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Thursday, March 21, 2024

The Honourable RAYMONDE GAGNÉ,
Speaker

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THE SENATE

Thursday, March 21, 2024

The Senate met at 2 p.m., the Speaker in the chair.

Prayers.

SENATORS' STATEMENTS

THE HONOURABLE MOHAMED-IQBAL RAVALIA, C.M.

Hon. Raymonde Saint-Germain: Honourable senators, I rise today on behalf of the Government Representative in the Senate, the Leader of the Opposition, the leader of the Canadian Senators Group, the leader of the Progressive Senate Group and as Independent Senators Group facilitator. Allow me to thank the Conservative caucus and, in particular, Senator Mockler for providing me with this time to speak.

On Tuesday morning, while inside the Sir John A. Macdonald Building with other parliamentarians and dignitaries waiting to pay tribute to Canada's eighteenth Prime Minister, the late Right Honourable Brian Mulroney, an individual collapsed. It became immediately clear to those nearby that this person, a former parliamentarian, required emergency medical attention.

A page noted that a doctor was needed, and one in particular was quick to respond to the call. The scene before them was as follows: An individual was unconscious on the ground. Parliamentary Protective Service personnel were attending to the situation and commenced performing cardiopulmonary resuscitation, or CPR.

Shortly after assessing the situation, the doctor assisted and intervened, noting after the third cycle of CPR that the patient had become responsive but had a very "thready" pulse. This is a pulse that is weak or one that is difficult to feel. Our parliamentary colleague managed to keep the patient stable until the paramedics had arrived and could take over his care, which was revealed to be a serious cardiac event.

The doctor in question was our colleague the Honourable Senator Mohamed-Iqbal Ravalia.

On behalf of all Senate group leaders — and by extension all senators — we commend Senator Ravalia for his heroism, springing into action with only a moment's notice.

Your grace, courage and professionalism under these unforeseen circumstances are admirable and immensely appreciated. We are all proud of you, Senator Ravalia. Thank you. *Meegwetch.*

Hon. Senators: Hear, hear!

SANOA DEMPFLÉ-OLIN

Hon. Bev Busson: Honourable senators, I'm proud today to honour a remarkable young woman and a future Olympian, Sanoa Dempfle-Olin, from beautiful Tofino, British Columbia.

On March 2, Sanoa made history by becoming Canada's first Olympic surfer ever, after officially qualifying for the Paris 2024 Olympic Games. You probably know that surfing is not a sport that we popularly associate with Canada.

Coming from a family of proud and talented surfers, Sanoa's passion for the sport started when she was only six years old after she received her very first surfboard. After years dedicated to training, she became the youngest female surfer ever to win the Tofino Rip Curl Pro when she was 12 years old.

Earlier this year, at only 18 years old, Sanoa helped Canada finish fourth in the 2023 PanAmerican Surfing Games and later secured the silver medal in the PanAm women's final in Santiago, Chile.

Her path to the Olympics was provisional as she awaited participation in the 2024 International Surfing Association, or ISA, World Surfing Games in Arecibo, Puerto Rico. Happily, after an impressive third place finish, having posted the single-highest wave score and heat total, Sanoa officially qualified for the Paris 2024 Olympic Games.

Because it's not noted as a wonderful surfing destination, the Olympic venue for this event will be at Tahiti's Teahupo'o venue, considered one of the world's most potentially dangerous surfing spots, often generating waves at 25 feet and barrels large enough to stand in. At the heart of Sanoa's success is her positive attitude and passion for her sport, stating:

It's wonderful and magical. . . . Getting to connect with the ocean and to be in nature is unlike any other sport, and I love it.

Sanoa's accomplishments not only serve as a beacon for other Canadian surfers, but will no doubt inspire the next generation of young athletes interested in representing their sport at many levels.

I would like to take this time to extend my heartfelt congratulations on her amazing achievement. Canada stands with you, Sanoa, as you take your next steps in your extraordinary journey, and we eagerly anticipate cheering you on as you continue to make history.

May the waves of success carry you and the maple leaf to great heights in the upcoming Olympics.

Thank you very much.

Hon. Senators: Hear, hear!

[Translation]

VISITORS IN THE GALLERY

The Hon. the Speaker: Honourable senators, I wish to draw your attention to the presence in the gallery of representatives and members of the Association pour l'intégration communautaire de l'Outaouais. They are the guests of the Honourable Senator Oudar.

On behalf of all honourable senators, I welcome you to the Senate of Canada.

Hon. Senators: Hear, hear!

WORLD DOWN SYNDROME DAY

Hon. Manuelle Oudar: Honourable senators, I am truly honoured to address you for the first time as a new senator. Today, March 21, is World Down Syndrome Day, and Quebec Intellectual Disability Week runs until March 23.

I'd like to thank the Progressive Senate Group for graciously offering me this opportunity to make a statement. I would also like to thank all of the community organizations, especially l'Arche L'Étoile, where I volunteered for several years. Lastly, I want to pay tribute to all people with intellectual disabilities.

[English]

Everyone I have met has something invaluable and unique. It is a treasure for a community. They certainly taught me every day to be a better person. Thanks to all these great people, I am what I am today, and I have the duty to say thank you to them.

• (1410)

[Translation]

This day and this week are an opportunity to give greater voice to people with intellectual disabilities and their loved ones, and to recognize the work of community organizations, such as APICO, the Association pour l'intégration communautaire de l'Outaouais. Indeed, this is something we can do all year long.

We have with us today APICO's executive director, Stéphane Viau, along with assistant director Alain Lamarche, integration officer Marie-Laurence Viau and APICO clients Marc Cyr and Lydia Pelletier.

In addition to promoting and facilitating social and community integration, APICO provides practical assistance tailored to the holistic needs of people with intellectual disabilities and their biological, foster or rehabilitative care family. The organization strives to help the general public recognize people with intellectual disabilities as equal citizens who have rights. APICO facilitates integration and participation in social and community life.

Honourable senators, today is World Down Syndrome Day, so on this special day, let us join together to learn more about people with intellectual disabilities and welcome them in our communities.

[English]

These people have unique talents and differences in how they communicate, relate to others and see the world. I invite us to take action to remain open to differences. We all have actions to take.

[Translation]

Today and every day of the year, let us salute the people who live with these differences and their families, along with the care providers and many community organizations that work with them. Thank you.

Hon. Senators: Hear, hear.

[English]

VISITORS IN THE GALLERY

The Hon. the Speaker: Honourable senators, I wish to draw your attention to the presence in the gallery of Carolyn Patton, Chair of the Board of the Vimy Foundation, who is accompanied by members of the board of directors and staff. They are the guests of the Honourable Senator Patterson.

On behalf of all honourable senators, I welcome you to the Senate of Canada.

Hon. Senators: Hear, hear!

VIMY RIDGE DAY

Hon. Rebecca Patterson: Honourable senators, on April 9, Canada will commemorate Vimy Ridge Day. I want to acknowledge the members of the Vimy Foundation with us today, who help keep the memory alive.

The Battle of Vimy Ridge during the First World War was not just a military victory for Canada, but it was also seen as the birth of a modern Canada emerging from Britain's imperial shadow.

[Translation]

The four Canadian Corps divisions fought together for the first time at the Battle of Vimy Ridge. During the war, Canadians earned a reputation for their valour in combat. That's why Canadians were chosen to fight at Vimy in April 1917, and they emerged victorious.

[English]

WORLD TUBERCULOSIS DAY

One hundred years after the battle — at that same spot, where more than 10,000 Canadians were either killed or wounded — a future king paid tribute:

. . . Canadians displayed a strength of character and commitment to one another that is still evident today. They did not waiver. This was Canada at its best. The Canadians at Vimy embodied the true north, strong and free.

The Battle of Vimy Ridge, and indeed the First World War, was not the only time that Canada found itself in the crucible of conflict. While Canada's bloodiest conflict was the First World War, it was not nearly our longest.

Colleagues, I address you now as a veteran of Canada's longest conflict: Canada's military operation in Afghanistan.

Just over 10 years ago, the Maple Leaf was lowered for the last time in Kabul, Afghanistan. While Canada — and the world — pauses every September 11 to remember, how many of you actually paused on March 12?

Colleagues, 158 Canadian soldiers, sailors and aviators fell over the course of 13 years of our military operations in Afghanistan. This includes Master Corporal Kristal Lee-Anne Giesebrecht, a medical technician from 1 Canadian Field Hospital — one of four Canadian women to die in combat.

In addition, one Canadian diplomat and six Canadian civilians were also killed. We must also never forget that more than 2,000 Canadians came home permanently wounded or injured. Sadly, these statistics do not include those who were haunted by their own personal demons, and who have succumbed to their physical and mental wounds at home since then.

Colleagues, when someone has worn the maple leaf — whether on the uniform of the Canadian Expeditionary Force at Vimy in 1917, or the Canadian Armed Forces in Afghanistan — those brave men and women embodied all it represented. Around the world, Canada and that maple leaf were — and are — seen as a beacon of security, stability and, above all, hope. Those who served in both of these wars represented the best of this huge country and pushed Canada onto the international stage through their sacrifice.

Honourable senators, in closing, I want to bring you back to modern day Vimy Ridge. On April 9, 2007, at the unveiling of the refurbished Vimy Memorial, Her late Majesty Queen Elizabeth II said:

To their eternal remembrance, to Canada, to all who would serve the cause of freedom, and to those who have lost their lives in Afghanistan, I rededicate this magnificently restored [Vimy] memorial.

May they all rest in peace. We will remember them.

Hon. Rosemary Moodie: Honourable senators, this coming Sunday, March 24, marks World Tuberculosis Day.

Tuberculosis, or TB, is an airborne infectious disease which kills over 1 million people every year and spreads to millions more. While TB is one of the oldest diseases that still affects humanity, it is far from being a relic of a bygone era — it is still a terrible reality for millions, and remains the deadliest infectious disease. This is despite TB being both preventable and treatable.

Here, in Canada, TB disproportionately affects Indigenous peoples, particularly Inuit communities. With ongoing outbreaks in multiple northern communities, the rate of TB among Inuit is 280 times that of non-Indigenous people born in Canada.

The *Final Report of the Truth and Reconciliation Commission of Canada* found that thousands of children were exposed to and ultimately died from TB during their time in residential schools. While we work toward reconciliation with Indigenous peoples, the truth that Indigenous peoples still suffer due to TB is a painful reminder of how far we have yet to go.

TB also affects many people in Canada's large cities who are new arrivals to this country. These newcomers — who may have become infected with TB in higher-burden countries, and fall ill once they get to Canada — face many barriers to receiving timely TB care.

Ensuring continuity of health care services for new arrivals and timely testing of high-risk groups is imperative to addressing Canada's TB outbreaks at the source. Addressing TB is a matter of upholding Canada's commitments to health equity, and ensuring that everyone can enjoy their right to good health.

In 2015, Canada joined the rest of the world in a commitment to eliminate TB by 2030 as part of the Sustainable Development Goals. In 2024, we are just past the halfway point, and there remains much to be done.

The COVID-19 pandemic stalled progress at home and around the world. For the first time in decades, rates of TB rose globally. Here at home, rates remain stubbornly stuck, no longer decreasing, for nearly two decades.

With new health innovations to prevent, diagnose and cure TB, and with sustained activism and political attention, I believe that we can end TB.

As I conclude, I want to thank the grassroots advocates from Stop TB Canada, TBpeople Canada and Results Canada for their tireless efforts in raising awareness, and their work in building the political will to end TB. Thank you.

THE HONOURABLE ROLAND ROY MCMURTRY, O.C.

Hon. Brent Cotter: Honourable senators, a great Canadian died this week. The Honourable Roy McMurtry passed away on Monday. He was 91.

• (1420)

Roy McMurtry was, in the best sense of the word, an honourable man and a great Canadian.

A distinguished lawyer, Mr. McMurtry became active in politics at a young age and rose to become a leading member of the Progressive Conservative Party in Ontario and a long-serving attorney general in the cabinet of premier Bill Davis. He served with distinction from 1975 to 1985 in that role.

History has a way of often placing the best people in the most important places at the right time when needed most. Such was the case with Mr. McMurtry in the late 1970s and early 1980s. At the most crucial moments of federal-provincial negotiations to repatriate the Constitution of Canada and finalize a constitutional Charter of Rights and Freedoms for our country, three men met late at night in the kitchen of a hotel suite here in Ottawa: Jean Chrétien, Roy Romanow and Roy McMurtry. On a napkin, those three, “the kitchen cabinet,” mapped out the compromise that unlocked the debate and led to the adoption for Canada of its most important, fundamental laws.

After a distinguished career in politics, Mr. McMurtry was appointed to the bench and rose to become the Chief Justice of the Court of Appeal for Ontario, Ontario’s highest court. He served in that role, again, with distinction. In partnership with his Associate Chief Justice Dennis O’Connor, whom many of you know, Chief Justice McMurtry led what was indisputably at that time the best court in Canada.

As chief justice, he led the court not just with generosity but with judicial wisdom. In perhaps the most important decision that court ever made, Chief Justice McMurtry, with Justices James MacPherson and Eileen Gillese, decided unanimously that the denial of marriage to same-sex couples was unconstitutional, with immediate effect. It was the deciding case that established equal rights to marriage. *The Globe and Mail* selected those three justices as its newsmakers of the year for 2005.

Those are only the highlights — as great as they are — in the career of a great man.

But there is more: It is rare for someone who has achieved so much in their career to also be beloved, but that is undoubtedly true of Roy McMurtry. Justice MacPherson described him as “a wonderful person and a truly superb chief justice.”

I know his children mourn his passing. Harry, Jim, Jeannie, my friend Janet, Erin, Michael and 12 grandchildren will miss him dearly, as will his hundreds of friends in Toronto, across Ontario and indeed around the country.

I was a minor friend of Chief Justice McMurtry and count myself blessed to have known him, as do many in this chamber and across this great land, a country made greater by his life and contributions to it.

