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The Honourable RAYMONDE GAGNÉ,
Speaker

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THE SENATE

Thursday, February 29, 2024

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

[*English*]

Prayers.

SENATORS' STATEMENTS

BLACK HISTORY MONTH

Hon. Bernadette Clement: Honourable senators, I rise today to mark the last day of Black History Month 2024.

This month, I lost a dear mentor and friend, Dr. Claude Manigat — dear Claude. Dr. Manigat and his wife, Alta, invited me to their home when I first moved to Cornwall. This is how small the Black community was back then: They wanted this total stranger to feel welcome and to know that there were other Black folks to support them.

[*Translation*]

They are also responsible for the first proclamation of Black History Month in Cornwall. Representation, visibility and alliance count. Dr. Manigat is a case in point.

[*English*]

His passing during Black History Month is particularly difficult because it's still common to be the only Black person sitting around a table, and so every Black mentor, leader or friend matters.

It's with Dr. Manigat's example in mind that I lived Black History Month this year. As a politician who lives in the public eye, I chose to take up space. I feel a responsibility to speak up, especially when the eyes and ears of this country are turned toward Black Canadians. I feel a responsibility to say "yes" when the invites start pouring in for February events. I feel a need to be vulnerable, to tell my story and to make space for people to tell theirs.

We know that Black history, Black excellence and Black stories are worthy of celebration all year long. I know that the challenges facing Black communities don't disappear when February rolls into March. That is why the work of the African Canadian Senate Group is so important. You know that Black people and our allies will tackle discriminatory policies every day of the year.

Still, Black History Month matters.

[*Translation*]

Based on the conversations I've had throughout the month of February, I can honestly say that it is still hard to be Black in Canada, despite my role as a senator. In facing those challenges, I'm grateful for the ties I have with my community, with young people, with people from all walks of life who nourish my soul and give me strength.

I want to close by thanking all the groups who make space for people like me in February and beyond. I'm thinking about the SENgage team, allied senators, school teachers, municipalities, news outlets, cultural groups, women's groups, artists, creators and entrepreneurs. Thank you for your willingness to be vulnerable, to practise allyship and to open the door for the possibility of better understanding.

I want to thank mentors across Canada — mentors like Dr. Manigat — who create safety for Black folks daring to take up space.

Thank you, *nia:wen*.

THE HONOURABLE DONALD H. OLIVER, C.M., K.C.

Hon. Leo Housakos: Honourable senators, I would like to pay tribute to another outstanding parliamentarian in honour of Black History Month. It is someone I and a few others still here today had the privilege of serving with in this august chamber. I'm speaking about our former colleague the Honourable Donald Oliver, the first Black man appointed to the Senate of Canada. A finer gentleman than Don Oliver you will not meet.

Descended from Black refugees who fled to Canada from the U.S. during the War of 1812, Oliver is a proud Nova Scotian by birth and upbringing. Earning his law degree from Dalhousie University, he was called to the bar in 1965. He was a highly respected lawyer in Halifax, practising for 36 years, becoming a partner and receiving the title of Queen's Counsel. He also taught at his beloved alma mater, Dalhousie Law School, now the Schulich School of Law, among others.

Yet, he still found time to be involved in politics — and not just on the fringes, colleagues. Don Oliver was a long-time and steadfast activist in the Conservative movement in Canada. He served as the party's director of legal affairs through six federal elections from 1972 to 1988, and also served as the federal vice-president of the party and as director of its fundraising wing, the PC Canada Fund. Senator Oliver also served for years as a constitution chairman and member of the finance committee for the Progressive Conservative Association of Nova Scotia and as a former vice-president of that party.

Throughout his life, Don has remained active in service to his community, including, but not limited to, presiding over the Children's Aid Foundation of Halifax, as founding director of the Black United Front and as founding president and first chairman of the Society for the Protection and Preservation of Black Culture in Nova Scotia.

Appointed to the Senate in 1990 by the Right Honourable Brian Mulroney, he represented the people of Nova Scotia and served this institution and country with distinction for 23 years. This included his work on many committees, as speaker pro tempore, as a joint chair of the Special Joint Committee on a Code of Conduct for parliamentarians and on a bill to amend the Criminal Code to deal with stalking.

I think we would be remiss to close out this month without acknowledging that it was Senator Oliver who introduced the Motion to Recognize Contributions of Black Canadians and February as Black History Month. That motion was adopted with unanimous support on March 4, 2008, completing Canada's parliamentary position on Black History Month.

We would also be remiss, colleagues, if we didn't pay some tribute and respect to three great Canadian prime ministers who themselves were leaders and cutting edge at a time when it wasn't easy. Prime minister Joe Clark named the first Black man a cabinet minister — Lincoln Alexander. The Right Honourable Brian Mulroney named the first Black man to the Senate of Canada, Senator Don Oliver, to whom I'm paying tribute today. John G. Diefenbaker, the great Conservative prime minister, in 1961, at a Commonwealth meeting in London, set the stage for fighting apartheid and really launched a campaign that Canada and successive prime ministers carried on with enthusiasm and success, which culminated with the ending of apartheid.

I pay homage and tribute today to all of those who contributed to making Black people a fair part of this great country and society.

Thank you very much, colleagues.

Some Hon. Senators: Hear, hear.

RARE DISEASE DAY

Hon. Robert Black: Honourable senators, I rise today in the Senate Chamber to highlight that today, February 29, is Rare Disease Day. A rare disease is defined as a condition affecting fewer than 1 in 2,000 people.

I'd like to begin by sharing just a few statistics. About 1 in 12 Canadians are affected by a rare disease — two thirds of them are children. Right now, only 60% of treatments for rare disorders make it into Canada, and most of them get approved up to six years later here than in the U.S. and Europe. About 80% of rare diseases are caused by genetic changes, and 25% of children with a rare disease will not live to their tenth birthday.

• (1410)

Rare Disease Day serves as a poignant reminder of the over 300 million individuals worldwide and 3 million Canadians who live with a rare disease.

This day is not just about raising awareness. It's about fostering understanding, support and hope for those living with these often misunderstood and overlooked conditions.

On June 4, 2021, we welcomed our third grandson, Rowan Cameron Black, into our family. While Rowan's birth was a week earlier than expected, he arrived into the world a beautiful baby boy. However, we soon discovered that he was dealing with frequent and serious seizures while still at Guelph General Hospital. We would later learn that this was one of the first signs of SLC13A5 epilepsy.

This was the first time the Black family had ever dealt with complications during the birth of a child or epilepsy itself, and, as I'm sure many of you know, neither is an easy thing to handle. SLC13A5 is an extremely rare form of epilepsy. In fact, there are currently fewer than five individuals in Canada who have been officially diagnosed with this relatively newly discovered condition.

While Rowan has had countless seizures, he has also received excellent care from the many wonderful medical professionals who have attended to him. As an aside, we had a milestone this week: Rowan stood under his own steam for over 30 seconds.

Honourable colleagues, Rowan's story is only one of many that deserve our attention and support. Despite the countless challenges they face, individuals with rare diseases and their parents demonstrate remarkable strength, resilience and courage in navigating their unique journeys. Their stories of perseverance and determination inspire others to keep fighting — even in the face of adversity.

I would like to highlight that today is the Canadian Organization for Rare Disorders, or CORD, Rare Disease Day 2024 Summit, which is happening here in Ottawa. CORD is Canada's national network for organizations representing those with rare disorders. It provides a common voice to advocate for health policy and a health care system that works for all.

CORD is celebrating several achievements this year, including the launch of Canada's first-ever Rare Disease Network, the first anniversary of Canada's first national Rare Disease Strategy and the first year that patients could access an unprecedented number of drugs to treat rare diseases.

In closing, let us use Rare Disease Day as an opportunity to reaffirm our commitment to supporting individuals and families affected by rare diseases like SLC13A5. Together we can make a difference and ensure that no one faces these challenges alone. Thank you, honourable colleagues, for listening.

Thank you. *Meegwetch.*

VISITORS IN THE GALLERY

The Hon. the Speaker: Honourable senators, I wish to draw your attention to the presence in the gallery of Alisa Lombard and Nicole Rabbit. They are the guests of the Honourable Senator Boyer.

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

Hon. Senators: Hear, hear!

[Translation]

RARE DISEASE DAY

Hon. Marie-Françoise Mégie: Honourable senators, 2024 is a leap year and February 29 is dedicated to rare diseases. I'm sure you can understand why.

The Canadian Organization for Rare Disorders is currently holding a national summit in Ottawa to bring together organizations, researchers, professionals and patients affected by rare diseases.

To be considered rare, a disease must affect no more than one in 2,000 people, as our colleague Senator Black mentioned earlier. However, those who are affected by such diseases aren't quite so rare. One in 12 people in Canada have a rare disease.

There are between 5,000 and 8,000 rare diseases worldwide, and approximately 80% of them are genetic, for example, sickle cell disease, cystic fibrosis and certain types of muscular dystrophy.

Rare diseases also include other types of illnesses, such as autoimmune diseases, like scleroderma, and some rare forms of cancers.

On March 22, 2023, Canada's Minister of Health announced measures to support the very first national strategy for drugs for rare diseases, with an investment of \$1.4 billion over three years.

I hope that the implementation of the Canadian Rare Disease Network, which brings together health care professionals and patient organizations, will ensure that people are diagnosed and start receiving specialized care more quickly.

There is still a long road ahead because many patients won't have access to the drugs that might save and change their lives. Even though these drugs have already been approved and recommended, they're still not being offered by our public drug plans.

That money that was promised 11 months ago is necessary to ensure the health and quality of life and extend the life expectancy of three million Canadians.

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 Henriette Mvondo and Gilbert Bande Obam. They are the guests of the Honourable Senator Gerba.

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

Hon. Senators: Hear, hear!

BLACK HISTORY MONTH

Hon. Amina Gerba: Honourable senators, today, I'm wrapping up my series of statements for Black History Month 2024 with a profile of an individual whose journey and community involvement have been remarkable: Henriette Mvondo.

Henriette held a degree in mechanical engineering and taught electronics in her country of origin, Cameroon. She worked up the courage to leave it all behind and come to our country with her husband to give her children a better future.

When Henriette arrived in Montreal in 2004, her credentials weren't recognized. She had to start from square one and work in factories to survive. Despite numerous challenges, she never gave up. She worked at many different jobs before going back to school and eventually getting hired as a financial planner at Royal Bank of Canada.

Her position gives her the opportunity to help immigrants navigate the Canadian banking system, and she does so with passion.

In 2017, building on her experience and driven by her desire to help others, Henriette founded Bienvenue à l'immigrant, BAI, an organization that provides services to newcomers ranging from settlement to professional training and psychosocial support. BAI's very innovative approach involves personalized support based on immigrants' needs and cultural origins.

Henriette is a deeply involved, well-known and recognized resident of LaSalle. She works not only with the African-Canadian community in all its diversity, but also with the Greek, Italian and Chinese communities. Henriette is considered a valuable bridge between all cultures. For that very reason, LaSalle named her its intercultural harmony week ambassador in 2022. In 2023, the Royal Bank of Canada bestowed upon her its 2023 RBC Global Citizen Award. Congratulations, Henriette.

Colleagues, the various presentations delivered in this chamber in February have undoubtedly convinced you that Black excellence is a heritage that we need to acknowledge and celebrate not only in February, but every day.

Thank you.

Hon. Senators: Hear, hear.

[English]

Hon. Michael L. MacDonald: Honourable senators, on this, the last day of Black History Month, it is appropriate to turn our attention to Nova Scotia. After all, the oldest Black communities in Canada are in Nova Scotia, most of which were established in the late 18th century.

When the great British novelist Rudyard Kipling wrote his famous novel *Captains Courageous*, two of the notable characters on the ship in his book were the cook and a deckhand, two Black men who always conversed with each other in Scottish Gaelic. Critics at this time scoffed at such a scenario, deeming it unrealistic and contrived.

But nobody in Cape Breton questioned it because Kipling based these characters on two Cape Bretoners who were legends in their own time and are still remembered with great fondness today.

They were the Maxwell twins, George and John, from the beautiful community of Marble Mountain on the southwest corner of the Bras d'Or Lakes in Inverness County.

Their father, George Maxwell Sr., was a 10-year-old orphan on the Halifax waterfront in the decades before Confederation. A Cape Breton sea captain, becoming aware of George's circumstances, offered to give him a home, and George sailed to Cape Breton to start a new life. After becoming of age, George Sr. ventured to Guysborough County to the Black community there, met a girl, fell in love and returned to Marble Mountain to raise his family.

• (1420)

When the twins were born in 1864, Cape Breton was over 90% rural and over 80% Gaelic speaking, and Marble Mountain was 150% Gaelic speaking. The twins grew up as Gaelic-speaking Highland Scots. They were great singers and composers of Gaelic songs. John was also an accomplished player of the Cape Breton violin and also became quite a scholar in the Gaelic language. They both had large families, and their descendants are numerous and can be found in Cape Breton and across the continent. Interviews in the 1970s with their grandchildren tell us that they were both devout Presbyterians who frowned upon card playing, attended church regularly and always prepared Sunday meals on the Saturday.

As reported by the BBC this year, their story was highlighted at this year's Scotland film awards. The Maxwell Twins were the subject of a documentary called *Na Gàidheal Dubha*, or "The Black Gaels," a feature film that made the short list of 4 out of over 160 submissions. As a Cape Bretoner, it is so gratifying to see these two fine gentlemen both remembered and recognized after all these years.

As we come to the end of Black History Month, take the time to raise a glass and toast the memory of George and John Maxwell, *Na Gàidheal Dubha* of Cape Breton — although the twins might prefer that you toast them with water.

Thank you.

ROUTINE PROCEEDINGS

JUSTICE

CHARTER STATEMENT IN RELATION TO BILL S-16—
DOCUMENT 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, a Charter Statement prepared by the Minister of Justice in relation to Bill S-16, An Act respecting the recognition of the Haida Nation and the Council of the Haida Nation, pursuant to the *Department of Justice Act*, R.S.C. 1985, c. J-2, sbs. 4.2(1).

THE ESTIMATES, 2024-25

MAIN ESTIMATES 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 Main Estimates for the year 2024-25.

TREASURY BOARD

2024-25 DEPARTMENTAL PLANS 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 Departmental Plans for 2024-25.

JURY DUTY APPRECIATION WEEK BILL

NINETEENTH REPORT OF SOCIAL AFFAIRS, SCIENCE AND
TECHNOLOGY COMMITTEE PRESENTED

Hon. Jane Cordy, for Senator Omidvar, Chair of the Standing Senate Committee on Social Affairs, Science and Technology, presented the following report:

Thursday, February 29, 2024

The Standing Senate Committee on Social Affairs, Science and Technology has the honour to present its

NINETEENTH REPORT

Your committee, to which was referred Bill S-252, An Act respecting Jury Duty Appreciation Week, has, in obedience to the order of reference of Thursday, June 1, 2023,

examined the said bill and now reports the same without amendment but with certain observations, which are appended to this report.

Respectfully submitted,

RATNA OMIDVAR

Chair

(For text of observations, see today's Journals of the Senate, p. 2501.)

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

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

CANADA-UKRAINE FREE TRADE AGREEMENT IMPLEMENTATION BILL, 2023

THIRTEENTH REPORT OF FOREIGN AFFAIRS AND INTERNATIONAL
TRADE COMMITTEE PRESENTED

Hon. Peter M. Boehm, Chair of the Standing Senate Committee on Foreign Affairs and International Trade, presented the following report:

Thursday, February 29, 2024

The Standing Senate Committee on Foreign Affairs and International Trade has the honour to present its

THIRTEENTH REPORT

Your committee, to which was referred Bill C-57, An Act to implement the 2023 Free Trade Agreement between Canada and Ukraine, has, in obedience to the order of reference of February 15, 2024, examined the said bill and now reports the same without amendment.

Respectfully submitted,

PETER M. BOEHM

Chair

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

Hon. Peter Harder: Honourable senators, with leave of the Senate and notwithstanding rule 5-5(b), I move that the bill be placed on the Orders of the Day for third reading later this day.

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

Hon. Senators: Agreed.

(On motion of Senator Harder, bill placed on the Orders of the Day for third reading later this day.)

THE ESTIMATES, 2024-25

NOTICE OF MOTION TO AUTHORIZE NATIONAL FINANCE
COMMITTEE TO STUDY MAIN ESTIMATES WITH
THE EXCEPTION OF VOTE 1 TO BE STUDIED BY JOINT
COMMITTEE ON THE LIBRARY OF PARLIAMENT

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate): Honourable senators, I give notice that, at the next sitting of the Senate, I will move:

That the Standing Senate Committee on National Finance be authorized to examine and report upon the expenditures set out in the Main Estimates for the fiscal year ending March 31, 2025, with the exception of Library of Parliament Vote 1;

That, for the purpose of this study, the Standing Senate Committee on National Finance have the power to meet, even though the Senate may then be sitting or adjourned, with rules 12-18(1) and 12-18(2) being suspended in relation thereto;

That the Standing Joint Committee on the Library of Parliament be authorized to examine and report upon the expenditures set out in Library of Parliament Vote 1 of the Main Estimates for the fiscal year ending March 31, 2025; and

That, in relation to the expenditures set out in Library of Parliament Vote 1, a message be sent to the House of Commons to acquaint that house accordingly.

[Translation]

CRIMINAL CODE

BILL TO AMEND—FIRST READING

The Hon. the Speaker informed the Senate that a message had been received from the House of Commons with Bill C-321, An Act to amend the Criminal Code (assaults against persons who provide health services and first responders).

(Bill read first time.)

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

(On motion of Senator Martin, bill placed on the Orders of the Day for second reading two days hence.)

[English]

CORRECTIONS AND CONDITIONAL RELEASE ACT

BILL TO AMEND—FIRST READING

The Hon. the Speaker informed the Senate that a message had been received from the House of Commons with Bill C-320, An Act to amend the Corrections and Conditional Release Act (disclosure of information to victims).

(Bill read first time.)

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

(On motion of Senator Martin, bill placed on the Orders of the Day for second reading two days hence.)

THE SENATE

NOTICE OF MOTION TO URGE GOVERNMENT TO DIRECT THE SPECIAL ENVOY ON PRESERVING HOLOCAUST REMEMBRANCE AND COMBATTING ANTISEMITISM TO CONVENE A SECOND NATIONAL SUMMIT TO COMBAT ANTISEMITISM

Hon. Leo Housakos: Honourable senators, I give notice that, at the next sitting of the Senate, I will move:

That the Senate take note:

- (a) of the data from Statistics Canada and Jewish organizations such as the Centre for Israel and Jewish Affairs, Friends of Simon Wiesenthal Centre and B'nai Brith indicating a shocking rise in antisemitic incidents across Canada over the past years;
- (b) of a global surge in antisemitism, to which Canada has not been immune, since the October 7th terrorist attack by Hamas and Israel's duty to respond to it;
- (c) that since October 2023, Canada's Jewish community has witnessed shots fired at its schools, arson attempts at its communal buildings, boycott efforts and vandalism targeting private businesses, simply because their owners are Jewish, and the intimidation of its students at universities;
- (d) that police departments across the country all report major and unprecedented increases in hate crimes since October 2023, with the Jewish community being by far the most targeted;

- (e) that the Government of Canada has appointed Deborah Lyons, Canada's former Ambassador to Israel, as the new Special Envoy on Preserving Holocaust Remembrance and Combatting Antisemitism;
- (f) that the authority vested in the Special Envoy's office permits her to be uniquely placed to convene and chair a second summit to combat antisemitism; and
- (g) that a second national summit to combat antisemitism would provide a valuable forum for stakeholders representing all levels of government, civil servants, law enforcement agencies, educators and community leaders to share information and agree on effective strategies to blunt the unprecedented wave of hate aimed at Jews; and

That the Senate urge the Government of Canada to direct the Special Envoy on Preserving Holocaust Remembrance and Combatting Antisemitism to convene a second national summit to combat antisemitism.

• (1430)

QUESTION PERIOD

PUBLIC SAFETY

NATIONAL MICROBIOLOGY LABORATORY

Hon. Donald Neil Plett (Leader of the Opposition): Leader, the Trudeau government fought tooth and nail for four years to hide the truth about the massive security breach at the National Microbiology Laboratory in Winnipeg.

Leader, your government defied four orders of the House of Commons to produce the uncensored documents. Leader, your government sued the Speaker of the House of Commons to keep the documents hidden from Canadians. Now we know why. The documents confirm the Communist regime in Beijing infiltrated our most important lab — an unprecedented security breach, leader, presided over by this incompetent Trudeau government.

The Prime Minister is not worth the cost to Canada's national security and our reputation, leader. How could your government allow this to happen? Who gets fired for this?

Hon. Marc Gold (Government Representative in the Senate): Thank you for the question. As Minister Holland said, he believes there was clearly a lax adherence to security protocols and an inadequate understanding of the threats of foreign interference. Although an earnest effort was made to adhere to the policies in place at the labs, it was clearly not with the rigour that was required. Indeed, as the minister also said, the

threat with respect to foreign interference was understood in a very different place in 2019 than it is today. I may quote from Minister Holland:

While there were the proper protocols in place, there was a lax adherence to the security protocols in place. . . . This was unacceptable.

Typically, colleagues, the government will not disclose the names of people or disclose the work, nor would the government disclose the nature of why someone was fired. This is why this is different: National security and the need for transparency have to be balanced.

Senator Plett: You must practise these answers in front of a mirror to keep a straight face.

