have to say to the seniors and people with disabilities in his riding who will benefit from having 80% or 90% of their dental care paid for?

Mr. Jean-Denis Garon: Madam Speaker, I will tell them what I told a woman from my riding recently. When the details of the program were not yet available, she realized that she would have to pay with her credit card and then go onto the CRA portal to apply for a refund. Then, after having to wait for the refund, she would only be reimbursed for half the amount. Children are covered in Quebec. There is already a system in place and dentists are participating in it.

The government could have reimbursed people automatically so that they would not have to pay for their dental care out of their own pocket. People often have to use their credit card at an interest rate of 20%. That is what doing a good job means in a federal context. That is what Quebecers are telling us. That is what they are experiencing. They are paying 20% interest to provide advances to the federal government for these services because it is the CRA that has to issue the refund.

Ms. Louise Chabot (Thérèse-De Blainville, BQ): Madam Speaker, I would like to thank my colleague for his speech. My colleagues are going to hear something similar, because the Bloc Québécois is here to defend Quebecers' interests. This budget does not live up to the needs, interests or aspirations of Quebecers or the people in my riding.

It abandons seniors, workers and the unemployed. It erodes their confidence and ours. We have made it clear: the Bloc Québécois will be voting against the budget. We have always said that if something is good for Quebec, we will vote for it, and if something is not good for Quebec, we will vote against it. This budget and its implementation bill clearly do not live up to Quebecers' needs or aspirations at all.

It is a shameful attempt to interfere in Quebec's areas of jurisdiction on a number of levels. It interferes in health and education, as well as clean energy when it comes to Hydro-Québec, which we are proud to say is ours. It also interferes in housing and other areas.

The government could show a bit of sportsmanship. We asked for something in a motion presented to the House. We wanted Quebec to have the right to opt out with full compensation. However, the New Democratic Party, the Liberal Party and the Conservative Party voted against the motion, which respected Quebec's areas of jurisdiction.

That is no small matter because, in the end, I get the impression and we get the impression that they could not care less and that they are not at all concerned. I think I have just used a parliamentary term. This is such an issue that motions have been passed in Quebec's National Assembly demanding this right and telling the three federal parties to mind their own business, stay out of our areas of jurisdiction and respect the robust health and social services and housing programs we have built in Quebec. These motions ask that they respect us and allow us to continue managing these programs that have improved Quebecers' lives, with full compensation.

However, the reality is very different. On the one hand, the government is spending millions and billions of dollars on programs that should be under Quebec's jurisdiction and, on the other, it is not spending a dime to improve the services for which it is responsible.

When I was elected in 2019, I put one priority atop my list of three priorities: public service. In fact, I commend the people of my riding on their grasp of the issues relating to the support available to citizens, organizations and businesses. They are very concerned about these issues.

I would say that most of the files we deal with have to do with immigration. This comes under federal jurisdiction in many regards, particularly with respect to newcomers, asylum seekers, visa applications, sponsorship applications and family reunification applications. The processing delays are unacceptable.

● (1320)

Underprivileged, disadvantaged people come to see us regularly to inquire about the status of their file. These delays fly in the face of our humanitarian duty to these individuals. What is the government doing? Where in the budget does it say that these unacceptable processing delays will be reduced? Where in the budget does it say that action will be taken on immigration policy to respect Quebec's demand and integration capacity? In this case too, the stated requirements are completely ignored, which is to the great detriment of those we welcome here. Indeed, in Quebec, our integration policy is important, just as much as our policy on newcomers' French language training. In order for these policies to be respected, Quebec needs leverage, just as it needs a federal immigration policy that does not impose delays or conditions that ultimately erode our capacity. We stand against this.

The Phoenix pay system is the responsibility of the government, which employs thousands of people in the federal public service. When it was elected in 2015, the government made a firm commitment to changing the Phoenix pay system to make it fairer and more equitable. I heard the parliamentary secretary say in his speech this afternoon that the budget was fair and equitable. Is it fair and equitable to allow the situation to continue without investing in a pay system that does not help attract or retain employees who make a real difference in people's lives? The federal government is investing nothing in the organization of its own services. I even read recently that it may use artificial intelligence to help with the problem. It is embarrassing.

Government Orders

As for employment insurance, I no longer know what to say or what tone to take. The Conservatives often talk about these eight years under a Liberal government. I do not share the opinion that the Liberal government is responsible for every problem. However, when it comes to failing to fulfill a commitment to workers and, by extension, the unemployed, it is unmatched. The government undertook to present and implement an EI reform worthy of the 21st century. It did so in the minister's mandate letters in November 2015, September 2016, January 2021 and December 2021, as well as in its 2021 election platform. It went even further in 2021, saying it would reform the system by summer 2022, and yet here we are in summer 2024. The government has broken its promise and failed to fulfill its commitment.

It also said, in its first term, that it would enhance the pilot project for seasonal workers and make it permanent. What it did in the budget, however, was to renew the five additional weeks in the 2018 pilot project for another two years. The only thing the government will have done is to renew a temporary measure, nothing more.

Moreover, the computer system used to support the social safety net is obsolete, and the government knows it. Only recently did it say that it would invest in modernizing it, maybe in 2026 or 2028. What prospects do workers and the unemployed have? None at all. Is it fair and equitable for seniors? Canada is one of the worst OECD countries when it comes to the old age pension, not to mention that it discriminates against people between the ages of 65 and 74—

• (1325)

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): The hon. parliamentary secretary.

• (1330)

[*English*]

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, I am curious as to the member's thoughts on the pharmacare proposal that is within. I think that seniors, no matter what area of the country they are in, particularly those with diabetes, would recognize that having national pharmacare is a very strong, positive thing, just on that point alone.

Does the Bloc support Canada providing pharmacare coverage and recognize that at least we are moving in the right direction?

[*Translation*]

Ms. Louise Chabot: Madam Speaker, I would like to lob that question back at the parliamentary secretary and ask him if the Liberals really intend to implement universal pharmacare across the country. It just does not make sense.

It is not that universal pharmacare does not make sense. It is that it does not fit into a context where Quebec already has a pharmacare program that covers thousands of drugs.

It makes no sense to impose such a program without the right to opt out with full compensation in an area that is under Quebec's jurisdiction. Quebec even questions why this program only covers di-

abetes and contraceptives. The government is not following through on its commitment.

I have a feeling these meddling federal policies will continue for a long time to come. They may suit the rest of Canada, but they in no way meet the needs and interests of Quebec, which already has its own system. Yes, it needs some improvements, but not with federal conditions.

Mr. Alexandre Boulerice (Rosemont—La Petite-Patrie, NDP): Madam Speaker, I am going to talk about pharmacare too. It interests me because the Hoskins report made it very clear that the best way to control and reduce drug costs for everyone is to have universal public pharmacare.

The Quebec system is a hybrid system that was cutting-edge at the time. Today, however, even Dr. Rochon, the person who instituted the system, says that it is time to finish the job and adopt a universal public system.

Yes, Quebec must be given the right to opt out with compensation. We support that and agree on it. However, this universal pharmacare plan would be the best thing for Quebecers, for patients, for businesses and for hospitals. It is something that the Fédération des travailleurs et travailleuses du Québec, the Confédération des syndicats nationaux, the Centrale des syndicats du Québec and the Union des consommateurs du Québec are all calling for.

Ms. Louise Chabot: Madam Speaker, it is no surprise to me that these major labour organizations are calling for this, because I used to work for them.

We fought for universal pharmacare for over 20 years. That struggle is what led to the system we currently have in Quebec. Our hybrid system is not perfect and could be improved. I believe that people want to continue with it.

I am very pleased to hear for the first time that the NDP agrees with us about the right to opt out with full compensation, because neither the bill we are studying nor the agreement to keep the government in power mentions this condition.

Mr. Richard Lehoux (Beauce, CPC): Madam Speaker, at the end of her speech, my colleague talked about creating two classes of seniors.

I would like her to elaborate on this topic because we have discussed it a number of times in the House. What is her opinion on the matter?

I understand that she is calling for changes to old age security, but maybe there would be no need to ask if the government just decided to take action. We thought this would be in the budget, but it is still not there.

Ms. Louise Chabot: Madam Speaker, my colleague from Shefford's Bill C-319 is currently at committee stage.

We in the Bloc Québécois want just and equitable social safety nets. That is why we are calling on Ottawa to strengthen its own social safety net programs.

Government Orders

As far as old age security is concerned, Canada is currently faring poorly among the OECD countries. Moreover, the federal government has seen fit to increase old age security by 10% for people 75 years and over, excluding those who qualify for OAS upon turning 65. Those seniors are getting no support and no increase.

That is a disgrace.

• (1335)

[*English*]

Mr. Don Davies (Vancouver Kingsway, NDP): Madam Speaker, before I start my speech, I seek unanimous consent to split my time with the hon. member for Rosemont—La Petite-Patrie.

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): Does the hon. member have unanimous consent to split his time?

Some hon. members: Agreed.

Mr. Don Davies: Madam Speaker, millions of Canadians are really struggling right now. The cost of living is up dramatically. It is getting much harder to pay rent, to pay a mortgage, to buy food and to pay bills. This has gone on for several years now for many Canadian families, and I think it is fair to say that communities across Canada are really feeling the toll of the economic difficulty facing this country.

However, big corporations and the ultra rich are doing better than ever. They are making record profits, often by gouging Canadians with sky-high prices. Even with corporate profits soaring, the investments in Canadian workers and in the Canadian economy are declining. Major shareholders and top executives are reaping enormous benefits, while the promised trickle-down to workers, communities and consumers, promised by the right to North Americans around the world since the beginning of the century, is as illusory as it has ever been. New Democrats recognize these facts. That is why we are using our power in this minority Parliament to deliver results for people.

In the 2024 budget alone, New Democrats have compelled the government to do the following: to build more homes, to preserve existing affordable housing and to protect renters; to bring in universal, single-payer pharmacare, starting with contraception and diabetes medications and devices; to establish a national school food program; to reverse damaging cuts to indigenous services; to invest in accessible, high-quality, non-profit child care; to establish a dedicated youth mental health fund; to double the volunteer firefighter tax credit and the search and rescue volunteer tax credit; and to take the first step toward tax fairness in this country by making wealthy Canadians pay a bit more on their capital gains profits.

It is funny that while I have been speaking, I have heard nothing but catcalls from the Conservatives, who have opposed every single one of the points I just mentioned. That gives people a flash into what a Conservative government might do for Canadians. I think it is quite clear that it would reverse every one of those measures.

While these achievements illustrate, in part, what a New Democrat government could accomplish, the 2024 budget does not fully reflect our party's vision. This is not an NDP budget, but it was a budget that we were able to influence in a minority Parliament.

Likewise, Bill C-69, the bill under consideration in the House, the budget implementation act, 2024, No. 1, includes many of those positive measures that the NDP was able to compel the Liberal government to implement. However, we acknowledge that the legislation has several and significant shortcomings. In our view, there is much more the federal government can and should be doing to make this easier for people and to provide opportunities for the generations to come. For our part, New Democrats will not stop working to deliver results for people.

I want to cover some positive aspects of Bill C-69 because we have indicated that we intend to support this legislation. First, it would launch the new national school food program. This program would be in place as early as the 2024-25 school year and would help over 400,000 children access the food they need to grow healthy and to learn. This would be an important first step toward establishing a national school food program or national standards. This is a critical gap felt strongly in a time of sky-rocketing food prices.

Across Canada, the reality is that nearly one in four children do not get enough food, and more than one-third of food bank users are children. According to Children First Canada, there has been a 29% increase in food insecurity for children in the last year alone. A national school food program not only would give students in Canada access to nutritious food, but also would make healthy eating a daily lesson for our kids. By integrating lessons on food growing, nutrition, preparation and cultivation into established curricula, a national school food program can encourage children to adopt lifelong healthy eating habits.

We know, from international best practices, that all children benefit from universal school food programs, not just children from low-income households. Countries with a national school food program have documented better academic performance, improved short- and long-term health for children, help for family budgets and improved efficiency in the health care system.

Bill C-69 also includes measures that would make housing more affordable in a few ways. It would enhance the home buyers' plan by increasing the withdrawal limit from \$35,000 to \$60,000 and would temporarily add three years to the grace period before repayments to an RRSP were required.

Government Orders

• (1340)

Bill C-69 would start to crack down on short-term rentals to unlock more homes for Canadians to live in by denying income tax deductions on income earned from short-term rentals that do not comply with provincial or local restrictions. It would ban foreign buyers of Canadian homes for an additional two years, until January 1, 2027, to ensure homes are used for Canadians to live in and not as a speculative asset class for foreign investors.

Bill C-69 also includes measures that would make life more affordable Canadians in other ways. It would make it easier to find better deals on Internet, home phone and cellphone plans by amending the Telecommunications Act to better allow Canadians to renew or to switch between plans and to increase consumer choice to help them find a deal that works best for them.

We know that Internet and cell services are now core staple utilities for Canadians, and Canadians pay among the highest prices in the world. This happened under the current Liberal government, and it happened under the previous Conservative government. New Democrats know we have to drive those prices down for Canadians to meaningfully participate in work-at-home life.

It would crack down on predatory lending by strengthening enforcement against criminal rates of interest to help protect the most vulnerable Canadians from harmful illegal lenders. It would make it easier to save for our children's education by introducing an automatic enrolment in the Canada learning bond to ensure all low-income families receive the support they need for their children's futures.

It also includes measures that would support workers. Bill C-69 would protect gig workers by strengthening prohibitions against employee misclassification in federally regulated industries. It would establish a right to disconnect to help restore the work-life balance for workers in federally regulated industries. It would extend additional weeks of employment insurance for seasonal workers in 13 targeted regions until October 2026. It would advance employee ownership trusts to enable employees to share in the success of their work by encouraging more businesses to sell to an employee ownership trust.

Bill C-69 would deliver two major investment tax credits to help build a more sustainable future, and those are the 30% clean technology manufacturing investment tax credit and the up to 40% clean hydrogen investment tax credit. I sat in the Standing Committee on Finance, where I heard from businesses across this country that cannot wait to get these tax credits in place so that they start to make the investment in sustainable forms of energy that not only would create the jobs of the future but also would help Canada meet our carbon reduction targets.

I have already mentioned that Bill C-69 would provide support for volunteer first responders and the care economy workers in rural and remote communities. It would do this in a couple of ways. It would expand the Canada student loan forgiveness program to pharmacists, dentists, dental hygienists, midwives, early childhood educators, teachers, social workers, personal support workers, physiotherapists and psychologists who choose to work in rural and remote communities. This would build on existing loan forgiveness for doctors and nurses. We all know our rural and remote areas

probably feel the pinch of a health care system that is not providing fast enough or good enough service, and it is important this budget recognizes that and takes some steps toward addressing it.

I want to talk for just a moment about the Canada disability benefit because I mentioned that this bill has some serious deficiencies. In my mind, this is one of the most major ones. Despite its plan announced earlier to provide a maximum benefit to people living with disabilities to lift them out of poverty, which is the claim and the goal, which the NDP agrees with, the Liberal government decided to back that up by giving those Canadians \$200 a month.

One does not need to be an economist to know that it does not come anywhere near to lifting anybody out of poverty, but frankly, it is almost an insult. At present, a single adult with a disability will live below the poverty line if they receive funding from any of the provincial programs across Canada, and an additional \$200 a month is not enough to bring them even to the poverty line. There are over a million and a half Canadians living with disabilities who live in poverty in this country, yet this plan would also have a restrictive eligibility requirement that would limit access to, at most, an estimated 600,000 people.

We are deeply disappointed to see that broken promise, and we will continue to fight for Canadians living with disabilities. We know they need sufficient income in this country not only to let them get out of poverty but also to meaningfully participate and to live enriched lives, where they can contribute as fully as they can. It is not only good for them, but also good for communities and our economy as well.

• (1345)

Hon. Bardish Chagger (Waterloo, Lib.): Madam Speaker, I appreciate the comments the hon. member shared. The budget document is a massive document. Working together to find some elements within that document that we can agree on, I think, is a way to move forward as a country.

I would like to hear the member re-echo what some programs are that he supports, and should the Conservative Party be elected, which I hope it is not, what could be undone or possibly taken away from Canadians. Does he agree that all levels of government need to work together? I know he comes from the province of British Columbia. I do not know the politics of British Columbia, but I can say that in the province of Ontario, every time the federal government tries to provide supports for people to make their lives better, the provincial Conservative government tends to claw back the supports at their level, which actually does not move Canadians ahead. I would like to hear about their experience versus what we see in Ontario.

Government Orders

Mr. Don Davies: Madam Speaker, dealing with the last question first, I think a critical part of the Canada disability benefit is that we ensure all provinces and territories come to an agreement with the federal government whereby any additional funds the federal government is providing to people living with disabilities is not clawed back. If that were to happen then people living with disabilities would not receive any benefit at all. That is a critical component for success.

In terms of additional aspects of the budget, which is over 600 pages long, I would point out that Bill C-69 would provide support for small and medium-sized businesses by returning over \$2.5 billion in proceeds from the price on pollution to an estimated 600,000 small and medium-sized businesses through an accelerated and automated return process. Rebates would also be provided every year going forward. That is a positive step. Small businesses are the engine of our economy, and many of them are suffering.

The extension of that carbon tax rebate, in the billions of dollars, to small and medium-sized businesses would be an important reason, I think, to support this budget and one that I would be interested in hearing my Conservative colleagues' reasoning as to why they would oppose that.

Ms. Marilyn Gladu (Sarnia—Lambton, CPC): Madam Speaker, I agree with the member opposite that it was very disappointing to see what happened with the Canada disability benefit. It certainly was not what the community was asking for.

Would he not also agree that everything else the Liberals are delivering is disappointing, including \$10-a-day child care with fewer child care spots than existed before, a dental care program with no dentists subscribed, and a pharmacare program that does not even exist and might end up having two drugs in it? Is it really worth carrying the water for the Liberal government for the last nine years?

Mr. Don Davies: Madam Speaker, the NDP has been championing public, affordable, accessible child care for decades. While I agree that there are not enough spots being created, I have seen more created in the last six years than I ever saw created under any Conservative government. That is for sure.

I do not really understand the premise of my hon. colleague's last question when she said that dental care does not exist. I read stories over the weekend and saw pictures of seniors who had been to the dentist and were showing copies of their bills that were paid for by the Canada dental care program. I do not know what she means about dentists not signing up. The last I heard was that 6,500 dentists across this country have signed up and, frankly, there is no more requirement to sign up for the program. Dentists can just automatically enrol in the program by billing their first customer.

The NDP fought for nine million Canadians, during this Parliament, to be able to go to the dentist for the first time. To us, dental care is primary health care. Every Canadian should have the right to get their oral health needs met, regardless of their ability to pay. At the end of this Parliament, we will be able to go to Canadians on their doorsteps and tell them how the NDP helped to get dental care for nine million Canadians. I am going to tell them that the Conservatives voted against dental care, that they thought it was a bad idea and that they will take it away from them. That is not illusory.

[*Translation*]

Mr. Denis Trudel (Longueuil—Saint-Hubert, BQ): Madam Speaker, I basically agree with my colleague that times are hard for many people in Canada, Quebec and elsewhere right now.

Let us talk about housing. It is true that this issue is the focus of the budget. However, the problem is the federal government's approach. It is interfering in provincial jurisdictions. Housing is not a federal jurisdiction and never has been.

Nevertheless, the government is creating more programs. It will have to negotiate with Quebec, and that process is going to drag on. When the government introduced the big national housing strategy, it took three years for Quebec to see a single penny. As for the housing accelerator fund, it took two years for a single project to be announced in Quebec. All of that is going to slow down the projects, when we need housing to be built immediately.

Why is the NDP supporting a budget that is basically only going to delay—

• (1350)

The Assistant Deputy Speaker: I need to give the hon. member for Vancouver Kingsway a little time to answer.

The hon. member for Vancouver Kingsway.

[*English*]

Mr. Don Davies: Madam Speaker, housing is in crisis in this country. Canadians in every community, including in the province of Quebec, cannot find affordable housing to buy or to rent.

In my view, it takes all levels of government working on this problem. We cannot solve the problem by leaving the federal government, which has the deepest pockets in this country, out of it. The feds, the provinces and the municipalities have to work together. It is the only way we are going to make progress.

[*Translation*]

Mr. Alexandre Boulerice (Rosemont—La Petite-Patrie, NDP): Madam Speaker, first of all, I am deeply concerned about what is happening right now in Rafah, in the southern Gaza Strip, where the bombing seems to have resumed. The Israeli army seems to have asked tens of thousands of people to seek shelter elsewhere, even though they are already refugees within the Gaza Strip and keep being told to move. It is a forced displacement of the population. That is extremely worrisome. The city's only public hospital is located on the east side of Rafah, which people are being asked to leave. I think we need to look at the scope of what is going on over there. I just read that the Office of the United Nations High Commissioner for Human Rights has called this forced relocation order "inhumane". We have to be watchful and pay close attention today to what has been going on there for the past six months.

Government Orders

After the last federal election, we ended up with another minority government in Ottawa. Wanting to play a constructive role, the NDP caucus agreed to enter into talks and negotiations to see if we could secure things that neither the Liberals nor the Conservatives would agree to in the past, hence our imperfect but historic agreement to support the Liberal government in exchange for programs and measures that will provide meaningful help to workers and their families, seniors, patients, students and others.

The latest budget is far from being an NDP budget, but it does reflect the NDP's influence in this Parliament and the use of our leverage to get tangible results and make a difference in people's lives. We are not in politics just to make speeches and to have photo ops. We are also here to provide meaningful help to people who really need it and to improve the living and working conditions of the people we represent in our ridings.

I will get to my criticisms later, but there are some good things in this budget, things that we in the NDP forced the Liberals to deliver, things that past governments had never agreed to. The dental care program is one example. This program came into effect last week, on May 1 to be exact, for the oldest seniors who registered in December and January. It is going to make a huge difference in people's lives. In Quebec alone, four million Quebecers do not have public or private dental coverage. What the NDP fought for will help those folks in a meaningful way. The Department of Finance estimates that a senior couple could save roughly \$2,600 as a result. A family with two children could save just over \$1,800, or nearly \$2,000.

Having 80% or 90%, or even more, of a dental bill covered has a big impact on someone's budget. Some people have avoided going to the dentist for years because they cannot afford it. Things are about to change. Will the program work beautifully, and is it perfect? No, adjustments will have to be made. We will have to find a balance. That said, I am convinced that it will be of real benefit to families, middle-class people and the most disadvantaged, particularly at a time when the cost of living is rising everywhere, and housing and groceries are becoming more and more expensive. Being reimbursed for almost all dental care will be a game-changer for many people. I am very proud of that. I encourage everyone to sign up, especially dentists. What is more, there will be a new system that I think will make payment even easier.

This program is directly related to the work of the NDP caucus. It was a campaign promise. We promised that we would come to Ottawa to fight for that, and we did. We got results. Today, I am very pleased to say that we kept our promise, and we also took an extremely important first step on pharmacare through the budget. All the reports and studies tell us that a universal public pharmacare program is the best way to reduce or control the cost of drugs. The strange thing is that Canada is the only country in the world that has universal public health care but no pharmacare. For years, we have witnessed drug prices spiral out of control while people go without the drugs they need and end up sicker than ever. As their condition grows worse, they end up in emergency rooms, which places our health care system under additional stress and strain.

• (1355)

Yes, Quebec has its own pharmacare program and retains the right to opt out of the federal pharmacare program with compensation. However, there are limits to Quebec's system, which is a hybrid public-private program that strongly encourages supplemental insurance plans that are negotiated by the unions when employment contracts are renewed. A large part of the money that is used to cover the increased cost of drugs, which is out of control, could be used to enhance things like wages or pension benefits. Even Dr. Jean Rochon, the person who established Quebec's pharmacare system, says that the program was a major step forward 30 years ago but that now we can see all of the flaws and that is it time to finish the job.

Finishing the job means implementing a universal public pharmacare program. The most recent budget lays the groundwork for the discussions that will take place with the provinces. It also sets out specific measures, such as \$1.5 billion to help 3.7 million people with diabetes, who will have access to medication or equipment in a few months, once the discussions have wrapped up. Nine million women across the country will also have access to contraceptives. That is huge.

I urge the Government of Quebec to listen and be open to dialogue so that Quebecers can benefit from this progress and this offer. It would be a real shame if, for ideological reasons, women in Gatineau could not get access to contraceptives while women in Ottawa could. I think that would be a real shame, especially when civil society groups in Quebec are calling for this. Every major union agrees with this. The FTQ, the CSN, the CSQ and the Union des consommateurs du Québec unanimously agree that this is the path to take, as stated in the Hoskins reports. That is pretty significant.

This budget also contains something that we asked for and that Quebec and others have been asking for for years, namely a school food program. Schools are a provincial jurisdiction, obviously. However, federal money can be used to buy meals, snacks or lunches for children who go to school on an empty stomach and who need energy so they can get through the day, pay attention in class and get good grades. These are determinants of academic success.

I do not know if anyone else remembers them, but I remember the little milk cartons we used to get at school when I was a kid. I think it is important for kids to have access to this kind of food. The folks responsible for the health of our children in schools were also calling for this. For years, the Breakfast Club has been asking for this kind of program and for federal money to be allocated. I am glad we managed to get it done.

Statements by Members

This budget also increases scholarship amounts for people enrolled in higher education, scholarships that have been frozen for 20 years but have finally just been increased. The budget also includes a plan to use federal lands to build truly affordable housing, something the NDP had called for, as well as an acquisition fund to purchase land for non-market housing, another request from the NDP. There is also a new \$1-billion fund to build truly affordable housing. There are a number of worthwhile measures.

I see that my time is running out, but I have to add that there are some seriously disappointing things about this budget, including the disability benefit, which will provide only \$200 a month. That is totally inadequate and will not lift people out of poverty. We could also talk about indigenous infrastructure and indigenous housing, both areas where the federal government needs to do a lot more.

STATEMENTS BY MEMBERS

• (1400)

[English]

SALVATION ARMY

Mr. Chandra Arya (Nepean, Lib.): Madam Speaker, I was pleased to attend the ribbon-cutting ceremony at the new Salvation Army's Barrhaven Church and Community Centre. This is a great addition to our Nepean community.

The Salvation Army is a social services organization that responds to disasters, feeds the homeless and runs thrift stores. As a local branch of the Salvation Army, the Barrhaven Church and Community Centre aims to bring help, hope and salvation to everyone without discrimination. The church is a place to build relationships with people who care, a place to belong to a community of faith and a place to become a person of purpose.

The people of Nepean and I are glad to finally see this wonderful facility built after many years of delays due to red tape.

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WEDDING ANNIVERSARY

Ms. Marilyn Gladu (Sarnia—Lambton, CPC): Mr. Speaker, today is May 6. Exactly two years ago to the day, at a David Wilcox concert, I met the love of my life, my husband Paul. He is wonderfully intelligent, wonderfully humorous, wonderfully loving and wonderfully tall.

From the day we met, he has brought joy to my life and has renewed my enthusiasm for doing this difficult job, from which I was considering retiring. He has restored again my pride in being the member for Sarnia—Lambton and has encouraged me and stood by me every step of the way. He has put the sparkle back in my eyes, a spring in my step and made me even smilier than before, if that is even possible. We share a love for God, family and music.

Today, I want to thank him for his love and say how much I look forward to doing life together. Happy anniversary, my darling.

BHIMRAO RAMJI AMBEDKAR

Mr. Randeep Sarai (Surrey Centre, Lib.): Mr. Speaker, today is a special day on the Hill as we mark Dr. Ambedkar Equality Day and day of *jayanti*.

Widely regarded as the father of the Indian Constitution, Dr. Bhimrao Ramji Ambedkar was an Indian jurist, economist, social reformer and political leader. A champion of civil rights, Dr. Ambedkar's vision for a free India was simple. He wanted equality for all, irrespective of caste, gender or religion. He carried these values and goals with him as he wrote India's Constitution, became India's first minister of law and resigned from government when the Indian cabinet and Parliament refused to support crucial civil rights reforms.

Today, as we welcome guests to Ottawa from across Canada, including the Chetna Association of Canada from Surrey and the Ravidass Sabha from Burnaby, to celebrate Dr. Ambedkar Equality Day, it is an honour to recognize his long-lasting legacy and praise those who continue his work in India and abroad.

* * *

[Translation]

225TH ANNIVERSARY OF SAINT-BENOÎT

Mr. Jean-Denis Garon (Mirabel, BQ): Mr. Speaker, 2024 is a defining moment in the history of the community of Saint-Benoît, now part of the city of Mirabel. Founded in 1799, this village is celebrating its 225th anniversary this year.

From the rise of the Patriotes' movement of 1837 to 1838—which was a battle for our freedom and democracy and saw the entire village burned by General Colborne's soldiers—to the expropriation of land by the federal government for the Mirabel airport, the people of Saint-Benoît have experienced many moments of adversity in their history.

Despite these major trials and tribulations, the village has been revitalized thanks to the industrialization of agriculture, the diversification of agri-tourism and the ingenuity of numerous entrepreneurs over the last few decades.

Surely members can see why I have such admiration for the people of my riding. The people of Saint-Benoît have a sense of honour, solidarity and innovation running through their veins.

On behalf of the citizens in the riding of Mirabel and on behalf of Quebeckers, I would like to wish the people of Saint-Benoît a happy 225th anniversary.

[English]

DANIEL RICHARD NICHOLAS

Mrs. Jenica Atwin (Fredericton, Lib.): Mr. Speaker, today, in this special place, I wish to recognize and celebrate the life of an extraordinary person from my home community: Daniel Richard Nicholes. Fredericton was not the only city to benefit from Dan's presence, kindness and dedication, but it would be his final resting place. We are eternally grateful for the time we had together.

I first met Dan after joining the Liberal Party of Canada. I was going through a lot of difficulty in my life and it was a very tumultuous time. When I needed it most, Dan and his amazing wife Susan were there. They showed up and they believed in me. I am forever indebted to them for picking me up, dusting me off and offering me hope and energy. They gave me the courage to keep putting one foot in front of the other, to keep fighting for justice, for equity, for better. That is just who Dan was. He was a giver and an optimist with a realist's wit, and anyone who was lucky enough to know him would attest to that.

We were fortunate enough to gather this past December to raise a toast to our incredible community of volunteers. I was honoured to present Dan with the Volunteer of the Year award, and it will forever stay in his name. Green's first hue is gold, its hardest hue to hold, yet Dan somehow stayed golden.

Until we meet again, my friend.

* * *

● (1405)

WINKLER FLYERS

Mr. Branden Leslie (Portage—Lisgar, CPC): Mr. Speaker, last Friday I was proud to be at the sold-out Winkler Centennial Arena to watch the hometown Flyers sweep the Steinbach Pistons to win the Manitoba Junior Hockey League, their first league title since 1998. The atmosphere was absolutely electric throughout the game but turned tense in the dying moments, when Steinbach tied it up with only 40 seconds left to play, to send it into overtime. Have no fear: It was the Flyers' Zach Nicolas who banged in the rebound to score the series' winning goal, and the crowd went wild.

Leading up to the series final, the whole city of Winkler was buzzing, and it was amazing to see how the community rallied around the team. The Flyers are a big, heavy team, built to win. Led by NHL alumni on the bench, the team walked over the Pistons in the final. Now the Flyers are off to play in the Centennial Cup in Oakville, Ontario, and will take on the best Junior A teams from around the country.

The entire province of Manitoba is cheering them on to bring home the cup. Go, Flyers, go.

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MS AWARENESS MONTH

Mr. Sean Casey (Charlottetown, Lib.): Mr. Speaker, the month of May marks MS Awareness Month.

Last week, I met with representatives of MS Canada to discuss how we can work together to improve the lives of those living with

Statements by Members

MS and prevent MS before it starts. For more than 90,000 Canadians, including 1,000 islanders, affected by MS, hope for the future is found in research. It is research that will help us understand the cause, prevent the disease before it starts, discover new treatments and ultimately find a cure.

Here in Canada, we are at the forefront of MS research, but in order to make the needed progress, we must make MS research funding a national priority and commit \$15 million in funding for global efforts. I am proud to be part of a government that is investing in improved health care services, increased research funding, and greater accessibility and support for individuals with disabilities.

Together, let us build a future where no one has to face the challenges of multiple sclerosis alone.

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YOM HASHOAH

Hon. Marco Mendicino (Eglinton—Lawrence, Lib.): Mr. Speaker, today is Yom HaShoah, the annual day to remember the six million Jews who were slaughtered during the Holocaust. We mark this sombre occasion with the jarring reality that anti-Semitism has never been more pervasive in Canada. B'nai B'rith just published its annual audit, reporting nearly 5,791 anti-Semitic incidents committed in 2023, more than double from the year prior.

Jews are bombarded daily with epithets like “[Jews,] go back to Europe”, “All the Zionists are racist” and “Long live October 7”. Some diminish these incidents; however, look at university campuses and one will see Jewish professors and students intimidated and harassed, to say nothing of the synagogues, day schools, businesses and neighbourhoods targeted every single day. If this were any other minority, there would be outrage, and there should be.

Yesterday I met with Rose Lipszyc and Pinchas Gutter, two Holocaust survivors. Their fighting spirit is indefatigable. We owe it to them, to the remaining survivors and to all of those who perished in the Shoah, to remember what our eyes have seen and to teach our children “never again”.

*Statements by Members***NATIONAL PRAYER BREAKFAST**

Mr. Richard Bragdon (Tobique—Mactaquac, CPC): Mr. Speaker, it is an absolute honour to rise in the people's House today and welcome to Ottawa guests from all over the country who are attending the 59th annual National Prayer Breakfast leadership dinner and the Young Christian Leaders Summit. We are excited that there will be record attendance this year, and we are so looking forward to the message of hope that will be shared with all of those attending.

Our theme this year is “bridge over troubled waters”. In times like these, when there is so much trouble geopolitically and there is so much uncertainty throughout our world, whether it is within nations or the hearts of individuals, the waters of life can become very troubled and our lives tumultuous and storm-tossed, but the timeless hope of the ages is that when we are in the storms of life, there is a promise we can hold onto: that we are not alone. We can look toward a source that is higher than we are, to find strength, comfort and courage.

It is our hope and sincere prayer that all of us in the chamber would experience the calming reassurance that is offered by the one who still calms the waters, speaks peace in any circumstance and is our true bridge over troubled waters: Jesus Christ.

* * *

● (1410)

GREAT LAKES AND ST. LAWRENCE RIVER

Mr. Vance Badawey (Niagara Centre, Lib.): Mr. Speaker, later today, Great Lakes and St. Lawrence stakeholder groups will be hosting a special event for MPs and senators, as well as officials and staff, to learn more about the triple bottom line impacts of this massive freshwater system.

Representatives from the Great Lakes Fishery Commission, the Lake Champlain Basin Program, the IJC, the Great Lakes and St. Lawrence Cities Initiative, the OCFA and many more will be on hand to take questions about what they do to help sustain the Great Lakes and the St. Lawrence River as economic and social drivers for millions of Canadians and Americans.

This evening, we will also be treated to a special live performance of *We Are The Water*, by Welland Centennial Secondary School. Trust me: This is a performance that members do not want to miss. I encourage all members, as well as their respective staff, to attend at 6:00 p.m. at the SJAM building.

Canada's freshwater resources are critical to Canada's future and deserve our unwavering respect. I am very pleased to share and support the binational work being done throughout the basins. Come out and see how we are keeping the “great” in the Great Lakes.

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THE ECONOMY

Mr. Tony Baldinelli (Niagara Falls, CPC): Mr. Speaker, after nine years of the NDP-Liberal government, two million Canadians are using food banks each month. In my community alone, Project Share served more than 13,000 people last year, or one in seven

residents, in Niagara Falls. This is a 97% increase over the past two years.

What has been the government's response? It increased the carbon tax by 23%, driving up the cost of food and making it harder to buy groceries, thereby sending more people to food banks. If that were not sad enough, a new report by Canada's food professor finds that nearly 60% of Canadians are deciding to purchase and eat expired food so they can lower their grocery bills.

After nine years of the incompetent Prime Minister, Canadians are deciding to run the risk of food poisoning because the price of food is so high. The NDP-Liberal government is not worth the cost of going hungry or getting sick.

It is time for a change in Ottawa. It is time to elect a common-sense Conservative government.

* * *

[Translation]

FINANCE

Mr. Joël Godin (Portneuf—Jacques-Cartier, CPC): Mr. Speaker, to hear the government talk, everything is just fine, life is good. I would invite the government and its ministers to follow me out to the streets and meet some real people.

After nine years of this government, its complacency has put us in a precarious situation. The Bloc Québécois, unfortunately, shares the blame. As a little reminder, the Bloc Québécois thought it was too much work to check every allocation, so it instructed its members to vote for them all. That represents \$500 billion of taxpayer money. Yes, \$500 billion in centralizing, inflationary spending. ArriveCAN, for example, cost over \$60 million. Worse still, the Office of the Secretary to the Governor General cost over \$20 million.

The Bloc Québécois says one thing and does another. The time has come for a responsible Conservative government that will govern with common sense. Enough of this Bloc-Liberal waste. They have both hands in the cookie jar, or I should say, in the pockets of honest Canadians.

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[English]

PULMONARY HYPERTENSION DAY

Mrs. Marie-France Lalonde (Orléans, Lib.): Mr. Speaker, I rise today to recognize that May 5 is World Pulmonary Hypertension Day.

Statements by Members

The rare form of the disease is called pulmonary arterial hypertension, or PAH, which severely impacts the health and quality of life of patients who are affected. I commend the Pulmonary Hypertension Association of Canada and its patient ambassadors Donna Downes and Shirley Druhan from my riding of Orléans for their relentless efforts in raising awareness for Canadians with PAH.

With initiatives like the federal government's national strategy for drugs for rare diseases, investments are being made to help increase access to and affordability of promising and effective drugs for rare diseases to improve the health of patients across Canada.

We will continue to work on ensuring that people living with PAH are able to access the resources they need.

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● (1415)

MENTAL HEALTH WEEK

Mr. Gord Johns (Courtenay—Alberni, NDP): Mr. Speaker, today, on the first day of Mental Health Week, millions of Canadians are unable to access reliable, quality mental health care as they cope with mental health disorders or mental illness in their daily lives.

At some point in our lives, most of us will be touched by mental health issues. However, for too many people in need of mental health care, cost-free universal care is not available in the same way as it is for physical health. Too many must turn to for-profit services, if they can afford them. For some, compassionate care is available from chronically underfunded non-profits in communities far away from hospitals and government services.

Join me on this day, and every day, in the fight for parity of mental health care in our universal system, for sustainable funding for community-based service delivery, and for compassion and kindness in our response to the mental health needs of all Canadians.

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[*Translation*]

NATIONAL NURSING WEEK

Mr. Luc Thériault (Montcalm, BQ): Mr. Speaker, I rise today to recognize National Nursing Week.

As we all know, being a nurse is a calling. It can be seen in a glance, a smile, their care, their presence or the fact that they listen and reassure. They are the heart and soul of our health care system and, too often, they are the ones holding the system together.

Day after day, we see them working with those who are sick, the elderly and the most vulnerable people in our society. Sometimes, in remote areas, they are the only ones who can assess people's health and provide the necessary care. It is a demanding role that calls for diligence, commitment, excellence and compassion.

I thank nurses for being there for us day after day so that we have access to quality care. They change our lives and shape the future.

I wish everyone a happy National Nursing Week.

[*English*]

PUBLIC SAFETY

Mr. Dan Albas (Central Okanagan—Similkameen—Nicola, CPC): Mr. Speaker, the Oxford Advanced Learner's Dictionary defines the word “wacko” as “crazy; not sensible”. To many people in British Columbia, what is happening in our beaches, neighbourhoods, parks, playgrounds, coffee shops and even in our hospitals is truly wacko, because the Prime Minister and NDP Premier David Eby have surrendered our most precious public spaces to illegal drug dealers. This is a wacko policy.

Illegal drug dealers prey on our most vulnerable in society. This is not good for those people suffering with addictions, nor is it good for public safety. In fact even the B.C. NDP has now figured this out. Since the B.C. government asked 10 days ago to stop the wacko, far left project of legalization of hard drugs, some 60 British Columbians have died due to the Prime Minister's political dithering.

Let us end the wacko, failed, deadly, illegal drug experiment in British Columbia, and let us bring common-sense Conservative solutions that will protect the public and people battling with addictions, instead of supporting illegal drug dealers.

* * *

AQUACULTURE INDUSTRY

Mr. Wayne Long (Saint John—Rothesay, Lib.): Mr. Speaker, I rise today on behalf of many Canadians who are looking for our government's continued commitment to our coastal communities and their families by standing with the Canadian aquaculture industry.

Through investment, innovation, technologies and practices, Canada's highly regulated aquaculture industry can continue to grow and prosper. Our coastal communities on the east coast and on the coast of British Columbia asked whether they are given the chance to continue to thrive with a modern salmon aquaculture industry. One hundred per cent of the remaining salmon farms in coastal British Columbia operate with the support of coastal first nations, on whose traditional territories they exist. The activists have an ill-informed agenda that ignores the science.

As we look to long-term renewal of B.C. salmon farming licences, it is a question of growth and hope versus poverty for many indigenous communities. The future of Canada's coastal communities depends on it.

*Oral Questions***ORAL QUESTIONS**

[English]

[Translation]

HOUSING

Hon. Pierre Poilievre (Leader of the Opposition, CPC): Mr. Speaker, today's headlines in Quebec once again show that this Prime Minister is not worth the cost of housing, which has doubled in the nine years since he took office.

Quebec's big moving day, July 1, is a disaster waiting to happen. Organizations in Quebec are appealing for help. Renters are contacting us with very clear suicide plans. Soon they will be forced to live in their vans.

After nine years of promises, why should Quebecers believe the Prime Minister?

● (1420)

Hon. Sean Fraser (Minister of Housing, Infrastructure and Communities, Lib.): Mr. Speaker, I understand that the situation is difficult for renters and those who do not have any housing solutions.

That is why the government is holding discussions and negotiations to reach an agreement with Quebec to build affordable housing. With the money from the federal government, Quebec will be able to build up to 8,000 affordable housing units.

The Conservative Party's position is to oppose that. That is not good.

We are working with our colleagues in Quebec to build affordable housing.

* * *

FINANCE

Hon. Pierre Poilievre (Leader of the Opposition, CPC): Mr. Speaker, the Liberals are making more expensive promises, but this Prime Minister is not worth the cost after nine years.

Worse still, the Bloc Québécois voted to support this Prime Minister's \$500 billion in inflationary and centralizing deficits and spending. This has driven up interest rates for Quebecers who are afraid of losing their homes. In addition, taxpayers are now paying more for interest on the national debt than for health care.

When will the Prime Minister admit that he and the Bloc Québécois are not worth the cost?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, we have a plan to build more housing faster, but the Conservatives voted against it. We have a plan for the green industrial transition, but the Conservatives voted against it.

I want to share some very good news with members, news that Canadians learned last week. Moody's has reaffirmed our AAA credit rating, the highest possible rating, thanks to our responsible fiscal policy.

MENTAL HEALTH AND ADDICTIONS

Hon. Pierre Poilievre (Leader of the Opposition, CPC): Mr. Speaker, after nine years, the Prime Minister is not worth the crime, chaos, drugs and disorder. It has now been 10 days and 60 dead British Columbians since the government of that province has asked the Prime Minister to reverse his deadly and radical legalization of crack, heroin and other hard drugs in children's parks, hospitals and on transit. Why will he not reverse his radical agenda?

Hon. Ya'ara Saks (Minister of Mental Health and Addictions and Associate Minister of Health, Lib.): Mr. Speaker, communities in B.C. are facing an extremely serious challenge. It is a toxic drug supply on the streets, and people are dying.

We know that public consumption is an issue of concern, which is exactly why B.C. is amending its proposal, and we have been working with it every step of the way. We are treating this with the urgency it deserves. All partners are at the table right now to find the path forward, working with law enforcement and health services so that we get this right and save lives.

Hon. Pierre Poilievre (Leader of the Opposition, CPC): Mr. Speaker, to find a path forward, the path forward is obvious: ban hard drugs; invest in treatment; and bring our loved ones home, drug-free.

That minister claimed last week that she was waiting for the B.C. government to provide information before she could decide on reversing radical legalization. It turns out that the government had given her that information within hours of the request. She has all the information. Therefore, why are she and her radical boss clinging on to this insane policy?

Hon. Ya'ara Saks (Minister of Mental Health and Addictions and Associate Minister of Health, Lib.): Mr. Speaker, on this side of the House, we follow science, we follow health care experts and we follow the information. We are working with B.C. on a comprehensive amendment to its proposal. This takes collaborative work to get it right. This is a health issue, not a criminal one. The Leader of the Opposition is misleading Canadians in not recognizing that people need health care; they do not need to be re-stigmatized and criminalized.

Hon. Pierre Poilievre (Leader of the Opposition, CPC): Mr. Speaker, the Abbotsford Soccer Association wrote a letter entitled, "A Cry for Change". Volunteers with the organization have found dirty needles that can puncture innocent children in the playing field. Other B.C. fields have found women raped and overdosed, addicts naked and have had pets that have actually overdosed because there is so much drug contamination on the site. What are the Liberals thinking over there?

• (1425)

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, a pilot project was put in place at B.C.'s request. B.C. now has serious concerns about some aspects of that. We share those concerns and are addressing them.

I do want to say that I do not think there is a family in Canada that has been untouched by the tragedy of opioids. I think it is absolutely abhorrent to try to score political points off the pain of Canadians.

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[Translation]

CBC/RADIO-CANADA

Mr. Alain Therrien (La Prairie, BQ): Mr. Speaker, creative staff at Radio-Canada are worried. The cultural sector is worried. The Government of Quebec is discussing catastrophic scenarios. The plan to bring the CBC and Radio-Canada closer together is ruffling feathers and looks more like a plan to rescue the CBC on the back of Radio-Canada. It is no surprise, given that the CEO of CBC/Radio-Canada, appointed by the Liberals, has never been afraid to attack Radio-Canada.

Internally, they are saying that everything is on the table, including programming and leadership.

Can the Prime Minister commit to maintaining the independence of Radio-Canada with respect to the CBC?

Hon. Pascale St-Onge (Minister of Canadian Heritage, Lib.): Mr. Speaker, I will repeat what I said last week: In no way are the services to Canada's francophone population, whether in Quebec or outside Quebec, going to be affected by internal restructuring at CBC/Radio-Canada.

It surprises me to hear the Bloc Québécois taking more or less the same position as the Conservatives, that we need to completely separate the CBC and Radio-Canada and, while we are at it, completely defund the CBC.

I do not understand where the Bloc Québécois is going with this. It makes no sense.

Mr. Alain Therrien (La Prairie, BQ): Mr. Speaker, there is the official narrative and then there is anonymous information. What we learned from La Presse is that nothing is off the table in this supposed effort to bring the two entities closer together, not even programming, and that there is indeed talk of a management merger. That means a single management team for the French and English networks.

When we mix French and English in Canada, English always ends up taking precedence, while French takes a back seat.

Will the Prime Minister put a stop to this very dangerous idea of bringing the CBC and Radio-Canada closer together?

Hon. Pascale St-Onge (Minister of Canadian Heritage, Lib.): Mr. Speaker, I want to point out that the Conservatives are applauding when the Bloc Québécois talks about separating the CBC from Radio-Canada and completely defunding the CBC. What is happening? Why is the Bloc Québécois so aligned with the Conservatives

Oral Questions

on something as fundamental as our public broadcaster, Radio-Canada?

They were never able to protect Radio-Canada from the Harper Conservatives, and they will not be able to do any better now.

On this side of the House, we have said that we will always protect French programming and content. What we want is more French content, not to reduce funding.