Thank you.

Hon. Senators: Hear, hear!

VISITORS IN THE GALLERY

The Hon. the Speaker: Honourable senators, I wish to draw your attention to the presence in the gallery of students from McGill University’s Women in House program. They are the guests of many honourable senators.

On behalf of all honourable senators, I welcome you to the Senate of Canada.

Hon. Senators: Hear, hear!

ROUTINE PROCEEDINGS

FOREIGN AFFAIRS AND INTERNATIONAL TRADE

STUDY ON THE IMPACT AND UTILIZATION OF CANADIAN CULTURE AND ARTS IN CANADIAN FOREIGN POLICY AND DIPLOMACY—TWENTY-SIXTH REPORT OF COMMITTEE TABLED DURING FIRST SESSION OF FORTY-SECOND PARLIAMENT—GOVERNMENT RESPONSE TABLED

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate): Honourable senators, I have the honour to table, in both official languages, the government response to the twenty-sixth report of the Standing Senate Committee on Foreign Affairs and International Trade, entitled *Cultural Diplomacy at the Front Stage of Canada’s Foreign Policy*, deposited with the Clerk of the Senate on June 11, 2019, during the First Session of the Forty-second Parliament.

(Pursuant to rule 12-23(4), this response and the original report are deemed referred to the Standing Senate Committee on Foreign Affairs and International Trade.)

INVESTMENT CANADA ACT

TWELFTH REPORT OF BANKING, COMMERCE AND THE ECONOMY
COMMITTEE PRESENTED

Hon. Pamela Wallin, Chair of the Standing Senate Committee on Banking, Commerce and the Economy, presented the following report:

Thursday, March 21, 2024

The Standing Senate Committee on Banking, Commerce and the Economy has the honour to present its

TWELFTH REPORT

Your committee, to which was referred Bill C-34, An Act to amend the Investment Canada Act, has, in obedience to the order of reference of Thursday, December 14, 2023, examined the said bill and now reports the same without amendment but with certain observations, which are appended to this report.

Respectfully submitted,

PAMELA WALLIN

Chair

(For text of observations, see today's Journals of the Senate, p. 2537.)

The Hon. the Speaker: Honourable senators, when shall this bill be read the third time?

(On motion of Senator Gignac, bill placed on the Orders of the Day for third reading at the next sitting of the Senate.)

[Translation]

BUSINESS OF THE SENATE

The Hon. the Speaker: Pursuant to the order adopted by the Senate on December 7, 2021, Question Period will begin at 4 p.m.

[English]

ORDERS OF THE DAY

MISCELLANEOUS STATUTE LAW AMENDMENT ACT, 2023

SECOND READING—DEBATE ADJOURNED

Hon. Brent Cotter moved second reading of Bill S-17, An Act to correct certain anomalies, inconsistencies, out-dated terminology and errors and to deal with other matters of a

non-controversial and uncomplicated nature in the Statutes and Regulations of Canada and to repeal certain provisions that have expired, lapsed or otherwise ceased to have effect.

He said: Honourable senators, this afternoon, there was a technical briefing with respect to the miscellaneous statute law amendment act. It inspired me to share this story with you, if I may. It was told to me by Lorne Calvert, former premier of Saskatchewan. He served as a minister of the United Church before he entered politics, and obviously he was a minister-in-training in Saskatoon before that. What used to happen on Sunday mornings for ministers-in-training was that they would be sent out into the field to small churches to essentially practise on small congregations.

Mr. Calvert was sent out to a small church in rural Saskatchewan. He prepared the front of the church for the religious service and waited. Only one person showed up: an old rancher. So he thought, "This is unfortunate." He went to the rancher and said, "I guess with only one person here, there's not much point proceeding with the service." The old rancher said to him in a fairly gruff voice, "Well, when I go out to feed my cows, and only one cow shows up, I still feed it."

Mr. Calvert got the message and delivered the full church service, the 15-minute homily and all the rest of it. At the end, he went back and spoke to the old rancher to get feedback on how he was doing as a minister-in-training. The old rancher said to him, "Well, when I go out to feed my cows, and only one shows up, I feed it, but I don't give it the whole load."

Well, at the technical briefing for senators today that I hosted, only one senator showed up, and that was me.

• (1430)

I tried my darnedest to get members of the Legal Committee to attend this fascinating briefing, but they were too riveted by the responsibilities of the committee.

I want to say, colleagues, that this is not the most exciting legislation that we will consider in this chamber. But it is important in this respect: We are a country governed by laws and the rule of law, so it is exceedingly helpful that the laws we have are right, clear, up to date and align the French and English versions for parliamentarians, but especially for citizens — who need to rely upon the laws being precise, clear and correctly aligned when they inform, influence and guide their lives.

Usually, the laws we work on here are big laws and we are well engaged. But these little laws are also important, so that we're not creating unintended conflicts or a lack of clarity, and to ensure that the references in our laws are up to date. In a moment, I will share five examples.

At this point, I want to extend our thanks to the dozens of officials, working under the responsibility of 19 ministers, who have monitored and reviewed hundreds of laws leading to this update, which amends 58 acts. It has 165 clauses and 545 amendments. And given that I have 45 minutes, I will review every single one of them with you.

As I will note, a few of these amendments correct misnumbering and cross-referencing, especially when there is a new bill that moves things around; sometimes the numbering is wrong. But most of these amendments — and this is encouraging in terms of the quality of our discipline and that of the government departments over the years — are influenced by forces outside of the operation of the Government of Canada. What you are approving is a set of minor, non-substantive changes that are a result of our officials being highly attentive to language changes elsewhere, keeping our laws modern and relevant. It is not the most exciting work, but we should salute those who do it.

Here is what we are essentially doing with respect to Bill S-17: correcting certain anomalies, inconsistencies, outdated terminology and errors with matters that are non-controversial and uncomplicated in the statutes and regulations of Canada. Let me give you a little background so that you will have some comfort in my recommendation, colleagues, that this need not return to committee, but should carry on through passage in this chamber.

The way this works — and it has worked this way since 1975 — is that the Department of Justice, with the approval of the cabinet, created the Miscellaneous Statute Law Amendment Program. This program is designed to correct anomalies, inconsistencies and some errors. This has been operative since 1975, and this is the thirteenth in a series of bills introduced as a part of this program, the first of which was tabled in 1977. This is the most recent one, the first since 2017.

This process works in the following manner: A document containing proposed amendments is prepared. It is first tabled in Parliament for review by a committee in each house. As you may know, that was and is typically done here by the Standing Senate Committee on Legal and Constitutional Affairs. It was also done by the Justice Committee in the other place.

To qualify for consideration in this bill, a proposed amendment must meet these very shallow criteria: It must not be controversial, involve the spending of public funds, prejudice the rights of any person, create any new offences or subject a new class of people to an offence. Under this program, requests for amendments come in from all of the various departments and agencies. Then, the Department of Justice coordinates them and brings them forward for our consideration. This also includes suggestions from the Standing Joint Committee for the Scrutiny of Regulations, which my colleague Senator Woo is a part of.

After that is done, the single document gets tabled in this place and the other place and goes to the committee for study, which is what happened here. It came to us in June 2023 and was referred to the Standing Senate Committee on Legal and Constitutional Affairs; we studied it and reported back in December. A similar process was undertaken in the other place.

Through that process, a very small number of those 545 amendments were stripped out as being potentially controversial — or, at least, it was the view of some members of those committees that it might not be wise to proceed with them. After that, we got this bill. The bill is the result of that process. The bill was drafted based on the twenty-first report of the Senate

Standing Senate Committee on Legal and Constitutional Affairs and the twenty-first report of the other place's Standing Committee on Justice and Human Rights.

The amendments track those four criteria. I want to describe to you the four or five categories so that you will have a flavour of what is in the bill.

Many of the amendments relate to the Canada Agricultural Review Tribunal. In fact, when I read through virtually all of these 545 amendments, I was shocked by how important the Canada Agricultural Review Tribunal seems to be. Senator Black probably knew this all along, but I did not. This is because at some point we changed its name from the “Review Tribunal” to the “Canada Agricultural Review Tribunal,” and so a lot of laws had to be updated in that respect. It is good legislation. Some people need to know where to go and what agency they may need in order to pursue a remedy in the review process. Now we have the name of the body correct in all of the right places.

Another example, which is not at all the fault of the Government of Canada but, if I may say so with the greatest of respect, that of the provinces of Newfoundland and Labrador and Prince Edward Island. They changed the official names of their superior courts from the “trial and appeal divisions” of their supreme courts to “the Supreme Court of Newfoundland and Labrador” and “the Supreme Court of Prince Edward Island” respectively. A lot of federal laws directed matters to these courts, so these laws all had to be updated to refer to the right court by the right name. Darn those provinces. There are at least 50 such changes in this package. This will not be life-changing, but it is a necessary exercise.

Third, a few changes update the gendered references in our laws, the best example being the change from “chairman” to “chairperson” in federal legislation.

[*Translation*]

Fourth, the bill contains several amendments relating to French terminology used in certain statutes. For example, several provisions replace the words “vérificateur” with “auditeur” and “vérification” with “audit.” The objective here is to harmonize references in the federal corpus to reflect international standards. In 2010, the Audit and Assurance Board of Canada decided to mirror the terminology used by the International Auditing and Assurance Standards Board. Canada, France, Belgium and Switzerland collaborated on this international initiative to promote common and consistent terminology, including the use of the terms “audit” and “auditeur” in French.

[*English*]

So we changed that one.

Last, and because, you will remember, these are mostly uncontroversial, at my request, there is a small change to the Constitution of Canada extending the retirement age to 80. This was defeated by every member of the Senate.

Officials, to their credit, are keeping their eye out for developments in the use of language well outside the confines of their regular work — as with this international example, and the examples of Prince Edward Island and Newfoundland and Labrador. I think that is truly honourable work.

Honourable senators, I want to thank you for the opportunity to speak about this bill. I urge all of you to support the legislation. The program allows for the use of a unique process for expeditious consideration of bills of a corrective nature and ensures that this type of law reform continues without putting undue pressure on the use of Parliament's time.

For that reason — subject, of course, to the will of the Senate — it is my suggestion and opinion that this bill, having been amply considered by two committees of Parliament in the proposal stage, does not need further consideration and might be considered to move to third reading relatively expeditiously in this place.

• (1440)

The program itself and the bill ensure that Canada's legislation meets the highest standards of bilingualism, equity, fairness and respect for the rule of law and, with respect, I think it deserves your support. Thank you very much.

Some Hon. Senators: Hear, hear.

(On motion of Senator Martin, debate adjourned.)

**DEPARTMENT OF EMPLOYMENT AND SOCIAL
DEVELOPMENT ACT
EMPLOYMENT INSURANCE ACT**

BILL TO AMEND—THIRD READING—DEBATE CONTINUED

On the Order:

Resuming debate on the motion of the Honourable Senator Bellemare, seconded by the Honourable Senator Dalphond, for the third reading of Bill S-244, An Act to amend the Department of Employment and Social Development Act and the Employment Insurance Act (Employment Insurance Council), as amended.

Hon. Krista Ross: Honourable senators, today I rise for my first time in this chamber.

Hon. Senators: Hear, hear.

Senator Ross: I rise today to speak on Bill S-244, An Act to amend the Department of Employment and Social Development Act and the Employment Insurance Act (Employment Insurance Council).

Before I begin, I would like to recognize that we are here today on the traditional territory of the Anishinaabe Algonquin people and that I come from the traditional territory of the Wolastoqey people. The river that runs through the city of Fredericton is known as Wolastoq, along which lived the Wolastoqiyik, the “people of the beautiful and bountiful river.”

I would like to recognize Senator Bellemare for her advocacy in the history of this bill, which began long before it was introduced in this chamber nearly two years ago. Bill S-244 would establish an employment insurance council to provide advice and make recommendations to the Canada Employment Insurance Commission. For those unfamiliar with it, the commission monitors and assesses the Employment Insurance, or EI, programs; reviews and approves policies; sets the annual EI premium rate; and even provides advice on certain appeals or judicial reviews before they proceed to the courts.

Though the EI commissioners themselves engage with different groups, employers and workers do not have a direct seat at the table. All too often, changes are made by the government with either little or no warning, leaving those they impact scrambling to adapt. The people who pay for the EI program are the workers and employers. This bill brings the program back to its roots, serving those who participate in it by giving them a voice through an employment insurance council.

As a former chief executive officer, or CEO, of a chamber of commerce who worked closely with local businesses, and a former small business owner myself, I see the immense impact this bill would have.

Honourable senators, let me take you back to when I first took my seat among you. This past November and December, the Committee on Social Affairs, Science and Technology was studying Bill S-244. One of the witnesses was Nancy Healey, the Commissioner for Employers. Nancy and I both began our careers together as chamber of commerce leaders on the East Coast — I in New Brunswick and she in Newfoundland and Labrador. If you are doing the math, yes, we're going back to the late 1980s and early 1990s.

I think Nancy was hoping to be here today, but I'm standing up a little sooner than I thought I would. Nancy is someone whose perspective on employment I have always respected and valued. Therefore, more than 30 years after we first began working on policy issues together, when she raised Bill S-244 with me, I was interested in learning more about her perspective.

Just an eight-day-old senator, I attended the Social Affairs Committee meeting when Nancy testified, and in her opening statement she said:

I support Bill S-244. I see it as an opportunity to amplify the voice of business, particularly small businesses, and to encourage meaningful engagement within the commission. Bill S-244 would provide a forum for both employer groups and labour groups to discuss issues of mutual concern around employment, workforce development, jobs and skills.

At that same committee meeting, Mr. Pierre Laliberté, the Commissioner for Workers, said:

I also completely agree that the bill should be supported by the Senate and eventually by the House of Commons. . . .