When reports about this massive security breach were revealed in May 2021, Prime Minister Trudeau said in the other place that Conservative MPs were racist for asking questions about this — racist. He accused fellow MPs of racism to deflect from his government’s gross incompetence. Leader, when the Prime Minister was making these accusations, he knew the truth about the security breach at the lab — didn’t he? On what date did he learn that Beijing had infiltrated the Winnipeg lab?

Senator Gold: With regard to the information that has been released and redacted, as we understand now, Minister Holland created an ad hoc committee of MPs from all parties to review the unredacted documents. These are documents that, by the way, colleagues — especially those in the Conservative caucus who were in government — understand very well are not redacted by ministers or their officials. In any event, the material that has been released is appropriate for release as understood by our protocols.

PUBLIC SERVICES AND PROCUREMENT

PROCUREMENT PROCESS

Hon. Leo Housakos: Senator Gold, it’s not enough just to recognize all the breaches, because the government would take hours, days, weeks and months to go through all the breaches of this government. The truth of the matter is that there is the following: the SNC-Lavalin scandal; the WE Charity scandal; and the refusal to list the Islamic Revolutionary Guard Corps, or IRGC, on the list of terrorist organizations. We have “ArriveScam” that has popped up in the last few months — hundreds of millions of dollars, but the government is not forthcoming with information. Emails are being shredded. There are cases being sent to the RCMP. This is not new with this government.

What is also not new is the constant contempt for Parliament whenever Parliament asks for information. There’s always stalling going on. You’re even suing people to prevent information from being made public. These are all facts, Senator Gold.

Yesterday, in the House of Commons, there was a committee that has again called on the government to return all expenses regarding “ArriveScam,” and also to recoup all money from

contractors who were involved in “ArriveScam.” Will your government recoup the money from the WE Charity — going back to that scandal? Will you recoup the money, Senator Gold?

Hon. Marc Gold (Government Representative in the Senate): Thank you for your questions and comments. All of the issues surrounding ArriveCAN are being investigated properly within the Canada Border Services Agency, the Department of National Defence or by the RCMP. Until those investigations are completed, it is inappropriate and improper to assume what the results will be and what next steps the government will take.

What the government has done — at the earliest opportunity when the information became clear — was suspend the contracts with all the companies and, even more recently, investigate an order with regard to Dalian. It’s a review of the whole program to make sure that the programs that benefit Indigenous enterprises are not being dealt with improperly by people seeking to take advantage of it.

Senator Housakos: Senator Gold, you’re not answering the question. Did the government recoup the money from the old scandal — the WE Charity scandal? The contract was cancelled, but money had been paid out. Has the money paid out in the scandalous WE Charity exercise been recouped back for Canadian taxpayers? In regard to the money that was paid out to Laith Marouf, the anti-Semite who was fired, was that money recouped by the government? I’d like an answer.

My second question is the following: Last week, and over a number of weeks, you told us the three companies involved in “ArriveScam” had their contracts cancelled. Have those contracts been cancelled? Senator Gold, I know you’re a man of integrity and you wouldn’t want to mislead this chamber, so please give us some honest answers.

Senator Gold: Thank you for your confidence in my integrity; I appreciate that. Until investigations are completed, and until investigations into all the contracts — for example, Dalian has been doing business with the federal government since 2007. It is only fair and appropriate that there be proper investigation into the nature of these contracts and what representations were made before any action is taken. That’s due process.

HEALTH

PEDIATRIC HEALTH CARE

Hon. Rosemary Moodie: Senator Gold, as of February 26, Health Canada is running a pilot for the next two years where they will accept pediatric data that manufacturers already have available and are already submitting to the European Union and to the United States. This will, in Health Canada’s words, increase access to safety, efficacy and quality information in pediatric populations and align them with international standards. Indeed, this policy should lead to a significant reduction of the 80% off-label drugs that are being used in pediatric care right now.

Health Canada is to be congratulated for making this move after two decades of lobbying from both myself and pediatric leaders across this country. Nevertheless, the devil is in the details. Senator Gold, what will be the indicators that Health Canada will use to examine whether or not this pilot is a success?

Hon. Marc Gold (Government Representative in the Senate): Thank you for your question. Indeed, Health Canada is taking these steps to increase the availability of data that will help our health care providers make the important decisions to which you alluded.

• (1440)

I do not have information about the specific indicators that will be used, but I can share with you, colleagues, the basic objectives of the pilot program. They are to encourage sponsors to submit, in a timely manner, the safety and efficacy information for drugs expected to be used in pediatric populations; and to provide more information on the safety, effectiveness and dosage of drugs used in pediatric populations to the health care providers, the patients and their families, all with an eye toward informing and improving future policy developments.

Senator Moodie: Senator Gold, will Health Canada, to your knowledge, commit to publishing data on the performance of the pilot at regular intervals so that Canadians and medical practitioners can see and understand how the pilot is progressing?

Senator Gold: Thank you for your question. My understanding is that as part of the pilot project, Health Canada will be producing annual reports, which will be public and intended, of course, to keep us, the public and all other constituencies informed.

EMPLOYMENT AND SOCIAL DEVELOPMENT

GREEN HYDROGEN PROJECT

Hon. Iris G. Petten: My question is to the Government Representative in the Senate. Senator Gold, yesterday the Minister of Labour and Seniors, Seamus O'Regan, announced Canada's first commercial-scale green hydrogen and ammonia facility in Newfoundland and Labrador. World Energy GH2's project will be receiving a federal loan in the amount of \$128 million. While the project is still going through the impact assessment process from the province, it seems to be a positive investment in renewable energy and a step toward reaching Canada's net-zero emissions goal by 2050. What does the government expect the impact of this project to be on the local economy?

Hon. Marc Gold (Government Representative in the Senate): Thank you for your question, senator. This is a real opportunity both for Newfoundland and Labrador and for Canada, because the world is looking for renewable energy. That's where research is going, that's where the markets are going, and, frankly, that's where the money is going.

The government anticipates that the offshore wind industry will be worth approximately \$1 trillion by 2040. Projects such as this will ensure that workers in Newfoundland and Labrador

share in their profits. More specifically, it's my understanding that World Energy GH2 expects the first phase of the project to create 2,200 direct construction jobs, 400 operations jobs and a further 4,200 indirect jobs.

Senator Petten: Senator Gold, the money from the government to support this project is coming from a loan program called a credit facility loan agreement. What are the details of this loan agreement, including what conditions have to be met, and what will the repayment schedule look like over the coming years?

Senator Gold: Colleagues may know this loan facility is a \$128-million credit facility. It's a type of pre-arranged loan which allows a borrower to access money on an ongoing basis rather than applying for a whole new loan during the cycles. I don't have the details of this agreement. It was signed by Export Development Canada.

HEALTH

NATIONAL STRATEGY FOR DRUGS FOR RARE DISEASES

Hon. Robert Black: My question is for the Government Representative in the Senate. Senator Gold, as you heard both in my statement and in Senator Mégie's statement earlier, today is Rare Disease Day. According to the Canadian Organization for Rare Disorders, or CORD, the federal government promised a rare disease drug strategy five years ago.

This March will mark the first anniversary of the announcement of Canada's National Strategy for Drugs for Rare Diseases, with the allocation of up to \$1.5 billion over three years. However, to date, no new drug funding has become available, and not one single Canadian rare disease patient has benefited, despite a huge need for new, approved and recommended treatments for life-threatening diseases.

I have but one question, Senator Gold: When will the government implement the promised funding through Canada's national rare disease strategy to help treat and care for the 3 million Canadians who live with rare diseases?

Hon. Marc Gold (Government Representative in the Senate): Thank you for your question. It's an important one. I don't have a specific timeline for you, but I can say — and colleagues should know — that the Minister of Health has announced the creation of the Implementation Advisory Group for the National Strategy for Drugs for Rare Diseases. Over the next three years, this group will provide a forum for both patients and stakeholders to provide patient-centred advice and to exchange rare diseases-related information as well as the best practices that will inform the implementation of this national strategy.

The group includes approximately 20 members from across the rare disease community, including those with lived experience and those who provide or work to provide care for patients, such as clinicians, the pharmaceutical industry and researchers. I understand that the first meeting has taken place. The formation of this group marks the continuation of a critical dialogue between patients, their families and caregivers and stakeholders

in the development and implementation of this national strategy, with an eye to providing better outcomes for those who suffer from rare diseases.

[*Translation*]

IMMIGRATION, REFUGEES AND CITIZENSHIP

IMMIGRATION LEVELS

Hon. Clément Gignac: Senator Gold, I think we need some assurances today that your government has the immigration file under control. On January 22, Minister Miller surprised the academic world by announcing a cap on the total number of foreign students allowed into Canada by reducing the number of study permits to be issued by 35% compared to 2023.

This morning, the same minister announced that your government is reintroducing the visa requirement for Mexican travellers wishing to visit Canada, a measure that your government had eliminated in 2016. Naturally, the measure is being criticized by the Mexican president, who says he hasn't ruled out retaliatory measures against Canada.

My question, Senator Gold, is similar to the one I asked on February 13. Don't you think it's time for your government to call a non-partisan national summit on immigration, or at least hold a federal-provincial conference to get as much information as possible?

Hon. Marc Gold (Government Representative in the Senate): Thank you for the question, senator. Our government's priority has always been and will always be preserving the integrity of our immigration system while ensuring fair and compassionate treatment of people fleeing persecution.

This decision was not made lightly. It was made after careful consideration, and — it bears mentioning — consultation with the Mexican government and our provincial counterparts. The federal government will continue to work closely with its provincial counterparts and all stakeholders on immigration policy.

Senator Gignac: Senator Gold, the number of non-permanent residents almost doubled in three years, reaching nearly 2.5 million by the end of 2023. According to CIBC's chief economist, that number is probably an underestimate given departmental delays in processing work permit renewals.

While we wait for more accurate information about this sharp rise in the number of temporary workers, wouldn't it be prudent to lower permanent immigration thresholds to avoid making Canada's housing shortage even worse?

Senator Gold: The Government of Canada is addressing complex immigration issues that affect not only people who submit so-called regular applications, but also people who come to Canada to work temporarily, to study and so on. We need to strike an appropriate balance between the two, and we need to do so with consideration and in consultation with our provincial and territorial counterparts. That remains challenging, and it's the government's responsibility.

[Senator Gold]

[*English*]

HEALTH

REGULATION OF VAPING FLUIDS

Hon. Judith G. Seidman: My question is for the government leader in the Senate.

On December 14, 2023, the Government of Canada published on their website an order amending Schedules 2 and 3 of the Tobacco and Vaping Products Act.

Specifically, the amended order and regulations will establish restrictions on the use of all flavours in vaping products except for tobacco, mint and menthol, and prohibit all sugars and sweeteners as well as most flavouring ingredients, with limited exceptions to impart tobacco and mint/menthol flavours.

This is excellent news, yet we are not informed of any timelines as to when these changes will take place.

Senator Gold, it has been five years since these consultations began on a piece of legislation, Bill S-5, which we all know originated right here in our Senate. We now have all the data and the scientific evidence we need. Please tell us when the government plans to finalize these amendments.

Hon. Marc Gold (Government Representative in the Senate): Thank you very much for your question and for reminding us of the important work we did in this area and the work that still needs to be done.

Finding the tools and the right way to discourage the use, especially by young people, of these products is an important challenge but also an obligation for all governments. I'm not in a position to know exactly when this will be finalized except that the Government of Canada continues to work on it and is working on it as well in consultation with the provinces with regard to the marketing and promotion of these issues, which is part of their responsibilities as well.

• (1450)

Senator Seidman: I hope that you will follow up and find out if they know their intentions as to when this will actually take effect.

The federal government prohibited menthol additives in cigarettes in October 2017. Research shows that the Canadian menthol ban led to increases in quitting among menthol smokers.

Senator Gold, why are we not adding mint and menthol to the prohibited list of flavours in vaping products as some provinces are already doing?

Senator Gold: I'm not in a position to answer your question. I'll certainly bring these questions and concerns to the attention of the minister.

[Translation]

GLOBAL AFFAIRS

SUPPORT FOR UKRAINE

Hon. Claude Carignan: My question is for the Leader of the Government.

Obviously, I'm in favour of support and grants for Ukraine. However, one of the measures that the Prime Minister's Office announced last Friday caught my attention, and that is the government's plan to allocate \$4 million in public funds for "Gender-inclusive demining for sustainable futures in Ukraine."

I found that phrase rather confusing. I kept reading and the press release provides some clarification by indicating that a gender and diversity working group will be established to promote gender-transformative mine action in Ukraine.

Leader, I'm totally confused. Can you explain the connection between clearing anti-personnel mines and gender?

Hon. Marc Gold (Government Representative in the Senate): Thank you for the question.

The Government of Canada is a major, stable and dedicated ally for the Ukrainian government and its people. We are responding to requests to the best of our ability based on the interests of the Ukrainian government and civil society.

There is more than one way to help Ukraine. Of course, military aid is essential, but there's also work being done in areas that are important to this sovereign country, which has a very good relationship with Canada.

Senator Carignan: I understand all of that.

I see that you are using talking points because you don't like the question. What is the connection between demining and gender identity? It makes no sense. What's all this about?

Senator Gold: As I tried to explain, there's no need to make a direct link. The important thing is that we're responding to the needs of the Ukrainian people and doing so on that government's terms. It is the wise, healthy and appropriate way for two sovereign countries to proceed.

[English]

INDIGENOUS SERVICES

INDIGENOUS CHILD WELFARE

Hon. Kim Pate: Senator Gold, the government is to be commended for beginning to implement an historic Indigenous child welfare settlement providing compensation and urgent reform. Left out, however, are thousands of Inuit, Métis and off-reserve and non-status First Nations children and families.

Two weeks ago, the Supreme Court of Canada confirmed both the importance of ending this crisis of state removals as a matter of reconciliation and that the federal government has full jurisdiction to address this issue.

Yesterday, I had the privilege and responsibility of meeting with Cheyenne Stonechild, a young woman directly impacted, who is leading the advocacy and legal claims for these youth. I promised to try to obtain answers to her questions.

In addition to tabling a more detailed written question today, I ask you to assist us in obtaining these answers as expeditiously as possible. May I count on your commitment to do so, Senator Gold?

Hon. Marc Gold (Government Representative in the Senate): Thank you for your question and for raising what is an important and ongoing issue.

Indeed, the Supreme Court of Canada's decision was an historic one and it was an historic moment for Indigenous peoples in their relationship with Canada, as it is for all Canadians as we go forward together.

As colleagues know — or should know — the settlement did not affect all Indigenous children, Métis, Inuit and First Nations. That remains an issue still to be addressed. I certainly will bring this question to the attention of the minister. I will use my best efforts for that information to be fully available.

[Translation]

JUSTICE

ONLINE HARMS BILL

Hon. Julie Miville-Dechêne: Senator Gold, I want to discuss Bill C-63, the online harms bill.

While I applaud certain aspects of the bill that aim to protect children, my question relates more to the criminalization of online hate speech. I'm surprised to see that advocating genocide, as odious and reprehensible as that may be, can carry a maximum sentence of life imprisonment rather than five years. These maximum penalties are much harsher than for sexual assault and other heinous crimes.

What is the logic behind that?

Hon. Marc Gold (Government Representative in the Senate): Thank you for the question.

The government is taking a holistic approach to online harm issues, and Bill C-63 proposes a new regulator, separate from the Canadian Radio-television and Telecommunications Commission, mandated to reduce online harm.

The bill has just been tabled and will be studied in detail to address a number of issues — you mentioned some of them — and other matters, such as balancing freedom of expression and proportionality in sentencing.

All of these issues will be addressed in the House of Commons and, when the bill arrives here in the Senate, I'm fully confident that it will receive serious consideration in committee and in this chamber, and that it will measure up to Canadians' expectations.

Senator Miville-Dechêne: At first glance, I question the logic of such a severe penalty. People could get life sentences for advocating genocide. That's extremely harsh compared to the previous penalty, which was about five years.

I can understand you not giving me a substantive answer, but let's just say that this bill has already been criticized on grounds I agree with. The bill consists of two main elements—

Senator Gold: I think it would be best to wait until debate begins in the other place and the minister and his representatives answer questions in committee about their legislative intent. I think they're in a better position to do that than I am.

[English]

HEALTH

VACCINE HESITANCY

Hon. Flordeliz (Gigi) Osler: My question is for Senator Gold.

Discussions about routine childhood vaccination have taken on a new intensity. In fact, according to the Angus Reid Institute, opposition to mandatory childhood vaccination has jumped from 24% to 38% since 2019. They also found that 17% of parents said they are really against vaccinating their kids compared to only 4% in 2019.

Given that data on vaccine hesitancy in Canadian parents was last collected by the Public Health Agency of Canada in 2017, what is the government's plan to bring this research up to date and help Canadians make evidence-informed decisions about vaccine-preventable diseases?

Hon. Marc Gold (Government Representative in the Senate): Thank you for your question, senator.

First and foremost, it's the position of the government — and I trust all of us — that the high rates of vaccination in this country help to prevent the spread and outbreaks of infectious diseases in Canada, many of which would be very serious if not indeed life-threatening.

Colleagues, I'm not aware of any plans at the moment for the Public Health Agency of Canada to conduct new research at this time. I can advise that the agency monitors any new information or any new studies that emerge on this subject. It continues to work with provinces, territories and, of course, stakeholders on routine childhood immunization. It's so important.

• (1500)

Senator Osler: Thank you, Senator Gold. If you could pass along my concerns, that would be appreciated.

[Senator Gold]

Vaccine hesitancy was listed as one of the 10 threats to global health in 2019 by the World Health Organization. This poses a significant risk to the progress achieved in combatting vaccine-preventable diseases, such as measles, of which we are seeing outbreaks in the U.S. and Europe. According to the Public Health Agency of Canada, doctors and nurses were essential for parents to overcome hesitancy; therefore, primary health care providers play a key role in driving vaccine acceptance.

Considering that 6.5 million Canadians do not have a primary care provider —

The Hon. the Speaker: Senator Gold.

Senator Gold: Thank you. One of the reasons that we have low rates of certain infectious diseases in Canada is because of the high rate of vaccination that we have launched. For the past year, there has been, as you know, a campaign on routine childhood immunization, which includes marketing materials and others to encourage parents and families to continue to vaccinate their kids.

ANSWERS TO ORDER PAPER QUESTIONS TABLED

CANADIAN HERITAGE—NATIONAL SUICIDE PREVENTION HOTLINE

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate) tabled the reply to Question No. 3, dated November 23, 2021, appearing on the *Order Paper and Notice Paper* in the name of the Honourable Senator Plett, regarding the National Suicide Prevention hotline — Canadian Heritage.

MENTAL HEALTH AND ADDICTIONS—HEALTH CANADA—NATIONAL SUICIDE PREVENTION HOTLINE

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate) tabled the reply to Question No. 3, dated November 23, 2021, appearing on the *Order Paper and Notice Paper* in the name of the Honourable Senator Plett, regarding the National Suicide Prevention hotline — Health Canada.

CANADIAN HERITAGE—CANADIAN BROADCASTING CORPORATION

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate) tabled the reply to Question No. 17 dated November 23, 2021, appearing on the *Order Paper and Notice Paper* in the name of the Honourable Senator Plett, regarding the Canadian Broadcasting Corporation.

TRANSPORT—CANADIAN AIR TRANSPORT SECURITY AUTHORITY

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate) tabled the reply to Question No. 275, dated November 2, 2023, appearing on the *Order Paper and Notice Paper* in the name of the Honourable Senator Plett, regarding the Canadian Air Transport Security Authority.

CANADIAN HERITAGE—CANADIAN BROADCASTING CORPORATION

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate) tabled the reply to Question No. 276, dated November 2, 2023, appearing on the *Order Paper and Notice Paper* in the name of the Honourable Senator Plett, regarding the Canadian Broadcasting Corporation.

CANADIAN HERITAGE—CANADIAN MUSEUM OF HISTORY

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate) tabled the reply to Question No. 283, dated November 2, 2023, appearing on the *Order Paper and Notice Paper* in the name of the Honourable Senator Plett, regarding the Canadian Museum of History.

CANADIAN HERITAGE—CANADIAN MUSEUM FOR HUMAN RIGHTS

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate) tabled the reply to Question No. 284, dated November 2, 2023, appearing on the *Order Paper and Notice Paper* in the name of the Honourable Senator Plett, regarding the Canadian Museum for Human Rights.

DELAYED ANSWERS TO ORAL QUESTIONS

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate): Honourable senators, I have the honour to table the answers to the following oral questions:

Response to the oral question asked in the Senate on December 6, 2022, by the Honourable Senator Bovey, concerning the National Gallery of Canada.

Response to the oral question asked in the Senate on March 29, 2023, by the Honourable Senator Petitclerc, concerning forced adoptions.

Response to the oral question asked in the Senate on April 27, 2023, by the Honourable Senator Ataullahjan, concerning visitor visas.

Response to the oral question asked in the Senate on May 4, 2023, by the Honourable Senator Patterson (*Nunavut*), concerning marine reporting requirements.

Response to the oral question asked in the Senate on June 7, 2023, by the Honourable Senator Simons, concerning the Canadian Air Transport Security Authority

Response to the oral question asked in the Senate on December 5, 2023, by the Honourable Senator Downe, concerning Confederation Bridge tolls.