* * *

[English]

HEALTH

Mr. Jagmeet Singh (Burnaby South, NDP): Mr. Speaker, the Liberals delay in protecting women's rights. The Conservatives straight up want to attack women's rights. Last year, they brought in a motion attacking a woman's right to choose. Right now they are blocking free birth control for women. Later on this week, they are going to attend an anti-choice rally.

New Democrats want more freedom, more choices and more affordability for women.

Will the government support us in stopping the Conservatives from denying nine million Canadians free birth control?

Hon. Mark Holland (Minister of Health, Lib.): Mr. Speaker, let me state clearly and unequivocally that every woman, in every part of the country, must have access to the oral contraceptives she needs to have control over her reproductive future. Any party that stands in the way of that is standing in the way of the basic freedom for women in our country to have autonomy over their body.

I would ask the Conservative Party of Canada to stop blocking this so that women can get the reproductive aids they need to have control over their reproductive future.

• (1430)

[Translation]

Mr. Jagmeet Singh (Burnaby South, NDP): Mr. Speaker, free contraception will allow women to save hundreds of dollars and will give them freedom of choice, but the Conservatives want to block that. They want women to pay more and have less freedom. The NDP will not allow that to happen.

Will the government vote with us today to ensure that nine million people have access to free contraception?

Hon. Mark Holland (Minister of Health, Lib.): Mr. Speaker, it is a question of freedom. Women across the country will have access to the contraceptive drugs they need for their body and their freedom. I wonder why the Conservative Party is blocking the bill that will provide drugs not just to women, but also to diabetics.

It is time to take action. It is time to ensure that there is true freedom for women across the country. It is time to stop blocking legislation.

Oral Questions

[English]

FINANCE

Mr. Jasraj Singh Hallan (Calgary Forest Lawn, CPC): Mr. Speaker, after nine years of the Liberal-NDP Prime Minister, it does not feel like Canada anymore. Life is more unaffordable than ever. Canadians, the Governor of the Bank of Canada and even random Liberals are saying that the government is not helpful with its out-of-control spending and not worth the cost.

Canadians are living in their cars and in tents because they cannot afford housing. They are lining up at food banks in record numbers because they cannot afford food. They are leaving in droves because they cannot afford the high cost of living.

When will the Liberals implement a common-sense plan, bring in a dollar-for-dollar law and cap government spending so that inflation and interest rates can come down?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, we have put forward a budget that invests in the things Canadians need, first and foremost, housing. We are doing that by asking those at the very top to contribute a little more. The good news is that we are doing it in a fiscally responsible way.

People do not have to believe the partisans in any chair in the House. They can talk to the analysts at Moody's, who, last week, reaffirmed Canada's AAA rating, the highest that exists, with a stable outlook. It does not get better than that.

Mr. Jasraj Singh Hallan (Calgary Forest Lawn, CPC): Mr. Speaker, common sense is chasing the finance minister, and just like in Alberta, she is speeding away from it.

The Liberals have put taxpayers on the hook, and \$54 billion of taxpayer money is going to go, just in interest, to the Prime Minister's doubling of the debt. That means more money is going to bankers, bondholders and the finance minister's Bay Street buddies than to doctors, nurses and the health care system.

Why does the finance minister not pump the brakes on hypocrisy, let common sense catch up and introduce a dollar-for-dollar law so that inflation and interest rates can finally come down?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, last week, Moody's reaffirmed our AAA credit rating. These are objective analysts who have pointed out that Canada has the most fiscally responsible plan in the G7.

Let us talk about hypocrisy, Conservative hypocrisy. Last week, the Conservative leader wrote an op-ed asking business leaders to attack our budget. I guess that is because he does not have the courage to come out and say the truth, which is that he stands for those at the top, not regular Canadians.

Mr. Philip Lawrence (Northumberland—Peterborough South, CPC): Mr. Speaker, last week, the Governor of the Bank of Canada confirmed what millions of Canadians already know: Liberal spending is making life more expensive. Nine years of NDP-Liberal deficits have led to a lost decade, lowering standards of living, record food bank usage and a housing crisis.

Will the government finally commit to a dollar-for-dollar rule that would allow Canadians to feed their families and keep their homes?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, I respect the member for Northumberland—Peterborough South and he is better than misrepresenting the words of the Governor of the Bank of Canada.

The reality is that the Governor of the Bank of Canada, in testimony since the budget, said, "The budget does respect the fiscal guardrails that the government put in place." He also said, "Keeping the debt-to-GDP ratio on a declining track, and importantly keeping deficits below one per cent of GDP in future years, the budget...commits to those guardrails...and that is helpful."

• (1435)

Mr. Philip Lawrence (Northumberland—Peterborough South, CPC): Mr. Speaker, I will quote the governor directly. He said this Liberal budget is "not helpful."

It is more distraction and denial to cover up the government's record of massive deficits, which have led to over \$54 billion in interest being paid in this budget alone. It will spend more in interest that it will collect in GST. We will pay more in interest than we will for health care transfers.

When will the Liberals finally get their deficits under control so Canadians can eat and keep their homes?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, that is simply not true.

I encourage people to read the testimony of the Governor of the Bank of Canada and news reports about that testimony. Here is what he said, and I am quoting precisely: "Keeping the debt-to-GDP ratio on a declining track, and importantly keeping deficits below one per cent of GDP in future years, the budget also commits to those guardrails going forward and that is helpful." Those are the words of the Governor. People can just take a look at the transcript.

[Translation]

Mr. Pierre Paul-Hus (Charlesbourg—Haute-Saint-Charles, CPC): Mr. Speaker, Quebecers are struggling. They are being hit hard by mortgage renewals. Mortgage rates are high, mainly because of the Prime Minister's chaotic management of the public purse, with the support of the Bloc Québécois.

Oral Questions

Over the past nine years, the Bloc Québécois has supported and voted in favour of additional spending of over \$500 billion. That includes a June 2022 vote on \$115 billion to be used in part for pipelines. People should take note that the Bloc Québécois voted in favour of pipelines. Will the Liberals and the Bloc Québécois take responsibility for the sharp rise in mortgage rates and the cost of living?

Hon. François-Philippe Champagne (Minister of Innovation, Science and Industry, Lib.): Mr. Speaker, Canadians are listening to a party that has no ambition, no vision and no plan. Canadians have a choice. They can choose to listen to a party that has no vision or a government that is investing in youth, investing in growth, investing in housing, and investing in science and research.

On this side of the House, we will continue to invest in Canadians, because, as my colleague was saying, confident countries invest in their people. That is exactly what we are going to do.

Mr. Pierre Paul-Hus (Charlesbourg—Haute-Saint-Charles, CPC): Mr. Speaker, the Conservative Party has a great vision, a common-sense vision. This government left all that behind nine years ago. On the other side, we have the Bloc Québécois, which is no better than the Liberals. The Bloc Québécois supported \$500 billion in additional spending. It always says it is going to vote against the budget, yet it always votes for specific budget allocations, which has led to the struggle that Quebecers and Canadians face today.

Can the government ask the Bloc Québécois why it always goes along with the government's schemes, that lack all common sense?

Hon. François-Philippe Champagne (Minister of Innovation, Science and Industry, Lib.): Mr. Speaker, Canadians watching the debates at home understand what lacks common sense. What defies common sense is not having any ambition, not having any vision and not having a plan for the country in 2024. We are in the middle of a full-on economic transformation. The people at home understand that. Now is the time to invest in science and research. Now is the time to invest in the next generation. Now is the time to invest in growth.

That is exactly what we are doing. We have the best credit rating in the world. The time to invest is now. We are a confident nation. Together, we are going to build the Canada of the future.

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IMMIGRATION, REFUGEES AND CITIZENSHIP

Mr. Mario Simard (Jonquière, BQ): Mr. Speaker, let us come back to immigration. On February 12, the House supported a motion giving the government 100 days to convene a meeting of all first ministers to discuss integration capacity. It had 100 days to table a plan for revising federal immigration targets in 2024, 100 days to produce a report on the gap between federal targets and capacity, and 100 days to determine how to financially close that gap to successfully integrate newcomers.

One hundred days goes by fast. There are now only two weeks left. Have the first ministers received the invitation? Is it in the mail?

Hon. Marc Miller (Minister of Immigration, Refugees and Citizenship, Lib.): Mr. Speaker, as the hon. member should be well aware, I am off to meet with my provincial counterparts this Thursday for precisely this purpose. I am looking forward to the follow-up. In particular, the provinces will be asked to define precisely what this integration capacity is. I am anxious to see what happens next.

Mr. Mario Simard (Jonquière, BQ): Mr. Speaker, in November, the House voted unanimously for the federal government to review its immigration targets in 2024, after consulting Quebec and the provinces about their integration capacity. Even the Liberals recognized that the targets should correspond with housing, health, education, French language training and infrastructure needs.

Even so, Ottawa intends to continue to increase immigration in 2024 and even in 2025. When will the government listen to the reasonable demands of the House and stop blindly increasing immigration?

• (1440)

Hon. Marc Miller (Minister of Immigration, Refugees and Citizenship, Lib.): Mr. Speaker, I think I answered the previous question the same way. This is practically the same question, and I already answered it before.

Mr. Mario Simard (Jonquière, BQ): Mr. Speaker, we are going to go far like that.

The federal government is blindly increasing its targets despite the House's calls to adjust the targets in line with integration capacity, despite the House's calls to begin this process within 100 days of meeting with the premiers, despite the negative feedback of the public service, despite the warnings from economists and despite the CMHC figures proving that the housing crisis is getting worse. Despite all of that, the government will not listen.

Why do the Liberals refuse at all costs to find out how many people can be integrated without depriving them of services or ignoring their basic needs?

Hon. Marc Miller (Minister of Immigration, Refugees and Citizenship, Lib.): Mr. Speaker, I do not know whether the member changed his notes between his three questions, but as I just said, I will be meeting with my ministerial colleagues this Wednesday, Thursday and Friday to talk about exactly that. That is our commitment to the provinces. Co-operation is needed. We will see what happens next, but of course we will be reviewing this with the provinces. We have not committed to an increase or decrease, or something in between, but we will see.

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FINANCE

Mr. Luc Berthold (Mégantic—L'Érable, CPC): Mr. Speaker, after nine years, this Prime Minister, backed by the Bloc Québécois, is not worth the cost that Quebecers are paying for their mortgages, rent, food, gas and taxes.

Oral Questions

Every day, there are moving stories of Quebeckers who have to live in their cars and go without food, or of food banks that can no longer feed the people knocking on their doors. It is all because of this Prime Minister's \$500 billion in inflationary spending, which the Bloc Québécois supports.

When will the Prime Minister stop this wasteful spending so that, despite the Bloc Québécois, people can have enough to eat?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, Quebeckers need investments in health care and we are making them.

Quebeckers need investments in day care and early childhood centres and we are making them.

Quebeckers need investments in housing and we are making them.

The only thing the Conservatives know anything about are cuts and austerity, because they are afraid to raise taxes on the wealthy.

Mr. Luc Berthold (Mégantic—L'Érable, CPC): Mr. Speaker, Quebeckers are already experiencing the austerity imposed by this government. They can no longer afford housing. They can no longer afford food. That is the reality facing Quebeckers every single day.

After nine years, this Prime Minister seems to have found a partner to help him spend and create even more inflation at the expense of families. He knows that the Bloc Québécois will not vote against his spending because the Bloc Québécois likes this Liberal government.

What does the Bloc Québécois get out of voting for \$500 billion in centralizing Liberal spending?

When will the Prime Minister, with the Bloc Québécois's support, stop impoverishing Quebeckers?

Hon. Jean-Yves Duclos (Minister of Public Services and Procurement, Lib.): Mr. Speaker, our colleague talks about reality, but the reality is that, during his term as minister responsible for housing, the Conservative leader created six affordable housing units, while Quebec municipalities are currently creating 8,000.

The Conservative leader is still calling Quebec's municipalities incompetent, however. He insults everyone. That makes six affordable housing units over his entire term, compared to 8,000 affordable housing units by Quebec municipalities.

Who is the most incompetent?

* * *

EMPLOYMENT

Mr. Gérard Deltell (Louis-Saint-Laurent, CPC): Mr. Speaker, for weeks now, the member from Quebec City has been telling tall tales.

The problem is that, at Université Laval, a grievance has now been filed against him directly because his status changed, allowing him to keep all his benefits.

My question is, did the member from Quebec City request this benefit, which puts him in a conflict of interest, or did he accept an

offer made by Université Laval, which puts him in a conflict of interest?

It is a clear question, so I would like a clear answer, please.

Hon. Steven MacKinnon (Leader of the Government in the House of Commons, Lib.): Mr. Speaker, I thought the member was better than that.

He knows that Canada has some of the strictest conflict of interest and ethics rules in the world. This minister is a model citizen when it comes to complying with the very strict conflict of interest and ethics rules.

That question surprises me, coming from the member across the way.

* * *

• (1445)

[English]

IMMIGRATION, REFUGEES AND CITIZENSHIP

Ms. Jenny Kwan (Vancouver East, NDP): Mr. Speaker, Amnesty International, Human Rights Watch and other advocates have called on the Liberals to end Canada's rights-violating immigration detention system. This system traumatizes people seeking safety.

Provinces have ended immigration detention in their jurisdictions. Instead of following their lead, the federal government plans to lock up migrants and asylum seekers in federal prisons. They also want to codify this practice into law. This is in violation of international human rights standards.

When will the government stop jailing people who are seeking safety and a better life?

Hon. Dominic LeBlanc (Minister of Public Safety, Democratic Institutions and Intergovernmental Affairs, Lib.): Mr. Speaker, I appreciate our hon. colleague's question. I share her concern that the rights of all individuals must be respected.

I think she will understand that there is a very small group of individuals, with perhaps violent criminal pasts or those who may be involved in terrorist activity, for whom releasing into the community would not be an acceptable option because of public safety. We worked for many years with the provinces that kept this very small group of individuals in the appropriate custody, and now we are going to take over our responsibility, while at the same time respecting their rights.

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THE ENVIRONMENT

Mr. Gord Johns (Courtenay—Alberni, NDP): Mr. Speaker, every minute, two garbage trucks' worth of plastic are dumped into the world's oceans.

Canada has the longest coastline in the world, and plastic and industrial waste are choking the shoreline, making its way into our food and harming vital ecosystems. However, the Liberals' solution is to cancel the ghost gear fund, which creates local jobs, and removes plastic and marine debris from our waters.

The government says that it cares about the environment, but it refuses to act to protect it. Will the Liberals immediately restore this funding, so we can continue to clean up our coasts?

[Translation]

Hon. Diane Lebouthillier (Minister of Fisheries, Oceans and the Canadian Coast Guard, Lib.): Mr. Speaker, the department knows how important the state of our oceans is. I can say that we are working very hard. Projects have been implemented to recover ghost gear. The work will continue with our communities and our people in the field.

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[English]

JUSTICE

Mr. Iqwinder Gaheer (Mississauga—Malton, Lib.): Mr. Speaker, our government will always uphold the Charter of Rights and Freedoms to protect Canadians' rights. We even established a rule, in 2019, that every government bill must be accompanied by a charter statement to ensure that Canadians' rights are respected in all legislation.

Last week, the Leader of the Opposition admitted that he would overrule Canadians' rights using the notwithstanding clause. Can the Minister of Justice please reaffirm our government's commitment to upholding the charter?

Hon. Arif Virani (Minister of Justice and Attorney General of Canada, Lib.): Mr. Speaker, I will state that our government will stop at nothing to ensure that Canadians' charter-guaranteed rights and freedoms are protected.

One cannot claim to care about freedom and then vow to strip certain people's freedoms away when it is politically inconvenient. That is not democracy. The opposition has said that it will start with criminal justice matters, but where will they stop? Will it be with religious rights, abortion rights or the rights of the LGBTQ2 community?

Our government will always protect all Canadians' rights. It is a wake-up call that the Leader of the Opposition cannot and will not do the same.

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[Translation]

MENTAL HEALTH AND ADDICTIONS

Mr. Bernard Généreux (Montmagny—L'Islet—Kamouraska—Rivière-du-Loup, CPC): Mr. Speaker, after nine years of this Liberal government, the crises keep piling up. We have a housing crisis, a cost of living crisis and now an opioid crisis. In Montreal, the situation is getting worse and worse. Crack and heroin can be found near child care centres. Parents are worried about the safety of their children, and rightly so.

Oral Questions

Who is supporting the Liberal government on its extreme policies? The Bloc Québécois is. The Bloc is not worth the cost.

The question is simple. When, on what date, will the Prime Minister put an end to this radical experiment of legalizing hard drugs?

Hon. Steven MacKinnon (Leader of the Government in the House of Commons, Lib.): Mr. Speaker, as the member is well aware, the Province of Quebec has made no such requests. This means no changes are being considered in the treatment of opioids in Quebec.

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● (1450)

HOUSING

Mrs. Dominique Vien (Bellechasse—Les Etchemins—Lévis, CPC): Mr. Speaker, after nine years, the Bloc Québécois continues to support this Prime Minister in his reckless spending. The Bloc Québécois wants more transfers to the provinces, but it is voting in favour of \$500 billion in centralizing and inflationary allocations. It is incomprehensible.

Without housing, Quebecers will become homeless, which has a major impact on the health care system. The Bloc Québécois and the Prime Minister are simply not worth the cost.

When will this Prime Minister, with the support of the Bloc Québécois, stop wasting money so that Quebecers can finally find a dignified place to live?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, it might be a good idea for the Conservatives to talk to the Government of Quebec and to the mayors of Quebec's municipalities, because we have an agreement with Quebec to invest in housing.

Quebec and the federal government both understand the importance of investing in housing and investing to help and support Quebecers, but the Conservatives only understand austerity.

Mr. Richard Martel (Chicoutimi—Le Fjord, CPC): Mr. Speaker, after nine years under this government, it is clear that the Bloc Québécois and the Prime Minister are not worth the cost.

The housing shortage and high cost of rent have forced one 42-year-old to live in her minivan, and she is not the only one. While Quebecers are trying to survive, the Bloc Québécois has decided to vote in favour of \$500 billion in Liberal spending. That means they are voting in favour of bureaucracy and in favour of wasting \$60 million on ArriveCAN.

When will the Prime Minister stop wasting money, with the support of the Bloc Québécois, so that Quebecers can start living with dignity again?

Hon. Sean Fraser (Minister of Housing, Infrastructure and Communities, Lib.): Mr. Speaker, if the member thinks there is a housing problem in Quebec, why did he oppose the program to support the construction of housing in Quebec?

Oral Questions

One, two, three, four, five, six. Six is the total number of affordable housing units built with the support of the federal government when the leader of the Conservative Party was the minister responsible for housing.

We are making investments to build affordable housing across the country, including in Quebec. I am having conversations with my counterpart to continue our collaboration and, at the same time, we are making investments to build affordable housing.

Mr. Richard Martel (Chicoutimi—Le Fjord, CPC): Mr. Speaker, after nine years under this government, the housing crisis has become so severe that Quebecers are having trouble choosing between putting a roof over their heads and putting food on the table.

The Journal de Montréal reported that someone is living in their minivan while the government continues to waste money. Meanwhile, the Bloc Québécois, which claims to defend Quebec's interests, is making matters worse by voting for the Liberals' \$500 billion in spending. It is costly to vote for the Bloc Québécois.

When will the Prime Minister, supported by the Bloc, stop his wasteful spending?

Hon. Jean-Yves Duclos (Minister of Public Services and Procurement, Lib.): Mr. Speaker, I am very pleased to be able to talk about housing with my colleague from Chicoutimi—Le Fjord. In his riding alone, 180 affordable housing units have been created in recent months. This is extraordinary. I congratulate him on that outcome.

The only problem here is that perhaps he could speak with his Conservative leader to ask him why, during his entire mandate as minister responsible for housing, he created only six affordable housing units across the entire country.

I am very happy for the member, but it may not have been the brightest choice to make a comparison with his leader's record.

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DEMOCRATIC INSTITUTIONS

Mr. René Villemure (Trois-Rivières, BQ): Mr. Speaker, the Hogue commission's initial report unequivocally reveals the magnitude of foreign interference in our elections.

Today, the government will be introducing a bill that contains measures for countering this interference. Better late than never. However, if the government wants to prove that it means business, it will have to create, at long last, the foreign agent registry that everyone is calling for. The Bloc Québécois intends to introduce a bill to create a binding registry, although nothing is stopping the federal government from moving forward today.

Will the minister agree to pass legislation creating a binding foreign agent registry?

Hon. Dominic LeBlanc (Minister of Public Safety, Democratic Institutions and Intergovernmental Affairs, Lib.): Mr. Speaker, we obviously appreciate the enthusiasm of our colleague from Trois-Rivières.

Still, he has some experience of how the parliamentary system works. He would not want me to talk about a bill on the Order Paper before it is introduced in the House. I would risk censure by the Speaker for violating members' privileges. That is something I would never do.

I therefore ask my colleague for his patience. I am confident that we will be able to work with him on these important issues in the future.

• (1455)

Mr. René Villemure (Trois-Rivières, BQ): Mr. Speaker, the Hogue commission report also exposes the Prime Minister's and the Liberal Party's irresponsible attitude toward Chinese interference.

The report confirms that as early as 2019, the Prime Minister was duly informed of irregularities in the nomination in Don Valley North. The report specifies, on page 137, the Prime Minister's reasons for not withdrawing his candidate from the election. Among the reasons, we learned that “the [Liberal Party] expected to win [Don Valley North]”. In other words, the Prime Minister does not care if there is interference as long as the Liberal Party is winning.

Should democracy come before partisanship?

Hon. Dominic LeBlanc (Minister of Public Safety, Democratic Institutions and Intergovernmental Affairs, Lib.): Mr. Speaker, unfortunately, I disagree with what my colleague said. He knows full well that we are the first government to bring in measures to counter foreign interference and we have improved those measures. Following expert recommendations, we adjusted the measures to strengthen them further.

We have worked with our friends at the Bloc Québécois and other parties to help the commission and Justice Hogue do their work. We look forward to having her recommendations.

Parliament will certainly have to work together to follow through on those recommendations.

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[English]

MENTAL HEALTH AND ADDICTIONS

Mr. Brad Vis (Mission—Matsqui—Fraser Canyon, CPC): Mr. Speaker, after nine years, the NDP-Liberal Prime Minister is not worth the crime, chaos, drugs and disorder. Since the request 10 days ago to end deadly legalization, 60 British Columbians have died, and the impacts are felt in every community. The Abbotsford Soccer Association has to sweep its fields for dirty needles and deal with open drug use at our community parks. Patrons of the Sky-Train in Surrey Centre fear open use of meth on our transit system.

Can the minister provide the date when the government will finally cancel this wacko policy?

An hon. member: Oh, oh!

The Speaker: I am going to ask the hon. member for Timmins—James Bay to please keep his voice quiet unless he is recognized by the Speaker to speak.

The hon. Minister of Mental Health and Addictions.

Hon. Ya'ara Saks (Minister of Mental Health and Addictions and Associate Minister of Health, Lib.): Mr. Speaker, the pilot program in B.C. was set forth at B.C.'s request, to save lives. They have come to us now to amend their proposal. Working with the B.C. government, law enforcement and health care services to get this right and to save the lives of people who are dying because of a toxic drug supply is an urgent priority for us.

Mrs. Laila Goodridge (Fort McMurray—Cold Lake, CPC): Mr. Speaker, after nine years of the NDP-Liberal Prime Minister, he is not worth the crime, chaos, drugs or disorder. It was 10 days ago that the B.C. government pleaded with the Prime Minister to end this wacko drug policy. There have been 60 overdose deaths since B.C. begged for this to come to an end. On what day will they finally act and give B.C. what it is asking for?

An hon. member: Oh, oh!

The Speaker: Again, I am going to ask the hon. member for New Westminster—Burnaby to please not take the floor until he is recognized for doing so. I know this is a very difficult issue for many, so I ask members to please listen carefully to the questions and listen carefully to the answers.

The hon. Deputy Prime Minister and Minister of Finance.

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, we have a very effective, collaborative relationship with the Province of British Columbia, and it is frankly insulting to the province to suggest that the province needs to beg us for anything. The province has serious concerns about its pilot project. We share their concerns, and we are working collaboratively and effectively to address those concerns. What we are not doing is playing partisan politics with the lives of real people.

Mrs. Tracy Gray (Kelowna—Lake Country, CPC): Mr. Speaker, after nine years, the NDP-Liberal Prime Minister is not worth the crime, chaos, drugs and disorder. The B.C. government sent the Prime Minister all the information he needs to end his wacko drug policy experiment. In his 10 days of inaction, it is estimated 60 British Columbians' lives have been tragically lost to overdoses. Wacko drug policies have the RCMP citing government-supplied drugs being diverted and open drug use of crack in hospital rooms, meth in restaurants and fentanyl in parks and playgrounds.

How many more days will it take the Prime Minister to end his failed drug policy experiment?

• (1500)

Hon. Mark Holland (Minister of Health, Lib.): Mr. Speaker, of course, all members in this House are absolutely ripped apart by what we are seeing the opioid crisis do across this country. The responsibility we have to the families who have lost loved ones and to the people who are in crisis right now is to make sure we follow the evidence. The reality is that the ideas proposed by the Conservatives have been tried and have failed everywhere they have been tried. If we are going to have honest conversations, holding out false solutions is very disappointing on a subject so sensitive.

We need to work collaboratively in an evidence-based way to make sure that we do everything we can to get this right.

Oral Questions

DENTAL CARE

Mr. Majid Jowhari (Richmond Hill, Lib.): Mr. Speaker, over 1.9 million seniors 65 and older have successfully applied for the Canadian dental care plan. The Conservatives chose to vote against funding toward the CDCP. However, the numbers speak for themselves and have demonstrated Canadians' overwhelming support for this program.

Could the minister please update the House on the impacts of the work being done to provide access to dental care for Canadians?

Hon. Mark Holland (Minister of Health, Lib.): Mr. Speaker, I want to start by thanking the member for Richmond Hill for all his work to promote—

Some hon. members: Oh, oh!

The Speaker: The Chair has been pretty patient with the member for Sherwood Park—Fort Saskatchewan calling out when he does not have the floor. I am going to ask him to please listen respectfully to the questions that are asked and to the answers that are given.

The hon. Minister of Health can start from the top, please.

Hon. Mark Holland: Mr. Speaker, I want to start by thanking the member for Richmond Hill, who has been such an incredible advocate in making sure that all Canadians get the oral health care they deserve.

In the first three days, we have had extraordinary results. More than 15,000 seniors, just in the first three days, have already gotten service. When we think about that, it is a fundamental issue with dignity and prevention. Those are seniors who are not going to wind up in a hospital room.

We need to continue that momentum. More than 8,000 dentists have now signed up, with more and more signing up every day. We are going to get to—

The Speaker: The hon. member for Wellington—Halton Hills.

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DEMOCRATIC INSTITUTIONS

Hon. Michael Chong (Wellington—Halton Hills, CPC): Mr. Speaker, on April 11, the Prime Minister said that “it wasn't simply, an overall the election was free and fair”, but that in “every single constituency election...election integrity held and it was free and fair.”

Oral Questions

Justice Hogue concluded otherwise. She concluded that well-grounded suspicions about PRC interference in Don Valley North “could...have impacted who was elected to Parliament. This is significant.”

Does the government agree with Justice Hogue that PRC interference could have impacted who was elected to Parliament in Don Valley North?

Hon. Dominic LeBlanc (Minister of Public Safety, Democratic Institutions and Intergovernmental Affairs, Lib.): Mr. Speaker, we agree with Justice Hogue that there has been an increase in foreign state actors, hostile state actors seeking to interfere in the Canadian democratic process. Obviously that takes place at the riding level. We also noted Justice Hogue saying that this was the case for a very small number of constituencies and that she was not able to draw definitive conclusions as to the extent of that impact.

I understand my hon. friend is identifying some of what Justice Hogue said. I think it is important to put it in the context that she herself did.

Hon. Michael Chong (Wellington—Halton Hills, CPC): Mr. Speaker, I will tell the government what Justice Hogue concluded in Steveston—Richmond East. She found that “there are strong [indications] of PRC involvement and there is a reasonable possibility that these narratives could have impacted the result in this riding.” Again, the Prime Minister said, just several weeks ago, that in “every single constituency election...election integrity held and it was free and fair.”

Does the government agree with Justice Hogue that PRC interference could have impacted the election result in Steveston—Richmond East?

Hon. Dominic LeBlanc (Minister of Public Safety, Democratic Institutions and Intergovernmental Affairs, Lib.): Mr. Speaker, we think that Justice Hogue has done a very serious job in terms of understanding the extent and nature of foreign interference and helping Canadians understand also the tactics that foreign hostile state actors may use and how they seek to undermine the confidence of Canadians in democracy.

We should be very careful before we take out-of-context specific things that Justice Hogue has said. Our government, unlike the government that was in office before 2015, has taken this matter seriously and will continue to do everything necessary in this regard.

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● (1505)

ETHICS

Mr. Michael Barrett (Leeds—Grenville—Thousand Islands and Rideau Lakes, CPC): Mr. Speaker, the Liberal employment minister got caught cashing cheques from his secret lobbying business. It turns out his own department got lobbied and then gave \$10 million out, and the minister himself announced it. After nine years of the NADP government, it is clear it is not worth the cost or the corruption.

How much did the minister pocket? Is the government prepared today to announce that it is going to have the RCMP investigate this latest Liberal scandal?

Hon. Steven MacKinnon (Leader of the Government in the House of Commons, Lib.): Mr. Speaker, the minister has, of course, addressed that matter. Let us talk about the member for Leeds—Grenville—Thousand Islands and Rideau Lakes. In an alarming way last week, in the House, he failed to rule out using the notwithstanding clause to deny the rights of women to reproductive services in this country. There are 80 members of that caucus who have green or yellow lights from the Campaign Life Coalition. Who is going to stand up over there to make sure that the rights of women are protected against these Conservative anti-choicers?

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CLIMATE CHANGE

Ms. Joanne Thompson (St. John's East, Lib.): Mr. Speaker, cutting the pollution that is fuelling costly climate change while building a strong, sustainable Canadian economy that creates jobs and invests in the competitive decarbonizing world is the key to success in the 21st century. The latest national inventory report confirms that Canada has bent the curve and is reducing emissions toward achieving the country's 2030 emissions reduction goal.

Can the Minister of Environment and Climate Change update Canadians on this progress and the next steps in climate action?

Hon. Steven Guilbeault (Minister of Environment and Climate Change, Lib.): Mr. Speaker, in fact, emissions are down in Canada. That is not only according to us; the independent Canadian Climate Institute said that, for the first time in the history of Canada, we are on track to meet our 2026 and 2030 targets. There was less pollution in 2022 by 44 million tonnes than there was in 2019; this is the equivalent of removing 13 million vehicles from our roads, basically half of our existing vehicles in Canada.

More needs to be done, which is why we are the first and only country in the G20 to have eliminated fossil fuel subsidies, as well as the only large oil and gas producer to put in place a cap on emissions.

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FOREIGN AFFAIRS

Ms. Heather McPherson (Edmonton Strathcona, NDP): Mr. Speaker, the expected military invasion in Rafah will be catastrophic. Over a million people, half of them children, have no safe place to go. In Gaza, there is famine in the north and bombing in the south. This escalation threatens the safety of both Israelis and Palestinians.

The Liberals should be doing everything to protect innocent civilians, including hostages. Where are the promised sanctions on extremist settlers? Where is the two-way arms embargo? Why will the minister not do what she promised and act to save lives?

Ms. Pam Damoff (Parliamentary Secretary to the Minister of Foreign Affairs (Consular Affairs), Lib.): Mr. Speaker, the violence must stop. What is happening in Gaza is catastrophic. As we have said from the beginning, a military operation in Rafah would be devastating for Palestinian civilians and foreign nationals. They are seeking refuge. They are mothers and children. They have nowhere else to go, and asking them to move again is unacceptable.

We continue to call for a sustainable ceasefire. This cannot be one-sided. Hamas must release all hostages and lay down its weapons; humanitarian aid must get into Gaza.

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CLIMATE CHANGE

Ms. Elizabeth May (Saanech—Gulf Islands, GP): Mr. Speaker, unfortunately, and contrary to what the Minister of Environment just said, Canada is not on track to meet our target for 2030, which is expressed to the United Nations as 40% to 45% below 2005 levels, only conveniently forgetting the range into 45%.

On top of that, we are still spending more money to support fossil fuels than to decarbonize: \$34 billion on Trans Mountain; another \$5.7 billion on fraud, carbon capture and storage; and under-spending when the government promised it was going to spend money on climate. We are at least \$14 billion behind that promise.

• (1510)

Hon. Steven Guilbeault (Minister of Environment and Climate Change, Lib.): Mr. Speaker, if the member will not take it from me, maybe she will take it from organizations she probably knows very well.

Environmental Defence stated, “New data released today by the Government of Canada shows that [we are] finally starting to bend the curve when it comes to climate pollution. GHG emissions in 2022 were the lowest they have been in 25 years, with the exception of the pandemic years.”

The Pembina Institute stated, “Canada’s climate policies are starting to pay off.... It appears the suite of measures introduced by the Government of Canada over the last several years is starting to make a notable dent in our overall emissions.”

ROUTINE PROCEEDINGS

[English]

GOVERNMENT RESPONSE TO PETITIONS

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, pursuant to Standing Order 36(8)(a), I have the honour to table, in both official languages, the government’s response to 28 petitions. These returns will be tabled in electronic format.

Routine Proceedings

COUNTERING FOREIGN INTERFERENCE ACT

Hon. Dominic LeBlanc (Minister of Public Safety, Democratic Institutions and Intergovernmental Affairs, Lib.) moved for leave to introduce Bill C-70, An Act respecting countering foreign interference.

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

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[Translation]

COMMITTEES OF THE HOUSE

HEALTH

Mr. Sean Casey (Charlottetown, Lib.): Mr. Speaker, I have the honour to present, in both official languages, the following two reports of the Standing Committee on Health. The 17th report is titled “The Patented Medicine Prices Review Board: Ensuring the Effectiveness of the Reform Process”. The 18th report is titled “Fostering Healthy Childhoods: A Foundation for Resilient Generations”.

[English]

Pursuant to Standing Order 109, the committee requests that the government table a comprehensive response to each of these two reports.

We are grateful for the diligent support that we have received from the procedural clerks from the House of Commons and the expert assistance from the analysts of the Library of Parliament.

FINANCE

Mr. Peter Fonseca (Mississauga East—Cooksville, Lib.): Mr. Speaker, I have the honour to present, in both official languages, the following three reports of the Standing Committee on Finance.

First, I present the 17th report of the Standing Committee on Finance, in relation to Bill C-59, an act to implement certain provisions of the fall economic statement tabled in Parliament on November 21, 2023, and certain provisions of the budget tabled in Parliament on March 28, 2023. The committee has studied the bill and has decided to report the bill back to the House with amendments.

Second, I present the 18th report, entitled “Main Estimates: 2024-25”.

Third, I present the 19th report of the Standing Committee on Finance, in relation to the motion adopted on Thursday, March 21, regarding the excess profit tax on large grocery companies.

Routine Proceedings

I want to thank the members and all those who helped us get these reports prepared for Parliament.

• (1515)

GOVERNMENT OPERATIONS AND ESTIMATES

Mr. Kelly McCauley (Edmonton West, CPC): Mr. Speaker, I have the honour to present, in both official languages, the 18th report of the Standing Committee on Government Operations and Estimates, known as the mighty OGGO, entitled “Request for a Privacy Commissioner Investigation of the ArriveCAN Application”.

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PETITIONS

PUBLIC SAFETY

Mr. Dan Mazier (Dauphin—Swan River—Neepawa, CPC): Mr. Speaker, it is always an honour to present petitions on behalf of my constituents.

I rise for the 35th time on behalf of the people of Swan River, Manitoba, to present a petition on the rising rate of crime. Jail has become a revolving door for repeat offenders. Bill C-75 allows violent offenders to be in jail in the morning and back on the street the same day, while Bill C-5 allows criminals to serve their sentences from home.

The people of Swan River are calling for jail, not bail, for violent repeat offenders. They demand that the Liberal government repeal its soft-on-crime policies, which directly threaten their livelihoods and their community. I support the good people of Swan River.

HONG KONG

Mr. Tom Kmiec (Calgary Shepard, CPC): Mr. Speaker, I am tabling a petition on behalf of Hong Kongers all across Canada.

The petitioners draw the attention of the House specifically to the treatment that Hong Kongers have received ever since the national security law in Hong Kong was implemented, instituted in Hong Kong by the Communist authorities, on June 30, 2020. They draw the attention of the House to the fact that it has suppressed their freedom of speech and their peaceful expression of alternative views, and it also promotes the elimination of meaningful political opposition.

Protesters from Hong Kong have been coming to Canada since then and are asking the House of Commons for the following five things. The first is that IRCC should take greater care when receiving the applications of Hong Kongers who are recently released from prison and who have criminal convictions related to the pro-democracy movement. The second is that involvement in the pro-democracy movement not be an impediment for Hong Kongers eligible for immigration pathways in coming to Canada. Third is that IRCC should create a mechanism by which Hong Kong people with pro-democracy movement-related convictions may provide an explanation for such convictions. The fourth is that IRCC should create a mechanism by which Hong Kong people with convictions related to the pro-democracy movement may be provided admission to Canada. The fifth thing is to ensure the translation of police documents on arrest, charges and convictions, as well as personal declarations regarding criminal history, but to remove an explicit requirement for a Hong Kong police certificate.

CANADA POST

Mr. Martin Shields (Bow River, CPC): Mr. Speaker, I would like to present a petition on behalf of the residents in the area of Langdon, who have been without a post office for over a year. I know the environment minister would be very concerned about this because now they have been redirected 30 kilometres away to another community. This is an environmental disaster with all the carbon they will use getting to a post office in a community 30 kilometres away.

Residents need their post office. It has been over a year. We need the post office in Langdon.

PUBLIC TRANSIT

Ms. Elizabeth May (Saanich—Gulf Islands, GP): Mr. Speaker, it is an honour to rise in this place on behalf of the people of Saanich—Gulf Islands who are looking to see climate action and, particularly, transit plans across Canada.

They note that the federally supported 10-year transit plan will end in 2027 and that we still lack an effective public transit plan that serves Canadians, particularly in rural and more remote areas, such as Vancouver Island. The petitioners are asking for a permanent federal funding mechanism for public transit to go beyond the 10-year plan and for all orders of government to work together to ensure predictable, long-term and low-carbon transit.

They hope accountability measures will be in place to ensure governments work together to deliver public transit for Canadians.

FIREARMS

Mr. Damien Kurek (Battle River—Crowfoot, CPC): Mr. Speaker, as always, it is an honour to stand in this place and present three petitions signed by so many Canadians from across this country.

The first petition seeks to support the health and safety of Canadian firearms owners. The petitioners recognize the importance of owning firearms and are concerned about the impacts of hearing loss caused by the damaging noise level of firearms and recognize the need for noise reduction.

The petitioners acknowledge that sound moderators are the only universally recognized health and safety device that is criminally prohibited in Canada. Moreover, the majority of G7 countries have recognized the health and safety benefits of sound moderators, allowing them for hunting, for sport shooting and for reducing noise pollution. The petitioners are calling on the government to allow legal firearms owners the option to purchase and to use sound moderators for all legal hunting and sport shooting activities.

It is great to present that petition on behalf of so many Canadians here today.

● (1520)

FREEDOM OF POLITICAL EXPRESSION

Mr. Damien Kurek (Battle River—Crowfoot, CPC): Mr. Speaker, the second petition I rise to present in the House was signed by numerous Canadians concerned about freedom of expression in this country. The petitioners recognize that Bill C-257 seeks to add protection against political discrimination to the Canadian Human Rights Act.

Therefore, these Canadians call upon the House of Commons to, one, support Bill C-257, which would ban discrimination on the basis of political belief or activity, and two, to defend the rights of Canadians to peacefully express their political opinions, a very important issue, indeed.

CHARITABLE ORGANIZATIONS

Mr. Damien Kurek (Battle River—Crowfoot, CPC): Mr. Speaker, the third and final petition I rise to present today in the House of Commons is from numerous Canadians who, and it is not the first time I have to present a petition like this, share their concern about how the Liberal Party of Canada, in its 2021 platform, promised to deny the charitable status of organizations that have convictions that differ from those of the Liberal Party. In some cases, it may jeopardize the charitable status of hospitals, houses of worship, schools, homeless shelters and other charitable organizations that simply do not agree with the Liberal Party on matters of conscience.

Many Canadians depend on, and benefit from, the charitable work done by these organizations, and certainly, these Canadians are very concerned about the imposition of a values test similar to that used to eliminate so many organizations from the Canada summer jobs program, as we saw a number of years ago.

Therefore, a host of Canadians call upon the House of Commons to, one, protect and preserve the application of charitable status rules on a politically and ideologically neutral basis without discrimination on the basis of political or religious values and without the imposition of another values test and, two, to affirm the rights of Canadians to freedom of expression.

As always, it is an honour to stand, on behalf of so many Canadians, to present these three petitions here in the House today.

CLIMATE CHANGE

Mr. Mike Morrice (Kitchener Centre, GP): Mr. Speaker, it is an honour to rise to present a petition on behalf of folks who note, first of all, that thermal coal, the kind used to generate electricity, is the world's dirtiest fossil fuel. They note that thermal coal is responsible for half of the world's carbon footprint. They note that the world needs to rapidly move away from thermal coal if we have any hope of holding on to the 1.5°C target set in Paris to limit global warming.

Petitioners go on to note many of the physical effects of the climate crisis, from permafrost melt to drought and wildfires, much of which we are seeing across the country and even more so around the world. They also note that Canada's greenhouse gas emissions

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are actually the worst of any G7 country since the 2015 Paris Agreement, and certainly since 1990.

Petitioners go on to then call on the Government of Canada to do two very specific things. The first is to add thermal coal to the priority substances list of the Canadian Environmental Protection Act, and as soon as possible to the toxic substances list of CEPA and, as a result of doing that, to go on to regulate the mining, use, export and import of thermal coal in accordance with our international commitments, effectively banning the export of thermal coal.

NATURAL HEALTH PRODUCTS

Mr. John Brassard (Barrie—Innisfil, CPC): Mr. Speaker, I am honoured to rise on behalf of Canadians to present a petition with respect to this large interventionist government proceeding again to take away consumer rights and health rights of Canadians, which will have a significant impact on the natural health products business in this country that employs literally thousands of people and that represents multi-billions of dollars of business.

The petition says that the Liberal Party is threatening access to natural health products. Through the new rules, it will mean higher costs and fewer products on store shelves, that new so-called cost recovery provisions will impose massive costs on all consumers of natural health products and will undermine access for Canadians who rely on these products and that the provisions in the latest Liberal omnibus budget have given the government substantial new arbitrary powers around the regulation of natural health products.

Therefore, the undersigned residents of Canada call on the government to reverse the changes made by the Liberals regarding natural health products. While I am on my feet, I do agree with many of my residents and businesses in Barrie—Innisfil, who see this as an attack on their consumer choice and cost, and it will have a dramatic impact on businesses in this country.

● (1525)

Mr. Kevin Lamoureux: Mr. Speaker, I rise on a point of order. First and foremost, one is not supposed to be reading a petition into the record. One is supposed to give a summary of it. Petitions should not be politically targeted in terms of the member giving a political statement at the same time.

The Deputy Speaker: We all should be judicious, of course, with what has been going on.

The hon. member for Renfrew—Nipissing—Pembroke has the floor.

Mrs. Cheryl Gallant (Renfrew—Nipissing—Pembroke, CPC): Mr. Speaker, I have two petitions to present.

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I am pleased to present a petition signed by the great people of Pickering, Uxbridge, Ajax and Whitby. They call on the House of Commons to immediately repeal the new regulatory constraints that were passed last year on natural health products, which millions of Canadians rely upon, and that have since affected their medical freedom of choice and affordability.

PORNOGRAPHY

Mrs. Cheryl Gallant (Renfrew—Nipissing—Pembroke, CPC): Mr. Speaker, I also present a petition organized by Pastor Joe Fiorentino of the Quadeville Pentecostal Church in my great riding of Renfrew—Nipissing—Pembroke.

The petitioners call on the House of Commons to immediately pass Bill S-210 without delay, which aims to protect our children from accessing harmful sexual and explicit pornographic content online. I would like to thank Pastor Fiorentino and all those in his congregation who signed this petition.

[Translation]

NATURAL HEALTH PRODUCTS

Mr. Pierre Paul-Hus (Charlesbourg—Haute-Saint-Charles, CPC): Mr. Speaker, I am honoured to present a petition today on behalf of Canadians who are concerned about what has been tabled by the Liberal Party regarding natural health products. It is clear that citizens believe the new rules will undermine access to natural health products, resulting in higher costs and fewer products available on store shelves, to name but a few issues.

In addition to this petition, our offices have received a tremendous amount of correspondence about this. I think it is very important for the House to receive this petition from concerned citizens, who want us to maintain access to natural products.

[English]

The Deputy Speaker: The hon. member for Kingston and the Islands is rising on a point of order.

Mr. Mark Gerretsen: Mr. Speaker, I did not want to raise this at the time because I almost felt that it was intended for this purpose.

One Conservative member, when presenting a petition today, was wearing a button that said “I heart oil”. I just want confirm, as I know there was a ruling on this before, that we should not be wearing any buttons with political statements as such.

Could you confirm that for the House?

The Deputy Speaker: We have said that we do not want buttons that are supporting one position or another position in the House. We should be judicious in what we are wearing. I do believe the hon. member has a mix of buttons he does wear. This one, I think, says “I love Canada”. I will have to go back and check that.

[Translation]

Mr. Luc Berthold (Mégantic—L'Érable, CPC): Mr. Speaker, I am pleased to rise today on behalf of 30 people who have chosen to present a petition to the House of Commons. This petition concerns access to natural health products, which has come under threat from new legislation and rules introduced by this Liberal government.

The new provisions, which are called “Natural health product cost recovery”, so that everyone understands, are going to impose

massive costs on all consumers of natural health products, obviously undermining access for Canadians who rely on these products.

On behalf of these 30 petitioners, who speak for many people in many regions of Canada, I am honoured to table this petition calling on the government to reverse the changes made in the latest Liberal budget regarding natural health products.

[English]

Mr. Branden Leslie (Portage—Lisgar, CPC): Mr. Speaker, I would like to table a petition from 26 signatories regarding the decision to threaten access to natural health products with higher costs and fewer products available on our store shelves. The cost recovery provisions will impose massive costs on all consumers of natural health products and will undermine access for Canadians who rely on these products, and, stemming from an omnibus budget bill, would give the government's substantial new arbitrary powers around the legislation of natural health products.

Therefore, I am happy to table this petition of the 26 concerned citizens regarding this effort to quell their ability to have natural health products available to them.

* * *

● (1530)

QUESTIONS ON THE ORDER PAPER

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, the following questions will be answered today: Questions Nos. 2456 to 2458, 2460, 2461, 2471, 2473, 2477, 2482, 2484 and 2485.

[Text]

Question No. 2456—**Mr. Randall Garrison:**

With regard to the two-year deadline for sequestration of criminal records for personal possession as required by the passage of Bill C-5, An Act to amend the Criminal Code and the Controlled Drugs and Substances Act, which received Royal Assent on November 17, 2022: (a) can the Government of Canada provide a status update on how this work is proceeding and whether the two-year deadline will be met by November 17, 2024; and (b) what the process will be for Canadians to be notified that their criminal records for personal possession have been sequestered?