Senators, it is no small thing that both EI commissioners support this bill. However, it is not only the commissioners. Even more recently, I joined colleagues at a jobs and skills round

table hosted by Senator Bellemare. It brought together the EI commissioners, employer organizations, unions and parliamentarians to re-establish the social dialogue on workforce and skills development.

Throughout the morning and various discussions, I noticed one thing: There was unanimous support for Bill S-244 among all the participants across quarters. As many of you know, to reach a consensus on a topic can be extremely difficult, which is why this stood out to me.

Throughout the day, I heard that the current structure of the Canada Employment Insurance Commission didn't fully meet their needs. Funded entirely by employers and workers, the commission lacks meaningful, continued and consistent engagement from those groups, which is why participants at this round table were eager to create a social dialogue through the establishment of an employment insurance council so that engagement would go beyond just one-off consultations. Through Bill S-244, this council will provide that forum for primary stakeholders to exchange perspectives.

As we know, when we can approach issues with empathy for other positions, it can result in a greater understanding and a stronger consensus on the path forward. Those involved in business or labour relations understand that a negotiated contract is always stronger than a contract imposed upon the participating parties. That isn't to say that it will all be easy or that an employment insurance council will solve everything. Collaboration and negotiation can be challenging. However, I strongly believe that bringing representation to the table will only strengthen Canada's EI program, which is better for both employees and employers.

As I mentioned earlier, employers and workers across sectors want to see this bill passed. I could take up my entire time today quoting organization after organization, including the Canadian Labour Congress; Unifor; the Canadian Federation of Independent Business; the Canadian Chamber of Commerce; the Canadian Union of Public Employees, or CUPE; the Business Council of Canada; and so on. Representatives from every part of the labour market participated, and they gave input on drafting this bill to ensure it would meet the needs of employers and workers.

The Fredericton Chamber of Commerce, from my hometown, with whom I spent 12 years as CEO, wrote a letter of support for Bill S-244, saying that:

. . . it is clear that the existing and emerging complexities related to employment and the future nature of work require a thoughtful and collaborative approach to providing the protections that employees need while balancing the sustainability of the system for both employees and employers. . . .

• (1450)

Colleagues, I'm not looking to diminish the work that the Canada Employment Insurance Commission or the EI commissioners have done. Rather, I'm here to support a bill to strengthen that commission and ensure that it is responsive and sustainable for many years to come.

[Senator Ross]

An employment insurance council would formalize the commission's current consultative process in a more inclusive manner, and it would ensure greater continuity, regardless of who holds the commissioner positions. I support the creation of an employment insurance council to bring the voices of employers and workers to the table. It is important to remember that this would be an advisory council — not a decision-making committee.

We have heard concerns in this chamber about regional representation, and, as a senator for New Brunswick, this has also been at the top of my mind. The participants in this council will be national organizations that have an obligation to represent members across the country, and we need to ensure that we are getting the basics correct before adding layers and layers of complexities.

However, that is not to say there is no room for regional representation. This bill includes powers to invite those not part of the council to attend meetings, as well as establish working groups with non-members. If Atlantic Canada were not represented by the labour and employer organizations appointed to the council, there would be ample opportunity for them to participate.

Currently, provinces often determine the priorities of the labour market development agreements that they have with the federal government, with little or no consultation with stakeholders in their regions — this means that two levels of government who don't pay into the Employment Insurance system determine training needs. This council can help address this and ensure that there is proper representation of those that it impacts the most.

As parliamentarians, we have a role to play in fostering trust with Canadians and ensuring that we are passing legislation that meets the needs of those it impacts. Not everyone is going to agree with every decision made by government at all levels, but we should try to remember that we're in this together. It can be easy to let individual priorities or politics get in the way of progress, but the more that we can work together, help one another connect on opportunities, be inclusive and raise the level of public discourse, the better off we'll all be in the long run.

Colleagues, I believe this bill will meet the needs of those who contribute and participate in the Employment Insurance program.

I would like to end by reiterating that collaboration between employer and employee groups can be somewhat challenging, but they have presented a united front to support Bill S-244 and the creation of an employment insurance council.

I urge you all to support the swift passage of this bill. Thank you. *Wela'lin.*

Some Hon. Senators: Hear, hear.

(On motion of Senator Patterson, debate adjourned.)

[Translation]

LANGUAGE SKILLS ACT

BILL TO AMEND—SECOND READING—DEBATE CONTINUED

On the Order:

Resuming debate on the motion of the Honourable Senator Carignan, P.C., seconded by the Honourable Senator Housakos, for the second reading of Bill S-229, An Act to amend the Language Skills Act (Lieutenant Governor of New Brunswick).

Hon. Pierre J. Dalphond: Honourable senators, I note that this item is at day 15, and I'm not ready to speak at this time. Therefore, with leave of the Senate and notwithstanding rule 4-15(3), I move the adjournment of the debate for the balance of my time.

The Hon. the Speaker: Is leave granted, honourable senators?

Hon. Senators: Agreed.

(Debate adjourned.)

[English]

NATIONAL STRATEGY FOR CHILDREN AND YOUTH IN CANADA BILL

BILL TO AMEND—SECOND READING—DEBATE CONTINUED

Leave having been given to revert to Other Business, Senate Public Bills, Second Reading, Order No. 38:

Hon. Rosemary Moodie moved second reading of Bill S-282, An Act respecting a national strategy for children and youth in Canada.

She said: Honourable senators, if you don't know where you're going, you'll never get there. Honourable colleagues, I think it's safe to say that we all agree on this simple principle: The best way to arrive at a destination is to plan to get there. In other words, if you fail to plan, you plan to fail.

• (1500)

Unfortunately, because of our lack of vision, direction and intention, we are planning to fail our children.

Canada's 8 million children and youth are being failed by our public policies, including those meant to serve them. Why? Because we design policies without clear outcomes in mind. We implement programs without the resources needed to make conclusive change. We fail to support cross-sector collaboration or listen to those who need the most help.

We have become content with leaving thousands of children behind. Canada doesn't have a vision for the health and well-being of our children and youth, and so they are left to be supported by a patchwork of programs, supports and benefits. This is not good enough.

This is why I have tabled before you today Bill S-282, An Act respecting a national strategy for children and youth in Canada.

This bill is a response to decades of failed approaches and half measures. It calls on the government to build a comprehensive strategy for our children and youth that sets a path to fulfill our obligation to give them healthy, happy and hopeful childhoods.

This bill sets out a framework for a strategy that identifies areas where we are failing children as well as areas where we are making important progress, and proposes a detailed plan of action to change the status quo once and for all, to ensure that every child is safe, happy and healthy.

This bill proposes that such a strategy would require defined outcomes and quantifiable indicators, because if we are serious about moving the needle for children here in Canada, we need good data to guide us along the way.

Bill S-282 is not and does not create the strategy, but sets a framework out for the creation of a strategy. A strong strategy, as set out in this bill, must be created through extensive consultation with Canadians. It would be a defined vision that reflects our values as a country when it comes to our children.

Colleagues, this is not a new idea. Over half of the 38 Organisation for Economic Co-operation and Development, or OECD, countries already have what the OECD calls "... an integrated policy plan for child well-being," which is defined as "... a policy document that sets out the government's approach to promoting child outcomes in several well-being domains. ..." These plans aim to integrate existing — and sometimes competing — policy initiatives into a cohesive strategy for young people and formalizes cooperation between those responsible for implementing those policies.

Consider the New Zealand example. New Zealand set out ambitious targets to eradicate child poverty and took aggressive action through an action plan that captures the voice of children. This plan, adopted in legislation in late 2018, was New Zealand's Child and Youth Wellbeing Strategy. This legislative framework provides a powerful vision for the lives of New Zealand's children and a plan to make it a reality, which involves collaboration between government and civil society rather than more silos.

Their plan has clear outcomes based on the social, economic and environmental factors necessary for children to thrive. Every outcome includes key actions and indicators for progress. New Zealand has also committed to accountability through annual reports on the strategy. Further, the government must report on the impact of every federal budget on reducing child poverty.

With this strategy, New Zealand has made its commitments to children clear and given the public the tools to hold them to account for delivering on their promises. This is a comprehensive approach to child and youth well-being. While we must have our own made-in-Canada strategy, this example points to what is possible.

Another jurisdiction that has taken strides in this area is the European Union. In 2019, the President of the European Commission announced the creation of a European Child Guarantee. This plan was a response to the social exclusion and poverty facing 25 million children throughout the EU. The European Child Guarantee's goal is to guarantee children access to a set of basic services. It calls on member states to guarantee free early childhood education and care, free education, free health care, healthy nutrition and adequate housing. These are the basic building blocks to any safe, healthy and hopeful childhood.

In 2023, a pilot of the European Child Guarantee, delivered in partnership with UNICEF, concluded with promising results. Over 30,000 children and young adults across four countries — Bulgaria, Croatia, Greece and Italy — were reached with services and interventions based on the EU's commitment to a vision centred on thriving, healthy childhoods.

These international developments demonstrate for us that the idea of presenting a dedicated vision for children's well-being in a given country, paired with a plan to achieve it, is catching on worldwide. Faced with evidence that they are not adequately supporting the well-being of their youngest residents, countries around the world are choosing to take action rather than accept the status quo. We in Canada must choose action instead of accepting the status quo.

Colleagues, I can't assume that you know of all the issues facing our children, but I think you are aware of many. You see them in your communities. You read about them in the media. You may even have seen them in your own circles. We need to assess where we are doing well regarding our aspirations for our children and where we are falling short.

And we are falling short, colleagues. We are failing to adequately support our children and youth in several areas. Too many children are falling through the gaps of our patchwork system of policies and programs. Let me highlight for you just a few of the areas where our current approach is less than successful — and where a strategy might help.

We are losing the battle on child poverty. Despite achieving a record low in child poverty rates in 2020, in large part due to CERB, over 1 million children in Canada still live in poverty today. In fact, we know that poverty rates are now rebounding as income supports stagnate and the cost of living rises. Campaign 2000's recent child poverty report card notes that child poverty rates rose from 13.5% in 2020 to 15.6% a year later, a change that indicates over 160,000 kids plunged into poverty.

Families faced with poverty struggle to meet their children's fundamental needs, whether that's stable housing, access to education or food security. In other words, poverty has a crippling impact on a child's well-being and can have devastating long-term consequences on children's ability to learn and acquire skills, which in turn hinders their ability to find employment and avoid poverty as adults. The longer children live in poverty, the more likely they will experience poverty as adults.

In 1989, the House of Commons resolved to end child poverty in Canada by the year 2000. Yet almost a quarter of a decade past that deadline, over 1 million children in Canada still live in poverty. If simply setting a target was enough, we would have solved this problem long ago.

• (1510)

This is why we need a strategy, colleagues, because targets without specific plans are empty if they don't come with that very detailed evaluation, planning and monitoring. A strategy would not only set a target; it would give us a concrete plan of action matched with a series of indicators to constantly assess the effectiveness of what we're doing. Children living in poverty and their families deserve more than just empty words — they are relying on us to create a sound plan that works.

But poverty is just one issue. Throughout Canada, many young children are experiencing long and costly delays in receiving essential health care services.

A growing body of evidence underscores the impact of decades of underinvestment in children's health. According to data from 2018, only 35% of non-emergency surgeries in Canadian paediatric hospitals were completed within the recommended safe clinical time frame. Due to the pandemic, the situation was worsened, of course. The situation for mental health services is no better. In my province of Ontario, about 28,000 Ontario children and youth with mental health needs were reportedly on wait lists for treatment in 2020, with some waiting up to two and a half years for intensive treatment.

On top of this, an estimated 200,000 Ontario children with mental health issues received no mental health services at all because they lived in rural, remote or Northern communities where treatment programs are scarce.

Tossing more money at the situation is not the solution. It is not, on its own, enough. What is needed is a plan — a plan to move us towards equitable access to these essential services so that all children get care when they need it. Increasing funding needs to come with a commitment to monitor children's health outcomes, the effectiveness of the spending across Canada and to assess the effectiveness of the interventions we're using, not just the spending. This is why we need a strategy.

Alongside long-standing issues are ones that are rapidly developing and evolving in real time. Climate change and child safety are two such examples.

Climate change is a large, global and interconnected issue, one that is already having significant economic and social impacts across all aspects of our lives. The Canadian Paediatric Society has referred to climate change as the single largest global health threat of the 21st century. Increased injuries, deaths from extreme weather, negative effects on food yields leading to food insecurity, risk of displacement due to rising sea levels and negative health impacts from rising pollution are just a few of the consequences children will and are already facing — and this is just the impacts on children's health.

What about the other impacts? Economic turmoil from a global economy under stress or educational disruptions due to natural disasters exacerbated by climate change? Are we doing enough and are we adequately preparing to support children through the impacts of rapidly changing climate?

As we take steps to address the climate crisis, we need to be ready to assess and to address the impacts on children as they arise. A strategy will help us here. In dealing with issues in constant flux, focusing on our desired outcomes will help us target what is most important and determine which interventions will have the biggest impact.

For example, let's say one of the strategy's desired outcomes is that children in Canada are safe and healthy. If progress in this area slows or reverses due to the impacts of climate change, the indicators the strategy monitors would alert us to this change — this new direction — and prompt us to quickly alter or adjust our policies and programs. A strategy would allow us to become more responsive, more effective in the steps we need to take to support our kids.

This world is a dangerous place for children, both online and offline. Our children are growing up in a digital age with widespread internet use that has become the norm. This increased digital exposure comes with challenges, such as a difficulty concentrating, inadequate sleep, decreased physical activity, weight gain and notably the heightened risk of cybervictimization. Cybervictimization is the experience of being targeted, harassed or victimized through online channels.

In 2019, Statistics Canada reported that 25% of youth aged 12 to 17 had encountered cyberbullying, including aggressive text messages or unwanted sexual content on various online platforms. As the internet evolves and changes, we need to do the same or risk leaving our children and youth behind.