CANADIAN HERITAGE

NATIONAL GALLERY OF CANADA

(Response to question raised by the Honourable Patricia Bovey on December 6, 2022)

The predecessor of the current Minister of Canadian Heritage wrote to the Chair of the National Gallery of Canada's Board of Trustees on December 7, 2022, expressing concerns and asking for an update on the implementation of the Gallery's strategic plan, as well as on engagement with staff in response to their concerns. The Government of Canada takes the wellbeing of federal workplaces very seriously. Although the Gallery is an arm's length Crown corporation responsible for its own operational decisions, including those related to human resources, the Minister's predecessor asked the Board to outline its plans moving forward to address employee concerns.

In addition, I can confirm that the Minister's predecessor responded to the letter sent by the unions representing the Gallery's employees on November 25, 2022, as well as all correspondence received from former Gallery staff.

The current Minister remains actively engaged with the chairpersons of Canadian Heritage portfolio organizations, including the National Gallery of Canada, on the issue of workplace wellbeing to ensure that these federal workplaces are diverse, inclusive, healthy and free of all forms of harassment and discrimination.

EMPLOYMENT AND SOCIAL DEVELOPMENT

FORCED ADOPTIONS

(Response to question raised by the Honourable Chantal Petitclerc on March 29, 2023)

The Government of Canada recognizes the significant and lasting impact that forced adoption had on individuals and families across Canada and has formally acknowledged the work of the Standing Senate Committee on Social Affairs, Science and Technology on the 2018 report *The Shame Is Ours: Forced Adoptions of the Babies of Unmarried Women in Post-War Canada*.

Under Canada's Constitution, provinces and territories have responsibility for adoption and each has its own legislative scheme regulating adoption within its jurisdiction. Canada has taken significant steps to ensure these practices cannot occur again.

At the federal level, legal protections have been put in place to ensure that forced adoptions can no longer take place. As identified in the Canadian Charter of Rights and Freedoms, any forced separation of a child and parent must comply with the principles of fundamental justice. Canada is also party to the United Nations Convention on the Rights of the Child, which provides that a child shall not be separated from his or her parents against their will, except where competent authorities subject to judicial review determine that such separation is necessary for the best interests of the child.

IMMIGRATION, REFUGEES AND CITIZENSHIP

VISITOR VISAS

(Response to question raised by the Honourable Salma Ataullahjan on April 27, 2023)

Insofar as Immigration, Refugees and Citizenship Canada (IRCC) is concerned:

IRCC continues work to improve outcomes for clients, including increasing processing capacity in high growth caseload areas like Pakistan.

Between October 1, 2022, and August 31, 2023, Canada processed over 107,000 Pakistan visitor visa applications, leaving an inventory of approximately 43,000 cases and processing times of approximately 53 days as of September 12, 2023.

Processing times are calculated by the age of applications that have been finalized in the preceding weeks. Processing times have increased in the short term due to the Department finalizing a significant volume of older cases, many submitted during pandemic border closures. Individuals can consult the most recent processing times online: Check processing times — Canada.ca

Processing locally does not necessarily improve processing times. IRCC has made significant gains using its ability to share work across processing centers in Canada and abroad.

IRCC regularly leverages technology and capacity in the global processing network to distribute the workload as necessary. The processing of an application may involve more than one office, and can be shifted from one processing centre to another to make processing as efficient as possible. This is part of Canada's ongoing efforts to improve processing times to Pakistan and adding additional capacity at the IRCC office in Islamabad.

TRANSPORT

MARINE REPORTING REQUIREMENTS

(Response to question raised by the Honourable Dennis Glen Patterson on May 4, 2023)

Transport Canada

Three regulations implement vessel traffic reporting requirements on Canada's coasts. *Vessel Traffic Services Zones Regulations* and *Eastern Canada Vessel Traffic Services Zone Regulations* apply to vessels 500 gross tonnages (GT) or more, and *Northern Canada Vessel Traffic Services Zone Regulations* apply to vessels 300 GT or more.

Transport Canada and the Department of Fisheries and Oceans are in a regulatory process to transfer these three Regulations into a proposed Canadian Vessel Traffic Services Regulations with a target to reach Canada Gazette Part I in fall 2023. These proposed regulations would apply to Canadian and foreign vessels of 300 GT or more intending to enter and navigate Canadian waters. They would also apply to vessels 20 metres or more when travelling through local vessel traffic services zones. In developing the regulations, stakeholders were consulted, and discussions included consideration of lowering the threshold to 15GT. Stakeholders did not indicate interest in reducing the threshold, but there will be another opportunity to review and to provide further comments at Canada Gazette Part I publication phase.

CANADIAN AIR TRANSPORT SECURITY AUTHORITY

(Response to question raised by the Honourable Paula Simons on June 7, 2023)

Transport Canada

Transport Canada would like to confirm its agreement with the Canadian Air Transport Security Authority's position on the disclosure of security effectiveness information.

The *Aeronautics Act* prohibits the disclosure of the substance of a security measure unless required by law or where necessary to give effect to the security measure. Transport Canada's covert testing results and the Canadian Air Transport Security Authority's key performance indicator results are used to evaluate the effectiveness of applicable security measures and, therefore, contain security sensitive information which is classified up to the Secret level. Avoiding public disclosure of this information is especially important so as not to reveal any vulnerable areas that could be exploited by malicious actors.

INFRASTRUCTURE

CONFEDERATION BRIDGE AND BRIDGE TOLLS

(Response to question raised by the Honourable Percy E. Downe on December 5, 2023)

The Government of Canada understands the critical role the Confederation Bridge plays as an economic and social lifeline for the province of Prince Edward Island and the region, and the importance of ensuring it remains an affordable transportation link for the region.

The Government of Canada announced on December 21, 2023, that the 2024 tolls will remain frozen for a second year. Freezing the Confederation Bridge tolls in 2024 will support bridge users, in particular Prince Edward Island residents and businesses who have been hit hard by high inflation, especially during a period of economic recovery and rebuilding.

The situations at the Champlain Bridge and the Confederation Bridge are very different in nature. The Champlain Bridge is an intra-provincial bridge replacing an existing un-tolled asset, whereas the Confederation Bridge project is an interprovincial structure that replaced a former ferry service that charged fares. The Confederation Bridge toll structure and rates were based on the previous ferry rates.

ORDERS OF THE DAY

BUSINESS OF THE SENATE

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate): Honourable senators, pursuant to rule 4-13(3), I would like to inform the Senate that as we proceed with Government Business, the Senate will address the items in the following order: third reading of Bill C-62, followed by third reading of Bill C-57, followed by second reading of Bill S-16, followed by all remaining items in the order that they appear on the Order Paper.

CRIMINAL CODE

BILL TO AMEND—THIRD READING

On the Order:

Resuming debate on the motion of the Honourable Senator Gold, P.C., seconded by the Honourable Senator LaBoucane-Benson, for the third reading of Bill C-62, An Act to amend An Act to amend the Criminal Code (medical assistance in dying), No. 2.

Hon. Donald Neil Plett (Leader of the Opposition): Honourable senators, I rise today to speak on Bill C-62, the government's second bill to extend the sunset clause on the prohibition of assisted suicide for mental illness.

Before I get to my comments, colleagues, I would like to take a moment to recognize the work done by all members of the Special Joint Committee on Medical Assistance in Dying regarding the current bill before us, as well as all of their work since the beginning of the committee. The committee did its work the best it could in the difficult circumstances given by the government, and I want to thank all members of the House of Commons, senators, expert witnesses and the hundreds of Canadians who took the time to appear as witnesses or submitted their opinions to the committee. All were crucial to the important parliamentary work completed by the joint committee.

To begin, I want to point out to my colleagues that I will not be using the term "medical assistance in dying" or referring to it by its acronym, "MAID," during my speech. I will only use the term and acronym where it is a direct quote. The reason for this, colleagues, is that, in my opinion, referring to assisted suicide as MAID gives it the veneer of a medical procedure. We are no longer referring just to people hastening death but administering death to people who are not dying. Using an abundance of acronyms to describe assisted suicide takes away the humanity from the question. Having said that, I respect the choice of my colleagues to do so, but as a personal belief, I cannot.

Colleagues, almost a year to the day, here we are again, at the eleventh hour, having to save Canadians from the ill-conceived plan by this Liberal government to introduce assisted suicide for mental illness. Just like it did last year with Bill C-39, the government has tied our hands to pass this legislation expeditiously. How did we get here, from respecting a Supreme Court decision to a government stuck on ideology?

Since the introduction of Bill C-14 in 2016, I have actively participated in the debate of every governmental piece of legislation on assisted suicide. Whether it was during committee meetings for Bill C-14 and Bill C-7 or debates in this chamber, I have added my voice with compassion and empathy for all involved. I have respected the convictions of all senators then, as I do those of all senators today.

Life and death is a deeply personal question for all Canadians on all sides of the debate. Canadians have been debating this question for many decades and will continue to do so for many decades to come.

While suicide was decriminalized in 1972, the debate on assisted suicide continued. From 1972 to the legalization of assisted suicide in 2016, Canada has seen the Law Reform Commission of Canada recommending against legalizing or decriminalizing voluntary, active euthanasia in 1983; court cases like the Supreme Court decision in *Rodriguez v. British Columbia* in 1993; and parliamentarians submitting private members' bills on euthanasia, the first one in 1991. Our very own chamber has seen various committees studying the question as well over that time.

What has brought us here, more specifically, today is the *Carter* decision by the Supreme Court in 2015. The decision struck down the ban on assisted death to those near death and who had irremediable medical conditions. It gave Parliament 12 months to come up with new legislation. Therefore, after an extension granted to June 2016, the federal government introduced, in April 2016, Bill C-14, and this bill received Royal Assent on June 17, 2016.

• (1510)

As in 2016, today — eight years later — I remain opposed to any form of assisted suicide, but understand our country was put in this situation by a decision from the Supreme Court of Canada. I accepted that as a fact at the time, and I still do today. During the Bill C-14 debates, my objective then remains the same today: While I oppose assisted suicide in all its forms, I do want to be a voice for improved access to living with dignity, for stronger safeguards in the system and to defend the sanctity of life.

Following the adoption of Bill C-14, the nature of the debates shifted. We went from the Supreme Court imposing a deadline on Parliament to the Liberal government prioritizing medical assistance in dying, or MAID, expansionist ideology over evidence-based medicine and consideration of patient safety as a whole. While the Supreme Court of Canada offered no option other than respecting its decision — in the case of the *Truchon* ruling by the Superior Court of Quebec in 2019 — the Liberal government still had other legal options. It could have done the sensible thing to defend its own law by appealing the decision of the lower court in Quebec. Instead, the government made the ideological decision to broaden Canada's assisted suicide regime beyond the *Truchon* ruling.

As you may know, safeguards were removed with Bill C-7, and introduced Track 2 for assisted suicide to those not dying. Track 1 remains when death is reasonably foreseeable, where people can access assisted suicide the same day as the request, and patients can make themselves sick enough to bypass safeguards.

In its original form, Bill C-7 excluded mental illness. Once the bill arrived in the Senate, our colleague Senator Kutcher introduced the amendment of a sunset clause of 18 months to the prohibition of assisted suicide for mental illness.

Again, the then-Minister of Justice and Attorney General David Lametti and the Liberal government had a choice. They could have easily rejected the amendment proposed by Senator Kutcher, as it often does to Senate amendments, in order to defend its own legislation. Instead, on the advice of David Lametti, the Trudeau government made the choice to push forward the expansion of assisted suicide.

The initial amendment by Senator Kutcher proposed an 18-month sunset clause, but the government estimated it needed 24 months. The government's position went from a complete ban on assisted suicide for mental illness to 24 months based on no parliamentary review and no expert panel. It was — and remains today — an arbitrary deadline.

During the following two years, the joint parliamentary committee studied the question and heard compelling testimony while a government-appointed expert panel studied the question. The joint committee heard expert testimony confirming that there remains insufficient data to objectively guide assessing irremediability. We can't do it, and no medical evidence exists to distinguish between suicidality and an assisted suicide request, if such a distinction exists. For example, the Centre for Addiction and Mental Health concluded:

There is simply not enough evidence available in the mental health field at this time for clinicians to ascertain whether a particular individual has an irremediable mental illness.

Senator Batters spoke briefly about that when she said that she believes mental illness was never irremediable, and I would concur.

Professor Brian Mishara, Director of the Centre for Research and Intervention on Suicide, Ethical Issues and End-of-Life Practices at the Université du Québec in Montreal, stated in his opening remarks:

If it were possible to distinguish the very few people with a mental illness who are destined to suffer interminably from those whose suffering is treatable, it would be inhumane to deny MAID. But any attempt at identifying who should have access to MAID will make large numbers of mistakes, and people who would have experienced improvements in their symptoms and no longer wish to die will die by MAID.

Even the government's own Expert Panel on MAID and Mental Illness stated in its report that there is limited knowledge about the long-term prognosis for many conditions, and it is difficult, if not impossible, to predict irremediability.

I could go on from what the committee heard during the 24-month period but, colleagues, you see the picture: There was no data to support the possibility of safely justifying assisted suicide for mental disorders, and its own expert panel confirmed the near impossibility of predicting irremediability. The assisted suicide regime that the government put into place is based on a patient's condition being irremediable. Since irremediability is impossible to predict for mental disorders, surely the government should have changed its course.

But David Lametti and the Trudeau government thought otherwise. Another year was added to the sunset clause until March 17, 2024, with the adoption of Bill C-39 last year.

In October 2023, the joint committee was tasked to assess Canada's readiness to safely administer assisted suicide for people with mental disorders. And, as you all know, colleagues, based on the expert testimony heard at the committee in a race against the clock, the joint committee reported that Canada was not ready.

On irremediability, Dr. Mona Gupta, the chair of the government's expert panel, agreed that nothing has changed since the May 2022 report concluding that irremediability

remains difficult, if not impossible, to predict. Dr. Tarek Rajji, Chair of the Medical Advisory Committee at the Centre for Addiction and Mental Health, agreed by stating:

There's no scientific evidence on it. We still cannot, at this time, determine at the individual level whether the person has an irremediable illness or not.

And on suicidality, Dr. Jitender Sareen, Head of the Department of Psychiatry at the University of Manitoba and chair of the academic chairs, cautioned that assisted suicide for mental disorders could facilitate unnecessary deaths and undermine suicide prevention.

It was, therefore, clear from the joint committee that irremediability and suicidality remains unresolved. With a lack of professional consensus, the joint committee concluded that the medical system in Canada is not prepared for medical assistance in dying where a mental disorder is the sole underlying medical condition.

Unfortunately, certain psychiatrists and doctors in this very chamber — for whom I have all the respect — believe they have the answer. As I said, while I respect them, I cannot understand why they are adamant in not respecting the lack of consensus amongst their professional peers.

We are not talking about reaching unanimity; we are talking about reaching a professional consensus. At this point, it is an undisputable fact: Irremediability, which is at the core of the assisted suicide regime in Canada, cannot be accurately determined for mental disorders.

Colleagues, this will be the second time that the Liberal government is asking us at the eleventh hour to save Canada from sliding further down the slippery slope of medical assistance in dying. At first, many people opposed to assisted suicide warned of a slippery slope only to find out Canada was actually standing on the brink of a cliff. Our concerns have been dismissed since the very beginning, and more forcefully since Bill C-7. While the proponents gave us assurances of assisted suicide being limited to a small number of cases, the truth of the matter is, sadly, the complete opposite.

• (1520)

Since 2019, Canada has seen an average yearly increase of 31.1% in total assisted suicide deaths, resulting in 4.1% of all deaths registered in 2022. Since 2021, with the adoption of Bill C-7, Canada registered 222 assisted suicide whose natural death is not reasonably foreseeable, and 463 in 2022. Colleagues, at the current rate, the report for 2023 could indicate over 16,000 assisted suicide deaths, which would represent the cumulative total of 2020 and 2021 in one year. Canada has quickly become the world leader in assisted suicide, surpassing countries who have had a similar law for decades longer.

According to an analysis by the Investigative Journalism Bureau and the *Toronto Star*, in the past two years alone, more people have died under Canada's assisted death regime than in any other nation in the world. Dr. Sonu Gaiind, Chief of

Psychiatry at Sunnybrook Hospital, said we are on a trajectory that no other country on the planet has gone while not knowing what the full impact is going to be.

At this point in time, colleagues, no one knows what the full impact will be. Projections by the Trudeau government have consistently underestimated the number of assisted suicide deaths. According to projections by Health Canada in 2018, our country would reach a steady rate of 2.05% of total deaths attributed to assisted suicide. It gets worse, colleagues.

In the update on regulations for the monitoring of assisted suicides in dying submitted in May 2022 in the *Canada Gazette*, Health Canada had projected assisted suicide-related deaths to reach a steady growth of 4% by 2033.

Colleagues, we have surpassed Health Canada's own projection by a full decade by reaching 4.1% in 2022. How can we trust the Trudeau government and the Minister of Health that assisted suicide for mental disorders will only affect a small number of people? The floodgates are wide open, and instead of doubling the efforts in closing them, the government is stuck in its ideology to further open them.

Under this government, Canada has moved from having to put in place an assisted suicide regime due to a Supreme Court decision to an expansion of the regime for ideological reasons. The majority of provinces and territories requested an indefinite pause. No professional consensus can be found to accurately distinguish suicidality from an assisted suicide request, and the majority of surveys find Canadians not in favour of assisted suicide for mental disorders. The latest survey from Leger was released on February 13 and still showed a majority of Canadians against or unsure about offering assisted suicide with or for solely mental disorders.

Let me be clear, colleagues. The debates we had on Bill C-14 were the most compassionate and respectful debates on a divisive issue that I have seen during my time in the Senate. Although we had different opinions, we all came from a place of compassion, empathy and understanding. And I, too, do have compassion for people suffering just as much from a physical illness than from a mental illness. I really do, colleagues. Too often, people opposed to assisted suicide for mental disorders have been characterized as uncompassionate. That has happened here in the past week again.

My opposition to assisted suicide for mental disorders is not out of believing someone suffering from mental health is less than someone suffering from a physical ailment. It is based on a lack of evidence and the lack of safety of such an expansion, as well as a strong belief that the government should be putting more efforts into offering better quality for mental services.

The federal government should be helping psychiatrists and all mental health practitioners to improve services to help Canadians who are suffering instead of facilitating the path to suicide.

Colleagues, I, like you, have friends and relatives who would not be here today if they had been given a choice on a day of depression under some of the laws that we are proposing, and they are living productive lives.

Canadian Physicians for Life agrees, and stated the following about resource shortages in its submission to the joint committee:

With acute human, financial and material resource shortages in mental health care and services, it seems counterproductive to commit those resources to expanding MAiD to those whose sole condition is mental illness. We have seen a significant number of resources expended on the healthcare system to make MAiD available for those at end of life. More resources have been added to expand MAiD to those who are not dying. It will create cognitive dissonance in the healthcare system to expend more resources to run parallel systems of suicide prevention and suicide assistance.

In 2022, Statistics Canada reported that over 5 million Canadians aged 15 and older met the diagnostic criteria for a mood, anxiety or substance use disorder in the previous 12 months. In the same survey, it showed that more than one in three Canadians who have a mood, anxiety or substance use disorder said their health and mental health care needs were partially or fully unmet. Finally, the survey concluded:

... Increasing the supply of health care providers who focus on mental health and have specific training in this area is one of many possible solutions to improve access to mental health care in Canada. However, disparities in health insurance coverage for medications and counselling services will also need to be addressed.

Furthermore, a poll released in September 2023 by Angus Reid Institute found that a vast majority of Canadians are concerned with the mental health resources available in the country as well as the state of Canadians' mental health overall. On the following statement, "MAiD eligibility should not be expanded without Canada improving access to mental health care first," 82% feel mental health care should be improved first before MAiD eligibility is expanded. Finally, half of Canadians worry that treating mental health won't be a priority if MAiD eligibility is expanded.

Colleagues, during our Committee of the Whole, I was so disappointed when the Minister of Health kept talking about the need to train more nurses and psychiatrists in evaluating if a patient with a mental disorder could qualify for assisted suicide.

Canadians are saying the exact opposite: More training and resources are needed to help patients suffering from mental health illness to recover and live well, not to determine if they qualify for death. They'd rather see the federal government put in more efforts in improving mental health services instead of expanding assisted suicide.

The Canadian public is clear: More needs to be done to improve mental health services in Canada. Until Canadians have equal access to affordable and quality services for mental health

and physical health, until we have evidence about how or if we can medically and accurately detect who will not improve from mental illness, we cannot legislate access to dying for mental illness. While I disagree with assisted suicide in general, I cannot change that. But, just like I can't change assisted suicide in Canada, the Trudeau government cannot continue pushing the expansion of an assisted suicide regime for mental disorders on Canadians, given the lack of general consensus of professionals and Canadians.

• (1530)

For example, during its hearings, the Special Joint Committee on Medical Assistance in Dying received hundreds of submissions. Here are just a few from different associations that I would like to share.

The ARCH Disability Law Centre submitted a brief, and I'll quote two passages:

Since Bill C-7 became law, persons with disabilities have resorted to MAiD because they do not have other viable options for living with dignity in the community. Some of these stories have been reported in the media.

Their concerns go further:

ARCH is deeply concerned that expanding MAiD to cases where mental disorder is the sole condition will lead to even more cases of people with disabilities, including mental health and psychosocial disabilities, contemplating, applying for and receiving MAiD due to socio-economic suffering.

The Canadian Association for Suicide Prevention submitted the following recommendation:

Increased funding should be available for healthcare to ensure that treatments are available to patients so that lack of access to treatment does not cause the condition to be deemed irremediable. . . .