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Ms. Jennifer O'Connell (Parliamentary Secretary to the Minister of Public Safety, Democratic Institutions and Inter-governmental Affairs (Cybersecurity), Lib.): Mr. Speaker, the Government of Canada is committed to promoting fairer and more effective responses to criminal conduct, and to addressing systemic racism and discrimination in Canada's criminal justice system, while maintaining public safety. To that end, on November 18, 2022, Bill C-5, An Act to amend the Criminal Code and the Controlled Drug and Substances Act, received royal assent. This legislation allows for the sequestering of a record for any simple drug possession conviction under the Controlled Drugs and Substances Act. It eliminates the need for individuals to submit an application; rather, eligible records will be set aside and apart from other convictions on their record. This ensures sequestered records for simple drug possession convictions cannot be revoked or cease to have effect. In effect, this sequestration eliminates the existence of the record for that offence only. Keeping simple possession convictions separate and apart from other convictions seeks to help reduce the negative consequences of conduct that is increasingly viewed as a public health and social problem.

Given the decentralized manner in which criminal records are stored and that the possession of controlled substances is governed across several legislative frameworks, effective implementation of section 10.6 of the CDSA requires federal, provincial, territorial and municipal government co-operation. Since coming into force in November 2022, Public Safety has been working closely with partners to implement Bill C-5 by November 17, 2024.

Public Safety recognizes there is much work left to be done to reduce the barriers those with a criminal record continue to face. The government remains committed to pursuing the best way forward to continue implementing these reforms and looks forward to continuing to work closely with partners at all levels to help ensure the handling of criminal records is fair and supports reintegration.

There is currently no plan to proactively notify individuals as to the status of their impacted record. Such proactive notification raises privacy concerns and distribution complexities, such as long-outdated contact information or individuals without access to Internet, mail or telephone. In addition, different jurisdictions have different rules for the disclosure of information and different means of defining, holding and setting aside records of conviction.

Question No. 2457—Ms. Melissa Lantsman:

With regard to the new Canadian Food Inspection Agency (CFIA) regulations for the slaughter of non-stunned animals: (a) what are the details of all consultations that the CFIA conducted related to the regulations, including which businesses, stakeholders, interest groups, and organizations were consulted, when were they consulted, and what feedback was received; (b) what impact does the government project that these regulations will have on the (i) availability, (ii) affordability, of Kosher meats in Canada; (c) what specific steps, if any, will CFIA take to ensure that the domestic Kosher market will remain viable in Canada; (d) what is the government's response to the concerns of Canadian Jews who observe Kashrut who will no longer be able to purchase non-imported Kosher meat following the implementations of these regulations; (e) what process did the government undertake to determine who receives exemptions from the new regulations; and (f) what entities or slaughtering practices has the government exempted from the new regulations?

Hon. Lawrence MacAulay (Minister of Agriculture and Agri-Food, Lib.): Mr. Speaker, with regard to part (a) of the question, the safe food for Canadians regulations, or SFCR, came into force in 2019 and outline animal welfare requirements. Prior to the

SFCR, the meat inspection regulations, 1990, or MIR, which were repealed when the SFCR came into force, provided the requirements for the humane treatment of animals, including the need to ensure animals are unconscious before they are suspended on the slaughter line.

The SFCR contain animal welfare requirements that apply to all federally regulated slaughter activities, including non-ritual and ritual slaughter.

In non-ritual slaughter, the SFCR require that food animals be rendered unconscious through pre-slaughter stunning prior to being suspended and bled on the slaughter line. With respect to ritual slaughter activities, the SFCR explicitly provide an exception that allows animals to be ritually slaughtered without stunning in compliance with Judaic or Islamic law. Regardless of the slaughter method, the SFCR require that any handling of food animals must not cause or subject the animal to avoidable suffering, pain or distress, and require that the food animal be unconscious before suspending on the slaughter line.

The ritual slaughter provisions of the MIR were carried over into the SFCR and the CFIA received comments on these provisions during the public consultation phase of the SFCR. The proposed regulations were published in Canada Gazette, part I, in January 2017 for a 90-day public consultation period. Over 1,300 comments were received and reviewed.

Based on the comments received and further analysis and considerations, the CFIA maintained the ritual slaughter provisions in the final publication of the regulations but amended the wording describing the neck cut to be in line with a recommendation from a Jewish organization.

With regard to part (b), the CFIA administers and enforces the Safe Food for Canadians Act, or SFCA, and regulations, which govern food import, export and interprovincial trade. Slaughter businesses that operate entirely within a province or territory are subject to provincial or territorial requirements under the supervision of the respective authority that governs food safety and welfare at slaughter within the province or territory.

The exception in the SFCR that allows animals to be ritually slaughtered without stunning provides the flexibility needed for kosher meat to be available in Canada. There are several SFCA licence-holders, or federally licensed operators, who are currently slaughtering and producing kosher meat products in compliance with the SFCR.

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Kosher meat can also be imported in accordance with the SFCR, if the country and the establishment where the food animal was slaughtered and the meat produced has a system that is recognized as providing the same level of protection as in Canada. Currently, 43 establishments from eight countries with a recognized inspection system by the CFIA can export kosher beef to Canada.

Most provinces and territories also offer a similar flexibility for ritual slaughter while meeting animal welfare outcomes, thus offering opportunity for ongoing production and supply of kosher products within a province or a territory.

Regarding part (c), the SFCR, through the exception offered for ritual slaughter, ensure animal welfare requirements are met while providing the flexibility needed to produce kosher meat. Since 2010, the CFIA has been providing guidance to industry to help them comply with animal welfare regulatory requirements during ritual slaughter activities. In 2019, the CFIA published the “Guidelines for ritual slaughter of food animals without pre-slaughter stunning”, which are based on scientific evidence and international best practices.

The CFIA has engaged, and will continue to engage, with federally regulated licence-holders involved in kosher meat production to support them in their efforts to maintain compliance and the domestic production of kosher meat.

The CFIA always stays on the lookout for new scientific findings that can support animal welfare and listens to and engages with stakeholders on the challenges they face as well as on potential solutions.

Concerning part (d), the CFIA has engaged and will continue to engage with federally regulated licence-holders involved in kosher meat production to support them in their efforts to maintain compliance and the domestic production of kosher meat. The CFIA always stays on the lookout for new scientific findings that can support animal welfare and listens to and engages with stakeholders on the challenges they face as well as on potential solutions.

Along with CFIA, Agriculture and Agri-Food Canada is also taking steps to engage with federally and provincially regulated abattoirs, as well as the Jewish community, to gather intelligence, understand probable solutions and examine potential options that could contribute to increasing kosher supplies in Canada.

With regard to parts (e) and (f), the regulatory exception to support ritual slaughter practices by allowing animals to be ritually slaughtered without stunning is available to all licence-holders who are licensed for slaughter activities and who comply with their licence conditions.

Question No. 2458—Mr. Blake Richards:

With regard to the Department of Finance and changes in federal taxes or levies, since November 4, 2015: (a) how many federal tax or levy increases have occurred since November 2015; (b) what are the details of each increase, including the (i) date, (ii) name of the tax or levy, (iii) previous tax or levy rate, (iv) tax or levy rate following change, (v) percentage of increase; and (c) for each increase, how much additional revenue has been received by the government broken down by year since the increase?

Hon. Chrystia Freeland (Deputy Prime Minister and Minister of Finance, Lib.): Mr. Speaker, the details of tax policy changes, including their projected fiscal impact by year, are pub-

lished in the budgets and fall fiscal updates in which they were announced. These publications are available on the Department of Finance Canada website at www.canada.ca/en/department-finance/services/publications/federal-budget.html and www.canada.ca/en/department-finance/services/publications/fall-economic-statement.html. The tax annexes of these publications are comprehensive and include detailed information.

Note that annex 5 of budget 2019 includes detailed tables showing tax savings realized from tax measures undertaken from the beginning of the government’s first mandate to budget 2019 inclusive. These tables are available at the following link: www.budget.canada.ca/2019/docs/plan/anx-05-en.html#Tax-Expenditure-Review.

The government’s first tax changes were announced prior to its first budget. In the fall of 2015, the government announced a middle-class tax cut and a new top personal income tax rate of 33% for the wealthiest Canadians. The details of these changes are included in a December 7, 2015, backgrounder published on the Finance Canada website at: www.canada.ca/en/department-finance/news/2015/12/backgrounder-middle-class-tax-cut.html.

Other measures involving rate increases to taxes, duties or charges include introducing an additional tax of 1.5% of the taxable income for members of bank and life insurer groups in budget 2022; increasing the tobacco excise duty rate in budget 2021; indexing excise duty rates on alcohol products to maintain their effectiveness over time in budget 2017; and increasing the rate of the air travellers security charge in budget 2023.

The federal pollution pricing system includes a federal fuel charge that applies in certain jurisdictions. The fuel charge is revenue-neutral for the federal government, since direct proceeds are returned in the jurisdiction of origin. Fuel charge rates increase annually and are published on the Canada Revenue Agency website at www.canada.ca/en/revenue-agency/services/forms-publications/publications/fcrates/fuel-charge-rates.html#fcrt. Information on proceeds collected and returned is published in the Greenhouse Gas Pollution Pricing Act annual report.

Question No. 2460—Mr. Frank Caputo:

With regard to Correctional Services Canada and the La Macaza Institution: (a) what is the last known date the ice rink at the institution was (i) operational, (ii) skated on by inmates; and (b) what is the last known date the tennis court at the institution was (i) operational, (ii) used by inmates?

Ms. Jennifer O’Connell (Parliamentary Secretary to the Minister of Public Safety, Democratic Institutions and Intergovernmental Affairs (Cybersecurity), Lib.): Mr. Speaker, the boards related to the ice rink at La Macaza have been in place since 2002 and the rink area was used until 2017-18. Based on consultation with staff, there has been no skating for the past seven years. Tennis was last available in October 2023.

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Access to exercise, including outdoors, is part of CSC's legal requirements and contributes to offender rehabilitation while keeping our staff and sites safer. Approved activities are structured, monitored and supervised.

Question No. 2461—**Mr. Garnett Genuis:**

With regard to the authorization regime created by Bill C-41, An Act to amend the Criminal Code and to make consequential amendments to other Acts: (a) how many organizations have (i) applied for, (ii) received, authorization from the Minister of Public Safety; (b) where can organizations seeking authorization apply; (c) when will the authorization regime created under the Act be fully operational; and (d) what are the names of the organizations which have received authorization to date?

Ms. Jennifer O'Connell (Parliamentary Secretary to the Minister of Public Safety, Democratic Institutions and Inter-governmental Affairs (Cybersecurity), Lib.): Mr. Speaker, with regard to parts (a)(i) and (ii) of the question, Public Safety and partnering departments and agencies are currently working to launch the authorization regime pursuant to sections 83.031 to 83.391 of the Criminal Code. Necessary tools, such as application forms, policy guidance and instructions for the application process will be put in place to support the effective launch and administration of this initiative.

Public Safety intends to launch this regime in spring 2024; the Minister of Public Safety has not yet granted any authorizations.

To note, in addition to the authorization regime, Bill C-41 also created a humanitarian exception pursuant to subsection 83.03(4) of the Criminal Code. This exception has been in effect since royal assent in June 2023 and provides a shield from criminal liability under 83.03 to Canadian organizations and Canadians carrying out humanitarian assistance activities under the auspices of impartial humanitarian organizations in accordance with international law while using reasonable efforts to minimize any benefits to terrorist groups.

Regarding part (b), an online interface will be rolled out to the public as part of the launch of the authorization regime to receive applications and supporting documentation and where external stakeholders, for example, organizations and individuals not working in partnerships with the Government of Canada, may submit their application.

Government of Canada departments are responsible for obtaining authorizations, if needed, for any of their relevant activities, including programming. As indicated in the legislation, authorizations cover all implementing partners.

With regard to part (c), Public Safety intends to launch this regime by spring 2024 and will work towards achieving full operational capacity by late 2024.

Regarding (d), due to strict privacy considerations, as well as the personal and operational safety of applicants, the names of applicants and authorization holders will not be publicly released.

Question No. 2471—**Ms. Michelle Ferreri:**

With regard to the National Advisory Council on Early Learning and Child Care: (a) what conflicts of interest or potential conflicts of interest have been declared by each of the members of the council, broken down by member; and (b) are members of the council permitted to profit as a result of their membership on the council, including through consulting businesses or other enterprises owned by

members of the council, and, if not, what are the measures in place to ensure that members do not act in their own self-interest?

Mrs. Élisabeth Brière (Parliamentary Secretary to the Minister of Families, Children and Social Development and to the Minister of Mental Health and Addictions and Associate Minister of Health, Lib.): Mr. Speaker, with regard to part (a) of the question, members of the national advisory council on early learning and child care are subject to the ESDC policy on establishment and management of advisory bodies, which upholds the principles and values found in the Conflict of Interest Act, the values and ethics code for the public sector, the policy on people management and the directive on conflict of interest, and establishes conflict of interest compliance measures for all advisory body members. Moreover, council members are subject to the terms and conditions of their letters of agreement, affiliations and interests declarations and non-disclosure agreements.

In fulfillment of their responsibilities outlined in their letters of agreement, some council members have declared potential conflicts of interest. Following a departmental assessment of their declaration, side agreements outlining mitigation strategies were put in place to manage the risk of a conflict of interest associated with their duties performed in a capacity other than as council members.

Failure to abide by the conditions outlined in their signed side agreements may lead to members' dismissal from the council.

Affiliations and interests declarations contain personal information and cannot be disclosed without the individual consent of the council members concerned.

Regarding part (b), council members serve in a non-affiliated capacity. Members are not permitted to profit as a result of their membership on the council, including through consulting businesses or other enterprises they may own or may be affiliated with.

As per their signed letters of agreement, members shall at all times act honestly and only in the public interest. Members must not act in any way to further their or their family members', friends' or colleagues' private or personal interests, nor in the interests of any organization they may be affiliated with, including with regard to the receipt of project funding.

Furthermore, council members must not knowingly take advantage of or benefit from any information, confidential or otherwise, that is obtained in the course of undertaking their responsibilities under the agreement and as members of the council, where information is not generally available to the public. This is applicable both during the term of the member's agreement and after its expiry.

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If council members are in a situation, or anticipate that they may find themselves in a situation, where their actions could constitute an actual or perceived conflict of interest, they must inform the director general of the federal secretariat on early learning and child care at ESDC immediately in writing and complete required documentation disclosing the nature of the conflict. Members then agree to abide by any instructions provided by ESDC to address the conflict, up to and including removing themselves or being removed as a member of the council. Where a potential conflict of interest is identified, a side agreement providing an outline of the individual situation, along with a series of conditions and measures to abide by, is put in place to mitigate any risks.

ESDC regularly reminds council members of their duty to proactively disclose any and all relevant affiliations and interests that might give rise to a real, apparent or potential conflict of interest in relation to their official responsibilities as members. Written communication to this effect was shared most recently with all council members on January 18, 2024.

Question No. 2473—Ms. Kerry-Lynne D. Findlay:

With regard to government definitions: what is the government's definition of a woman?

Ms. Lisa Hepfner (Parliamentary Secretary to the Minister for Women and Gender Equality and Youth, Lib.): Mr. Speaker, a woman is an adult female human being. The Government of Canada is committed to ensuring that its policies, programs and initiatives are inclusive of all individuals, and reflect the diversity of experiences of the Canadian population.

Question No. 2477—Mr. Sameer Zuberi:

With regard to the Canada Revenue Agency (CRA) and late personal taxes, broken down by fiscal year from tax year 2016 to 2023, by province and territory, and by income tax bracket: (a) how many people had a balance owing and were unable to pay it by the payment due date; (b) what was the total amount of balance owing for people that were unable to pay by the payment due date; (c) how many for each tax year had daily interest charged on any unpaid amount owing because they were unable to pay by the payment due date; (d) how much was paid in compound daily interest by those unable to pay by the payment due date; (e) how many people filed their tax return after the due date and had a balance owing and were charged a late-filing penalty; (f) what was the total amount of late-filing penalties paid; (g) how many people made a request to the CRA to cancel or waive penalties or interest as they were unable to meet their tax obligations due to circumstances beyond their control; and (h) how many people for each tax year were granted relief for requests in (g)?

Hon. Marie-Claude Bibeau (Minister of National Revenue, Lib.): Mr. Speaker, with respect to the abovenoted question, what follows is the response from the CRA as of March 20, 2024, that is, the date of the question.

In response to parts (a) to (f), the CRA is not able to report on live accounting information, referring to a taxpayer's current outstanding balances and other related information. Live accounting information is typically accessible on a case-by-case basis by CRA agents, but it is not accessible for reporting purposes.

In response to parts (g) and (h), data relating to RC376, the taxpayer relief request form, are similarly unavailable for reporting purposes. This form may also be accessed by CRA staff on a case-by-case basis for tax administration purposes, but its fields are not captured and stored in a database that can be used for reporting.

Accordingly, the CRA is unable to respond in the manner requested.

Question No. 2482—Mr. Don Davies:

With regard to reductions in Full-time equivalent (FTE) employees, broken down by department or agency: (a) what is the total number of FTE employees the department or agency will be eliminating; (b) what is the projected cost savings by the department as a result of eliminating FTE employees; and (c) what impact assessments has the department or agency undertaken to ensure that services Canadians rely on will not be affected by the FTE employee reductions?

Mr. Anthony Housefather (Parliamentary Secretary to the President of the Treasury Board, Lib.): Mr. Speaker, information regarding the refocusing government spending initiative and planned spending reallocations that will be implemented in 2024–25, 2025–26, and 2026–27, can be found here: <https://www.canada.ca/en/treasury-board-secretariat/services/planned-government-spending/government-expenditure-plan-main-estimates/2024-25-estimates/refocusing-government-spending.html>

The refocusing government spending initiative, announced in budget 2023, was about reallocating funds and resources to the priorities that matter most to Canadians. Departments had the opportunity to identify reallocations from across their portfolios to provide flexibility to identify proposals that made the most operational sense and to ensure that important services to Canadians and other priority areas were not affected as part of the exercise.

The Treasury Board of Canada Secretariat worked with departments to ensure that their proposals were sustainable and did not create service delivery or program integrity pressures.

Proposals were also reviewed using various analytical tools, such as the quality of life index and gender-based analysis plus.

Proposals were then reviewed by Treasury Board ministers to ensure appropriate oversight and to apply a pan-government view of all proposals.

Departments and agencies are responsible for staffing decisions based on their operational needs and budgets. Any impacts on the workforce from these reallocations are expected to be conducted mainly through the redeployment of staff to high-priority activities or attrition.

To implement the second phase of refocusing government spending, budget 2024 announced that, starting on April 1, 2025, federal public service organizations will be required to cover a portion of increased operating costs through their existing resources and that the public service population is expected to decline by approximately 5,000 full-time equivalent positions over the next four years through natural attrition. Specific details on these savings will be shared when available.

*Routine Proceedings***Question No. 2484—Mr. Don Davies:**

With regard to the Canadian Broadcasting Corporation (CBC) and Société Radio-Canada (SRC): how many (i) non-disclosure agreements, (ii) non-disparagement agreements, and (iii) confidentiality agreements have the CBC and the SRC signed with employees and contractors for each year in the last 10 years?

Mr. Taleeb Noormohamed (Parliamentary Secretary to the Minister of Canadian Heritage, Lib.): Mr. Speaker, as part of its business and employment activities, CBC/Radio-Canada concludes a wide variety of contracts and agreements, many of which could include non-disclosure or confidentiality provisions. CBC/Radio-Canada does not track the specific number of those references. To gather the information requested, an extensive manual search and review of each contract concluded by the corporation would be required.

Question No. 2485—Mr. Dan Mazier:

With regard to Parks Canada's Detailed Impact Assessment of the 'Management of Zebra Mussels in Clear Lake in Riding Mountain National Park' that was opened for public comment in February 2024: (a) who did Parks Canada directly inform of the Detailed Impact Assessment, and when were each of them notified; (b) for each notice in (a), what is the name and title of the Parks Canada official who provided the notice and what method of communication was used; (c) what are the details of how Parks Canada informed the public of the Detailed Impact Assessment prior to extending the public comment period, including the (i) date of public notice, (ii) method of communication used; (d) what elected officials were informed by Parks Canada of the public comment period for the Detailed Impact Assessment prior to March 10, 2024, if any; (e) were any of the elected officials in (d) a (i) mayor, (ii) reeve, (iii) councillor, (iv) member of the Legislative Assembly, (v) member of Parliament, and, if so, what was their name and title; (f) how many public comments for the Detailed Impact Assessment did Parks Canada receive before the original March 10, 2024, deadline; (g) why was the public comment for the Detailed Impact Assessment period extended from March 10, 2024 to March 29, 2024; and (h) what First Nations were informed of the Detailed Impact Assessment prior to March 10, 2024, and when was each informed?

Hon. Steven Guilbeault (Minister of Environment and Climate Change, Lib.): Mr. Speaker, in response to (a), Parks Canada informed the following groups of the opportunity to publicly comment on the detailed impact assessment: Wasagaming Chamber of Commerce; Clear Lake Country; the office of the member of Parliament Dan Mazier; Riding Mountain Biosphere Reserve, Valerie Pankratz; Sandy Lake water protection committee, Victor Kowall and Daryl Kines; rural Municipality of Harrison Park, Ian Drul; the Province of Manitoba aquatic invasive species unit, Jeff Long and Rob Bajno; Erickson and District Chamber of Commerce, Eric Bjornson; Reeves and mayors of western Manitoba communities. Notifications were provided in February and March 2024.

In response to (b), Dameon Wall, external relations manager, provided information via phone calls or emails on behalf of Parks Canada.

In response to (c), Parks Canada posted notification of the detailed impact assessment to the Canadian Impact Assessment Registry on February 9, 2024. The draft detailed impact assessment document was available on March 1 and was emailed to all who had requested it by March 3. All detailed impact assessments and basic impact assessments are posted on the registry as regular practice, and it has a searchable map at <https://iaac-aeic.gc.ca/050/evaluations/exploration?search=&showMap=true>. With respect to (i), date of public notice is not applicable. With respect to (ii), notification of the upcoming deadline for public comment was provided via the Parks Canada Facebook page on March 18, and to media and stakeholders via email distribution list on March 20.

In response to (d), elected officials informed by Parks Canada were Ian Drul, reeve of the Rural Municipality of Harrison Park; and the office of member of Parliament Dan Mazier.

In response to (e), with respect to (i), the answer is no. With respect to (ii), the answer is yes: Ian Drul, reeve of the rural Municipality of Harrison Park. With respect to (iii), the answer is no. With respect to (iv), the answer is no. With respect to (v), the answer is yes: the office of the member of Parliament Dan Mazier.

In response to (f), Parks Canada received three public comments for the detailed impact assessment before March 10, 2024.

In response to (g), as there is strong public interest in Parks Canada's plans to use an approved pesticide, Parks Canada extended the public comment period to welcome input from Canadians about the potential impact of the proposed use on the environment.

In response to (h), the draft detailed impact assessment document was shared with the following first nations on March 1, 2024: Keeseekoowenin Ojibway First Nation, Ebb and Flow First Nation, Sandy Bay First Nation, Rolling River First Nation, Gambler First Nation, Waywayseecappo First Nation, and Tootinaowaziibeeng First Nation.

* * *

[English]

QUESTIONS PASSED AS ORDERS FOR RETURNS

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, if the government's responses to Question Nos. 2459, 2462 to 2470, 2472, 2474 to 2476, 2478 to 2481, 2483 and 2486 could be made orders for return, these returns would be tabled in an electronic format immediately.

The Deputy Speaker: Is that agreed?

Some hon. members: Agreed.

[Text]

Question No. 2459—Mrs. Kelly Block:

With regard to costs related to the government's output-based pricing system (OBPS) for industrial facilities: (a) what have been the costs to implement and administer the OBPS broken down by year since 2018; (b) what have been the costs related to OBPS compliance verification; (c) how many employees or full-time equivalents are currently assigned to positions related to the OBPS; and (d) how many employees or full-time equivalents are assigned to OBPS compliance verification?

(Return tabled)

*Routine Proceedings***Question No. 2462—Mrs. Cathay Wagantall:**

With regard to the Canadian Institutes of Health Research (CIHR) and its funding of the study titled "Impact of population mixing between vaccinated and unvaccinated subpopulations on infectious disease dynamics: implications for SARS-CoV-2 transmission": (a) to what funding opportunity stream, and what application criteria, did Fisman et al. submit their grant application and receive funding approval; (b) when CIHR conducted a peer review of this application prior to funding, (i) which researchers were assigned to conduct this review, (ii) what were their qualifications, (iii) what were their conclusions, (iv) what were their conflicts of interest; (c) how much funding did CIHR grant this study project; (d) were there any other funding agencies or entities supporting this study; (e) if the answer to (d) is affirmative, who were the other funding agencies or entities; (f) what was the expected timeline for study completion at the time of funding; (g) what conflicts of interest were listed for the grant applicants at the time of funding; (h) was there any federal government involvement with, or communication regarding, any component of the application review process, research study, or media outreach; (i) if the answer to (h) is affirmative, which government bodies were involved; (j) what are the details of the media communications once the study was completed, broken down by (i) subject, (ii) type of communication, (iii) who directed the communication, (iv) date of communication; (k) after the study was published, did CIHR receive any negative feedback; (l) if the answer to (k) is affirmative, (i) what was that feedback, (ii) how was it addressed; (m) what is CIHR's average timeline from the day a grant application is received to when the grant is approved; and (n) what was the timeline from the day the grant application was received to when the funding approval decision was made for the above-captioned study?

(Return tabled)

Question No. 2463—Mr. Andrew Scheer:

With regard to Farm Credit Canada (FCC): (a) what is the current number of employees or full-time equivalents (FTEs) at FCC; (b) of the current employees or FTEs, how many work out of (i) Regina, (ii) the National Capital Region, (iii) FCC offices in other cities, broken down by location, (iv) remotely; (c) on January 1, 2016, how many employees or FTEs worked out of (i) Regina, (ii) the National Capital Region, (iii) FCC offices in other cities, broken down by location, (vi) remotely; and (d) what is the breakdown of (b) and (c) by rank or classification level (executive, manager, assistant, etc.)?

(Return tabled)

Question No. 2464—Mr. Pat Kelly:

With regard to provisions of the Criminal Code concerning motor vehicle theft: (a) how many Government of Canada-owned vehicles were stolen between January 2016 and February 2024 inclusively; (b) how many of the vehicles in (a) have been recovered; (c) how many of the vehicles in (a) have been used in the commission of other crimes; (d) how many of the vehicles in (a) departed Canada; (e) how many of the vehicles in (a) have been stolen more than once; (f) what is the provincial and territorial breakdown for the location in which the vehicles in (a) were stolen for each year; (g) of the vehicles in (a) stolen in Ontario, how many were stolen in (i) Ottawa or the National Capital Region, (ii) the Greater Toronto and Hamilton Area, (iii) the rest of the province; (h) of the vehicles in (a) stolen in Quebec, how many were stolen in (i) Gatineau or the National Capital Region, (ii) Montréal, (iii) Quebec City, (iv) the rest of the province; and (i) how many times has the official vehicle of the Minister of Justice been stolen?

(Return tabled)

Question No. 2465—Mr. Pat Kelly:

With regard to the Department of National Defence's (DND) "2022-2023 Annual Report to Parliament - Administration of the Privacy Act", in particular "Figure 7: Number of active requests (as of 31 March 2023)", regarding the age of outstanding access to information and privacy requests filed with the DND, between January 2016 and February 2024 inclusively: (a) how many privacy requests were filed in each year; (b) how many of those requests filed in 2018 or earlier remain open; (c) how many of those requests filed in 2019 remain open; and (d) how many of those requests in (b) were filed by (i) serving members, (ii) veterans, (iii) misconduct complainants?

(Return tabled)

Question No. 2466—Mr. Pat Kelly:

With regard to personnel levels in the Department of National Defence and the Canadian Armed Forces, for each year between January 2015 and January 2024, broken down by branch and occupation: (a) what were the target or desired person-

nel levels in each occupation; (b) what were the actual personnel levels in each occupation; (c) how many applicants expressed a desire to serve in each occupation; (d) how many applicants were admitted to serve in each occupation; and (e) how many civilian, full-time equivalents, were employed in the Department of National Defence?

(Return tabled)

Question No. 2467—Mr. Kevin Waugh:

With regard to the electoral district of Saskatoon-Grasswood: what are the details of all the grants, contributions, loans and any other payments from Government of Canada departments, agencies and Crown corporations, but excluding the Canada Revenue Agency, to all other levels of government within and outside of Canada, First Nations, corporations, non-governmental organizations and charities for the fiscal years 2015-16 to the current fiscal year, inclusively?

(Return tabled)

Question No. 2468—Mr. Adam Chambers:

With regard to correspondence, written or electronic, received by the Canada Revenue Agency (CRA) from 2016 to 2024, broken down by year: (a) what was the total amount of correspondence received by the CRA; (b) what was the average length in days for a complete response, excluding the acknowledgement of receipt reply; (c) how many and what percentages of final responses took (i) over six months, (ii) over 12 months, (iii) over 18 months, (iv) over 24 months; (d) how many pieces of correspondence have yet to receive a final response and what is the oldest piece of correspondence that has yet to receive a final response; (e) what is the total yearly budget for all CRA correspondence operations; and (f) what is the total number of employees assigned to CRA correspondence operations?

(Return tabled)

Question No. 2469—Mr. Adam Chambers:

With regard to the Canada Revenue Agency (CRA) and the objection process, broken down by fiscal year from 2015-16 to 2023-24: (a) what was, or is, the total budget for all CRA objection-related operations; (b) what was, or is, the total employee count for all CRA objection-related operations; (c) how many taxpayers filed objections; (d) what was the total of outstanding federal tax dollars in dispute; (e) how many days, on average, did the CRA take to assign objections from the time they were filed by the taxpayers for (i) low-complexity objections, (ii) medium-complexity objections, (iii) high-complexity objections, (iv) complexity not assigned; (f) how many days, on average, did the CRA take to resolve objections from the time they were filed by the taxpayers for (i) low-complexity objections, (ii) medium-complexity objections, (iii) high-complexity objections, (iv) complexity not assigned; (g) what was the CRA's inventory of outstanding income tax objections for (i) new objections, (ii) outstanding objections, (iii) resolved objections; (h) with respect to the data and figures included in "Appendix-Outcomes of objection decisions for the 2011-12 to 2015-16 fiscal years" in the 2016 Fall Reports of the Auditor General of Canada - Report 2-Income Tax Objections-Canada Revenue Agency, what are the same data and figures for provide each of the fiscal years from 2015-16 to 2023-24; and (i) since the CRA began measuring and reporting service standards related to the objection process, how many and which service standards have not been met, broken down by fiscal year and specific service standard?

(Return tabled)

Question No. 2470—Mr. Adam Chambers:

With regard to taxation, for the last tax year for which statistics are available: for each federal tax, (i) what is the name of the tax, (ii) how much did it cost to administer, (iii) how many employees or full-time equivalents were assigned to administer the tax, (iv) how much revenue was received from the tax?

(Return tabled)

*Routine Proceedings***Question No. 2472—Ms. Michelle Ferreri:**

With regard to the Canada Dental Benefit (CDB): (a) what is the government's estimate of the number of dentists currently operating in Canada; (b) of the dentists in (a), how many have received payments for services provided under the CDB; and (c) what is the breakdown of (a) and (b) by province or territory?

(Return tabled)

Question No. 2474—Ms. Kerry-Lynne D. Findlay:

With regard to contracts entered into by the government relating to diversity, equity and inclusion services, since January 1, 2019, and broken down by department or agency: (a) what is the total value of such contracts, broken down by year and by type of service provided (policy development, training, guest speaker, fee, etc.); and (b) what are the details of each such contract, including, for each, the (i) vendor, (ii) date, (iii) amount or value, (iv) description of goods or services, (v) manner in which the contract was awarded (sole-sourced versus competitive bid)?

(Return tabled)

Question No. 2475—Mrs. Laila Goodridge:

With regard to Global Affairs Canada's (GAC) reduced operating budgets from 2024 to 2027 as per the most recent Main Estimates: (a) what is the detailed breakdown of budget reductions per branch and office in GAC, broken down by (i) year, (ii) expected budget per year after reduction, (iii) reasons for why the budgets are being reduced, (iv) title of employee managing the branch or office; (b) what is the budget reduction for every embassy, consulate, and representative office from 2024 to 2027; and (c) which of the embassies, consulates, and offices in (b) are scheduled to be closed and by what date?

(Return tabled)

Question No. 2476—Mr. Marty Morantz:

With regard to the federal government's commitment in budget 2022 to invest \$76 million to strengthen Canada's capacity to implement sanctions: (a) how much of the \$76 million has been invested to date; (b) of the funds spent to date, what is the breakdown by (i) department that was allocated funding, (ii) how the funds were spent, including what specific investments were made and how much spent on each item; (c) which directors general and assistant deputy ministers were tasked with overseeing the program implementation; and (d) what are the key progress indicators used to determine the success of the program, and what are the results of the indicators?

(Return tabled)

Question No. 2478—Mr. Frank Caputo:

With regard to Correctional Service Canada (CSC), broken down by year since 2019: (a) how many assaults have taken place in CSC facilities, in total, and broken down by facility, year, and by type of incident (inmate assaulting inmate, inmate assaulting correctional officer, inmate assaulting staff and inmate assaulting contractor, etc.); (b) what is the breakdown of each part of (a) by the seriousness of the resulting incident (i.e. no injury, minor injury, serious injury, death etc.); (c) following the events in (a), how many times was (i) the inmate who committed the assault moved to a different CSC facility, (ii) the inmate who was assaulted moved to a different CSC facility, (iii) the inmate who committed the assault moved to a higher security; (d) what were the nature and types of espoused used in assaults contained in (a); and (e) of the incidents in (a), how many have resulted in punitive measures against the perpetrator in total and broken down by type of punitive measure?

(Return tabled)

Question No. 2479—Mr. Alex Ruff:

With regard to the mandatory electronic filing requirements for the Goods and services tax (GST) and harmonized sales tax (HST): (a) did the government consult with any religious or cultural communities such as the Amish, Mennonite and Hutterite communities that do not have access or utilize the internet before making paper filing less accessible, and, if so, what are the details, including the (i) dates, (ii) locations, (iii) types of consultations that were conducted; (b) were seniors and Canadians without reliable internet access consulted on the recent changes to electronic filing, and, if so, what are the details, including the (i) dates, (ii) locations, (iii) types of consultations that were conducted; (c) what are the standards or criteria for attaining an exemption from the electronic filing requirement from Canada Revenue Agency (CRA); (d) what are the estimated number of exemption requests that CRA is anticipating receiving for this year; (e) how much are the financial penalties for a tax filer who is required to file their HST or GST returns online but continues to file it on paper; and (f) what is the projected revenue that CRA will

receive as a result of the penalties in (e) and how will that money be allocated or spent?

(Return tabled)

Question No. 2480—Mr. Alex Ruff:

With regard to the federal government's implementation of new bare trust filing requirements: (a) what is the Canada Revenue Agency's (CRA) formal definition of a bare trust; (b) what guidance regarding formal and informal arrangements that qualify as a bare trust that requires filing for tax purposes has the CRA provided; (c) how many complaints or requests for information or clarity has the minister and the CRA received to date broken down by (i) number of requests, (ii) medium of request – letter, phone call, webform, (iii) month of inquiry; (d) do parents or children co-signing a mortgage for property qualify as a bare trust requiring a return; (e) does joint ownership of a bank account, investment or security with a value of over \$50,000 during the reporting year qualify as a bare trust requiring a return; (f) what are the CRA's plans to ensure new requirements regarding bare trusts are communicated clearly and available to all Canadians, including those without access to the internet; and (g) what conditions would exclude a trust from the T3 return requirement?

(Return tabled)

Question No. 2481—Mr. Dan Mazier:

With regard to the government's participation in the UN Climate Change Conference, the 28th Conference of the Parties (COP28) in Dubai: (a) what are the total expenditures incurred by the government to date related to the conference, broken down by type of expense; (b) what was the total number of delegates that the Government of Canada paid for, including the (i) official title and department or organization of each individual, (ii) total expenditures incurred for each entity in (b)(i), broken down by type of expense; (c) for the delegations accommodations in Dubai, (i) what hotels were used, (ii) how much was spent at each hotel, (iii) how many rooms were rented at each hotel and for how many nights, (iv) what were the room rates paid at each hotel and the number of rooms rented at each rate, (v) who stayed at each of the rooms in (c)(iv) broken down by room rate; (d) what were the details of the Minister of Environment and Climate Change's accommodation expenditures, including the (i) daily rate, (ii) accommodation venue; (e) what are the details of the total hospitality expenditures broken down by (i) date, (ii) amount, (iii) location, (iv) name of any commercial establishment or vendor involved in the hospitality activity, (v) number of attendees, (vi) description of event, (vii) description of goods and services; (f) what are the details of all ground transportation expenditures, including, for each, the (i) date, (ii) amount, (iii) vendor, (iv) origin, (v) destination, (vi) make and model of each vehicle used, (vii) type of vehicle (gas, electric, hybrid), (viii) whether a chauffeur or driver was included, (ix) names and titles of passengers or individuals who incurred the expense; and (g) what are the details of all expenditures on gifts related to the conference, including, for each, the (i) value, (ii) description, (iii) vendor from whom it was purchased, (iv) who was the recipient?

(Return tabled)

Question No. 2483—Mr. Don Davies:

With regard to the Minister of Health's mandate letter and the marketing of food and beverages to children: (a) what are the details of all consultations held since January 1, 2023, including the (i) name of organization consulted, (ii) date of consultation, (iii) format of consultation; and (b) is the government on schedule to submit draft regulations in the Canada Gazette before June 1, 2024?

(Return tabled)

*Government Orders***Question No. 2486—Mr. Clifford Small:**

With regard to striped bass (*Morone saxatilis*) science at the Department of Fisheries and Oceans (DFO): (a) what was the biomass of striped bass, broken down by year since 2010, with the upper and lower reference points, for the combined waters of the St. Lawrence River and all Atlantic Canadian waters; (b) what is the biomass in the St. Lawrence River and its tributaries; (c) what is the biomass in the Miramichi River; (d) what is the biomass in Area 4R and 2J; (e) what framework is in place to support a balance of the striped bass population and rest of the ecosystem; (f) what was the total catch of striped bass per area in Atlantic Canada and Quebec broken down by year since 2010 and what was the total allowable catch; (g) what is the biomass projected to be in each of the next five years and what are the upper and lower reference points, broken down by the St. Lawrence River and estuary, Miramichi River and all Atlantic Canadian waters; (h) what has the DFO's science budget amount been, that has been dedicated to striped bass since 2019 per year; (i) what is the known range of the migration of striped bass and can the DFO display where they are throughout the year on a map with their spawning zones and rivers; (j) why has the DFO not removed the maximum length restriction of 65 cm on striped bass per Recommendation 4 from the 2019 Standing Committee on Fisheries and Oceans's report entitled "Striped bass in the southern Gulf of St. Lawrence and Miramichi River: striking a delicate balance"; (k) have scientific studies been done in the Gulf of the St. Lawrence on striped bass since 2019, and, if so, what are the details, including results; (l) what ectotherm animals feed upon Atlantic salmon (*Salmo salar*); (m) what is the "at sea" diet of striped bass, broken down by (i) area, (ii) percentage of species consumed in overall diet; and (n) what is the "in river" diet of striped bass, broken down by (i) river studied, (ii) percentage of diet by species?

(Return tabled)

[*English*]

Mr. Kevin Lamoureux: Mr. Speaker, I ask that all remaining questions be allowed to stand.

The Deputy Speaker: Is that agreed?

Some hon. members: Agreed.

GOVERNMENT ORDERS

[*Translation*]

PHARMACARE ACT

BILL C-64—TIME ALLOCATION MOTION

Hon. Steven MacKinnon (Leader of the Government in the House of Commons, Lib.) moved:

[*English*]

That in relation to Bill C-64, An Act respecting pharmacare, not more than five further hours shall be allotted to the consideration at the second reading stage of the bill; and

That, at the expiry of the five hours provided for consideration at second reading stage of the said bill, any proceedings before the House shall be interrupted, if required for the purpose of this order, and, in turn, every question necessary for the disposal of the said stage of the bill shall be put forthwith and successively, without further debate or amendment.

The Deputy Speaker: Pursuant to Standing Order 67.1 there will now be a 30-minute question period. I will ask hon. members who wish to ask questions to rise or use the "raise hand" function so that the Chair can have some idea of the number of members who wish to participate in the question period.

On a point of order, the hon. member for Mégantic—L'Érable.

[*Translation*]

Mr. Luc Berthold: Mr. Speaker, while you were reading the motion, I was unfortunately distracted by the Liberal government

House leader when you were specifying the number of hours allotted for debate on this issue.

Could you please remind the House of the number of hours specified in this time allocation motion to discuss the bill? This will illustrate the lengths to which the government is going to prevent us from talking about it any longer and debating it as much we would have liked.

The Deputy Speaker: The time allotted is five hours.

The hon. member for New Westminster.

[*English*]

Mr. Peter Julian (New Westminster—Burnaby, NDP): Mr. Speaker, the member for Burnaby South, the leader of the NDP, was the leader in actually bringing the bill to bear, with pharmacare being so vitally important for so many Canadians. He basically said, last week, that the Conservatives had up until noon today to remove their blocking amendment.

The Conservatives put an amendment forward that would block pharmacare. What that means for each and every Conservative MP is that 17,000 people, on average, who depend on vital diabetes medication would still have to pay for it out of pocket, in many cases \$1,000 a month. That is an unbelievable charge on their ability to put food on the table or keep a roof over their head, and the Conservatives did not care. The reality is that 25,000 women who are looking to take care of their reproductive health in terms of birth control or contraception are also being denied by the Conservatives' blocking this important legislation.

My question very simply—

• (1535)

[*Translation*]

The Deputy Speaker: The hon. member for Mégantic—L'Érable is rising on a point of order.

Mr. Luc Berthold: Mr. Speaker, has the question and answer period on the time allocation motion started yet?

The Deputy Speaker: Yes, the hon. member for New Westminster—Burnaby has started asking his question.

The hon. member for New Westminster—Burnaby may continue.

[*English*]

Mr. Peter Julian: Mr. Speaker, the Conservatives should have stood up and should have the guts to actually defend the unbelievably negative things that they have tried to do around pharmacare.

My question to my colleague is very simple. When 17,000 of their constituents need access to diabetes medication and 25,000 need access to their reproductive health prescriptions, which are part of this bill, why are Conservatives blocking the ability of Canadians to access these medications?

Government Orders

Hon. Mark Holland (Minister of Health, Lib.): Mr. Speaker, I thank the member for his work on this legislation. Specifically, I want to take an opportunity to thank the member for Vancouver Kingsway for his work as well.

Canadians expect parliamentarians to work together to get results, to get the services and the care that they need. It is fine that the Conservatives are going to vote against dental care or vote against pharmacare, which means they are voting against medication for diabetes and against women getting access to the contraceptives they need. It is bad enough that they would vote against it, but to block it actively, to block the elected will of the House to be able to get care to people, is extremely disturbing.

I will talk about dental care. It was really revealing to talk to dentists across the country who had been filled with misinformation, and who were shocked by how easy it is to use the dental care plan. The reason that confusion, in many cases, exists is because of the confusion deliberately being pumped into it.

Again, I would say this to the Conservatives: It is fine that they do not want people to get diabetes medication, they do not want seniors to get dental care and they do not want people to be able to get access to the contraceptives that they need. That is one thing, but they should allow the House to do its work, allow us to move the legislation forward and allow us to make sure that those people who need care get care.

[*Translation*]

Mr. Yves Perron (Berthier—Maskinongé, BQ): Mr. Speaker, I was listening to the minister when he said to allow this House to do its work. Allowing the House do its work also means not limiting debate. I know the minister to be a reasonable man. Is he not embarrassed to be limiting debate?

Bill C-64 includes some extremely important powers. There is a danger. No one will be surprised to learn that the Bloc Québécois is against encroachment, against jurisdictional overlap, against what will likely be a waste of public funds on administrative redundancy. I think it is important to take the time to debate this properly.

Is the minister not embarrassed to be limiting the time for debate?

Hon. Mark Holland: Mr. Speaker, there will be time for the committee to conduct a study. After committee, there is still going to be time for the report stage and third reading. After that, there will be time in the Senate. It is important to keep the debate going, one step at a time. We need to make sure we can have a conversation with the Quebec government.

I had a good conversation with Minister Dubé. Quebec is ready to move forward. If the House takes too long, it affects people who really need medication, whether it is diabetes medication or contraceptives.

Yes, it is important to debate. However, there is plenty of time for debate in committee and during the rest of the House process. It is time to get on with it and move forward.

[*English*]

Mr. Mark Gerretsen (Kingston and the Islands, Lib.): Mr. Speaker, my question is about pharmacare, in particular, the contraceptive angle of this and the supports it is going to provide.

At the heart of this is really a woman's right to choose. I found it very alarming that, on Friday, the member for Leeds—Grenville—Thousand Islands and Rideau Lakes stood up in the House and said, “A common-sense Conservative government would use the notwithstanding clause only on matters of criminal justice.”

It was in the nineties when it was actually made a crime to perform an abortion. What we have seen is that the Supreme Court, using those charters rights, overturned that law. We now have Conservative members saying that, in terms of criminal justice, which that law was, Conservatives would consider using the notwithstanding clause. In theory, Conservatives could bring back a similar law to that which was in the nineties, using the notwithstanding clause to make sure that it stuck, something that the Supreme Court would not be able to overturn.

I find it alarming that, only a year after the United States reintroduced legislation regarding a woman's right to choose and preventing it, Conservatives are now toying with and basically laying out the framework for how they would restrict those rights in the future. I am wondering if the Minister of Health would like to comment on that.

● (1540)

Hon. Mark Holland: Mr. Speaker, I think it really is reprehensible to see the backward movement we are seeing over women's reproductive health and rights, where their autonomy over their own bodies is being called into question.

Let me make it very clear, as Minister of Health, that we will do everything in our power to make sure that women have full power and autonomy over their bodies. That is a fundamental freedom. That includes their reproductive futures.

In many of these instances is an inability to have real conversations about sex and about whether a woman should have the autonomy to make a choice about the way in which she makes decisions with her body. It is absolutely unacceptable in this country. When we take something like contraceptives, such as a condom, that have a failure rate of about 9%, and an IUD, which has a failure rate of 0.2%, how could people, first of all, have the position that they are going to tell a woman what she does with her body and then, secondly, try to block her ability to get reproductive technologies so that she does not wind up with an unwanted pregnancy?

Those things, to me, seem to be diametrically opposed. If one was opposed to abortion, if one was opposed to a woman being able to make that choice over her body, it would seem to me that one would at least stand up and support her ability to get reproductive medicine.

Government Orders

For me, it is extremely disturbing that this is any kind of debate in this country. Everywhere in this country, every woman should be told that she has autonomy over her body and that she has access to the medication she needs. That is fundamentally what this bill is about, in part. I am sure we will get an opportunity to talk about diabetes as well.

Ms. Elizabeth May (Saanich—Gulf Islands, GP): Mr. Speaker, the debate right now is on time allocation on Bill C-64, and I would put it to the Minister of Health that I would love for us to be having a debate on an actual proposal for pharmacare.

It has been since June 2019 that the former Ontario health minister, Dr. Eric Hoskins, gave the government and this country clear direction that we need a national pharmacare program. We are the only country in the world with a national health care program that does not automatically include the provision of needed prescription drugs. We know from the Hoskins report that, properly implemented, a full national pharmacare program will save this country \$5 billion a year at least.

