



HOUSE OF COMMONS  
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CANADA

# House of Commons Debates

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OFFICIAL REPORT  
(HANSARD)

**Monday, November 18, 2013**

—

**Speaker: The Honourable Andrew Scheer**

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# HOUSE OF COMMONS

Monday, November 18, 2013

The House met at 11 a.m.

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*Prayers*

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## ROUTINE PROCEEDINGS

• (1105)

[*English*]

### VACANCY

MACLEOD

**The Speaker:** It is my duty to inform the House that a vacancy has occurred in the representation, namely Mr. Menzies, member for the electoral district of Macleod, by resignation effective Saturday, November 9.

[*Translation*]

Pursuant to paragraph 25(1)(b) of the Parliament of Canada Act, I have addressed my warrant to the Chief Electoral Officer for the issue of a writ for the election of a member to fill this vacancy.

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## PRIVATE MEMBERS' BUSINESS

[*Translation*]

### INDIAN ACT AMENDMENT AND REPLACEMENT ACT

The House resumed from October 25 consideration of Bill C-428, An Act to amend the Indian Act (publication of by-laws) and to provide for its replacement, as reported (with amendments) from the committee, and of the motions in Group No. 1.

**Mr. Jonathan Genest-Jourdain (Manicouagan, NDP):** Mr. Speaker, I will begin my speech on the bill to amend the Indian Act by addressing some central themes in the presentations that have allowed me to reach thousands of aboriginal people in the country over the last two years.

At the risk of repeating myself, during the first two years of my term in office, I made it a personal mission to reach as many people as possible in remote communities across the country. That is why I travelled to Saskatchewan, among other places, over the summer.

I abide by the principles of realpolitik and direct democracy—in other words, I will meet with the people, not just a few band council officials, but the general population at large. The same concept also

applies to the aboriginal people I have met with over the past few years.

I will now go back to Bill C-428, specifically the study of the amendment and ultimately the measures intended to dump the Indian Act. It should be noted from the outset that this is a private member's bill. Ensuring inclusive measures and seeking the consent of Canadians were not necessarily considerations in the development and drafting of this bill.

This is the kind of information that came up again when, for several months—and I must emphasize this point—we examined this private member's bill in committee. For several months, almost all of the stakeholders and various witnesses who appeared before the committee talked about the lack of consultative and inclusive measures that should take precedence when a member puts forward legislation that significantly changes the relationship between the Canadian government and aboriginal peoples.

However, we already know that the Conservatives are always rather reluctant to propose any inclusive measures and that the concept of consultation tends to be avoided or reduced to a bare minimum. We have already seen this during the current mandate of this majority government. The concept of consultation is diminished, and the government seeks public approval as little as possible.

I have noticed that in the current mandate, when it comes to aboriginal matters, the government will often just consult the nine elected officials, or the elected representatives of a community. Looking at my own experience and my own reality, in the case of Uashat-Maliotenam, there are 3,000 people and nine elected representatives. Inevitably, if the government wants people's approval and if it really wants to introduce measures that are culturally relevant, it should be consulting the entire population.

Of course this will involve some costs and staff will have to be hired to poll and meet with the population. However, this is crucial and will help prevent a public outcry later on, like the one that is building right now and has been reported in the media. We already know that aboriginal communities tend to be rather assertive, that measures have been proposed and that there is an outcry. Real inclusion could mitigate, or at least limit, this public revolt.

Based on that observation, it is important to emphasize that the government's failure to seek the approval of the people involved before proposing these measures is reason enough for the lack of support expressed by a wide variety of Canada's political players.

*Private Members' Business*

I mentioned that there is a wide variety of players. We spent at least two months in committee studying this particular private member's bill. A number of stakeholders were called to testify. They spoke about the lack of inclusive measures and the basic lack of support for this reform and for revisiting the Indian Act.

I want to stress that this study took several months. I would ask my colleagues to question the motives an individual MP would have for introducing a bill that amends the Indian Act and, in particular, the government's need and willingness to spend hours looking at a private member's bill, given the significant cost to do so in committee.

Were my colleagues given the same preferential treatment when they introduced private members' bills? I am simply asking the question. In this instance, logic and reasoning would suggest that the Conservatives are trying to use a private member's bill for electioneering and publicity purposes, nothing more. They claim to be focusing on the issue and the Indian Act, citing the fact that their colleague introduced a private member's bill to amend the Indian Act. I would ask Canadians, those listening this morning and my colleagues to pay attention: when the member sponsoring the bill speaks, chances are that he will stick to his notes and will not seem overly comfortable with the subject matter. We should be concerned.

Various stakeholders, including a number of top-notch legal experts and members of the bar across Canada, appeared before the committee and raised this problem, which will very likely arise with regard to the shift in provincial regulations governing succession and gifts, for example. The proposed bill will make significant changes to the Indian Act, thereby causing a shift in the provincial regulations governing succession, that is to say, wills and gifts.

I cannot speak for the rest of Canada, but this is going to cause a major problem for Quebec. It is going to be a real problem because it will cause a shift in the provincial regulations governing succession—regulations that fall under the Civil Code of Quebec. It will also cause problems in matters pertaining to succession and gifts on Indian reserves, which until now have been governed by the Indian Act.

In short, the testimony that was given in committee showed that this bill was ill-advised in fact and in law and that there was a very good chance that a significant amount of money would be spent defending the objectives of this bill in court.

It is understandable for a private member's bill to be flawed and problematic in terms of its adaptation, practical application and implementation. However, in this case, given the effort the government is making and the support it is giving this bill, I would say that it would have been extremely advantageous to spend more time talking to experienced legal experts. I am not trying to knock the government's legal experts, but a more in-depth examination of the practical application and implementation of this bill should have been conducted.

The Indian Act must gradually be changed so that it exerts less control over aboriginal governing bodies. That is inevitable. However, as witnesses in committee told us, the proposed initiative violates the existing principles of self-determination. Too little effort was made in seeking public approval and getting all community

members on board. Therein lies the problem, since the modernization of the Indian Act is a very contentious and identity-based issue. As I said, the modernization of this act is inevitable, but it should not be done at any cost and in just any way, particularly not through the highly questionable means of a private member's bill.

I submit this respectfully.

• (1110)

[English]

**Hon. Carolyn Bennett (St. Paul's, Lib.):** Mr. Speaker, the member for Desnethé—Missinippi—Churchill River has spoken of his personal experience living under the Indian Act. He stated that he brought forward his private member's bill “to provoke meaningful conversation about the need to repeal this outdated and archaic act and to create a more modern and less objectionable legislative framework in its place”.

[Translation]

I do not doubt that the member had good intentions.

[English]

As I have said repeatedly in this chamber, the Indian Act is the embodiment of failed colonial and paternalistic policies. There is no question that we need to find a way to move beyond this outdated and abhorrent legislation. However, there are some fundamental problems with both the process that led to Bill C-428 and with the bill itself.

First, I would like to discuss the process that led to the bill and the unacceptable precedent it establishes in terms of the Crown's duty to consult with first nations on legislation that impacts their inherent and/or treaty rights.

There is no other piece of federal legislation that has more significant impact on the day-to-day lives of first nations than the Indian Act. As such, any process that would successfully move us beyond this legislation has to be first nations led and developed in true partnership with first nations, no matter how well intentioned it is for first nations.

[Translation]

It requires extensive consultation of first nations across the country.

• (1115)

[English]

Jody Wilson-Raybould, representing the Assembly of First Nations, spoke to Bill C-428 and explained this to the aboriginal affairs committee:

In terms of fundamental aspects impacting upon first nations from bills such as this that are imposed upon our first nations, the requirement for consultation is extremely high and deep, as they call it. While it may be difficult to speak to every first nation in the country, there is a need to ensure that first nations' voices are heard and that every effort is made to speak with those first nations who hold the rights and will be impacted.

That level of consultation simply has not happened regarding Bill C-428. Further, I think it is important to remember that the duty to consult with first nations on legislative changes like this rests with the Crown and should be conducted on a nation-to-nation basis. This is not a duty that can be delegated to, or assumed by, an individual member of Parliament.

Ironically, the member for Desnethé—Mississippi—Churchill River summarized some of the key practical considerations himself, when he explained to the aboriginal affairs committee that “a private member’s bill in the House of Commons does not have the financial or human resources for me to conduct a full-scale consultation..”.

He further stated:

Currently, the federal government has the mandate to do a formal consultation. They have the capacity. They have the budgets. They have the individuals and human resources to do the formal consultation.

Unfortunately, there has been no such consultation by the federal government on the potential impacts of this bill, and the limited review process that parliamentary committees do is no substitute for that consultation.

Parliamentarians discharging our responsibility to review legislation in the House of Commons and the Senate do not equate with or replace the Crown’s responsibility to discharge its fiduciary responsibility to conduct appropriate consultations. Rather, it is incumbent on parliamentarians, as part of any responsible legislative review, to determine if the Crown has engaged in such consultations, and if not to reject the bill.

Witness after witness at the committee told us that although they sympathize with the member’s intentions, this was an inappropriate way either to amend the Indian Act or to develop a process to move beyond it.

[*Translation*]

This bill is not the solution.

[*English*]

That brings me to some of the substantive problems with this bill.

While recently the member has focused his comments more on the objective of encouraging a discussion on this issue, let us not forget that the short title of this bill is the “Indian Act amendment and replacement act”. The member told the aboriginal affairs committee that though this bill was trying to “set up a legislative process for first nations on a year-to-year basis, consult with the government and look at more modern, respectful language that properly reflects today’s society”, he went on to note, “Currently in the Indian Act there’s nothing that requires the federal government to consult with first nations on a year-to-year basis”.

There is nothing in Bill C-428 that requires the federal government to consult with first nations about moving beyond the Indian Act. All Bill C-428 does is to require the minister to report to the aboriginal affairs committee annually on what has been done, a report that could conceivably be one word: “nothing”.

Ms. Raybould of the AFN made it clear to the committee that “Bill C-428 is not the solution”. She said, “We need strong and appropriate governance, not tinkering with the Indian Act, creating

### *Private Members' Business*

perhaps the illusion of progress”. The balance of the bill is just that, tinkering with the Indian Act in a way that has huge unintended consequences.