The offline world is not necessarily safer. An alarming 2018 study published by Statistics Canada found that around 72% of Canadians experienced at least one incident of child maltreatment defined as an incident of physical or sexual abuse, harsh parenting or witnessing violence before the age of 15 years. High-profile cases of abuse in team sports and community-based organizations have shown that abuse of children in schools,

sports and other community settings continues to be a pervasive threat here in Canada. We need to do better when it comes to young people's safety, both online and off.

Children's safety is a multi-faceted issue that has implications for all levels of government and our communities as a whole. This is a problem that can't be solved by welfare agencies or by police alone. A national strategy would help us cohesively grasp the true scale of the issues, identify the causes and evaluate where our current efforts are falling short. What's working and what's not? It would help us implement a concrete plan to ensure that every child in Canada grows up safe and secure.

What all of these issues come down to is children's well-being. Well-being is not just about being physically healthy, but also about feeling good emotionally, mentally and socially. It refers to a person's overall state of health and happiness. When someone has a good sense of well-being, they tend to have more positive relationships, feel satisfied with their life and can cope with stress and challenges. Well-being is about feeling balanced, content and able to enjoy life to its fullest. As a country, we expect the government to ensure the basic building blocks toward well-being. This is not a high bar to clear, but unfortunately we are failing to meet it.

When children are waiting months for necessary medical care or are unable to get support for their mental health, they are not well. When children are going hungry or are being harmed by adults who are meant to protect them, they are not well. When we allow children to fall through the cracks of our patchwork system, they are not well. We can and we must do better.

Fortunately, we have something to build on. There is some good news. Existing programs aimed at children undoubtedly play crucial roles in supporting children across the country. However, these programs, while making positive strides, often fall short of the kind of strategic, holistic thinking we need to have for our children.

• (1520)

Consider the Canada Child Benefit, a tax-free benefit paid monthly to help eligible families with the cost of raising their children. For many families, this translates to hundreds of dollars of support every month. The Canada Child Benefit is a commendable effort to alleviate child poverty and has indeed made a significant impact by lifting approximately 250,000 children out of poverty. Nevertheless, the recent increase in child poverty rates underscores the fragility of the progress that has been made, and the need for more robust, sustained efforts is clearly there.

This is an example of an area where we have not gone far enough. We have the potential to eradicate child poverty as a policy, and yet over 1 million children in Canada continue to live in poverty today. What are our goals, and how are we measuring our progress? Lifting a quarter of a million children out of poverty is noticeable, but is that enough? A strategy would help us answer these questions and set a better path for moving ahead.

Child care is another area where we have made significant progress with the recent Canada-Wide Early Learning and Child Care Agreements. However, the program faces challenges in its early stages. Infrastructure and support for child care workers remain areas of concern. Two weeks ago, I travelled across Ontario, met with a number of child care operators, and I have heard from operators that the program does not currently provide enough money to pay staff well or to maintain operations at the same level of quality as they had known before.

Colleagues, aiming for affordability is a good first step, but cost reductions cannot be the only goal in our effort. We need a strategic approach centred on the well-being of children that uses early learning as one of the many tools and programs that will enable our kids and youth to reach their full potential.

Jordan's Principle and the Inuit Child First Initiative are important programs addressing the unique needs of First Nations and Inuit children but face implementation challenges. Jordan's Principle is a child-first principle that ensures timely access to products, services and supports for all First Nations children in Canada, on- and off-reserve. Funding can help with a wide range of health, social and educational needs. Similarly, the Inuit Child First Initiative ensures that all Inuit children in Canada have access, in a timely manner, to the essential government-funded health, social and educational products, services and supports that they need. These are some of the good things.

However, delays in processing requests, as seen with Jordan's Principle, and stalled applications in the Inuit Child First Initiative reveal systemic issues that make timely access to these services difficult. There have also been concerns that the government is applying Jordan's Principle too narrowly. The recent \$23-billion settlement for chronic underfunding of on-reserve child welfare services makes it clear that we still have work to do to adequately support Indigenous children in Canada.

Make no mistake; these programs are good and do important work, but without a plan, without knowing concretely what outcomes we want and without data to measure our progress, we are destined to fail.

These programs help our children some of the time. Designed in silos, they don't work together holistically to support children's well-being. More significantly, there are no clear goals for how these programs will support children or enough resources to meet the need right now. The result is that we leave many children to fall through the cracks of this unsuccessful patchwork of programs.

There are many more issues and programs I could highlight. What I hope is clear to you is that the challenges facing our children and youth are both varied and complex, and many are intertwined, interlinked and connected. It would be a mistake to treat these issues as individual, siloed challenges. Simple one-off interventions, therefore, will not suffice. From health care to poverty to safety and more, the issues facing youth are

interconnected and require a systematic approach and coordination between different levels of government and civil society.

Colleagues, it is clear to me that we are failing our children because we are applying band-aids to counter the issues of the day rather than more fulsome and interconnected solutions that set kids on the path to a better future. I know that we can do better. It starts with developing a comprehensive plan that identifies where we need to improve and outlines that roadmap to better outcomes.

In fact, this is not an entirely new idea in the Canadian context. Under the leadership of the Honourable Landon Pearson, in 2004, A Canada Fit for Children was a plan that set out the outcomes we want for our children and the steps we needed to take. A collaborative effort, the plan was intended for everyone involved with caring for children and youth. Crucially, it was developed with input from many Canadians, including children and youth, and identified ways to promote and to protect children's rights.

We must build on this and other important work done by Canadians to create a country fit for our children. We must end the patchwork of good intentions and unmet targets. We must provide a path forward for our children, their families and their caregivers. We need a strategic plan with detailed objectives, clearly defined indicators that speak to progress, that help us rationalize what we're doing and how we're doing it, and specific actions we must take to achieve them.

We need thoughtful, meaningful policies that not only end harm but support our children's well-being to the fullest. This is why this bill is so important. There is a need for transformative change. There is a need for us to think more clearly about what we want for our children. We just need to do the work.

You may have seen my recent report on the creation of a national strategy, entitled *From Vision to Reality*. If you haven't, I encourage you to read it. This collaborative report was the result of a series of round tables and engagements with young people and stakeholders across Canada. These discussions served to confirm the need for a national strategy and to shape what the strategy might look like. This report and the stakeholders it represents have shaped Bill S-282. For that reason, I'd like to present the details of the bill through the lens of this report.

We heard from all the participants that Canada needs a national strategy. They said Canada's current government infrastructure for children and youth is failing young Canadians and that federal budgets fail to adequately focus on children and youth. Instead, the focus is on programs geared to serving the public in general, and their impact on children is more often than not an afterthought. They made clear that a lack of comprehensive strategy creates this patchwork system of support, requiring provinces to create disjointed policies to try to fill the gaps. This patchwork is currently leaving many children behind, including the most vulnerable children, whom we should all be taking care of.

But what should a strategy include? While the government would need to do a comprehensive, countrywide consultation, our round table participants had several guidelines to share. They were clear that the strategy needs to take a rights-based approach, led by the United Nations Convention on the Rights of the Child. They called for an intersectional strategy that adopts the principle of “no child left behind” and advances substantive equality. Importantly, they made clear that the strategy should include an aim to increase awareness among children and youth of their rights, and to help develop their confidence as active citizens. Overall, they called for a broad roadmap toward the respect of children’s rights and the implementation of policies that ensure their health and well-being.

• (1530)

Clause 4(2)(a) of the bill, which outlines mandatory guidelines, reflects many of these comments. It notes that the objectives of the strategy must include a high and consistent standard of living for children and youth across Canada and the complete elimination of child poverty.

Highlighting the importance of our international commitments and the need to take a rights-based approach, it also calls for the government objectives to include full compliance with the UN Convention on the Rights of the Child, and the optional protocols which we have signed on to, as well as the provisions of the United Nations Declaration on the Rights of Indigenous Peoples, or UNDRIP, relating to children and youth.

I think we all agree, colleagues, on the importance of these measures.

Another area of consensus was the need for clear targets and outcomes. As one participant put it:

. . . any strategy developed for the implementation of children’s rights must go beyond statements of policy and principle, to set real and achievable targets in relation to the full range of economic, social and cultural, and civic and political rights for all children.

These should include specific, measurable and ambitious outcomes for children and youth. They also noted the strategy should collect and analyze data to ensure accountability, with emphasis on the need for disaggregated data. There should be a plan to share this data alongside information on the progress of the strategy.

These comments influenced the remainder of clause 4(2), and calls for the government to identify a series of outcomes and quantifiable indicators aligned with internationally accepted standards that would, if met, demonstrate the Government of Canada’s objectives have been met; provide an evidence-based assessment of whether these objectives have been met; outline a detailed plan to address unmet objectives, including a description of immediate actions and possible preventive measures; and identify what resources would be required to implement the strategy.

The bill also calls on the government to propose oversight and accountability mechanisms, including public monitoring of the strategy’s implementation; continued consultation with a wide

range of stakeholders on the implementation of the strategy; the ability to update the strategy to address emerging needs; the consideration of complaints from children and youth about how this strategy is being implemented; and, finally, parliamentary oversight over the implementation.

When asked who should be involved in the development of the strategy, one round table participant said:

Young people have a difficult time getting authority figures to listen to them, respect their perspectives, and really consider their lived experiences.

Children and youth often face an uphill battle to be heard on the issues that affect them. It is clear that the development process for a national strategy should focus on including the voices of young Canadians of all backgrounds.

This is reflected in clause 4(3) of the bill, which lists children and youth first in the list of those to be consulted on the strategy.

They were clear that the consultation process should include representation from all the provinces, territories, municipal governments, academic institutions and civil society. The consensus from the round tables is that unilateral action by the federal government would be completely insufficient. Buy-in and participation by the provinces will be important in the creation and operation of a national strategy. A truly national strategy should include a coordinating mechanism between levels of government.

That is why clause 4(3) also notes that the minister responsible for the strategy must consult with representatives of provincial and municipal governments, as well as representatives of Indigenous governing bodies and organizations that serve and represent First Nations, Inuit and Métis children and youth. It also calls for the inclusion of relevant stakeholders, including representatives from organizations that serve and advocate for children and youth.

In this process, the government must deliberately seek out the voices that reflect the diversity of all children and youth in Canada and their experiences, and build a process that recognizes and addresses the challenges in obtaining input from all communities. This list outlining who must be consulted is not meant to be an exhaustive one, and the bill invites the minister to consult with whomever else they deem appropriate.

Accountability was a major area of concern highlighted in the round tables. Regarding the need for public reporting, we heard:

The strategy and reporting can be disseminated to all levels, but particularly the public, because the public tool is really handy to keep things accountable.

To address these concerns, the bill lays out several accountability measures. First, it requires that within six months of Royal Assent, and every six months after that until the national strategy is tabled, the minister must table a progress report in each house of Parliament setting out the progress of the development of the strategy and a list of those who have been consulted, as long as they consent to sharing their participation. This will give the public insight into the progress of the

strategy's development, and give young people, stakeholders and other parties time to join the consultations before they end, if they feel that certain vital viewpoints have been missed.

The bill gives the government two years after Royal Assent to develop the national strategy for children and youth, with a report outlining the strategy to be tabled in both houses of Parliament by that date. It must also be published on a government website within 10 days of tabling.

Multiple participants called for regular review periods of the strategy so that it stays relevant as the challenges facing children and youth evolve. That is why the bill calls for a review every five years in the form of a report outlining the extent to which the national strategy for children and youth has been implemented and an assessment of whether the strategy's objectives have been met or changed, as well as any other relevant conclusions or recommendations about the strategy.

In conclusion, colleagues, I will be blunt: Canada needs this. Canada's children need this. They need to see an end to the patchwork of half measures that characterize our approach to our children. They need leaders to speak with and listen to children, parents, teachers, caregivers, civil society and advocates in order to make sure that no one is left behind.

Children need us to say "no more" to child poverty and poor access to health care. They need us to protect them online and offline, and from the harms brought by climate change. They need us to protect and defend their rights.

They need a vision for a future where every child can flourish, and for us to be willing to put in the work to do this. Canada's children and youth need us to step up.

• (1540)

One of the unsaid premises of this bill is that, despite the history and the challenges we have faced as a country in delivering for our children, I believe that parliamentarians from every side care about our children — that we want to build a country fit for our children, and that we are collectively ready to set this up. That's why I urge you to support Bill S-282.

I look forward to hearing other colleagues debate this bill, and sending it to committee for further study.

Thank you. *Meegwetch.*

Some Hon. Senators: Hear, hear.

Hon. Marilou McPhedran: I have a question for Senator Moodie, if that is allowed.

Senator Moodie, it was a very comprehensive speech, and I know it reflects extensive work by you and your team, and I thank you most sincerely.

I want to zero in on child poverty. Could you tell us a bit more about how this act and the strategy would accelerate, galvanize and inspire much more concrete action to eradicate child poverty in Canada?

[Senator Moodie]

Senator Moodie: The question you ask is so important because it speaks to the entire strategy. How will the strategy do what it claims to want to do?

First of all, it allows us, as a country, to decide what we value and what we want for every child and to set that principle down in writing and establish it as our goal — the desired outcome — that we follow through with the information, frankly, we already have.

We have a lot of this information. There is a lot of civil society that can provide us with reams of data which tell us where we are failing, where things are actually working and what interventions have the most impact. If we can use an evaluative process that follows through on a declaration that starts with, "We want to eradicate child poverty," then we can revisit and reassess as we go along from month to month and year to year in order to understand if it is working. What is working? How can we repurpose investments over here — that are not impactful — into the types of interventions that we know work? Then, we can accelerate, build momentum and move things along with real investment.

Many may actually say, "What is the cost of this?" I would propose that we save money by understanding where our investments work, and by pulling money from areas where, frankly, we are throwing mud against the wall and it is not sticking.