However, the bill is picking out only two things, which is what is so strange about this bill and why I object to the debate being closed before we can actually discuss it. Why are we only talking about reproductive health care and diabetes medication? What that may end up doing is giving those opposed to pharmacare evidence that it costs more than it is worth, when we need to prove to everyone concerned that national pharmacare will save our health care system money and ensure Canadians get the health care they need.

Hon. Mark Holland: Mr. Speaker, this is a concrete proposal to move pharmacare forward in this country. The drugs are two classes of drugs. They represent more than 80 different medical drugs that deal specifically with diabetes and contraceptives. It is part of a broader suite of actions that we are taking, such as, for example, drugs for rare diseases. I am currently having conversations with every province and territory about how we can take action on drugs for rare diseases so that folks with rare diseases can get access to the medications they need.

It is part of what we have done on bulk purchasing to realize \$300 million in savings for Canadians across the country. It also builds on the work that we are doing with a pilot in P.E.I., where we have been able to get copays down to five dollars there, saving seniors hundreds and hundreds of dollars in P.E.I.

Action is taken one step at a time by demonstrating in evidence exactly what is going to be saved and exactly how this should function. As an example, in British Columbia, when it comes to contraceptives, it already shows that the province is saving more than it costs to run the program. I suspect we will also see that in diabetes. Canadians, rightfully, want to see this in evidence. They want to see these things live out there, demonstrate how they work in each example and then build on that successively.

Our health care system was based on an iterative process by making sure that the steps we take are prudent, smart and fiscally responsible, and that is the way that we need to proceed with pharmacare as well.

• (1545)

Mr. Branden Leslie (Portage—Lisgar, CPC): Mr. Speaker, I view this legislation not as a pharmacare plan but a spending plan and what will be another empty broken promise, just like the carbon tax was going to be revenue-neutral and just like housing was going to become more affordable under the current government. Frankly, I do not see enough trust from Canadians to see another project fail to be delivered properly.

I have been getting a lot of questions from constituents regarding the proposed plan. People are asking me if they should cancel their existing insurance plans because, like many others, the majority of Canadians are already covered. They are worried there is going to be a reduction in availability of coverage under the single-payer system that is being partially promised, partially proposed and, ultimately, I expect, poorly delivered.

Perhaps the minister could clarify, for the hundreds and thousands and millions of people across Canada who are wondering if they are in limbo, if they are going to lose the quality of the coverage they have through their private insurance and whether they should cancel it now and await further clarification from the government, what eventually may be covered under the pharmacare plan.

Hon. Mark Holland: Mr. Speaker, the answer, of course, is no, and that point is not grounded in any kind of reality. There is no plan. I used to be the head of Heart and Stroke, and we would negotiate benefit agreements. They cannot say, "Oh, there are two drugs and now people are going to cancel the rest of their medical coverage." That is a preposterous notion that is not rooted in anything resembling reality. What really would happen is that people would have choice. What does that mean? Let me be very clear, and put the question back to the member.

For somebody in the member's riding who does not have the money for contraception, why should they be limited to the choice they can afford, which has a 9% failure rate, when there is something available to them that has a 0.2% failure rate? Why should somebody who has less money not have access to the contraceptive medicine they need to have choice and autonomy over their own body? I can tell the member that I have had direct conversations with Minister Asagwara. We are ready to work together to deliver this in the same way that we are working together to create dental care.

It is fine if the Conservatives want to vote against it. If they do not think those people should have access to contraceptive drugs, then that is fair. They are allowed to have that position and to go and defend it. However, they should not try, with misinformation and blocking in the House, to sabotage the ability of somebody to get dental care or contraceptives. Let us have a debate rooted in reality. The reality is that there is an enormous need. This bill would make sure that everybody would get exactly what they need and would not be left in a position without the critical medication that they require.

Government Orders

Ms. Leah Gazan (Winnipeg Centre, NDP): Mr. Speaker, I find it really funny that the Conservatives are talking about health care plans. Clearly, their lives have been marred with privilege, especially because every member in the House has a pharmacare plan that is paid for by taxpayer dollars, including the member for Carleton, who has had this for over 20 years.

In saying that, I have a feeling about why the Conservatives are stalling this, and it is because something is going to freeze over before they support the reproductive rights of women and, certainly, trans folks. The opinion held by the Conservative Party on the bodily autonomy of trans folk and women has been demonstrated through things such as voting for Bill C-311, which was a piece of backdoor anti-abortion legislation. It was called out by anti-violence groups, and it was supported by the Conservatives.

Let us not be too cozy with the Liberals either. Out east in New Brunswick, people cannot access an abortion. I have spoken to the minister about it, and the fact is that access to safe trauma-informed abortion care out east is not a reality. Although the Liberals wipe their hands of it as being provincial jurisdiction, I would like to remind them that they do provide federal transfer payments, and they are obliged to uphold the Canada Health Act. That is not happening in parts of the country.

I am concerned about the Conservatives here. I know there was a whole revolution around women getting menstrual hygiene products. Now, there is a whole revolution around women or folks who use contraception getting contraception because not everybody has a health care plan and not everybody has access to safe trauma-informed abortion care. I wonder if my hon. colleague would speak to what his government is planning to do to make sure that folks who need a safe trauma-informed abortion can have it and what he is willing to do to make sure that this pharmacare plan gets passed.

• (1550)

Hon. Mark Holland: Mr. Speaker, I recognize and appreciate the work of the New Democratic Party in this bill. It was a good example of members coming across party lines to find a way to work toward solutions.

In the first order, every member should be very clear about where they stand with respect to reproductive medicine for women. It is a pretty basic question, and I hope every member would answer it in the affirmative. Should women be able to access the reproductive medicine that they need to have control and autonomy over their own bodies? I hope every member would say yes. I am concerned that some might not agree with that statement.

In the second order, in this country, people can have an opinion on whether a woman should have an abortion or not, but they do not have the right to tell a woman what to do with her body. It is that simple. The member is quite right that the ability of every woman everywhere in the country to have clear, definitive and unquestionable choice over who she is as a person and her sexual and reproductive health is essential. Anywhere that a woman is blocked from that, then we have a collective demand for action. Yes, there are provincial and territorial considerations in that, but I absolutely and firmly agree with that, as a matter of principle. I look forward to working with the member to make sure that we live in the type of country that she and I both want to have, where every woman has

full control over her body and over her sexual and reproductive choices.

[*Translation*]

Mrs. Claude DeBellefeuille (Salaberry—Suroît, BQ): Mr. Speaker, I agree with the minister when he says that everyone who needs it should have drug coverage. The Bloc Québécois wholeheartedly agrees with him.

That being said, what is the best authority, the best government to manage a pharmacare program? The Bloc Québécois is convinced that it is the Government of Quebec and the provincial governments that should fulfill that responsibility for their citizens.

I know that the minister wants to impose a gag order because he is worried that the Conservatives will delay the debate to prevent the bill from being passed. On the other hand, the Bloc Québécois still needs to debate this bill, because it creates an agency that will manage a Canadian pharmacare program.

It is complicated. I am wondering how things will be done in Quebec because we already have a hybrid public-private program managed by the Régie de l'assurance-maladie du Québec.

That means that we have a lot of questions and we need to hear from witnesses. I understand that the minister wants to move fast on this and that he is concerned that the Conservatives will filibuster, but we still need to debate this matter and study it further. We need to hear from witnesses to determine whether this bill will work for Quebec and the provinces. Is it the best solution to provide good coverage for all Quebecers and all Canadians? I have to wonder.

Hon. Mark Holland: Mr. Speaker, for the bilateral agreements with every province and territory, there is truly a spirit of collaboration. The focus is not on jurisdictions, but on the best way to work together, to ensure that there are nationwide indicators for tracking progress in the data for every province and territory.

As we did for oral health care, we are once again going to work closely with the Province of Quebec, Minister Dubé and the entire Government of Quebec to ensure that the program works properly. There are going to be debates in committee and at third reading stage. After that, it will go to the Senate, and then to the provinces and Quebec. I am very open to the idea of working with the members across the way because we have a common objective: to ensure that everyone receives services and ensure that the jurisdictions are respected. The goal is to work collaboratively to find a solution together.

Government Orders

• (1555)

[English]

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Mr. Speaker, health care is such a critical issue. It always has been in my 30-plus years as a parliamentarian. We talk a lot about health care. We have achieved health care accords or agreements with different provinces and territories. We made a \$198-billion commitment toward health care. That is talking about future generations.

For many years, I have been a very strong advocate for a pharmacare program, and my question to the minister is this: As I see it, a pharmacare program is a huge step forward toward the type of health care system Canadians want to see here in Canada, and I am wondering if he could provide his thoughts on how the pharmacare legislation we are proposing today would complement our health care system into the future.

Hon. Mark Holland: Mr. Speaker, each of these actions does not stand on its own. They are part of an overall plan to make sure that we have the best health care system in the world. We cannot have the best health care system in the world, just as a point of fact, if one-third of Canadians do not have access to dental care. We cannot have the best health care system in the world if women do not have access to the contraception they need or if we have diabetes patients who do not have access to their medication. As an example, Sarah, in an Ottawa clinic, was talking about people having to reuse syringes because they do not have the money to get new devices.

Also, we think of the school food program, about kids getting the healthy food and nutrition they need. We think about what we are doing for the safe long-term care act and, as the member mentioned, the 26 agreements signed across the country, whether they are on aging with dignity, working together, primary care, nurses or doctors. What we are seeing with the provinces and territories is that, by working together, we are able to make huge change everywhere in our health system to improve it.

What we all need to be doing in the space of health is to be focused on data, evidence and moving forward because, I will say, and I know the member feels the same way as I do, that what Canadians expect of us is to not talk about our differences. This is not to try to find problems and spend all of our energy criticizing things, but to find solutions and answers, to drive that forward and to make things better. That is squarely where our mind is focused, and I know that it is squarely where the health ministers across the country of every political stripe are as well. I look forward to the meeting we are going to be having later this week with all health ministers.

Mr. Brad Redekopp (Saskatoon West, CPC): Mr. Speaker, the Conservatives have no problem with Canadians getting the drugs they need.

I am doing something the government does not often do, and that is to think ahead. This is the first bit of the pharmacare legislation it is talking about, with a couple of drugs. There are plans to do more.

Many Canadians already have drug care coverage. I am curious as to why the program is being developed in the way it is because there is a large percentage of Canadians who have coverage. One of

the big questions I often get is whether Canadians are going to have to opt out and lose the coverage they have to go with this.

The costs are the big concern. The PBO has said there would potentially be tens of billions of dollars being spent on the pharmacare program once it is implemented. Why are we spending money on something that Canadians already have? This is a question I have.

On top of that, we know that Liberals cannot be trusted. We look at the cost of taxes, which have gone up. The cost of housing has gone up. The cost of groceries and food has gone up. I just do not see how Canadians can trust the Liberal government to implement something such as a pharmacare program at any kind of a cost that would not cause taxes to go up.

• (1600)

Hon. Mark Holland: Mr. Speaker, the member opposite would know that we are dealing with an inflationary crisis that exists across the world. That makes it incredibly difficult for Canadians.

It does not matter that Canada has one of the lowest rates of inflation in the industrialized world. In fact, we have the second-lowest rate of food inflation in the OECD. It is ridiculous to pretend that that exists in some kind of domestic bubble that only Canada is facing. It ignores the complete reality across the world.

The question is what we do when people are facing hard times in the world. Do we pretend that it only exists domestically and tell people that cuts to government services and programs is somehow going to magically make things better, or do we lean in and help people?

I would say the member for Saskatoon West has an opportunity. He says that people have access to the drugs that they need. That is not the case. That is absolutely not the case. People who have an existing drug plan are going to continue to enjoy the access that they have to their drugs.

The question here is about, for example, a woman who is an abusive relationship and whose insurance coverage is through her partner. She would not have the ability to get that medication on her own. That is what this bill is about. If a young woman, whose health coverage is through somebody else, is making a decision about their reproductive future, it is about making sure that that person has access. There are absolutely millions of people who do not have any coverage at all, for whom dollars and cents mean they do not have access to life-saving medicine.

If the member opposite does indeed support the people who do not have access to these medications getting them, there is great news. There is something he could do, and that is vote for this bill.

Ms. Lindsay Mathyssen (London—Fanshawe, NDP): Mr. Speaker, I would be interested to hear from the minister about the timing of this blockade by the Conservatives.

We know that every year, unfortunately, quite a lot of very young people are brought up onto the Hill as part of a very anti-choice movement. They are susceptible to the forces at will that would bring them up for various reasons. That is happening this week on the Hill. Considering the Conservatives' focus on their own fundraising abilities, would the minister say that this has anything to do with their timing in the blockage of the bill?

Hon. Mark Holland: Mr. Speaker, I thank the member for her work and for her advocacy in this space. I recognize that she has worked long and hard to try to make sure that women have access to what they need, to make sure that they have autonomy over their own bodies and their sexual and reproductive health.

I cannot guess as to why the Conservatives would block something as important as this. Underlying it is a conversation that we do need to have as a country about sexual health. We have to be able to have open conversations about sex. When we do not have open conversations about sex, it means that people are more likely to be mistreated, manipulated and subject to abuse. Consent can only come from knowledge. Sexual shame does radical and destructive damage everywhere in the country.

For me, women having access to the contraception that they need is not, just in and of itself, enough. We also need to be able to say to women, to men, to those who are non-binary and to those who are trans that who they are is just fine and anybody who tries to make them feel less than or to attack their identity is creating an act of sabotage that is totally and utterly unacceptable. The real villain is the shame that we push upon others for being who they are, and the damage that does is unspeakable and must be stopped.

[Translation]

The Deputy Speaker: It is my duty to interrupt the proceedings at this time and put forthwith the question on the motion now before the House.

[English]

The question is on the motion.

• (1605)

[Translation]

If a member participating in person wishes that the motion be carried or carried on division, or if a member of a recognized party participating in person wishes to request a recorded division, I would invite them to rise and indicate it to the Chair.

[English]

Mr. John Brassard: I request a recorded division.

The Deputy Speaker: Call in the members.

• (1645)

(The House divided on the motion, which was agreed to on the following division:)

Government Orders

(Division No. 751)

YEAS

Members

Aldag	Alghabra
Ali	Anand
Anandasangaree	Angus
Arseneault	Arya
Ashton	Atwin
Bachrach	Badawey
Bains	Baker
Barron	Battiste
Beech	Bibeau
Bittle	Blair
Blaney	Blois
Boissonnault	Boulerice
Bradford	Brière
Cannings	Carr
Casey	Chagger
Chahal	Champagne
Chatel	Chen
Chiang	Collins (Hamilton East—Stoney Creek)
Collins (Victoria)	Commier
Coteau	Dabrusin
Damoff	Davies
Desjarlais	Dhaliwal
Dhillon	Diab
Dong	Drouin
Dubourg	Duclos
Duguid	Dzerowicz
Ehsassi	El-Khoury
Erskine-Smith	Fillmore
Fisher	Fonseca
Fortier	Fragiskatos
Fraser	Freeland
Fry	Gaheer
Gainey	Garrison
Gazan	Gerretsen
Gould	Green
Guilbeault	Hajdu
Hanley	Hardie
Hepfner	Holland
Housefather	Hughes
Hussen	Hutchings
Iacono	Idlout
Ien	Jaczek
Johns	Joly
Jones	Jowhari
Julian	Kayabaga
Kelloway	Khalid
Khera	Koutrakis
Kusmierczyk	Kwan
Lalonde	Lambropoulos
Lamoureux	Lapointe
Lattanzio	Lauzon
LeBlanc	Lebouthillier
Lightbound	Long
Longfield	Louis (Kitchener—Conestoga)
MacAulay (Cardigan)	MacDonald (Malpeque)
MacGregor	MacKinnon (Gatineau)
Maloney	Martinez Ferrada
Masse	Mathyssen
May (Cambridge)	May (Saanich—Gulf Islands)
McDonald (Avalon)	McGuinty
McKay	McKinnon (Coquitlam—Port Coquitlam)
McLeod	McPherson
Mendès	Mendicino
Miao	Miller
Morrice	Morrissey
Murray	Naqvi
Ng	Noormohamed
O'Connell	Oliphant

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Powlowski
Robillard
Rogers
Rota
Sajjan
Samson
Scarpaleggia
Serré
Shanahan
Sidhu (Brampton East)
Singh
Sousa
Sudds
Taylor Roy
Trudeau
Valdez
van Koeverden
Vandenbeld
Weiler
Yip
Zarrillo

Petitpas Taylor
Qualtrough
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Sarai
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Sgro
Sheehan
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Strahl
Thériault
Thomas
Tolmie
Uppal
Vecchio
Vien
Vignola
Vuong
Warkentin
Webber
Williamson

NAYS

Members

Aboultaif
Albas
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Barlow
Barsalou-Duval
Bergeron
Bérubé
Blanchette-Joncas
Bragdon
Brock
Calkins
Carrie
Chambers
Chong
Dalton
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Dowdall
Duncan (Stormont—Dundas—South Glengarry)
Epp
Falk (Provencher)
Ferreri
Gallant
Gaudreau
Genus
Gladu
Goodridge
Gray
Hoback
Jivani
Khanna
Kmicc
Kramp-Neuman
Kusie
Lantsman
Lawrence
Lemire
Lewis (Essex)
Liepert
Lobb
Majumdar
Mazier
McLean
Michaud
Morantz
Motz

Aitchison
Allison
Baldinelli
Barrett
Beaulieu
Berthold
Bezan
Block
Brassard
Brunelle-Duceppe
Caputo
Chabot
Champoux
Cooper
Dancho
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Gourde
Hallan
Jeneroux
Kelly
Kitchen
Kram
Kurek
Lake
Larouche
Lehoux
Leslie
Lewis (Haldimand—Norfolk)
Lloyd
Maguire
Martel
McCauley (Edmonton West)
Melillo
Moore
Morrison
Muys

PAIRED

Nil

The Deputy Speaker: I declare the motion carried.

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 Abitibi—Témiscamingue, Sport; the hon. member for Kitchener Centre, Foreign Affairs; the hon. member for Calgary Nose Hill, Carbon Pricing.

[*Translation*]

SECOND READING

The House resumed from April 16 consideration of the motion that Bill C-64, An Act respecting pharmacare, be read the second time and referred to a committee, and of the amendment.

Mrs. Dominique Vien (Bellechasse—Les Etchemins—Lévis, CPC): Mr. Speaker, I rise to speak to Bill C-64, an act respecting pharmacare, to highlight two major concerns. The first is the federal government's intrusion into matters of provincial jurisdiction, and the second is budgetary concerns.

This neo-liberal initiative, which came from the Liberal-NDP coalition, raises serious concerns because of its impact on provincial jurisdictions. During its nine years in power, this Liberal government has not even been able to properly and competently manage its own files. How, then, do the Liberals think they can get away with interfering in provincial health care by imposing Bill C-64 on the provinces, including Quebec, which has been offering Quebecers its own pharmacare program since 1997, so for nearly 30 years?

Government Orders

Instead of continuing to overstep its boundaries by interfering in provincial affairs, the government should focus on matters within its jurisdiction, such as managing passports, fighting crime, fixing the immigration system, which it broke, and cutting inflationary taxes. These are just a few examples of areas where it needs to direct its attention and energy, instead of investing time and money in provincial matters.

A pharmacare program is not a program that should be set up at the federal level. That is a provincial responsibility. This arrogant, pretentious government wants to impose its science when it totally lacks the authority to manage this type of file.

Was this pharmacare program designed in close co-operation with all provinces, territories and indigenous peoples? Was it developed following a thorough review of what already exists in each of these areas of responsibility? Is it the result of thoughtful consultation with experts and stakeholders? We know the answer: Of course not.

We have here a shameful attempt by the Liberal government to stay in power thanks to the support of the NDP. The *Journal de Montréal's* Yasmine Abdelfadel writes, and I quote:

Make no mistake: Justin Trudeau has sold his soul to the NDP. The New Democrats are the ones who are really in power, the same New Democrats that did not have the support of the public in the last election.

This initiative seems well intentioned, but it is not. Because the Liberals only hold a minority, they found a dance partner, the NDP, which is keeping them in power in exchange for the implementation of various measures that the New Democrats care about, like dental care and pharmacare, the issue that is before us today.

Canadians did not vote for that or for the NDP. Only 17.7% of Canadians supported this far-left party in the last election.

Also, Radio-Canada notes that neither dental care nor pharmacare were part of the Liberals' election platforms.

Despite what they want us to believe, this pharmacare bill is therefore no reflection of the NDP-Liberal coalition's benevolence toward Canadians. It is mere political and electoral theatre. To suggest otherwise is to lie to Canadians.

Now, getting down to dollars and cents, this pharmacare plan, as proposed, would generate massive costs, a concern that seems to have been glossed over, if not completely ignored. In a report published on October 12, 2023, the Parliamentary Budget Officer wrote the following:

...we estimate the incremental cost to the public sector (that is federal and provincial governments combined) to be \$11.2 billion in 2024-25, increasing to \$13.4 billion in 2027-28.

I would remind the House that the Parliamentary Budget Officer thinks the total is going to reach \$40 billion.

I find it hard to trust in the current government's ability not only to implement an effective pharmacare program, but also, and more importantly, to maintain it over the long term. A government that has proven repeatedly since 2015 that it cannot maintain a balanced budget and is fiscally incompetent does not exactly inspire confidence.

• (1650)

I think it is worth reminding the people watching at home that the national debt has doubled since the Liberals came to power in 2015. It now stands at \$1.255 trillion. I also want to remind everyone that since we have to borrow money to pay for the Liberals' reckless spending—because they are spending money they do not have—we are also paying interest. The interest on this unbelievable debt is \$54 billion. That is more than the total amount of health transfers to the provinces, and it is the equivalent of all the GST paid by Canadians. This money is being thrown away to pay for the creation of programs that already exist.

Access to medication is a major concern for Canadians, which is why it is imperative that we carefully examine the viability of such a program, so as to be absolutely certain that it will last over the very long term. More than anything else, it is hard to justify creating such programs, which would require additional bureaucracy and uncontrolled spending, when the vast majority of Canadians, four out of five, or 80% according to Statistics Canada, already have drug coverage in their respective provinces, coverage that is even broader than what is proposed in Bill C-64.

Here is what Quebec's health minister, Christian Dubé, had to say to *La Presse*:

Not only is the government refusing to give us the money we asked for in federal health transfers, but it wants to interfere in an area of Quebec jurisdiction. The federal government knows full well that this is an area of provincial jurisdiction. We've had our own drug insurance program since 1997. It's been nearly 30 years. We also probably have the broadest drug coverage of any Canadian province.

By the way, he also pointed out that 45% of Quebecers are entitled to drug insurance coverage through the public plan and that 55% of Quebecers have private insurance. Guess what? Fifty-five per cent plus 45% equals 100%.

The federal government has caused countless crises in Canada since coming to power. Canadians continue to be both witnesses and victims of this incompetence every day in things like immigration, passports—we are starting to see lineups again—the correctional system, the use of food banks or the lack of affordable housing across Canada. Do my colleagues know that since the Liberals came to power in 2015, the public service has grown by 40% and hired 100,000 public servants?

I am going to quote a sharp mind on the subject of bureaucracy. I would not bet that he is a Conservative. Listen to this:

Like a black hole, it can also absorb astronomical budgets without leading to an improvement to public services.

Look at the Phoenix pay system, the chaos in immigration management, the ArriveCAN saga, the passports saga, the airports saga, etc. Despite the huge amounts of money squandered on new programs administered by an armada of public servants and the gigantic debt it has run up, the [Liberal] government's incompetence at delivering effective services to the public continues to defy expectations.

Government Orders

That is a quote from Boucar Diouf.

I want to close by quoting Gérard Filion, an economics journalist who is very well respected in Quebec. In his opinion, the government is creating a lot of programs and economists are concerned about the impact that will have on Canada's credit rating. The creation of many expensive programs that must be maintained in the future means additional spending.

All of the provinces offer coverage, particularly Quebec. We therefore recommend that we not go forward with this bill because we cannot afford it right now with this government's reckless spending.

• (1655)

Mr. Jean-Denis Garon (Mirabel, BQ): Mr. Speaker, on September 21, 2010, when my colleague was a minister in the Charest government, *Le Soleil* published an article that said, “the Charest government was hoping that Ottawa would recognize Quebec's right ‘to opt in or opt out of federal financial initiatives’ and that, if it decides to opt out, it would receive ‘full compensation’”.

The member voted against the Bloc Québécois's subamendment, which called for exactly the same thing that she was calling for when she was a minister in the Charest government. I listened to her speech and it seems as though she has changed her mind again.

What is her final position on Quebec's right to opt out with full compensation?

• (1700)

Mrs. Dominique Vien: Mr. Speaker, what is clear to us is that the economic situation in Canada right now is very precarious, even worrisome. We have a government that spends money hand over fist. Canada's debt has doubled since 2015 and public debt charges are up to \$54 billion. That is money that is being thrown onto the fire. It is not being used to help Canadians. That money is being given to bankers because we are spending too much here in Canada. It is therefore a very bad idea to implement a pharmacare program when the vast majority of Canadians and all Quebecers already have drug coverage.

[*English*]

Ms. Rachel Blaney (North Island—Powell River, NDP): Mr. Speaker, there are three million people across our country living with diabetes, and they pay about \$18,000 a year out-of-pocket. This is going to make a big difference for those folks, especially knowing that they are going to have the devices as well.

This is the first step in a model that I really believe in, which would result in collective purchasing. Any Canadian would know that, when we buy collectively, prices usually go down. Of course, that is why Canada pays the second- or third-highest medication rates on the planet.

Does the member have any thoughts on the hopefulness of the people who will finally get medication they can afford?

[*Translation*]

Mrs. Dominique Vien: Mr. Speaker, this is just wishful thinking. I read the bill carefully. There is nothing specific in it and everything remains to be done. No agreements have been reached

with the provinces and a list of drugs has not yet been compiled. All the bill says is that a strategy will be developed and a committee of experts will be set up.

This is just pure politics, completely partisan politics. As I demonstrated in my speech, the only reason this minority Liberal government proposed the pharmacare and dental care programs was to stay in power. It is supported by the NDP, which said that the Liberals had to bring in a pharmacare program to stay in power. Let us not kid ourselves this afternoon. That is the Liberal government's real motivation, and it is a national disgrace.

[*English*]

Mr. Mark Gerretsen (Kingston and the Islands, Lib.): Mr. Speaker, we are offering it under a Westminster parliamentary system that is multiple centuries old. The member is talking about a minority government as though she has never even come close to understanding what happens in a minority. I am sorry if the NDP figured out how to actually get things done on behalf of Canadians while Conservatives would rather just yell and scream all day long about what they wish would happen; clearly, they do not use any kind of ability to act like adults in this room to get things done on behalf of their constituents.

Very simply, if Conservatives are going to be voting against this, is it safe to then say that they would remove this program if elected into government?

[*Translation*]

Mrs. Dominique Vien: Mr. Speaker, the Liberals put on quite the spectacle. Pharmacare was not even part of their election platform. As a minority, they rely on their NDP friends to keep their hold on power, sometimes with help from their Bloc Québécois friends too—we must not forget that. Then they turn around and criticize us for supporting or not supporting measures that they never raised with Canadians themselves. They cozy up to the NDP, which received only 7.7% of the vote in the last election, and have the nerve to lecture us. We are not going to take that.

[*English*]

Mr. Darrell Samson (Parliamentary Secretary to the Minister of Rural Economic Development and Minister responsible for the Atlantic Canada Opportunities Agency, Lib.): Mr. Speaker, I am thankful for the opportunity to speak to Bill C-64, an act respecting pharmacare. I am extremely excited to talk about this, because this is a very important program, another transformative initiative for Canadians. We are again supporting Canadians. We can think back to 1968, when we brought in medicare. We knew the Conservatives were against it then, and the Liberals brought it in; today, no one wants to get rid of medicare, because of its importance.

In this speech, I will be talking about the framework on pharmacare and also talking about diabetes and the three million people with diabetes, and how difficult it is for them. Also I will share some information about the pilot project we have been running in P.E.I., which has given us some information, as well as where we sit in the G20 when it comes to health care and drug care. Finally, I will talk about all those initiatives the Liberals have brought in, which are helping Canadians today and in the many years forward. It was the Liberal Party that brought those.

Let me start off by saying that this act is focused on certain drugs that we would bring forward, and related products.

Of course, my colleague will be joining me afterwards. I will be sharing my time with the member for Dorval—Lachine—LaSalle.

To continue, we are talking about certain drugs, such as contraceptives and diabetes medication. Again, as I said, there are over three million people with diabetes in Canada. Back in December 2023, we created the Canadian drug agency, and its focus is on three major areas. One is a formulary, which is putting up a list of all the drugs that would be included in this pharmacare program. Another is bulk purchasing. As some have mentioned already, we have already saved millions of dollars, and there are billions to be saved through that process, which will continue. Third, we will be publishing, of course, appropriate use of medication in Canada.

I also want to say that once this legislation is passed and receives royal assent, within 30 days the minister will appoint a committee of experts to make recommendations within a year, so that we can move on this as quickly as possible.

When I go to get some medication at the drug store, my pharmacist often tells me, “You have to do something for people with diabetes. The cost is unbelievable. Many Canadians are facing a cost they cannot afford to pay. You need to come forward with some type of initiative.” I am so pleased to be here today to talk about that.

In the last decade, we have seen a doubling of the number of people facing challenges with diabetes, which is extremely important. Today, 3.7 million people are living with this. If we do not do something to help them, 25% of those people have indicated that they cannot afford to pay for that medication. If we do not treat that disease, we know what some of the end products would be, and they are not very good. We are talking about blindness. We are talking about amputation. There are all kinds of challenges that come with that.

Just for insulin, for type 1 or type 2 diabetes, the cost can range anywhere between \$900 and \$3,000 or \$4,000 a year, which is extremely high. The good news is that we are going to work with the provinces and territories and have a deal, so that they can have frontline services for these individuals.

Diabetes Canada said, “We are very pleased with the government's commitment to prioritize improved access to diabetes medications and devices. This monumental step demonstrates a genuine dedication from our political leaders to enhance the well-being of the over four million individuals living with diabetes in Canada.”

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For example, last year in June we started a pilot project in P.E.I., and from that pilot project we have seen the medication costs drop by over 60%, helping the residents of P.E.I. In a very small province, they have already saved up to \$2 million, out of pocket. That is extremely important, and when we talk about affordability, this is another step forward that our government is bringing to the table.

• (1705)

Where do we sit in the G20? Well, it is important. People ask why we are bringing this in. We are bringing this in because we probably should have brought it in before, but the time is now. We are the only country in the G20 that has health care insurance but yet does not include drugs. The U.K. has included some prescription drugs. Australia has a mixed formula of private and public. France has, of course, a health care system and is now paying significant portions toward drugs. There are other countries in the G20 that have some type of pharmacare, including Germany, Italy, Japan, South Korea, Argentina, Brazil, etc.

According to a CBC article, “the federal Advisory Council on the Implementation of National Pharmacare, led by Dr. Eric Hoskins, stressed how people's lives can suffer if they skip needed prescription drugs, and noted a Canada-wide program could eventually lead to system-wide savings of nearly \$5 billion annually.” When they talk about how much it would cost, we could actually save up to \$5 billion. I think that is also a very easy answer as to why we should move forward.

When I talk about our government, the values and ideology of the Liberal Party have always been to tighten up the gap, help the most vulnerable and make sure that all Canadians have opportunities to be successful. Let us look at some of the things that we brought forward: 1968, medicare; 1969, the Official Languages Act, making both languages the official languages of Canada; 1982, the Charter of Rights and Freedoms, which all Canadians should be very proud of. Some of the opposition members are hesitant today on some pieces of the charter and we will see where they go with that piece.

There is the new and improved universal child benefit. When the Conservatives had it, it was 30% to 40% less and it was taxable; now it is not. There is the new and improved CPP, in 2019, which went from \$11,400 a year to almost \$20,000 a year. Those are programs that are helping every Canadian. These are opportunities. This is what makes Canada great. This is why people want to move to Canada.

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Let me speak about some more initiatives that we are bringing to the table. The national school food program would help over 400,000 young people. The new disability program would help over 600,000 people with disabilities, who we know comprise most of the individuals living in poverty. Those are major initiatives to help. We are also building the dental care program. Nine million Canadians would have access to the dental care program. These are big numbers. There are many Canadians who have challenges, and our government has been focused on how to support the individuals facing those challenges.

I am going to end with something that Canadians must listen carefully to. If the Conservatives ever came to power, what would they cut? They do not want to tell us. They say “a dollar for a dollar”, so if there is a deficit of \$40 billion today, we know they are going to cut \$40 billion tomorrow. That we already know; we just do not know which programs. Therefore, I am going to ask the Conservatives. Would they cut pharmacare? Would they cut dental? Would they cut the disability benefit for people with disabilities? Would they cut the school food program that we have been talking about for 20 years? Would they cut the CCB, which is helping young families? Would they cut the early learning and child care program? I do not know. I am sure the Conservatives do, and I would love for them to share that with Canadians.

• (1710)

Mr. Frank Caputo (Kamloops—Thompson—Cariboo, CPC): Mr. Speaker, it is always a pleasure to rise on behalf of the people of Kamloops—Thompson—Cariboo. Before I begin my intervention, I want to recognize the life of Albert “Bert” Malfair. He was a father to a young woman I went to school with. He bravely served the RCMP to the point where he was chasing robbery suspects and was ultimately disabled from that in 1984. We are grateful for him. He recently passed away, and I pass my condolences to his family. May perpetual light shine upon him.

When my colleague gave his speech, he just so casually threw around the number of a \$40-billion deficit. It has gotten that bad. That was a government that said it would have modest deficits and the budget would balance itself, and what has it done? It has spent, spent, spent. What do Canadians have to show for it? They have nothing. They are now struggling even more with heating and eating.

How does the member say these numbers so casually, \$40 billion, \$50 billion, \$60 billion? We are spending more now on servicing the debt than we are on health care.

• (1715)

Mr. Darrell Samson: Mr. Speaker, the difference between my colleague's party and our party is that they spend and we invest. We have invested in Canadians since 2015. Do members know why we can afford to invest? We can afford to invest because we have an AAA rating, one of only a few countries in the G7—

Some hon. members: Oh, oh!

The Deputy Speaker: Order. I cannot hear the hon. member, so let us try to keep the ruckus down a bit.

The hon. member for Sackville—Preston—Chezzetcook.

Mr. Darrell Samson: Mr. Speaker, inflation has been brought safely down to 3% by the Bank of Canada, our prime rate is among the lowest ever in the history of Canada, and we have the lowest debt-to-GDP ratio in the G7. What else do they want? We are in a good, solid position to invest, and we are going to continue to invest for Canadians.

[*Translation*]

Mr. Simon-Pierre Savard-Tremblay (Saint-Hyacinthe—Bagot, BQ): Mr. Speaker, there is one thing I do not understand: Why is it difficult to provide for the right to opt out with full financial compensation? Everyone would be happy. Those who want in, stay in. Those who want out, take the money and do their own thing.

It is not going to lessen our desire to be independent, but it may make us less angry with the Liberals when we do get our independence. That is all there is to it. It is not complicated.

Mr. Darrell Samson: Mr. Speaker, a Canadian is a Canadian. We have a program that is there for Canadians, and we are going to make sure that Canadians are respected in every province and territory, including Quebec. We are very proud to work closely with our colleagues, and we will continue to do so.

[*English*]

Ms. Lindsay Mathysen (London—Fanshawe, NDP): Mr. Speaker, the hon. member talked a lot about the cost savings in terms of this program. Of course, this goes right back into medicare and our health system.

The direct cost associated with unintended pregnancies here in Canada is an estimated \$320 million, so the benefits of universal contraception do not just end unwanted pregnancies with prevention and cost savings, but can actually help in terms of prescription contraceptives for other health conditions like abnormal uterine bleeding and endometriosis, precancer of the uterus, polycystic ovary syndrome and the prevention of ovarian and uterine cancer.

Can the member talk about the importance of seeing those benefits and the cost savings to our system as well, in addition to the health of people who need that support?

Mr. Darrell Samson: Mr. Speaker, often, it is not about throwing more money. There are ways of changing how we do things so that the end result of the investment is to supply and support more Canadians by investing less.

There are cost savings. We already talked about the cost savings with bulk purchase, which are in the billions of dollars, and there are more cost savings to be had in other areas that the member mentioned as well, such as contraception, etc.

Mr. Mark Gerretsen (Kingston and the Islands, Lib.): Mr. Speaker, I find it funny that the Conservatives were laughing when the member said that we are investing while they are spending. They laugh as though it is some kind of joke. Let us not forget that Tony Clement had money to spend on the G8 and used it to build gazebos in his backyard. Conservatives' memory is so short-term.

The reality is that the member is absolutely correct. We are investing in Canadians. We are investing in the future. We are asking those who make the most to pay a little bit more in order to keep those investments going. Would the member agree with me on that?

Mr. Darrell Samson: Mr. Speaker, my colleague is 100% correct. We are not investing in gazebos. We are investing in pharmacare, dental care, a disability benefit, a school food program, CCB and early learning.

We continue to support Canadians. That is why people want to move to Canada. They are proud of our great—

The Deputy Speaker: Resuming debate, the hon. member for Dorval—Lachine—LaSalle.

• (1720)

[Translation]

Ms. Anju Dhillon (Dorval—Lachine—LaSalle, Lib.): Mr. Speaker, I am grateful for the opportunity today to speak to Bill C-64, an act respecting pharmacare.

This bill represents the next phase of our government's commitment to a national universal pharmacare program. It proposes the foundational principles of national universal pharmacare and our intent to work with provinces and territories to provide universal single-payer coverage for many contraceptives as well as diabetes medications.

This is an important step forward in improving health equity, affordability and outcomes, and it could save the health care system money in the long term.

[English]

Public health care in Canada was built on the promise that no matter where one lives or what one earns, one will always be able to get the medical care one needs. Despite this promise, Canada is the only country in the world with universal health care that does not provide universal coverage for prescription drugs.

[Translation]

When medicare was first introduced, prescription drugs outside of hospitals cost less and played a smaller role in health care. Today, prescription drugs are an essential part of our health, helping to control chronic conditions, treat temporary ones, and aid in overall health and well-being.

[English]

One area that has seen significant changes is diabetes treatment. Over 100 years ago, thanks to a Canadian team of researchers, Frederick Banting, Charles Herbert Best, John J. R. Macleod and James Bertram Collip, insulin was discovered.

Since this monumental scientific discovery, there have been several advancements in diabetes treatment, from the introduction of

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fully synthetic human insulin to glucose monitors and insulin pumps. These breakthroughs have immensely improved the quality of life for people who have to live with diabetes, enhancing self-esteem, increasing social participation and improving the overall health and well-being of these individuals.

They have also come with higher costs, creating affordability challenges for Canadians affected by diabetes.

[Translation]

Outside of hospital, prescription drug coverage comes from a mix of private insurance, out-of-pocket cash payments and various provincial programs. While the majority of Canadians have access to some form of public or private insurance, about 2.8%, or 1.1 million Canadians, do not have access to private or public drug coverage.

[English]

Although most Canadians have some form of drug coverage, this does not mean that those with insurance have equal access to the prescription drugs they need. The existing patchwork system of private and public drug plans leaves millions of Canadians under-insured, and that means their out-of-pocket prescription drug costs create a financial burden that leaves them struggling to afford an essential part of health care.

In 2021, Statistics Canada found that more than one in five adults in Canada reported not having the insurance they needed to cover their prescription drug costs. Being under-insured can take many forms, for example, Canadians may have high deductibles, resulting in significant out-of-pocket costs before their insurance coverage even kicks in. They may reach the maximum annual or lifetime coverage limits for their insurance and have to pay out-of-pocket, or they may have to make co-payments, which are often 20% of the drug's cost on private plans and sometimes more on public plans.

[Translation]

All provinces have drug coverage to protect Canadians from catastrophic drug costs, but deductibles under these plans can range from 0% to 20% of net family income. In many cases, Canadians will never reach the deductible, leaving them without any support for their drug costs. This variability across the country creates a postal code lottery.

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Let us consider the advancements in diabetes treatments. For a working-age Canadian with no private insurance, out-of-pocket costs vary widely. In some parts of the country, out-of-pocket costs for people living with type 1 diabetes can be higher than \$18,000 per year out-of-pocket; for type 2 diabetes, they can be higher than \$10,000 per year in out-of-pocket expenses. Even those with private insurance can face high co-pays or exceed annual plan maximums, resulting in high out-of-pocket costs.

Even for cases in which an individual is not accessing devices that cost thousands of dollars, they can face significant out-of-pocket costs. For example, we can consider a woman in her mid-twenties who is working a minimum wage job. An IUD, one of the most effective forms of birth control, can cost up to \$500 with no insurance. Even with private insurance, a co-pay of 20% would be \$100. While IUDs can last from three to 12 years and save money over the long term, the high upfront cost can make them inaccessible.

• (1725)

[*English*]

Under-insurance can be a particular concern for young adults who age out of their parents' private insurance but who do not have their own form of private coverage. Lower-income Canadians also make up a disproportionate share of the under-insured. While most provinces have put in place drug coverage for those accessing social assistance benefits, a gap still exists. Many lower-income households that do not qualify for social assistance continue to struggle with out-of-pocket prescription drug costs.

Employment factors contribute to differences in insurance coverage. People with low-paying jobs, such as entry-level, contract and part-time positions, often report less adequate drug insurance coverage. This may even discourage people from accessing social assistance benefits or from applying for jobs, because once hired, they may lose their public drug insurance coverage. However, many entry-level and part-time jobs do not offer drug benefits. One study found that only 27% of part-time employees reported receiving medical benefit coverage.

Under-insurance can have serious consequences. Many Canadians with high out-of-pocket costs report foregoing essential needs, such as food and heat, or not adhering to their prescription due to drug costs. Statistics Canada found that, in 2021, close to one in five Canadians spent \$500 or more out-of-pocket for their prescription medication, and almost one in 10 reported not adhering to their prescription medication because of costs. This includes delaying filling prescriptions or skipping doses to contain costs.

When people do not take their prescription drugs the way they are supposed to, their health can suffer. This results in serious consequences for the individual and their household, and unnecessary costs to the health care system in the long run, as patients are more likely to visit an emergency room or to be admitted to hospital when they do not receive consistent treatment. For example, the full cost of diabetes to the health care system in 2018 was estimated to be around \$27 billion and could exceed \$39 billion by 2028.

[*Translation*]

I think we can all agree that no Canadian should be put in a position where they must choose between the prescription drugs they

need for their health and well-being and putting food on the table. This is unacceptable, and it is why we are continuing our work to improve accessibility, affordability and appropriate use of prescription drugs as we move forward with national universal pharmacare.

Mr. Simon-Pierre Savard-Tremblay (Saint-Hyacinthe—Bagot, BQ): Madam Speaker, I know that my colleague is a member from Quebec. The members of the National Assembly of Quebec unanimously requested a right to opt out of the pharmacare program with compensation. This means that we are not opposed to Canada having its own program. They say that as Quebeckers, we have the expertise and experience in social programs, we definitely do not want this program to be managed like the borders or the passports. We want the federal government to give money to Quebec and let Quebec manage its own affairs. If the others want to keep this program, we have no problem with that. We respect that.

Does my colleague, as a Quebecker, agree with the position of her national assembly?

• (1730)

Ms. Anju Dhillon: Madam Speaker, indeed, I am a proud Quebecker.

Our program is going to help millions of women, people from various backgrounds and people with diabetes. It is going to help everyone, all Canadians and all Quebeckers.

[*English*]

Ms. Lindsay Mathysen (London—Fanshawe, NDP): Madam Speaker, members have spoken a lot today about the money saved by individuals and the money saved by the system, which we could reinvest into health care. By providing free contraception, an individual is said to have a lifetime savings of up to \$10,000, which is huge.

I would like to hear more about the larger issue. How can this piece of legislation itself, through contraception, empower women and those who menstruate?

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Ms. Anju Dhillon: Madam Speaker, we have been talking a lot throughout our speeches, as have all our colleagues, about how we are investing in Canadians, and this is an investment. There is a saying that it is better to prevent than to cure. This is one of those times when we could prevent, for example, botched procedures or when women have to go out of their way to do things to protect themselves and to make sure there are not unwanted pregnancies. This national pharmacare program would help women and those who are gender diverse to be able not just to cure but also to prevent. It would make sure that they have optimal health and that their well-being and mental health are being taken care of at the same time.

Mrs. Brenda Shanahan (Châteauguay—Lacolle, Lib.): Madam Speaker, I listened to my colleague's remarks with great interest, particularly around the risk of people being uninsured. I am not sure everyone always realizes what that is and what it means until they get into trouble. I would like to hear her speak more on the different vulnerable population groups who could be working but who could be under-insured.

Ms. Anju Dhillon: Madam Speaker, it would be surprising to most Canadians to learn that there is a huge under-insurance problem in this country. Many people, we could say, slip through the cracks. As I mentioned in my speech, for those who are part-time workers, who end up getting phased out of their parents' health insurance plans and for those who are taking social assistance, there is always a gap between the two insurances. We need to make sure that everybody is covered and that every Canadian is treated equally. It is all about equality and equity. This is how those gaps can be prevented.

As my hon. colleague from London—Fanshawe mentioned, it is important for women to be able to take care of themselves. It should not matter what one's income bracket is. One should be able to access contraceptives and these services in order to create a more equal society.

Mr. Blaine Calkins (Red Deer—Lacombe, CPC): Madam Speaker, it is a pleasure for me today to speak to Bill C-64.

Before I go any further, I would like to let the Speaker know I will be splitting my time with my good friend and colleague from Souris—Moose Mountain.

The debate today is about Bill C-64, an act regarding pharmacare. At least everybody is being told that is what it is about. I would rather call it, I guess, the so-called pharmacare bill because I think that “the cost of keeping the Parliament going bill” is probably a name that has already been used.

This bill is very tepid. It is not a national pharmacare program. This is actually just a piece of legislation that is meant to check a box to keep a supply and confidence agreement in place.

To the NDP members, I cannot believe they actually think this is the pharmacare bill they envisioned. I have not met a program the NDP members would not want to nationalize, but they say it is a very sad day when one—

Some hon. members: Oh, oh!

• (1735)

The Assistant Deputy Speaker (Mrs. Carol Hughes): There seems to be some cross discussion from one end of the chamber to the other. I see it is in front, so I apologize for that.

I just want to say that it is disruptive when someone is trying to speak. It disturbs them, so I want to ask members to please be respectful.

The hon. member for Red Deer—Lacombe has the floor.

Mr. Blaine Calkins: Madam Speaker, there is a joke going around that says, “It's not knowing that a politician can be bought; it's knowing how little they'll let themselves go for.” For a member of the NDP caucus right now thinking that this is the misery they are suffering in the polls, the misery they are suffering nationwide, which is the same misery Canadians are suffering, this is all they managed to get out of the supply and confidence arrangement with the government today.

It is not a pharmacare program. Health care is actually a provincial jurisdiction. It should be delivered by the provinces. The bill would simply be adding contraceptives and some diabetes measures into it. I guess, on the surface of it, that is a good thing, but to the tune of \$1.5 billion. If viewers watching at home actually believe this is all it is going to cost them, I will remind them that the government bought a \$7 billion pipeline and built it for about \$40 billion. Therefore, if history is any predictor of the future when it comes to what things cost under a Liberal-NDP coalition, then they should be looking at least to that example if not more.

To us, as Conservatives, the issue is one of provincial jurisdiction. I come from Alberta, and this is a very important issue to our province and to our premier. This is just another intrusion into provincial jurisdiction. We think that, during these financial times, when Canadians are struggling to make ends meet, pouring more fuel on the inflationary fire is certainly not going to help. It is another financial albatross in the making, which Canadians cannot afford and are not willing to pay for.