Two key examples that we managed to deal with at committee were the sections of the bill that would have overhauled wills and estates in the Indian Act, and ill thought-out changes to section 85.1 of the act. With regard to wills and estates, the original bill would have created absolute chaos and unintended consequences, in terms of everything from Indian customary adoptions to how a common-law spouse would be treated. Thankfully, all members of the committee recognized the potential harm of these changes and voted them down.

The bill would have repealed section 85.1 of the Indian Act, which would have created complications for first nations that wished to maintain their bylaws that prohibit or regulate intoxicants. This clause also had to be amended to prevent the potentially devastating impact of restricting the ability of first nations communities to declare a reservation dry. In trying to fix this mistake, the member created yet further unintended impacts that had to be dealt with through report stage amendments.

Examples like these show that trying to tinker with a piece of legislation as complicated as the Indian Act is not something that should be done through the abridged legislative process for private members’ business. Who knows what other unintended consequences still remain within the bill?

Michèle Audette, president of the Native Women’s Association of Canada, summed it up best when she told the aboriginal affairs committee, “Yes, we need to get rid of the Indian Act, but not this way”.

● (1120)

**Mr. Jim Hillyer (Lethbridge, CPC):** Mr. Speaker, I am honoured and happy to rise today to support the hon. member for Desnethé—Mississippi—Churchill River in his laudable efforts to engage the House in this very timely and historical debate on the Indian Act of 1876. This debate is long overdue.

We proudly and rightly declare that Canada stands for truth, justice, freedom, equality, democracy, independence, and prosperity, but the continued plight of the institutionalized inequality of the first nations people is our great hypocrisy. We cannot bask in our understanding of constitutions and the principles of justice and freedom and celebrate our heritage of liberty and prosperity, and be justified to ignore the continuing plight of those who live in cramped third-world conditions, those who live on our doorsteps, our neighbours.

This plight is not simply the result of past prejudices and abuses. It is not simply a result of insufficient education. There continues to be institutionalized, legally mandated inequality and artificial limitations that shackle first nations.

*Private Members' Business*

Whatever the various solutions may be for the various first nations to achieve full sovereignty as nations, we cannot begin to hope for self-determination if the individuals living on reserves are not allowed the same freedoms, which are necessary for self-reliance, that are taken for granted by all other law-abiding Canadians. That is why we must support Bill C-428, an act to amend the Indian Act, which includes the repeal of many of the act's most archaic and oppressive provisions.

The Indian Act of 1876 was derived from the 1857 civilization of Indian tribes act and the culmination of other acts and proclamations before that date. The 1857 legislation was enacted by the British colonial government and declared that Indians who were “sufficiently advanced” education-wise, or “capable of managing his own affairs”, would be enfranchised. That is, they would be given the vote. In essence, the law said that if an Indian man learned to read and was willing to sign a pledge to live as a white, he was allowed to vote, own property and serve on juries, but if he did so, he would lose all his aboriginal rights. Understandably, very few first nations peoples chose to surrender their heritage and ancestry.

The 1867 British North America Act transferred responsibility of Canada's first nations from the British to the new Canadian federal government in Ottawa. At that time Canada had sole authority to negotiate treaties with the Indians and to purchase their land. At the same time, the Canadian government was supposed to shepherd the first nations' best interests. It was and is an inherently flawed principle, open to huge conflicts of interest, and has led to many abuses.

The Indian Act of 1876 incorporated the earlier colonial legislation and essentially made status Indians wards of the Crown, and the Crown was able to completely regulate their lives. Restrictions ranged from rules about how they would elect leaders, how their children would be educated, how their estates would be dealt with after death and how they would engage in commerce. Essentially, it did not allow them to engage in commerce. First nations were allowed virtually no self-governing powers, and it was not just the first nations, individuals had no self-governing powers.

We would hope that we as a nation would have advanced sufficiently to realize the fallacy and futility of those earlier paternalistic documents. I suspect that we do recognize the injustices of the Indian Act, but we have failed to put aside our pride and our politics. We are too worried about who is right and who will get the credit, when we should be committed to what is right and ensuring our fellow countrymen get the quality of life and dignity enjoyed by most Canadians.

Thanks to the hon. member for Desnethé—Missinippi—Churchill River, who has introduced Bill C-428, we are now confronting the more archaic and even absurd aspects of the original legislation, which are still in the Indian Act.

A striking example of those absurdities is the matter of sale of produce from the land farmed by first nations. First nations people are people of the land. They farm, grow grain and produce, have dairy farms, cattle herds, and apple, pear and peach orchards, among many other crops and produce. They have a respect for the earth and the bounty that derives from it. It is the very essence of their ancient

and revered culture, yet the Indian Act makes a mockery of that respect and well-earned bounty.

● (1125)

Any other Canadian takes it for granted that we have the right to the fruits of our labour and to sell, barter, or exchange as we see fit. However, to this day, the Minister of Aboriginal Affairs must approve all land transfers. Additionally, if a first nation person sells, barter, exchanges, gives, or otherwise disposes of cattle or other animals; grain or hay, whether wild or cultivated; root crops; or other products from any reserve in Manitoba, Saskatchewan, or Alberta to anyone other than a member of their own band, the superintendent must approve that transaction in writing. This order can be revoked or reinstated to any band at any time by the Minister of Aboriginal Affairs. Furthermore, if a first nation person violates this order, he or she is deemed guilty of an offence. It is shameful to believe that we have allowed an effective embargo on the fruits of honest labour.

As proposed by the member for Desnethé—Missinippi—Churchill River, Bill C-428 would remove this provision, which prohibits first nations from selling their own goods and agricultural products produced on reserve to non-band members. We must repeal this section of the legislation. Doing so would enable first nation communities to become more productive and self-sustaining contributors to their own long-term wealth and that of their neighbouring non-aboriginal communities.

I live next door to the Blood reserve. A lot of people in southern Alberta see the poverty on the reserve and the poverty of many first nation people who have tried to leave the reserve. Some of them wonder why they do not just work their own land. In fact, I hear that all the time. They ask why they do not work their own land, because they have great agricultural land and great oil reserves. They do not realize that these people do not have the legal right to run a business as we have the right to run a business. They do not have the legal right to sell their produce as they see fit, as every other Canadian does.

Self-respect and self-worth derive in large measure from the ability to self-actualize as individuals and as a people. It is the potential to grow and to reach our goals that makes Canada a wondrous land to call home. It is the right time to right the wrongs that are inherent in the Indian Act. We must repeal the provision that forbids the sale of apples and pears by first nations to any and all Canadians. I know that in this right-minded House, it cannot be seen in any other way.

*Private Members' Business*

This is just one of the legally entrenched injustices that Bill C-428 would overturn. Besides amending the provision against selling produce, it includes the removal of any mention of and requirement for residential schools. We have apologized for residential schools, but that apology is a little hollow if it continues to be the law of the land in actual form, even though it is not practised. A lot of talk against the bill has been that it does not do enough or that it does not have unanimous support. It has been suggested that we should not even attempt to revise the Indian Act nation by nation, rather we have to wait until every first nation across the country is on board. However, to wait for unanimous support is similar to saying that all of our international affairs, treaties and free trade agreements have to cease until we can get one overarching international trade agreement and treaty that applies to every country in the world.

I would say that this is the time when we must move forward. We cannot wait and sacrifice those who suffer on the altar of perfection and unanimity. We must move forward, and this is a great first step.

• (1130)

**Ms. Mylène Freeman (Argenteuil—Papineau—Mirabel, NDP):** Mr. Speaker, I am speaking on the bill to give voice to the concerns that have been expressed to me by members of the community of Kanesatake, which is in my riding, who would be directly affected by the legislation proposed in the Conservative private member's bill, Bill C-428.

The concerns that have been raised in the bill remind us that we need to move forward and truly work on a nation-to-nation paradigm rather than through this paternalistic, piecemeal, and unilateral approach that the government has been using and continues to use in this bill.

Bill C-428 seeks to amend the Indian Act by deleting sections dealing with wills and estates, sale of produce, trade with certain people, and the sections on residential schools. It also calls on the government to make an annual report to Parliament on its progress on dismantling the Indian Act.

Like pretty well all legislation pertaining to the Indian Act put forward by the Conservative government, the bill has major flaws and does not solve the problems it wishes to address. Although it does delete some archaic provisions of the bill, other deleted sections like the provisions on wills and estates could put first nation citizens living on reserve in legal limbo because there is no guarantee that provincial legislation will cover their situation.

What is more, there was no consultation with first nations before presenting the bill, like pretty well all Conservative legislation on this issue. The overriding issue with the relationship that the Conservative government has with first nations is that of a unilateral, paternalistic one. That is to say, it does not want to wait for everyone to be in agreement; it is the government and it knows best, so it is going to go ahead and do this. This is not an approach that is respectful of what unfortunately is not legally, but should be, the status of first nations in this country.

We all know that what is at the basis of a relationship and should always be at the basis of a relationship is a nation-to-nation relationship. Bill C-428 was drafted without consultation with first nations, reinforcing this unhealthy relationship. Unfortunately, it is not surprising, as I mentioned, that the Conservatives, like the

Liberals before them, acted unilaterally rather than engaging in meaningful consultation and collaboration.

I sincerely feel like I have said this many times on many bills. Unfortunately, I feel it is once again important that I state that I strongly believe that there is no greater or more urgent challenge facing us as MPs than the need to resolve the degrading relationship that Canada has with our aboriginal people.

There are clear actions that the government can, must, and could take immediately by using the UN declaration on indigenous peoples as a guide for what actions must be taken toward the sovereignty and decolonization of aboriginal people. Unfortunately, the number one thing that needs to be done in order to respect and address this is completely ignored by the Conservative government when it fails to do any kind of consultation.

At a minimum, we should expect to have a minister responsible for the file introducing a bill such as this. The Conservative tactic of using a backbencher to advance policy is a lack of leadership and demonstrates its chronic inability to move forward in the legislative process honestly and in good faith. The very fact that a government private member rather than the minister responsible is presenting the bill means that the steps that the bill would have to go through to seek legal relevance and the steps that the House would go through, such as the amount of debate that it would go through or the access that it has to information from the ministry, are all greatly relaxed. It means the bill has a lot less oversight than it would if it were presented by a minister.