As well, the Evangelical Fellowship of Canada agreed that assisted suicide must not become an option, especially not the most accessible option, when mental health care may not be accessible or affordable, or when treatment and support are not available. The EFC states:

The EFC is opposed to MAiD, believing that it fundamentally devalues human life and normalizes suicide. We are very concerned that MAiD for mental illness will disproportionately impact marginalized Canadians. If Parliament is going to go ahead with MAiD for mental

illness, it is essential that the strongest possible safeguards are in place to protect Canadians in moments of vulnerability *before* this expansion takes place.

Colleagues, I wholeheartedly agree with that position. Bill C-7 eliminated important safeguards and, even with the existing ones, we've all heard various stories of assisted suicide being offered way too soon in the process or to unqualified patients.

For example, last August, an article in *The Globe and Mail* told the story of a Vancouver woman who went to the hospital seeking help for suicidal thoughts. The person in question lives with chronic depression and suicidality. Feeling particularly vulnerable, she went to the Vancouver General Hospital looking for psychiatric help. Instead, a clinician told her that there would be long waits to see a psychiatrist and that the health care system is broken. She was then asked, "Have you considered MAID?"

It is totally unacceptable for a patient to be asked about assisted suicide while seeking help for suicidal thoughts. Thankfully, the story indicates that the patient was waiting to see a psychiatrist last fall, and I sincerely hope and pray that she was able to receive the help she needed.

Nevertheless, colleagues, stories like these, or like the others we've heard about such as an employee at Veterans Affairs suggesting assisted suicide to multiple veterans, or the story of an Ontario woman with severe sensitivities to chemicals choosing assisted suicide after her search for adequate housing failed. Somebody approved that, colleagues. There are too many to ignore. My intent is not to generalize the whole assisted-suicide regime, but it is part of a number of stories we have heard at an alarming rate. These are only the ones we read in the paper. Not everyone would be comfortable publicly sharing a deep, personal story.

I am disappointed that the tone among us has changed since Bill C-7 was introduced. I have said so many times, and I've said it already twice today: The debates on Bill C-14 were some of the most respectful debates I have participated in while in this chamber. Senator Harder referred to some of these debates yesterday. Although Senator Joyal and I disagreed on many things, including assisted suicide, I fondly remember how my friend — and now retired colleague — walked across the chamber floor, thanking me for my speech because he knew it came from the heart. He appreciated my participation in the debate, just like I appreciated and highly respected his contributions.

Sadly, that same level of professionalism and respect has sometimes left this debate. More and more, Canadians, experts and politicians who are opposed to assisted suicide for mental illness are unjustly painted as lacking compassion, their work discredited and insulted for holding different beliefs. Instead of having a debate and a conversation on assisted suicide for mental illness, we are constantly confronted with "you're either with us or you're against us." You're either compassionate or you're not.

The proponents of assisted suicide for mental illness have taken a confrontational approach by vilifying our beliefs and discrediting our position, even though it is based on facts. Colleagues, this is not a confrontation. The issue of life and death is much too important to be treated as a confrontation, but it should be treated as a moment when we discuss and debate with the highest respect for each other's positions and beliefs.

During second reading debate on Monday, in my opinion, that line was crossed. Clearly frustrated with how things were not moving according to her preferred timetable, Senator Simons lashed out at every person in Canada whose views were different than hers. She said we are in a "culture war" and that the "pushback against" assisted suicide "is . . . akin to the war on reproductive choice and the war on gender-affirming medical care." She labelled those who view these issues differently than her as religious fundamentalists and misogynists.

Colleagues, these kinds of accusations and polarized rhetoric are not what we need in this debate. The issue itself is divisive enough without inflaming the discourse further with these extreme characterizations.

Perhaps the good senator has forgotten how much Canada has changed on social issues over the last 50 years. Perhaps she does not understand the angst of those who wrestle deeply with the moral aspects of these questions because of their deeply held religious or other moral convictions. Perhaps she is unaware that these are not mere whimsical preferences on the part of those who are troubled by the free fall we find ourselves in on matters of conscience.

These positions are deeply rooted in our values, our beliefs and our entire world view. These things are not trivial to us; they are the things that keep us up at night — not because we have any interest in telling others how to live their lives, but because we weep for what will become of future generations if we continue to deny the sanctity of life and erode the protections surrounding it.

• (1540)

I will acknowledge that those of us in Canada who continue to hold to the sanctity of life from conception to natural death are the minority in Canada. This is clear. Yet, understand, we are not asking for the power to impose these beliefs or the implications of these beliefs on every Canadian. We are simply asking for the right to be heard. We are simply insisting that our rights be respected as well — the right to hold our beliefs, the right to speak openly about them, the right to engage in debate and be heard, the right to try to influence public policy.

This is not extreme. This is how we got to where we are today. The very existence of these rights allowed Canada to shift away from the societal values that I hold dear, yet I would be the last person to suggest that this means these rights should be curtailed.

Yet, this is exactly what the tone and mischaracterizations brought by Senator Simons on Monday night might suggest — that those who disagree with her should be shamed and silenced. It seeks to suppress their voices and tell them they can have their beliefs but just not speak about them in public.

Colleagues, we need to do better. We must do better. The debate we have in front of us today is too important and deserves better than what we saw and heard on Monday evening. It is hurtful to be unjustifiably characterized in that manner.

I will simply remind colleagues that on the important question of life and death, Canadians deserve better. As much for Canadians who want access to assisted suicide for mental illness as for Canadians who express caution about expanding assisted suicide for mental illness, the debate needs to return to a place of respect, compassion and understanding. It is time to reset the tone of the debate in Parliament and in Canadian society on assisted suicide.

As Dr. Sonu Gaiind said in his brief to the joint committee:

This should not be a partisan issue — the cautions about providing MAID for mental illness are not about politics or ideology, but unfortunately in this polarized debate these cautions have been dismissed as “just being the other side”. Nothing could be further from the truth. Such claims wrongly dismiss legitimate concerns in this complex debate.

Dr. Gaiind is absolutely right. The debate on assisted suicide for mental disorders should not be limited to hearing only from those in favour but also from people who have concerns. We need to hear the stories from people who continue to live and fight for better care — stories from people like my own mother.

Ruby Plett, who is 96 years old, with crippling arthritis, has a difficult quality of life but wants to live on because she wants to continue to pray for her kids and her grandkids while enjoying their visits.

Thanks to having access to quality physical care, my mother can continue to live and see her children and grandchildren grow. She has that opportunity, and more Canadians deserve the same opportunity she has, whether they are suffering from physical or mental health problems. Sadly, the state of mental health care in Canada dictates that a patient suffering from mental illness does not have the same care and opportunities as someone suffering from physical illness.

Make no mistake, colleagues. Many times, my mother has had the desire to go home, to be with her husband, with her son who died before her. And if ever there were a list of candidates for assisted suicide, my mother would be at the top of that list. But she would be horrified if somebody suggested that to her. She would be horrified to think that anybody but God had the right to take her life, so she prays that she could go home. Then we come and visit, and she's just happy to be around again.

Although the state of care in Canada remains a challenge, we have various groups and centres across the country which go above and beyond. HavenGroup in Manitoba is an example of excellence in delivering exceptional care to its residents. It was founded nearly 80 years ago by members of various churches in the area. To this day, it continues to be operated by eight local

churches. A brand new home, Rest Haven, with 130-some residents, was built just a few years ago. My mother was the happiest person. She was the most senior person moving in, and she got to pick her room. She was the first one, before construction was even finished, so she definitely thought she was in the waiting room to heaven. She feels a little different now. She thinks she could maybe move out of that room and move on.

Nevertheless, these churches continue to operate HavenGroup and Rest Haven. They are committed to providing long-term care to residents in a Christian environment, with an emphasis on holistic approach to care regardless of age, race or religion, including people with physical illnesses, mental illnesses, dementia and Alzheimer's.

I do not have enough praise for the exceptional staff at HavenGroup and their tireless dedication to an exemplary level of physical, emotional, social, spiritual and intellectual care. Through loving and caring, the residents are reminded daily that their lives are worth living and how valuable they are.

I have mentioned only a handful of groups and organizations who deserve all the praise, and I'm sure they are not the only ones. Across the country, we have similar stories of individuals who offer premium care service for Canadians to live their lives to the fullest. Their voices and stories also need to be heard in this debate. All Canadians belong in this discussion. Plurality and diversity require it.

Unfortunately, that is not the case for all groups, however, who have these freedoms, who can conscientiously object to assisted suicide. While HavenGroup can provide care to its patients along their values and not provide assisted suicide in their buildings, they are by law mandated that if somebody asks for assisted suicide, they have to direct them to a facility that will offer them that against their beliefs.

A Delta hospice in British Columbia did not even receive that treatment. On February 25, 2020, the B.C. government decided to end the service agreement with Delta Hospice Society due to their refusal to offer assisted suicide to its patients. Despite assisted suicide being offered in a nearby building, the Delta Hospice Society lost its privately funded building, and Canadians who do not want to be offered assisted suicide lost a safe space. For Canadians who do not want anything to do with assisted suicide, there is no escaping.

According to Ramona Coelho, in an article appearing in the Macdonald-Laurier Institute's magazine, the approach to conscientious objection found in Health Canada's 2023 Model Practice Standard for Medical Assistance in Dying is troubling. As it states in section 5 of the standard, health care providers who object to providing assisted suicide, even in specific cases, are considered conscientious objectors. And what is a physician to do? Simply refer the patient so they can seek access to assisted suicide.

• (1550)

Colleagues, with effective referrals, as Dr. Coelho demonstrates in her article, instead of the assisted suicide process being stopped, patients are funnelled towards death in the current

system. Therefore, a Canadian who wants assisted suicide can effectively shop doctors. It is chilling to know that our health care system has a component to lead and ease Canadians towards death.

How far have we fallen from Bill C-14? The eyes of the world are on Canada, wondering what is happening while various experts are raising the alarm: The regime needs to be fixed, not expanded.

Colleagues, on the question of life and death, every Canadian's perspective matters and every senator's opinion in this chamber matters. It is because our hearts beat that we care so deeply about life and death. Whether you are a doctor, a lawyer, a business owner or a tradesperson like myself, we all have different views because the question of life and death is the most personal of questions. It is based on our life experiences — on our walk of life. I see the compassion and difficulty for Senator Ravalia with respect to this question, and it is clear he comes from a place of compassion because of what he has seen and experienced. I have empathy and understanding for him and all the Canadians he is representing on this issue. I know I have it from him, but I only hope others can offer the same empathy and understanding for those like me who want to do more to improve access to better options for living a life of dignity instead of further opening access to assisted suicide.

I've always said that the issue of assisted dying is a very personal and emotional one on which reasonable people can disagree. The question of life and death is the most common one that unites us all; whatever your career or background, you are born into this world with your heart beating, and you leave this world when your heart stops beating.

While I am opposed to assisted suicide and euthanasia in all forms, that is not to suggest in any way that I do not have profound sympathy for those who are suffering intolerable pain, whether that stems from physical or mental illness. I am not saying someone who suffers should be forced to live through anguish. I do not want mental health patients to have more or prolonged suffering, nor do I believe they suffer less or differently than those with physical illnesses.

My goal is for everyone who suffers to have better access to living instead of easier access to dying. In a country as wealthy as Canada, I cannot help but feel we are giving up on life just a little by continuously pursuing this avenue instead of improving access to living. The long-term effects are unknown, and in a question of life and death, unknowns could have dire consequences, and I do not wish that for our country.

My objective here today is not to change your position on assisted suicide. We will either agree or disagree on assisted suicide based on our beliefs and own life experiences, and that's okay. I respect each and every person's position and beliefs on this matter. What I hope to do is bring to your attention the other side of the debate that keeps being dismissed. Colleagues, I am just a few minutes from being done.

Based on expert testimony, your joint committee clearly stated that experts cannot agree on irremediability or suicidality and suggested that Canada is not ready.

The numbers are alarmingly high in the Canadian context, and in the world by comparison. Projections by Health Canada have underestimated the results, and the death rate by assisted suicide in Canada is the fastest in the world. These numbers clearly confirm the slippery slope of assisted suicide in Canada. It pains me that this is the case because we are talking about Canadian lives in the balance.

Most provinces requested an indefinite pause. Most importantly, Canadians do not want assisted suicide for mental illness. They'd rather see an improvement in mental health services.

In a time when mental health awareness is improving; when we are encouraging Canadians to seek help, that it is okay to speak up when times are dark and that no one needs to suffer alone; and when stigmas and barriers are being removed, let's build on that momentum. It will take time and effort to improve access to quality mental health services to the same level as physical health services. It won't be easy, but I remain confident that, with all the compassion found in this debate and with strong political and medical leadership, we can overcome the mental health care challenges in this country and improve the mental health of all Canadians. I remain steadfast in the belief that we can and must do better.

Colleagues, while various experts took part in the joint committee's study, hundreds of Canadians also took the time to share their stories with the joint committee, and out of respect for the time they have taken, I will share just a few:

Christine Aalbers from Lloydminster, Alberta, submitted this to the joint committee:

Thank you for taking the time to read my submission. For this past year, I am grateful that you have saved my family members, friends, and countless Canadians struggling with depression and other mental conditions. However, we are again at a moment where if action is not taken, death will be presented as a solution rather than support and life. Death is something that is final and offering it as a treatment option normalizes ending someone's life. I am very concerned that we are not prepared or ready for these changes to take place as MAID is set to be expanded to those where mental health is the sole underlying medical condition. The experts said we weren't ready a year ago for these changes. Nothing has changed and lives are again at stake.

Further, a group of 30 Canadians jointly submitted a brief. They are a group of people with disabilities and/or family members and friends with disabilities and mental disorders who are directly menaced by the imminent passage of assisted suicide for mental illness. They are not opposed to assisted suicide for

those who are suffering extreme pain as their lives approach a natural death, but they are opposed to it for people who are not close to dying.

Here are just a few passages from their brief:

We know that a 90-day waiting period for MAID — MDSUC is not a serious safeguard. Some of our loved ones have “pretended” to be treatment compliant for much longer periods. People with mental disorders are quite capable of forming and holding self-destructive plans for years.

The brief continues:

Canada should not implement this dangerous law *unless and until* social support systems are fully and generously operational and the social determinants of health are adequately and demonstrably addressed in every province and territory.

It continues, stating:

We are specifically talking here about *safe affordable housing* and *adequate financial support*. Not everyone with a disability or a mental disorder can work for wages. Our loved ones who cannot work in the system should not be penalized for their disabilities.

Colleagues, while I support Bill C-62, it is not to be seen as my endorsement of assisted suicide in any form. I would prefer that the idea be put aside indefinitely. But in the meantime, colleagues, I will accept this three-year delay in the hopes that the federal government will eventually listen to Canadians and experts and do the right thing. Thank you for your time, colleagues.

[Translation]

Hon. Chantal Petitclerc: Honourable colleagues, since I arrived in the Senate in 2016, I’ve supported the right to die with dignity and the importance of the right to self-determination.

[English]

In fact, my maiden speech in this chamber was in support of Bill C-14. I later had the responsibility of sponsoring Bill C-7. Colleagues, I said it then and I say it again: This conversation on medical assistance in dying is not easy and never will be.

[Translation]

We are currently studying Bill C-62. We are being asked to endorse a further three-year delay before allowing people whose sole medical condition is mental illness to be eligible for medical assistance in dying. Senator Kutcher moved to expand eligibility during our consideration of Bill C-7 through an amendment that received strong majority support.

[Senator Plett]

• (1600)

[English]

It was clear to me then — as it still is today — that the suffering of people living with mental illness is real, it is documented, it is measurable and it can become unbearable. Let’s be clear, too — whether it’s through *Carter, Canada (Attorney General) v E.F., Truchon* or *Gladue* — the courts are clear: No one can be discriminated against because of the nature of their suffering. I support this principle of social justice.

[Translation]

Under MAID, striking a balance between the right to self-determination and adequate protective safeguards for vulnerable individuals is essential. That’s why I abstained from taking a position on Senator Kutcher’s amendment in 2021. I had some reservations at the time about whether the Track 2 safeguards were robust enough to include mental illness as a sole cause of suffering, risk-free. Time has passed and progress has been made on both sides.

However, taking a stand on expanding eligibility for MAID is still a complicated undertaking. It puts us in a situation that forces us to act under circumstances that are far from ideal. For me, various aspects of the issue remain problematic.

[English]

First of all, as to the recent work of the Special Joint Committee on Medical Assistance in Dying, or AMAD, when I read this third report, I am left with more questions than answers both in terms of substance and form.

Although the committee focused — as its mandate required — on the degree of preparedness of the health care system, we quickly realize that the committee also chose to revisit access to medical assistance in dying and its already recognized principles, which was not part of its mandate. Furthermore, we cannot make abstraction of the fact that of the five senators on the committee, four felt it was necessary to express their concerns in dissenting reports. What’s more, these dissenting opinions come from some of our colleagues who have done a huge amount of specific work on this issue over the years and for whom I have enormous respect. It’s impossible for me to ignore this dissent and what it implies.

[Translation]

I would also have liked to have had more assurances about the soundness of the safeguards for Track 2. I consider these measures to be perfectly adequate when it comes to people whose death is not reasonably foreseeable, but are they adequate in the case of individuals whose suffering stems solely from mental illness?

The final report of the 2022 Expert Panel on MAID and Mental Illness seems to answer that in the affirmative, although it recognizes certain peculiarities. I asked the Minister of Health a question on this subject during the Committee of the Whole, but didn’t get a specific answer.

In my opinion, it would have been reasonable, in order to avoid any potential abuse — as I mentioned before my vote on Senator Kutcher's amendment — for the Special Joint Committee on Medical Assistance in Dying to have dug deeper into this subject, to ensure that the current Track 2 measures are adequate, or just as solid and safe for this specific group of people suffering from mental illness. This is especially important in the current context, when we know that our health care system has many flaws and weaknesses.

[English]

Which brings me, incidentally, to a challenge that I believe many of us are facing, which is that it is difficult to separate the level of readiness of assessors and providers on the one hand and health care services on the other hand, which, in my opinion, are not optimal for these specific cases.

It's true that most experts tell us that the evaluation protocols are ready, but this state of readiness can't exist just on paper. It will have to be applied in the field and on the ground all across Canada.

We know that our health care system is overwhelmed. Granted, it is the case already that an individual has safe access to MAID. But there are singularities with mental illness, and it has not been demonstrated clearly, in my opinion, if these health care system gaps will have a greater impact on safe access to MAID for individuals living with mental illness. To me, that is key.

[Translation]

You might say that those are two different things, and that's true at a conceptual level because everything is interconnected. It's one thing to have appropriate training and systems for assessors, but what happens when there are endless waiting lists and overburdened specialists, when services and treatments that aren't available everywhere for everyone? I see a disconnect between what the experts tell us and the reality on the ground, and that could create vulnerabilities.

I want to emphasize that because, according to the Criminal Code, for people whose natural death is not reasonably foreseeable, practitioners must ensure that they are informed of, and I quote:

... available and appropriate means to relieve their suffering, including counselling services, mental health and disability support services, community services, and palliative care, and must be offered consultations with professionals who provide those services.

Assessors must also have discussed reasonable and available means to relieve the person's suffering, and agree that the person has seriously considered those means.

It would be ironic if we were to respect an individual's right to medical assistance in dying but, in practice, we did not have the capacity to adequately provide them with such services. That would make conducting proper assessments a major challenge. What would be even worse would be to ask an individual to seriously consider all the possible treatments when those treatments are not available to them within a reasonable time

frame. What about health care professionals who could find themselves in very difficult situations? We need to be aware that, in every case, it is the individuals involved who would be losing out.

How can we ensure that we put into practice the right to choose one's end of life for individuals with a mental illness whose suffering is intolerable, while also ensuring that such individuals are supported in a respectful, effective and caring way?

My concern is that everyone will end up in a quandary if March 17 marks the beginning of this new phase of medical assistance in dying.

This brings me to my last point, which will be brief. During consideration of Bill C-7, I abstained from voting on Senator Kutcher's amendment as a precaution, but I was sure it would only be temporary. Today, here we are once again asking the small number of affected individuals to wait. I know that this work is complicated and that nothing should be taken lightly. However, it still baffles me. I am sad to see that, despite *Carter* and *Truchon*, Senator Kutcher's amendment, and the studies and reports, we've reached a point where the government hasn't been able to resolve the matter after three years, and now we have to add on another three years. Why three years, by the way? I'm still skeptical, despite the answers provided by the Ministers of Health and Justice to the Committee of the Whole or by Senator Gold in this chamber.

[English]

In a recent article of *The Hill Times*, Daphne Gilbert, a professor of criminal law at the University of Ottawa, provides an interesting reminder of the time limit granted to Parliament by the courts in judgment of unconstitutionality.

She writes:

When the Supreme Court declares a law to be unconstitutional, it wrestles with the length of time it should give governments to fix the impugned state of affairs. After all, any suspension in remedy means an unconstitutional violation of rights continues.

The Court typically offers 12 to 18 months. Would it offer six years to come up with protocols for one small category of MAID recipients? It is unfathomable that it would.

• (1610)

[Translation]

Three years is a long time. Let's be honest. There's nothing to say that the same arguments won't be used again in 2027. There's no guarantee that the necessary efforts will be made. It also seems reasonable to expect the shortcomings of the health care system across Canada to persist.

[*English*]

How is it that we're still here, not having found a proper solution? Have we done everything that needed to be done? Has it become political? Who hasn't taken their responsibilities? And what do we do now?

[*Translation*]

One thing is certain. While political decision makers say that they aren't ready, many people with mental disorders continue to suffer intolerably, and their rights continue to be violated.