It is not just me saying this, and it is not just Conservatives saying this. John Ivison eloquently stated in a piece that he published back on February 29, when the bill or this notion first came out, that this is “the weebegone child of a loveless Liberal-NDP marriage.” This is basically what we are dealing with.

It has become clear to me that the bill before us is basically the cost of keeping the NDP support for this Parliament under supply and confidence, and the coalition partners can take this until October 2025. It was supposed to be October 20, but it is going to be extended by another week to make sure that certain people here get the financial benefits they think they are entitled to. However, it just goes to show that there is only one serious opposition in the House, and that is the Conservative Party.

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The NDP is not an opposition party but a willing accomplice to everything that the Liberal government has in its agenda. Its members have been witting partners in creating a massive inflationary deficit; setting restrictive policies towards, for example, lawful gun owners and natural health products, which they signed up for two years ago without even knowing they were going to vote in favour of that in Bill C-47 last year; impeding upon provincial jurisdiction time and time again, which is, of course, front and centre with this piece of legislation; continuing to cover up for the government's scandals, covering for it at committee and also here in the House of Commons; introducing soft-on-crime legislation or supporting that soft-on-crime legislation, which has turned our justice system into a revolving door; sending Canadians to food banks en masse, at a couple of million visitors, which is up over 300%; allowing housing prices to skyrocket; and neglecting our military to the point where our soldiers are basically relying on food donations while they are in Ottawa for training. I could continue, but I think members get the gist of what I am trying to say.

It is bad enough that NDP members backed budget after budget and shut down our work to hold the government to account at committee, but they are telling Canadians that they are doing their actual work as an opposition party. Well, they cannot have it both ways. They cannot be in opposition while they support everything that the government does. I do not buy it, and neither do Canadians.

A December 2023 Leger poll indicated that only 18% of Canadians listed the establishment of a national pharmacare program as a health care priority, and the promise was not included in the 2021 Liberal platform. Canadians did not vote for a party promising pharmacare, yet here we are, thanks to an NDP party that is keeping this weak and basically lame-duck government in office. It is no wonder that some provinces are already saying publicly that they are choosing to opt out.

Let it be known that the absence of the NDP as an opposition is also keenly felt in other areas. Just last year, as I was mentioning, the NDP-Liberal coalition passed Bill C-47.

• (1740)

I do not suppose anybody in the NDP was told, when they signed on to this supply and confidence agreement back in March 2022, that they would be asked to regulate natural health products in the same way as therapeutics, but they did it anyway. As a matter of fact, they made that commitment a year before the bill was passed, and it is going to basically shut down our supplements and natural health product industry when they are classified and rebranded as pharmaceutical drugs.

What did the New Democrats do when this came up for debate? They backed the budget instead of forcing the government to remove those four little clauses from Bill C-47, the budget implementation act. They had a chance. They could have flexed their muscles and said they were not going to support the budget implementation act unless the government removed them, but no such request was forthcoming, and the bill passed. It has caused unforeseen chaos in the natural health products and supplements industry across this country; consumers, of course, are rightly worried. In response, I had to table my own private member's bill, Bill C-368, to reverse these changes. This is just part and parcel.

New Democrats say one thing to Canadians but actually do another. Could anyone imagine such a thing as being the House leader of the NDP, for example, standing up and saying time and time again how much one does not like omnibus legislation, and yet gleefully passing Bill C-47. The NDP House leader has said this for the 18 years that he and I have been in the House together. However, he told the government that New Democrats would continue to pass every budget and every budget implementation act henceforth after March 2022. He cannot have it both ways. He cannot stand up and say New Democrats are going to hold the government to account while continuing to give it the keys to the house to do whatever it wants.

In the case of natural health product governance and regulations, New Democrats tell Canadians they are against omnibus legislation and that they are keeping the government accountable. However, as I said, they voted for Bill C-47, threw that industry into turmoil and then criticized me for giving them an off-ramp on the Bill C-368 debate last week. I was giving them a pathway to redemption, and all they could do was basically blame Stephen Harper for the mess that the country is in. I cannot even make this stuff up.

The most common questions I get from Canadians are these: When are we going to have an election? Who believes anything anybody in the NDP has to say anymore, when their actions are completely 180° opposite from what they say with their words?

It should also be highlighted that the bill was introduced with no public consultations whatsoever, which comes as no surprise to Conservatives. This piece of legislation has been pushed from a government with a terrible record on transparency. It is a government that regularly rushes massive changes with little regard for those people the changes may impact. It talks about the intended consequences, but it never fully understands the unintended consequences of the things it does, which is why we are in the mess we are in today.

The Conservative position on Bill C-64 is that the Liberals know this project is an expensive boondoggle. That is why they abandoned it in their 2019 election promise. Even former finance minister Bill Morneau noted in his book that a single-user system would cost an additional \$15 billion a year. We cannot believe the \$1.5 billion number, and that is why my colleagues here on the Conservative side and I will respect provincial jurisdiction and vote against this piece of legislation. We encourage New Democrats to change their ways before their party actually fades into oblivion forever.

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Mr. Mark Gerretsen (Kingston and the Islands, Lib.): Madam Speaker, I have heard a number of Conservatives use the same line, that only 18% of Canadians, or one out of every five, think this should be a priority. I guess the fact that one out of every five Canadians needs something is not enough for the Conservatives. What is their number? When does it warrant a program? If it is not one out of every five Canadians, is it two out of every five, is it three, is it four, or is it when everybody demands this program?

If one out of five Canadians needing this is not good enough for him, could the member tell me what number Conservatives will accept where, yes, it is good enough for Canadians?

• (1745)

Mr. Blaine Calkins: Madam Speaker, health care delivery is provincial jurisdiction. The private insurance companies out there are already talking about how their systems and programs, which deliver tremendous results for Canadians, are going to be undercut. This is going to lead to a public system that does not offer the same value and benefits that the private system already does. Conservatives are going to respect provincial jurisdiction.

It is too bad that the government has squandered \$600 billion in debt and the debt servicing that goes along with it, so we are actually spending more on servicing our debt than we are on health care transfers. If only we had prudent fiscal management, we could transfer the money to the provinces so that each province could make a decision for itself about what coverage it wants to have for its citizens. That is the way Conservatives would have handled this.

[Translation]

Mr. Jean-Denis Garon (Mirabel, BQ): Madam Speaker, we will repeat the same question, because that is the most important aspect for us.

My colleague ended his speech by talking about what Ottawa should do instead of mismanaging the public purse. I am with him to that point. According to my colleague, the government should give the provinces money so that they can decide what to do and what to cover and not cover in their own jurisdictions. We know what Quebec wants. Quebec wants generous coverage. We already have a better system in place than the other provinces.

In this context, how is it that my colleague got up last week to vote against the Bloc Québécois's subamendment to the budget, an amendment that called for the right to opt out with full compensation when the federal government spends money on programs that fall under provincial jurisdiction? Is he prepared to change his position and support a right to opt out with full compensation, as all elected officials in the Quebec National Assembly are calling for?

[English]

Mr. Blaine Calkins: Madam Speaker, we oppose this particular plan simply because we know it is nothing more than the cost of the agreement between the NDP and the current federal government. It is not a serious agreement in the sense that we are actually getting a national pharmacare program; as I said in my previous comments, which would have already answered my colleague's question, this is much better delivered through provincial jurisdiction.

I am an Albertan, and as the member is a Quebecker, he ought to know that there is one thing Albertans and Quebeckers often have

in common: We know how to look after our own people best, and we do not need these federal intrusions into provincial jurisdiction.

Ms. Lindsay Mathyssen (London—Fanshawe, NDP): Madam Speaker, I am curious. We have seen that the Conservative Party of Canada is riddled with corporate lobbyists in its governing body: big oil, real estate, anti-union companies, insurance companies and big pharma. In fact, its members are using the talking points from those corporate entities in their conversations today against the bill. Ultimately, is the member actually defending his constituents or the corporate interests of big lobbyists?

Mr. Blaine Calkins: Madam Speaker, the individual who just asked me the question had her answer in the question itself: support for big pharma. Who is supporting big pharma with this piece of legislation? The NDP and the Liberals are. A national pharmacare program will do more to help the pharmaceutical industry. Let us examine that for a second.

Everything New Democrats say they are for, they are also against. This speaks to the same hypocrisy they have on everything they do. They want more pharmaceuticals and are supporting big pharma with this piece of legislation with more government money, so more costs going to the pharmaceutical company, while accusing Conservatives of being in the pockets of big pharma. It is ridiculous.

Mr. Robert Kitchen (Souris—Moose Mountain, CPC): Madam Speaker, I thank the House for the opportunity to speak on behalf of the people of Souris—Moose Mountain, and I appreciate the opportunity to speak to today's debate as we discuss Bill C-64, an act respecting pharmacare, and its amendment.

I think it is important to ensure that Canadians truly understand what the piece of legislation before us is and how it might affect them in the future. In fact if we read the amendment that has been put forward, we see that it states:

The House decline to give second reading to Bill C-64, An Act respecting pharmacare, since the Bill does nothing to address the health care crisis and will instead offer Canadians an inferior pharmacare plan that covers less, costs more and builds up a massive new bureaucracy that Canadians can't afford.

Unfortunately, much of what I am about to talk about in dealing with what the government has put forward is that we need to determine that it is going to be to the detriment of most Canadians, thanks to the NDP-Liberal government, which only continues to make life harder for those who are just trying to get by in difficult times like these. Bill C-64 is yet another example of an empty promise put forth by the Liberals in an attempt to please the NDP and maintain power in this country. There is virtually nothing for the vast majority of Canadians.

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The document is a measly six pages long, much of which is preamble and definitions. I can almost guarantee that when Canadians were told that a pharmacare plan was coming, they were expecting a whole lot more than six pages that lack any of the necessary details like costs, timelines, formulary, which drugs are in and which drugs are out, and other relevant information. The reality is that the majority of Canadians, 79% of them, already have private health care insurance to cover their medications. Many of them are afraid of losing their plan.

The legislation, however, has become typical of the Liberal-NDP coalition government. Let us have a quote: "Bragging is not doing." I wonder who said that. I will get back to it. After eight years of empty promises, brags, Canadians have lost trust in the so-called leadership of the Prime Minister. He promised affordable housing, yet housing costs has doubled across the country. Bragging is not doing; let us remember that.

The Prime Minister promised that the carbon tax would put more money in the pockets of taxpayers, yet 60% of Canadians are paying more because of that very tax. Bragging is not doing. In fact in 2019, his then environment minister promised Canadians that the carbon tax would not exceed \$50 per tonne, stating that the price would not go up and that there is no secret agenda. However, after the election, the Liberals' hidden secret agenda came out, and the current carbon tax is at \$80 per tonne and will be going up to a whopping \$170 per tonne by 2030.

How are Canadians supposed to believe anything the government says when it breaks promise after promise, to the detriment of its own people? It does not take much to see that the sad little bill before us is simply a Liberal attempt to cater to the NDP, which has been propping the Liberals up and keeping them in power since the last election.

Since the pharmacare bill contains almost no details about how the program would actually work, I would like to touch on a similar plan that is about to be launched across Canada, more bragging, I hear. It is the Canadian dental care plan, which is set to start providing coverage. It is a great example of the Liberals' providing blatant misinformation to Canadians by omitting context.

They will tell us that the plan is a huge success because 1.6 million seniors have already signed up to participate. What they do not tell us is that Canada has only about 26,500 dentists practising in total, and fewer than 10% of them have enrolled in the new dental care plan, which also includes dental hygienists. There are eight dentists enrolled in New Brunswick. Ontario has 65 and Nova Scotia has six. P.E.I. has zero and Manitoba has seven. This is just to name a few of the provinces. Why is that? There is too much paperwork and signing of contracts, to name just some of their concerns.

Considering that Canada is already dealing with a massive shortage of doctors, the last thing taxpayers want to know and see, and have talked about many times, is the need to find yet another health care practitioner. That struggle is immense.

Another hugely alarming issue with the Canadian dental care plan that is also a major concern with pharmacare is the lack of consultation the government held with the important industry players. When it comes to the dental issue, the provincial associations

stated that the federal Liberals started consulting them only in late November, just one month before the program was announced. One dentist stated that dentists were brought in at the eleventh hour. They asked why we started so late and whether we were rushing into a program that maybe we should be putting the brakes on.

● (1750)

Again, the lack of consultation has now become a hallmark of the NDP-Liberal government's agenda, as the Liberals also failed to consult with insurance industry stakeholders during the formulation of the pharmacare bill. If this is the Liberal track record on industry consultations that have the potential to greatly impact a key piece of legislation that would affect millions, then of course we need to be concerned that the same thing could happen with pharmacare.

Misinformation is also something that needs to be top of mind when dealing with the NDP-Liberal government. Initially, the government's dental care plan was pitched as being free, and yet now we know that is not so. The program covers only some types of dental care, and it does not adequately pay providers in line with the fees that are recommended by the provincial and territorial guidelines.

Will it be the same for pharmacare? One wonders. Canadians are going to be told not to worry, and then all of a sudden be required to pay for their medications despite the promises made by the government. Since the Liberals are completely inept at creating and implementing programs that actually work, this is unfortunately what Canadians have come to expect.

Since the pharmacare plan was first announced in February, physicians across the country have been vocal about the concerns they have with how the plan would actually work. Since the bill itself contains almost no information, there is worry that instead of filling the gaps left by public and private health care coverage, the bill could actually create more gaps, with more Canadians falling through the cracks.

There is also a lot of uncertainty over which drugs would make it onto the formulary. If there are extra steps involved in this, it would place an additional administrative burden on physicians, which is frankly the last thing Canada's health care system needs right now.

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Furthermore, as we are all aware, wait times for health care in this country are longer than they ever have been. Currently, there is a median wait time of 27.7 weeks between getting a referral from a general practitioner and the receipt of treatment. This is an almost 200% increase in wait times since 1993.

We all know there are over six million Canadians without a family doctor, and we have overwhelmed emergency departments throughout Canada. Through ill-thought-out bills like the pharmacare one, the federal government would be burdening our physicians with even more paperwork and administration, instead of allowing them to provide the care that Canadians need. By increasing the administrative burden, there is also a concern that doctors, nurses and other health care providers would face greater instances of burnout, causing them to leave their professions altogether.

A very important part that the government continues to ignore is that the provision and administration of health care falls under provincial and territorial jurisdiction. It is not the job of the federal government to make decisions on issues like drug coverage, which the bill could certainly allow for. We need to respect the authority of the provinces and the territories to do what is best for their populations, as this is not a situation where Ottawa knows best.

One part of the bill that I personally take issue with is the fact that it would establish a committee of experts to make recommendations on pharmacare. The reason this concerns me is, yet again, the Liberals' track record when it comes to creating committees to create committees, ultimately doing nothing to address the issues they were created to address.

Ultimately, given that the pharmacare bill is so short on any details, we still do not know how big the committee would be and what the qualifications of the members would be. If the Liberals failed so drastically with something like just transition, which affected a small portion of Canada's population, how is anyone supposed to believe that they would handle this?

As an example, one year ago the Liberals pledged \$1.4 billion for drugs for rare diseases, yet there is still no deal with the provinces. Therefore, once again, to quote the Prime Minister, "Bragging is not doing." The NDP-Liberal coalition is all about brag and no action. Unfortunately, until the Liberals are out of office, Canadians will continue to pay the price of the Prime Minister's lack of leadership and his broken promises. It is time to end the bragging. It is time for a change, time to assist hard-working Canadians and time for a common-sense Conservative government.

• (1755)

Mr. Mark Gerretsen (Kingston and the Islands, Lib.): Madam Speaker, the member talked about a lack of consultation around the dental care program. How much consultation did he do?

Do members know what I did when the program was released? I wanted to make sure dentists in my riding knew about it. I wrote all of them a letter. My team followed up with them. We encouraged them to get involved. I visited a number of dentists. As a result, 41 dentists in my riding, which is more than half of them, are on the dental care program.

How much consultation on the dental care program did the member do in his riding, or did he not care enough about his constituents

to bother making sure that they knew they had access to the new service, regardless of which political party brought it?

• (1800)

Mr. Robert Kitchen: Madam Speaker, the member said he had 40 dentists sign up. Based on the numbers that I provided, 65 dentists in all of Ontario have signed up. It sounds like, in the Kingston area, most of the dentists have signed up for it. They are the only ones; it is interesting. The member should look at the number of dentists in Ontario. It is significantly more than 65.

To answer his question, I did consult with my colleagues in my riding, because I do happen to be their colleague. I spent many years as a professional dealing with dentists. They are all asking whether the government is stepping forward to make socialized dental care in Canada so that all dentists would have to be mandated to apply and get paid what the government says.

[*Translation*]

Mr. Simon-Pierre Savard-Tremblay (Saint-Hyacinthe—Bagot, BQ): Madam Speaker, I listened carefully to our colleague's speech. I liked the "Ottawa knows best" criticism. It is true that Ottawa, usually after crises like the one we are currently in, always tends to centralize, to leverage its authority in order to achieve greater uniformity, to deploy its powers in a tentacle-like manner, spreading everywhere, and to impose its priorities, values and rules on the the provinces.

That is also why I am not resisting the urge to rake my colleague over the coals for not supporting the Bloc Québécois's subamendment last week on opting out with full compensation.

[*English*]

Mr. Robert Kitchen: Madam Speaker, I apologize if I missed something in the translation, but I did not recognize an actual question in the statement by the member.

I think, ultimately, as the member has indicated, that we need to remember the fact that health care is a provincial issue. Dental care is health care, and it is a provincial responsibility to deal with it. The provinces determine who the professionals will be and how they will be regulated. That is up to the professional bodies, whether it is for the dentists, the chiropractors, the physical therapists, the doctors or the dental hygienists. The plans are determined by the provinces, as Quebec has done. We need to recognize that and continue to focus on the fact that it is the provinces' responsibility to make those decisions; it is not for the federal government to invade and intrude in that area.

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Ms. Leah Gazan (Winnipeg Centre, NDP): Madam Speaker, I find it hilarious that the Conservatives are protecting big insurance companies. I find it particularly entertaining that the member and his party, which would not be affected by this, including with contraception, fight so diligently against the reproductive rights of people. I find it funny.

Does the member support access to trauma-informed abortion care and access to reproductive rights, which would include free contraception care for those who do not have insurance and those who fall outside the programs, or does he think the Conservatives should just keep violating reproductive rights in real time as we are seeing in the House?

Mr. Robert Kitchen: Madam Speaker, I will say to the member, as I have said from day one when I first was running to get nominated, that I will never, ever, tell a woman what she can or cannot do with her body. As a doctor, I will provide advice and I will provide what I know, and it is up to the woman to make the decision.

Mr. Taylor Bachrach (Skeena—Bulkley Valley, NDP): Madam Speaker, I will be splitting my time with the wonderful member for Port Moody—Coquitlam.

In this debate this evening, we can lose a bit of the context, and that context is the historic nature of the legislation before us. I am so proud to rise on behalf of the people of Skeena—Bulkley Valley and speak to Bill C-64, an act that will lay the groundwork for Canada's first national single-payer universal pharmacare system, a system that is going to help millions of Canadians, including many people in northwest British Columbia. The case for this bill is—

• (1805)

Mr. Mark Gerretsen: Madam Speaker, I rise on a point of order. I believe, if you seek it, you will find unanimous consent to table this document showing the total number of dentists in Toronto alone, which is well over 500, who are under the current program, despite what the member for Souris—Moose Mountain said.

The Assistant Deputy Speaker (Mrs. Carol Hughes): Is there consent?

Some hon. members: No.

Mr. Peter Julian: Madam Speaker, on a point of order, we generally do not interrupt speeches, so I would hope that the member for Skeena—Bulkley Valley could start from the top.

The Assistant Deputy Speaker (Mrs. Carol Hughes): This is not the first time that an individual has been stopped during a speech. The hon. member still has nine minutes and 16 seconds to continue.

The hon. member for Skeena—Bulkley Valley.

Mr. Taylor Bachrach: Madam Speaker, I thank my colleague for his timely intervention.

This is a proud and historic moment because Canada stands alone in the world as the only country with universal health care that does not have some form of universal coverage for prescription medication, and the case for this bill and the case for pharmacare are exceedingly strong.

One in five people in this country have zero or poor medication coverage. Nearly a million people cut their spending on things like

groceries and heat so that they can afford medication, and one in five households have a member who did not take the medication they were prescribed because of the cost of that medication. This is something that profoundly affects the lives of the people we represent, and I am surprised, to be frank, that there is not unanimity in the House to try to expand our health care system in this way and to get people the help they so desperately need.

I will tell a really brief story. I held a meeting on pharmacare, which had attendance by nurses and health care folks in northwest B.C. and concerned citizens. One of the nurses told this story about patients she sees come into the hospital for a very routine procedure, a colonoscopy, which is something that many of us will be getting in order to detect what can be really life-threatening illnesses. I have not had one of these procedures yet, but I very much look forward to it.

In preparation for this procedure, people have to take a medication in advance that allows this procedure to take place. That medication, at the time, cost about \$40. For many of us, the cost of a \$40 prescription to get ready for an important procedure is something that is affordable. However, the nurse said she was surprised by the number of patients who came in for this scheduled procedure, went home with the prescription and never came back for the actual colonoscopy because they could not afford the \$40 for the medication.

That is what we are talking about. What happens to those people? They are not getting a diagnostic procedure that could save their lives, and some of them, a percentage of them, are getting sick and ending up back in our hospitals and in our emergency rooms. They are having to have surgery and some of them are losing their lives all because they could not afford medication that was not covered under our health care system. That is shameful and it is something that we in the House can change. We can change it today by voting for Bill C-64.

Why would anyone oppose the bill before us? We have heard some of the arguments and, frankly, it is somewhat surprising. I was listening to the member for Red Deer—Lacombe extolling what he sees as all of the various problems with it. Then he got to the fact that it would cover diabetes medication and devices, and he said something like, “on the surface of it, that is a good thing”.

This bill would be incredibly positive for a lot of people, yet we see opposition. We also see a cynical critique of the legislation, and that critique goes like this: The Conservatives say that the NDP and the Liberals call this a pharmacare bill, but it is nothing of the sort. They say that it does not go nearly far enough, and Canadians who are expecting this wonderful vision of pharmacare are going to be disappointed.

When Canadians hear that, they are going to think that the Conservatives want something even better, that they want coverage that goes even further and that would help more people, but no. What the Conservatives are proposing is to get rid of this legislation altogether and not to improve it one iota. The Conservatives have brought forward an amendment to kill it outright. That is not contributing to the conversation. It is not going to make people's lives better in this country. With all due respect, it is a cynical critique of the bill before us.

It is also incredible that in the Conservatives' opposition to pharmacare, they are parroting many of the same lines coming from big pharma. We have heard that most people will be worse off under the pharmacare program. We heard from the Conservative leader that most people already have coverage through their employer, and we heard that this law is somehow going to prevent people from getting their own private insurance. It is incredible that Conservatives and big pharma are sort of harmonizing in the same beautiful key of total nonsense. It is incredibly frustrating because none of this, of course, is true. This is a program that is going to help millions of Canadians.

• (1810)

We hear that health care is a provincial jurisdiction, yet nothing could be further from the truth because it is shared jurisdiction. If we look at the Canada Health Act on the federal government's own website, it clearly lays out that, while the provinces are responsible for health care delivery, the federal government is responsible for setting national standards and, of course, for funding health care, in part, through federal transfers. Therefore, this is very much in the federal government's wheelhouse and something I believe the federal government has a moral and a practical responsibility to fulfill.

However, despite all of this opposition from Conservatives to pharmacare, we are here on this historic day to move this bill through the legislative process and make it a reality. This is a bill that, among other things, enshrines the step-by-step implementation of single-payer universal pharmacare in our country, for the very first time, in accordance with the principles of the Canada Health Act. It is a bill that forces the government to develop a list of essential medications within a year of this bill's passing into law. It is a bill that establishes an expert committee that is going to guide the implementation and the financing of pharmacare right across the country.

I am very pleased that not only will this bill lay the groundwork, the foundation, for universal pharmacare that covers a wide range of prescription medications, but it is starting in its first phase with two major classes of medications that are going to help a lot of folks who are struggling with the costs. People in the House know what those two classes of medications are.

First is contraception, which can cost people upwards of \$200 a month, and disproportionately that cost is borne by women in our country. When it is not affordable for people, they are forced to make other choices, but sometimes they do not have choices. Ensuring that people have affordable contraception is going to improve the lives of so many people.

The other class of medications is diabetes medications and devices. Anyone who knows someone who lives with diabetes knows

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the incredible out-of-pocket costs that can come with managing the condition. Diabetes Canada approximates that the cost of type 1 diabetes is upwards of \$18,000 a year, out of pocket, and for type 2 diabetes it is upwards of \$10,000 per year, out of pocket. These are the out-of-pocket expenses that our constituents are paying. With the bill before us, as soon as agreements are struck with the provinces, this program is going to cover those costs for Canadians, and I could not be prouder for having been part of the process of making that a reality here in Canada.

I am going to leave it at that. I know that the constituents I represent want this bill. I know the health care professionals who work in our health care system recognize the importance and significance of this bill. I hope everyone in the House of Commons votes for this bill and passes it unanimously into law as quickly as possible.

• (1815)

Mr. Mark Gerretsen (Kingston and the Islands, Lib.): Madam Speaker, one of the things I find most perplexing about this entire debate is that not only are Conservatives against this bill, but it is as though they are actively rooting for its policy failure. It is like they are downplaying how many dentists have signed up. They are downplaying the impact this would have on Canadians. They keep saying that only one out of every five Canadians wants this, as though it is not a good thing to do something when one out of five Canadians wants it.

I wonder if the member can make sense of all this, the fact that Conservatives are not just against the bill but are actively rooting for the failure of this program.

Mr. Taylor Bachrach: Madam Speaker, in many ways they are rooting for big pharma, whose incredible profits are threatened by the idea of the bulk purchasing that would be enabled under a universal pharmacare plan. The hon. member across the way's question made me think about what it would be like to be debating the Canada Health Act in the House of Commons in 2024, and what arguments Conservatives would bring forward against the idea of every Canadian having the dignity of basic access to health care. I think we are very fortunate that the act got passed all those years ago, in the late 1960s, before I was born, maybe before he was born—

Mr. Mark Gerretsen: Yes.

Mr. Taylor Bachrach: Yes, we are the same age, Mark.

Now we have a chance to expand it to include pharmacare, and I think this is a wonderful opportunity.

The Assistant Deputy Speaker (Mrs. Carol Hughes): I want to remind the hon. member that he is not to call a member by his first name or his last name; however, "hon. member" is fine.

Questions and comments, the hon. member for Port Moody—Coquitlam.

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Ms. Bonita Zarrillo (Port Moody—Coquitlam, NDP): Madam Speaker, I was struck by the member's comments about someone needing to go for a colonoscopy and not being able to afford the prep. I have heard this in my riding as well. I have heard it in regards to dental care also, that they are not being able to pay the \$5 or \$10 to go to dental care.

I would just ask the member if he could share how important it is that people have basic access to medication to stay proactively healthy.

Mr. Taylor Bachrach: Madam Speaker, this is something I did not have time in my speech to get to, but the reality is that when people are able to take the medication that their doctors prescribe, they are often able to get better. When they get better, that means they are not showing up at the doors of the emergency room. They are not ending up in hospital beds for long hospital stays. We know that it costs \$1,000 a day to have someone in our hospitals, and these are all costs that are borne by our system.

The bill before us is about making people's lives better, first and foremost, but also, when we look down the road at public pharmacare, universal pharmacare, we see that it is going to save our society, as a whole, billions of dollars through bulk purchasing and through allowing people to lead healthier lives. I think that is a huge, positive move in the right direction.

Ms. Michelle Ferreri (Peterborough—Kawartha, CPC): Madam Speaker, those at home watching this may be wondering who does not want this. This is child care 2.0. However, the reality, as we know, is that, like this morning, there was a British Columbia mother who was saying that she was going to be homeless because she cannot find child care.

I just had a text from a dentist. I asked them what they thought of the dental program. The reply was that it is an absolutely amazing election slogan. That is exactly what has happened here.

My question to the member opposite, who props up the Liberals continuously, is this: Why does he think the Liberals will actually deliver this? It is almost abusive to watch what they do to the NDP because they will not deliver what they said they would. My question is this: Is he okay with that?

● (1820)

Mr. Taylor Bachrach: Madam Speaker, as I mentioned in my speech, pointing out the shortcomings of health care programs is an argument to make them stronger, not to gut them and to get rid of them altogether.

However, I will ask my colleague this question: Looking forward a year from now, when her constituents in Kawartha are looking west to British Columbia and are seeing that their fellow Canadians are getting their diabetes medication, their diabetes devices and their contraception provided for free under universal pharmacare, how is she going to explain to her constituents that they are not part of that program because her province did not get on board because she did not support it?

Ms. Bonita Zarrillo (Port Moody—Coquitlam, NDP): Madam Speaker, I really appreciated the speech by my colleague from Skeena—Bulkley Valley. He shared such amazing points today about the importance of looking after Canadians.

I am standing today, as a woman in Parliament, discussing one of the most important aspects of women's health and daily life: access to contraceptives. This health care measure is currently restricted by whether one can afford to access it or not. It should not be that way. Every time I enter this place, I am aware of how different my experiences are from the men who have not had to deal with regular menstrual cycles, painful periods, ovarian cysts, PMS and PMDD, endometriosis, menstrual migraines and unintended pregnancy. These are part of daily life when one has ovaries, starting in one's teens. Having ovaries requires management and affects everyday choices for school, work, recreation and more.

With that in mind, I am going to take a moment to read a poem by my daughter Coral. She is a writer and a poet. I wanted to share it because it shows how periods affect women, girls and non-binary people, from their very early teens. It is called *Late Bloomer*.

In the seventh grade, all my friends started menstruating,
but not me.

We would travel in a gossiping group to the school
washroom and I would listen as my
friends ripped tape inside stalls.

In high school, we had swimming in gym. I had a hard
time with a box of "easy applicators".

I cried, one foot propped up on the toilet.
I lied on the ground, tried to raise my hips and contort my
body to be comfortable.

The garbage filled with failure. I surrendered to pads.
Diapers, my friends called them.

I would hide panic as girls exchanged tampons in cute
pink wrappers. Once a pad fell out of my bag, I snatched
it up, cheeks shame red.

I concealed pads far up sleeves and deep down in
pockets. On days I forgot a pad I settled for folded tissues
and tied my jacket around my waist.

Today, I borrowed a pad from a stranger.
Her cheeks weren't red and neither were mine. bloom,
bloom, bloom

"Bloom, bloom, bloom" is how I see this bill. It is time to blossom. It is a bill that sets in place a framework to consider the needs of women, girls and transgender people who menstruate.

My message to the men in power across the globe, including in Canada, who have spent their legislative time trying to control women and their bodies, while ignoring the enhancements that are there in basic health care, is to stop it, and let this bill bloom.

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At a time when the possibility of gender equity remains elusive, what gives me hope is that in this bill, and currently in the tabled budget, the needs of women are starting to make their way onto the main stage, after 150 years. Affordable child care, free contraceptives, the red dress alert from my colleague, the member for Winnipeg Centre, a caregiving strategy and a sectoral table on care economy are all women's issues that the Conservatives and the Liberals have ignored for decades.

With that in mind, that is what causes me worry. The Conservatives in the House are rejecting these important advancements for women and, at the same time, are working against us by espousing that they would override women's charter rights on a whim. Conservatives are dangerous to women. If they ever had the power, they would immediately go after a woman's right to choose, just like what has happened in the United States. I never want to see that happen.

Not only would Bill C-64 help women as a framework for historic expansion of health care to single-payer pharmacare, but also the first rollout would give access to life-saving medication and devices for diabetics.

• (1825)

Linda, a resident in my riding, recently told me she estimates that, since she was diagnosed with diabetes over 40 years ago, she has spent over \$120,000 on medication and devices to manage it. This is unfair. She has had to spend thousands of dollars a month just to stay alive. While I am on the topic of gender equity, Linda shared that she was 26 when she was diagnosed. She went to the doctor. She was single at the time, and the doctor said to just go find herself a husband, and she would be fine. This is what happens when someone cannot afford their medication or when society decides that women should not have economic empowerment and that they would not be able to afford their medication on their own.

Even with the loss of the life of a diabetic, if they do not get their medication, the Conservatives have decided to block the pharmacare bill. While they enjoy their MP taxpayer-funded health care and dental benefits, they deny them to others who need them. With the new pharmacare bill, New Democrats know that Canadians would have the access to medication that they need, not with a credit card, but with a health care card.

This would mean that close to 10 million Canadians would not have to suffer in pain and discomfort, would not have to put their health at risk and would not have to let their conditions get worse. This would no longer have to happen. The reason the Conservatives and the Liberals have let it happen in the past is profits from big pharma, as my colleague from Skeena—Bulkley Valley mentioned.

It is about trying to keep big pharma happy, not about trying to keep Canadians healthy. We need to do the work to keep Canadians healthy, to make sure we do preventative medicine and to release the burden of the expenses of contraceptives, diabetic medication and other medications as they come out. This is why we must pass the bill as quickly as possible. People are waiting on us, and the provinces are ready to come together and make life better for people.

The NDP has gotten this victory for Linda, for all women, and for people who use contraceptives and have not been able to get access to contraceptives. All those people will be able to get access very soon, and it would roll out to be even more. They would be able to keep the money in their pockets rather than in the pocket of some rich CEO.

I want to close and to double down on the fact that this is not the time to let our guard down as Canadians and as the NDP. This is not the time to let our guard down. Ideologies south of the border are coming up into Canada. There is a conversation in the House, and the Conservatives are trying to open a conversation about removing a woman's right to choose. They are using bills like this pharmacare bill around contraceptives to have that conversation. We cannot let it happen.

Also, for all Canadians, who are paying some of the highest drug prices in the world, this is not fair, and this is legislation. This is because of the Conservatives and the Liberals before, who have let big pharma take advantage of Canadians, gouge Canadians and made Canadians sicker because of their lack of compassion and their desire to control a woman's body.

Mrs. Brenda Shanahan (Châteauguay—Lacolle, Lib.): Madam Speaker, I thank my colleague for sharing the poem by her daughter. I think it is very special.

We have come a long way, because there was a time, I can certainly remember, when talking about menstruation cycles and so on was very taboo. Here we are in the House of Commons, and we can talk about it. We need to talk about it because contraceptives are a very important priority for the pharmacare act that we are discussing tonight. I would like to hear from my colleague because she alluded to this. For people who are not insured or who may be working but are under-insured and still cannot afford the care they need, could she tell us about the stigma that can surround vulnerable groups when they are seeking proper medical care?

• (1830)

Ms. Bonita Zarrillo: Madam Speaker, I think about those who have episodic health conditions where they might go to work on a regular basis but have episodes. One I think about is debilitating menstrual migraines. A lot of teenagers go through this, and they do not necessarily have access to medication for that. Lots of teenagers who go to university are no longer on their parents' plans, or they do not have a plan and cannot get access to this. I know a number of young women who have come through my home, as I have three daughters. They have suffered because they could not afford access to any kind of medication for their menstrual headaches. It is unbelievable. They cannot work, and they cannot go to school. It takes them out of the workforce, and it takes them out of their school time. It is really not fair, and that is just because of the price of medication.

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Ms. Michelle Ferreri (Peterborough—Kawartha, CPC): Madam Speaker, I want to put on the record that the best thing we can do for women is to give them financial autonomy and make life affordable so that they can make the choice to leave an abusive relationship. Under the Liberal-NDP government, domestic violence is up 72%.

The Canadian Life and Health Insurance Association has stated that the bill “will spend billions of dollars unnecessarily on drugs for people who already have coverage.” With a cost-of-living crisis, and an inflationary deficit where people cannot afford to live, is the hon. member okay with this wasteful spending?

Ms. Bonita Zarrillo: Madam Speaker, I think that just magnifies my point. It made me think about the fact that the member here wants to control what women can have. Women can have this, but they cannot have that. We want them to go out there and work. There is a saying that says everyone should live like that, but then the Conservatives say that nobody should live like that. What I am saying is that there should not be a choice between women only having a little bit of this, but are not being given that.

In Canada, every Canadian deserves to be able to fulfill their life in work, in school and with family. Whatever their choices are, they should be able to fulfill them. Pharmacare is a fundamental piece of that, not just on contraceptive and diabetic medication, although we are starting with those two, but with all kinds of medications that keep people alive in this country.

[*Translation*]

Mr. Yves Perron (Berthier—Maskinongé, BQ): Madam Speaker, I would like to thank my colleague for his speech, and I want to share a secret: I find it difficult to sit with the NDP members. I should start by saying that, for the most part, they are very nice and I get along well with them. Our values are very similar. The problem is that they are not sitting in the right Parliament. The notion of areas of jurisdiction seems abstract to them. They cannot seem to grasp that concept.

Perhaps it is because they are not from Quebec and they do not understand that, in Quebec, the Quebec government plays a greater role in people's lives than other provincial governments. I find it difficult because we often find ourselves voting differently, even though we share the same values and agree on the fundamentals.

The question I would like to ask my colleague is this. Considering that, through the pan-Canadian Pharmaceutical Alliance, the matter of group purchasing to reduce drug costs has already been settled and therefore that argument does not hold water, would my colleague still be able to sleep at night if the government were to say that Quebec has the right to opt out with full financial compensation, that everyone has pharmacare and that everyone is happy?

[*English*]

Ms. Bonita Zarrillo: Madam Speaker, I have stood many times in the House to say how wonderful it was and is to raise children in Quebec. There is access to many programs that are not available across the rest of the country. I have spoken before about the access to swimming lessons, diving lessons and sports, which are all affordable and accessible in Quebec. Everyone should have access to those types of life-changing and family-changing opportunities. I

think there is always a way for the Bloc to come and want that for everyone in Canada.

• (1835)

[*Translation*]

Mr. Mario Simard (Jonquière, BQ): Madam Speaker, I will be sharing my time with my colleague, the member for Berthier—Maskinongé, for whom I have a great deal of respect. I hope I do not embarrass him over the next ten minutes.

I am not sure if my colleagues heard the Prime Minister when he said that people, and I am quoting him because I do not speak this way, could not care less about jurisdictional bickering. That is what the Prime Minister said when asked about pharmacare and dental insurance. A recent Leger poll shows the opposite, that 82% of Quebecers hope that the federal government will respect provincial jurisdictions. What is more, 74% of Quebecers believe that Ottawa should get approval from the Government of Quebec before implementing programs like pharmacare and dental insurance.

Let us settle this right now: People do care about jurisdictions. They care because they know full well that the federal government falls short when it comes to supporting social programs that fall outside its jurisdiction. Let us set that aside. I would like to come back to something that seems rather important: Does Quebec society need the federal government to implement social programs? Is Quebec society lagging behind the NDP and the Liberal Party in social democratic matters? I have to say no, it is not.

The best family policy in North America is in Quebec. The most generous family policy is in Quebec, with parental leave and child care, which the federal government tried to copy 20 years later. Quebec is the least expensive place in North America to get a post-secondary education. Quebec is the most generous in terms of loans and grants for post-secondary education. Quebec also has the most progressive tax system. Quebec's inequality index is 0.31, as measured by the Gini coefficient. This compares favourably with Sweden's index of 0.29. If we look at Canada, we see that Canada has an index of 0.37. This is pretty close to the United States, at 0.42, which is one of the worst in the G7.

Quebec no longer needs to demonstrate that it is a very generous society when it comes to social programs. I am going to say it again, although I am certain my colleagues have been saying it all day: We already have pharmacare in Quebec, and while it is not perfect, it does exist. Furthermore, Quebec is in the process of trying to make the program meet Quebecers' needs more efficiently. Why are we studying a federal bill to introduce pharmacare? Is it so the Liberals can maintain their coalition with the NDP? Of course it is. My colleague from Mirabel, who is a bit of a rascal, frequently says that dental insurance was put in place because the NDP is kissing the Liberals' feet—

The Assistant Deputy Speaker (Mrs. Carol Hughes): I am sorry to interrupt the member, but there seems to be a telephone near his microphone. It is bothering the interpreters. We must ensure their health and well-being.

The hon. member for Jonquière.

Mr. Mario Simard: Madam Speaker, I apologize.

I was saying that the member for Mirabel, who is a bit of a rascal will go so far as to say that the NDP wanted to bring in dental insurance because they are spending so much time kissing the Liberals' feet that they are going to get a fungal disease. I would not say something so asinine. I think it is disrespectful, but it is one way to see who might be interesting.

When it comes to pharmacare, Quebec has been well ahead of the rest of Canada since 1996. No other province has really expressed a desire to have such a program. By all accounts, with the exception of Quebec, the rest of the Canadian provinces are ambivalent about having pharmacare.

The thing that upsets me most about this is that it is a prime example. The Liberal-NDP coalition is a prime example of “Ottawa knows best”.

Take the leader of the NDP, for example. A while ago, he drafted a letter to Quebec's minister of health. While he was writing his letter to Quebec's minister of health, he decided he would also contact Québec solidaire, the NDP's sister party in Quebec City. He therefore sent the same letter to Vincent Marissal, a Québec Solidaire MNA.

In his letter, the NDP leader told them that he was writing to explain why pharmacare was necessary. Talk about blatant paternalism. As I was saying, he wanted to explain why pharmacare was necessary. In Quebec, however, we have pharmacare already, of course, and we have made more progress on social issues than they have. Unfortunately for the NDP leader, he seemed to have forgotten at the time that Quebec already had pharmacare. Had he been a little more on the ball, the NDP leader could have asked his member for Rosemont—La Petite-Patrie to contact the Québec solidaire MNA for the provincial riding of Gouin. Both of them are in the same office and in the same building. The member for Gouin could have explained to the member for Rosemont—La Petite-Patrie the finer details of this issue and the fact that Quebec already has pharmacare.

This is a prime example of centralizing federalism, or even what I call predatory federalism, which indiscriminately interferes in provincial jurisdictions.

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As Quebecers, we know that entrusting the development of our social programs to a neighbouring nation that does not have comparable coverage is out of the question. That would make no sense. Why would we entrust the development of our social programs to a government that cannot even manage its own jurisdictions? The French word for area of jurisdiction, “champ de compétence”, includes the word “competence”. When I think of the federal government, what immediately comes to mind is Phoenix, the passport crisis, its chaotic management of the border, immigration management without any real indication of acceptable integration thresholds, and ArriveCAN. The federal government is not doing a competent job of managing its own jurisdictions.

Despite that, the feds want to tell us how to manage our social assistance coverage in Quebec. Quite frankly, it is a bit insulting. Asking Quebecers to let Canadians manage their social programs is like asking Canadians to let Americans manage their drug coverage. It would make absolutely no sense.

I want to point out something else that is rather important: Historically, the federal government has been unreliable when it comes to social intervention. A case in point is the occasion that members know I love to talk about, when Jean Chrétien, in a moment of clarity, admitted at the G7 that he could balance his budget by cutting transfer payments without ever having to pay a political price. The provinces are the ones who paid the price at that time. Let us all remember the drastic cuts that the Liberals made to health care after 1996-97, namely, \$2.5 billion ongoing in 1996 and \$2.5 billion in 1997.

Thus was born and introduced the fiscal imbalance. Who paid the price? Lucien Bouchard. Everyone said that the birth of neo-liberalism in Quebec began with Lucien Bouchard and the shift to ambulatory care, but that was certainly not the case.

● (1840)

I will conclude by reading the motion that was passed unanimously by the National Assembly. It was tabled in 2019, when pharmacare was first being proposed.

THAT the National Assembly acknowledge the federal report recommending the establishment of a pan-Canadian pharmacare plan;

THAT it reaffirm the Government of Québec's exclusive jurisdiction over health;

THAT it also reaffirm that Québec has had its own general prescription insurance plan for 20 years;

THAT it indicate to the federal government that Québec refuses to adhere to a pan-Canadian pharmacare plan;

THAT it ask the Government of Québec to maintain its prescription drug insurance plan and that it demand full financial compensation from the federal government if a project for a pan-Canadian pharmacare plan is officially tabled.

All parties agreed to sign the motion, including the Quebec Liberals for the Liberal Party. For our NDP colleagues, the Québec solidaire people also signed.

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That explains why we will be voting against this bill.

• (1845)

[English]

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, the Bloc party's position on the legislation does not surprise me. For separatist reasons, the Bloc does not believe in national programs. My issue is more with the Conservative Party's opposition to the legislation.

When listening to the speeches, Conservatives seem to acknowledge that the federal government has no role to play in health care. I would like to remind my Conservative friends across the way, as well as members of the Bloc, that there is a thing called the Canada Health Act. Canada does have a responsibility. A vast majority of Canadians, in all regions of the country, recognize that the federal government has a role to play in health care, and that goes beyond just handing money over to provinces.

We have the health care system we have today because the province of Saskatchewan kind of started it, but the federal government made sure all Canadians would be able to receive it. Would the member not acknowledge that, at the very least? Is that not a good thing?

[Translation]

Mr. Mario Simard: Madam Speaker, it is rather remarkable when you think of it. When the parliamentary secretary was asked whether he acknowledged that the federal government had a role to play in health, he said yes. In the same sentence, he said that its role was not limited to transfers of funds. However, the federal government does not manage any hospitals or any doctors. It wants to have a role in health but has no health-related expertise.

In the beginning, the health system was a 50-50 proposition. For every dollar invested in health, 50¢ was provided by the federal government and 50¢ by the provincial government. Today, the federal government provides barely 22¢. If the federal government was serious, it would invest more in health care than it offered, and it would address the criticisms of the Parliamentary Budget Officer and the Conference Board, who have stated that provincial finances will eventually become unsustainable because of skyrocketing health costs.

That is your role. It is not your role to meddle in jurisdictions that are not yours.

The Assistant Deputy Speaker (Mrs. Carol Hughes): I would remind the member to address his comments through the Chair.

[English]

Questions and comments, the hon. member for North Island—Powell River.

Ms. Rachel Blaney (North Island—Powell River, NDP): Madam Speaker, this is a place of debate. We are looking at complex issues and trying to find solutions that would better the reality of Canadians across the country. I believe and understand that bulk buying would allow the cost of medications to go down a lot.

Is there a way the member could envision a respectful process that really looks at us buying collectively, as a country, to see those costs go down, while also honouring the provincial distinctions?

[Translation]

Mr. Mario Simard: Madam Speaker, if we want a robust system, then the simplest thing to do would be for the federal government to stay out of what is happening in Quebec, which is in negotiations with the large pharmaceutical companies.

What the federal government managed to do was to negotiate prices that are worse than what Quebec already had. That is one sign that the federal government does more harm than good when it interferes in areas that are not under its jurisdiction and puts together a poorly thought-out piecemeal program to score election points. That is what is happening here.

If the federal government wants to implement this program, then it needs to come to an agreement with the provinces first. That will help the government to avoid many pitfalls, to avoid wasting public money for absolutely nothing and to respect provincial jurisdictions, which is what we are asking it to do.

Mr. Jean-Denis Garon (Mirabel, BQ): Madam Speaker, in his arrogant comments that I must say were also ignorant, the member for Winnipeg North said that Ottawa supposedly has powers over health care. He cited the Canada Health Act, which is a manifestation of the federal government's spending power, which Ottawa, which has more revenue than it needs for its own responsibilities, is using to give itself the right to impose conditions on Quebec in Quebec's own jurisdictions.

I would like my colleague to explain whether this is a manifestation of the fact that Ottawa takes in more revenue than it needs to deal with its own responsibilities. I would also like him to tell me, once and for all, why this justifies Quebec having a right to opt out with full financial compensation for programs under Quebec's jurisdiction.