Acting in this way to begin with, let alone the lack of consultation, means that it really aggravates the problems rather than solves them.

I believe, alongside my colleagues from the NDP, that we must move away from this paternalism that is in the Indian Act toward a paradigm where we have a healthy relationship with first nations, and where we are able to maintain their sovereignty and jurisdiction over their lands and businesses. The bill is a perfect example of exactly the opposite, because it is done in bad faith and lacks the extensive consultation and the nation-to-nation relationship that would be required in order for us to have a healthy relationship that moves away from the Indian Act.

• (1135)

In terms of wills and succession, this bill puts first nations in an area of uncertainty. In any situation not covered by provincial legislation, in addition to creating potential conflicts, the burden of this uncertainty would be placed on the shoulders of tribal councils while Conservatives continue to impose budget cuts and restrictions on these same councils. Conservatives do not seem to understand that this is the reality of what it is like in a band. There is not enough money or land, yet the bills that keep coming forward do not take into account that these are problems.

*Private Members' Business*

We saw the same problem with MRP legislation. It does not make any sense, because there is no extra money or land to go along with that kind of legislation. It is not actually addressing the problem in a meaningful way. The member who spoke before me said that it does not mean anything if we apologize for the residential schools and do not actually take action. Action requires money, respect, consultation, and all the things that go along with treating first nations as equal partners in the federation. We cannot just present private member bills and expect that the problem is going to start being addressed.

I have a constituent who came to speak to me who adamantly wanted me to oppose this bill. His name is Denis Gaspé, from Kanesatake. He wrote the following to me so that I could speak his words in the House today:

Consultation with the people has not been undertaken and any future attempts will be seen as suspect unless an attempt is made to include First Nations groups at the community level who have perennially rejected the notion they are subject to the Indian Act.

He is saying that we cannot change the relationship, as I was saying, in the Indian Act, without consultation. What this bill is purporting to do flies in the face of actual meaningful change.

Monsieur Gaspé's principal objection to the bill is section 10. It raises many problems for him. He stated:

...there is no identification of bylaws as separate from Band Council Resolutions. Manipulation of the publication requirement will bring more unrest.

There are a lot of concerns, and the fact that there are concerns that there has not been consultation means that we cannot move forward with this kind of legislation. We need to set aside the fact that the process we are using right now is not an appropriate one. What is in the bill is also not going to do what it purports to do.

It is long past the time that we address these issues. We need a process that is consultative, that respects UNDRIP, and that brings the nation-to-nation relationship between first nations and Canada into the 21st century.

**Mr. Ray Boughen (Palliser, CPC):** Mr. Speaker, I am very certain that we, in this House, can agree that it is time the first nations gained their independence from what is largely a paternalistic, almost feudal, system of governance, one predicated on an act that is almost obscene in its condescension and paternalism.

The Indian Act is archaic. Enacted in 1876, the act is more than 125 years old and is one of the oldest pieces of Canadian legislation. It has no place in contemporary Canadian society. The first nations deserve to have their own truly indigenous system of governance and are quite capable of doing so.

I am therefore proud to stand in full support of Bill C-428 and the remarkable efforts of the member for Desnethé—Missinippi—Churchill River to bring this matter before the House.

I would point out to hon. members that Bill C-428 is not a full-scale repeal of the Indian Act. Instead, it seeks to amend and replace very specific outdated and antiquated clauses that are either not being enforced or are hindering first nations from achieving lasting cultural freedom and true economic and societal success.

Time and time again in this House, we speak about government accountability, accountability to all our citizens, our constituents, this House, and most critically, our great nation.

Our government remains committed to working with first nations to make changes to elements of the Indian Act that are barriers to first nations governance and economic growth.

Today in this House of Commons, which should and must be representative of all the people of Canada, I would like to speak about another type of accountability, the accountability of first nations governments to their own communities. Bill C-428 would propose to enhance the essential links between those who govern and those who are governed, forevermore.

First nations band councils do not currently have the same opportunities that urban and rural municipalities have to independently develop and enforce bylaws, which are essential for the safe and timely running of their communities.

Unfortunately, there is no requirement for first nations to make their bylaws publicly available to their members. As a result, for years, first nations residents and law enforcement officials have found it difficult to ascertain the specific nature and quality of the bylaws that exist in each individual first nation.

Moreover, in a true testament to the paternalism of the Indian Act, first nations band councils have had to seek out the Minister of Aboriginal Affairs to request approval for each and every bylaw they wish to pass into legislation.

This cumbersome process has caused many bands to wait lengthy periods of time for formal approval, or conversely, to discover that their bylaws have been declined. Other band councils have chosen to completely bypass the minister, and as a result do not openly inform their membership of those changes to band bylaws.

Currently, following the submission of new bylaws to the minister, there follows a 40-day period during which the law properly voted on and passed by the respective band council may be disallowed by the minister. No such legislation exists anywhere in any provincial or municipal act within mainstream Canadian society.

In practise, this process often stretches out to well beyond the 40-day limit, a result of the back and forth between the bureaucracy in Aboriginal Affairs and the band council on change requests to the already passed bylaw.

The proposed bill would eliminate the requirement for aboriginal councils to request approval from the Minister of Aboriginal Affairs for bylaws, which are formalized into law as a matter of course in the various other legislative bodies, be it at the borough, village, or municipal level, as they currently exist within greater Canadian society.

Bill C-428 would create a more transparent and accountable process for all first nations band members and would remove the department and the minister from the equation.



First nations councils would be required to publish their bylaws on their websites or via some readily accessible public communication channel, such as a band newsletter, a widely read local newspaper, television, radio, or some or all of the above.

•(1140)

All first nations communities deserve to have the opportunity to hold their councils fully accountable without external, and at times naive and unenlightened, oversight.

I believe that an integrated step in government accountability lies in providing the ability for all first nations to not only make their own bylaws but to publish them.

Bill C-428 would place the responsibility for bylaw-making powers squarely in the hands of the first nations communities, where it belongs. It would provide the grassroots membership of the bands with greater accountability from their band councils. The requirement to make each first nation bylaw publicly accessible would provide clarity for first nations residents, visitors, and law enforcement officials seeking to understand their collective community obligation to either abide by or enforce the laws within the community.

Bill C-428 would repeal sections of the Indian Act, which, though they might remain in law, are no longer enforceable or relevant. This redundancy confuses the real issues facing the Crown and the first nations. However, before we can proceed, we must remove this redundancy so that we, as a House, can begin to see the portions of the Indian Act that substantively affect the daily lives of the first nations people.

Bill C-428 would seek to bring the language and content of the existing statute into the modern era. By taking concrete steps to amend the language and remove outdated and irrelevant sections of the Indian Act, the bill would address some of the challenges facing first nations communities with regard to their political, social, and economic development.

Firm incremental changes such as these would truly pave the way for further legislation to be developed in collaboration with first nations legislation, which, indeed, would benefit all Canadians.

It is only by building on the goodwill of all Canadians, who I believe wish to see us work together on this momentous journey to bring all of our citizens to greater prosperity and a sense of self-worth, that we can begin to share the true potential of this great land we call Canada.

•(1145)

**The Acting Speaker (Mr. Barry Devolin):** Is the House ready for the question?

**Some hon. members:** Question.

**The Acting Speaker (Mr. Barry Devolin):** The question is on Motion No. 2, and a vote on this motion also applies to Motion No. 3.

Is it the pleasure of the House to adopt Motion No. 2?

**Some hon. members:** Agreed.

**Some hon. members:** No.

### *Government Orders*

**The Acting Speaker (Mr. Barry Devolin):** All those in favour of the motion will please say yea.

**Some hon. members:** Yea.

**The Acting Speaker (Mr. Barry Devolin):** All those opposed will please say nay.

**Some hon. members:** Nay.

**The Acting Speaker (Mr. Barry Devolin):** In my opinion the yeas have it.

*And five or more members having risen:*

**The Acting Speaker (Mr. Barry Devolin):** Pursuant to Standing Order 98, the recorded division stands deferred until Wednesday, November 20, immediately before the time provided for private members' business, and the recorded division will also apply to Motion No. 3.

### SUSPENSION OF SITTING

**The Acting Speaker (Mr. Barry Devolin):** The chamber stands suspended until 12 noon.

(The sitting of the House was suspended at 11:48 a.m.)

### SITTING RESUMED

(The House resumed at 12 noon.)

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## GOVERNMENT ORDERS

•(1200)

[*English*]

### RESPECT FOR COMMUNITIES ACT

The House resumed from November 8 consideration of the motion that Bill C-2, An Act to amend the Controlled Drugs and Substances Act, be read the second time and referred to a committee, and of the amendment.

**Ms. Megan Leslie (Halifax, NDP):** Mr. Speaker, I have a lot to say on this issue.

We are talking about Bill C-2 today, safe injection sites, and I want to start with what the bill should be about.

I think the bill should be about saving lives. It should be about reducing disease. It should be about reducing harm. It should be about public health and also public safety.

When we talk about what a bill should be about, quite frankly, very often it is up to the government to decide, and we take our cues from it; however, in this case, the bill is actually a response to a Supreme Court of Canada decision. Therefore, we know ahead of time what the bill should be about because we can look at the Supreme Court decision and the language in it and know what the bill should be about. However, in looking at the bill, we see it is all wrong. It is not a proper response to the Supreme Court of Canada case.

*Government Orders*

As members probably know, this Supreme Court of Canada case is about a situation in Vancouver around InSite, which is a supervised safe injection site. This facility receives an exemption from section 56 of the Controlled Drugs and Substances Act.

We had a challenge here, and the Supreme Court of Canada was unequivocal in what it said about InSite, which is a model for other safe injection sites. I will read some of the quotes on this case, because they will tell us what Bill C-2 should be about. It is fascinating what the court said.

The court did rule that the minister's decision to close InSite violated its patrons' charter rights and that the minister's decision was "...arbitrary, undermining the very purposes of the CDSA, which include public health and safety."

It is arbitrary, and I will argue in a few minutes that the proposed legislation is an arbitrary response.

Further in the case, the court said that

The infringement at stake is serious; it threatens the health, indeed the lives, of the claimants and others like them. The grave consequences that might result from a lapse in the current constitutional exemption for InSite cannot be ignored. These claimants would be cast back into the application process they have tried and failed at, and made to await the Minister's decision based on a reconsideration of the same facts.