We need to understand that, and we need to bring in new policies that align so that we are constantly building, constantly refining and moving the needle more effectively — so we are distributing and upscaling what works in smaller areas and communities more broadly across our country, and we are allowing children to benefit from this well-organized, deliberate approach.

(On motion of Senator Martin, debate adjourned.)

[*Translation*]

THE SENATE

MOTION CONCERNING THE HUMANITARIAN CRISIS IN NAGORNO-KARABAKH—DEBATE CONTINUED

On the Order:

Resuming debate on the motion of the Honourable Senator Housakos, seconded by the Honourable Senator Seidman:

That the Senate take note of:

- (a) the deteriorating humanitarian crisis occurring in Nagorno-Karabakh as a result of Azerbaijan's ongoing blockade of the Lachin corridor and increased military aggression against indigenous Armenian civilians in the region; and
- (b) the actions of the Aliyev regime as being dictatorial, and in violation of international law; and

That the Senate call on the Government of Canada:

- (a) to support the liberty of the people of Nagorno-Karabakh and their right to self-determination;
- (b) to immediately impose sanctions against the Azeri regime;
- (c) to demand the immediate reopening of the Lachin corridor and the release of Armenian Prisoners of War;
- (d) to provide a significant aid package through NGOs to those Armenian people forcefully displaced from their indigenous land; and
- (e) to protect the Armenian people of Nagorno-Karabakh through the presence of international peacekeeping forces.

(On motion of Senator Petitclerc, debate adjourned.)

[English]

CONTRIBUTIONS AND IMPACTS OF MÉTIS, INUIT, AND FIRST NATIONS

INQUIRY—DEBATE CONTINUED

On the Order:

Resuming debate on the inquiry of the Honourable Senator Boyer, calling the attention of the Senate to the positive contributions and impacts that Métis, Inuit, and First Nations have made to Canada, and the world.

Hon. Bernadette Clement: Honourable senators, I note that this item is at day 15. I'm not ready to speak at this time. Therefore, with leave of the Senate and notwithstanding rule 4-15(3), I move the adjournment of the debate for the balance of my time.

The Hon. the Speaker: Is leave granted, honourable senators?

Hon. Senators: Agreed.

(Debate adjourned.)

ONE HUNDREDTH ANNIVERSARY OF THE CHINESE EXCLUSION ACT

INQUIRY—DEBATE CONTINUED

On the Order:

Resuming debate on the inquiry of the Honourable Senator Woo, calling the attention of the Senate to the one hundredth anniversary of the *Chinese Exclusion Act*, the contributions that Chinese Canadians have made to our

country, and the need to combat contemporary forms of exclusion and discrimination faced by Canadians of Asian descent.

Hon. Yuen Pau Woo: Your Honour, I would like to exercise my right of final reply.

The Hon. the Speaker: I wish to inform the Senate that if the Honourable Senator Woo speaks now, his speech will have the effect of closing the debate on this inquiry.

(On motion of Senator Martin, debate adjourned.)

ONGOING CONCERNS WITH RESPECT TO CANADIAN AGRICULTURAL, WETLAND, AND FOREST LAND REALLOTMENTS

INQUIRY—DEBATE CONTINUED

On the Order:

Resuming debate on the inquiry of the Honourable Senator Black, calling the attention of the Senate to the ongoing concerns with respect to Canadian agricultural, wetland, and forest land reallocations, as well as potential food, economic, and social insecurities as a result of reduced capacity for farming, pasture, forestry, and food production both domestically and internationally.

Hon. Pamela Wallin: Honourable senators, this is a statement on Senator Black's inquiry into land use. It reminded me of when I was just a young girl in school, and the teacher promised a surprise one day. He threaded the old projector at the back of the room and showed us just who we were, and where we actually lived.

It was a grainy, black and white movie. It was the National Film Board of Canada's first feature film called *Drylanders*, starring Frances Hyland — and she was famous.

It was 1963, but the story was set in 1907. It was the saga of a Boer War veteran and his wife from Montreal, who heard the siren song of a new beginning — 160 acres of Saskatchewan farmland for just \$10.

For those who did not know any better, it was irresistible, but homesteading was bleak and brutal. They were called "drylanders," because that is what they tried to farm — dry land. They survived the unimaginable: blistering heat and bone-chilling cold. Then came the Dirty Thirties and the drought.

These images are seared on the memories of thousands of young Prairie children, including me. Maybe next year it will rain. Or maybe next year the hail won't come. Or maybe next year it will be a bumper crop. It was "next-year country."

We knew the familiar refrain, because our grandparents and parents had told us the same stories; they had lived it. It is why we are all so connected to the land, watching it blow away and choke everything in its wake. There was the frozen white of winter, then the bursting forth of green and the golden fields that followed.

It makes you respect and fear but inevitably love the land.

This fact, however, remains true: A nation that destroys its soil destroys itself. It takes a thousand years to create three centimetres of topsoil. The “drylanders” saw 100 times that disappear in days.

The preservation and wise use of our farmland are fundamentally connected to our ability to not only produce food in the vast quantities required, but it is also the foundation for the stability of our national economy.

• (1550)

Saskatchewan may have less than 7% of Canada’s total population, but it has 40% of the country’s farmland — about 61 million acres of cropland.

In the days of the drylanders, it was always about wheat and oats. We were, and still are, the breadbasket of Canada. But today it is lentils and peas; and the biggest crop, by far, is canola. Every year, millions of acres of farmland turn brilliant yellow as the canola comes into bloom — 12 million acres of it in Saskatchewan alone. It is a sight to behold.

The issue today is how we protect all of that beautiful land so that we can continue to feed the world. Of all Saskatchewan farmers, 95% already use zero- or minimal-tillage practices, all contributing to better soil preservation and health — by the way, a reduction of carbon so significant that we are close to net-zero emissions.

Not surprisingly, Saskatchewan has the highest rate of use and uptake for many game-changing technologies, leading the way when it comes to sustainable agriculture. We have established land and water conservation areas across the province — parks, ecological reserves and habitats for wildlife. We even preserve areas for their scenic vistas and unique physical features — such as waterfalls, the badlands and sand dunes — and we protect land for recreational and educational uses, as well as for research.

It is all about the search for balance. Our communities need to grow, and our cities inevitably will, so negotiating land use is important.

Land prices in 2023 increased in value. This is a good news/bad news story. It makes it easier to sell, and big farmers can become bigger, but this land is also sold to foreigners and developers. Some 320 acres is lost each day to non-farm investors. Over the last 20 years, we have been losing the equivalent of about seven farms per day.

Our agri-food system is one of the largest in the world. It employs 2.5 million people, providing one in nine jobs and generating \$145 billion — 7% of Canada’s GDP. As an exporting nation, our farmers and food producers need to earn a living, so they, too, need the city dwellers to buy what they grow.

Urban and rural needs must be reconciled. We have a very large country with a lot of empty space, yet urban sprawl threatens some of the most valuable land nestled around our cities. Canada’s biggest cities are getting bigger. We have a growing population, record immigration and increasing numbers of migrants. These factors exacerbate the housing crisis and fuel demand for more housing — anywhere, anyhow.

The solution, though, should not always be sprawl. Urban growth needs to go up, not out. Density is important. Rules and regulations need to change to allow this to happen.

Urban development over the last 70 years, particularly in places like Ontario, has been characterized by the expansion of low-density, car-dependent dwellings and retail separated by huge distances. This is largely responsible for the incredible consumption of precious farmland.

Governments at all three levels are starting to make changes. Some have ended detached-only zoning and eliminated mandatory minimum parking requirements.

In our report at the Banking Committee, we shared testimony from those who made some very sensible recommendations. Ottawa could attach conditions to municipal funding for transit that would require density and the waiving of fees. We could incentivize programs to increase productivity in the construction sector and have the needs of that sector reflected in our immigration requirements. Canada Mortgage and Housing Corporation, or CMHC, needs to streamline their multiple application processes to encourage more housing.

This is not an easy reconciliation of interests, needs, powers and habits, but it can be done and it must be done. We need governments at all levels to educate themselves about what is at stake, and we need policies that reflect national needs.

Farming is not like other work. It is truly 24-7, regardless of the weather. Animals must be fed, crops taken off. Computers must be mastered. Bills must be paid, even before you have earned the cash. There is no relief or tax break for heating buildings or drying grain — reflecting the urban bias of both political houses, which leads to things like carbon taxes and relief only for those with electoral purpose.

Our food chain is riddled with waste, spoilage and inefficiencies, in part due to our over-regulation — while 1 billion people are chronically hungry and another 1 billion are overweight. Advanced countries are now actually war-gaming what food insecurity looks like.

So let’s take this on. Consilience is the new guiding principle in agriculture. I once had the opportunity to interview Edward O. Wilson, a brilliant biologist. He had just written his groundbreaking work — excuse the pun — entitled *Consilience: The Unity of Knowledge*. It was 1998. He believed in and argued for a scientific way of thinking, grounded in the observation of

reality. This is how we have to look at agriculture — and farmers always have — embracing history, science, economics, business and technology as we consider the future of food and the land that produces it.

In 2024, farming remains a tough way to earn a living. There are new and different reasons, aside from the whims of Mother Nature, market forces, wars or discriminatory taxes. Our farmers lead in innovation and climate resiliency. They are the natural stewards of the land. Their success is our sustenance. Please, let's not pave over the future. Thank you.

(On motion of Senator Clement, debate adjourned.)

[*Translation*]

OFFICIAL LANGUAGES

COMMITTEE AUTHORIZED TO EXTEND DATE OF FINAL REPORT
ON STUDY OF MINORITY-LANGUAGE HEALTH SERVICES

Hon. René Cormier, pursuant to notice of March 19, 2024, moved:

That, notwithstanding the order of the Senate adopted on Thursday, March 9, 2023, the date for the final report of the Standing Senate Committee on Official Languages in relation to its study on minority-language health services be extended from October 31, 2024, to March 31, 2025.

The Hon. the Speaker: Is it your pleasure, honourable senators, to adopt the motion?

Hon. Senators: Agreed.

(Motion agreed to.)

[*English*]

BUSINESS OF THE SENATE

The Hon. the Speaker: Honourable senators, it being nearly 4 p.m., the Senate will proceed to Question Period. The minister will take her seat, and we will then proceed.

[*Translation*]

QUESTION PERIOD

(Pursuant to the order adopted by the Senate on December 7, 2021, to receive a Minister of the Crown, the Honourable Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health, appeared before honourable senators during Question Period.)

BUSINESS OF THE SENATE

The Hon. the Speaker: Honourable senators, today we have with us for Question Period the Honourable Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health. On behalf of all senators, I welcome the minister.

Honourable senators, let me remind you that during Question Period with a minister the initial question is limited to 60 seconds, and the initial answer to 90 seconds, followed by one supplementary question of at most 45 seconds and an answer of 45 seconds. The reading clerk will stand 10 seconds before these times expire. Pursuant to the order adopted by the Senate, senators do not need to stand. Question Period will last 64 minutes.

• (1600)

[*English*]

MINISTRY OF MENTAL HEALTH AND ADDICTIONS

MENTAL HEALTH SUPPORT FOR FARMERS

Hon. Donald Neil Plett (Leader of the Opposition): Welcome here, minister. Minister, carbon taxes, trade concessions, supply chain problems, government regulations, adverse weather — these are all beyond the control of our farmers today, yet they can all negatively impact a farmer's mental health.

In 2019, the House of Commons Agriculture Committee issued a report on this matter. It recommended that the Government of Canada educate business partners and other stakeholders who work with farmers to detect the signs of distress in order to refer farmers to resources that can help them.

Minister, beyond supporting the Guardian Network in Ontario and a program that Quebec has had for many years, what has your government done to address this specific recommendation across Canada?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: I want to thank the senator for the question and to thank all colleagues in the chamber for inviting me to join you today to speak to what are important issues for Canadians when it comes to their mental health.

Senator Plett, I agree with you wholeheartedly. The impacts of climate change and the increasing challenges that Canadians are seeing, particularly when it comes to our farmers and our rural communities, are a significant challenge. As for climate anxiety, we not only see it amongst our farmers in rural communities; we also see it amongst our youth, who are increasingly worried

about the future that they will inherit from all of us, including those of us in this chamber and the other place, where I sit, where we need to grapple with the most important issues of the day.

When it comes to mental health, in addition to the programs that you have listed, we have tried to — through the launch of the 9-8-8 helpline — ensure that we have a front-line access to support for anyone in the country, from coast to coast to coast, 24-7, 365 days a year, to meet individuals when they are in their immediate moment of crisis and refer them to local services and supports.

In addition to that, we have been working diligently with all stakeholders to establish a set of national standards for mental health implementation in all work environments, including those of the agricultural sector, so that those standards can be implemented by regional councils, authorities and other collectives who have an important part to play in their community.

Senator Plett: In December 2020, a motion from B.C. member of Parliament Todd Doherty to create a national suicide prevention hotline passed unanimously in the other place. After years of delay by your government, the 9-8-8 hotline has now been operational in Canada for about four months. Minister, is your government doing anything to draw attention to the hotline across our farming communities? If so, how much is being spent to do this work, and how exactly are you promoting this hotline?

Ms. Saks: Thank you again, senator, for this important question.

On November 30, we were pleased to announce the launch of the 9-8-8 suicide prevention line across the country in both languages, available 24-7, both by phone and by text.

In answer to your question in terms of reach, 39 organizations throughout the country are patched into this network to meet the unique needs of local communities throughout the country.

I take deference to the long time that it took to implement the 9-8-8, senator, frankly. The U.S. system took four years to build. From the time that this unanimous motion was accepted in the House to implementation was two years, with the help and support of the —

The Hon. the Speaker: Thank you, minister.