• (1850)

Mr. Mario Simard: Madam Speaker, what a valid and interesting question. My colleague is absolutely right. The Séguin report demonstrated that best. Mr. Séguin, who was Quebec's finance minister, was not a sovereignist, but a federalist. In his report, he clearly demonstrated that the federal government's revenues are much higher and that its expenses are smaller, which means it is constantly putting pressure on the provinces. In the next few years, when there is a Conservative government, we are going to see transfer payments reduced, and it is the provinces that are going to be blamed. Such is the Canadian federation.

Mr. Yves Perron (Berthier—Maskinongé, BQ): Madam Speaker, I commend my hard-working colleague from Jonquière on his brilliant speech. My friend is always a hard act to follow.

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I wanted to begin my speech by talking about the Quebec National Assembly motion, but my colleague just read it, so I will not repeat it. I will simply add a little to the speech by my colleague from Jonquière, who rightly mentioned that a unanimous motion in the Quebec National Assembly means that all the political parties adopted it. It was not just the separatists, as the parliamentary secretary opposite claims. It was adopted by all the MNAs from across Quebec, including the members of the Liberal Party—the sister party to the federal Liberals—the members of Québec Solidaire, who have a lot in common with the NDP, and of course the members of the Parti Québécois, who have more in common with us. There are no Conservatives in Quebec, because Quebeckers do not vote Conservative, which is not bad news in and of itself. It is important to understand that all the political parties in the Quebec National Assembly asked for the right to opt out with full compensation. Based on that, it seems to me that the next step is simple.

I am somewhat disappointed with the answer that my NDP colleague gave earlier. I admitted quite candidly that I find it difficult to work with the New Democrats. On the substance, our values often closely align in that we want to take care of people and we are progressive-minded. It is on the form, the “who needs to do what”, that they differ quite significantly. The New Democrats want to trample on the jurisdictions of the provinces and Quebec and tell them what to do. When I talk about that, I am told that members of the Bloc Québécois should want Canadians to have pharmacare. Of course we want Canadians to have pharmacare. I want to make an important clarification. The Bloc Québécois is not here to hurt the rest of Canada. We are here to defend the interests of Quebec. If we can help the rest of Canada, then all the better.

We are not opposed to that. All we are saying is that, in the fine system the government wants to put in place, we want our fair share of the money. We are glad this is happening. It is long overdue. Once again, in terms of social programs, Ottawa is way behind Quebec. Quebec has had a similar program for 18 years. We are glad the rest of Canada wants pharmacare. Go ahead. All we are asking is that Quebec be given the money it is entitled to, because we already have a plan that works well. It is not perfect, but it works well. There is not a Quebecker today who does not have pharmacare. It is important to point that out. Quebec is ahead of the curve in this area, as it is in day care and plenty of other areas. I will make a list for my colleagues a little later. The point is that we do not need the federal government for those things.

That highlights, in big fluorescent letters, the Canadian problem with the fiscal imbalance. It highlights how toxic federalism is for the Quebec nation. The federation claimed that we should form an alliance and work together for the common good by establishing jurisdictions for the provinces and Quebec in order to respect the regional disparities and priorities of each province and territory, since priorities cannot be the same in Alberta and Quebec. The people of Alberta might make different choices when it comes to pharmacare and health care. That might happen and that is fine. They can do what they want. As long as they are getting the money from the taxes that they paid, then they are entitled to their own services. They can make their own choices.

Quebeckers have already made that choice. The government seems to be acting out of contempt, ignorance or snobbery. I am not

sure which term to use. I think contempt is the most appropriate. We know that Quebeckers have been doing that for a long time, but since the government is under no obligation this time, it is going to go over our heads. It is going to steamroll over us. It will absorb our system and replace it with the great big Canadian system. An exception was allowed for child care, however. I would like the parliamentary secretary to talk to me about child care. How are things going with day cares? Are Canada's day cares in trouble because Quebec got the right to opt out with full compensation? I do not think so. Things are just better in Quebec's day care centres because we have a little more money now than before. That is all we want. We are not out to hurt anyone.

• (1855)

That being said, the legislation sets out some fine principles. It says it will respect the principles of the Canada Health Act. This program will be publicly administered. We like that it will be publicly administered because it is different from the dental care plan, which is being entrusted to a private insurance company. When things are subcontracted to private companies, we know what happens. We recently saw what happened with ArriveCAN, and we do not want to see that again. This waste of public money was atrocious. However, even if the program is publicly administered, if a federal system is imposed on top of Quebec's system, there will inevitably be friction and inefficiency. The government says it is going to come up with a list of drugs. Quebec already does that. Are the feds going to check our list? How will this work? If the federal Minister of Health or the committee comes up with a different list, what will happen then? That is what we do not want. We do not need it.

I will address the Liberals through the Chair, since the Speaker has specified that we cannot address other members directly. We do not need the Liberals to administer pharmacare for us. We have our own system, period.

The bill states that the federal government will have to provide financial support to the provinces through agreements. Could an agreement consist of the right to opt out with full compensation? Could Ottawa simply respect the fact that Quebec already has something in place, that we do not want to change it, that our system is working fine and that we would improve it if we had more money? Would that ever be possible? Unfortunately, that does not seem possible.

As for the federal government's role in health care, it comes from spending power. My colleague from Mirabel did a good job explaining this issue. The parliamentary secretary may find me too boring, but as I see it and as Quebeckers see it, the federal government's role in health care is to transfer money. Its role is to transfer money because the federal government gets roughly half the taxes but does not have half the responsibilities. We have repeated this so many times in the House, but it does not seem like many people are listening or else people simply do not understand. When I said earlier that we should be given the right to opt out with full compensation, it was taken as me saying that I did not want Canadians in other provinces to have pharmacare. We have never said that.

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The bill also indicates that a committee of experts must be established within 30 days to look into the operation and financing of national, universal, single-payer pharmacare and to figure out how it could work. This will be done for the rest of Canada, because Quebec wants the right to opt out with full compensation.

I will warn my colleagues that my speech today will be repetitive. We want the right to opt out with full compensation because the federal government has no business interfering in this area. The bill does not in any way recognize what is being done in Quebec right now. It is barely mentioned. There is no recognition of Quebec's expertise, yet in their speeches, the government members are saying that Quebecers were forward-thinking, that they are going to take inspiration from Quebecers and that they are going to implement a similar system everywhere. Why would they do away with our system to implement their own? That is the logic.

I am a separatist; it is in my blood. I always end up talking about the fact that the federalist parties are unable to live up to the contract they shoved down our throats in 1982. It does not seem that hard to me. We are demonstrating our good faith. Not only did we disagree and not sign, but we are working within those confines because we have had no choice since 1982. When members of the Bloc Québécois sit in the House, we rigorously respect the institutions.

Despite that, when we asked for compromises on MAID, when we moved a minor amendment that would have put Quebec another 20 or 40 years ahead of the rest of Canada, socially speaking, we were told no. When we ask for the right to opt out with full compensation, we are told no, even by people who have been telling us all day that Quebec's jurisdictions must be respected. Those people voted against this proposal. The way they vote should reflect what they say during the day.

As for the proposal about the oath to the King, it would not have cost anyone anything. We were saying that we would respect a Constitution that we did not even sign. They said that even that was far too much, and on top of that, they sang *God Save The King* at us.

• (1900)

So be it. Let them keep attacking Quebec institutions.

We are going to get ready. In a few years, we will have a good debate, and when the federal government comes to us with its red flags, the decision will be already have been made and we will be independent.

[*English*]

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, I am looking for clarification from the Bloc members. They seem to give the impression that prescription drugs are free in the province of Quebec. I would ask the member if he could, for clarity purposes, give an indication of whether people are charged any sort of deductible or fees.

Different provinces have different mechanisms. Some have private and some have public. I am wondering if he could expand on

exactly what type of plan there is in the province of Quebec and how it applies, in particular for contraceptives.

[*Translation*]

Mr. Yves Perron: Madam Speaker, it is true that contraceptives are not yet covered. That is why we need money. We are going to improve our system.

Since my colleague is asking questions about how it works, I will quickly explain. We have a mixed system in Quebec. People who are not covered by private group insurance pay, if I remember correctly, between \$0 and \$731 in premiums per year, depending on their income. That is how it works for people in the public system. For everyone else, the employer deducts an insurance premium from the employee's earnings.

I should also point out that ours is the most progressive taxation system in North America. The tax rate is income-based. There is no better place in North America for that.

The Quebec system is certainly not perfect, as I said in my speech. However, we are going to improve it. All we have to say to the government is let us manage it on our own.

Ms. Marilyn Gladu (Sarnia—Lambton, CPC): Madam Speaker, I studied the pharmacare system when I served on the Standing Committee on Health. The Liberals did not do anything until they introduced this bill.

The Quebec system has a list of drugs, a formulary, and I think it is the best system in the country. What does the member think about the fact that this bill targets only two drugs for this pharmacare system?

Mr. Yves Perron: Madam Speaker, I thank my colleague for her intelligent question and for recognizing that Quebec's list is working well.

We have a good system, but it could be improved, as I mentioned earlier. That is why we want the money. We are often told by government members that we, the Bloc, see the feds as an ATM and that all we want is our money. Well, it actually is "our" money, since it is our citizens who paid the taxes, so, yes, we want our money in order to provide services to Quebecers in our areas of jurisdiction.

To finish answering my colleague's question, the list could certainly be improved. We sincerely hope so. My biggest fear, however, is that the federal government will come up with a list that will likely be much worse than Quebec's, because when it comes to social issues, I am sorry, but Quebec is ahead of the curve.

Mr. Peter Julian (New Westminster—Burnaby, NDP): Madam Speaker, I like my colleague a lot, but I find it hard to accept that the Bloc Québécois is refusing to listen to the people in Quebec who are in favour of this bill.

The Centrale des syndicats démocratiques, the Confédération des syndicats nationaux, or CSN, the Centrale des syndicats du Québec, or CSQ, and the Fédération des travailleurs et des travailleuses du Québec welcome the introduction of this bill.

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Luc Beauregard of the CSQ said:

Quebec's hybrid system, with a public plan and private plans, has not lived up to its promises. We think it should absolutely not be used as a model for the rest of Canada. It is a costly, ineffective and unfair plan.

Quebec's unions say that we must pass this bill. Why is the Bloc Québécois not listening to these voices in Quebec?

• (1905)

Mr. Yves Perron: Madam Speaker, we can quote unions, too. The CSN is on the side of Quebec independence. I do not know if my colleague agrees with them on that point. I am guessing he does not agree with them on everything.

The unions know we are part of Canada for now, and they want more money so their members will be able to pay less for their medication.

When we meet with them and explain that if the federal government gets involved, there will be redundancy, it will cost more, it will be less efficient, and that it would be much better if we had our own money, I think that, at the end of the day, they agree with us.

We obviously place great trust in the members of Quebec's National Assembly, who have sent out a clear message.

[*English*]

Mr. Kevin Lamoureux (Parliamentary Secretary to the Leader of the Government in the House of Commons, Lib.): Madam Speaker, it has been interesting to listen to what members have to say about Bill C-64. In some areas, I am not surprised. In other areas, I am surprised. Let me provide a bit of an overview before I get into more detail.

When I think of pharmacare and the potential that pharmacare has for all Canadians, I think that we undervalue and underestimate the degree to which Canadians as a whole would support not only the concept, but also the implementation, of a true pharmacare program. This is not new for me. I have been talking about pharmacare for many years. I have been an advocate for it because I understand and believe in the benefits of a national program.

There is no province or territory in Canada that has absolutely free prescribed medications for its population. Everything depends on the province that one is in. It could be based on age or affordability, but there are all sorts of different variations. There is public sector participation and private sector participation. There is a wide spectrum, a smorg, of different ways that pharmaceuticals are being delivered in Canada. That is the reason I asked the Bloc member to provide more detail of the plan in Quebec. Someone will stand up to say it is free in Quebec, but this bill clearly demonstrates that it is not free.

Many would say that, if we have to pay a deductible or an annual premium, and if things are not in it that should be incorporated, it is not free. I am glad the member said that there is room for improvement. No matter what program we are talking about, there is always room for improvement. I suggest that the way we should be looking at the whole issue of pharmacare is to take a holistic approach to the expectations people have for health care in general.

I have said many times in the past how important health care is to all people in Canada, in all regions of our nation. That has not

been lost on the government. The Bloc will say it does not want Ottawa to be involved, other than to hand out money. That particular attitude does not surprise me, and I will add further comments on that in a bit.

What really surprises me is the Conservative Party's approach to health care. It is demonstrated with Bill C-64. People need to be aware of this. At the end of the day, we value and treasure health care here in Canada. The Canada Health Act protects the integrity of the system in all regions. It is one of the reasons the federal government allocates the billions of dollars it does for federal transfer payments.

We have seen a national government and, in particular, a prime minister, our Prime Minister, who has taken a health care initiative, recognizing how important it is to Canadians. We are looking at ways to enhance it, to build a stronger health care system. Nationalized health care or the Canada Health Act are established, and many other countries today that have that form of legislation or that sort of delivery of health care have already incorporated a national pharmacare program.

• (1910)

One does not have to be a Liberal or a New Democrat to see the benefits of it. I used to be the health critic in the province of Manitoba, and I understand just how critical medicine actually is to our health care system.

We can think about it in the sense that, if a person gets sick and goes into a hospital, they receive medications in that emergency setting. I do not believe any province is actually charging for that. This is virtually universal now across Canada. It might be because of an ulcer issue, some sort of a bleed or any other need that might be there. If a person has to stay in a hospital facility for however long a time, the hospital staff does not say, "Well, here's a bandage. By the way, you're going to have to pay for that." Or for medication, maybe a painkiller, they do not put out their hand, saying, "We want money before we inject the painkiller."

However, the moment that person leaves the hospital, then it changes. This may not happen in every province, as some provinces might cover prescribed medications more than others, some might not charge as much, some will have a deductible and, as I said, some will have those annual premiums. What happens, generally speaking, is that the individual leaves the hospital and finds that now they are going to have to start paying for the medications.

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I cannot tell members how many 55-plus facilities, personal care facilities or independent living facilities I have been to where they talk about the cost of medications, with diabetes being one of them. They will tell us, "Look, we cannot afford the medication." As a result, I would suggest that there are many people who end up going back to hospitals because they are not getting the medications they require. This is because of decisions they have actually had to make in terms of buying and purchasing the medication versus food or possibly rent, or the amount of medications that are required and the bill that is associated with that. Those are the types of things that end up costing communities, society and the taxpayer a whole lot more when that individual ends up returning to the hospital because they were not taking the medications that were necessary in order to keep them out of the hospital facility.

The problem with the debate on the pharmacare issue is that I would have liked to hear more about, collectively as a House, seeing the value of this and that we want to move forward. This is what Bill 64 is doing; it is moving us forward on a very important issue. I would rather have seen everyone coming to an agreement that, yes, this is good stuff, we should be supporting it, and then adding value to that.

I think of Kardene, whom I met at a local restaurant on a Saturday. She was talking about the issue of the shingles vaccination and how this is something people should not necessarily have to pay for. I raised that with some of my colleagues.

An hon. member: Oh, oh!

Mr. Kevin Lamoureux: Madam Speaker, I know it is not on the list. At the end of the day, some provinces, from what I understand, provide coverage for shingles vaccination for those 55 and over, or maybe 60 and over, whereas some provinces do not. However, I was suggesting, by bringing it up, that this is the type of discussion I would like to hear more about, but not in terms of how we keep Ottawa away from the issue of pharmacare or developing a national program. I do not think that is what our constituents want to hear. I believe they want to see consistency, where they can, in the different regions of our country.

● (1915)

I have presented many petitions in the House on the issue of pharmacare. I have consulted and talked about pharmacare at the door for years. I understand who has what kind of responsibility in health. As I said, I was a health care critic in the province of Manitoba.

However, I do not understand denying the opportunity for a federal government to participate in providing contraceptives or diabetes medications. I do not understand how opposition parties could oppose that, no matter what province they are from. Tell me a province, and I say that to all members, that provides any form of support for contraceptives today. I am not aware of any, but I could be wrong on that.

How could anyone say that the legislation would not be of benefit for all Canadians? It is a major part of the legislation. When we think of diabetes, we are not talking about a few hundred or a few thousand Canadians; we are talking about hundreds of thousands of Canadians who would be affected by Bill C-64.

What are opposition members afraid of? If they were truly listening to what people are saying in their communities, I would suggest that they should talk more about the issue of health care. I talk a great deal about health care in my riding. I understand why it is so important.

An hon. member: It's provincial.

Mr. Kevin Lamoureux: Madam Speaker, a Conservative heckles across the way, and she is consistent with other Conservative members who say it is a provincial responsibility. That is the attitude. We can remember, at the beginning, I said that the Bloc does not surprise me. I understand why Bloc members do not support it. It is a separatist party. It would just as soon Ottawa hand over the money, then Quebec would take the money and develop the programming.

In contrast, the Conservative Party thinks it is a provincial responsibility. People need to be aware, because it is the same as the member's off-the-cuff heckle. I would suggest that it is not just a provincial responsibility. If the member truly understood the Canada Health Act and, more importantly, her constituents, she would quickly realize that it is not just a provincial responsibility.

Even when I was in the Manitoba legislature, I argued and articulated that health care is not solely the responsibility of the Province of Manitoba. I like to think that, at the end of the day, all provinces have a responsibility to follow the Canada Health Act. When I talk to people about the pharmacare program and Bill C-64, it is a positive discussion. I have yet to hear anyone, outside the Conservative Party, tell me that Ottawa moving forward with respect to a national pharmacare program is a bad thing. I cannot recall anyone saying that we should not be doing this.

That might precipitate a few emails to me, but at the end of the day, I believe it is because people truly appreciate and understand the value.

● (1920)

That is why I said before the interruptions that one has to take a holistic approach to health care. Let us look at what has happened since 2015, when a new Prime Minister was elected and the agenda of health care started to change in a very positive way. It was not that long ago, and I referred to this earlier, that we actually had the Prime Minister in Winnipeg at a press conference at the Grace Hospital. My colleague would be very familiar with the Grace Hospital. At the end of the day, we had the premier of the province, the provincial minister of health, the Prime Minister and the federal Minister of Health. We talked about the future of health care and how the \$198 billion over 10 years would have a positive impact not only for today but for tomorrow, thinking of generations ahead. We talked about how it would impact the province of Manitoba.

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Let us think about the number of agreements that have been achieved by the government with the different provinces and territories and indigenous community leaders, all dealing directly or indirectly with the well-being and health of people. Something that was missing previously was the type of financial commitment, along with the sense of co-operation. Then we look at the type of national programs that we would bring in, which would make a difference.

People talk about the dental program as an example. Having a dental program ultimately helped literally thousands of children over the last year, including children who would not have been able to see a dentist or get some of the dental work that they received as a direct result of a national program. There are actually children in the province of Manitoba who end up going to emergency departments because their dental work has been neglected. Moving forward with a dental program is a good thing.

We just came out with the national food program, where we are delivering more nutritious food for children throughout the country. Hundreds of thousands of children will actually benefit from the program.

That is why I said that health care is a lot more than just a hospital facility. People need to look at everything from independent living and community living to what takes place in our schools. They need to think in terms of the medications; the bill is about getting people talking about medications and the important role they play in health care. Along with that, I would suggest that there is a general attitude that says we are committed to the Canada Health Act and to making sure that we continue to provide the type of progressive programs that would complement the health and well-being of Canadians. That is the way I see Bill C-64. It complements the Canada Health Act, and people should not fear it. They should accept it and look at ways in which we can improve upon it.

We often hear about the issue of bulk buying, as an example, and the hundreds of millions of dollars that have been saved in that area. I would suggest that we could do even more. I look forward to seeing the ongoing debate on this very important issue. I would hope that my Conservative friends, in particular, would revisit their positioning with the idea of getting behind the legislation and voting in favour of it.

• (1925)

Mrs. Cheryl Gallant (Renfrew—Nipissing—Pembroke, CPC): Madam Speaker, not too long ago, at the beginning of this year, there was a shortage of Ozempic, which is a medication diabetics take. For some diabetics, this was the only type of medication that would help them with their particular condition. There was a shortage and there was not enough to go around. With the government in charge of deciding who will get this life-saving medication in the event of another shortage, because there will be one, how will the government decide who lives and who dies?

Mr. Kevin Lamoureux: Madam Speaker, look at the options of the Conservative Party and what the Conservatives would be saying. They would be saying not to go to them because they do not care. They would tell people to go to the provinces or anywhere else but not to Ottawa, because the Conservative Party does not believe that Ottawa plays a role when it comes to the health and well-

being of Canadians. If this debate we are having today was on the Canada Health Act, the Conservative members of Parliament would be instructed by their leader to vote against it. They do not believe in—

An hon. member: That is not right.

Mr. Kevin Lamoureux: Yes, it is true. That is what we are—

The Assistant Deputy Speaker (Mrs. Carol Hughes): Order. It is not about having debate back and forth unless someone is recognized. I would ask the hon. parliamentary secretary to ignore the comments that are being made on the other side.

I would also ask members on the other side to wait until they are recognized to make comments as opposed to heckling or trying to ask other questions.

The hon. parliamentary secretary.

Mr. Kevin Lamoureux: Madam Speaker, think about it. Many Conservatives have stood in the chamber and said that health care is a provincial responsibility. I for one believe what they are saying is what they believe. If that is what they believe, Canadians need to be concerned that the Conservative Party of Canada today has dropped the issue of being progressive and will cut health care. That is the bottom line coming from the Conservative Party.

[*Translation*]

Mr. Yves Perron (Berthier—Maskinongé, BQ): Madam Speaker, let us take things down a notch by asking a fundamental question. I have a two-pronged question for the parliamentary secretary.

First, does my colleague think that the child care program is a good program? Does he think that it works well across Canada?

Second, does he not think that the pharmacare program could work just as well, if the federal government would respect Quebec and its jurisdictions for once and give the Government of Quebec the money that belongs to Quebecers? That would not cost the rest of Canada anything. This is just a matter of respecting the systems that are already in place and those who blazed the trail.

• (1930)

[*English*]

Mr. Kevin Lamoureux: Madam Speaker, I think the Province of Saskatchewan led the way, which encouraged Ottawa to ultimately come up with the Canada Health Act, and today Canadians have a fantastic health care system. Sure, there are some imperfections there, but at least we have a quality national health care program.

The Province of Quebec had a wonderful child care program. Ottawa was able to look at the Quebec example and establish a national child care program that all provinces have signed on board with, thereby ensuring that we have a strong, healthy national health care program. I think Ottawa is in a good position to be able to deliver for Canadians in all regions of the country and I would hope we would get participation. I would encourage the provinces to look at ways we can continue to work together in certain areas to ensure that we have healthier communities.

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Ms. Leah Gazan (Winnipeg Centre, NDP): Mr. Speaker, I know that it was the NDP who pushed for the beginning stages of this pharmacare plan. I am very proud that the NDP government in Manitoba already has free contraception in place. I am glad that the Liberals are finally coming on board, after a lot of coaxing.

However, despite the Liberals saying they support the right to choose, they have not done their due diligence in ensuring access to safe, trauma-informed abortion care, including out east where women cannot even access abortion. Does my hon. colleague agree that the government is responsible to ensure that women can access safe, trauma-informed abortion out east and that the government needs to do more to uphold that right?

Mr. Kevin Lamoureux: Mr. Speaker, whether it be the Prime Minister, members of cabinet or members of Parliament within the Liberal ranks, I think that we all have been very strong advocates on that particular point. I would suggest to the member that there is potential. As I cited, Saskatchewan played a very important role in regard to health care. Quebec played a very important role in regard to child care. I would love to see Manitoba play an important role on the further development of a pharmacare program that would be something that we could share with different provinces. I believe the best way we can deliver the best type of pharmacare program would be to have different levels of government working together for the betterment of Canadians.

I am an optimist. I am going to hold out and believe that the Province of Manitoba and others will seriously look at ways to make the program more successful.

Hon. Bardish Chagger (Waterloo, Lib.): Mr. Speaker, it has been quite a fruitful debate today. It has been interesting to hear the diversity of perspectives and experiences as to what different provinces are doing.

I know that here, in the province of Ontario, it has been really challenging to have the provincial government step up at the level that it should, so the federal government has been doing more than its fair share. To have a partner, as the member referred to, would be quite interesting. To hear what other provinces are doing, it really does make me think that, if other provinces can do it, would it not be great to see my province able to do that? Perhaps there is something that Ontario is doing that other provinces could do.

What I would like to hear from the member is really on the matter of pharmacare. I know he has stood up in the House numerous times in regard to petitions and his constituents. Within the riding of Waterloo, constituents who have access to pharmacare have been saying, great. Constituents who do not have access say they want to have that access to pharmacare and they want access to medication.

Is the advancement of this legislation something we can take for granted? I know today there have been comments hoping everyone is unanimously supporting it. Can the member just reiterate and share what he has been hearing within this chamber as to the voices of all parties? Are all parties in support of this to ensure that every Canadian has access to pharmacare?

Mr. Kevin Lamoureux: Mr. Speaker, what has become very clear is that Canadians should be concerned if they support the concept of a national pharmacare program. They need to know that the Conservative Party of Canada will not support pharmacare and a

national pharmacare program. Member after member has stood up who will clearly be voting against this legislation. There is no doubt that it will be on the axing block if the Conservative leader ever forms government. People should not take this for granted.

I think that Conservatives need to be clear with Canadians on this very important issue. Pharmacare would complement our health care system, and this is something that we should all be voting in favour of. I am very much concerned that the Conservative Party appears to be voting against this legislation.

● (1935)

Ms. Marilyn Gladu (Sarnia—Lambton, CPC): Mr. Speaker, when I studied pharmacare at the health committee, we heard from the Parliamentary Budget Officer and multiple stakeholders that 95% of Canadians already have prescription medication coverage, and most of them are covered for 15,000 drugs, not two, like this lame bill that we have before us. Not only that, but the Liberals want to have the critical medications for Canadians delivered to them by the same fantastic bunch that cannot get a passport out the door in seven months and that have a 30% error rate in CRA. Is that who we want to manage the critical medications of Canadians? What could possibly go wrong?

Would the member just admit that this bill is a pacifier for the NDP, to keep them from pulling their support and calling an election?

Mr. Kevin Lamoureux: Mr. Speaker, I have been advocating for this type of legislation for a number of years. This is something that has been brought into Liberal platform positions in the past.

This is something about which the government is very serious. Again, the member just reinforced that the Conservative Party does not support national pharmacare. I think Canadians need to be fully aware of that.

Ms. Michelle Ferreri (Peterborough—Kawartha, CPC): Mr. Speaker, it is an honour, as always, to stand in the House of Commons to represent the incredible people of Peterborough—Kawartha.

Tonight on the docket, what do we have here in Ottawa, in the House of Commons? We have a bill that was put forward by the Liberal—NDP coalition and it is called pharmacare.

I just want to give some context for folks at home of the summary. This is the official summary:

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This enactment sets out the principles that the Minister of Health is to consider when working towards the implementation of national universal pharmacare and provides the Minister with the power to make payments, in certain circumstances, in relation to the coverage of certain prescription drugs and related products. It also sets out certain powers and obligations of the Minister—including in relation to the preparation of a list to inform the development of a national formulary and in relation to the development of a national bulk purchasing strategy—and requires the Minister to publish a pan-Canadian strategy regarding the appropriate use of prescription drugs and related products. Finally, it provides for the establishment of a committee of experts to make certain recommendations.

One can tell, with the word salad here, which we often see put forward by the government, that it just leaves a lot of loopholes to say that they are not going to over-commit and that they are not going to do anything, so they can then skirt out of it when it fails.

What is the bill? It is really the crux of the supply and demand agreement. It is simply a bill to keep the Prime Minister in power. The leader of the NDP sold his soul for this bill, and it is sad because he has also sold out Canadians. It is frustrating. It is infuriating. It is exhausting for everyone at home.

After nine years of the Prime Minister, here is what we have. I actually have to read it off of paper because there is so much that has happened.

There has been doubled housing costs, the highest food bank usage in history and a steady decline in the Canadian economy, meaning that Canadians are now poorer by \$4,200 per person. This is Canada's worst decade for real economic growth since the 1930s. There are Facebook groups called "dumpster divers" because people cannot afford food.

Crime and chaos are at all-time highs. There are criminals running free and terrorizing neighbourhoods because of the Prime Minister's soft-on-crime policies. Domestic violence has increased. Compared to 2014, intimate partner sexual assault is 163% higher. Online child predators are up 300%.

Recruitment and retention in the armed forces is the lowest in history. Young people believe that they will never own a home. People have no motivation to go to work because 46% of their paycheque goes to taxes.

I had one gentleman message me. He said, "You know, Michelle, we work so hard. I'm almost embarrassed to say this because I make \$100,000 a year. That sounds like so much money, but our interest rates have increased. Our mortgage costs have doubled." He said, "I decided I'll go take some overtime because we really can't make ends meet. We really have no money left at the end of the month. We can't afford to feed the kids. We're having to cut their sports. It's taking a toll on my marriage. It's taking a toll on our life."

He goes and works 30,000 dollars' worth of overtime and he was taxed \$22,000 out of that \$30,000. That was time away from his family, time away from his kids, time away from everything, to go to work, to do the right thing. Work does not pay.

Why are people going to work? Why would one go to work? What a devastation to the soul, because people love to work. It is purpose. It is structure. We work for two things: because we have a purpose in this world and to collect a paycheque to provide for our

families. The Liberal government has taken away both of those things.

- (1940)

Our birth rate is the lowest in history. Has anyone noticed a trend here? These are historic numbers that have never been seen before. People cannot afford to have a baby. They are saying they cannot afford a home and cannot afford to have kids. They are terrified. There are headlines like that of a Global News article, which says, "B.C. mother says lack of child care could leave her homeless". Guess what? The Liberal-NDP government promised that it would make affordable, accessible child care, that it would save everybody, and that everything would be great. What has been delivered? Absolute chaos.

Women entrepreneurs have given their life; they have sacrificed everything to care for kids in their home, and they are losing their businesses because the Liberal-NDP government is so ideological that it does not offer flexibility and choice. It has to be the government's way always. It wants control, and that is what has happened.

I visited a child care facility in Manitoba this past weekend. It was absolutely incredible. It was able to build 22 child care spots in 18 months. It is remarkable what it has been able to do. A woman who spoke to me said that the CWELCC program, or the \$10-a-day child care program, is actually a risk to children because moms and parents are having to choose between feeding their kids and putting their kids in safe child care. That is the reality of what has happened under the Liberal government.

Every day there are viral videos of Canadians who say they are moving because Canada is broken and no longer recognizable. We have a Liberal Prime Minister with historic records of corruption and scandals. Every single day is another scandal or another corruption. There is zero trust with the Canadian people. A guy came up to me on the street and said he just wanted me to know that people are exhausted. He is a restaurant owner and he said he was exhausted. He said that he cannot believe we have a Prime Minister who has destroyed our country in the way that he has, and that people are so tired. The NDP leader keeps him there with the bill before us that would deliver nothing, again.

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There are 22 people a day dying from overdoses. Drugs have flooded our streets, and addiction has taken thousands of families hostage. I want to tell members a story because I think it is critical. Right now, the Conservatives are the only party saying “enough with the wacko drug policy, safe supply”. How does it work? I want to explain it because I think it is really important. Safe supply is, ultimately, the idea that somebody dealing with or battling with addiction walks in and is given a supply of Dilaudid. On the street, they are called “dillies”. It is a highly addictive opioid. Someone is given 30 of them, Dilaudid or dillies, then they go out, maybe want to do the right thing, and take them and try to level out.

However, it does not work, and they need something stronger, so they sell the Dilaudid. This is called diversion. They sell them on the street, and it brings down the value of the drug. Then they seek something stronger. Then there are all of these “safe” drugs; that is how the drug dealers sell it to high school kids. They go around and say, “Hey, this is safe. It is only a buck. Your parents can take it.” The kids buy it and now get addicted to opioids. There is a whole new generation addicted to opioids.

What happens is that the addict progresses, takes fentanyl, a street drug, and dies of a fentanyl overdose. That is why we have people, especially in the NDP, who say that people are not dying of safe supply and of diversion. However, they are dying as a direct result of the failed experiment of safe supply. That is a true story. The number one cause of death for children in British Columbia between the ages 10 and 18 is opioids. It is unbelievable. There is an outreach worker in Ottawa who tells the story of what is happening on the streets of Ottawa, outside pharmacies, of dillies being diverted to teenagers.

• (1945)

There was an arrest just outside my community, of a 14-year-old with safe-supply fentanyl. This is the reality of what has happened after nine years of the current Prime Minister. There are record applications for MAID, including from those who simply cannot afford to live so they are applying for medical assistance in dying.

What a time to be Canadian. I have just read historic stats to members. Never before in my lifetime have I ever seen Canada like this. Certainly why many of us chose to run for politics was to correct the course we are on. It is not a fluke, and it is not random, why we are here. It is all a lack of leadership. That is the reality of what we are dealing with in this country. When we have a leader whose sole mission is power and control, we can guess who loses; it is Canadians.

There are consequences to actions and consequences to policies, and Canadians are feeling the misery and suffering after nine years of the Prime Minister. How does this impact pharmacare? The Prime Minister knew he was tanking in the polls. He had to think up a plan, and he had to think it up quick, just like the good old Grinch. He said, “I know who I can exploit. I am going to go to the leader of the NDP. He will never be in power, so I will make him an offer, make him think he has power, and that is what I will have to keep myself in power. In case an election is called, this is how I will do it.”

Every single day, I get calls asking why there is not an election. We are done. Every single thing has an expiration date. The Prime

Minister is long overdue his, but he is in power, and the pharmacare bill is a big piece of it. The leader of the NDP signed a coalition agreement, and maybe he had good intentions. Maybe he thought he was actually going to help Canadians, and maybe he thinks he is going to get something out of this.

I thought at the beginning of my term, and now I know, that power and control are what the Liberals want. That is the driving force for the leaders of the NDP and the Liberals in the House. The pharmacare bill is yet another marketing slogan. It sounds wonderful, but as with everything the Liberals announce, they promise us one thing and deliver another. In so many instances, they actually deliver nothing.

I want to tell a story that is really sad. The Liberals often hurt the most vulnerable because they set an expectation, saying, “We are going to promise the moon, the stars, the sun and \$10-a-day day care for everyone, except that one person does not get it, and another and another do not get it. One does get it, that guy right there, but everybody else is a loser. There is one winner.” There are winners and losers. That is what the Liberal-NDP government does.

The government set out the Canada disability benefit. The minister of, at the time, disabilities and inclusion came to testify at the human resources committee in October of last year. We were waiting. We had witnesses. We were studying the bill, and we asked what the benefit would do. The minister said that the benefit “will lift...people out of poverty, big time.”

Along came budget 2024. The Liberals were so proud. They came out and said, “Here is our disability benefit: six dollars a day.” Rachel and Jason came to my office. They are with the Council for Persons with Disabilities in Peterborough. I said, “Tell me how you feel about the disability benefit.” They said, “Well, you know, we are grateful”, because this is what the Prime Minister does. He shames people. They cannot speak out, because they just have to be grateful for the scraps the government gives them. It takes everything away from people, and then it gives them little scraps. It belittles them and make them feel small and worthless.

Rachel and Jason said that it is basically like this: Members know that old game of trust, the trust and fall exercise we used to play as kids. We would close our eyes and fall backwards, and the person behind was supposed to catch us. Jason and Rachel said to me that it is as if the person who catches is the Liberals, but not only do they not catch someone but they get out of the way and did not tell them.

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That is the reality of the bill before us, and the Liberals make it seem like the Conservatives do not care about this. No, it is that we do not believe them. We do not trust them and we do not believe them, because they have not delivered anything they said they would. We are the only ones standing in here fighting for the Canadians who are genuinely struggling to survive. That is the problem with the bill. Not once have Liberals proven to us that they will deliver what they said they will.

• (1950)

There are historic highs of food bank usage in this country. Housing costs have doubled, and young people believe they will never own a home. However, the Liberals get up and say, “We have done a great job. We are such good people and Canadians should be grateful. We are really good. We are great.” Guess what? Canadians have caught on. They know so much; they see right through it. The bill is just another distraction of “We will give you this.”

Let us break down the facts. Currently we are spending more on serving the Prime Minister's out-of-control debt than we are on health care transfers. This is a true story. It is going to get worse and worse because he keeps spending and spending like a maniac. It is basic economics. Anybody who has ever had to balance a household budget knows this.

If someone makes \$100 a month but spends \$150, what happens? The person has to borrow the money. Then the next month, if that person makes \$100 and again spends \$150, they need to borrow more and are now at \$200. They had to use their credit card to do that and are now paying credit card interest, so they are just putting money toward the interest and not even paying down their debt. Their credit score goes down and they go further and further into debt. They cannot spend time with their family and are stressed out of their mind.

This is Mental Health Week. The number one thing a good leader would do is make life affordable. That is the greatest gift we can give our kids. They do not need money and things; they need us. They need connection and they need time. Parents cannot give that because they are too busy working trying to pay for food and housing they cannot afford because of the Liberal Prime Minister.

There are six million Canadians without a family doctor, and wait times have never been longer. Where is the bill on that? I do not see it. The wait time from seeing a family doctor to getting specialist treatment is crazy. Listen to this. Something is wrong with a person, and they need to see the family doctor. The wait time has increased incredibly. The person does not have a family doctor, so there is problem number one. Number two is that the family doctor then has to recommend the person to the specialist.

The wait time to get to the specialist has increased 195%. This is the longest it has been in three decades. People are literally dying while waiting to see specialists and to get surgery. We have the longest wait times in the world, at 25 months, for new life-saving therapies. I do not see any money in the budget for that.

Who writes prescriptions? Doctors do, so if someone does not have a doctor, how are they going to get the prescription from the magical pharmacare bill? The Canadian Life & Health Insurance Association has stated that the bill would spend billions of dollars

unnecessarily on drugs for people who already have coverage. Who cares about monetary policy, right? What possible consequences could come from not wanting to balance a budget? There are 27 million Canadians who rely on workplace plans and who would be placed at risk by the legislation. It would create the Canadian—

An hon. member: Monetary policy is not fiscal policy.

Ms. Michelle Ferreri: I love how the Liberals across the way are defending the Prime Minister, who said to the reporter, “Glen, we took on debt so you don't have to”.

An hon. member: No, you just don't know the difference between monetary policy and fiscal policy. They are two different things—

• (1955)

The Deputy Speaker: Order, please.

There are going to be questions and comments after this, and I am sure if members put their hand up they can get to ask questions on this.

The hon. member for Peterborough—Kawartha has the floor.

Ms. Michelle Ferreri: Mr. Speaker, 27 million Canadians who rely on workplace plans would be placed at risk by the legislation. It would create the Canadian drug agency, which would cost about \$90 million to create, and perhaps another \$35 million a year to continue. The Parliamentary Budget Officer says it would cost tens of billions of dollars. However, when asked, the Liberals do not have an answer. They are not sure. It is kind of like the carbon tax, which was supposed to be revenue-neutral but made a billion dollars, but we are not really sure where that money went. Nobody seems to know.

The major cause of people's inability to afford their medications is the cost of living. The number one reason people say they cannot afford their medications is inflation and the cost of living.

This one is my favourite. Who remembers the \$4.5-billion promise from the Liberals of a mental health transfer? I cannot find it. I have not seen it. However, what I do know is that we have ranked 35th out of 38 in the world for teen suicide. That is where we are at in Canada, but the Liberals are going to come save us. They do not deliver. They are the guy who promises—

The Deputy Speaker: The member is out of time, almost 30 seconds past her time.

Questions and comments, the hon. member for Châteauguay—Lacolle.

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Mrs. Brenda Shanahan (Châteauguay—Lacolle, Lib.): Mr. Speaker, I am glad I do not live in the world the member lives in. It is another dystopia. The last time I listened to the member go on in a speech in that vein was on Bill C-35, the child care bill. She went on and on arguing against it and then, at the end of the night, she voted for it. In fact, every single member on that side voted for the bill.

I am wondering if it is going to be the same story with the pharmacare bill.

Ms. Michelle Ferreri: Mr. Speaker, I am so glad the member brought up child care, because what chaos has been delivered by the Liberal-NDP government. I would strongly encourage her to reach out. There is a call right now by child care operators and families across this country. They are in dire straits from coast to coast to coast. They cannot access child care. Women cannot go to work because they cannot access child care. Children have nowhere to go. Operators who have built their entire lives on this are losing their business. There are 77% of high-income people accessing this program. That is on the Liberals' watch.

It is another failure, and it is exactly what this pharmacare bill will be.

[*Translation*]

Mr. Jean-Denis Garon (Mirabel, BQ): Mr. Speaker, the member for Châteauguay—Lacolle just asked my colleague who just spoke a question saying that they do not live in the same world. The member for Châteauguay—Lacolle also lives in a world where the National Assembly unanimously voted for a first resolution, then a second, and then a third.

For years, we have been calling for Quebec to have the right to opt out with full financial compensation when Ottawa institutes new spending programs in the jurisdictions of the provinces and Quebec. She supposedly lives in that world, but it does not seem like it because across the way, in their alternative world, the federal government is supposed to be able to manage a hospital, which it has never been able to do properly.

I have the following question for my Conservative colleague. Perhaps the Conservatives will form the government some day; it is hard to say. When that happens, will they agree with the concept and principle of a right to opt out with full financial compensation for Quebec when the federal government institutes programs in the jurisdictions of the provinces and Quebec?

• (2000)

[*English*]

Ms. Michelle Ferreri: Mr. Speaker, again, child care is a great example. The Liberal government loves to weasel its way into provincial jurisdiction, and that is what it did with child care, too. Things were fine and everything was in its own little jurisdiction, but no, the Liberals had to meddle, disrupt it and cause chaos. Then, when it fails, they are going to blame the Conservatives. That is the way they operate.

Mr. Peter Julian (New Westminster—Burnaby, NDP): Mr. Speaker, I am both shocked and saddened by the member's speech. I am shocked because she mentioned the Conservative government. I lived through, as Canadians did, the shockingly bad years of the

Harper regime, with the record deficits each and every year, the bad financial management, the scandals, one after another, and the fact that they gave \$30 billion a year in the infamous Harper tax-saving treaties to the wealthy, \$300 billion over the course of a dismal decade. There were cuts to health care funding and slashing of veterans' benefits. It was one of the worst periods in Canadian history, and it was certainly the worst government in Canadian history.

I am saddened because the member has seen the benefits of dental care already in her own riding, dozens of people. There were 15,000 seniors in the first three days who got dental treatment. There were dozens in Peterborough—Kawartha. The reality is that 17,000 people would benefit from pharmacare in her riding.

Why does she not listen to the 17,000 constituents who would benefit from pharmacare?

Ms. Michelle Ferreri: Mr. Speaker, what is sad for me is a New Democratic Party that props up the Prime Minister so he can stay in power. If the member listened to anything I said and if he really cared about the most vulnerable and the disability benefit, he should know that the record-high use of food banks in history is because New Democrats are keeping the Prime Minister in power.

Who is really standing up for people? That is what I would like to know.

Mr. John Barlow (Foothills, CPC): Mr. Speaker, I want to thank my colleague for holding the Liberal-NDP government to account on its promises, which in many cases are just marketing projects that are never followed up on with the actual hard work of governing.

Now, my colleague mentioned a couple of times that the pharmacare bill is nothing more than window dressing and that there is nothing in this bill that actually is a pharmacare plan. This is merely a bill to maybe talk about a plan to maybe talk about a pharmacare plan maybe later down the road.

The NDP is championing this legislation as such a big win for them, just to keep the Prime Minister in power. Is there anything actually in this legislation that promises Canadians any change or additional access to health care or health care products?

Ms. Michelle Ferreri: Mr. Speaker, I love that question, and the answer is no.

Mr. Mark Gerretsen (Kingston and the Islands, Lib.): Mr. Speaker, this is what I am worried about. This bill talks about contraceptive medication. In particular, when we talk about a woman's right to choose, what I am worried about is that the Conservative Party of Canada—

Some hon. members: Oh, oh!

The Deputy Speaker: Order. Let us just make sure we get the questions and comments, and we can continue on.

The hon. member for Kingston and the Islands has the floor.

Government Orders

Mr. Mark Gerretsen: Mr. Speaker, the Leader of the Opposition has been suggesting recently that he will use the notwithstanding clause where he sees fit.

On Friday, the member for Lanark—Frontenac—Kingston specifically said, “A common-sense Conservative government would use the notwithstanding clause only on matters of criminal justice.” Well, performing an abortion back in the nineties was considered a crime.

The member could very easily put my concern to rest by answering this question. Can the member categorically say that a future Conservative government would absolutely protect a woman's right to choose and not use the notwithstanding clause on a matter such as that, yes or no?

• (2005)

Ms. Michelle Ferreri: Mr. Speaker, what a question coming from a man. I would love him to tell me what to do with my uterus. That is great. That member will never tell me what to do with my body. We know the Liberals are losing really bad when they bring up abortion. We will never bring this up. If the member opposite wants to talk about my reproductive rights, he had better put a woman up and stop mansplaining to me.

Some hon. members: Oh, oh!

The Deputy Speaker: Order.

[*Translation*]

The hon. member for Abitibi—Témiscamingue.

Mr. Sébastien Lemire (Abitibi—Témiscamingue, BQ): Mr. Speaker, in her speech, my colleague quite pointedly criticized various aspects of this bill. She explained why it should not be passed.

In my opinion, she left out one thing, and that was jurisdictions. It is not the federal government's place to become involved in health issues or, by extension, in drug management.

Does my colleague have anything to add about the federal government's jurisdiction over pharmacare?

[*English*]

Ms. Michelle Ferreri: Mr. Speaker, absolutely, we believe in provincial jurisdiction. Again, we have just seen a federal government and a Prime Minister that want more control weighted into an area that has nothing to do with the Liberal government.

Ms. Lori Idlout (Nunavut, NDP): *Uqaqtittiji*, this is such an important bill, because it would help individuals who need it most, whether it is women who may need medicines for their reproductive health or people who suffer from diabetes. These are two areas of pharmaceutical care that are desperately needed throughout Canada, in the territories and in all the provinces.

Could the member better explain how this bill is not supporting those people, specifically women who may need access to abortion because of an unplanned pregnancy that they may have experienced?

Ms. Michelle Ferreri: Mr. Speaker, I want to tell the member that I was actually with a constituent of hers on the weekend. His name was Josh, an incredible young boy who was accessing the

services at Toba child advocacy centre. What that young man has been through and what his family endured up north is absolutely incredible. He said to me, “I'd like to see the Conservative government win so that we can deal with drugs and drug addiction and help people who are most vulnerable”, which is what I would like to focus on.

I think we can help all of the folks the member is referring to, in particular women, to be out of poverty, have access to housing and have access to all the things they need. There are truly people struggling in this country, and it is just not in the bill; that is the reality.

This is a failed Prime Minister who will not deliver anything he says he will. It is time for a competent government that delivers what it says it will and restores confidence in the people, restores trust and makes life affordable again.

Mr. Francesco Sorbara (Vaughan—Woodbridge, Lib.): Mr. Speaker, it is always a pleasure and an honour to rise in this most honourable of houses. This evening, I will be sharing my time with the hon. member for Milton.

Before beginning my formal remarks, I would say that, when I think of Bill C-64, an act respecting pharmacare, and the implementation of a piece of legislation that would obviously strengthen our health care system and the delivery of it, I would not be remiss to say that this is not only an excellent piece of legislation that would help Canadians, specifically those in need of contraceptives and the nearly 4 million Canadians dealing with diabetes, but also another sign of our government's strengthening of our social fabric and social system. It would build on other programs that we have implemented, including the Canada child benefit, which we know has lifted hundreds of thousands of children out of poverty and helps families every month. In my riding, nearly \$80 million or \$90 million a year arrives, tax-free and monthly. We know that the Canada workers benefit, which helps our working poor and those trying to make ends meet and get ahead, helps literally millions of Canadians. We introduced middle-income class tax cuts in 2015, raised the basic personal exemption amount and accelerated the pace. We know those are delivering \$10 billion annually in tax relief to Canadians, as we speak.