The court talks about this threatening the health and lives of the claimants, so we are talking about health here. We are talking about section 7 rights, which are that everybody has the right to "life, liberty and security of person and the right not to be deprived thereof".

The court actually sets out who has the onus of responsibility here in proving a case. The court said:

...the Minister must exercise that discretion within the constraints imposed by the law and the *Charter*, aiming to strike the appropriate balance between achieving public health and public safety. In accordance with the *Charter*, the Minister must consider whether denying an exemption would cause deprivations of life and security of the person that are not in accordance with the principles of fundamental justice.

The court continues a little further on,

Where, as here, a supervised injection site will decrease the risk of death and disease, and there is little or no evidence that it will have a negative impact on public safety, the Minister should generally grant an exemption.

I stress "should". This is not "may"; it is not permissive language. The court has been very forceful here in saying "should generally grant an exemption".

However, with the bill before us, the onus is actually being reversed.

The courts have said that it will decrease the risk of death and that there is little or no evidence of a negative impact on public safety. However, what do we have before us? We have a bill that would actually force communities to prove the benefits. It would force communities into an extensive application to prove what the benefits would be, what the impacts would be on the community.

● (1205)

It is actually reversing that onus, when the courts have been very clear that there is no evidence to show that safe-injection sites would have a negative impact on public safety. This bill would force

communities to come up with scientific evidence demonstrating that there is a medical benefit. Come on; we know there is a medical benefit. There would be a letter of opinion from the ministers responsible, information about infectious diseases and overdoses, a description of the available drug treatment services, a description of the potential impact of a site on public safety, and the list goes on.

This is not an appropriate response, because this bill should be about health. It should be about preventing death. It should be about preventing the spread of disease.

I believe that a bill like this would actually stymie the process. There is one safe injection site in Canada right now, InSite, but if community members believe that their community needs a safe injection site, they should be able to open one, because harm reduction works and the evidence shows that. Therefore, I want to talk about how this bill, in creating these barriers and these obstacles to harm reduction and the obstacles and barriers to saving lives, could potentially impact a community like Halifax.

Halifax does not have a safe injection site, but I would say that the people of Halifax robustly embrace the concept of harm reduction. We have many different harm reduction facilities of different forms in our community, including a needle exchange, housing first principles, a mobile street health outreach bus, and a travelling methadone clinic. Halifax understands harm reduction.

We do not have a safe injection site and there are no plans for one. However, on the heels of this case there was quite a bit of media discussion about whether Halifax would have a safe injection site and about how this court case would allow that to happen. There are no plans for a program in Nova Scotia, but after the Supreme Court of Canada decision, the chief medical officer came forward and said he was happy to hear the Supreme Court of Canada's decision. In *The Chronicle Herald* at the time, he said:

We're very pleased with this because it leaves the option open down the road. If it's warranted then it's certainly something we may consider in the future.

This is from Dr. Robert Strang. Our chief medical officer has said that the decision was a wise one, and it made him happy to think that we may be able to have a site like this, if needed, in Nova Scotia.

Then what is the problem? Why do we have this reaction in the form of Bill C-2? Why is it that the Conservatives have brought forward this bill that would actually circumscribe or limit communities' abilities to take action and enact this kind of harm reduction in their community?

Well, at the same time that Bill C-2 came out, we saw a really interesting little fundraising campaign by the Conservative Party of Canada called "keep heroin out of our backyards". I have the website right here, and under "keep heroin out of our backyards", it says, "Add your name if you demand a say before a supervised drug consumption site is opened close to your family".

That, on its face, seems as though it might be reasonable, but then we read further into this campaign and we realize it is all about not just raising money for the Conservative Party but also about fearmongering:

Do you want a supervised drug consumption site in your community? These are facilities where drug addicts get to shoot up heroin and other illicit drugs.

I don't want one anywhere near my home.

Parenthetically, Mr. Speaker, we are not talking about putting them beside our homes.

It continues:

Yet, as I write this, special interests are trying to open up these supervised drug consumption sites in cities and towns across Canada—over the objections of local residents and law enforcement.

In parenthesis, I ask, “Really? What objections? Where are they being opened? Where is it that communities are rising up against this? There are no proposals for any of them.

It says, “...as I write this, special interests are trying to open up these [facilities].” Is it a special interest to want to keep Canadians alive? I do not think that is a special interest.

I will keep going:

We’ve had enough—that’s why I’m pleased that the [we know who he is] government is acting to put the safety of our communities first.

If members could see this website, they would see that it shows an empty syringe on the sidewalk, instilling fear in all of us.

● (1210)

I biked up to my community office on Monday last week when we were home for our riding week. What did I find in front of my office on the sidewalk? I found an empty syringe. I got some gloves and picked it up. A few doors down is the North End Community Health Centre. It has a sharps disposal container. I dropped it off there.

It is real. The idea that people are using intravenous drugs on our streets is real.

What I actually think is the threat to public safety here is not safe injection sites but the fact that people who have addictions, who may be homeless, who may be struggling with a myriad of other issues, have nowhere to go that is safe and supervised.

I talked to the people at Metro Non-Profit Housing Association, which is down the street from my office. They talk about finding needles in their bathrooms. Why is that? It is because that is where people can go. It is safe and warm, or the safest they can get, and it is warm and private. They can close the door and do their drugs there. Is that appropriate? I think that is more of a threat to safety than safe injection sites.

Behind my office there is a needle drop, a sharps container, that a local community group put in place for people who are doing drugs. It is kind of a dark alley. Stuff goes on there, and we need to acknowledge what is happening in our communities. What happened is that people actually broke into the box to get the needles. That is not harm reduction. Actually creating a supply of dirty needles for people to break into and share is not harm reduction. However, that is the reality of what is happening in our communities.

There was a local café maybe four doors down from my office that closed a couple of years ago. It had to put a sharps container in the bathroom. I think having needles in my local café is more of a threat to my safety than a safe injection site where the activity is supervised and the needles are clean and disposed of properly. I would much rather have a safe injection site beside my office than know that there are dirty needles behind my office that people are reusing.

### *Government Orders*

This is about safety. This is about public health, and I want to get back to public health for a second, because nowhere in the bill is there even a mention of public health. I find that shocking.

When we are talking about health and what this bill should be about, which is saving lives and stopping the spread of disease, we have stats; we have real, hard evidence from InSite. The rate of overdose deaths in East Vancouver has dropped by 35% since InSite opened. That is pretty good evidence. Something is working.

Harm reduction works. A study over a one-year period showed there had been no fatalities from those injections. In one year, over 2,100 referrals were made to InSite users to addiction counselling or other support services. There is no referral service behind my office.

People who used InSite services at least once a week were 1.7 times more likely to enrol in a detox program than those who visited infrequently and probably a heck of a lot more likely to enrol than the folks behind my office.

There was a significant drop in the number of discarded syringes, injection-related litter, and people injecting in the streets one year after InSite opened.

Injection drug users who use InSite are 70% less likely to share needles. That is a staggering number. Reducing needle sharing has been listed as an international best practice to reduce the rate of HIV and AIDS.

InSite users are more likely to seek medical care through the site. This means fewer trips to the emergency room and an improvement of health outcomes.

There was a pretty big sigh there as I was reading the evidence. The evidence should speak for itself, but it is not, because we have Bill C-2 in front of us to actually make it harder for people and communities to have this kind of success story in their community.

It is all about evidence. Evidence shows that harm reduction, like safe injection, works, and I am really proud of the harm reduction initiatives in my community.

We have Mainline Needle Exchange, where folks can actually get clean needles and maybe get referred to some services.

● (1215)

We have Direction 180, which is a methadone clinic. It has recently had huge success buying a mobile bus to get to some of the communities that are not in the north end of Halifax and to ensure people get their methadone. These folks are trying to deal with their addictions. They are trying to better themselves. We need to have these harm reduction programs in place for them so they can succeed. What is the alternative? Death?

We have MOSH, or Mobile Outreach Street Health, which is a van that goes around to where people are, such as under bridges, in fields and at the homeless shelters, to give them the medical treatment they need.

This is what we need, but unfortunately the government is not interested in harm reduction. I have a good quote from Cindy MacIsaac who runs Direction 180, our methadone clinic. She said:

### *Government Orders*

Ottawa's new approach is to criminalize what should still be seen as a health issue...You can't even use the term harm reduction anymore when applying for federal funding. The taps have been turned off.

This bill is all about creating fear. It is not about health or about helping people get better. Bill C-2 is a bill about power, power to the minister and disempowerment to the most vulnerable members of our society.

There is a more powerful argument against the bill. That is the voices of members of my community and communities across the country that recognize the value of safe injection sites as a harm reduction program. They want the ability to set up similar sites where needed.

Safe injection sites are one way we can help save lives, treat people who suffer from a disease, help people reorient their lives, improve the quality of life for community members and make our cities safer for everyone. We need less barriers to programs like the ones this bill would create. The government is getting in the way of caring for those people who need the most help.

I want to emphasize that addiction is not a choice. It is a disease, and those who suffer from it should be treated with the dignity and the respect we give to other people suffering from chronic illness. When we speak about safe injection sites or harm reduction programs, there is very often a human element that gets left behind in these debates. I want to ensure that we talk about that human element in the House. People who suffer from addiction are also suffering from the stigma and discrimination that follow the disease. This bill lacks the understanding of this human element. It makes it more difficult for safe injection sites to be established in our communities and for individuals battling addiction to receive compassionate care.

When I was getting ready to speak to the bill, I spoke to people at the Brunswick Street Mission and the Mainline Needle Exchange. They said that the people who needed help in my community were increasingly younger people living in shelters, that they were inadequately housed and suffered from severe health issues, including mental health issues and mental illness. The problems face people who suffer from addictions cannot be isolated from housing, health, poverty, education, or addiction. They are all inseparable problems that can overwhelm anyone.

Safe injection sites are an important part of dealing with these issues holistically. At InSite in Vancouver, it is not just a program about drugs. Safe injection sites are about helping people through providing a safe space, peer support services, and health services. Unfortunately, this bill does not look at the whole picture. It makes safe injection sites harder to establish across the country and makes it harder for our community to want to tackle these and other connected issues.