CANADA MENTAL HEALTH TRANSFER

Hon. Elizabeth Marshall: Minister, my question concerns the creation of the \$4.5-billion Canada mental health transfer, which your government promised during the 2021 federal election campaign. In the costing plan your government released as part of its election platform, you promised to transfer to the provinces \$250 million in 2021-22, \$625 million during the 2022-23 fiscal year and another \$605 million during the current fiscal year. None of that funding has materialized, however.

Minister, can you tell us the status of this promised transfer to the provinces? Is the \$4.5 billion already accounted for in the fiscal framework? Is it new money, and if so, how are you paying for it?

[Ms. Saks]

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you for the question, senator. What we learned throughout this process of developing support for mental health is we needed to ensure that mental health service provision is an integrated part of overall health in the jurisdictions. We understood that jurisdictions need to determine and navigate what their communities need and the most critical services that need to be provided, and it must be directed by them, like all other health care.

That is why our government chose a different path, committing \$196 billion over 10 years to provinces and territories through bilateral agreements in which a key principle is mental health and substance use. I am pleased to say that amongst all bilateral agreements signed, over one third of the allocated funds in these agreements is going to mental health and substance use.

Senator Marshall: That was back in 2021, specifically for mental health. Your government has since brought forward two budgets and three fiscal updates. So if the Canada mental health transfer is not brought forward in the budget next month, what message are you giving to Canadians?

Ms. Saks: Twenty-five billion dollars has been allocated as part of the \$196 billion that is being flowed through the bilateral agreements. Mental health as an integrated part of health care systems will be a far more effective way to reach Canadians and their mental health needs.

YOUTH MENTAL HEALTH

Hon. Rosemary Moodie: Minister Saks, thank you for being here today and for the crucial work that you're doing on behalf of Canadians. My question is on mental health care for children — not surprisingly.

According to the Mental Health Commission of Canada, 70% of persons living with a mental illness experience symptoms in their childhood and adolescence. They estimate that 20% of children and youth in Canada are affected by mental health issues today. That's about 1.2 million children.

Minister, how are you working with the provinces to meaningfully increase access to mental health services for children in communities throughout our country?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you for the question. I agree with you wholeheartedly, senator. When it comes to creating foundational supports for our children, it comes with mental health and resiliency. That should be a top priority, not only through our health care systems but also through our education systems, community services and so much more.

That being said, as I mentioned previously, the \$25 billion over 10 years, which is part of our bilateral agreements, will be a key component of that, ensuring that, through family health practitioners, children receive front-line support where they need it most, in coordination with their families.

In addition, through the suicide helpline 9-8-8, we put significant funding and supports to Kids Help Phone, understanding that kids need to be met how they need it and when they need it, in the privacy and safety they deserve.

Senator Moodie: When I speak to young people, Minister Saks, I hear about wait times and struggles to even see a professional mental health physician, unless they are at a critical point. I think you will agree, minister, that prevention is better than treatment, and our goal should be to treat mental illness as soon as possible. One important challenge, frankly, is navigating this complex system and accessing services before it's too late.

Minister, what are you doing to help families navigate systems to find services before the worst happens?

Ms. Saks: Thank you for the question. One of the first priorities we've had as we begin the phase-out of the Wellness Together program is to ensure we have a full directory of services to help Canadians obtain access immediately in their jurisdictions.

But, in addition, I will say we're in a unique time of mental health where I have counterparts in nearly every province and territory. We work together and meet quarterly on best practices and models. We recently shared the mental health day hospital model from Nova Scotia, which has shown terrific success in meeting individuals with quick psychiatric assessments and referrals to where they need to get help, and other provinces are interested in following suit.

• (1610)

MENTAL HEALTH SERVICES

Hon. Marty Deacon: Minister, welcome and thank you for being here today. My question is based on very direct community feedback and the lived experiences of community members who continue to suffer deeply.

Currently, with a physical injury, a patient can be discharged to physiotherapy, have a nurse visit their home or receive occupational therapy. Many patients in need of mental health care are discharged, with a wait time of up to two years for therapy, such as dialectical behaviour therapy, or DBT. While some can access care through their insurance plan sooner, this still leaves a huge swath of Canadians who remain out of luck in this crucial area of patient care.

Does your government intend to work with provinces to make mental health services more readily available for all Canadians discharged from hospitals with mental health afflictions?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: I thank you for the question. As mentioned previously, that is exactly why we made sure that mental health and substance use were key principles in our bilateral agreements, with a commitment of \$25 billion over the next 10 years in addition to the regular mental health transfers. That said, as cited previously, over 30% of the allocated funds that we've seen through these agreements have been dedicated to mental health. We're continuing to look at the action plans that have been provided by jurisdictions, ensuring that every one of them has understood that patient navigation will be a key component in ensuring that people can access mental health care in their communities. We continue to do collaborative work with them to ensure that health care sector workers are available to Canadians in their jurisdictions, including social workers, psychiatrists, psychologists and psychotherapists.

Senator M. Deacon: Is there an existing commitment to ensure the funding sent to the provinces ensures that front-line staff are properly trained in suicide intervention skills and trauma? This informs care, and based on our discussions and learning with stakeholders, it doesn't seem to be happening.

Ms. Saks: Thank you for the question. As mentioned previously, we're working collaboratively with many sectors across Canada, including the health sector, on the national standards for mental health care. This allows us to work with health care providers, corporations, other organizations and institutions to ensure that they have the key tools they need within their own communities and workplaces, and also the assessment tools that they will be required to use in the work that they do. As you're well aware, health is a jurisdiction of the provinces and territories. We continue to work collaboratively to provide resources and regulatory supports so that they're implemented.

VIRTUAL MENTAL HEALTH CARE

Hon. Flordeliz (Gigi) Osler: Thank you for being here today, minister. I'm going to follow up on Wellness Together Canada, which you mentioned. In the 2021 mandate letter, the then-Minister of Mental Health and Addictions was instructed to sustain improved access to virtual mental health services with Wellness Together Canada. Wellness Together Canada is a free, federally funded platform to support Canadians' mental health. However, as of April 3, 2024, the platform will no longer be available, even though access to mental health services remains a problem across the country.

Virtual health care, including mental health services, is increasingly provided by private companies. What is the federal government's plan to ensure Canadians have access to virtual mental health services regardless of their ability to pay?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you, Senator Osler, for the question, and for your advocacy on good health systems.

As we all know, during the COVID-19 pandemic, we launched the Wellness Together Canada platform because we were in a unique situation with Canadians, and for the first time ever, the federal government became a source and service provider of mental health care, something that we don't normally do. But unique times required that important measures be taken to ensure the safety and resiliency of Canadians during that emergency. That said, we have now moved beyond the pandemic phase, which is why we insisted, through our bilateral agreements, that with the \$25 billion earmarked for mental health care, provinces would provide comprehensive action plans for access to services for Canadians — where and when they need it. Jurisdictions are more than welcome to offer virtual options, particularly for rural and remote communities.

Senator Osler: Thank you, minister. While convenient, virtual health care is often episodic, and can fragment continuous care or duplicate care, thus increasing health care system costs. Experts recommend that virtual care be provided within a person's circle of primary care. What is the federal government's plan to enable constitutionally compliant virtual mental health services provided within one's circle of primary care for all Canadians?

Ms. Saks: Thank you for the question. One of the key components of the bilateral agreements was that each jurisdiction was required to provide a comprehensive action plan. What we wanted to see, and what we have seen, is that they understand the role of mental health within integrated primary care. We were pleased to see, as mentioned previously, that over a third of the funds allocated in most jurisdictions went specifically to mental health care services that they provided. We continue to work with provinces and territories in ensuring that an integrated approach to mental health is part of family and primary care.

GOOD SAMARITAN DRUG OVERDOSE ACT

Hon. Marty Klyne: Minister, the epidemic of overdose deaths continues to devastate Canadian families and communities from coast to coast to coast. In 2023, my province of Saskatchewan recorded an all-time high in fatal overdoses, with 484 deaths confirmed or suspected to be due to drug toxicity. On May 4, 2022, in this Senate, the government committed to expanding the Good Samaritan Drug Overdose Act. Such an expansion could provide persons calling 911 to report an overdose immunity from prosecution for additional non-violent offences — like stolen property — in addition to possession, which is already covered.

There is no time like the present to save lives, and this measure would have no cost to taxpayers. What can we do to prioritize this expansion of Canada's Good Samaritan Drug Overdose Act?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you, Senator Klyne, for the question, and I couldn't agree with you more, because the epidemic of overdose deaths is tragic. I don't

think there's a single community in our country that is untouched by this crisis, and the ramifications and ripple effects have been devastating.

Legislation such as the Good Samaritan Drug Overdose Act ensures that we can lower barriers to access of care in the immediate moment of overdose crisis. It allows us to reduce stigma and for good actions to be taken to save lives. Our government is unequivocal that when it comes to accessing life-saving services, it must include in that immediate moment. As you're well aware, we've supported making naloxone kits and other interventions available to prevent overdose. In Saskatchewan — as in many places — there is a compendium of services of care that can help save lives. This includes harm reduction, safe consumption sites and other needed comprehensive services. The Good Samaritan Drug Overdose Act is one of many tools that we need to be able to meet people in that moment of crisis.

Senator Klyne: Minister, we have another chance to save lives with Senator Dalphond's proposed Canadian postal safety act. Bill S-256 would allow police with a warrant to search items in the mail prior to delivery, including drugs like fentanyl. This is already allowed with private couriers like FedEx. This bill is supported by the Canadian Association of Chiefs of Police and many First Nations. How will the government help pass this bill?

Ms. Saks: Thank you, Senator Klyne, for the question. I always appreciate the work of Senator Dalphond. We've worked together in the past.

The Canada model, as I like to call it, is a very comprehensive framework for how we are addressing the overdose crisis, but also the illicit and very poisoned toxic drug supply spreading throughout the country. We have to balance between and keep hand in hand public health and public safety as we move through this, and we need to use every tool that is available to us to combat it. However, I can't really comment further on Canada Post operations as it is out of my scope of purview; however, I would be more than happy to —

The Hon. the Speaker: Thank you, minister.

CONFLICT IN GAZA STRIP

Hon. Leo Housakos: Minister, we've all seen the picture of you holding hands with Mahmoud Abbas, an anti-Semite and Holocaust denier. He has also denied the horrific, evil acts of October 7 and created a fund that pays the families of terrorists who killed Jews — payments he says he will never stop. I heard your interview with CJNI in which you said you accompanied Minister Joly to that meeting because you felt it was important for a Jewish person to be at the table and for a Jewish voice to be heard. You also claimed that it's protocol to take a photograph while shaking hands.

• (1620)

Minister, I've been to a few of these meetings. It's not protocol to hold hands, which is what you did. Perhaps that's why you didn't post the photo yourself on any of your own social media sites.

My question is this: Did you ever consider how this would impact the families of Canadians killed or kidnapped on October 7? Do you think that they felt it was in their interests when you voted in favour of Monday night's motion?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Senator, I join you in this chamber and I stand in my chamber as a proud Israeli Canadian and Jewish Canadian who has the privilege to serve Canadians in my community. I've also been involved in the peace-building community in Israel and internationally for close to three decades.

My belief — and this is Canada's foreign policy — is that a two-state solution is the only way that Israelis will live in a safe and secure environment alongside Palestinians. My voice at those tables was to remind the Palestinian Authority that they have accountability to the Jewish people, Israelis and diaspora communities to not allow Hamas to be part of their future governance, to ensure that violence and hate will be no part of their administration as they rule the West Bank and eventually some kind of structure in the rebuilding of Gaza. I stand in the knowledge that my role in this is important and I have an important voice in this process.

Senator Housakos: Minister, with all due respect, you were hand in hand with a gentleman, Mr. Abbas, who doesn't recognize a two-state solution.

Your photo last week reminds me of another shameful incident four years ago. Just weeks after Flight PS752 was shot down killing dozens of Canadians, Prime Minister Justin Trudeau met the Iranian foreign affairs minister and not only shook his hand but also bowed his head to him.

Why do you and your government worry more about not offending these mad tyrants than you do about offending our Canadian victims?

Ms. Saks: Senator, respectfully, I will kindly remind you that both former foreign affairs minister Baird in his capacity, former prime minister Stephen Harper and currently Antony Blinken, and others, meet with the Palestinian Authority regularly. This is the process by which we work toward an alternate reality of safety and security for Israelis and ensure that a two-state solution continues to be the goal not just for Israel but something that the international community is committed to ensuring for safety for the Jewish state.

I take offence to your comments. As a Jewish Canadian and as an Israeli Canadian who is dedicated to ensuring the safety of my family and many others in the region, I do believe that I have an opinion to share here. Thank you.

Senator Housakos: Prime Minister Harper and former Minister Baird always stood solid and hard when it came to dealing with tyranny. Whenever they met them in these bilateral meetings, they made it clear where Canada stood.

Minister, there seems to be some confusion over Minister Joly's announcement of any arms embargo against Israel as a result of Monday's motion. Minister Joly said on Tuesday that Canada suspending military exports to Israel was in response to the —

[Translation]

BUSINESS OF THE SENATE

The Hon. the Speaker: I would like to remind senators that the minister is here to answer questions related to her ministerial responsibilities.

[English]

MINISTRY OF MENTAL HEALTH AND ADDICTIONS

CONFLICT IN GAZA STRIP

Hon. Leo Housakos: She is a cabinet minister and I'm asking questions in regard to her actions and meetings she has in her capacity as a cabinet minister. Everything I've asked is within that realm of her responsibility.

Minister, can you please clarify for this chamber what's happening with our military exports to Israel and how that is being received by our ally as well as by the families of the victims of October 7? Also, this relates directly to your role as Minister of Mental Health. In your Canadian Jewish News interview, you spoke about the trauma being felt by those families. What might you say to them about being retraumatized and revictimized by this government?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: When it comes to arms exports, that is not my file. That is, as you well know, Minister Joly's file. I'm sure she will be able to provide you with a fulsome answer.