There is a flagrant injustice in this situation, so let's be clear. No one here would be surprised to learn that the issue is still before the courts. This debate will come back to us sooner rather than later.

In conclusion, as I've already said, three years is too long. A Charter right is too precious to be suspended for so long. We could have been spared the current turmoil. Despite all these shortcomings, we have a decision to make. The stakes are so high that we can't afford to take risks. I am mindful of my responsibility to fully assume my role in protecting the vulnerable. This is what I will do by adopting the precautionary principle and voting, with little enthusiasm, for the passage of this bill. Thank you.

Some Hon. Senators: Hear, hear.

[*English*]

Hon. Brent Cotter: Honourable senators, I rise to speak to Bill C-62. I will offer a couple of contextual observations at the start of my remarks, followed by five or six lenses through which one might view the bill. This approach has helped me in my consideration of Bill C-62.

I will try my best not to make this sound like a lecture, but I do have a small weakness in that regard. Apologies at the outset.

The contextual observations are these: First, a reminder that we are amending the Criminal Code, the criminal law, through Bill C-7 and now Bill C-62. More specifically, Bill C-7, which set the foundation for this, removed the criminal law prohibition disallowing access to medical assistance in dying. Once such criminal law prohibitions are removed, the matter falls almost entirely into the category of health. Health is almost entirely a matter of provincial jurisdiction. This gives greater legitimacy to the perspectives of the provinces than might normally be the case with federal legislation.

The second contextual observation is a reminder that we need to deal with this bill now. The problem of going past March 17 was highlighted eloquently by Senator Dalphond when he spoke earlier. The issue of a potential vesting of rights that would then be clawed back would be foundationally disturbing, especially with respect to the criminal law, and we cannot go there.

I will move now to the criteria or lenses through which to consider the bill.

[Senator Petitcherc]

Personal perspectives: Here, this might include your own religious or spiritual or moral viewpoint or your concern for the suffering of people who are presently without access to MAID or your concern for those who could be made more vulnerable if MAID access is provided or your own views on the relationship of autonomy of citizens and the appropriate limits of government intervention to restrain that autonomy.

Each of us will have our own framework, but on this topic, my personal inclination is to favour the autonomy arguments, although, having said that, I am continually distressed, as I was in the consideration of Bill C-7 — and here I echo Senator Petitcherc's observations — that our governments were and are not doing enough to support vulnerable populations so as to ensure that an exercise of autonomy in seeking MAID is genuine and not forced upon people by circumstance.

Readiness: This is a more contestable issue. Others more knowledgeable than I have debated this at length, including in the chamber this afternoon. I'll offer my own conclusions, having read a fair amount of the material and followed the debate, on the two aspects of readiness.

On balance, on the question of professionals' readiness, I'm inclined to the view of the experts tasked with building the standards and training criteria, the most credible of whom, in my opinion, say we are at a state of suitable readiness. I'm sympathetic to that point of view.

With respect to health system readiness broadly, in terms of availability of adequate numbers of trained professionals, et cetera, subject to what I will say about provincial perspectives, there are legitimate concerns, as we have heard and has been noted by provinces and territories, about the lack of widespread availability of these services. But I do note, as did Senator Kutcher — and as Senator McBean presciently asked of officials at our technical briefing — that we did not ask this question of the health care system when we adopted Bill C-7 for access to MAID for so-called Track 2 candidates.

Now I'll move on to minority rights and constitutional considerations — here I'll speak at more length.

Bill C-62 deals with the rights of minorities in a constitutional context. These are very important questions, and it's deeply problematic if we as a Parliament, whether the Senate or the other place, pass legislation that is highly likely to be unconstitutional. So, the consideration and protection of rights at this level is a fundamental consideration for all of us. It certainly is for me. And it's not just an issue for lawyers. Since each of us as parliamentarians has to make a decision on this question, we all have to reflect to the best of our ability on the question of whether passing this bill or opposing it would lead us to be doing something that is unconstitutional.

I want to take you through my perspective on the dimensions of constitutionality that are at play with respect to MAID for people whose sole underlying condition is a mental disorder. I will do this by talking about the two provisions of the Charter of Rights and Freedoms that are implicated, the moderation of those rights that the government articulates and its position in relation to these rights, and I will talk in slightly more detail than Senator Gold, but from a slightly different angle.

The concerns that revolve around sections 15 and 7 of the Charter of Rights and Freedoms are fundamental law. Starting with section 15, the equality provision, the focus of this concern has primarily been equality before and under the law. The question is whether a further three-year delay in providing access to MAID for a mental disorder constitutes a violation of that equality provision because MAID is denied to a community of interests that is specifically identified in section 15 as deserving protection. I say “denied,” certainly delayed. This is people with a physical or mental disability, a category specifically outlined in section 15.

My understanding is that the government accepts that complete denial of access for such a category of people would be an unconstitutional violation of section 15. Indeed, it was the foundational basis for the acceptance in the other place of the Senate amendment to Bill C-7 in 2021.

The other provision in the Charter is section 7, which protects the right to life, liberty and security of person. Once again, the government accepted with respect to the amended Bill C-7 that a complete denial of access would constitute a violation of section 7, but you should remember the two parts. As Senator Gold noted, it’s important, in constitutional terms, to note that section 7 is violated only if the law we adopt deprives people of life, liberty or security of person in ways that do not accord with principles of fundamental justice.

Let me give you one small and largely irrelevant example, but you get the point. If you’re convicted of a serious crime and sentenced to incarceration, obviously, your liberty is denied, but it is done in accordance with principles of fundamental justice — criminal trial, proof of guilt beyond a reasonable doubt, rules of evidence — you get the idea.

The courts have developed criteria for examining what the phrase “principles of fundamental justice” means. Essentially, embedded in it is the following: Infringements cannot be arbitrary, they cannot be overbroad, and they cannot be grossly disproportionate. So the question here is whether the delay in making MAID available for mental disorders is arbitrary, overly broad or grossly disproportionate. If it is, if the law is, it’s a violation of section 7.

The next point, though, is even if there are infringements to section 15, the equality provision, or section 7, life, liberty and security of person, the government is entitled to justify infringements of constitutional rights if it can satisfy the criteria that are set out in section 1 of the Charter, which is commonly known as the “reasonable limits” clause. Limits can be placed on certain constitutional rights if they are reasonable limits prescribed by law and demonstrably justified in a free and democratic society. That’s the language of section 1.

• (1620)

As far as back as 1986 — and still adhered to — the Supreme Court of Canada identified the essential elements of these reasonable limits in language that’s a bit more understandable. The criteria are that the law-limiting rights must present a pressing and substantial objective, the law-limiting rights must be proportionate — and that means that the limitation must be

rationally connected to the objective — it must impair the rights as minimally as possible and there must be proportionality between the positive and negative features of the law.

Essentially, the government is seeking to justify the limitation on access on the basis that there is a justifiable delay in terms of readiness. It needs to achieve rational connection, as I said; it has to minimally impair rights; and there must be a reasonable balance in the choice.

I draw your attention to Senator Dalphond’s minority opinion in the joint committee, which regarded the majority’s recommendation of a delay of indefinite length as being unconstitutional. I think he was right in that assessment. It appears now to be the case that the government heard his opinion and modified the delay to three years, and that he will now support the amended or adopted version. How could he not if it was his idea?

The government has also offered up a balancing-policy-choices option; that is, there is a range of policy choices that are possible here. I think this is a weak argument, and I don’t care much for it in this policy-choices justification. I think the better argument is the issue of whether section 1 limitations have been established as justifiable limitations on the constitutional rights under consideration.

My own big concerns are, one, whether there is a less intrusive option available, as some of the opponents of Bill C-62 have suggested, and two, whether the three-year delay is a constitutionally acceptable limit. A long-term prohibition on access to MAID for mental disorders would be unconstitutional, but the long term itself is composed of a series of short terms. So does the series of short terms, adding up to six years, constitute an unjustified abridgment of constitutional rights?

My own view is that, if adopted, Bill C-62 is sure to be litigated and that there is a reasonable — but not by any means guaranteed — prospect that it could be found to be unconstitutional. For me, that level of risk of unconstitutionality would have to be higher before I would be willing to play the Senate unconstitutionality card and withhold assent.

I mentioned two other themes. One is provincial positions. As you know, at least seven provinces and three territories have written to express the view that they’re not yet ready. Senators, I believe, have a duty to be attentive to the provincial interests as part of their service in the Senate. This does not mean adherence or deference to the views of provincial governments, but it’s fair to say that the governments themselves have a special status in expressing views. The status is probably enriched when those views are related to inheriting responsibilities that fall directly within provincial jurisdiction, as is the case here.

Admittedly, some of this opposition is motivated by opposition to medical assistance in dying, generally — that is true in my own province — but that doesn’t detract from their entitlement to an expression of their concerns and the obligation on our part to give this position a meaningful degree of consideration. In my deliberations, I have tried to do that.

Finally, on our role as senators, it is a truism that when it comes to exercising legislative authority, within some limits, we have coordinate authority with the other place. It's meaningful authority.

Here's a metaphor. There's an old story about three baseball umpires talking together about balls and strikes. The junior umpire says, "When a pitch comes in and I think it's a strike, I call it a strike." The second umpire, with a bit more experience, says more definitively, "If I call it a strike, it's a strike." The third umpire, older, wiser and grumpier, says, "A pitch comes in. It ain't nothing till I call it." The same is true, at least in principle, with respect to legislation: It "ain't nothing till" the Senate calls it.

That said, none of us are elected. We exercise our authority independently within a political and constitutional reality. We have, if I might say it in this way, limited democratic legitimacy compared to the elected members of the other place. Sometimes, we might be justified in asserting that coordinate authority to the limit, and there are circumstances or criteria — for me at least — where that could be the case. Whether those circumstances arise in this case in opposition to Bill C-62 is a question for each of us to decide, I will mention, in the face of near-unanimous support in the other place and near-unanimous messages from governments that will inherit the health responsibility.

So the bottom line for me — almost identically to the conclusions of Senator Petitclerc — is that I don't like the policy choice to delay access for three years, but the constitutionality threshold is met, provincial voices are meaningful here and the overwhelming support for the bill in the other place deserves to be respected. I will vote for Bill C-62, though without enthusiasm. Thank you.

Hon. Yuen Pau Woo: Honourable senators, we're on the cusp of yet another monumental vote on medical assistance in dying. I had not intended to intervene, but I will make brief comments for the record.

What we can be certain of, regardless of how the vote goes, is that it will be challenged in the courts. We can also be certain of the fact that this same debate will come back — not even in three years but before — since there will likely be a special joint committee set up to look at the readiness question.

Insofar as there will be a court challenge, I think the consensus is that the ruling is uncertain, though I hear from some people with legal training that they feel the outcome will go in a particular direction. For my part, I think a better course of action for someone who is not trained in the law is to be agnostic about how the court will rule. I would much rather spend my time focusing on the policy option that we're debating and perhaps, with humility, offering some input to the justices when they eventually hear this case on what we as legislators are thinking as we debate the policy. Again, I am saying that we should not play a Supreme Court judge, but rather play the role that we are, in fact, supposed to play.

If and when the courts are called to rule upon the constitutionality of MAID where a mental disorder is the sole underlying medical condition, or MAID MD-SUMC, or its prohibition, one of the central questions they will be thinking

about is whether this ad hoc fix that we are looking at today, if the bill passes, is appropriate and proportionate. For many of us — and perhaps for the justices as well — the central question at that time, and even before when it comes to us for our own consideration, is whether readiness has been met.

We have heard in this chamber two definitions of readiness. One is based on the views of the assessors and the regulators. They believe readiness has been met. The other is based on what might be termed a health system view, which, on the one hand, has been expressed by a number of provinces and territories but which is also expressed more generally among the supporting infrastructure or ecosystem of people who work with disabilities and mental health, as well as people who are addicted and so on.

Three years from now — or sooner because of the joint committee that will be struck — that will be the same debate: whether readiness has been met. Again, we will be looking at a distinction between the views of assessors and regulators versus the health system in general. I am sympathetic to Senator Kutcher's complaint that no appropriate goalposts have been set as to how to define readiness, and the quandary that will put us in when we have to revisit this question. However, insofar as the Supreme Court may well — and likely will — consider this question even before the three-year period is up, I would like to offer some thoughts on how we think about the readiness question.

• (1630)

I do not believe we can properly answer the question of readiness without addressing the fundamental driver — the trigger for our medical assistance in dying, or MAID, regime — which is irremediability. Absent a much stronger consensus on irremediability in the case of mental disease where it is the sole underlying medical condition, it strikes me that the question of readiness cannot be properly answered. I'll explain why: In a world where there is deep, deep disagreement around whether or not a particular mental disease — or a particular case — is irremediable, a patient seeking MAID for that condition would presumably be able to find a set of assessors who would assess that person to be irremediable.

Now, I want to be careful. That does not mean that person would get MAID, because the guidelines, I hope, will be robust enough that crossing that one threshold will be insufficient to reach the end stage. Nevertheless, that is, to me, a very likely outcome because, by definition, assessors of MAID will have accepted the premise — the proposition — that certain mental diseases are irremediable.

Therefore, I think it's conceivable that someone who is under the care of a set of highly trained doctors who believe that there are more options and that there is remediability for this particular patient — doctors who might not agree with giving the green light, if you will, for the next step in MAID — will be overridden. This patient will be able to find support for their request from another set of assessors and physicians.

That is why, colleagues, my own hope is that at the end of three years — assuming the court doesn't short-circuit this delay period — we will, in fact, be ready in the fullest sense of the term. I hope that our medical profession and the health system as a whole can come to a clear idea of readiness, and the guardrails will be firm and agreed upon and will protect people who are vulnerable. However, I don't know if we can reach that place. And if we cannot reach that place, if we are back in this chamber debating readiness, and if the Supreme Court is looking at whether this is constitutional and is thinking about how readiness connects with irremediability, I would strongly suggest that these two concepts cannot be divorced.

I encourage all of us to think more deeply about this issue. We have up to three years to reflect on it and to see if there is a way we can ensure that patients who may yet be remediable are not given the option of going down the path of MAID where a mental disorder is the sole underlying medical condition, or MAID MD-SUMC, simply because there is a portion of medical professionals who are willing to give them that option.

Thank you very much.

Hon. Stan Kutcher: Honourable senators, I rise today to speak at third reading of Bill C-62. I would like to thank all those who have participated respectfully and thoughtfully in this debate. It is not a simple issue, and it demands critical analysis and awareness of nuances.

Let me begin by quoting Recommendation No. 3 from the February 2016 report of the Special Joint Committee on Physician-Assisted Dying:

That individuals not be excluded from eligibility for medical assistance in dying based on the fact that they have a psychiatric condition.

Yet, eight years later, here we are.

I spent my entire professional life fighting for the rights of people with mental disorders — the right for equal access to quality health care, and the right to be treated equally before the law — which is why I cannot support this bill. It discriminates against those who have a mental disorder. It characterizes a person as a diagnosis.

To those who are suffering and waiting, please know that although I do not speak for you, I have heard you. I do want my colleagues to know that you have your own voice. You have told me that many of those who say they speak for you actually do not speak for you. You've told me that some of them seem to be confusing the need for mental health services with your reality. You have accessed all the services and all the treatments for decades with no relief. You have exhausted all the treatments provided with no relief. Like someone with cancer who has exhausted all the treatments, you want to have their options.

Recently, we were told that one reason the government is delaying this is over the concern about what would happen to those who applied and were deemed ineligible. Let me say this to

the government: Where is your concern for those who must wait an additional three years or maybe — because of the flaws in this bill — forever? Do you care if they choose a lonely, desperate and traumatic end through suicide instead of a peaceful and dignified end surrounded by family and friends?

We have heard there's a lack of readiness, yet the regulators and providers whom we've heard from say the opposite. Many are ready, and, colleagues, they know if the system is ready because they are the system. We've heard no valid argument regarding the arbitrary nature of the three-year extension, and there's no information whatsoever on what criteria may be used at that time to determine readiness. So does simply saying "we're not ready" mean not ready? This blanket bill denies access to medical assistance in dying where a mental disorder is the sole underlying medical condition, or MAID MD-SUMC, in jurisdictions that are ready because some claim they're not. Equality cannot depend on other people being ready to accept it. Or as George Orwell put it, "All animals are equal, but some animals are more equal than others."

Although — in the Committee of the Whole — the ministers did not identify readiness criteria, they pointed to three issues that they seem to have considered: consensus, irremediability and suicidality. Never have they said these issues will be used to create readiness criteria, and at no time did any committee study these in depth. In no part of medicine is a physician consensus necessary to allow people to request access to care. When MAID was introduced in Canada, there was no physician consensus, yet it moved forward. Indeed, still today there is no physician consensus on MAID. So why should MAID access for persons with a mental disorder be denied because some doctors disagree? This discriminatory justification blocks equal access to health care because of a diagnosis.

Irremediability is something that all areas of medicine contend with. All aspects of irremediability applied to mental illness need to be similar to the rest of medicine — and not set at a different threshold from the rest of medicine; that's key. One argument that irremediability can never be established for mental disorders has been heard, yet neither the House nor the Senate has deeply or critically studied this issue, especially in comparison to other illnesses.

The equality issue is this: Are we looking at irremediability in mental illness the same as we are looking at irremediability in other illnesses? On the contrary. Many experienced MAID providers have told us that they can agree on irremediability. We haven't heard from them. Indeed, colleagues, in all Track 2 cases, two clinicians who independently assessed the applicant must agree on irremediability or else the application is denied. And — just to be clear — this is not a one point in time assessment; it continues for a minimum of 90 days.

• (1640)

There is also scientific literature showing that psychiatrists can agree on irremediability, as a paper published by the Dutch and Belgian expert group in the *Canadian Journal of Psychiatry* in

October 2022 demonstrates. This paper was published six months after the expert panel report. They didn't have that information. That paper is never mentioned by people who say, "irremediability."

The Alberta Court of Appeal in *Canada (Attorney General) v E.F.* has agreed that some mental disorders are irremediable, and the ministers in their appearance before us agreed that there were irremediable mental disorders.

The legal concept of irremediability translated into medical practice is the issue of prognosis, meaning the ability to predict a particular outcome for a particular patient over a particular length of time. Colleagues, my medical friends here will know that there is absolutely no such thing as 100% predictability for any outcome for a specific patient in any part of medicine. So why demand this only for persons with a mental disorder?

Contrary to some of the comments we've heard, prognostic capability in psychiatry is actually not greatly different from the rest of medicine. A recent review of the issue found that the clinical prognosis of outcomes in treatment-resistant depression was about 0.75. This is similar to a variety of outcome predictions for patients with various cancers, in palliative care or in critical care.

Some have argued that since remission can occasionally occur in some severe mental disorders, that's a reason to deny access to MAID. But, colleagues, remission can also occur spontaneously in several different cancers. We don't we deny patients with cancer access to MAID because at some point in the future they may experience a spontaneous remission. Why do we do that for people with mental disorder?

We've heard a tsunami of fear mongering about MAID and suicide, equating the two or arguing that a highly trained psychiatrist is unable to distinguish between suicidal ideation and a competent decision to choose MAID. We have been told that only in mental disorders is suicidality a concern. This is not true.

For example, suicidality is common in cancer. In some studies, over 40% of cancer patients exhibit suicidal ideation. A recent study noted that the rate of suicide in cancer patients was twice as high as in the general population, yet nobody argues that cancer patients should not access MAID. Nobody is saying the psychiatrist cannot assess suicidality in cancer patients who want to apply for MAID.

Specialty psychiatrists called consultation liaison psychiatrists are routinely called to assess if a patient with a physical illness who is refusing treatment has done so because they are suicidal. These consultation psychiatrists know how to differentiate a competent decision to forgo treatment from suicide. Indeed, colleagues, this is part of the current assessment of MAID access requests, period.

Arguing that a psychiatrist whose practice focuses on persons with severe physical illness or who has been well trained in MAID assessments is unable to differentiate suicide from a sober MAID request is akin to arguing that an abdominal surgeon is not competent to perform an appendectomy.

The courts have also studied this claim and have rejected evidence from its proponents, including many whom have been quoted in this chamber who were witnesses before the court. The *Truchon* judgment reads:

The court . . . accepts the evidence . . . that establishes that medical assistance in dying and suicide are two separate phenomena that belong in two different realities, although there may be certain points in common, such as the obvious one that they both lead to the person's voluntary death.

The argument that suicide and MAID are the same is also logically erroneous.

Actually, there are a number of errors in logic frequently promoted in this argument. I won't bore you with all of them; I will focus only on one, called the "error of false equivalency." This states that because MAID and suicide share some similarities, they are the same. But, colleagues, it's not the congruence of some similarities that makes things the same, but a combination of all similarities and all differences. For example, a hockey stick and a golf club share many similarities, but they are not the same. Senator Plett, you could hit further with a hockey stick than I could with a driver, but they're still not the same.

Indeed, physicians have long known that not all voluntary deaths are the same and that there are many different types of voluntary deaths. For example, refusal of treatment, refusal of eating and drinking and refusal of resuscitation. MAID is another example of voluntary death.

We have also known for a long time that there are different kinds of suicides. Since 1897, to be exact — yes, since 1897 — we've known this. Anyone who cares to can learn about it. Simply google "kinds of suicide."

Psychiatrists, bioethicists and others have known for over a century that there are many different kinds of suicide and many different kinds of voluntary death. Why are some of these experts confusing us by promoting the erroneous "MAID is a suicide" narrative?