With no safe injection sites and no safe spaces for people fighting addiction, we are pushing those people to the very margins of society, which exacerbates poverty, homelessness, and health and safety issues for our communities.

• (1220)

**Hon. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Mr. Speaker, I listened to the member for Halifax. I am afraid the terminology that was used repeatedly was misleading. These are not safe injection sites. They are called supervised injection sites. To

suggest that putting heroin or other illicit drugs into one's body is somehow safe goes against common sense. All family doctors would probably agree.

I am not aware of any community in Canada, other than the Vancouver Downtown Eastside, that is lobbying for a safe injection site or a supervised injection site. I am making the same mistake as the members did. I am so embarrassed. Putting bad stuff into one's body is not safe. The government has homelessness and affordable housing initiatives. It also has a mental health commission. We are implementing initiatives that will work and not perpetuate the problem.

Could the member agree that it is not safe for—

**The Acting Speaker (Mr. Barry Devolin):** The hon. member for Halifax.

**Ms. Megan Leslie:** Mr. Speaker, part of what my hon. colleague has raised I will accept, which is on the exact same page as the Dalhousie Women's Centre. There is a difference between safe and safer. I am talking about harm reduction. The women's centre has always been great about reminding me that it is not talking about safe sex; rather, it is talking about safer sex, because we cannot ensure that it is always safe. It is the same here.

I will acknowledge that if I had the time to go back, I would have changed every "safe" to "safer" injection sites. If the hon. member was listening to my speech, he would have heard that in my community, people were shooting up drugs on the streets and under bridges. They are making our communities less safe, so I am talking about a safer injection site.

If he is not aware of any community that is lobbying for a safer injection site in its community, then why is his government making it harder? If he does not think it is an issue across Canada, then why have this bill as a response to the SCC case, which makes it more difficult? That is very contradictory. The bill proves that this is needed in our communities.

**Mr. Randall Garrison (Esquimalt—Juan de Fuca, NDP):** Mr. Speaker, I would like to thank the member for Halifax for her heartfelt remarks on this very important but negative bill.

The previous Conservative member said that he was not aware of any communities that were looking at safe injection sites, so I will repeat what I said in my speech: my community is looking at this because in 2011, the last year we have complete statistics for greater Victoria, 16 people died as a result of not having a safer injection site. On Vancouver Island, there were 44 deaths in 2011 alone. People on Vancouver Island are looking for solutions, one of which is the possibility of having what I will still call a safe injection site. I agree it is safer, but what we are comparing it to is people who end up injecting drugs in extremely unsafe situations.

*Government Orders*

As the member for Halifax pointed out from, InSite has reduced deaths from overdoses, has reduced HIV infections, has had a positive impact on that neighbourhood, and has 80% support in the Downtown Eastside.

**Ms. Megan Leslie:** Mr. Speaker, I appreciate my colleague's intervention and the fact that he can bring examples from his community here.

What is interesting is that in Ottawa the proponents of a safe injection site have put together a mock site in Lowertown to show people what that would look like and how it would be set up. The idea is to foster community understanding of what a safe injection site would be to hopefully correct the misguided notions of what it is. These sites can work.

We have more of a problem in Nova Scotia with something like OxyContin versus injectables. Therefore, different communities have different needs. We need to create an environment where communities can respond to their needs. If a safe injection site or a needle exchange program is the best thing, then we should go forward with it. It is all about harm reduction. We are trying to save people's lives.

• (1225)

[Translation]

**Ms. Rosane Doré Lefebvre (Alfred-Pellan, NDP):** Mr. Speaker, I would like to start by thanking my colleague from Halifax for her excellent speech.

At present, in the Montreal metropolitan area, people on the Island of Montreal are trying to set up a supervised injection site that would be a little different than InSite, but would work with various partners.

What we should retain here is the phrase “work with different community partners”. The Montreal police force is just one of those partners. In a major study, the police force contacted these partners. The chief of the police station in one of the poorest communities in Montreal, Hochelaga-Maisonneuve, said that they have to consider opening safe and supervised injection sites because, among other things, there are very dangerous drug houses in eastern Montreal.

I would like to hear what my colleague has to say about the work being done with various services, such as police services, and also community networks?

[English]

**Ms. Megan Leslie:** Mr. Speaker, I appreciate hearing the example of my colleague in Montreal. I know in my community and other communities across Canada that community-based organizations have resorted to setting up unofficial safe injection sites. Again, when I started off by saying we needed to acknowledge what was happening in our communities, that is happening. Providing safer spaces by clearing out bathrooms and allowing people to inject there with clean needles versus in alleyways is happening. They are unofficial, but it is a response to the need that exists and trying to keep people as safe as they can be.

There is the idea of community partnership. My colleague talked about what was happening in Montreal. It is community and health organizations and the police that get this. They understand what the communities need and that is why they are coming together to work for a common cause. The common cause is saving lives and reducing

the spread of disease, which is not the common cause shared by the Conservatives, who have been very reluctant to speak on this issue in the House. They introduce the bill and then wash their hands of it, because for them it is all a fundraising exercise. I am sorry to be so cynical.

**Hon. Steven Fletcher:** Mr. Speaker, I know the official opposition would like to have needles in prisons for harm reduction reasons, but at the end of the day if people are breaking the law, they should face the consequences. The member should consider that obtaining or using illegal drugs is against the law and perhaps the law should step in to deal with the problem.

**Ms. Megan Leslie:** Mr. Speaker, I am really surprised that the member went there because there is so much baloney happening on the national stage when it comes to people breaking the law.

I would like to know whether the law has been broken by the Prime Minister's Office, quite frankly, when it comes to paying off senators and trying to get them to shut up or change their stories. We see a very strange situation in Toronto with the current mayor, who has admitted to doing drugs. Is the member saying that everybody should be locked up and put in prison?

We are talking about trying to save lives. I am not condoning using illegal drugs. If the Conservatives are insistent on locking people up in jail because people need to pay for their crimes and that one day they will be let out and rehabilitated, then let us try to keep people alive so they can come out of prison rehabilitated. This is just the death penalty in another form, and it is unconscionable.

• (1230)

**The Acting Speaker (Mr. Barry Devolin):** Before we resume debate, I would like to remind all hon. members that we have reached the five hour point in this debate. Therefore, from this point forward, the speeches will be 10 minutes, followed by five minutes for questions and comments.

Resuming debate, the hon. member for Winnipeg North.

**Mr. Kevin Lamoureux (Winnipeg North, Lib.):** Mr. Speaker, I have a few thoughts to share with members on Bill C-2. We could start by asking about the message of the Conservatives with regard to drug usage, on Bill C-2, and what ultimate impression they are trying to give Canadians.

The Conservatives do not believe in facts and science, and they are more concerned about how they can portray the image of being the party that is tough on all aspects of crime. Whether it is justified or not is completely irrelevant.

Bill C-2 somewhat exemplifies why the government is so focused on things that are not necessarily in the best interests of Canadians but rather on sending a very strong message, which is ultimately, I would argue, to the detriment of all Canadians. First I would emphasize my disappointment with the Minister of Health, who is responsible for the public health and well-being of Canadians, for bringing forward legislation that will not put our individuals or communities in a healthier position going forward.

*Government Orders*

The Minister of Health disappoints me most because Canadians from coast to coast to coast are concerned about health care, and she is doing nothing to come up with a provincial agreement for a health care accord that expires in 2014. This is an issue about which people across this land are concerned. We love and care about our health care services, and the Conservatives have completely ignored it. They have not even met with ministers to discuss it. This issue touches each and every one of us in a very real and tangible way, and the Conservatives choose not to deal with it. They want to focus on their message, whether it is in the best interests of Canadians or not.

The Minister of Health should be ashamed of herself for bringing forward a bill such as this, while ignoring an issue that is of critical importance to each and every Canadian across this land. We challenge the Minister of Health to reflect upon the damage she is proposing by introducing Bill C-2. She should get to work on the health care accord, which is a very important issue.

Therein lies the difference between a Liberal government and a Conservative-Reform government. We believe in working with the different stakeholders. When the injection site was put in place in British Columbia, the Liberal administration in Ottawa worked closely with the different stakeholders. The Liberals expressed interest in helping communities in which discarded needles, pipes, and other paraphernalia were left lying on our streets. We expressed interest in how we could help to deal with the lives that were being destroyed, the suicides that were being committed, and the heroin overdoses and so forth.

It was not the Liberal administration alone doing that. The police force, the British Columbia government, and many other stakeholders expressed concern. They all came to the table and came to an agreement that having InSite would help; it would make the community a healthier place.

The national Liberal government did not make that determination alone. We recognized and worked with the other stakeholders, and the key is that we did work with the other stakeholders. Through that work we were able to support InSite, which has been very successful. We only have to look at it.

● (1235)

The Minister of Health has not even visited the site in question, from what I understand. Why? If she visits the place and starts talking to the staff, she might actually find that it is working. She could talk to the local Vancouver police, whom I understand are in support of it. The minister does not want to talk about the evidence.

The Minister of Health does not want to understand the true value of having this safe injection site because it does not fit the ideological agenda that the Conservatives want to espouse. They do not let the facts or science deter them from doing the wrong thing. This is most unfortunate. One would think that the Minister of Health would have gone to the site and worked with, or at least talked to, people to find out what they actually had to say about it. From what I understand, that is not the case.

When we look at the local leadership, the province supports it and the police support it, and many different health care professionals recognize the benefits and support it. We can look at the users who need the site and support it.

We can talk about the facts, about how individuals' lives have been saved. We could go to the community to see different facilities, community centres, schools, or back lanes, and we would find that those areas are healthier environments as a direct result of it.

These are the types of things that are important for us to recognize. However, the Conservative Reform government does not recognize that because it does not fit its political agenda.

We know how much it relies on that political agenda. Within hours of the minister introducing the bill, the Conservatives started a fundraising campaign. They said that the Liberals and New Democrats want to have injection houses throughout Canada, implying that they would go into all these different communities and that the only way to prevent that was to donate money to the Conservative Party.

The Conservatives are using Bill C-2 as a fundraising tool. Here we have a newly minted Minister of Health being manipulated and used as a fundraising tool, when in fact she should be dealing with the issues that Canadians truly want her to deal with.