More recently, the Canadian dental care program, which thousands of dentists have signed on for, is benefiting individuals in my riding of Vaughan—Woodbridge. In fact, in the heart of my riding at Weston Road and Rutherford Road, there is a big billboard, put up by one of the dentists in the community, stating that they welcome patients who are eligible and approved for the Canadian dental care program. This program is already helping thousands of residents in the riding of Vaughan—Woodbridge and in the city of Vaughan. The work that we are doing on Bill C-64 would continue to build on that work of helping Canadians to receive the services they need, which, in this case, is to improve health care.

Government Orders

With respect to health care, I was at the announcement with the Prime Minister and the Premier of Ontario, Doug Ford, when we announced a \$3.1-billion bilateral agreement of health care funding for more nurses, more doctors and more health teams across the province of Ontario, a part of the \$200 billion the federal government is committing to health care across this beautiful country.

I appreciate the opportunity to speak to the important work under way through Bill C-64 with regard to the Canadian drug agency, or CDA. The CDA is one of the key features contained in Bill C-64. On December 18, 2023, the Government of Canada announced the establishment of the CDA, which is to be built from the existing Canadian Agency for Drugs and Technologies in Health, in partnership with provinces and territories. The government committed \$89.5 million over five years to establish the CDA, providing dedicated leadership and coordination to make Canada's drug system more sustainable and better prepared for the future. This investment would be in addition to the existing funding of \$34 million per year to support CADTH's current work.

The CDA would build on CADTH's existing mandate and work, expanding to include new functions such as appropriate prescribing and use, data and analytics, and system coordination. Developing the CDA recognizes the organization's reputation of excellence, performance and results. It also ensures that we would be adding value to the system by building on what is already working with the CADTH.

Let me say a bit about how we got to this important milestone. Canada's pharmaceutical system evolves slowly over time, often responding to address new challenges as they developed. When Medicare was first introduced in Canada in 1966, drugs used outside hospitals were primarily inexpensive medicines for common conditions. A growing number of specialized drugs are now helping to cure or manage a range of conditions, and rising rates of chronic disease have made prescription drugs a central part of our current health care system.

New pharmaceutical system organizations and functions have been created to manage the access and use of prescription drugs, but this has happened in an ad hoc and fragmented manner. Canada currently has over 100 public drug plans and 100,000 private drug plans, creating a patchwork of access and coverage for Canadians. Despite improvements in recent years, high prices and the patchwork of drug coverage leave many people in Canada facing barriers to access the prescription drugs they need when they need them.

• (2010)

Stakeholders in landmark reports have underscored the need for federal leadership in addressing these gaps. In recognition of concerns about the sustainability of the Canadian pharmaceutical system, budget 2019 provided \$35 million over four years to establish the Canadian Drug Agency Transition Office, or CDATO, to provide dedicated capacity and leadership to work with provinces, territories and key partners on a vision, mandate and plan to establish the CDA. Since its establishment in 2021, the CDATO has conducted extensive engagement and analysis, holding over 400 meetings and round tables with a diverse range of stakeholders to understand the gaps and challenges in the pharmaceutical system and obtain advice on how to make improvements.

Extensive engagement has taken place with provinces, territories, patients, pan-Canadian health care organizations, health care professionals, industry insurers and international partners. Based on this engagement analysis, the CDA will build on CADTH's existing mandate and functions, expanding to include new work streams that better support patients and system sustainability, namely improving the appropriate prescribing and use of medications, increasing pan-Canadian data collection, expanding access to drug and treatment information, and reducing drug system duplication and lack of coordination.

Through our engagement, we learned that the appropriate prescribing and use of medications is a clear priority for many stakeholders. This is about ensuring that patients are prescribed the safest and most effective treatment for their outcomes and conditions. Each year, \$419 million is spent on potentially harmful medications for seniors, and \$1.4 billion is spent to treat harmful effects. However, there is no unified approach to guide and inform prescribers or patients on appropriate prescribing and use.

To date, we have launched an appropriate use of advisory committee involving patients, clinicians, experts and leading organizations in the field. The committee is advising on the development of a pan-Canadian appropriate prescribing and use strategy. Later this spring, the committee will issue its final report that will inform the work of the CDA to create and implement an appropriate prescribing and use program in collaboration with partners.

Stakeholders have also pointed to the need to improve pharmaceutical data and analytics to better understand the impact of drug treatments. However, there is limited ability to access, link or share drug data, which is siloed in different sources, such as hospitals, private drug plans, physicians' offices and jurisdictions. This fragmentation limits our ability to understand a drug or treatment's use pattern and effectiveness, including how it performs once it is being used by patients in the real world and how it compares to other available treatments.

We are working with several organizations in the health data field, such as CADTH, the Canadian Institute for Health Information, Canada Health Infoway, Health Data Research Network Canada and the pan-Canadian Pharmaceutical Alliance, to improve access to and use pharmaceutical data. Stakeholders also consistently emphasize the importance of incorporating patient equity and lived experience in the CDA's developments and operations. They noted that patient engagement in the pharmaceutical system is limited. Incorporating patient perspectives through engagement and governance were key recommendations for an organization that is transparent, accountable and meaningfully involves those who need it most, the patients.

● (2015)

We have also heard of significant challenges regarding system coordination. During the course of our engagements, most stakeholders highlighted at least one coordination-related issue that they face. Challenges include a lack of information sharing, confusion about roles or responsibilities or limitations to meaningful engagement. Our pharmaceutical ecosystem is managed by multiple organizations that have different purposes, priorities and areas of jurisdiction.

There is one organization mandated to convene players, focus the agenda, ensure efficiency and enhance collaboration. Because of this, there are both gaps and duplication in the system. Building from CADTH is a significant step in promoting system alignment. CADTH is a highly reputable organization with strong leadership and a shared federal, provincial, territorial governance model that works.

Through CDATO and CADTH's extensive partnerships and building on the work to date, we will build a CDA that is well positioned to convene key players and focus on promoting better outcomes for patients. We will develop an organization that has the capacity to adapt to the ever-changing pharmaceutical landscape. Our work to date reflects the significant input provided by stakeholders over the last three years. It also highlights a strong interest across the system to make meaningful improvements.

The CDA will support pharmaceutical system modernization in Canada and lay a strong foundation for future growth, including by providing the capacity to support the commitments outlined in Bill C-64, which is now before the House. The CDA will assume a leading role in the pharmaceutical system to ensure Canadians have better health outcomes and are well informed about the medications that they need now and into the future.

● (2020)

Ms. Marilyn Gladu (Sarnia—Lambton, CPC): Mr. Speaker, by now, Canadians are used to broken promises from the Liberals.

Government Orders

In 2015, members will remember that they were going to make housing affordable, and now housing prices, mortgages and rents have doubled. They also promised the last election under first-past-the-post, but maybe not.

However, on pharmacare, I think maybe Canadians need a history lesson because the Liberals have been promising to do pharmacare since 1992, and they have never done it. The bill before us is also not pharmacare. It is a plan to get a plan to maybe do pharmacare. It is not going to be national. Quebec has already said that it is not going to participate.

Could the member just admit that this is an attempt to pacify the NDP to make sure that it does not pull its support and trigger an election?

Mr. Francesco Sorbara: Mr. Speaker, since 2015, when I was first elected to this most honourable House, my focus has been on helping and ensuring the success of the residents of my riding of Vaughan—Woodbridge and of all Canadians, and that is what we continue to do. We continue to implement policies that strengthen our social system, including what is contained in Bill C-64, specifically for folks with diabetes and individuals in need of contraceptives.

Obviously, the rare disease strategy is something near and dear to my heart as I have a nephew who suffers from a rare genetic disease. I understand the issues that my brother and sister-in-law go through in taking care of my nephew. The issue of expanding pharmacare, expanding our national system and strengthening our social safety net is very near and dear to my heart.

Mr. Taylor Bachrach (Skeena—Bulkley Valley, NDP): Mr. Speaker, we heard several times this evening from Conservatives talking about child care. If we look at how that legislation came about, which is something the NDP pushed for for years, it was eventually written into legislation and passed in a very similar format to pharmacare, and it required the participation of provinces. We heard all sorts of opposition from the Conservatives, but what we saw is that provinces, one by one, came on board. Now, we see the same thing with pharmacare.

Government Orders

I am just wondering if the member can project on whether we are going to see, over the coming months and the coming year, as agreements are signed with British Columbia and Manitoba, that other provinces are going to have a hard time explaining to their people why they do not get free contraception and free diabetes medication, and slowly they are all going to sign on to a national universal pharmacare plan. Is that how it is going to roll out?

Mr. Francesco Sorbara: Mr. Speaker, leadership is about having the confidence to invest in Canadians and invest in Canada. We continue to work with all the provinces. We have signed all the agreements for the national early learning and child care agreements across the country with all the provinces, Conservative, New Democrats or Liberal. We have done the same on health care.

As I said in my speech, I was there with the Prime Minister and the Premier of Ontario, Doug Ford, the morning we signed the bilateral health care agreement of injecting \$3.1 billion as part of the agreement with the Province of Ontario. That is real leadership. That is not hot air. That is real leadership, which is providing real solutions to individuals in the province of Ontario and across this country that we call home.

We will continue to introduce measures that I know make a real difference in the lives of everyday Canadians, including the ones who live in my riding of Vaughan—Woodbridge.

Ms. Anju Dhillon (Dorval—Lachine—LaSalle, Lib.): Mr. Speaker, I listened with great interest to my colleague's speech.

I would like to ask the member about how something as simple as monitoring diabetes and testing sugar levels, which can prevent hospitalization and the additional costs that can occur due to hospitalization when people do not have this equipment to be able to take care of themselves at home. I would also like to ask, if he has a few moments, if he could talk about oral contraceptives for women.

Mr. Francesco Sorbara: Mr. Speaker, we know that almost four million Canadians have a form of diabetes, and we want to prevent their condition from deteriorating and their ending up in the hospital, which costs our hospital system even more. We want to prevent that, which is a big piece in Bill C-64.

Obviously, with contraceptives, we know that there are women out there who may not be able to afford the cost. We would be there to assist those individuals, especially the most vulnerable, in our country.

• (2025)

Mr. Adam van Koevorden (Parliamentary Secretary to the Minister of Environment and Climate Change and to the Minister of Sport and Physical Activity, Lib.): Mr. Speaker, reproductive and sexual rights are human rights. Our government recognizes that, and we stand by it as a matter of principle. Members of the Conservative Party caucus can stand in the House and say they are not interested in pursuing anti-abortion legislation that would infringe upon women's reproductive rights; however, sadly, that conviction is far from a universally held one in the caucus. In fact, the entire caucus has been designated as anti-choice by the Abortion Rights Coalition of Canada.

I am proud to say that, on this side, we are walking the walk. We are leading by example and putting forward Bill C-64, an act repre-

sending pharmacare, which would provide universal access to prescribed contraceptives to Canadians. In collaboration with provinces and territories, we will support universal coverage of contraceptive medications and devices so that nine million Canadians of reproductive age will have access to the contraception that they need and deserve. This will ensure that Canadian women can choose whether they are going to have children. It will give them greater control over their bodies and their futures.

[*Translation*]

Currently, Canada is one of the only countries in the world where access to health care is universal but access to contraceptives is not. Women therefore have a more limited range of options, and are more likely to experience unwanted pregnancies, which can impact their lives.

[*English*]

Access to safe, reliable birth control is essential. It gives women the freedom to plan their families and pursue their long-term goals and dreams. Unintended pregnancies, on the other hand, can cause a great number of negative health and economic impacts on families. At present, coverage for contraceptives varies across the country. Most Canadians rely on private drug insurance through their employer for their medication needs, and some populations are disproportionately affected by the lack of coverage.

Women, people with low incomes and young people, all of whom are more likely to work in part-time or contract positions, often lack access to private coverage, and only a fraction of Canadians are eligible for prescription birth control at low or no cost through a public drug plan. When a person pays out-of-pocket for their contraceptive needs, regardless of whether they have coverage, cost has been identified as the single most important barrier to accessing contraceptive medications or devices that they require.

[*Translation*]

One study showed that women from low-income households are more likely to use less effective contraceptives, or no contraceptives at all. Cost is a significant obstacle to gaining access to more effective forms of contraception.

[*English*]

For example, oral contraceptives cost approximately \$25 per unit, or \$300 per year. In comparison, intrauterine devices, or IUDs, are often more effective and last up to five years, but they have an upfront cost of approximately \$500 per unit. IUDs are a much more effective method of contraception, since they have a low failure rate of 0.2%, compared with that of oral contraceptive pills, which is 9%. Furthermore, they do not require daily doses to remain effective, which is a long-standing challenge with the pill.

Government Orders

At this time, I would also point out that women can have the choice, but sometimes, it is not so much a matter of choice; it is a matter of how a woman's body reacts to these various interventions. It really should be a matter of choosing not based on cost, but based on what works best for them. If someone is a young woman in their twenties, working at a part-time job that does not offer private coverage, accessing an IUD or other contraceptive method can be a big cost when trying to manage other basic life expenses, such as rent or grocery bills.

As colleagues can see, this is the reality that many Canadians are currently facing and trying to manage. We have decided to intervene and help. Bill C-64 would address the lack of access by working with provinces and territories to provide universal coverage of contraceptive medications and devices, so Canadians can access the contraceptives they need. Furthermore, some provinces are already paving the way; this is similar to how Saskatchewan led the way by implementing universal health care in the 1960s. Last year, British Columbia became the first province to provide universal access to contraceptives to their residents. Recently, Manitoba also announced a commitment to implementing universal contraceptive coverage in their province. I would join my colleague in clapping.

There is a certain trend I see, with certain provinces offering these services to Canadians. What is that common trend? I think we can leave it to our imagination, but it tends to be parties that are left of centre, that are more progressive and that are willing to step in and help where people need it most. Studies from the United Kingdom show that universal access to contraceptives provided a return on investment in health and social services of nine to one for every investment in universal contraceptive access.

• (2030)

In the Canadian context, evidence from the University of British Columbia estimated that no-cost contraception has the potential to save the B.C. health care system approximately \$27 million per year.

[*Translation*]

We commit to working with those provinces and the others in Canada to ensure that everyone in Canada has universal access to contraceptives.

[*English*]

This new coverage, to be delivered by provinces and territories that enter into a bilateral agreement with the Government of Canada, means that Canadians would be able to receive the contraceptives they choose, no matter where they live or how much they earn. In turn, Canadians will be healthier; they will be empowered to make important life decisions, and they will not have to opt for less-effective or less-desirable methods of contraception because of the cost of this essential medicine.

We will work with provinces and territories to provide Canadians with universal coverage for contraception. This is just the first phase of a national pharmacare plan, which can show how much of an impact universal coverage for contraception and, indeed, more than just contraception, will have on the lives of Canadians and further enshrine reproductive choice in Canada.

In closing, we look forward to working with all parliamentarians to pass the pharmacare act so that all Canadians can have reproductive choice and rights and get the contraception they need and deserve.

Mrs. Cheryl Gallant (Renfrew—Nipissing—Pembroke, CPC): Mr. Speaker, the member opposite opened his speech by talking about the morning-after pill. Does he know that, in his province of Ontario, that is already covered? With respect to all the money that is going into protecting women from going full term in pregnancy, would the government instead, or in addition, at some point choose to direct the funding towards in vitro fertilization?

Our birth rate in Canada is lamentably low. Rather than focusing on wiping out or tapering off the population, would they consider helping women to have babies?

Mr. Adam van Koeverden: Mr. Speaker, that is a shameful display of the type of anti-choice rhetoric that happens in the House far too often with Conservatives. The facts remain: Women want the right to choose. They want the right to choose how to have their bodies, and—

Some hon. members: Oh, oh!

Mr. Adam van Koeverden: Mr. Speaker, as I am being heckled by a Conservative—

The Deputy Speaker: Order. Ask questions, get answers and comments.

The hon. parliamentary secretary has the floor.

Mr. Adam van Koeverden: Mr. Speaker, the Conservatives can find all the excuses that they want to deny women access to free contraceptives, whether it has—

An hon. member: Oh, oh!

Mr. Adam van Koeverden: Mr. Speaker, I continue to be heckled by a caucus that has a perfect score with the Abortion Rights Coalition of Canada as being completely anti-choice. They can deal with that on their own time. We will stand with Canadians. We will stand with women, and we will stand for women's rights and reproductive rights.

[*Translation*]

Mr. Yves Perron (Berthier—Maskinongé, BQ): Mr. Speaker, let us bring a little bit of cheer to all this by asking questions about the content.

I would like the member to tell me whether he thinks that the child care program is working well in Quebec and the rest of Canada. We know that the federal government recognized Quebec's jurisdiction and its right to opt out of that program with full compensation.

Does my colleague not believe that the pharmacare program could also work just as well if the federal government were to respect Quebec's expertise and jurisdiction by simply transferring the money?

Mr. Adam van Koeverden: Mr. Speaker, I thank my colleague for his question. It is true that Quebec is a leader in Canada in many areas, including women's rights and reproduction.

Government Orders

It is important to recognize when a province or territory is a leader or ahead of its time when it comes to important, progressive issues. The federal government must consider all of its options to create a level playing field.

• (2035)

[English]

To level the playing field, it is important that we find ways to ensure that great ideas in provinces such as Quebec, Manitoba or British Columbia are shared by all Canadians.

Ms. Leah Gazan (Winnipeg Centre, NDP): Mr. Speaker, as I have heard in the House tonight, I know the Conservatives think providing free contraception is communist, but I would like to say this to the hon. member across the way: They talk about reproductive rights, but in New Brunswick, one cannot even access a trauma-informed abortion at care. We have a Canada Health Act that they have to uphold, and I am glad that the member supports that, but his government actually does not support action. It is one thing to say that we support the right to a safe, trauma-informed abortion, but it is another thing to provide access to that right.

Mr. Adam van Koevorden: Mr. Speaker, I am grateful to the member opposite for her intervention tonight, because it underscores the importance of electing good provincial government and the necessity to look at provinces' leadership, read their platforms very carefully and consider who they are. They demonstrate exactly who they are, whether it is their approach in New Brunswick or, frankly, in Alberta, to how they support LGBTQ+ kids. The position on abortion in New Brunswick has been demonstrated very clearly. Canadians know what they get when they elect Conservative governments in Canada: a questioning of the enshrined rights of women.

An hon. member: Oh, oh!

Mr. Adam van Koevorden: Mr. Speaker, as I continue to be heckled by members of a caucus that has a perfect score with the Abortion Rights Coalition for being anti-choice, I think they are demonstrating exactly who they are.

Ms. Leah Gazan (Winnipeg Centre, NDP): Mr. Speaker, I am proud to rise today to support what the NDP has fought for. It is the beginning of a pharmacare plan that will start with one of the things the NDP has championed for years: the reproductive rights of women and people who menstruate. It is a significant step forward to promote reproductive rights for women and gender-diverse people in Canada; we know, for far too long, leaders have neglected calls to improve reproductive health services. In this room today, I have heard Conservatives saying such things as that we already pay for abortion; they know very well that even the Liberal government still does not provide access to safe, trauma-informed abortion care. We are talking about the gamut of reproductive rights; that includes the ability, if one so chooses, to access contraception.

I used to be a high school sex ed teacher. One thing we would talk to the kids about was choice and how to protect themselves and their reproductive rights should they want to avoid pregnancy. I know there are Conservatives smiling because the discussion around sex, abortion and contraception is a difficult one, but these are important open discussions that we have to have, especially as we change into a society that is becoming much more inclusive in

our gender diversity. I support that. The bill would allow nine million people of reproductive age in Canada to access contraception, providing them with reproductive autonomy and reducing the risk of unintended pregnancies.

However, we know that bodily autonomy is currently under attack. We have heard in the House, in fact, petitions that have been put on the floor by the Conservative Party that attack the trans community. The March for Life is happening on Thursday, and I wonder which Conservative faces we will see again this year at the campaign. Just as the colleague across the way said, the Campaign Life Coalition has labelled the Conservatives anti-choice. This is not surprising, because in this very session of Parliament, Bill C-311 was named a backdoor anti-abortion legislation in the name of so-called violence, even though it was not supported by any women's groups working with women and gender-diverse people who are experiencing violence.

The bill is also a major win for promoting the rights of economic empowerment for women and gender-diverse people in Canada. We have a right to choose what we want to do with our own bodies. I find it disturbing that, in 2024, most of the people opposing the bill in the House on the Conservative side are not even impacted by it. I do not know many men in the House who have to run to the drug-store to get birth control pills or have to use diaphragms or IUDs. This is a gender-specific issue for women and gender-diverse people. It is really appalling, because the very Conservative opposition that is talking about freedom, with a leader who talks about freedom, does not believe in freedom when it comes to bodily autonomy. The member for Carleton does not believe in freedom of religion, with the kind of Islamophobic, visceral garbage I have to hear on that side. Now they are directly attacking women's right to choose.

• (2040)

The Deputy Speaker: We have a point of order.

The hon. member for Sarnia—Lambton.

Ms. Marilyn Gladu: Mr. Speaker, you certainly have given lots of advice on people not impugning other members with motives. I think the member has gone quite far enough, and I would ask if you could return her to the theme of today.

Mr. Mark Gerretsen: Mr. Speaker, on the same point of order, the member has not impugned anything. The member is just simply stating what she knows to be true. I do not think there is any motive being impugned here. I just think the Conservatives are slightly offended by what they are hearing.

Government Orders

Mr. Garnett Genuis: Mr. Speaker, I rise on the same point of order. I was eating my dinner in the lobby and was horrified to hear the member throw out these accusations of Islamophobia, which are very serious accusations against members, with no basis. I think that is unparliamentary. The member is providing no support because she is talking utter nonsense. If I were to casually say that a member is anti-Semitic, Islamophobic or anti-Christian, I think you would find that unparliamentary. I hope you will call that member to order.

Mr. Mike Morrice: Mr. Speaker, on the same point of order, these are obviously not points of order. I think the member should continue her speech.

Mr. Peter Julian: Mr. Speaker, on the same point of order, I completely agree with my colleague from Kitchener Centre. Let the member for Winnipeg Centre speak, and hopefully the Conservatives will not provoke any more interruptions.

The Deputy Speaker: I will just remind everyone to be careful in what they say about one another and to make sure that we stay within the parliamentary rules of this institution.

The hon. member for Winnipeg Centre.

Ms. Leah Gazan: Mr. Speaker, I will give some examples. We are talking about facts, so I am going to give some examples.

This is from rabble.ca. It is entitled, “The inconvenient anti-choice record of ‘pro-choice’ Pierre Poilievre”. The Abortion Rights Coalition—

The Deputy Speaker: Order. It is against the rules to use someone's name in the chamber. Just make sure we do not use the names of members, and let us not use props.

The hon. member for Winnipeg Centre.

Ms. Leah Gazan: Mr. Speaker, my apologies, but I am actually reading, and my understanding in the House is that we are allowed to read from notes.

The article states, “The Abortion Rights Coalition of Canada (ARCC) keeps a list of anti-choice members of Parliament and has always rated Pierre Poilievre as anti-choice and continues to do—

The Deputy Speaker: Order. Let us all take a big, deep breath.

The hon. member for Winnipeg Centre, let us back that up one more time.

• (2045)

Ms. Leah Gazan: Mr. Speaker, the member for Carleton. I am so sorry. That is totally my fault, and I take responsibility. My apologies, but I am reading verbatim.

The article reads that the coalition has always rated the member as “anti-choice and continues to do so.” It continues to say, “he has consistently voted in favour of anti-choice private member bills and motions, with just one exception”.

Here are some examples: “There's just too many other reasons to doubt [the member for Carleton's] pro-choice claims”. “Like Erin O’Toole, [the member for Carleton] would allow private member bills against abortion to be introduced and would allow a free vote.”

On Bill C-311, which is likened to an anti-abortion bill, the entire Conservative Party, including the member for Carleton, voted in favour.

That is in this Parliament, so it is not surprising to me, when we are talking about an opportunity to lift up the rights of women and gender diverse people, to lift up equality, to support a person's right to choose and to have access to safe, trauma-informed abortion care, that the Conservatives are violently opposing this legislation. Why? It is because they do not care about reproductive rights. In fact, they have actively voted against reproductive rights.

The fact is that Conservatives are going against the pharmacare bill and are talking about insurance plans. There are a lot of people in this country who do not have insurance plans, which tells me how out of touch the Conservatives are with people who are struggling. These are the people who are struggling and who they talk about all the time. They are working, not for a living wage, and have no benefits and no pension plans. They not only have fought against this benefit, should they have diabetes or should they choose to not want to get pregnant, but also have actively fought against a living wage, often in marginalized jobs, often taken up by women in marginalized communities.

Do members want to talk about freedom? It is freedom only if it suits the Conservatives' narrow, and what has been likened by some, certainly in the media, extremist rhetoric. These are things like the member for Carleton endorsing Jordan Peterson, who is anti-trans, anti-choice and anti-women.

Therefore, it is not surprising that in a bill that focuses on specifically lifting up equality in Canada, the Conservatives are conveniently fighting against it in the name of so-called “choice”. By them denying individuals' access to contraception or to the morning after pill, they are denying freedom to make a choice over one's body. This includes banning medications from young people who are transitioning, young trans kids. We need to protect trans kids. We need to protect women's rights, and we need to protect the right to choose.

Mr. Brad Vis (Mission—Matsqui—Fraser Canyon, CPC): Mr. Speaker, I, of course, come from the province of British Columbia, where contraceptives are already provided by the provincial government. To ensure equality for women, how much money would the Province of British Columbia receive from this NDP bill because we already have contraceptives? For equality's sake, what is the number B.C. would get?

Ms. Leah Gazan: Mr. Speaker, I would also like to apologize for my misreading when I was reading the article. I do apologize. I was not trying to be cheeky, but I was reading directly from an article.

We know that certain provinces, provinces his colleague called “communist”, are providing free contraception care—

The Deputy Speaker: There is a point of order from the hon. member for Mission—Matsqui—Fraser Canyon.

Government Orders

Mr. Brad Vis: Mr. Speaker, I would just like the record to state I never said “communist.” I only came into the debate—

An hon. member: No, you did not.

The Deputy Speaker: We are getting into debate.

The hon. member for Winnipeg Centre has the floor.

Ms. Leah Gazan: Mr. Speaker, I certainly was not saying that he called provinces communist. I said that some of his colleagues have called them communist.

Certainly, provinces do not act alone in health care. The federal government works with provinces to provide services. We have pushed the federal government to ensure provinces have what they need to provide, as a starting point, free diabetes medication and also contraception.

• (2050)

[*Translation*]

Mr. Sébastien Lemire (Abitibi—Témiscamingue, BQ): Mr. Speaker, one issue seems fundamental to me in this context. The Government of Canada and the rest of Canada want pharmacare. That is fine for them, but it goes against the spirit of the Constitution.

I would be curious to hear my colleague's thoughts. Quebec already has a pharmacare system. Would she agree that Quebec should have the right to opt out with full compensation?

[*English*]

Ms. Leah Gazan: Mr. Speaker, the federal government is responsible and obliged to uphold national standards. We know that Quebec is ahead of the game on a number of issues. I will give the hon. member a couple of examples. On child care, Quebec is decades ahead, as well as on social programs, certainly.

Absolutely, when we are talking about provinces, the federal government is obliged to provide provinces with what they need to be able to offer these services.

I would, however, give a caveat to New Brunswick. In New Brunswick, currently, women cannot access an abortion. There need to be guidelines, in terms of public health transfers, if provinces are not upholding what the Liberal government has called the human right to access safe, trauma-informed abortion care.

Mrs. Brenda Shanahan (Châteauguay—Lacolle, Lib.): Mr. Speaker, I have greatly appreciated the comments of my colleague from the NDP. It has been a very spirited debate here. We are talking about the provinces, the jurisdictions, and also about equality of care across the country. I think that is where the federal government comes in. That is where legislation like Bill C-64 comes in to ensure that there is equality of access to pharmacare, specifically in the areas of contraceptive care and diabetes.

I would like to hear my colleague's comments on that issue.

Ms. Leah Gazan: Mr. Speaker, that is exactly it. If one looks at access to reproductive rights, they vary throughout the country. We need to change that to ensure that if this country is actually doing what it says, which is protecting the reproductive rights of those people who can get pregnant, then they need to start doing that.

That means access to safe, trauma-informed abortion care or access to contraception.

Mr. Yasir Naqvi (Parliamentary Secretary to the Minister of Health, Lib.): Mr. Speaker, I am thankful for the opportunity to speak about Bill C-64 and about how this represents a historic milestone in the evolution of the Canadian health care system.

[*Translation*]

This bill and other investments made by our government will help millions of Canadians who are struggling to pay for their medication.

[*English*]

I was very thrilled when the Minister of Health, and many other incredible Canadians who have been advocating for a pharmacare program in Canada, joined in my community of Ottawa Centre, at the Centretown Community Health Centre, where, toward the end of February, we made the announcement on Bill C-64, on covering diabetes and contraception medication. One could see the excitement among people when that announcement was made in my community.

In fact, I have been working on this issue for over a decade now, during my time as a member of provincial Parliament in Ontario. I was part of a Liberal government that brought something that we called OHIP+. That “plus” covered medications for young people, and then, we were moving on to cover medications for seniors. It was really unfortunate that the Conservative government under Doug Ford cancelled that incredible program because it allowed for care for so many Ontarians.

However, I am thrilled that we are taking this important step here at the federal level.

In 2021, Statistics Canada found that one in five adults in Canada did not have the insurance they needed to cover their medication costs. This means that over 20% of adults in Canada face out-of-pocket drug costs that create a financial burden. This can lead to people sacrificing their basic needs, such as buying groceries or heating one's home, in order to afford their medications. It can also lead people to ration their medications, causing them worse health outcomes. This is not acceptable and I do not think that this is the kind of country any of us want to have.

Choices like whether to fill a prescription have serious consequences. Whether skipping meals or skipping doses, the decision to go without can create a cascade of negative impacts on a person's health and can increase the burden on our health and our social safety nets.

• (2055)

[*Translation*]

We can and we must do better. That is why we introduced Bill C-64 and proposed this first step toward universal pharmacare.

*Government Orders**[English]*

Our commitment to address the accessibility and affordability of medication can be seen with the various initiatives we have implemented with respect to national pharmacare. In addition to the introduction of the pharmacare act, which includes a commitment to work with provinces and territories to ensure universal access to contraception and diabetes medications, we also established a partnership with P.E.I. to improve the affordability of prescription medications, implemented the first-ever national strategy for drugs for rare diseases and established a Canadian drug agency.

Let me start with the pharmacare act, which outlines a way forward toward national universal pharmacare in Canada. Bill C-64 recognizes the critical importance of working with the provinces and territories, which are responsible for the administration of health care. It also outlines our intent to work with these partners to provide universal, single-payer coverage for a number of contraception and diabetes medications.

[Translation]

This bill is an important step toward improving health equity, affordability and outcomes, and could help reduce health care system costs over the long term.

[English]

Coverage for contraceptives would mean that nine million Canadians of reproductive age would have better access to contraception, reducing the risk of unintended pregnancies and improving their ability to plan for the future. We are a government that has always and will always recognize that autonomy over one's body and the ability to control one's own sexual health is a matter of fundamental justice.

[Translation]

Contraception is a key component of individual autonomy. It is an essential component of reproductive health and contributes to advancing gender equality.

[English]

Cost has consistently been identified as the single most important barrier to accessing contraception and the cost is unevenly borne by women, people with low incomes and young people, all of whom are more likely to work in part-time or contract positions and often lack access to private coverage. Studies have demonstrated that publicly funded, no-cost universal access to contraception can lead to public cost savings. The University of British Columbia estimates that no-cost contraception has the potential to save the B.C. health care system approximately \$27 million per year. Having safe, reliable birth control represents freedom and safety. However, these costs continue to be a barrier. With Bill C-64, we are taking action to remove the barrier.

- (2100)

[Translation]

The same cost reduction principle applies to diabetes medication. Diabetes is a complex disease that can be treated and managed with safe, effective medication.

[English]

However, one in four Canadians with diabetes have reported not following their treatment plan due to cost. Improving access to diabetes medications will help improve the health of 3.7 million Canadians living with diabetes and reduce the risk of serious, life-changing health complications, such as blindness or amputations.

Beyond helping people with managing their diabetes and living healthier lives, if left untreated or poorly managed, diabetes can lead to high and unnecessary costs to the health care system due to diabetes and its complications, including heart attack, stroke and kidney failure. The full cost of diabetes to the health care system could exceed almost \$40 billion by 2028.

Independent of the legislation, we have announced that we will work with provinces and territories on a diabetes devices fund. This fund would ensure that people with diabetes have access to the medical devices and supplies they need, such as syringes, test strips, glucose monitoring devices and insulin pumps. This, combined with the framework outlined in Bill C-64 for universal single-payer coverage for first-line diabetes medications, will help ensure that no person with diabetes in Canada is forced to ration their medication or compromise their treatment.

I previously mentioned our excellent work with P.E.I. and how this \$35-million investment is focused on improving affordable access to prescription drugs while at the same time informing the advancement of a national universal pharmacare. The work accomplished by Prince Edward Island has been outstanding. Since last year, P.E.I. has expanded access to over 100 medications to treat a variety of conditions, including heart disease, pulmonary arterial hypertension, multiple sclerosis and cancer, and is saving millions of dollars in out-of-pocket costs for P.E.I. residents.

On a national level, we launched the first-ever national strategy for drugs for rare diseases in March 2023, with an investment of up to \$1.5 billion over three years.

[Translation]

As part of the overall investment of \$1.5 billion, we are making up to \$1.4 billion available to the provinces and territories over three years through bilateral agreements.

*Government Orders**[English]*

This funding will help to improve access to new and emerging drugs for Canadians with rare diseases as well as support enhanced access to existing drugs, early diagnosis and screening for rare diseases. This will help ensure patients with rare diseases have access to treatment as early as possible for a better quality of life.

I want to quickly mention that, in December of last year, we announced the creation of the Canadian drug agency, which will provide the dedicated leadership and coordination needed to help make Canada's drug system more sustainable and better prepared for the future.

This is an incredible opportunity for Canadians coast to coast to coast, working alongside provinces and territories, to allow for pharmacare, especially when it comes to contraception and diabetes. This is the beginning of building a more robust health care system that will work for all Canadians. I am excited to support this bill, and I encourage all my colleagues to do the same.

Hon. Mike Lake (Edmonton—Wetaskiwin, CPC): Mr. Speaker, I want to ask a question about incompetent Trudeau government overspending. Of course, it raises the ire of members on the other side sometimes when I talk about the Trudeau government of the 1970s and 1980s and the devastating cuts that resulted in the mid-1990s of 32% over two years from 1995 to 1997 for spending on health care, social services and education.

I am wondering if the hon. member shares the same concern about the incompetent Trudeau government overspending of the 1970s and 1980s and also of his own Liberal government as it relates to our ability to fund important social programs in the future.

Mr. Yasir Naqvi: Mr. Speaker, I would suggest to the member that it would be incompetent for any government not to invest in health care for Canadians.

I would ask the member, if he thinks that this is wasteful spending, if he would cut the spending. Would he not provide pharmacare for Canadians? What else would he cut? Would he cut the Canadian dental care plan, which is now helping millions of seniors, just starting a few days ago, and has the incredible potential of improving people's lives? Is he going to cut \$10-a-day child care, which is helping so many families? I would suggest to the member that it would be incompetent for any government not to invest in the important needs of Canadians by making their lives more affordable.

• (2105)

[Translation]

Mr. Yves Perron (Berthier—Maskinongé, BQ): Mr. Speaker, my question is simple. Does my colleague think that the pharmacare system they want to put in place will be ineffective if the government gives Quebec the right to opt out with full compensation?

What is that going to change given group purchasing is already happening? The group purchasing argument no longer holds water. There is no other argument.

Why not respect Quebec's will? The member does not live that far away. He must have some understanding of Quebecers. I would like to have a nice honest answer to that.

[English]

Mr. Yasir Naqvi: Mr. Speaker, I will suggest to the member that this is an incredible opportunity for us, as a federal government, to work closely with provinces and territories. We have much to learn from Quebec. The member for Winnipeg Centre mentioned a few things earlier in her debate. Quebec has been a pioneer and a leader, whether it is pharmacare or child care. We have an opportunity to work with each other, to learn from each other and to replicate the models that work best for all Canadians.

Our federation works best when all orders of government, in this case, federal and provincial governments like that of Quebec, are working together to find solutions for all Canadians, whether they live in Quebec or elsewhere.

Ms. Lori Idlout (Nunavut, NDP): *Uqaqtittiji*, I would like to ask my colleague about Canada's placement in the world regarding subsidized or free contraception. More than 25 countries worldwide, including the United Kingdom, New Zealand and Australia, have offered subsidized or free contraception since as far back as 1967.

I wonder if the member can respond by giving us his views on why it is so important for Canada to join other countries regarding this important legislation so that we can ensure better protection for women.

Mr. Yasir Naqvi: Mr. Speaker, I want to first thank the member for Nunavut, along with the member for Bruce—Grey—Owen Sound, for joining me on Sunday in support of Christie Lake Camp, which is a worthy organization in Ottawa, in my community, raising \$20,000 to support kids from priority neighbourhoods. I must say the member for Nunavut is an excellent basketball player, so it was a great afternoon.

I agree with the member that we need to catch up with many countries that allow for free contraception. It is about the autonomy of women. It is making sure that women are able to make decisions about their own lives. By passing Bill C-64, we will take the very important step of making sure that Canada really values women and gives them the autonomy they deserve as equal citizens.

Mr. Brad Vis (Mission—Matsqui—Fraser Canyon, CPC): Mr. Speaker, before I begin, I would just like to give a shout-out to the Abbotsford Rugby Football Club, which won the provincial championships over the weekend. The division 1 side has faced a lot of adversity. Our fields were flooded during the big flood in Abbotsford a few years ago. This team has really built back. Big congratulations go to Coach Chambers and all members of the squad on the game-winning kick by Mr. Rowell. Congratulations to all the boys for their accomplishments.

Government Orders

Now, I turn to Bill C-64, an act respecting pharmacare. As my colleague, the hon. member for Cumberland—Colchester, said in the House in April, the half-baked pharmacare plan being debated is truly about preserving the costly NDP-Liberal coalition.

In order to ensure that the coalition survives the next fixed election date, so many members can lock in their pensions, the NDP has agreed to a pharmacare plan that covers only two categories of drugs, while costing a billion and a half dollars and adding even more bureaucracy and gatekeepers to the already extremely bloated federal government.

There are 97.2% of Canadians who already qualify for some form of prescription drug coverage. It is important that we work to ensure that the 1.1 million Canadians without coverage can access pharmacare, but the proposed system would leave them woefully under-insured and no better off. In the context of British Columbia, we already have coverage for contraceptives through our provincial government.

What we have in front of us today is not a universal pharmacare system, as the NDP-Liberal government has been campaigning. It is a diabetes medication and contraceptive coverage system.

The member for Ottawa Centre just said in his speech that in 2028, diabetes alone will cost the medical system in Canada over \$40 billion. Even the money put forward in this bill is only a drop in the bucket, and I wish the members of the NDP-Liberal government would come clean about misleading Canadians about what they are doing, because all of us have had constituents come to our offices and ask when the universal drug coverage will kick in. I am sorry to say that it will not; this is a PR exercise by this government, and it is shameful.

Canadians know how much a promise from the Prime Minister means, and it is not very much. This is the same Prime Minister who promised to balance the budget, or rather, that it would balance itself. This is the same Prime Minister who promised a \$4.5-billion Canada mental health transfer that is yet to be delivered. This is the Prime Minister who promised British Columbians a universal day care system at \$10 a day. Good luck trying to find that in our lifetime.

This is the same Prime Minister who promised that interest rates would stay low for a very long time, right before spending more money than any government in Canadian history and driving interest rates higher than they have been in decades. This is the same Prime Minister who has led to all of our GST payments, on every purchase we make in Canada, solely servicing the federal debt. Let that sink in. Every time we buy something, the taxes that we pay are only paying for the mistakes of the member for Papineau.

The only goal of this bill, as we all know, is to appease the NDP and avoid an election the government knows it would lose.

Speaking of the New Democrats, they really ought to be ashamed of themselves for even agreeing to this plan. For decades, they have campaigned on a single-payer pharmacare system, and now that they finally have a sliver of power in this Parliament, they fold and accept a half-baked plan that would cost taxpayers billions while failing to provide coverage for the vast majority of medica-

tions Canadians rely on, which the NDP promised to deliver. Shame on them.

The leader of the NDP loves to say that he will win the next election and often starts phrases with “when I am Prime Minister”. If he truly believed what he was saying, why does he continue to prop up that failed government, and why did he agree to this plan, which fails to cover the vast majority of drugs and treatments? If they are going to do it, they should go all in and take a risk. They are not willing to take a risk, because it is just about covering their own butts and getting their pensions.

The bill could have negative—

● (2110)

The Deputy Speaker: The hon. member for Winnipeg Centre is rising on a point of order.

Ms. Leah Gazan: I fully acknowledge that I said the leader's name, but I also know that we cannot say things like saving “butts”. That is my understanding, and I am just pointing that out. If he could take that out—

The Deputy Speaker: We just need to be careful in the words we are using.

The hon. member for Mission—Matsqui—Fraser Canyon is rising on a point of order.

Mr. Brad Vis: Mr. Speaker, sometimes I find the members' words very violent, but I will—

The Deputy Speaker: The hon. member for Sherwood Park—Fort Saskatchewan is rising on a point of order.

Mr. Garnett Genuis: Mr. Speaker, the point of order from the hon. member seems quite prudish. I thought we heard earlier that we should be willing to more openly talk about certain things, but the member gets called out for saying the word “butt”, which I have never heard called unparliamentary before. I wonder whether there is a new standard of prudishness that the NDP is trying to set—

● (2115)

The Deputy Speaker: I do not want this to descend completely into debate.

Ms. Leah Gazan: Mr. Speaker, on a point of order, the member of Parliament probably could have finished eating his taxpayer-paid supper before coming in here. However, I would appreciate—

The Deputy Speaker: This has descended completely into debate. I am standing up and I have the microphone. I am done on this point of order. I will just give a reminder to be judicious in the words we are using.

The hon. member for Mission—Matsqui—Fraser Canyon.

Government Orders

Mr. Brad Vis: Mr. Speaker, I take that comment, and I take the comment from the member for Winnipeg Centre. I will say “to save their epidermis”. There we go.

The bill could have negative consequences for the 27 million Canadians who rely on private insurance. The non-profit insurance sector has serious concerns about its future should Canada pursue a single-payer pharmacare system. Providers like Blue Cross could be wiped out entirely. As usual, the government tabled the bill without consulting a single stakeholder in the private and not-for-profit insurance industry. Killing private and not-for-profit insurance would be devastating for millions of Canadians.

Across the country, private coverage is, on average, 51% more extensive than provincial public counterparts. When a new drug is approved by Health Canada, it takes an average of 226 days for private insurers, including Blue Cross, to approve its coverage. Public plans take an average of 732 days after Health Canada approval to add the drug to the list of covered treatments. Canadians with serious health conditions that require drugs and treatments that are only just going through the approval process in Canada cannot afford to wait another two-plus years after Health Canada approves them.

Today, more than six million Canadians are without a family doctor. A half-baked public pharmacare system would do nothing to change that and to address their needs. Rather than spending another \$1.5 billion setting up a system that would not cover the vast majority of medications, the government should be focusing on ways to support provinces in the recruitment of new doctors and nurses.

That is why Conservatives have proposed a national blue seal program. This program would ensure that when a foreign-trained doctor or nurse arrives in Canada, they could quickly apply to have their credentials recognized and would be given an answer within 60 days as to whether they could practice in Canada. Once approved, they would be able to work in any province that signs on to the federal plan. Right now, a doctor licensed in Ontario cannot practice in Nova Scotia. A nurse licensed in B.C. cannot practice in Manitoba. It is time to change this anachronistic system.

In closing, the program would not be a universal pharmacare program, and it would not do anything to help the 1.1 million Canadians without access to pharmacare coverage nor the 6.5 million Canadians who cannot even see a doctor. It would be yet another expensive bloating of the federal government, adding more gatekeepers and more debt for Canadians to pay for while delivering next to nothing. I would add that, in a riding like mine with a large indigenous population, it would not be accessible to indigenous Canadians or rural areas either, because the amount of money is simply not enough to do even what the government says it is going to do.

After nine years, the only drugs the government has been able to deliver are hard drugs, like fentanyl, heroin and meth, which are flooding our streets and killing thousands every year. Conservatives will bring home the doctors and nurses our health care system so desperately needs. We will axe the tax. We are going to build the homes, fix the budget and stop the crime to lower the cost of living for all Canadians. That is what they want us focused on.

I encourage all members to support the amended motion put forward by the member for Cumberland—Colchester, dispose of the bill before us and start working to actually address the serious problems in health care across Canada.

Ms. Lisa Hepfner (Parliamentary Secretary to the Minister for Women and Gender Equality and Youth, Lib.): Mr. Speaker, I think I heard the member opposite say that the people in his riding do not want this pharmacare plan. They do not want their diabetes medication or pharmacare for reproductive health to be covered.

It sounds to me as though he is more concerned about the insurance companies and how well they are going to make out after the legislation goes through. Is that the case?

Mr. Brad Vis: Mr. Speaker, I believe Hansard will show that I did not say that my constituents do not want the legislation. However, what my constituents do want is access to drugs in a timely way. If we were to adopt universal drug coverage in Canada, it would lower the standard and accessibility of drugs for private insurance programs. This includes the program that all public servants are on right now; it would lower their ability to get the drugs they need to keep them healthy.

I do not know why the member for Hamilton Mountain is against public servants having access to the very drugs that keep them healthy.

● (2120)

[*Translation*]

Mr. Jean-Denis Garon (Mirabel, BQ): Mr. Speaker, we are supposed to be studying a bill on pharmacare, yet we have addressed every issue under the sun since the evening began. We even debated abortion, in terms of who is for it or against it.

I keep asking the same question over and over, but I get no answer from the Conservatives. If it ever comes to power some day, will the Conservative Party support Quebec's right to opt out with full financial compensation when Ottawa creates programs in areas under Quebec's jurisdiction, yes or no?

Yes or no, do the Conservatives support the right to opt out with full financial compensation?

Mr. Brad Vis: Mr. Speaker, I thank my colleague from the Standing Committee on Industry and Technology for his question.

Government Orders

If a Conservative government is elected, I would like Quebec to keep its jurisdictions, just as I would like British Columbia to keep its jurisdictions. The Conservative Party wants open federalism that respects the jurisdictions of Quebec and British Columbia.

[English]

Mr. Taylor Bachrach (Skeena—Bulkley Valley, NDP): Mr. Speaker, I found one part of the member's speech particularly interesting, and that was the blue seal program. The way I understand it, if he explained it correctly, is that it is a federal program in an area that is currently provincial jurisdiction. Doctors who obtained this blue seal would be able to practise their craft in any province that signs up for this federal program. It sounds an awful lot like other federal programs in areas of provincial jurisdiction, where we have a federal program with federal funding and provinces can sign up for it.

Why is there this double standard when it comes to interfering in areas of provincial jurisdiction?

Mr. Brad Vis: Mr. Speaker, I would disagree with respect to the blue seal program being a double standard. In Canada, immigration is a shared jurisdiction. Right now, many of the doctors who come to Canada, through our federal points system, do not have access to the professions that allowed them to enter Canada in the first place.