Colleagues, I also have Charter-related concerns. Since this area is well beyond my pay grade, I asked experts for their opinions, and one thing I learned is that there seems to be as much lack of consensus among lawyers as there is among doctors.

They raised these questions:

Is there an overly broad application — section 7 — such that this blanket delay limits rights more than it needs to? The government could have added an exemption order, but it chose not to.

Is there a breach of section 15 of the Charter by carving out one category of people with a certain kind of illness and denying them a service available to all? The concerns expressed by the government apply to MAID for everybody, not only to persons with mental disorders.

How does the government justify a blanket-wide national exclusion? It prevents Canadians from accessing a medical intervention if they live in a jurisdiction that is ready just because another jurisdiction can simply say, without evidence, that it's not ready.

Has the extended exclusion been demonstrably justified? Has the government proven there is a proper balance between the pro and con effects of the legislation?

According to these experts, the answer to all of those questions was no.

They were also concerned that the bill breaches both sections 7 and 15, and is not saved by section 1. They stated that the government has not demonstrated that the breaches are justifiable. The heavy burden of proof has not been met. The standard for a strong evidentiary foundation has not been met.

The government has not demonstrated a causal link between the impugned measure and the objective. The three-year delay is arbitrary. The government has presented no evidence that three years is needed nor that three years will be enough.

The government must demonstrate that the limits are not minimal, and that the balance between the pros and cons of the blanket delay are proportionate.

As many of you know, to address the Charter issues, I had considered amending this bill with an exemption order clause. But after considerable input from many colleagues on procedural barriers and a clear understanding that the government wouldn't accept such an amendment, I decided not to proceed.

Colleagues, as we have heard, the arguments being made about denying access for MAID where a mental disorder is the sole underlying medical condition, or MAID MD-SUMC, are not coming from those affected. Indeed, those most affected with whom I have spoken are not in support of this bill. Additionally, they have clarified that those who want to deny access will never be satisfied and will try to remove MAID Track 2 and MAID altogether.

We have heard eloquently about restraint. I agree that we need to consider our role carefully and that restraint is part of the consideration. But it is not the only consideration. Could this be a situation in which automatic deference to the House should not be equated with restraint? There may be a time when our role is to disagree with the House. For example, in issues regarding arbitrary exclusion. Actually, I found out from my lawyer friends that arbitrary exclusion was considered in the *Vriend v. Alberta* Supreme Court decision of 1998. It bears reading:

. . . groups that have historically been the target of discrimination cannot be expected to wait patiently for the protection of their human dignity and equal rights while

governments move toward reform one step at a time. If the infringement of the rights and freedoms of these groups is permitted to persist while governments fail to pursue equality diligently, then the guarantees of the Charter will be reduced to little more than empty words.

• (1650)

Does this bill fit that concern of arbitrary exclusion? I'm just a doctor, not a lawyer. I don't know for sure, but I'm thinking about it.

Let me end with a quote from a friend who lived with and died alone and in torment from a severe mental illness, leaving their family and friends to suffer in anguish:

I am a person. I am not a diagnosis. I have the same rights and responsibilities as everyone else does.

So our task now is to consider the bill on its merits. Is the bill based on solid ground or shifting sand? Is it fair? Is it just? In my opinion, it discriminates against people —

The Hon. the Speaker: Senator Kutcher, your time for debate has expired.

Senator Kutcher: Could I have 20 seconds more?

The Hon. the Speaker: Is leave granted?

Hon. Senators: Agreed.

Senator Kutcher: Thank you, colleagues.

Is it fair or is it just? In my opinion, it's discriminatory because the three-year window is arbitrary. No valid argument has been provided to support why it should be three years instead of three months, or one year, or one year and one day. It is overbroad and denies access to Canadians who live in one jurisdiction simply because another says they're not ready. As Senator Woo has pointed out, it provides no valid or verifiable criteria for readiness, and therefore any suggestion that we're not ready cannot be refuted. As a result, it will never become available.

Therefore, I can't in all conscience go against my lifelong work to support equality for those with mental disorders in all aspects of their lives to vote for this bill. I ask you to consider carefully what you are going to do. Thank you.

Hon. Yonah Martin (Deputy Leader of the Opposition): Honourable senators, I rise once again to speak to Bill C-62, An Act to amend the Criminal Code (medical assistance in dying), No. 2, as the opposition critic in the Senate.

As I have stated several times, medical assistance in dying remains one of the most complex and deeply personal issues for individuals and families, especially when it comes to mental illness. The issue of expanding MAID, or medical assistance in

dying, eligibility to those suffering from mental illnesses is deeply personal for me as well, as I know it is for many of our colleagues.

We began with Bill C-14, then Bill C-7 with an amendment and sunset clause of 18 months to the prohibition of assisted suicide for mental illness. This began the journey for mental illness and MAID that has led to where we are today. Two additional bills have been put forward by the government, Bill C-39 and Bill C-62, to attempt to temporarily delay the issue posed by the sunset clause rather than to examine what is really needed.

As a country, we should be focusing on improving our mental health care first and foremost. It is indisputable that mental health services in Canada are insufficient and inconsistent. According to the Centre for Addiction and Mental Health, or CAMH, only half of Canadians experiencing a major depressive episode receive “potentially adequate care.” One third of Canadians aged 15 or older who report having a need for mental health care say those needs have not been met. Specialized treatment services are not accessible for 75% of children with mental disorders. Aboriginal youth are about five to six times more likely to die by suicide than non-Aboriginal youth. Suicide rates for Inuit youth are among the highest in the world, at 11 times the national average.

New data from the non-profit Angus Reid Institute supports the major concern of mental illness and mental health care in Canada; 80% of Canadians are concerned with the mental health care resources available in Canada, and 81% of Canadians are concerned with the state of Canadians’ mental health overall. The data further stated that:

This concern is more elevated among those who sought care from the country’s mental health-care system in the past year. Overall, one-in-five (19%) Canadians say they’ve looked for treatment for a mental health issue from a professional in the last 12 months. In that group, two-in-five say they’ve faced barriers to receive the treatment they wanted. . . .

MAID for mental illness as a sole underlying condition is moving forward with a policy that will offer these individuals assisted death. The focus should be in providing them with the resources, information and care they need, not MAID. How can we be certain we are providing mental health patients with a fair and honest choice and not further blurring the lines between suicide and MAID? How can we be certain feelings of suicidality associated with a mental illness are not a factor in the request for MAID?

Another common theme in debates for Bill C-39 and Bill C-62 in this chamber, and during proceedings of the special joint committee, is that it remains impossible to predict irremediability with any certainty. To be eligible for MAID under the Criminal Code, a person must have “A grievous and irremediable medical condition . . .” which is defined as “A serious and incurable illness, disease or disability . . .” that has led to “. . . an advanced state of irreversible decline . . .” and intolerable suffering.

The government established an expert panel to study MAID and mental illness as a sole underlying medical condition. However, this panel was created after the passage of the sunset clause, and the members were not asked to consider whether Canada was ready, whether it is possible to do this safely or whether there was scientific consensus to justify this expansion. The expert panel was tasked with presenting recommendations on implementation only. The work of the expert panel should not be misconstrued as expert consensus. In fact, even the panel’s final report indicated that it would be difficult, if not impossible, to predict irremediability with mental disorders.

The Model Practice Standard for MAID provides the following definitions of “incurable” and “irreversible.” Section 9.5.2 defines “incurable” as:

. . . there are no reasonable treatments remaining where reasonable is determined by the clinician and person together exploring the recognized, available, and potentially effective treatments in light of the person’s overall state of health, beliefs, values, and goals of care.

In section 9.6.4 “irreversible” means that:

. . . there are no reasonable interventions remaining where reasonable is determined by the clinician and person together exploring the recognized, available, and potentially effective interventions in light of the person’s overall state of health, beliefs, values, and goals of care.

“Irremediability” is defined in section 241.2(1) of the Criminal Code as a medical condition that is “. . . incurable . . .” and in “. . . an advanced state of irreversible decline . . .” In other words, for a person to qualify, a MAID assessor must be satisfied that their condition will not get better.

The May 2022 report of the government’s Expert Panel on MAID and Mental Illness acknowledged the difficulty in determining the irremediability of a mental disorder:

The evolution of many mental disorders, like some other chronic conditions, is difficult to predict for a given individual. There is limited knowledge about the long-term prognosis for many conditions, and it is difficult, if not impossible, for clinicians to make accurate predictions about the future for an individual patient. . . .

The special joint committee also heard that it is difficult, if not impossible, to accurately predict the long-term prognosis of a person with a mental disorder. Dr. Gaiand told the committee that the training medical practitioners receive to assess suicidality does not equip them to distinguish requests for MAID from suicidality. He said:

MAID is for irremediable medical conditions. These are ones we can predict won’t improve. Worldwide evidence shows we cannot predict irremediability in cases of mental

illness, meaning that the primary safeguard underpinning MAID is already being bypassed, with evidence showing such predictions are wrong over half the time.

Scientific evidence shows we cannot distinguish suicidality caused by mental illness from motivations leading to psychiatric MAID requests, with overlapping characteristics suggesting there may be no distinction to make.

Dr. Sareen, speaking on behalf of eight chairs of psychiatry at medical schools across Canada, said:

We strongly recommend an extended pause on expanding MAID to include mental disorders as the sole underlying medical condition in Canada

• (1700)

Dr. Sareen, responding to questions about how psychiatrists are trained to separate suicidal ideation from psychiatric MAID requests, said:

. . . there is no clear operational definition differentiating between when someone is asking for MAID and when someone is asking for suicide when they're not dying. Internationally, this is the differentiation. If somebody is dying, then it can be considered MAID. When they're not dying, it is considered suicide. It's very difficult, and there's no operational definition on it.

Dr. Rajji stated:

There is no clear way to separate suicidal ideation or a suicide plan from requests for MAID. Therefore, there needs to be some discussion to see a consensus and agreement, as professionals, on what part of an individual's history with a particular illness would constitute that separation.

It's not simple.

The Special Joint Committee on Medical Assistance in Dying stated in its final report that many psychiatrists do not support the practice of MAID MD-SUMC.

Dr. Alison Freeland, representing the Canadian Psychiatric Association, could not confirm that a consensus exists when asked whether psychiatrists share a consensus on the issue of MAID MD-SUMC. Dr. Sareen noted that the majority of surveys have shown that the majority of psychiatrists are against MAID for mental illness.

The committee also heard differing views as to whether there is an adequate number of trained practitioners, psychiatrists in particular, to safely and adequately provide MAID MD-SUMC.

Another concern that was raised at the joint committee and part of the final report is the issue of distinguishing MAID requests from suicidality. Some witnesses told the committee that there is no way to distinguish requests for MAID MD-SUMC from suicidality.

The Canadian Association for Suicide Prevention addressed these concerns relating to suicide in the context of MAID expansion to those not at the end of life:

While our core mission will always focus on preventing suicide, we believe that it is not enough for a suicide prevention organization to merely stop people from dying — it is imperative that Canadians invest in finding other ways to alleviate suffering and support people in connecting to a life worth living. MAiD, as it currently exists in Canada, is in no conflict with this approach since it is used to remedy painful deaths. However, expansion of MAiD to include those not at the end of life carries the inherent assumption that some lives are not worth living and cannot be made so. . . .

The association further stated:

Finding hope and reasons to live are a quintessential aspect of clinical care in mental disorders. Having MAiD as a treatment option is in fundamental conflict with this approach, is likely to have a negative impact on the effectiveness of some therapeutic interventions and may lead both patient and provider to prematurely abandon care.

Honourable senators, as you have heard, the final MAID report concluded that the medical system in Canada is not prepared for medical assistance in dying where mental disorder is the sole underlying medical condition. The committee recommended:

a. That MAID MD-SUMC should not be made available in Canada until the Minister of Health and the Minister of Justice are satisfied, based on recommendations from their respective departments and in consultation with their provincial and territorial counterparts and with Indigenous Peoples, that it can be safely and adequately provided; and

b. That one year prior to the date on which it is anticipated that the law will permit MAID MD-SUMC, pursuant to subparagraph (a), the House of Commons and the Senate re-establish the Special Joint Committee on Medical Assistance In Dying in order to verify the degree of preparedness attained for a safe and adequate application of MAID MD-SUMC.

Bill C-62 extends the exclusion of eligibility for receiving medical assistance in dying in circumstances where the sole underlying medical condition identified in support of the request for MAID is a mental illness until March 17, 2027.

I will support Bill C-62 because, without it, MAID for those with a mental illness as a sole underlying condition will become the law on March 17, 2024. However, I urge the government to

take a close look at the issues of irremediability and suicidality when it comes to medical assistance in dying with mental illness as the sole underlying condition. A three-year delay will not fix this.

The Canadian Human Rights Commission said:

As the Government takes a critical look at the expansion of MAiD, the Commission encourages the Government to use this opportunity to conduct a thorough examination of what has happened since the coming into force of the existing legislation. This should include collecting the evidence and testimony necessary so that there is clear understanding of who is accessing MAiD and why — in order to identify and put in place the necessary safeguards to address the human rights harms experienced by already marginalized groups.

Honourable senators, the government needs to proceed cautiously with the MAiD regime in Canada before any further expansion and needs to ensure that they also focus on and prioritize mental health.

We must do better to protect our most vulnerable.

The Hon. the Speaker: Are honourable senators ready for the question?

Hon. Senators: Question.

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

Some Hon. Senators: Agreed.

An Hon. Senator: On division.

(Motion agreed to and bill read third time and passed, on division.)

CANADA-UKRAINE FREE TRADE AGREEMENT IMPLEMENTATION BILL, 2023

THIRD READING—VOTE DEFERRED

Hon. Peter Harder moved third reading of Bill C-57, An Act to implement the 2023 Free Trade Agreement between Canada and Ukraine.

He said: Honourable senators, the hour is late, the time is urgent, the bill is ready. I invite you to vote for this bill now.

Hon. Pat Duncan: That is a difficult act to follow.

Honourable senators, I rise today to speak in support of Bill C-57 at third reading and its importance to our continued and steadfast support of Ukraine.

Following the second anniversary of Russia's illegal invasion of Ukraine, and prior to the third journey of the Ukrainian Canadian Association of Yukon to the war-ravaged country, I wish to share with you some of their efforts to help. I will be brief, colleagues.

Following the invasion in 2022, a group of concerned Yukoners came together informally to come up with how they could best help Ukrainians in need, and formally founded the Ukrainian Canadian Association of Yukon, UCAY, to formalize their efforts in 2023.

Important to note throughout this discussion, honourable senators, is that the population of the Yukon is 45,000 people.

The UCAY, through volunteer efforts and the generosity of Yukoners, has collected and delivered more than \$100,000 worth of aid of various kinds.

Specifically, the UCAY has partnered with a civilian municipal hospital in Yuzhnoukrainsk, Mykolaiv Oblast, and the charitable foundation Pokrova Chortkiv. In February 2023, Jeff Sloychuk of Whitehorse delivered 2,000 pounds of items donated by Yukoners to Ukraine, which included thermal clothes, sleeping bags, cameras, tablets and other equipment to help Ukrainian soldiers to endure the harsh winter conditions.

• (1710)

In June 2023, two more Yukoners, Lesia Hnatiw and Donna Reimchen, travelled from Poland to the partners in Ukraine — the partners I just mentioned — and with Health Partners International Canada, they delivered \$50,000 worth of antibiotics and facilitated the purchase of \$10,000 of medical equipment in Kyiv. Also, part of this mission's donations were various electronics, radios and first aid equipment. The value of the goods donated and purchased was \$73,000.

Beyond the material aid delivery, the Ukrainian Canadian Association of Yukon, or UCAY, has been key in facilitating partnerships and strong bonds between Ukrainians and Canadians. In October, they arranged for a delegation from the city of Chortkiv to Whitehorse, where Mayor Laura Cabott and Mayor Volodymyr Shmatko signed sister city proclamations.

The Chortkiv flag now flies at Whitehorse City Hall with our city flag and the flags of the Kwanlin Dün First Nation and the Ta'an Kwäch'än Council. This is such an important symbolic gesture to show citizens of Chortkiv how we all stand together against this illegal invasion.

Having welcomed 150 refugees from Ukraine to the Yukon, UCAY has provided resettlement services, including housing and work search assistance, and other general information to assist their successful integration into the Yukon.

On March 9, two Yukoners will embark on their third mission to Ukraine. A medical evacuation vehicle has been purchased in Poland and will be driven by the Yukoners to Ukraine with a load of antibiotics and other medicines, military first aid supplies, high-powered radios and thermal imaging cameras valued at some \$60,000. Once the goods are delivered, Pokrova Chortkiv will outfit the vehicle with stretchers and take it to the front line in eastern Ukraine.

Honourable senators, the story so far of the Yukon's involvement with Ukraine was shared with me at the second anniversary vigil of the occupation in Whitehorse. Yukoners and

Ukrainians in attendance also shared with me their very important message of how important Bill C-57 is to them and to the people of Ukraine.

They asked me, as the Yukon's only senator, to work hard and to support this bill. I am not only proud to share their efforts with you, but also to express my support for this bill.

It is this support and recognition of volunteers, like these Yukoners, whom the people of Ukraine need and appreciate for these services.

I would like to share with you, if I could, the words of thanks from Ukraine that were shared at the vigil: "Your visit is our only ray of hope in unrelenting darkness."

I urge us all to add to this ray of hope with support at third reading today and the passage of Bill C-57.

Thank you. *Gúnálchish. Mahsi'cho.*

Hon. Michael L. MacDonald: Honourable senators, I rise today to talk about Bill C-57, An Act to implement the 2023 Free Trade Agreement between Canada and Ukraine.

Conservatives stand unequivocally with Ukraine, firmly supporting its sovereignty and independence in the face of threats from Russia. Our unwavering commitment to Ukraine is deeply rooted in our core values of freedom and democracy. We firmly believe in standing by our allies in times of need, and Ukraine's struggle against aggression is no exception.

Also, Conservatives support free trade, recognizing the importance of fostering economic growth and prosperity for both Canada and our trading partner Ukraine.

The invasion by the Putin regime is illegal. It is not merely a localized conflict; it represents a significant threat to fundamental principles such as sovereignty, territorial integrity and international law. Beyond Ukraine's borders, Putin's aggression poses a direct challenge to the core tenets of democracy and the rule of law — not just in Ukraine, but across the Western world.

President Zelenskyy's warning resonates deeply: He states, ". . . it is dangerous not only for Ukraine but also [dangerous] for all countries of the democratic world."

Additionally, the insights shared by the Canadian ambassador highlight Russia's use of energy resources as a tool to cause trouble and instability — not just in Ukraine, but also across Europe. This deliberate approach makes the situation worse, leading to more suffering and chaos, which calls for a strong reaction from the global community. We must recognize this urgency.

Colleagues, as you know, the conflict in Ukraine actually began a decade ago with Putin's illegal invasion of Crimea. It was during the tenure of former prime minister Stephen Harper's Conservative government. At that pivotal juncture, Canada played a leading role within the G7, rallying support for sanctions and diplomatic isolation aimed at deterring Russian aggression. Prime Minister Harper's unwavering commitment to

Ukraine's territorial integrity reverberates to this day, underscoring our enduring solidarity with Ukraine in the face of ongoing Russian aggression.

Canada has maintained a strong and enduring relationship with Ukraine, providing diplomatic, economic and humanitarian support to help Ukraine build a brighter future for its people.

One of the most significant milestones in Canada's relationship with Ukraine was the signing of the Canada-Ukraine Free Trade Agreement, or CUFTA. Under the leadership of Prime Minister Harper, Canada became the first Western nation to sign a free trade agreement with Ukraine, ushering in new opportunities for trade and economic collaboration between our two countries.

This landmark agreement has solidified the economic ties between our countries, paving the way for Canadian businesses to expand into the Ukrainian market and for Ukrainian exporters to access Canadian markets.

Moreover, with regard to this agreement, its modernization builds upon the 2017 version, which introduced or updated 11 new chapters. These chapters covered a wide range of areas, including rules of origin and procedures, government procurement, competition policy, electronic commerce, labour and more. This substantial evolution from the original agreement demonstrates the commitment to deepening economic cooperation and fostering mutual growth.

Genuine free trade with Canada is pivotal for Ukraine's economic development and prosperity. By providing Ukrainian businesses with access to new markets, investment opportunities and technology transfer, Canada is actively contributing to Ukraine's economic growth and stability.

Furthermore, the Canada-Ukraine Free Trade Agreement symbolizes Canada's unwavering commitment to supporting Ukraine's sovereignty and independence in the face of this external aggression.

The trade between Canada and Ukraine is remarkable. In 2022, our bilateral trade amounted to a significant \$420 million, with \$150 million worth of goods exported from Canada and \$270 million worth imported from Ukraine. This trade deal was carefully structured to facilitate gradual expansion and benefit both parties.

While the initial focus was on physical goods like cars and seafood, the agreement has since expanded to include services, reflecting its growing comprehensiveness. And we are happy to see it grow further. The upward trend in exports to Ukraine, excluding coal, highlights the mutual benefits of free trade for both nations.

However, as we reaffirm our steadfast support for Ukraine and free trade agreements, it is essential to address a critical concern: the inclusion of carbon taxing within this trade agreement. Our attention should be on providing Ukraine with the vital support it needs to defend itself, rebuild itself and thrive, which means supplying them with the fuels they need for survival.

Colleagues, without adequate support by way of armaments from their allies, a free and democratic Ukraine will cease to exist. That is the reality of the situation.