**An hon. member:** Get a life over there.

**Mr. Kevin Lamoureux:** The member said, in a very light and friendly fashion, I suspect, to “get a life”.

Mr. Speaker, that is the reality of it. That is what the government has chosen to do. It did send out the fundraising letter. The member can nod his head and say “no”, but it is true. The member should check his speaking notes and he will find that is in fact what it is. I can appreciate that the members would have a difficult time with it.

I recognize that we need to be more proactive in supporting our communities that need to address some of the negative social elements out there. Drug addiction, whether it is heroin or cocaine or other drugs, is very real. We do need to address that.

We need to work with different stakeholders, something that former Liberal governments have done. We need to work with different stakeholders to come up with ideas that would make our communities a better and safer place to be. That is the reason we find it so difficult to even support Bill C-2.

I am thankful to have had the opportunity to say a few words.

● (1240)

**Hon. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Mr. Speaker, I listened to the member's comments, and first I have to say that the federal health minister is one of the most skilled, intelligent, and personable politicians that we have in Canada. She is doing an outstanding job on a difficult file.

The member brought up our record. This comes from the Liberal Party that cut \$25 billion from the transfer payments for health. This is the party that denied the forgotten victims of hepatitis C. It was not until our government came in that we corrected those great injustices.

The member talks about supervised injection sites. We both come from the same city. I would like to ask the member where in Winnipeg North, his riding, he would want a safe injection site.

*Government Orders*

**Mr. Kevin Lamoureux:** Mr. Speaker, first let me straighten out one of the facts that I would dispute. If we take a look at health care expenditures today, we are spending more on national health care now than we have ever spent on health care. The reason is because of a health care accord agreement that obligates the government, by law, to continue to increase the financing of health care. It was the Jean Chrétien government that took away the tax point shift in favour of having cash up front, which ultimately saved the long-term health care cash contributions.

The Liberal Party of Canada has led the way in ensuring there would be cash in the purse when it came to distributing money so that we could guarantee to Canadians that they would have a first-class health care system. That is something of which I am very proud.

With regard to a safe site in Winnipeg, I am very much open to ideas that would enable taking drugs and the paraphernalia that comes with it off our community streets and out of our schools. If it could be concentrated through a safe site of some form, I would be open to it. More important, I believe many stakeholders in Winnipeg would also be open to it.

**Mr. Nathan Cullen (Skeena—Bulkley Valley, NDP):** Mr. Speaker, I thank my friend from Winnipeg North for his comments and for seeing this effort for what it is.

This is not a health minister who is conducting an effort to make Canada a more healthy place or Canadians healthier people. This is a government that is rolling from one scandal to the next, looking to shore up the base and to fundraise off legislation that comes before Parliament, as if that is all Parliament was good for: some activity for the fundraisers across the way and for a government that has lost its way.

My question is quite specific. If the government is interested in having less crime and improving the health of Canadians, with regard to the one injection site we do have in the country, the current government spent hundreds of thousands of dollars, if not millions of dollars, of taxpayer money to sue all the way to the Supreme Court of Canada. The Supreme Court ruled against the government and its efforts to shut down a health initiative. The one site we have is supported by the police, the local municipalities, and the local voices who live there, knowing that it actually reduces harm. Why then would the Government of Canada, regardless of its political orientation, not be supportive of more of those projects, where they are deemed to fit, and where there is a problem, and where Canadians are asking for them?

When it comes to pipelines and other projects that it wants to push through, the government does not care about local voices. However, when it comes to safe injection sites, suddenly the public has a veto.

I wonder why the double standard exists. We all know why that is; it is ideology coming from the Conservatives.

• (1245)

**Mr. Kevin Lamoureux:** Mr. Speaker, once it is all said and done, we need to look at ways we can enrich our communities through solid social programming. Whether it is in Montreal, Toronto, Winnipeg, Edmonton, Vancouver, Halifax, or even smaller municipalities, there are social needs.

I am not suggesting for a moment that each of these communities needs to have a safe injection site. I am not suggesting that at all. We are saying that, as a national government, there is an obligation to work with different stakeholders in trying to make all of our communities safer and to have a cleaner environment, for our children and for everyone else.

When we are talking about strong social issues, such as heroin, cocaine, and whatever else it might be, a more proactive approach would be a positive thing.

[*Translation*]

**Ms. Lysane Blanchette-Lamothe (Pierrefonds—Dollard, NDP):** Mr. Speaker, I am pleased to speak to the bill, but I think this is a sorry debate. This debate is clearly demonstrating that ideology conflicts with the facts.

Bill C-2 before us would amend the Controlled Drugs and Substances Act, which would prevent groups from setting up supervised injection sites and offering those services across the country.

I would like to talk about this issue in relation to what is currently going on in Quebec. I have here with me a report by the Agence de la santé et des services sociaux de Montréal. Quebec began addressing this issue over 13 years ago. For more than 13 years, health and social services professionals have been working on this, studying the issue, conducting pilot projects and consulting agencies to see how Quebec may or may not want to integrate services such as supervised injection sites. Quebec has been working hard on this and I am sure other parts of the country have as well.

In 2000, at the request of the department of health and social services, Quebec formed a cocaine addicts intervention committee. The committee's mandate was to come up with strategies to improve the quality of life of cocaine addicts. One year later, the committee recommended setting up a pilot project. As you can see, these consultations started quite some time ago.

In 2003, the same department mandated the Agence de la santé et des services sociaux de Montréal to conduct a feasibility study for setting up injection sites. The advisory committee made two proposals: first, a pilot project to create a drop-in centre and social integration services for injection drug users; and, second, consider adding a supervised injection site to existing services.

Experiments and consultations followed. It would be a shame if all this work of the past 13 years became increasingly difficult or was even tossed aside because of a bill that came out of nowhere and is based on Conservative ideology.

Institutions such as the Institut national de santé publique du Québec or the Coalition réduction des méfaits, which is made up of 32 community organizations, are involved in the process. The process takes into account expert opinions and what is happening in Quebec and the City of Montreal.

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This is not a situation where you can barge in and do something on an impulse or because it is what a voter base is suggesting. This is serious. Here is how it works: there is a consultation and pilot projects are set up. That is a very important step. I think the Conservatives' approach should be modelled on this sort of process, which takes facts and expert opinions into account, shows compassion and reflects the differences in the communities affected.

This very important step could become obsolete, meaning that it could end up being pointless. The Conservatives' bill is undermining 13 years of consultations and meaningful work. It is unfortunate, and it is not something we should accept.

*Le Devoir* recently published an article about the reaction of stakeholders in Quebec to Bill C-2. I would like to share a quote from the article:

Cactus Montréal and public health director Dr. Richard Massé are concerned that their jobs will become more difficult. [Dr. Massé wondered] how much of a say minority groups will have in this bill. These services save lives. It is too early to say what will happen, but this appears to create some significant barriers, even though the Supreme Court clearly said that not providing these services was a violation of human rights.

Those involved in the process are concerned and are wondering whether this will make their jobs harder, and understandably so.

● (1250)

I am only naming those ones. However, all the experts who appeared before the committee spoke against this bill. There is no reason to believe that this bill would be beneficial for people's health. It is completely ironic that the Minister of Health would defend such a bill. Indeed, the Minister of Justice should be rising to defend his tough on crime agenda.

Frankly, the connection between Bill C-2 and health is not trivial; it is actually significant. For that reason we should vote against Bill C-2. If we really care about the health of Canadians, then, well, this bill is just plain wrong.

There is a supervised injection site in Vancouver and it is obviously effective. The evidence is there. There has been a 35% decrease in overdose deaths in Vancouver since this site opened. Furthermore, InSite has been shown to decrease crime, communicable disease infection rates and relapse rates for drug users.

This is what I am talking about. If we truly care about the health of Canadians, we must understand that this bill does not make any sense in terms of improving people's health. If the government really wants to help people stay healthy, it will make resources available to respond to their needs and to prevent crime, death and disease. It is high time we trusted the experts working on the ground when they speak in favour of or against such a bill.

I would like to draw the members' attention to a very concrete example involving another bill that I considered. This bill had a nice title and promised to fight elder abuse. In fact, it made only a small amendment to the Criminal Code, which might result in harsher sentences for crimes of elder abuse, although that is not a given. The NDP voted in favour of this bill and supported it.

However, we have to really look at the facts here. Temporary committees were created as part of the federal parliamentary process, and an all-party committee proposed some possible solutions, saying

that intervention and prevention programs were needed to combat elder abuse. That is what we need to focus on if we really want to combat elder abuse. The bill was supposed to address elder abuse, and yet it made only one small amendment that would not really change anything in order to address this issue.

The same thing is happening here. An issue has been put on the table. However, if we really want to improve people's health, that is not the right direction to take.

I would like to talk about AJOI, an organization created on the West Island in Montreal to help at-risk street youth. First of all, people did not think that problem existed on the West Island. It took a long time for street youth at risk of becoming involved in crime to have access to this service. The project was created thanks to exceptional stakeholders, like Mr. Langevin, who believed in such projects. A number of stakeholders are now involved in the centre, which is well known in the community. This is the kind of project that really helps people.

Furthermore, the Centre Bienvenue provides supervised apartments for people with intellectual disabilities. That centre had to fight to exist. The neighbours did not want it in their community because they said it would increase crime and reduce property values. Ultimately, after speaking with and consulting their neighbours, the Centre Bienvenue officials convinced them and informed them of the reality of the situation. Thanks to that work in the community, people now have such a centre to turn to.

Here is what the Conservatives should do: instead of responding to people's fears and spreading false information, they should educate people about the benefits of supervised injection sites and forge ahead by reassuring Canadians. That would be the right thing to do for Canadians.

● (1255)

**Mr. Guy Caron (Rimouski-Neigette—Témiscouata—Les Basques, NDP):** Mr. Speaker, I have heard many arguments, including those of my colleague. What strikes me is the extremely narrow-minded view that the Conservative members and their government have on this issue. No one in the House wants to encourage drug use, but we cannot ignore reality. People with drug addiction issues are better off when they are surrounded by the centre's staff rather than being forced into back alleys. I would like to hear my colleague's thoughts on the huge gap between the Conservative government's position and that of both the opposition members and medical experts, who are concerned about the bill and who are saying that these types of centres need to exist if we want to truly tackle the problem.