With regard to the trauma experienced by Israelis on October 7, I had the opportunity to meet with First Lady Michal Herzog and many of the advocates that are now involved in the investigations of the weaponization and sexual violence on October 7 and with the hostages to which this government has pledged \$1 million to work collaboratively with these organizations to ensure that justice prevails. Thank you.

Senator Housakos: Minister, when you participate in meetings with Minister Joly on behalf of the government, you're not there, obviously, providing health care support to Mr. Abbas. You're obviously there representing the government.

You and Ambassador Bob Rae recognized even as recently as yesterday that what's happening in Nagorno-Karabakh to be ethnic cleansing of the Armenian people, yet our government —

your government — is selling arms to Turkey that are being passed on to Azerbaijan to carry out that ethnic cleansing under the guise that Turkey is an ally.

My question is this: Is Israel not an ally or are we comparing what Azerbaijan is doing in Nagorno-Karabakh with Israel, which is defending the right to self-determination as a state?

Ms. Saks: Thank you for that question. This year, 75 years of allyship between Canada and Israel is being celebrated. Good friends speak to friends, which is exactly why the trip to the Middle East was so important at this time.

Respectfully, I am not responsible for the export regimes of this country in relation to others and I would defer to Minister Joly for comment. Thank you.

MEDICAL ASSISTANCE IN DYING

Hon. Bev Busson: Madam Minister, hello. Thank you for being here today and for taking my question.

I want to reference Bill C-62, which was recently passed here in the Senate and received Royal Assent. This legislation has enabled a delay of up to three years to implement medical assistance in dying where the sole underlying condition is a mental disorder.

I understand this is early days for you, but can you report on what plans, if any, are being contemplated to redesign the Federal Framework for Suicide Prevention given the complexity of the differentiation between suicidality and the right to access medical assistance in dying?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you for the question. I would not necessarily put those two within the same framing of a question. Bill C-62 specifically referred to a delay on the implementation of mental illness as the sole determinant.

The federal government took all recommendations by the joint committee, both in this session and the last, in terms of ensuring that a robust framework and structure would be in place to train regulatory bodies and assessors toward those assessments when it comes to mental illness as the sole determinant.

That being said, hearing clearly from provinces and territories and also from Canadians about the readiness to go forward, we respected both the committee's input and those of Canadians to make the decision of moving this to a three-year delay so that more implementation of modules can be done.

When it comes to the framework, we received the recommendations of the committee here at the Senate and we are reviewing them. The document that will be put forward as a framework will be evergreen. The changes and needs of Canadians when it comes to suicide prevention will change as our country changes. Nevertheless, I look forward to sharing the first iteration in spring 2024.

Senator Busson: Thank you for that answer.

Subsequent to what you've said, have you been considering a strategic framework with your provincial counterparts to ensure that the delivery of medical assistance in dying under the circumstances related to a mental disorder in assessing the access vis-à-vis suicidality is consistent and fairly administered in all parts of this country?

Ms. Saks: Thank you for the question. What I will say is this: I believe in collaborative work. As mentioned previously, we've begun a process of having myself and my counterparts meet quarterly rather than only twice a year at the federal, provincial and territorial, or FPT, ministers' meetings. We're meeting up to six times per year to ensure that the work we do not only in suicide prevention but also in understanding the unique needs of each jurisdiction are heard and inputted into the frameworks that we will be putting forward. That includes the national suicide prevention framework. Also, when it comes to the assessments, modules and training that will be required for mental illness as a sole determinant, we keep our finger on the pulse and the conversations open. The modules are available. We're tracking the training, and we will continue to work together.

MENTAL HEALTH LITERACY

Hon. Stan Kutcher: Minister Saks, thank you for being here today.

Effective mental health promotion, mental health care and improvements in population mental health are all supported by good mental health services. In mental-health-literate Canada, it is necessary for us to move ahead on all those directions that we need to improve. Can you please tell us what plans the government has for addressing this pressing issue to move quickly toward the best available evidence-based approach to developing a national strategy for a mental-health-literate Canada?

• (1630)

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you, Senator Kutcher, for the question.

I want to share my gratitude for the work that we did together on the handbook for parliamentarians on exactly this issue: introducing the concept of mental health literacy to our chambers. The work begins step by step.

That being said, I would also like to commend this chamber for its work in convening experts to prepare recommendations for our office on mental health literacy and on what considerations we need to have to ensure that the national conversation is driven by an evidence-based perspective, but one that is accessible and provides low-barrier access to so many Canadians who need to understand and have available to them the tools for resiliency at this time.

A key part of the solution will be putting forward the national conversation. I see my office and my file as a key player in ensuring that Canadians know how to access those services.

At this time, the Public Health Agency of Canada has been working with the University of Alberta on its own research of mental health literacy implementation through educational frameworks, such as schools and universities, within their own province. The data is compelling. The evidence-based tools that they have been preparing are very good. We're looking forward to working with them further.

Senator Kutcher: Thank you very much for that very comprehensive and thorough answer, minister.

As you move forward on this particular file, will there be an opportunity for discussions with ministers of education? You so rightly pointed out the importance of using schools and other institutions for addressing this issue in this country.

Ms. Saks: Thank you for the question. I believe that the conversation on mental health literacy has to happen in every space, whether it is in our schools, with our families or in our communities.

They also need to be culturally appropriate. They have to understand that the trauma-informed lens will be an important part of this conversation, as so many Canadians as well as our First Nations have different lived experiences that require unique tools and resources to be able to get them to a place of resiliency and understanding what resources are available to them and how to use them.

The work that we are doing right now is a comprehensive survey of how we can best serve Canadians, and we welcome all input. The plan is to meet with education ministers and with other ministers of mental health through the provinces and territories.

MENTAL HEALTH SERVICES

Hon. Sharon Burey: Thank you, minister. The 2024 report of the Canadian Mental Health Association, or CMHA, assigns Canada a failing grade for access to mental health services and system navigation. According to the Mental Health Commission of Canada, other countries of the Organisation for Economic Co-operation and Development, or OECD, devote approximately 13% of their total health spending to mental health, whereas Canada only allocates 7-9%. That may have increased. Minister, can you clarify when Canada will invest in mental health services commensurate with at least 13% of the total health spending?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you so much for the question.

I agree with you. We need to prioritize mental health within our health systems. It is something that, coming into this role, was a key priority for me. That is why, with the bilateral agreements with provinces and territories, \$25 billion was earmarked specifically for mental health services allocations and was a key principle in the bilateral agreements in the provision of their work plans.

In doing a survey of the current agreements we have in place, overall, over 30% of funds allocated to jurisdictions are going to mental health.

That means that on the ground, in jurisdictions, they understand that they have to partner deeply with existing community services available, such as CMHA and others, to ensure that the access is available. We're continuing to push them on their action plans. They will have to report with data-driven results to show how they are reaching citizens in their jurisdictions to be able to access those services.

Senator Burey: That leads me to the next question.

You know that I have dedicated my career to children's mental health. Could you outline the specific federal investments in children's mental health, but particularly how Canadians will ascertain value for these investments through metrics such as increased access to services, reduced wait times and improved outcomes?

Ms. Saks: Thank you for the question. As a mother of two teenage daughters myself, mental health is at the top of my mind. We have navigated the pandemic together as a family, and we've also navigated October 7 together and the tragedies within my own family on the other side of the world.

I will say that we have been investing in the Integrated Youth Services program now for a number of years, with 26 hubs across the country, with data being collected by the Canadian Institutes of Health Research to see how we can best meet the needs of youth in one-stop-shop hubs with everything from prevention to addressing mental health needs, sexual health and harm reduction services as well.

It also provides services in family peer support. We cannot help the youth if we don't help their families.

MENTAL HEALTH AND FIREARMS

Hon. Wanda Thomas Bernard: Minister Saks, thank you for being here. Corporal Lionel Desmond reported post-traumatic stress disorder symptoms including suicidality, paranoia and homicidal nightmares, and yet two mental health professionals still approved his application for a firearm licence. Dr. Jaffe, an expert witness for the inquiry regarding the deaths of Aaliyah Desmond, Shanna Desmond, Brenda Desmond and Lionel Desmond posthumously identified 20 out of 41 risk factors for domestic homicide in Corporal Desmond.

The report has three strong recommendations regarding mental health and firearms. Minister, will the government commit to Recommendation 23, that "the Office of the Chief Firearms Officer should receive additional funding to facilitate additional and ongoing checks . . .?"

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you for the question.

What I will say is this: With regard to those commitments, both Minister LeBlanc and Minister Blair would be more well-suited in terms of the adoption and earmarking of the allocations. However, what I will say is that in my time in Parliament and even before coming to Parliament, I have seen dramatic shifts in how both our military and national policing address stress disorder. They recognize now that they need

mechanisms in place to be able to support those in service to our country to protect our communities. They see trauma each and every day. There need to be early warning and prevention systems.

I recently joined Minister LeBlanc at the National Police Federation breakfast, where they shared their data on the implementation of early prevention and surveys that they are doing to help those in the service. I know that, as a government, we are fully committed to make sure that those who serve Canadians are both resilient and well in their work each and every day.

Senator Bernard: Will the government commit to Recommendation 22, which proposes that:

The Chief Firearms Office should, in appropriate cases, place certain licences under review and seek additional medical information, if necessary, to ensure that applicants who have been granted licences are continuing to meet eligibility requirements and maintaining good mental health.

Ms. Saks: Again, I am not the minister of that file to be able to commit to those recommendations.

As the Minister of Mental Health and a member of cabinet, I will certainly encourage my colleagues to prioritize identifying the key prevention tools that must be considered in all of our enforcement and service providers to Canadians.

Mental health preventative measures should be available in every workspace in every workplace, which is why we have a national standards system being drafted right now for exactly that purpose.

CANADA MENTAL HEALTH TRANSFER

Hon. Denise Batters: Minister, your Trudeau government promised \$4.5 billion for the Canada mental health transfer but failed to deliver anything. You also promised an online mental health portal, but your government is already shutting that down next week. Both these initiatives were tasked to the Minister of Mental Health and Addictions in her latest mandate letter from 2021. You are now 0 for 2. One Ottawa-based mental health organization called the cancellation of that online portal “. . . a real slap in the face to mental health and substance use health care in this country.”

• (1640)

Statistics Canada reports that depression, anxiety and PTSD have not declined post-COVID. Increased substance abuse, which spiked during the pandemic, continues to be a massive concern as well. The mental health and addiction needs of Canadians have not waned, but your government’s commitment to these issues sure has.

Why aren’t you standing up for the most important priorities in your own portfolio at the cabinet table?

Hon. Ya’ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you for the question.

[Ms. Saks]

As mentioned earlier, Wellness Together Canada was a specific measure that was put in place for the pandemic to meet the needs of Canadians who were, at that time, isolated and unable to access services in their jurisdiction due to lockdowns and other pandemic measures. We have moved beyond that phase and have phased out that program. Our financial commitments, including \$158 million to the 9-8-8 suicide prevention line, which has now been implemented, in addition to the \$25 billion that we have put forward through the bilateral agreements, are important steps in ensuring that mental health services are available.

This government has committed over \$1 billion since 2017 to address substance use and the overdose crisis, as opposed to the previous Harper government that only dedicated \$30 million to treatment and cut it by two thirds by the end of their tenure.

Senator Batters: Minister, recently at the Senate Legal Committee, I asked the CEO of the Canadian Mental Health Association about your government’s failure to deliver one penny of your promised \$4.5 billion Canada mental health transfer. She said:

. . . We were very disappointed that the Liberal government did not live up to that promise. . . .

On your government’s claim that funding will instead be delivered through provincial bilateral agreements, Ms. Eaton said:

. . . We don’t know how much provinces are spending on mental health or whether those bilateral agreements will actually deliver the kind of increase in mental health spending that we are looking for.

Minister, why does your government refuse to deliver the stable, committed funding you promised for mental health?

Ms. Saks: Thank you for the question.

While that testimony was given by Ms. Eaton at that time, the bilateral agreements have been very clear in their action plans and the commitments they are making to Canadians for mental health. As mentioned previously, it was a key principle of drafting these bilateral agreements. From what we see from the dollar figure numbers, over 30% of total allocations is going to mental health. Over the next 10 years \$25 billion is no small number, and we want to make sure that mental health is part of a full, integrated health care system.

CANNABIS USE

Hon. Judith G. Seidman: We have much more research about cannabis and mental health now than when we passed the Cannabis Act almost six years ago.

A September 2023 report in the journal *JAMA Psychiatry* showed that, in Ontario, over 40% of males aged 14 to 24 years with an emergency department visit for cannabis-induced psychosis were diagnosed with schizophrenia within three years. A systematic review of 597 studies in the *Journal of Clinical*

Psychology published in 2022 concluded that both high- and low-frequency marijuana usage were associated with a significantly increased risk of schizophrenia.

Minister, I'm concerned for the mental health of our young people. When will the government tighten policies to reduce youth cannabis use?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you for the question. As mentioned earlier, as the mother of two teenage daughters, this is something that is certainly top of mind for me.

I was recently at the Hospital for Sick Children meeting with Dr. Yaron Finkelstein, one of the leading researchers at this point in time on child poisonings when it comes to edibles, but also with the trends that we are seeing and the data you referenced in terms of the risk of psychosis for young people in using cannabis.

That is why, when we embarked upon the legislation, we had a robust prevention and education program that was rolled out. We understand that we need to continue to do that. It is an important part of the move forward.

Similar to what we have done with youth and the Know More program related to opioids or trade unions to ease the burden on the toxic drug crisis, more work can certainly be done on the education in this space. That being said, today, the *What We Heard Report* will be tabled in Parliament on the first five-year review of our legislation. There is deep consideration there on how we ensure the safety and protection of our youth.

Senator Seidman: Minister, in 2018, in response to my question at committee as we studied Bill C-45, Minister Blair said that in a regulated environment, young people would have better information about the risks of cannabis use, which would deter the early onset of and reduce the frequency and potency of its use. But in 2023, 43% of Canadians aged 16 to 19 reported using cannabis in the last year, up from 36% in 2018.