The basis behind our plan is to make sure that, when we accept someone into Canada through our immigration system, we are actually doing what we said we were going to do, which is to allow them to contribute in the profession of their choice to make Canada a stronger and more vibrant nation.

Mrs. Cheryl Gallant (Renfrew—Nipissing—Pembroke, CPC): Mr. Speaker, the member for Mission—Matsqui—Fraser Canyon began his speech by outlining how widely covered medical care is for both diabetes and the pill. They are already widely covered in that they cover so many voters.

Would the bill not be more aptly called “farm a vote”?

Mr. Brad Vis: Mr. Speaker, farm a vote; I agree. I would like to thank the member from the Ottawa Valley for her question. The bill is solely to ensure that the NDP and Liberal government can maintain their working relationship.

Unfortunately, the NDP members did not stand up for what they believe in and what they promised their voters in the last general election, which was universal pharmacare. They are selling themselves short with the legislation, because they are not afraid to face the electorate.

Ms. Lisa Hepfner (Parliamentary Secretary to the Minister for Women and Gender Equality and Youth, Lib.): Mr. Speaker, I really appreciate this opportunity and all opportunities to speak in the House on behalf of the residents of Hamilton Mountain, particularly with respect to this very important piece of legislation, which is necessary to help millions of Canadians who are struggling to pay for their prescription medications.

We have heard lots about access to and the affordability of prescription drugs in Canada. Statistics Canada data from 2021 indicates that one in five Canadians reported not having insurance to cover the cost of prescription medication in the previous 12 months. The same Statistics Canada data also found that a higher

proportion of new Canadians reported not having prescription drug insurance coverage. Having no prescription insurance coverage was associated with higher out-of-pocket spending and higher non-adherence to prescriptions because of cost. This results in some Canadians' having to choose between paying for these medications and paying for other basic necessities such as food and housing. We likely all know someone who is struggling with this issue. Members may know someone, or maybe have heard stories about a person with diabetes who does not have insurance coverage through work and has to pay for their insulin, syringes and test strips out of pocket; a student who had insurance coverage up to a certain age through their parents and then lost that coverage; or a cancer patient who does have insurance but is still not covered under their plan for the type of medication they need to treat their cancer.

That is why we have introduced legislation based on the principles of accessibility, affordability, appropriateness and universality. These principles will help guide ongoing efforts to advance the implementation of national pharmacare. We need pharmacare that helps make prescription drugs more accessible. This includes improving the consistency of access to drug coverage and needed medications across the country. We also need pharmacare that helps make prescription drugs affordable. This includes reducing financial barriers for Canadians, such as deductibles and copays. Additionally, we need pharmacare that helps ensure that the prescription drugs that people are taking are appropriate. This includes getting the right drug to the right patient at the right time to support their physical and mental well-being. Finally, we need pharmacare that is universal. This means we need to work to ensure that the principles of accessibility, affordability, and the appropriate use of prescription drugs are applicable to all Canadians, regardless of where they live.

These pharmacare principles align with the work that is already being done on national pharmacare. This work includes our partnership with Prince Edward Island with respect to the improving affordable access to prescription drugs initiative, our implementation of the first-ever national strategy for drugs for rare diseases and the recent announcement of the creation of a Canadian drug agency. Going forward, these principles would be reflected in the upcoming bilateral agreements for universal coverage of contraception and diabetes medications.

Government Orders

Let me spend a moment to explain how those principles are already being put into action. On August 11, 2021, the Government of Canada announced it would work with the Government of P.E.I. to improve affordable access to prescription drugs and inform the advancement of national universal pharmacare by providing \$35 million over four years to add new drugs to its list of covered drugs and lower out-of-pocket expenses for drugs covered under existing public plans for island residents.

As of December 2023, P.E.I. has expanded access to over 100 new medications to treat a variety of conditions, including heart disease, pulmonary arterial hypertension, multiple sclerosis, psoriasis and cancer. In addition, effective June 1, 2023, P.E.I. reduced copays to \$5 for almost 60% of medications regularly used by island residents. I am pleased to share that, through this initiative, within the first three months, P.E.I. residents have saved over \$2 million in out-of-pocket costs on more than 200,000 prescriptions.

● (2125)

As of July 1, 2023, P.E.I. also made adjustments to the catastrophic drug program, lowering the cap on the amount of money a household needs to spend out of pocket on eligible medications. As a result, no eligible P.E.I. household will have to spend more than 6.5% of their household income on eligible medications. Once that 6.5% cap has been reached, eligible medication costs for the remainder of the year will be paid by the program. As members can see, this collaboration is already creating more affordable access to needed medications for island residents.

On a national level, we have launched the first-ever national strategy for drugs for rare diseases in March 2023, with an investment of up to \$1.5 billion over three years. Most of this investment will be going to provinces and territories through bilateral agreements to improve access to new and emerging drugs for Canadians with rare diseases, as well as support enhanced access to existing drugs, early diagnosis and screening for rare diseases.

Similarly, we are providing \$33 million over three years to support first nations and Inuit patients with rare diseases, and \$68 million is being invested in various initiatives to support collaborative governance, data infrastructure and research for drugs for rare diseases.

Through this, the government will help increase access to and affordability of effective drugs for rare diseases to improve the health of patients across Canada. These principles will be further demonstrated and reflected in the next step of national pharmacare outlined in this bill, which describes our intent to work with provinces and territories to provide universal, single-payer coverage for a number of contraception and diabetes medications.

In addition, and separately from the bill, we will also create a fund for diabetes devices and supplies. This fund will be rolled out to support access to diabetes devices such as continuous glucose monitors, insulin pumps, syringes and test strips. This new coverage, to be delivered by provinces and territories that enter into a bilateral agreement, provides an excellent opportunity to see the principles of affordability, accessibility, appropriateness and universality at work. Canadians, no matter where they live or how much they earn, will be able to receive the contraception and diabetes medications they need. In turn, Canadians will be healthier, empowered to

make important life decisions and will not have to skip doses due to the cost of these two types of essential medications.

In closing, we will continue to work on national pharmacare initiatives that include the principles of accessibility, affordability, appropriateness and universality laid out in this bill, because Canadians need national pharmacare that embodies these principles. We look forward to working with all parliamentarians to pass the pharmacare act so that these principles will continue to guide our ongoing efforts to advance the implementation of national pharmacare.

● (2130)

[*Translation*]

Mr. Yves Perron (Berthier—Maskinongé, BQ): Madam Speaker, my colleagues and I have been saying the same thing from day one: We are in favour of pharmacare for all Canadians. We think it is a good idea and it is high time for Canada to consider it. However, we have said and keep saying that this is a provincial jurisdiction.

If the other provinces want to have a federal program, then they can fill their boots. We know that the Constitution says that this is a jurisdiction of Quebec. Quebec already has its system. Why not leave us with our system? Let the government give us our share. We will keep making group purchases and everything will be fantastic in the best of all possible worlds.

Where is the problem?

Ms. Lisa Hefner: Madam Speaker, I agree with the fact that everything we do as a federal government has to be done in collaboration with the provinces and territories. We must communicate with Quebec, we must learn from Quebec and will continue to collaborate. It is not something we are going to do alone. We cannot. The provinces cannot do it alone either. We need to work together.

I thank the Bloc for everything they contribute to the House.

● (2135)

[*English*]

Mr. Frank Caputo (Kamloops—Thompson—Cariboo, CPC): Madam Speaker, it is always a pleasure to rise on behalf of the people of Kamloops—Thompson—Cariboo.

Government Orders

Before I begin, I would like to recognize two very wonderful young men from my riding, both of whom received the Chief Scout's Award, one being Shawn Hodgkiss, who managed to collect over 1,000 pounds of food for the food bank, and another named Jared Roberts, who volunteered with The Loop and Our Street Church. I congratulate them. They are now in Hansard to reflect their incredible achievement.

At the end of the day, the Liberals have spoken so much about doing so many things, yet they have executed everything so poorly. We have had deficit after deficit. We could not even get a passport. The dental program has been a disaster as so few dentists have signed up in the Maritimes, for instance.

How can we have any confidence that the government will get this right?

Ms. Lisa Hefner: Madam Speaker, I congratulate the member opposite for getting his constituents' names into Hansard today. That was well done.

I note that one of the constituents he mentioned is involved in a food program. I would remind the member that one of the things the government has accomplished and that, hopefully, everyone will support is a national school food program, because we absolutely agree that we need to make sure children are well fed in school so they can learn and have good lives.

Ms. Leah Gazan (Winnipeg Centre, NDP): Madam Speaker, it is a pleasure to work with my hon. colleague across the way at the Standing Committee on the Status of Women. There are other folks on the committee and I really enjoy working with all of them, even across party lines, believe it or not.

The Conservatives are talking about voting against free contraception in this plan. There is no question that they are anti-choice. All the members have been listed as anti-choice, but they also voted against the school food program and pushed against the national child care program. The Conservative Party does not seem to be supportive of equity in this country.

Supporting this bill is so important. I am wondering if they are really serious about advancing the rights of women, or if maybe they just want women and gender-diverse people to stay in the dark ages.

Ms. Lisa Hefner: Madam Speaker, I appreciate my NDP colleague's work on the status of women committee. She is a true champion for women.

I have appreciated in the debate this evening how she keeps bringing up the word "abortion", because in this country, we have to worry about the rights of women in terms of their bodies, their right to choose, being taken away. We constantly see legislation proposed by the Conservatives that would restrict a woman's right to choose.

I stand with the member for Winnipeg Centre across the aisle on the right of women to choose for their own bodies.

Mr. Ziad Aboultaif (Edmonton Manning, CPC): Madam Speaker, Bill C-64 is a classic example of the legislation the Liberal government has brought before this Parliament. Once again, it has over-promised and under-delivered.

When the leader of the NDP sold his party's soul and coincidentally guaranteed that he would receive a pension for his efforts, many people thought he got too little for it. New Democrats did not even get 30 pieces of silver, as they betrayed their ideal and the Canadian people.

What has this betrayal cost Canadians? Inflation continues at record levels, fuelled by the carbon tax. Housing costs have doubled. Health care has vanished. Food bank use is at record levels. The immigration system is broken. Our military suffers from neglect, and foreign governments try to influence our elections. The Liberal response is to shrug. Canada has become a joke on the world stage.

What does the NDP receive for this blind support of the Prime Minister and his disastrous policies? It receives a promise to look at what it would take to establish a national pharmacare program. It is not even that, really.

Canadians thought a pharmacare plan would cover their drug costs. For the majority of the country, this was not a pressing issue. According to The Conference Board of Canada, 97% of Canadians are already eligible for some form of drug coverage, although the final report of the advisory council on the implementation of national pharmacare indicated that 20% of Canadians receive what could be termed inadequate coverage. In December of last year, a Leger poll indicated that only 18% of Canadians thought the establishment of a national pharmacare program was a health care priority.

It may come as a surprise to the Liberals and the NDP, but Canadians are worried about rising prices on everything, due in large part to the carbon tax. When people are worried about being able to feed their family, pay the rent or mortgage and put gas in their car so they can get to work, they do not spend much time thinking about a drug plan that does not cover the medications they need.

Canadians were hoping the Liberals could get it right. That turns out to have been a false hope. On this issue, as on many others, the Liberals are proving once again to have no idea what they are doing. The Liberal idea of pharmacare is restricted to just two types of medication. If one suffers from heart disease, one is out of luck. Heart disease is the second-leading cause of death in Canada, but medication for it would not be covered.

The Liberals' approach to pharmacare reminds me of their approach to Canadian liquid natural gas, or LNG. When the chancellor of Germany came to Canada looking to buy Canadian LNG, the Prime Minister told him there was no business case for such exports. That was a huge surprise to those companies looking to expand their markets.

Government Orders

Not only is there a business case for Canadian LNG, but there is a moral one as well. In the aftermath of the Russian invasion of Ukraine, countries are looking to replace Russian LNG and have turned to Canada, only to be told by the Canadian government that it does not want to sell Canadian LNG. The Prime Minister needs to learn that when there is a customer willing to buy the product, there is indeed a business case to support it. If Germany and Japan and Greece want to buy Canadian LNG, why would we not want to sell it to them?

A previous prime minister asked farmers, “Why should I sell your wheat?” This tells buyers there is not a business case to sell them the product they are asking for, while at the same time offering Canadians a pharmacare program they did not ask for, a plan so flawed it is unlikely to work.

This is the government that promised a firearms buyback program four years ago. So far, it has not managed to launch it, yet it wants Canadians to believe it has the skills necessary to design and implement a pharmacare program. Put simply, what is being offered is not pharmacare.

● (2140)

It is just another Liberal election gimmick, a promise they will campaign on in 2025, hoping that voters will not look at how many promises they have already broken. Anyone who has looked at the current state of drug coverage in Canada is concerned by this attempt to create additional bureaucracy. We already have some public drug plans; they do not seem to be as good as the private ones. Private drug insurance plans cover many more different medications than public plans do. The difference varies by province, but, on average, private coverage is 51% more extensive than its public counterpart is. In Quebec, the figure is 59.6%. Then there are the delays. Once a drug is approved by Health Canada, it takes an average of 226 days for a private insurer to approve the coverage. By contrast, it takes 732 days for approval by Health Canada, or a little over three times as long, for a public plan to add a drug to its list of covered treatments. These figures do not paint a rosy picture of the ability of public insurance to meet the Canadians' needs.

The marriage contract between the Liberals and the NDP required that the bill come before us last year. It did not. It took the Liberals two years to come up with the legislation, a bill that seems to have been put together without much thought, just to meet a deadline. Given how weak the bill is, I can only imagine what the first draft looked like. Maybe it was just one line, such as “We promise to look at establishing a pharmacare program in the hopes people will vote for us before we have to deliver.” Wait, is that not what Bill C-64 is?

After almost nine years of misgovernment, incompetence and mismanagement from the Liberal-NDP coalition, Canadians have lost all faith in the government's ability to discharge its responsibilities. What is the cost of this national pharmacare program? With two years to look into it, the Liberals either did not think to ask or are afraid to tell Canadians just how much more they want to raise taxes to pay for a plan that would benefit almost no one.

The bill is a public relations exercise by an utterly desperate government that is disliked by more and more Canadians every day. The inability of the Liberals to deliver on their promises is well

known. Already, two provinces have opted out of this program. There is no indication that other provinces are interested. One would have thought that, in attempting to create a national program in an area of provincial jurisdiction, the Liberals would have consulted with the provinces. One might have expected that they would have hearings and consultations with stakeholders to see what exists now, what needs to be improved and the best way to do that. As far as I can tell, all they did was ask the NDP the minimum they could promise to keep the NDP's support.

Can the Minister of Health tell us what impact the bill will have on the 27 million Canadians who rely on privately administered workplace plans? If he is an honest man, he cannot, because he does not know. There was no consultation with the insurance industries when the bill was being drafted. Maybe he felt there was no need to check the facts. A promise had been made by the NDP, and the Liberals had to deliver. The needs and wishes for the Canadian people were not worthy of consideration. What is not worthy of consideration is this sad attempt at legislation; Canadians deserve much better than that.

● (2145)

Mr. Mark Gerretsen (Kingston and the Islands, Lib.): Madam Speaker, I have heard a number of Conservatives say the same thing today. They keep saying that only one out of five Canadians wants the legislation; only one out of five Canadians wants pharmacare.

If one out of five Canadians is not good enough for Conservatives—

Mr. Arnold Viersen: Madam Speaker, I want to call to the attention of the House that I do not think we have quorum.

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): We are on autopilot. We do not need quorum.

Mr. Arnold Viersen: Madam Speaker, debate on second reading of Bill C-64 took place tonight without quorum, which means that Bill C-64 will have been considered without the constitutional requirement of quorum. In the event that Bill C-64 receives royal assent, I trust that the fact—

Orders of the Day

• (2150)

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): Before the member goes any further with his point of order, I will remind him that, on February 28, 2024, the House duly adopted an order prescribing that the Chair not receive any quorum calls after 6.30 p.m. today. Back in May 2022, the Speaker delivered a ruling as to the admissibility of the same provision from a similar motion, including the section dealing with quorum calls during extended seatings of the House. That ruling can be found in the debates of May 2, 2022, at pages 4577 and 4578. I would invite the member to read the ruling of the Speaker to find that this matter has already been settled.

It being 9.49 p.m., pursuant to an order made earlier today, it is my duty to interrupt the proceedings and put forthwith every question necessary to dispose of the second reading stage of the bill now before the House.

[*Translation*]

The question is on the amendment.

[*English*]

If a member participating in person wishes that the motion be carried or carried on division, or if a member of a recognized party participating in person wishes to request a recorded division, I would invite them to rise and indicate it to the Chair.

Mr. Mark Gerretsen: Madam Speaker, I would request a recorded division.

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): Pursuant to Standing Order 45, the division stands deferred until Tuesday, May 7, at the expiry of time provided for Oral Questions.

The hon. deputy House leader is rising.

Mr. Mark Gerretsen: Madam Speaker, I understand that you have received proper notice from all recognized parties, and if you seek it, you will find unanimous consent to see the clock at midnight.

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): I have received notice from all the recognized parties that they are in agreement with this request.

[*Translation*]

Is it agreed?

Hon. members: Agreed.

ORDERS OF THE DAY

[*English*]

COMMITTEES OF THE HOUSE

JUSTICE AND HUMAN RIGHTS

The House resumed from April 15 consideration of the motion.

Mr. Ziad Aboultaif (Edmonton Manning, CPC): Madam Speaker, the question before us is not just whether the Iranian Islamic Revolutionary Guard Corps is a terrorist entity. Its actions over the past four decades are such that such a designation is logi-

cal. It is also long overdue, and that may be why the government has so far refused to act. Having ignored past pleas from Iranian experts and from other Canadians, the Liberals are too embarrassed to admit their mistake and do the right thing.

Following the protest in Iran, since the death of Jina Mahsa Amini, Conservatives have been calling on the Liberal government to support the Iranian people's fight for a free and democratic Iran by listing the IRGC as a terrorist entity under the Criminal Code of Canada. The Liberals refused.

The murder of Jina Mahsa Amini was just one on the long list of violations of human rights committed by the Iranian regime. The torture and death of Montrealer Zahra Kazemi, the execution of wrestler Navid Afkari, the imprisonment of lawyer Nasrin Sotoudeh and the shooting down of Ukrainian International Airlines flight 752, which killed dozens of Canadians, are examples of a regime that has no respect for its own citizens or for those of other countries.

The IRGC is a part of this regime and is instrumental to its continued existence. The IRGC has terrorized the people of Iran for decades and has openly declared support for other terrorist organizations such as Hezbollah and Hamas, both listed in Canada as terrorist entities.

In June 2018, the government, including the Prime Minister, voted to list the IRGC as a terrorist entity. Despite the motion being approved by the House of Commons, and despite the IRGC downing flight 752 and killing Canadians, the government has yet to list this organization as a terrorist entity. To me, this is shameful. Does the government not understand that Canada needs to take a stand for what is right?

This government's level of hypocrisy has been so big that it does not walk its talk. It does not do what it needs to do. It makes promises, and it breaks them. This is how hypocritical the government has been on this very important issue of protecting Canadians and on making sure that Canada stands where it is right to be.

It was a little more than four years ago when the IRGC shot down flight 752, killing 176 people, including 55 Canadians and 30 permanent residents. This was a mass murder of Canadians. Countries have gone to war over less than that.

The families of those killed in that attack received sympathy from the Liberal government but nothing was done to bring the perpetrators to judgment. Nothing was done to stop them from operating in Canada however they see fit.

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There is no doubt that Iran is a state sponsor of terrorism. There is no doubt that the IRGC is one of the prime movers of Iranian terrorist policy and action. There is no reason for Canada to sit by and do nothing. There are an estimated 700 Iranian Agents operating in Canada. If one asks Iranian Canadians whether they feel comfortable speaking up against the regime, they will tell one stories of harassment for their extended families, not only back in Iran, but also here on Canadian soil.

Two years ago, CSIS confirmed that it was investigating what it saw as credible death threats against Canadians coming from inside Iran. In failing to list the IRGC as a terrorist organization, the government could be seen as not caring about the safety and security of Canadian citizens faced with this foreign threat. Certainly, the Liberal government has not sunk so low as to put the protection of terrorist organizations ahead of the safety of Canadians, has it?

• (2155)

Finance Canada officials testified in committee that more than \$100 billion is illegally laundered in Canada each year. A leading report recognizes that Canada has become known for snow-washing, given the prominence of money laundering here. I should not need to remind the Liberals that combatting money laundering is a federal responsibility.

With his lackadaisical attitude, the Prime Minister has allowed criminal organizations, including the IRGC terrorist organization, to take advantage of soft-on-crime Liberal policies. Because of the Liberals' refusal to list the IRGC as a terrorist entity, we have no way of knowing how much of the Iranian regime's illegal money laundering in Canada goes undetected. Finance Canada officials have admitted that the government does not know whether the IRGC is fundraising for terrorist activities through the Canadian charitable sector. Simply put, the government is not doing its job.

Common-sense Conservatives have put forward real solutions to mitigate money laundering in Canada. Conservative Bill C-289 proposes changes to the Criminal Code to make it easier to catch and convict criminals laundering money in Canada. That would include IRGC agents. However, the NDP-Liberal coalition voted against the bill. The failure of the government to take terrorism and money laundering seriously allows for murderous entities like the IRGC to operate freely in Canada.

The government needs to wake up and finally list the IRGC as a terrorist organization. To do so would bring us in line with our allies, countries such as the United States, that understand the seriousness of this situation, even if Canada's government does not. Other countries understand that an organization that has involved itself in conflicts in Lebanon, Yemen, Iraq and Syria, should not be allowed to freely export violence and chaos.

The IRGC is open in its support for Hamas and Hezbollah, two organizations that have been recognized as terrorist entities. It does not make sense that the organization that funds the activities of Hamas and Hezbollah should not be called to account for its terrorist actions. What we are discussing here is an organization with a history of exporting violence and mayhem as it seeks to destabilize other countries in the region. Not only that, but this is an organization that is used as a tool of state-sponsored torture and oppression against its own citizens.

We have talked about this in the House before. The will of the House is to have the IRGC listed as a terrorist organization here in Canada. Apparently, though, despite the overwhelming evidence, that is not the will of the Liberal government. I do not understand the reasons for its inaction. It is not as if it believes that it should sponsor terrorism and terrorist organizations. If it does not believe the reports from CSIS or Finance Canada, it should say so. Canadians deserve an explanation for years of Liberal inaction.

The time for empty words and hollow announcements is over. It is time for the government to take action, support the Iranian people's struggles for freedom, do the right thing, and list the IRGC as a terrorist entity in Canada.

• (2200)

Mr. Garnett Genuis (Sherwood Park—Fort Saskatchewan, CPC): Madam Speaker, I think the member just gave an excellent and powerful speech about the importance of listing the IRGC as a terrorist organization.

I know from talking to community members across Canada that there is wide support for the proposal. There are many different communities that see the negative impacts of IRGC violence: the Iranian community, the Jewish community, the Iraqi community, the Lebanese community and the Yemeni community. Communities in South America are also talking about how the Iranian regime is spreading its violence and collaborating with authoritarian regimes in South America.

We are going to vote on the motion on Wednesday. I think it is going to pass, based on what the opposition parties have said. We will see what the government does. At the end of the day, what we need is executive action or the passage of my bill, Bill C-350. It is not good enough to just pass a motion. After the motion is voted on, and if it passes, what should we expect the government to actually do? A motion like this one passed before, six years ago, and the government has done absolutely nothing in six years. We will pass the motion, I hope, on Wednesday, but we need to hold the government's feet to the fire because what really matters is whether something actually gets done.

Mr. Ziad Aboultaif: Madam Speaker, I thank my colleague from Sherwood Park—Fort Saskatchewan for the excellent question and his work on these issues and many other issues of human rights and security for all communities in Canada.

Orders of the Day

Based on the record of the government, I will not hold my breath. I cannot be optimistic about what it is going to do, because it has not been respecting the will of the House in terms of what it should act on. The other motion has been here for almost two years, and it still has not acted on it.

There is hope and a call for the government to act, to hear the will of Canadians through the House on what we know of the suffering and the complaints, as well as the will of the communities in Canada that are calling on the government to act on this issue to list IRGC as a terrorist organization and to make sure it follows the talk. That way, we will not end up with the same situation we have right now.

[*Translation*]

Mr. Sébastien Lemire (Abitibi—Témiscamingue, BQ): Madam Speaker, I would simply like my colleague to tell us what the next steps will be, what we can expect. More importantly, what action will the government take on this issue?

[*English*]

Mr. Ziad Aboultaif: Madam Speaker, the real expectation of the government is to do what governments do. Therefore, the government is going to have to put forward and implement the proper mechanism to make sure the will of the House and the will of Canadians are followed and listened to. It is only in the government's hands, because it is the government; it should be able to use the proper tools to make sure that things fall into place so Canadians are protected and the IRGC is listed as a terrorist organization. Then the rest of the work can be done.

Mr. Garnett Genuis: Madam Speaker, on the subject of the violence being caused by the regime in Tehran, I also want to use this opportunity to highlight the case of Toomaj Salehi. He is a rapper who has been given a death sentence in Iran because of his participation in protesting. It is really horrific to see the number of people who have been killed who had simply wanted to raise their voice and express their ideas and hopes for a different political future for their country. They are people of all ages, including many young people, who are being killed or facing death sentences. In this case, it is a very well-known rapper. I want to add my voice to the many who have called for his release.

Cases such as this underline how utterly barbaric and inhuman this regime is and how critical it is that the regime has to go. The first victims of the Iranian regime are the Iranian people, brave young people such as Toomaj, who have spoken out and are now facing this horrific state reprisal. Our thoughts are with him and his family, and we continue to call for his release. Does my colleague have a comment on that?

• (2205)

Mr. Ziad Aboultaif: Madam Speaker, we have had experience here with Montrealer Zahra Kazemi, the execution of wrestler Navid Afkari and the example of lawyer Nasrin Sotoudeh. There are so many examples of how far this regime is willing to go in order to punish the people who say no, those who are looking for freedom, for a better life for their own peers, inside and outside Iran. We know about the suffering and the fear; many do not even want to go back to visit with their parents or their families back home, and they fear that the regime has agents on Canadian soil

and other international grounds to go after their own citizens who speak of freedom. The regime has no limits whatsoever regarding who they want to reach and how far they are willing to go. That is why the problem is at our doorstep right now; we must, for once, protect Canadians on Canadian soil. We need to protect our own people, our own house, because that is the minimum the government and all of us can do.

Mr. Garnett Genuis: Madam Speaker, the member has spoken a lot about this tonight already. I know one of the key issues the Iranian community in Canada has been highlighting is foreign state-backed interference. The most pressing security threat to our country right now is foreign states interfering in Canadian affairs. Of course, the Iranian regime is a major player, and there are many other players we have discussed over recent months and years in the House. We have seen interference in our democracy through foreign state interference. What is much more pernicious are the threats of violence toward Canadians, especially targeted at members of diaspora communities.

A few years ago, the Iranian regime was responsible for shooting down a flight, PS752, with many Canadians on it. Many in our region of Edmonton were impacted by this in particular. One young man, whose wife was killed, spoke out about what happened, and he faced threats here in Canada. Imagine someone speaking out about their wife being murdered by this regime and then facing threats here in Canada. This underlines how critical it is that more action be taken on foreign state-backed interference to protect the Iranian community and many different communities facing attacks from beyond our shores.

Mr. Ziad Aboultaif: Madam Speaker, it has been long overdue for the government to act on some serious issues such as this one. There is enough indication by CSIS, by Finance Canada and by our security forces that this is very serious, and it must be dealt with at the highest level of responsibility by the government. We will be waiting, after the vote, for the government to tell us the plan for how it can do this, how it will list the IRGC as a terrorist organization and what the mechanism is to be able to free up Canadians and to protect Canadians on this soil.

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): It being 10:10 p.m., it is my duty to interrupt the proceedings at this time and put forthwith every question necessary to dispose of the motion now before the House.

• (2210)

[*Translation*]

The question is on the motion.

If a member participating in person wishes that the motion be carried or carried on division, or if a member of a recognized party participating in person wishes to request a recorded division, I would invite them to rise and indicate it to the Chair.

[*English*]

Mr. Garnett Genuis: Madam Speaker, I would like to request a recorded division on this motion.

Adjournment Proceedings

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): Pursuant to Standing Order 66, the recorded division stands deferred until Wednesday, May 8, at the expiry of the time provided for Oral Questions.

ADJOURNMENT PROCEEDINGS

A motion to adjourn the House under Standing Order 38 deemed to have been moved.

[*Translation*]

SPORT

Mr. Sébastien Lemire (Abitibi—Témiscamingue, BQ): Madam Speaker, I have the opportunity to question the Minister of Sport again and I am grateful.

It is a disappointing and undeniable conclusion: The government failed in its mission to protect athletes over the past decade. Since the revelations of alleged sexual assault committed by members of Canada's national junior hockey team in London in June 2018, the inaction of government authorities has been glaring and disappointing.

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): I must interrupt the member for a few seconds to ask that there be less noise in the lobbies. Suddenly there is a lot of noise.

The hon. member for Abitibi-Témiscamingue.

Mr. Sébastien Lemire: Madam Speaker, despite the promises made by the previous minister of sport in May 2023—a year ago almost to the day—about establishing an independent public inquiry as everyone has been demanding, months have passed without any significant progress being made. Worse still, with the change of minister, the hope those promises created is fading.

The measures put in place so far, while laudable in their intent, are proving insufficient. The code of silence still reigns supreme in sport, and the entire ecosystem forces many athletes to remain silent, depriving them of the opportunity to speak freely about the abuses they have suffered. Independent third parties, so-called ITPs, represent a deterrent to disclosing any wrongdoing against people in the world of sport.

One of the root causes is the frenzied rush to perform well, which is dictated by the funding and pressure of marketing bodies like the Canadian Olympic Committee or the International Olympic Committee, which interfere shamelessly in our sport system in Canada. Sports federations, under increasing financial pressure, exert intense pressure on coaches, who in turn pass this pressure on to the athletes. This excessive pressure compromises the mental and physical well-being of athletes, compromising their passion for their chosen sport.

The Canadian sport system, which is mainly run by dedicated volunteers, deserves careful attention from governments. It is vital that they be given the means to prevent abuse and protect current and future athletes. The many scandals involving abusive coaches, including Bob Birarda, Bertrand Charest, Dave Brubaker and many others, underscore the urgent need to act. Their predatory behaviour

has caused irreparable harm to young athletes and has tarnished the reputation of Canadian sport.

The Liberals, the leaders of the current government, have failed in their duty to be vigilant and to protect our athletes. It is time to recognize the flaws in the system and undertake serious reforms to ensure that every athlete can grow in a sport environment free from pressure and abuse. Our athletes deserve better. It is our collective responsibility to make that happen. When will there be a public inquiry into abuse and mistreatment in sport?

I will add that the current Minister of Sport committed, last December, to striking a voluntary commission. Although imperfect, such a commission would have allowed the matter to come before the public again. Victims could have testified about the harm and suffering they endured and they could have denounced the abuse. It has been six months. This commission was supposed to be launched a month later. We are still waiting, just as we are still waiting for the previous minister's commitment regarding a public and independent inquiry. When will the government take action on the public inquiry into sport?

● (2215)

Mr. Adam van Koeverden (Parliamentary Secretary to the Minister of Environment and Climate Change and to the Minister of Sport and Physical Activity, Lib.): Madam Speaker, I am pleased to have this opportunity to address the House of Commons on this very important matter. I thank my colleague for his work on this very relevant issue.

Our government firmly believes that Canadians deserve a sport system that reflects and celebrates the values of equity and inclusiveness. Over the past few years, we have made significant progress. Credit is owed to the athlete survivors who courageously shared their stories with the media and with House of Commons and government committees. Although it should not have been necessary, their advocacy turned this conversation into a national priority.

We very clearly heard the call for systemic change in sport. Sport systems in Canada and around the world are going through a period of upheaval. Trust in our sports organizations and leaders has crumbled. Since June 2022, two parliamentary committees have studied maltreatment in Canada's sport system.

We announced the launch of an independent and impartial commission on the future of sport in Canada. The commission will provide a forum to shed some light on the experiences of survivors, to support healing and to explore how to improve the sport system in Canada. The commission will be trauma-informed. It will be centred on survivors and based on human rights.

The commission will consist of three individuals and will be headed by an independent legal expert, who will be appointed commissioner. This person will be independent of both the government and the sports system. The commissioner will be supported by two special advisers, one with lived experience or expertise in victims' rights, child protection or trauma-informed processes. The other advisor will have expertise and experience in sports.

Adjournment Proceedings

The commission will report publicly on its findings and make recommendations in two specific areas. The first will outline action that can be taken to improve the safety of sport in Canada, including trauma-informed approaches, to help athletes heal from maltreatment in sport. The second area will include action that can be taken to improve the sport system in Canada as a whole, including issues related to policy, funding, structures, governance, reporting, accountability, conflicts of interest, system alignment, culture and legal considerations.

Following public engagement and a preliminary public report, the commission will hold a national summit where participants can deliberate on the commission's preliminary findings and recommendations to inform its final recommendations.

Mr. Sébastien Lemire: Madam Speaker, I thank my colleague from Milton. I think that was a genuine response that I got here in the House of Commons, which is quite rare. That being said, it is not the step towards an independent public inquiry that I had hoped for.

We believe that an inquiry is a necessary step towards structural reform. An independent public inquiry would identify the shortcomings in the current system and propose concrete solutions for guaranteeing a safe and healthy sporting environment. It is shocking that, two years after the Hockey Canada scandal, the minister has not supported survivors' and advocates' calls for a national inquiry that meets judicial standards, with the power to compel documents and subpoena testimony from organizations, including the current Minister of Sport and Physical Activity for her role over the decades at all levels of this ecosystem.

In that context, I would like the minister to explain how she intends to handle this conflict, given that she is, after all, judge and jury of her voluntary commission. These questions remain unanswered.

Mr. Adam van Koevorden: Madam Speaker, I want to once again thank my colleague for his interest in this file, which is very timely and very important to me. It is possible for us to want the same positive results while disagreeing somewhat on how to implement the change.

The member and I will have to have some conversations during the process. I think that the mechanism that we have chosen is more suitable for what we are trying to accomplish. The commission will adopt a forward-looking approach that is carefully designed so as not to retraumatize victims and survivors. This approach will also offer more flexibility than a public inquiry, while demonstrating the government's support and the importance of this issue. This approach will also enable the provinces and territories to participate in a flexible, asymmetrical way, given the nature of the sport system, which encompasses many different organizations.

• (2220)

[*English*]

FOREIGN AFFAIRS

Mr. Mike Morrice (Kitchener Centre, GP): Madam Speaker, as we speak tonight, Israel is launching its long-threatened ground invasion of densely populated Rafah in southern Gaza, and 1.4 million civilians are braced for what the United Nations warned could

lead to a bloodbath. Meanwhile, Netanyahu's government has rejected the terms of a ceasefire agreement, 132 hostages remain held by Hamas, and the UN World Food Programme says that northern Gaza has entered full-blown famine.

Even before tonight, over 35,000 Palestinians had already been killed in Gaza over the past seven months, including more than 15,000 children. This is all happening two months after the International Court of Justice called on the State of Israel to take six immediate steps to prevent genocide. The Canadian government must press Israel and the Netanyahu government to follow the ICJ ruling and avoid further civilian loss of life.

I should not have to call for this. We already did it. In mid-March, Parliament passed a motion that called on the Government of Canada to take 10 actions. The terms of the motion are the will of Canadians as represented by a large majority of MPs in the House, and the parliamentary secretary and all but three of his Liberal colleagues supported the motion.

We have now given the government plenty of time to demonstrate that it deserves the trust of Canadians in following through on the critical terms of the motion. One of the actions, restoring funding to the United Nations Relief and Works Agency, UNRWA, was followed. Disappointingly, however, many actions seem to have been ignored, including ending arms exports to Israel and placing sanctions on extremist settlers. Another action that seems to have been ignored was supporting the work of the International Court of Justice, and to support the ICJ, the Government of Canada must press the State of Israel to follow its ruling.

One of the ICJ's six provisional measures issued in late January called for humanitarian aid to be allowed into Gaza, yet just over a month after the ruling, on February 29, we learned of the Flour Massacre, in which 118 Palestinians were killed and 760 were injured after Israeli forces opened fire on civilians seeking food from aid trucks in Gaza City. At the time, I had risen to press the Minister of Foreign Affairs for the ICJ measures to be followed, yet it got worse.

Just over a month later, Israel said it mistakenly struck a World Central Kitchen convoy, killing seven aid workers, including dual Canada-U.S. citizen Jacob Flickinger. Two weeks later, a Canadian humanitarian aid organization, the International Development and Relief Foundation, IDRF, had its water truck bombed. The water truck was paid for entirely by Canadian donors, and thousands of people have been without water as a result of the bombing. No humanitarian aid worker should be killed in a conflict zone, yet according to the UN, more than 200 workers have died since October 7, 2023, in Gaza.

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Ensuring that humanitarian aid flows in Gaza is just one of six measures. As Greens, we continue to call for the government to press for all six measures to be followed by the State of Israel to prevent acts of genocide; for a ceasefire, as we have called for since October 8, 2023; for all hostages to be released by Hamas; for a two-way embargo on military equipment to Israel; and for sanctions on extremist settlers.

The government should be doing everything possible to protect innocent civilians, including aid workers and the hostages, yet with the ground invasion of Rafah now under way, the humanitarian catastrophe in Gaza has become all the more dire. Urgent action is needed from the Canadian government.

Therefore, my question to the parliamentary secretary is this: What is his government doing in response to the invasion of Rafah, and what specifically is the government doing to call on the State of Israel to follow the ICJ ruling to prevent acts of genocide?

• (2225)

Mr. Adam van Koevorden (Parliamentary Secretary to the Minister of Environment and Climate Change and to the Minister of Sport and Physical Activity, Lib.): Madam Speaker, it goes without saying that this is an extremely difficult topic to discuss in the House of Commons.

The member opposite and I have spent some time together discussing this, and our personal views are very well aligned. I would actually say that we are not members opposite, particularly on this issue, but on many issues, we see eye to eye. Together, I know that we share an immense grief, and our hearts break for the loss of civilian life that the world has witnessed over the last more than six months now.

Those impacted are at the front of our minds, including all families and communities affected by this violence, but children in particular have been disproportionately affected by the ongoing hostilities, and that is not right. The horrific attacks by Hamas against Israeli civilians still shock us all. Hamas is a terrorist organization, and we are unequivocal in our condemnation of Hamas' terrorist attacks against Israel, the appalling loss of life and the heinous acts of violence perpetrated in those attacks. Canada condemns Hamas' unacceptable treatment of hostages and calls for the immediate and unconditional release of all remaining hostages.

What has been happening in Gaza since October 7 is absolutely catastrophic. The humanitarian situation in Gaza was already dire. The impacts of an expanded military operation in Rafah would be devastating for Palestinian civilians as well as for foreign nationals who are seeking refuge. They simply have nowhere else to go. As the minister has said, asking them to move again is unacceptable.

I have been to Rafah. I have visited UNRWA schools in Palestine. I have been to Gaza, and I have done humanitarian aid work in those communities. When I visited eight years ago, that was the toughest part of the world that I have ever seen. I am fortunate enough to have travelled with multiple NGOs. I have seen some of the toughest, most war-affected, poorest places in the world. Gaza, eight years ago, was the toughest place I have ever seen, that I have ever witnessed. It is way worse today.

Canada has been calling for an immediate, sustainable ceasefire for months now. The violence must stop. This cannot be one-sided. Hamas must release all hostages and lay down its arms. Humanitarian aid must be urgently increased and sustained. The need for humanitarian assistance in Gaza has never been greater. Rapid, safe and unimpeded humanitarian relief must be provided to civilians.

Canada was the first G7 country to act. We led the way, and we will continue to work with partners toward ensuring the sustained access of humanitarian assistance for civilians, including food, water, medical care, fuel, shelter and access for humanitarian workers.

The member from the Green Party, my colleague from Kitchener Centre, referenced the IDRF water truck that was bombed. The CEO, the chief executive officer, of IDRF, lives in my riding. We speak frequently, and I want to thank Mahmood for his ongoing hard work, advocacy and extremely challenging efforts over his entire career.

To date, Canada has announced \$100 million in humanitarian assistance to address the urgent needs of vulnerable civilians in this crisis. More aid must get into Gaza. We must continue to support trusted UN agencies and humanitarian actors to provide this assistance. When it comes to UNRWA, we understand the vital role it plays in delivering aid to Palestinian civilians. UNRWA needed to undertake some reform efforts, and the Secretary-General of the United Nations has taken steps to enhance oversight and accountability within UNRWA, alongside the ongoing investigation and review.

I have more to say, and I will do so after my colleague's rebuttal.

Mr. Mike Morrice: Madam Speaker, I want to start by agreeing with my friend from Milton. Yes, we condemn Hamas. Yes, Hamas must release all hostages. Yes, from his own personal experience, he knows better than most, having seen from his time in Gaza, that things have only gotten worse there in the time since.

It is also true that it has been six weeks now since this Parliament passed a motion calling on the government that he is a part of to take further action. It has been three months since the International Court of Justice called on the State of Israel to take six immediate steps to prevent acts of genocide.

It is critical that the Liberal government call on Israel to follow through on that ICJ ruling. Can the member speak, particularly on this night, as we know the invasion of Rafah has begun, to what can and will be done by the current government to call for the ICJ ruling to be followed?

Adjournment Proceedings

• (2230)

Mr. Adam van Koeverden: Madam Speaker, when it comes to South Africa's case at the International Court of Justice, the court has been clear on provisional measures. Israel must ensure the delivery of basic services and essential humanitarian assistance, and it must protect civilians. The court's decisions on provisional measures are binding. We will continue to respond to the urgent needs of this crisis. Canada is clear that a sustainable ceasefire is absolutely critical to finding a path towards securing lasting peace for Israelis and Palestinians alike.

With respect to UNRWA, I do not think I finished my thought earlier. Canada continues to hold UNRWA to the highest standards. Its credibility and ability to continue its life-saving work absolutely depends on that, and it also depends on our support, which has not wavered. It was important that we took some time, as the other funding countries did, but no less funding went to that organization as a result of that. We continue to work closely with the UN, with UNRWA and with other donor countries to ensure that UNRWA meets its obligations and continues its efforts.

CARBON PRICING

Hon. Michelle Rempel Garner (Calgary Nose Hill, CPC): Madam Speaker, earlier in the session, I raised the issue of the ineffectuality of the carbon tax.

Climate change is a very serious issue, and I find that the Liberal government's approach to this policy has made it very difficult for Canada to achieve any sort of gains in making progress on our targets. Moreover, the carbon tax has made it a lot harder for people to afford to live.

In my riding of Calgary Nose Hill, I feel that the government should have done things such as invest in public transit and worked with our municipalities to build out LRTs. However, instead, we see an increased cost of living.

We need to axe the tax. Why has the government not done this?

Mr. Adam van Koeverden (Parliamentary Secretary to the Minister of Environment and Climate Change and to the Minister of Sport and Physical Activity, Lib.): Madam Speaker, there is a common misconception about carbon pollution pricing and, quite frankly, I am surprised to be having this conversation with the member, who is extremely reasonable and generally quite fact-based and believes in science.

Three hundred top economists from Canada have all written a letter pointed squarely at the Conservatives and their rhetoric around carbon pricing, urging them to look at the facts. A couple of things are true. One, our price on pollution is not having a negative impact on the very real challenges with respect to affordability that Canadians are facing. Inflation is the number one cause of the challenges that Canadians are facing when it comes to paying their bills, but there are other factors as well, like corporate profits and climate change itself, which is having an outsized impact on the price of food, particularly produce and meat, in all provinces and everywhere around the world, not just in Canada.

This idea, referenced by my colleague, that carbon pollution pricing is the root of the affordability challenges is absolutely not founded in truth. It is this approach that the Conservatives have tak-

en, which is a fact-free freelance on evidence and science. They seem to be ignoring all these economists who are basically urging the Conservatives to take a different approach. They have not, unfortunately. Even the most progressive and reasonable members of the Conservative caucus need to sing for their lunch and repeat the phrase over and over again, repeating the slogan.

Slogans are not progress. Slogans are not policy. Slogans are not going to solve an existential threat like climate change. When somebody wins a Nobel Prize in economics for a concept, and then relates that to Canada's approach to carbon pricing, as William Nordhaus has done, who won a Nobel Prize for carbon pricing and said recently that Canada is getting it right, it demonstrates to the world exactly how carbon pricing should be done. It is because it is having a positive impact on the finances of families who are on the lower-income scale. I think back to how my mom's finances would have been supported with a \$1,000 cheque, and now it is a \$1,120 cheque for a family of four in Ontario.

We need to rely on facts and evidence to get our emissions down in this country. Canada is one of the highest-emitting countries per capita, and a lot of that is coming from the province of my colleague, which is our largest oil and gas-producing province by far. Almost 40% of Canada's emissions are coming from Alberta and the oil sands there. Alberta has about 13% of Canada's population, so that is an outsized footprint that we need to address.

It is unfortunate that we are here late into the night repeating slogans and catchphrases, but catchphrases and slogans are not policy. They are not going to help solve an existential threat like climate change. Carbon pricing is just one of a suite of measures that is lowering our emissions. In 2015, our emissions were going up. It is now 2024 and our emissions are coming down markedly. Finally, we will achieve our 2026 targets. That is really remarkable.

We were on the wrong path in 2015, and we have changed course. We have turned around and lowered our emissions in Canada. This is a team effort. It does not have to be a partisan thing. It is not a Liberal approach to solving climate change or a Conservative one. It is Canada's approach to solving climate change and lowering our emissions, and I wish the Conservatives would come up with some solutions.

Adjournment Proceedings

• (2235)

Hon. Michelle Rempel Garner: Madam Speaker, the reality is that even internationally renowned scientists like Jane Goodall have said that the carbon tax will not address greenhouse gas emissions in Canada. Even the member opposite has made statements that I think stifle innovation, such as that “building highways is not a way to fight climate change.”

The reality is that we need to find a solution in Canada that will reduce greenhouse gas emissions while encouraging economic growth and also addressing the needs of Canadians, like driving to work, which the member would know, especially in his riding, is a bit of a problem. What I think Dr. Goodall was saying in her remarks was that when we have a policy that is not working and is making life less affordable, we need to innovate. We need to think of other ways to address the problem.

I think everybody agrees that the carbon tax is not working to reduce greenhouse gas emissions in Canada. What would my colleague opposite say we should be doing instead?

Mr. Adam van Koeverden: Madam Speaker, that is false. Economists from across the country, the climate change report, the commissioner of climate change and the environment for Canada,

and all the climate action organizations are urging the Conservatives to please stop it with these slogans. It is only the Conservatives. There are zero economists in Canada suggesting that a price on pollution does not lower emissions.

Our emissions are coming down. Our plan is working, and it is not resulting in hardship for families. Families are experiencing financial hardship right now, but pointing to pricing pollution is a false narrative.

I note that the Conservative member did not mention that Danielle Smith, the Premier of Alberta, jacked up the price of fuel by four cents on April 1. Meanwhile, her whole caucus and the Conservatives in Alberta were screaming and yelling about a three-cent increase. It is just—

The Assistant Deputy Speaker (Mrs. Alexandra Mendès): We are done.

The motion that the House do now adjourn is deemed to have been adopted. This House stands adjourned until tomorrow at 10 a.m. pursuant to Standing Order 24(1).

(The House adjourned at 10:38 p.m.)

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