**Ms. Lysane Blanchette-Lamothe:** Mr. Speaker, I would like to thank my colleague for his question.



When the Conservatives ask us to support Bill C-2 in order to keep heroin out of our back yards, it shows just how out of touch with reality they really are. Safe injection sites do not bring heroin into your neighbourhood. This is not a question of wanting to keep heroin out of our neighbourhoods, but of how it can be controlled. Do we want people on the street, unsupervised, without access to help or services? Or do we want them supervised, with access to services?

They are there anyway. They are not going to disappear. The problems are not going to disappear. We need to ask ourselves how we can offer services in order to address the problem. Minimum sentences are not always the answer. They do not reduce crime. We know that. There is proof from around the world. Intervention and prevention are what truly fight crime and improve quality of life.

[*English*]

**Hon. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Mr. Speaker, it strikes me that these supervised injection sites make the people involved almost complicit in the drug addiction. Why not have these people pursue other methods of rehab? There are other ways to get off the drug addiction. We need to be aggressive with those methods.

Saying that it is okay to inject oneself at any time is sending the wrong message. They would have to do it 100% of the time for it to reduce the harm. I would be very surprised if drug users actually use the facility 100% of the time.

• (1300)

[*Translation*]

**Ms. Lysane Blanchette-Lamothe:** Mr. Speaker, I want to thank the hon. member for sharing his opinions and concerns with us. We can indeed share our opinions in the House of Commons.

However, I wonder how the hon. member's opinion stacks up against that of all the doctors, all the associations and all the community groups, the people involved in the everyday aspects of this issue. I am not claiming to be better than him. My opinion is probably as good as any other, but we are not debating opinions here. We have facts. The fact is that these sites reduce drug use, crime and the spread of disease. Let us stop fearmongering, as the hon. member does when he says he fears this or gets the impression that. Let us listen to our experts. I would like to ask my colleague what he is saying to Quebec, which has made serious efforts together with health experts and stakeholders to deal with this for the past 13 years. Can his opinion or fears throw away 13 years of work or sabotage those efforts?

I think we need to ask questions in the right order and start looking at the facts and respecting the work that has been done by the communities, the provinces and health services agencies.

**Mr. Guy Caron (Rimouski-Neigette—Témiscouata—Les Basques, NDP):** Mr. Speaker, it is no secret: the Conservatives' Bill C-2 is the product of this government's opposition to the decision by the Supreme Court, which found that the government should uphold the exemption that allows Vancouver's supervised injection site, InSite, to remain open.

InSite is North America's first and only legal supervised injection site. It seems obvious that despite the many people speaking in

### *Government Orders*

favour of opening at least three more sites elsewhere in Canada—in Toronto and Ottawa in particular—Bill C-2 is simply meant to create obstacles for anyone wishing to undertake such initiatives.

Even the Canadian Medical Association said in its press release that it “is deeply concerned that the proposed legislation may be creating unnecessary obstacles and burdens that could ultimately deter creation of more injection sites”.

The Supreme Court, medical community experts and street workers all agree that this type of approach “is a central pillar in a comprehensive public health approach to disease prevention and health promotion”.

In its decision, the Supreme Court ruled that the evidence indicated that a supervised injection site will decrease the risk of death and disease, and where there is little or no evidence that it will have a negative impact on public safety, the minister should generally grant an exemption.

The Conservatives have managed to inflate statistics on crime, repeat offenders and abortion, and are simply continuing to impose their political and moral agenda and ignoring all the evidence and trends before them.

These situations show the problems associated with cuts to statistical and psychosocial studies, the collection and analysis of information and the social sciences in general. This results in decisions being made solely on the basis of beliefs and prejudices, not facts.

A number of groups believe that this bill is irresponsible. The Canadian HIV/AIDS Legal Network and the Canadian Drug Policy Coalition issued a joint news release, and had this to say about Bill C-2:

The bill is an irresponsible initiative that ignores both the extensive evidence that such health services are needed and effective, and the human rights of Canadians with addictions. In essence, the bill seeks to create multiple additional hurdles that providers of health services must overcome.

The bill imposes about twenty conditions that must be met in order to obtain an exemption under the Controlled Drugs and Substances Act, especially with respect to the consultation of experts and groups. Proponents of the project would be solely responsible for fulfilling the requirements for consultations with government and community stakeholders.

The irony is that when InSite was being established in 2003, the Mayor of Vancouver claimed the following:

[*English*]

[It] was launched after extensive dialogue in the local area, and with thorough city-wide debate, and its programming continues to be shaped with ongoing input from nearby residents, businesses, and service organizations.

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[Translation]

This bill is based entirely on bad faith and stereotypes and has been promoted through a fearmongering campaign. The very day the previous bill, Bill C-65, was introduced, the government began a shock advertising campaign entitled “Keep heroin out of our backyards”. The campaign speaks out against supervised injection sites in utter disregard for all the scientific arguments, statistics and research that managed to convince every judge who sits on the highest court in the country.

On the campaign site, it reads:

Yet, as I write this, special interests are trying to open up these supervised drug consumption sites in cities and towns across Canada—over the objections of local residents and law enforcement....Add your name if you demand a say before a supervised drug consumption site is opened close to your family.

The government did a good job of scaring people.

This campaign was strongly criticized by organizations including the Canadian Drug Policy Coalition, which felt that the Conservatives' initiative was clearly:

- (1305)

[English]

...an attempt to stir up opposition to these life-saving services and to the people who use these services.

[Translation]

The coalition also criticized the language used in the campaign, which directly targets families by calling into question the safety of their loved ones.

That is irresponsible and dishonest. InSite is not located in a residential neighbourhood right next door to an elementary school. It is located in one of the poorest and most violent neighbourhoods in Canada, Vancouver's Downtown Eastside.

Many experts testified in committee about the benefits this centre has brought into the lives of those who use it and the positive impact it has had on their environment. I would like to quote Ahmed Bayoumi, a doctor and researcher who continues to fight for the establishment of other supervised injection sites. He had this to say about InSite:

[English]

[InSite] has been associated with a reduction in public injecting, no increase in drug-related loitering or drug dealing, no changes in crime rates, no evidence of increased relapse among people who had stopped injecting drugs, and decreased fatal overdose in neighbourhoods near Insite. Among people who used the facility, there was an observed increased rate of referrals for drug treatment and a decreased rate of sharing of injection equipment.

[Translation]

Needless to say, there was no shortage of reactions when this bill was introduced, and those reactions were not really complimentary to the government.

Let us begin with the Supreme Court, which in its September 29, 2011 ruling basically accused the government of acting in an arbitrary manner and overestimating the risk associated with these types of facilities as compared to the positive effects they can have. According to the Supreme Court:

[English]

According to the Supreme Court, applying the Controlled Drugs and Substances Act to InSite was:

...arbitrary, undermining the very purposes of the CDSA, which include public health and safety. It is also grossly disproportionate: the potential denial of health services and the correlative increase in the risk of death and disease to injection drug users outweigh any benefit that might be derived from maintaining an absolute prohibition on possession of illegal drugs on Insite's premises.

[Translation]

Along the same lines, Dr. Bayoumi had this to say about Bill C-2:

[English]

...sets up barriers and puts in place opaque mechanisms that could lead to narrow perspectives dominating the decision. It is a step backwards for informed health policy decision making.

[Translation]

In a press release issued in response to Bill C-2, which was Bill C-65 at the time, the Canadian Medical Association stated that this bill:

...is founded upon ideology that seeks to hinder initiatives to mitigate the very real challenges and great personal harm caused by drug abuse.

In fact, even Vancouver's Mayor Robertson defended the centre, saying he considers it a key resource and part of any good public health policy. He concluded his press release by saying:

[English]

Especially in light of the Supreme Court's affirmation of the program's proven ability to prevent overdose deaths and the spread of disease, I am strongly opposed to any legislative or regulatory changes which would impede Insite's successful operations.

[Translation]

In the way it has managed this issue, the Conservative government has demonstrated its utter contempt for the Supreme Court, which had to act as a counterbalance to the government's ideological policies.

The Conservatives never hesitate to lower the standard of debate around real arguments in order to spew rhetoric or propose strategies simply to achieve their own ends.

This is not only appalling, but unworthy of someone who is supposed to carry the responsibilities of the Minister of Health.

This government is ignoring the Supreme Court's clear, unanimous decision by introducing a bill that distorts the nature of the rationale given by the judges.

Using our role as legislators in this way is unacceptable and proves only one thing: the Conservatives will do anything to achieve their own ends.

In his book on the Prime Minister and his model of governance, author Christian Nadeau said something that rang very true and still holds true today: the Prime Minister is giving himself four years to:

...overhaul the country's institutions so that the Conservatives have the maximum possible room to manoeuvre in terms of citizens' rights and security, freedom of conscience and social justice...

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When we are dealing with supervised injection sites, we should be listening to and supporting the experts and the people on the front lines, the people who work with drug addicts every day. We should take their advice.

The government has no scientific studies to back its claims. Sites like these are not there to encourage drug use. Far from it. It has been proven that these kinds of sites can help decrease drug use and addiction. If we keep these people underground, how will street outreach workers and health care experts be able to help the addicts who want help?

These kinds of sites bring addicts out of hiding so that we can make contact with them, provide support and eventually help them rebuild their lives.

I urge the government to rethink its approach. I urge them to withdraw Bill C-2 because the official opposition will clearly be voting against this bill at all stages.

●(1310)

In my opinion, this bill will do some very serious damage to the fight against drug addiction.

**Ms. Lysane Blanchette-Lamothe (Pierrefonds—Dollard, NDP):** Mr. Speaker, I thank my colleague for his well-informed speech. He must have named more than 10 stakeholders, individuals, associations and groups in this area that are opposed to this bill. That shows just how outraged experts are about Bill C-2 and the government's plan.

I would like to know what my colleague thinks about property values, which a parliamentary secretary mentioned during this debate. She is concerned that opening a supervised injection site will lower property values in the surrounding neighbourhood. I understand that. However, I think that that reasoning would lead us to close all prisons, all assisted living facilities, and so on. Do we want to stop providing all services that could bother the neighbours? Should we not try to combat these kinds of prejudices to reach some kind of social consensus so that we can provide these services?