The growing body of evidence of harm must inform regulations. When will that happen?

Ms. Saks: Thank you for the question.

I will say that the data we have seen in terms of cannabis use among youth has not significantly increased in the time since the implementation of the legislation. That being said, more work should be done in terms of education and prevention; I agree with you wholeheartedly.

USE OF PSYCHEDELICS IN THERAPY

Hon. Mohamed-Iqbal Ravalia: Thank you, minister, for being here today.

In light of the expanding research indicating the potential therapeutic advantages of psychedelics in addressing mental health disorders, including among veterans, particularly in cases

where conventional treatments have fallen short, I'm keen to understand the government's position and initiatives concerning the integration of psychedelics into therapeutic practice.

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you for the question.

What we do know is that, when it comes to addressing mental health and mental illness, especially with complex cases of PTSD, which can be debilitating and long term for many who suffer from it, there is a need to address how we can best serve them in the process of healing from trauma.

There have been clinical trials on the use of psychedelics. Early evidence has been promising. However, I am a proponent of driving forward based on evidence and data. We are contemplating expanding clinical trials under strict supervision to ensure that those who have not been successful with other forms of treatment, particularly when it comes to PTSD and acute depression, are able to access clinical trials for consideration.

We know it is top of mind for many Canadians. We want to ensure that we are driven by science, evidence and by clinical trials that will best support those who need help.

Senator Ravalia: Should future trials actually prove that this would be a useful therapeutic armamentarium, is your department willing to expedite the approval process while maintaining rigorous safety and efficacy standards?

Ms. Saks: Thank you.

Senator, to be candid, I do not deal in hypothetical situations; I deal in facts and evidence. We will move cautiously and carefully through a responsible stewardship of expanding clinical trials based on the current evidence that we have, while also gauging demand and ensuring that we have a sufficient number of physicians and psychiatrists who can responsibly steer these clinical trials.

WARNING LABELS

Hon. Patrick Brazeau: Welcome, minister. My question has to do with alcohol when dealing with mental health. I have a lot of experience, unfortunately, with alcohol. I know a lot of the short- and medium-term effects. I know that, speaking for myself, it seriously contributed to my trying to commit suicide at one point. It breaks up families. It makes people turn to divorce. I also battled colon cancer.

In Canada, alcohol has been classified a Group 1 carcinogen, like tobacco and asbestos, since 1988. With everything we know — and with the science that your government has funded in terms of alcohol — why do the wealthy, powerful alcohol companies get a free pass on having warning labels on their products?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you, senator. You have been a brave voice in this space when it comes to those who use substances, whether it is alcohol or other substances, to show that we need to have these conversations. It is not easy to do that, and I want to commend you for being a voice, not just in this place but in the national conversation that we need to have about the impacts of substance use on our youth, our families and our communities. I do not take that lightly, because to do that work and to stand in that space takes a lot of courage.

• (1650)

When it comes to alcohol, we do have data available through our Health Canada web page. We have done work with the CDSA on this. We continue to meet with stakeholders and engage with communities to ensure that accurate and updated information is available. There is more we can do to ensure that all Canadians are well informed and know the possible risks when choosing whether to use substances.

Senator Brazeau: Thank you for that. I will remind you that the cannabis companies across the country weren't even asked to put warning labels on their products but they willfully did so.

I will return to my question. It is the only important question. Why is it that the very powerful — and I dare say that the alcohol lobby is probably the most powerful in the world — but why is it that in Canada, these companies get a free pass despite the science and what we know? With the funds that your government has funded, our Canadian experts have come to the conclusion that alcohol causes seven fatal cancers. Why is it that in 2024, after alcohol was confirmed a Group 1 carcinogen in 1988, they get a free pass?

Ms. Saks: Thank you, Senator Brazeau, for your question and your advocacy. We're continuing to invest in the work through the CDSA and other channels. I have not taken the question of how we move forward off the table. Just as with tobacco, vaping and other products, it is under consideration.

SUICIDE PREVENTION FRAMEWORK

Hon. Ratna Omidvar: Thank you, minister, for being with us here today.

The Standing Senate Committee on Social Affairs, Science and Technology studied the Federal Framework for Suicide Prevention, the mission of which is to prevent suicide in Canada. During our study, we determined that the suicide rate in Canada has remained largely stable over the past two decades. That is good news; it hasn't gone up. But it is also bad news; it hasn't gone down.

What is more troublesome is that the stable rate obscures the overrepresentation of some populations, like Indigenous peoples — and, more specifically, Inuit people — and boys and men.

My question is this: Given the findings of this study, is your strategy and framework going to pivot from a general population approach to a population-specific approach?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you for the question, Senator Omidvar. I am happy to answer. I would like to first thank you for the findings of the Social Affairs Committee, which help inform our work on such an important matter.

I agree with you. We have to take a unique approach in understanding the many communities that we have across the country, because if we don't, then we take the risk of not reaching the people we need to reach most.

Someone who often guides me in my work regarding suicide prevention is the health minister of Nunavut, John Main, who I work with regularly. He made a heartfelt plea on behalf of Inuit youth for us to understand the unique needs that they have. That helps guide us in our work.

We are looking at this from a comprehensive, collaborative framework. We know that we not only have to work with jurisdictions to make sure that we are working together, but engage stakeholders from across the country to understand the crises in their communities and ensure that we are meeting their needs with interventions that make sense. The framework, as I mentioned, will be evergreen. We know that we have to address the changing needs of communities as we move forward.

Senator Omidvar: Thank you, minister.

Your predecessor, former Minister Bennett, appeared before the committee and informed us that a new strategy for suicide prevention was being developed. Are you able to tell us whether that new strategy took the findings of the Standing Senate Committee on Social Affairs, Science and Technology report into account?

Ms. Saks: Thank you, senator. We have taken the recommendations into account. We will be sharing an action plan in spring 2024. I am encouraged that you will see that the deep work done by your Senate committee will be reflected in the work there.

INDIGENOUS MENTAL HEALTH SERVICES

Hon. Flordeliz (Gigi) Osler: Minister, you spoke about the billions of dollars in the newly signed bilateral health agreements and how the provinces and territories are committing up to a third of that money to mental health care.

Indigenous health, however, falls under the federal jurisdiction, and Indigenous people face multiple barriers to accessing adequate mental health and substance use care. Apart from the 2023 allocation of \$13 million in funding to support Indigenous mental health, how is the federal government improving access to mental health and substance use care for Indigenous peoples?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you, Senator Osler, for the question. As you mentioned, health care services for our First Nations and Indigenous communities do fall under the jurisdiction of Indigenous Services and Minister Hajdu. That said, she and I have worked collaboratively with Indigenous communities. There was the second annual National Summit on Indigenous Mental Wellness, which was held here in Ottawa, where we brought communities from across the country to share with us their experiences, their data and the practices that they are implementing, whether it is land-based programs or others that are really anchored within the medicine wheel and traditional practices that make sense for their communities. Indigenous Services allocates \$650 million toward mental health and substance use services each year.

That said, we also know that there is a responsibility for provincial jurisdictions to partner. A recent example was in northern Ontario. Nishnawbe Aski Nation, or NAN, First Nations came to us collectively, asking for help and intervention with their youth. Working with my counterpart in Ontario, Minister Tibollo, \$2 million of additional funding ensured that there were immediate interventions for those communities and their youth. This is how good, collaborative jurisdictional work happens, and we are committed to working that way.

MINISTERIAL PRIORITIES

Hon. Andrew Cardozo: Minister Saks, thank you for being here today. I add my words of welcome. This is your first visit to this chamber since your appointment as the Minister of Mental Health and Addictions. I really appreciate the wide range of issues that you have covered. I also know well the work that you had done before politics to create dialogue across communities. I have great respect for the work that you have done and continue to do.

I may be the last questioner. As we approach the end of this hour, could you summarize for us what your priorities are given the wide range of very pressing issues around mental health and addiction? What are your top priorities?

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you for the question. First, it is not lost on me that for nearly every household in this country, the illegal, pervasive and poison toxic drug supply is becoming more apparent in many more communities, both in our urban centres and rural communities. It is top of mind for me to ensure that we continue to offer services and supports to supplement the health jurisdictions in each province and territory in making sure that those who use substances have access to health services, and that we reduce stigma and get people to the health care that they need.

I would say that my second priority, as wisely mentioned by Senator Kutcher, is mental health literacy. Starting with our youth, we need to ensure that we have upstream prevention services and supports, such as the Integrated Youth Services. We will also be investing in the Icelandic model this year in seven locations across the country. We know that if we want to stop the cycles of mental health struggles and addiction, then we need to

ensure that our young people are getting the health services that they need, when they need them and at an early age to create that safety net of prevention.

Senator Cardozo: Thank you. I also wish to ask about the other part of your portfolio as the Associate Minister of Health, and whether there is any time left to deal with that. Are there other issues that you are dealing with? Overall, can you say a few words about your interactions with the provinces? Ultimately, it is they who are providing the services.

• (1700)

Ms. Saks: Absolutely. I think that, as the Associate Minister of Health with Minister Holland, it's important to have a woman's voice at the table, particularly when it comes to sexual and reproductive rights and health access at this time. Those rights are health services in this country, and I fully intend to see them stay that way.

With our provincial jurisdictions, I will always strive to ensure that we have a collaborative approach when it comes to the opioid and overdose crises that we're seeing. Not all jurisdictions are on the same page with the interventions that are needed, but we are all on the same page with the priority of saving lives. I have engaged in dialogue throughout my career.

[Translation]

SUICIDE PREVENTION

Hon. Claude Carignan: My colleague's question addressed one aspect of suicide prevention, but I want to come back to the subject. What are the results of the suicide prevention hotline that was put in place and how does that work with the provincial associations that have their own suicide prevention hotlines? I'd like to hear your thoughts on that.

[English]

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you for the question.

What I will say is that the first quarterly data reports are out and available to be shared with provinces and territories. On average, we're seeing about a thousand calls a day and about 700 texts per day on the lines, which shows that the system needs to be robust, well funded and well-prepared. This is why 39 local organizations across the country are available to provide services, both bilingually and in other languages that are more local to the jurisdictions that they operate in.

There is a fee regime with the number of calls with each organization when they are routed through to the 9-8-8 line to ensure that their volunteers or trained staff, who are answering the phone lines, can continue to maintain the operations of their services and also grow with demand.

Sorry, can you repeat the last part of your question? I apologize, Your Honour.

[Translation]

Senator Carignan: It had to do with the role of the suicide prevention centres in the provinces, but I think you answered my question in part.

With regard to the federal suicide prevention framework, how will the various provincial organizations — of which there are many, especially in Quebec and Alberta — fit into your new framework or the revised version the framework?

[English]

Ms. Saks: As mentioned before, obviously, the first line of collaboration will be with my provincial counterparts in provinces and territories, and we will work with them to ensure that local organizations are part of the discussions and inputs to the conversations.

Each jurisdiction is unique. To be frank, community service mental health organizations have been filling these gaps for decades to serve Canadians and residents in their jurisdictions. Their input will be critical in understanding how we build out a framework that really meets the needs of Canadians.

CONCURRENT DISORDERS

Hon. Joan Kingston: Thank you, minister, for being here today.

My question concerns concurrent disorders, which, as you know, is a condition when someone has both a mental illness and substance abuse. At least 20% of people experiencing mental illness also use substances. Similarly, people with addictions are three times more likely to suffer from mental illness than people in the general population. An integrated treatment approach is known to be an effective way to treat concurrent disorders. When the social determinants of health, such as access to supportive housing, are addressed, success in treatment is much better and relapse is less.

Mental illnesses and substance use disorders are more prevalent among people experiencing homelessness and inmates than among the general population. Improving access to appropriate services and supports for these individuals requires interjurisdictional collaboration.

My question is this: How is your department —

[Translation]

The Hon. the Speaker: I'm sorry. Minister, did you want to comment?

[English]

Hon. Ya'ara Saks, P.C., M.P., Minister of Mental Health and Addictions and Associate Minister of Health: Thank you, senator, for the question.

Late last year, we announced the renewal of the Canadian Drugs and Substances Strategy, or CDSS. We felt the need for the renewal of the strategy because we knew that we needed to take a more holistic and integrated approach in how we address those who use substances and meet them where they're at. That required us to expand the scope of our work with 15 different departments to make sure that officials are working across lines to line up policy with our actions and implementation, whether it is addressing housing, community services — the list goes on.

I like to say that we're in the phase of what I call the Canada model. I presented it as such at the United Nations drug commission last week in Vienna. We're in a unique crisis here in North America with the opioid crisis, and we have a robust set of tools at the federal level that we have been implementing. We have data for it, which many other jurisdictions want to know about.

What I can say is that we know the best way to address those with complex needs is to have full wraparound services and supports that includes housing, psychiatric assessment and social services.

Senator Kingston: Are the provinces involved in these discussions in terms of bringing the plans to their own jurisdictions?

Ms. Saks: Absolutely. As mentioned previously, as Minister of Mental Health at the federal jurisdictional level, I asked my colleagues if they would be willing to meet quarterly. We're all very busy. However, we have made that commitment. We have had two meetings so far since our meeting in Charlottetown in October, and the discussions continue. We talk about how they can work with their local municipalities on public health aspects, safe consumption sites and also municipal housing proposals to the federal government to ensure that complex housing is part of the proposal they put forward to us. This is how the work is done.

The Hon. the Speaker: Honourable senators, the time for Question Period has expired.

[Translation]

I am sure you will join me in thanking Minister Saks for being here with us today.

Hon. Senators: Hear, hear.

The Hon. the Speaker: We will now resume the proceedings that were interrupted at the beginning of Question Period.

(At 5:09 p.m., the Senate was continued until tomorrow at 9 a.m.)

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