We have consistently urged for heightened military aid to Ukraine, including the supply of lethal defensive weaponry, to enhance its capacity in repelling external threats.

President Zelenskyy has unequivocally voiced Ukraine's pressing need for armaments, underlining the critical importance of such assistance in countering Russian aggression.

They are fighting for their very survival. Many see the inclusion of language relating to carbon taxing in the agreement as being completely inappropriate under these circumstances. But the government just cannot resist an opportunity for virtue signalling. Trudeau cannot even obtain broad support for a carbon tax within his own borders. It is perplexing, counterproductive and has no place in an international free trade agreement with an ally fighting for its very existence.

Ukraine needs weapons, military hardware and financial aid. President Zelenskyy's previous addresses have underscored the urgent need for assistance in combatting Russian aggression and stabilizing the region. Now is not the time to burden Ukraine with unnecessary measures like carbon pricing, but to stand in solidarity and provide the support they urgently require.

• (1720)

While other countries are supplying F-16 fighter jets, we have delivered a comparatively very minor supply of lethal weaponry. We do, however, have a stockpile of over 80,000 decommissioned CRV7 rockets in a warehouse in Saskatchewan that are slated for disposal. In fact, the government is set to spend millions of dollars on their disposal, but now we know that Ukrainian officials have requested those rockets. Colleagues, every single serviceable CRV7 rocket should be on its way to Ukraine without any bureaucratic delay. That is the kind of action that makes a difference in war, not carbon pricing.

We also know that Russia has essentially weaponized the energy industry. Many countries — an entire region, really — is beholden to Russia to meet energy needs. And, unfortunately, sourcing energy from Russia also means indirectly financing Russia's continued actions in Ukraine.

Canada has the capacity to be a world leader in energy, including LNG, but we have a government that ideologically refuses. We're sitting on huge deposits of natural gas and coal — we have the capability, we just need the leadership.

When asked about the opportunity for Canada to supply energy to the region at the Foreign Affairs Committee yesterday, the President of the Canada-Ukraine Chamber of Commerce, Zenon Potichny, stated:

In Canada, we have missed that opportunity. Over the last couple of years, during the war, Americans have sold a lot of LNG to Ukraine and other European countries. European countries are obviously trying not to buy from Russia. . . . Many countries totally refuse to buy gas from Russia, but they have to replace it with something. LNG was one of the

huge opportunities, and the U.S. has really taken advantage of that. Unfortunately, in Canada, we were not ready. If we wait another few years, we might totally miss the opportunity

Colleagues, our ally needs energy and adequate armament. They do not need navel-gazing and virtue signalling. The entire exercise is dripping with intellectual dishonesty.

When I asked our trade officials how many of our other trade agreements contain language regarding a carbon tax, the answer was "none." When asked twice this morning at the Foreign Affairs Committee about whether it was the Government of Canada or the Government of Ukraine that initiated and insisted on the inclusion of carbon pricing in the agreement, Minister Ng refused to answer on both occasions. For it to be insisted upon now, during a time of war and vulnerability, is completely inappropriate, in my opinion — a Hail Mary pass from a government facing complete collapse.

This should have been an easy agreement to sign and pass. This agreement could have simply symbolized our economic collaboration and commitment and Canada's steadfast dedication to upholding Ukraine's sovereignty and independence in the midst of Russian aggression. It could have been — and should have been — an opportunity to promote and celebrate our partnership, full stop. Unfortunately, the Trudeau government again just couldn't help themselves.

Colleagues, it's imperative to emphasize that Conservatives are unwavering in our support for Ukraine, standing by them with full conviction. We wholeheartedly endorse free trade agreements, recognizing their pivotal role in fostering economic growth and cooperation between nations. Let us unite in solidarity with Ukraine, championing their cause and striving toward a future marked by peace, prosperity and collaboration.

The Conservative Party remains steadfastly committed to Ukraine, firmly advocating for their sovereignty and prosperity. We stand resolutely on the side of Ukraine, just as we stand for the principles of free trade. Let's get this contrived distraction out of the way and concentrate instead on getting Ukraine the military hardware and armaments it so desperately needs. Thank you, honourable senators.

The Hon. the Speaker: Senator MacDonald, would you take a question?

Senator MacDonald: Of course.

Hon. Ratna Omidvar: Senator MacDonald, I listened to your speech with great interest. It seemed to me that you were building up to supporting this free trade agreement and then, of course, you talked about intellectual dishonesty.

You say it is not the same to burden Ukraine with carbon pricing. You are aware, are you not, that Ukraine has had a carbon pricing system since 2011? How can this be a burden to them when they have been doing it way ahead of us?

An Hon. Senator: Ask her to compare the carbon prices between the two nations.

Senator MacDonald: First of all, I think you have to compare the carbon price between — excuse me?

The Hon. the Speaker: Senator MacDonald, you have the floor.

Senator MacDonald: Would you repeat the question, please?

Senator Omidvar: I'm asking you if you are aware that Ukraine has had a carbon pricing system since 2011. How can this agreement be a burden on them if they have already been doing it, in fact, far ahead of us?

Senator MacDonald: I am aware that they have a carbon arrangement, but the argument that I am making is that, at this time in their history, what they need are armaments. How they find themselves today, fighting for their existence, why would we even put this stuff on the table? There are all kinds of free trade agreements out there. We haven't addressed any other government that we have a free trade arrangement with. They do not need to deal with this sort of a discussion when they need military support, and that's what we should be concentrating on.

Senator Omidvar: On this side — because they sit close to me — they are saying this is virtue signalling, and you talked about intellectual dishonesty.

From my point of view, what your side is putting on the table as an objection to a sorely needed free trade agreement for Ukraine in the time of war is political dishonesty. Would you agree with me?

Senator MacDonald: Of course I wouldn't agree with you. That's why I'm sitting on this side of the chamber.

Hon. Denise Batters: Would Senator MacDonald take another question? I understand that today at the Foreign Affairs Committee, there was a question about what the carbon tax in Ukraine actually is. I understand that it's tiny, but we can't seem to find out what the answer is. I know that there wasn't an answer provided this morning by either the minister or the officials, but the officials were going to get back to your committee about it. Do you have an answer for that yet?

Senator MacDonald: No, Senator Batters. When the minister was asked, she could not provide an answer. She deferred to the bureaucrats who were there, and the bureaucrats could also not provide an answer. They assured us that they would get back to us in the fullness of time.

Hon. Donald Neil Plett (Leader of the Opposition): I was not going to speak to this until after a meeting earlier today. I will be brief. I want to commend Senator Harder for his riveting speech, and I know there are others who should take note of the length of that speech and maybe adjust theirs accordingly, but that is for another day, Senator Gold. Senator Gold and I will take note.

In any event, I think I need to put some facts on the record, and I do promise you that I will be brief. I want to put some facts on the record regarding the Trudeau government's commitment to Ukraine.

Let me start by quoting the *Edmonton Sun* on the government's record with respect to Ukraine: "Trudeau has, once again, overpromised and underdelivered."

On Ukraine, like on all other matters, the Liberals are quick to announce, slow to act and fail to deliver. Justin Trudeau is a big talker and a little doer when it comes to Ukraine. He's made all these announcements of hundreds of millions of dollars of different equipment, and he's never actually delivered any.

According to government data compiled by *Le Devoir*, almost 60% of the military assistance that Trudeau has pledged to Ukraine since Russia invaded on February 24, 2022 — \$1.4 billion of \$2.4 billion — has yet to arrive. This includes a \$406 million surface-to-air missile system that the Trudeau government announced with great fanfare over a year ago. It also includes 35 high-resolution drone cameras valued at \$76 million announced at the end of last summer; small arms and ammunition worth \$60 million; \$25 million of winter clothing — it's summer now and they promised winter clothing — last October; plus armoured vehicles, artillery and satellite communication systems.

• (1730)

For over two years, Ukraine has been asking Canada and our allies for more military assistance, including artillery shells and rockets.

Conservatives have been calling on the government to increase the production of key munitions, such as 155-millimetre artillery shells, and to replace all the weapons donated to Ukraine so that the Canadian Armed Forces, or CAF, can protect Canadians and be a dependable partner to our allies. The Trudeau government has failed to sign contracts to increase artillery shell production. In fact, when answering questions last fall, government officials confirmed that the Trudeau government had not increased production in Canada by a single shell. This is despite the head of the Canadian Armed Forces confirming that we only have a three-day supply of shells available for our defence and despite the continuing need for shells by our Ukrainian allies.

Earlier this month, following the Ukrainian requests, Conservative leader Pierre Poilievre called on the government to donate — and Senator MacDonald already mentioned these — 83,000 Canadian Armed Forces rockets to Ukraine. These rockets were requested by the Armed Forces of Ukraine in November 2023. They are slated, as Senator MacDonald said, for disposal by the CAF. The Trudeau government has failed to even commit to delivering these rockets that Ukraine desperately needs.

Listen to this, folks: Ukraine said, "We will come and pick them up. You don't have to deliver them." The problem is they can't ship them out of Montreal because the containers are all full of stolen cars — they can't get any of these in there. That is just

an assumption, but considering the number of stolen cars we have in Canada, in Montreal, I think it's a fairly safe one.

Let me quote Christian Leuprecht, a professor at the Royal Military College:

All these delays necessarily have enormous consequences in terms of security for the Ukrainians and make the shortage of arms and ammunition in which they currently find themselves even more difficult . . .

He continues:

It is clear that the government's words regarding Canada's lasting support on which Ukraine can count are not in line with reality, and this has an impact both on the battlefield and on Canada's image with our allies, allies who perceive us more and more as indifferent to this war and above all unreliable.

Canada made promises, without having coordinated the ministries and agencies involved in these deliveries and without knowing the production and delivery capacity of its military industry.

In a book launched a couple of weeks ago on Canada and the Ukraine war, the authors make it clear that Canada is pursuing an image campaign where the main objective is to show the maple leaf over any other consideration, including the fate of Ukraine.

When all help, including loans, is computed, Canada ranks 31 out of the 39 countries that provided direct help to Ukraine in terms of their GDP. We are at the level of Portugal. As I said, "big talker."

Let's look at the rest of the Liberal record. After President Zelenskyy asked Canada not to provide a turbine to Russia that could fuel and fund its war machine, the Liberal government sent the turbine. Justin Trudeau allowed Canada to supply detonators for mines that are being used to blow up Ukrainians.

Ukrainians have asked Canada for our liquefied natural gas, or LNG, to replace Russian fuel they were using, and the Liberals said no. Instead, the Liberals decided to put carbon tax language into the Canada-Ukraine Free Trade Agreement.

The value of frozen Russian assets is estimated to be at least \$320 billion. With no reasonable prospect for Russia paying compensation to Ukraine any time soon, and Ukraine's need for both short- and long-term financial assistance, confiscations of Russian assets become the only just and viable option, especially in view of the fact that up to \$1 trillion will be needed for Ukraine to fully recover. Justin Trudeau is doing nothing on that front. We also know that he embarrassed the Ukrainian president by having a Nazi invited to a major state visit.

Ukraine has had a carbon tax since 2011 — Senator Omidvar, we're aware of that — which it needs to one day be part of the European Union. No other trade deal until now has made mention of the carbon pricing mechanism, and the agreement currently in place with Ukraine does not include any mention of it. Why is Justin Trudeau so obsessed with this carbon tax that he wants to

include it in an agreement with an ally who is at war? Why does Justin Trudeau think that Ukraine needs a carbon tax more than ammunition?

Speaking of obsessions of the Trudeau government that have nothing to do with the needs of Ukrainians, what about the \$4 million announced for ". . . establishing a gender and diversity working group to promote gender-transformative mine action in Ukraine"? Because, of course, a country at war needs gender-transformative action, not ammunition.

And I am sure that those brave Ukrainian soldiers on the front will find comfort in Canada giving money to study ". . . gender disparity issues in the Ukrainian media." One has to wonder why Winston Churchill never thought to ask for this kind of help when London was being bombed in 1941.

For Justin Trudeau and Chrystia Freeland, Ukraine is just another opportunity for virtue signalling, for photo ops, to grandstand, to pretend to care and to make empty promises. Let me give you the news, colleagues: It is no longer working. Canadians and the rest of the world now realize this simple fact: Justin Trudeau is not a serious prime minister. He is not worth the cost.

Conservatives have supported and will continue to support Ukraine in its fight to protect its territorial integrity from the illegal invasion by Russia and Vladimir Putin. As soon as we are in power, we will deliver the munitions and weapons Ukrainians need to defend their sovereignty from Russian aggression, and we will do all of this without any reference to a carbon tax — a tax that we will axe when we form government.

Senator Gold has been pushing disinformation about this bill, pretending that it is urgent that we pass it.

The government chose to have a coming-into-force date for Bill C-57 at its discretion. Colleagues, we could pass this bill today and it would not come into force on Royal Assent. So us passing this bill today will do nothing, colleagues.

In fact, the government itself in the other place, Senator Gold, is not in a hurry to adopt the bill. On December 14, we offered to pass the bill in the House of Commons. This is what Minister Gould, the House leader, said to our colleagues in the House of Commons:

. . . it is really important that the Conservatives reflect over the holidays and perhaps consider changing their position, because it would be really nice to be able to show Ukraine that solidarity and unanimity that the House has always shown Ukraine. I am going to give them the time and space to reflect . . .

She gave them seven weeks to reflect, colleagues. I think we should have two weeks to reflect. That's reasonable. That's less than half the time that the House needed to reflect. I think we should be afforded that.

Colleagues, let's take the two weeks to reflect on this, come back here refreshed on March 19 and vote on this bill. Ukrainians will still need help at that time, and we will still be able to continue to offer help without giving any. Thank you, colleagues.

• (1740)

Hon. Scott Tannas: Honourable senators, the Canadian Senators Group typically does not grant leave to expedite process on government bills. Today, we were silent when Senator Harder asked for leave on Bill C-57, and this was not an error on our part, notwithstanding how fast Senator Harder was with his manoeuvres today. Congratulations.

Make no mistake; we still believe in respecting the legislative process, as outlined in the Senate Rules. Some may find notice periods tedious and inefficient, but our predecessors introduced these speed bumps to ensure careful, timely and appropriate reflection time.

The Rules exist to ensure that we all as senators have time and opportunity to fully review, assess and debate legislation, and we believe that circumventing the legislative process should never be taken lightly or as a routine.

I want to give a bit of background; Senator Plett referred to it. Bill C-57 was introduced in the House of Commons on October 17, 2023. It went to committee a month later, came out with some amendments and was finally concurred at report stage on December 12. Over that time, some political games broke out.

During those games in November and December, in the Senate here, we were told at various times that this bill was a priority and would be coming to us; then it was no longer a priority, and then it was a priority again. We finally received this bill on February 6.

All this being said, the Canadian Senators Group decided that third reading of Bill C-57 can and should fall into the category of an exception, but it is not because we stand on one side or another on the necessity of this bill; it's because we refuse to play any games. We will not take part in what's being done here and what has been done for months.

We're not talking about one particular party. There is a lot of blame to go around. Senator Plett mentioned grandstanding. There have been a lot of folks on the grandstand, using this bill for their own purposes. The ongoing rhetoric about this bill is no longer about its virtues and flaws. It is now being used as a political pawn in a broader game that will likely come in the fall of 2025 in the form of an election.

This bill has always been about one thing, and that is the importance of a relationship between Canada and Ukraine. While Ukraine is struggling for its very existence as a modern, democratic country, it needs support and respect from Canada. Somewhere, that message has gotten lost, and it is truly unfortunate.

Let's bring the message back. We in the Canadian Senators Group are going to call for a standing vote on this bill, and we are going to see who stands with Ukraine and who doesn't. Let's show this brave nation the respect that they deserve. Thank you.

Some Hon. Senators: Hear, hear.

The Hon. the Speaker: Are honourable senators ready for the question?

Hon. Senators: Question.

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

Some Hon. Senators: Yes.

Some Hon. Senators: No.

The Hon. the Speaker: All those in favour of the motion will please say "yea."

Some Hon. Senators: Yea.

The Hon. the Speaker: All those opposed to the motion will please say "nay."

Some Hon. Senators: Nay.

The Hon. the Speaker: I think the "yeas" have it. I see two senators rising.

And two honourable senators having risen:

The Hon. the Speaker: Any advice on the bell? Pursuant to rule 9-10, the vote is deferred to 5:30 p.m. on the next day the Senate sits, with the bells to ring at 5:15 p.m.

HAIDA NATION RECOGNITION BILL

SECOND READING—DEBATE

Hon. Margo Greenwood moved second reading of Bill S-16, An Act respecting the recognition of the Haida Nation and the Council of the Haida Nation.

She said: *Tansi*, honourable senators.

I begin by acknowledging that we are on the unceded traditional territory of the Anishinaabe Algonquin peoples. I am grateful to live and work on these lands. I am honoured to rise as the sponsor of Bill S-16, entitled "Haida Nation Recognition Act," and to speak at second reading.

Honourable senators, we are here today to discuss this bill because of the incredible perseverance of the Haida people. We are here because of their leadership and vision of governance and self-determination.

At its core, this bill, which was co-developed with the Haida Nation, will do two very important things: It will affirm the Government of Canada's recognition of the Haida Nation as the

holder of inherent rights of governance and self-determination; and, second, it will affirm the Council of the Haida Nation as the government of the Haida Nation.

Haida Gwaii is a group of over 200 beautiful islands located 100 kilometres west of the northern coast of British Columbia. These islands are the homeland of the Haida Nation. In the Haida language, Haida Gwaii means “the islands of the people.” I have been to these lands, felt their shores and heard their stories — stories of the raven creating Haida Gwaii out of the water and coaxing the Haida out of a clamshell to join him on this new and beautiful land.

These stories speak to the profound relationship that exists between the Haida people and the lands and waters that have been their territories since time immemorial. Their language, stories, laws and protocols, knowing and being reflect this oneness.

Fifty years ago, in 1974, the Council of the Haida Nation was formed as a national government with a vision to organize Haida people into one political entity. The Constitution of the Haida Nation was adopted in 2003. It describes the mandate of the Council of the Haida Nation, including relationships with other governments on matters that relate to Haida title and rights.

President of the Haida Nation, Gaagwiis Jason Alsop, said that 50 years ago, the Haida Nation:

... formed our own national government — the Council of the Haida Nation. We didn’t wait for Canada or B.C. or anyone to empower us or come along and tell us how to do things. Our people recognized our inherent right to govern our lands and waters in a good way, to steward and speak for the beings and the supernaturals, and to uphold our inherent responsibility to care for our homelands.

• (1750)

However, President Gaagwiis also stated that:

One of the barriers in reconciling our differences with B.C. and Canada has been the lack of formal recognition of the Council of the Haida Nation as the governing body of the Haida Nation and of our inherent title and rights in Haida Gwaii.

Senators, today is an important step toward eliminating that barrier. The journey for recognition and self-determination by the Haida people is one backed by years of productive intergovernmental discussions between the Haida Nation, British Columbia and Canada.

A key moment in this journey was in August 2021, when the Haida Nation, British Columbia and Canada entered into the GayGahlda, the “Changing Tide” framework for reconciliation. The framework’s overall intent is to advance collective work on the priorities set out by the Haida Nation.

This historic agreement is based on recognition of the Haida Nation’s inherent title and rights with respect to the Haida Gwaii terrestrial area, including the inherent right to self-government.

The GayGahlda “Changing Tide” framework sets out an incremental approach for negotiating legally binding reconciliation agreements. This includes guiding principles, priority topics and a long-term agenda for negotiations.

The bill before us today is the direct result of collaborative efforts under the GayGahlda “Changing Tide” framework.

It is an important part of undoing Canada’s colonial approach and policies, and a step toward reconciliation — a term that the Haida people define as “people working together to make it right.”

The proposed legislation is built from the priorities and aspirations of the Haida Nation. It is a milestone in a shared process of finding ground to build a better future, based on the recognition of Haida governance and self-determination.

More specifically, in July of 2023, the Haida Nation, British Columbia and Canada concluded the signing of the Nang K’uula Nang K’uulaas recognition agreement. This agreement is the first legally binding tripartite agreement the parties have reached under the GayGahlda “Changing Tide” framework.

A key feature of this agreement is that Canada and British Columbia recognize the Council of the Haida Nation as the governing body of the Haida. The next step is for Canada to develop federal legislation to bring the agreement into full effect. That is why we are here today.

Last year, British Columbia passed and adopted Bill 18, the provincial component of the enabling legislation. The bill before us is Canada’s legislative counterpart.

If this bill is passed by Parliament, it will solidify the legal recognition of the Haida Nation as the holder of inherent rights of governance and self-determination by both the federal and provincial governments. Further, it will recognize that the Council of the Haida Nation is authorized, in accordance with the Constitution of the Haida Nation, to exercise and make decisions regarding those rights.

This bill provides a foundation for further steps to be taken together, government-to-government, to fulfill responsibilities and create a path for a better future. It sets the stage for future reconciliation agreements between the Haida Nation and the federal and provincial governments. This bill will shape Canada’s relationship with the Haida Nation for generations to come.

Recognition of Haida governance and self-determination is long overdue, and the proposed legislation now before us deserves our full and unqualified support.

The bill also aligns with Canada's broader commitment to support Indigenous-led processes for building and reconstituting historic nations and advancing reconciliation. This bill is part of the federal government's commitment to work with Indigenous partners to restore nation-to-nation relationships, implement their inherent right to self-determination and support communities as they move toward self-government.

It is also an important part of implementing the United Nations Declaration on the Rights of Indigenous Peoples Act. The UNDA recognizes that all relations with Indigenous peoples must be based on the recognition and implementation of the inherent right to self-determination, including the right of self-government.

The GayGahlda "Changing Tide" framework also recognizes the importance of the declaration when working with federal and provincial governments. Section 3.18 states:

This Agreement, subsequent agreements, and their negotiation will meet the standards of and protect all rights of the Haida Nation as recognized in the *United Nations Declaration on the Rights of Indigenous Peoples*.

The UNDA commits the federal government to taking effective measures — including legislative ones — in consultation and cooperation with Indigenous peoples, to achieve the objectives of the UN declaration.

What we have before us, colleagues, is a legislative measure that achieves the objectives of the UN declaration and those of the Haida Nation's GayGahlda "Changing Tide" framework. This bill is important not just for the Haida Nation and British Columbians, but for all Canadians. It marks a key moment in Canadian history. Recognizing the Council of the Haida Nation as the governing body of the Haida Nation and their inherent right to governance and self-determination takes us a step closer to the country we aspire to be: a country predicated on respect, reconciliation and equity.

I look forward to your support so we can ensure that this foundational recognition takes place. Thank you for joining me in supporting this bill. *Háw'aa*. Thank you. *Hiy hiy*.

[Translation]

ROYAL ASSENT

The Hon. the Speaker informed the Senate that the following communication had been received:

RIDEAU HALL

February 29, 2024

Madam Speaker,

I have the honour to inform you that the Right Honourable Mary May Simon, Governor General of Canada, signified royal assent by written declaration to the bills listed in the Schedule to this letter on the 29th day of February, 2024, at 5:38 p.m.

Yours sincerely,

Ken MacKillop

Secretary to the Governor General

The Honourable
The Speaker of the Senate
Ottawa

Bills Assented to Thursday, February 29, 2024:

An Act to amalgamate The Roman Catholic Episcopal Corporation of Ottawa and The Roman Catholic Episcopal Corporation for the Diocese of Alexandria-Cornwall, in Ontario, Canada (*Bill S-1001*)

An Act to amend An Act to amend the Criminal Code (medical assistance in dying), No. 2 (*Bill C-62, Chapter 1, 2024*)

• (1800)

The Hon. the Speaker: Honourable senators, it is now six o'clock. Pursuant to rule 3-3(1), I am obliged to leave the chair until eight o'clock, when we will resume, unless it is your wish to not see the clock.

Honourable senators, is it agreed to not see the clock?

Hon. Senators: Agreed.

[English]

ADJOURNMENT

MOTION ADOPTED

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate): Honourable senators, with leave of the Senate and notwithstanding rule 5-5(g), I move:

That, when the Senate next adjourns after the adoption of this motion, it do stand adjourned until Tuesday, March 19, 2024, at 2 p.m.

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

Hon. Senators: Agreed.

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

Hon. Senators: Agreed.

(Motion agreed to.)

HAIDA NATION RECOGNITION BILL

SECOND READING

On the Order:

Resuming debate on the motion of the Honourable Senator Greenwood, seconded by the Honourable Senator Ravalia, for the second reading of Bill S-16, An Act respecting the recognition of the Haida Nation and the Council of the Haida Nation.

Hon. Yonah Martin (Deputy Leader of the Opposition): Honourable senators, I rise today to speak to Bill S-16, An Act respecting the recognition of the Haida Nation and the Council of the Haida Nation.

The importance of legislation recognizing the inherent right of Indigenous peoples to governance and self-determination is not just a legal or political matter; it is a moral imperative that speaks to the heart of justice, equality and the preservation of Indigenous cultures.

Legislation acknowledging and upholding the inherent right to self-determination is not a mere gesture of goodwill — it is an essential step toward rectifying historical injustices and fostering a society that values diversity, inclusivity and equality. When Indigenous communities are granted the autonomy to govern their own affairs, it not only respects their distinct identities, but also empowers them to address the unique challenges they face.

By recognizing Indigenous self-determination, we are affirming their right to shape their economic, social and political landscapes in ways that align with their traditions and values. This recognition is not a threat to the broader society; rather, it is an opportunity to enrich our collective understanding of governance by embracing alternative models that have sustained Indigenous cultures for generations.

Moreover, legislation supporting Indigenous self-determination is a crucial step toward reconciliation. It acknowledges the need to right historical wrongs, foster healing and build a future where all members of society can thrive together.

Bill S-16 purports to be just that kind of legislation, following in the steps of similar legislation passed in my home province of British Columbia, as explained clearly by Senator Greenwood.

The Haida Nation is a nation with a rich and complex history. The Haida have inhabited the Haida Gwaii archipelago — formerly known as the Queen Charlotte Islands — for thousands of years. Their history is deeply intertwined with the rich, natural environment of the islands, which provided abundant resources for sustenance and cultural practices.

The Haida developed a sophisticated social structure and were known for their complex class system, which included nobility and commoners. They were renowned for their artistic achievements, especially their distinctive and intricate totem poles, canoes and other artifacts.

The first recorded contact between the Haida and European explorers occurred in the late 18th century when British and Spanish explorers arrived in the region. This contact had profound consequences for the Haida, as foreign diseases and changes in trade disrupted their traditional way of life.

The fur trade, particularly in sea otter pelts, became a significant part of the Haida economy in the 19th century. This period brought increased contact with European and American traders, leading to both economic opportunities and cultural challenges.

In the 19th century, the establishment of European and Canadian colonies had a significant impact on the Haida Nation. Missionary activities, the imposition of European laws and land dispossession had profound effects on Haida culture and sovereignty. Like many Indigenous peoples in Canada, the Haida experienced the destructive effects of the residential school system, which aimed to assimilate Indigenous children into the European-Canadian culture. This policy led to trauma for the survivors and their families and friends — the loss of language, culture and traditional knowledge.

Yet, the Haida persevered, and, in the latter half of the 20th century, the Haida, like many other Indigenous groups in Canada, began asserting their rights to their ancestral lands and self-determination. Land claims negotiations and legal battles resulted in the recognition of Haida title and rights.

Today, the Haida Nation is actively involved in various economic, cultural and environmental initiatives. They have achieved recognition of their rights and engaged in co-management of resources, and they continue to work toward preserving and revitalizing their language and cultural practices.

Honourable senators, Bill S-16 is another stepping stone in the Haida Nation's journey to self-governance and self-determination. The Haida Nation has a long history of asserting their land rights and engaging in negotiations to address historical grievances related to land dispossession. This settlement process for the Haida involved a series of negotiations and agreements with the Canadian government.

The *Calder* case was a landmark legal decision in 1973 that acknowledged Aboriginal land title. The case was brought by Frank Calder, a Nisga'a leader, but its implications reached beyond the Nisga'a Nation and had an impact on other Indigenous groups, including the Haida.

In the 1980s and 1990s, Canada initiated a comprehensive land claims process to address Indigenous land rights and treaty negotiations. The Haida Nation, along with other Indigenous groups, became involved in this process which led to the Haida Accord being signed in 1985.

The Haida Accord laid the groundwork for negotiations between the Haida Nation and the provincial and federal governments. This accord recognized the Haidas' right to negotiate land claims and self-government. Serving as a framework for negotiations between the Haida Nation and the governments of Canada and British Columbia, the accord outlined the principles and processes that would guide discussions on land claims and other related issues.

The accord set the stage for addressing land claims and comprehensive settlement negotiations. It acknowledged the need for a fair and just resolution that recognized the rights and title of the Haida people, emphasizing the importance of consultation and cooperation between the Haida Nation and the governments on matters related to resource management, land use and cultural heritage.

The accord acknowledged the significance of Haida cultural values and traditions, emphasizing the need to incorporate these values into the negotiation and settlement processes.

While not a final settlement, the Haida Accord affirmed the commitment of all parties to the broader treaty process in Canada, recognizing the need for negotiated agreements to address historical injustices and reconcile Indigenous land rights.

The Gwaii Haanas Agreement, signed in 1993, was another significant step in the land claims process. It established the cooperative management of the southern part of Haida Gwaii, known as Gwaii Haanas, between the Haida Nation and the federal government.

• (1810)

The agreement introduced a unique cooperative management framework, emphasizing collaboration between the Haida Nation and the Government of Canada for the stewardship of Gwaii Haanas. The agreement recognized the cultural and ecological significance of Gwaii Haanas for the Haida Nation. It acknowledged the area's importance as a repository of Haida heritage, including village sites, totem poles and other cultural artifacts.

The Gwaii Haanas Agreement included provisions for the protection and conservation of the region's ecosystems. It aimed to balance ecological sustainability with the cultural values and traditional land use of the Haida people.

The agreement established a Gwaii Haanas management board, featuring equal representation from the Haida Nation and the Government of Canada. This board played a central role in decision making related to the management of Gwaii Haanas.

The agreement granted the Haida Nation control over access to and use of cultural resources within Gwaii Haanas, reinforcing the Haida's role in protecting their heritage.

Recognizing the importance of tourism to the region, the Gwaii Haanas Agreement addressed sustainable tourism practices and the need for collaboration to ensure responsible and culturally sensitive visitation.

The Gwaii Haanas Agreement reflected a commitment to coexistence and shared responsibility for the management of the region. It sought to reconcile the conservation of natural resources with the cultural and economic needs of the Haida Nation.

The Gwaii Haanas Agreement set a precedent for collaborative and innovative approaches to the management of protected areas, integrating Indigenous knowledge and practices into the

governance of significant cultural and ecological landscapes. It contributed to the ongoing reconciliation efforts between the Haida Nation and the Government of Canada.

In 1993, the Haida Nation and the governments of Canada and British Columbia signed the Haida Nation final agreement. This comprehensive land claims settlement addressed issues of land ownership, resource management and self-governance. Following the settlement, the Haida Nation has been actively involved in co-management of natural resources, cultural revitalization and initiatives to strengthen self-governance.

It's important to note that while the Haida Nation final agreement represents a significant milestone, the journey towards reconciliation and the implementation of these agreements are ongoing. The Haida Nation continues to play a crucial role in the stewardship of their lands and the preservation of their cultural heritage.

Bill S-16 affirms the Government of Canada's recognition of the Haida Nation as the holder of the inherent rights of governance and self-determination. If passed, the legislation will formally recognize the Council of the Haida Nation as the government of the Haida Nation.

The bill would affirm and implement commitments in Bill 18, Haida Nation Recognition Act, entered into by the Haida Nation, the Government of Canada and British Columbia in July 2023.

The Council of the Haida Nation was formed as a national government in 1974. The Constitution of the Haida Nation was formally adopted in 2003. It mandates the council to conduct the external affairs of the Haida Nation and to steward the lands and waters of Haida Gwaii on behalf of the Haida Nation. This ensures that the Haida relationship with Haida Gwaii continues in perpetuity.

This is important because 50 years ago, the Haida Nation formed its own national government in the Council of the Haida Nation. The Haida Nation formally adopted its constitution in 2003, mandating the council, among other duties, to:

... steward the lands and waters of the Haida Territories ...
and to perpetuate Haida culture and languages for future generations.

The Haida government has been working for half a century, and through Bill S-16, it will finally receive formal recognition from the federal government. It is both symbolic and significant. Council of the Haida Nation President Gaagwiis Jason Alsop had this to say:

The Haida Nation:

... didn't wait for Canada or B.C. or anyone to empower us or come along and tell us how to do things. Our people recognized our inherent right to govern our lands and waters in a good way, to steward and speak for the beings and the supernaturals, and to uphold our inherent responsibility to care for our homelands.

The bill itself is straightforward. As I mentioned, the bill recognizes the Council of the Haida Nation as the governing authority for the Haida people.

While the bill is short on text, it has huge implications for the Haida Gwaii people. Legislation recognizing their inherent right to governance is a bridge towards creating a more just and equitable society, where the voices of all people, regardless of their cultural background, are heard and respected. Thank you.

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

Hon. Senators: Agreed.

(Motion agreed to and bill read second time.)

REFERRED TO COMMITTEE

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

(On motion of Senator Greenwood, bill referred to the Standing Senate Committee on Indigenous Peoples.)

**THE LATE RIGHT HONOURABLE BRIAN MULRONEY,
P.C., C.C., G.O.Q.**

Hon. Leo Housakos: Honourable senators, I hate to be the bearer of bad news, but it has just come to my attention that Canada today lost one of its great statesmen, the eighteenth prime minister of Canada, somebody whom I hold deep in my heart, as all Canadians do.

I started my political career as a young Tory in 1983 at a national convention where I was enamoured by his integrity, his drive, his commitment to the public, to our country, his love for the province of Quebec, where he was born and raised, his love for our country and his love for our party.

I am proud to have served under him as a young Tory. He was always generous with his time when I was just a young teenager. His door was always open. I remember in the campaign of 1984 and 1988, I never met anyone with a more generous heart or a sharper mind.

Of course, his accomplishments were many. He was the eighteenth prime minister of Canada, elected as the leader of the Progressive Conservative Party in 1983, and served with honour and integrity as Leader of the Opposition. He has some of the greatest achievements. He will be remembered for the concept of free trade. He undertook that and he achieved that success against all odds at a time when it wasn't popular, but he knew it was right.

He fought for the GST because he thought it would help give Canada financial security, and he stood for that when it wasn't popular. I remember time and time again, the few occasions in my life that I had the privilege to frequent with him where he always said, "In public life you don't do what is popular; you do

what is right, and you let history judge you." That's what he did with free trade, the GST and with apartheid. We were lauding how he was a trendsetter and he led that fight for many years.

Deep condolences to his family: Mila, Ben, Mark, Nicolas, Caroline. Thank you.

• (1820)

Hon. Marc Gold (Government Representative in the Senate): Honourable senators, it is with a heavy heart that I rise to acknowledge the passing of a great Canadian and share with you a few moments of my thoughts.

As Senator Housakos reminded us, Brian Mulroney was one of the most consequential prime ministers in our history. You could disagree with his policies, but no one could deny the impact he had on this country and the devotion with which he pursued his life in public affairs. His promotion of constitutional revitalization, though it did not succeed, was nonetheless completely to his credit.

He started his career as a young man and worked himself through the ranks of the law profession. He and my late father worked together when Brian Mulroney was a young lawyer. He was part of his team on the Port of Montreal, facilitating — what seems like aeons ago — a very significant transformation in that place.

On a personal level, my wife and I had the privilege of travelling with Mila and Brian to the former Soviet Union during the Mikhail Gorbachev era, as part of a delegation of Canadian business leaders seeking to assist in what was hoped to be the opening of the society and markets of the Soviet Union and a more liberal and pluralistic future for its people. Once again, this was an effort inspired by the best in Canadian values, which were exemplified by Brian Mulroney.

We will have occasion upon our return, in one form or another, for others to add their voices to celebrate his life, accomplishments and contributions to this country.

On behalf of my family, who knew him personally, and all of us here, I offer my condolences to his wife, Mila, and to his children, Caroline, Ben, Nicolas and Mark, and their spouses. May his memory be a blessing. Thank you.

[Translation]

Hon. Raymonde Saint-Germain: It is with great emotion that I rise to speak since I, too, personally knew and appreciated the Right Honourable Brian Mulroney, who, being the great Quebecer that he was, always identified himself first and foremost as "the little guy from Baie-Comeau." Mr. Mulroney was an anglophone who was open to francophones, and he spent his life bridging the two communities. He was a man who knew how to ensure that the relationship between Quebec and Canada was harmonious and respectful and that it took into account all of the unique characteristics of the country and each of the provinces.

He was also a prime minister who put a great deal of emphasis on international relations and international trade. We know that he was instrumental in securing the first free trade agreement

between Canada and the United States and then in securing NAFTA. It was at that time that, as Quebec's assistant deputy minister of international relations, I had the opportunity to go on various trade missions with him, accompanying negotiating teams from Quebec and Canada.

He always understood the interests of all parties and sought to achieve the best possible outcomes and negotiations for the country as a whole, while respecting its partners. We know that, after his terms as prime minister, he became and remained a great trade agreement negotiator for the Canadian government and a great mediator on a number of issues, including apartheid, the subject of a major negotiation with South Africa.

The circumstances are sad, but they call to mind a wonderful memory of him in Quebec City with President Reagan and his wife, when he got up on stage at the Grand Théâtre and sang *When Irish Eyes Are Smiling*. He was always very proud of his roots. He was a multi-faceted and respectful man. We have lost a great prime minister, a great statesman.

I, too, extend my condolences to his family, his friends and all those who mourn his loss.

[English]

Hon. Scott Tannas: Honourable senators, I want to add a few words about the great Brian Mulroney. I am struck, as I think about him in light of this news, by his vision on free trade and the vision that he had to try to heal the country with the Meech Lake Accord. Even in failure, he worked to heal the country.

With respect to South Africa, the partnership he and Joe Clark had and the work they did shook the world.

His sense of humour — the guy had an amazing way of timing stories and jokes that would bring down the house. There were so many situations that I saw him in — and others here would have as well — and he was a wonderfully funny, humorous man.

He was a family man. I remember in the early days, when I was a young man, he would talk about his mother. He was a dutiful son, and many times his stories would involve how his mother would cut him down to size, even while he was the Prime Minister.

He was a wonderful husband and a father to the four wonderful children that we've watched grow up. He was a grandfather. He was an amazing storyteller, with that voice that could go down nice and low and then come up — and it brought you along with him.

Taryn and I were lucky enough to spend some time and talk with him on a few occasions. It was nothing but a thrill to spend time with him and Mila and to have known an icon and great Canadian. He will be sorely missed.

[Translation]

Hon. Pierre J. Dalfond: I, too, I am saddened to learn of the passing of the Right Honourable Brian Mulroney earlier today.

I rarely encountered Brian Mulroney, except on a few occasions at the Ritz, where there was a popular bar. He was an affable man with an easy smile.

We are not of the same generation of lawyers; by the time I started out as a young lawyer, his reputation was already established. He earned that reputation in labour law, where, as Judge Gold pointed out, he demonstrated the qualities that served him well his whole life: the ability to listen, to mediate and to find a way forward. Thanks to those qualities, he was known across Quebec as a top mediator in the field of labour law and especially at Ogilvy Renault, where he excelled at handling the most difficult collective agreements. Those qualities and his outstanding managerial abilities even earned him the top job at Iron Ore.

The funny thing is that he never lost these qualities. He made them part of his political life. He was always someone ready to listen and find a way forward. As a Quebecer, I want to honour him for the considerable effort he invested in the Meech Lake Accord, which may have been a missed opportunity for us as a country, but something that he invested in heavily and that should have succeeded. Fortunately, some parts of it are being implemented through Supreme Court rulings. I see this as an enduring legacy, and one contribution he made that I will never forget.

I should also add that Quebec supported him when he participated in negotiating the free trade agreement with the United States, and I voted for him myself. I voted for this gentleman on more than one occasion, because I thought he deserved the support of Quebecers for his efforts to ensure that Quebecers felt at home in this country and to combat certain ideas that sometimes went too far when it came to the relationship between French Canadians and English Canadians.

• (1830)

It would be impossible for me to talk about this man without recognizing all the efforts he made to fight apartheid, especially when we look at the series on Nelson Mandela, and to challenge Margaret Thatcher, who opposed his ideas. At certain conferences, he led Commonwealth countries to take a firm stand and declare a boycott that later proved successful. It is too early for me to say any more. This news has caught me off guard. Mr. Mulroney deserves a tribute worthy of his actions, and I hope the country will give it to him.

For me, tonight is a very sad moment. I'm going to repeat a passage that stood out for me from the speech that our colleague Senator Saint-Germain gave earlier.

[English]

Tonight, Irish eyes are not smiling anymore.

[Translation]

May he rest in peace.

[English]

Hon. Michael L. MacDonald: I first met Brian Mulroney in 1976. I was a 21-year-old student at Dalhousie University, attending the local Progressive Conservative convention at the Lord Nelson in Halifax. He was running for the leadership of the party, and I had a vote, and I listened to this intelligent, unbelievably charming man. I remember him looking around the crowd, seeing everybody, and he uttered those famous words, "I see a lot of senators in this crowd."

I watched him run. I supported him at the 1976 and 1983 conventions. I worked for his government from 1984 to 1988. I ran for him in 1988. He was a politician without comparison, particularly for the Conservative Party. From the first time I heard him speak, I said that this is the guy we're going to go with: He's going to be the prime minister of this country. He sure didn't disappoint.

It's a particularly sad day for me and for all in this country — certainly for all Conservatives in the country and his family. This is not news we were expecting to hear today, but I guess it's part of life. We're all getting older. I just want to say that I was proud to support him and proud of his record. He gave this country good governance. He has a great legacy. I look forward to hearing what everybody has to say and reflect upon in the next few weeks as we say goodbye to this great prime minister.

Thank you.

Hon. Donald Neil Plett (Leader of the Opposition): I will reserve my comments. Senator Housakos and Senator MacDonald did a very adequate job. Thank you for giving me the opportunity. I did want to come down for the moment of silence, and I will have further comments later. Thank you.

[Translation]

SILENT TRIBUTE

The Hon. the Speaker: Honourable senators, I would ask you to rise and join me in observing one minute of silence in memory of the late Right Honourable Brian Mulroney.

(Honourable senators then stood in silent tribute.)

[English]

BUSINESS OF THE SENATE

Hon. Patti LaBoucane-Benson (Legislative Deputy to the Government Representative in the Senate): Honourable senators, with leave of the Senate and notwithstanding rule 5-13(2), I move:

That the Senate do now adjourn.

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

Hon. Senators: Agreed.

(At 6:36 p.m., the Senate was continued until Tuesday, March 19, 2024, at 2 p.m.)

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