**Mr. Guy Caron:** Mr. Speaker, that quote from the parliamentary secretary in question was quite unfortunate. This issue should not be political or even economic, as she presented it—it is a public health issue. The mayor of Vancouver, Mr. Robertson, is well aware of this problem in his city, in his community. He is smart enough to see that sites like InSite, for example, are there to reduce risks not just for users, but also for the community. Driving drug users into hiding does not make communities safer.

I do not necessarily want to talk about property values, because that has absolutely nothing to do with this debate. What is needed right now is to reduce the harm caused by drug use, to reach people where they are, to give them a place where they can feel safe, and to perhaps help those who are desperately trying to turn their lives around and who need this type of assistance. That is the approach we should take to studying this problem, rather than considering it from an economic perspective focused on property values or making it into a political issue, as the Conservative government is doing with its advertising campaign.

[English]

**Hon. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Mr. Speaker, I would like to comment on the previous member's comments about property values. I am sure she did not mean to say that people with disabilities living in neighbourhoods would reduce property values. It may have been the translation. I am sure it was. I know she would not say something like that.

With regard to harm reduction, we have seen that there is a strong demand from people across the country who do not want this to happen, particularly in their neighbourhoods. The opposition complains about Conservatives fundraising on the issue. If people did not care, they would not send their money to support the government bringing in the legislation to stop these kinds of heroin dens being created. People do not want this type of help for addicts. They want different kinds of help for addicts.

●(1315)

[Translation]

**Mr. Guy Caron:** I find that unfortunate. The language used by the Conservative Party in its advertising is not intended to calm fears, but rather to exacerbate them. It is obvious that drug issue is still taboo in our society. People are instinctively afraid of the issue and afraid to address it. The government should be in a position to understand the actual risks to the community and use the facts and statistics pertinent to this issue. These sites in no way jeopardize the communities where they operate. Rather, they are set up in the communities and neighbourhoods that need them the most.

Clearly, the firearms registry was not enough for the Conservative government. It lost that fundraising tool, and therefore needs to find others. The government now wants to turn this very serious problem into a political issue to make it easier to find funding.

The findings are clear, especially those of doctors and street workers: supervised injection sites, as they are known, reduce risks not only for drug users, but also for the communities and areas where they are located.

[English]

**Mr. Mike Sullivan (York South—Weston, NDP):** Mr. Speaker, I am pleased to rise today to speak to the bill, which was formerly Bill C-65 and is now Bill C-2.

The bill is on something about respect for communities, but that is not really what is going on here. It is an attempt to undermine a Supreme Court decision by putting in rules and regulations, which the Supreme Court has asked the government to do, that would make it virtually impossible to actually abide by the Supreme Court decision, which says that these places should be permitted to exist.

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Once again, we have a government that ignores facts, statistics, and evidence. This is a government, do not forget, that wanted to eliminate evidence by closing down such things as the long form census and the Experimental Lakes Area. The Conservatives do want there to be evidence. They do not want Canadians to know what they are up to by there being evidence of what might happen.

We have a government that acts, time and again, in opposition to evidence-based decision-making. It acts in opposition to science-based decision-making. It acts in opposition to decision-making that is for the public good. Instead, its actions seem to be knee-jerk reactions that give the Conservatives opportunities to raise money to get elected and to continue this practice of doing things that are not in the interest of the public.

This is yet another example of an action by a government that is attempting to raise alarm bells for citizens about what might or might not happen in their neighbourhoods.

So far, only three communities I am aware of have actually asked for the authority the bill would grant, albeit without going through some pretty steep hoops. They are Toronto, Vancouver, and Ottawa.

My riding is in Toronto, in one of the most disadvantaged neighbourhoods in Ontario. It is against that context that I want to talk about why it is the NDP believes that the bill is completely wrong-headed. In fact, the bill would be defying the Supreme Court ruling.

The Supreme Court ruling directed the government to come up with mechanisms to allow these things to happen. Instead, we are getting a bill that would make it well-nigh impossible for a community, a public health agency, doctors, and respected members of a community to actually put in place a safe injection site where public harm and harm to individuals would be reduced.

If the Conservatives are opposed to reducing harm, why are they in government? The whole point of us being here is to try to reduce harm. However, the bill would actually increase it in places where we should be trying to reduce it.

The government has taken its cue, based on the questions I have been hearing so far today, from the notion that people do not want one of those things in their neighbourhood. Well, I walk in the park in my neighbourhood. It is a big, beautiful park on the banks of the Humber River, and there are needles in that park from drug users who have not had a safe place to inject, and therefore they litter the ground. One cannot walk safely in my little park, because there is no place for harm reduction in my neighbourhood. There is no harm reduction place where people can go to inject the drugs safely.

An addiction is recognized by medical authorities, the public, insurance companies, and even the reputable sources of disability recognition as, in fact, a disability, not a crime. It is not something to be looked down upon. We need to find ways to help individuals who have addictions.

One way to help these individuals, which has been successfully promoted in Vancouver, is a safe injection site. It is a place where it has been found that harm is reduced for the public, both the individuals who are addicted and the public at large, by providing

them with a place they can go to safely inject themselves with what we otherwise understand are dangerous drugs.

• (1320)

We would all love it if these things did not exist, but they do exist. They exist in a manner in which the outcome of the use of these drugs in unsupervised ways, in unsafe ways, has led to significant increases in other diseases, such as HIV and hepatitis C. Who is going to look after those individuals when those diseases get the better of them? Those diseases will eventually get the better of those individuals, and it is the public, not the individuals themselves, that will pay for their health care.

We are dealing with a government that is preaching about the government having to watch every penny. Here is a situation in which the taxpayer, which Conservatives claim to be on the side of, will end up paying more because of this shortsighted bill. The taxpayer will have to look after the individuals who eventually come to hospitals and medical facilities as a result of diseases we could have prevented and limited had we been dealing with them in a more proactive way early on, when these individuals started to inject themselves unsafely.

We should be doing more to try to deal with the addictions themselves. As we have seen in the press very recently, in a big and public way, addictions are a real problem for individuals in my city. One of the first things that happens to addicts is that they deny it. They do not have a problem.

I was a union representative for many years, and many were the individuals who claimed they had no problem. Some we were able to help. Some got treatment. Others did not, and unfortunately, they became a burden to the health system first, and then, in some cases, they passed away. Those individuals were a burden on society, not because they were not able to get the help they needed but because they denied that they had that problem in the first place.

The same is going to be true of individuals who are seeking help at the safe injection sites. Some of them do not believe they have a problem. How are we going to convince them to get help unless we lead them to the help? That is part of what the safe injection sites do. They provide a safe place where addicts can get counselling and where they can get attention from nurses and doctors. They can therefore be exposed to the help to get them free from their addictions.

That kind of thing is being asked for by the City of Toronto as part of its request to the federal government. In fact, the City of Toronto will be speaking on this matter when the bill goes to committee, because it has recommended that the Board of Health make a submission to the federal government to register its opposition to Bill C-65. This is a recommendation from the medical officer of health of Toronto, by the way. It will also recommend the development of a more feasible CDSA exemption application process for supervised injection services, in consultation with relevant provincial public health, public safety, and community stakeholders, including people who use drugs.

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The Board of Health urges the provincial government to fund the integration of supervised injection services on a pilot basis, but they cannot do that if the federal government will not give its permission. That is what we are up against. We are up against a government that, as evidenced by the questions I have been hearing so far, is fundamentally opposed to the existence of these things anywhere. It has put into the bill such blockades or walls to get over that it will be virtually impossible for any of the cities in our country to create a supervised injection site with permission from the government.

• (1325)

[*Translation*]

**Mr. François Lapointe (Montmagny—L'Islet—Kamouraska—Rivière-du-Loup, NDP):** Mr. Speaker, I want to thank my colleague for his speech, which was well thought out and not blinded by ideological arguments, like those made by the people across the way. Once again, this is a public health issue.

There is one aspect that I can relate to. I used to have the pleasure of doing business in neighbourhoods such as Mile End in Montreal and in very densely populated neighbourhoods on the Island of Montreal. I remember that there were some parks that were designed for young children. The parks had slides and teeter-totters. However, on days when I was in the neighbourhood, I could not leave my son, who may have been five at the time, alone and unsupervised barely three feet away from me because far too often there were needles near the bushes or play structures. That is the real problem. That is what is prompting community groups and entire neighbourhoods, including doctors and police officers, to come together and say that it would be better if they geared their approach to the people who are struggling with the misfortune of being hard drug users.

It is rather hypocritical of this government to not want see this reality. I would like my colleague to say a few words about this completely hypocritical aspect of refusing to see the truth and listen to the facts.

[*English*]

**Mr. Mike Sullivan:** Mr. Speaker, I thank my colleague for that excellent question. That is precisely why community leaders, medical officers of health, and the medical community have rallied around the notion of finding a safe place for people who cannot control their addictions, whom we understand to be disabled Canadians, to inject their injectables.

Public health would be increased. We would have a better place to live. We would not have needles in parks. We would not have an increase in HIV and hepatitis C. We would not have individuals who are finding public places to inject themselves, leading to a lack of safety in communities. This is about public safety, not ideology.

[*Translation*]

**Mr. Robert Aubin (Trois-Rivières, NDP):** Mr. Speaker, I want to thank my colleague for his presentation and, in the same breath, say that it saddens me that since the beginning of our debate on this topic, not a single government member has risen to present the government's position on this bill.

I would like know whether my colleague has noticed the same thing. In the bill on environmental assessments, for example, the government did everything it could to reduce the deadlines in order

to allow party cronies to move forward with their projects as quickly as possible. However, when it comes to Bill C-2, the government puts up as many obstacles as possible in order to prevent projects from moving forward in communities that are prepared to welcome sites such as InSite. Has the hon. member noticed the same thing?

• (1330)

[*English*]

**Mr. Mike Sullivan:** Mr. Speaker, I too have noticed the lack of government members speaking on this bill, which leads us to wonder just how important it is to the government members.

It is very important to the people of Canada. It is very important to the people who live in the cities of Toronto, Ottawa, and Vancouver that they have the ability to have a safe injection place to reduce public harm, not just to the individuals who are injecting themselves but to the community at large. This bill would get in the way of that. It would defy the Supreme Court decision by putting in place huge obstacles to the creation of safe injection sites.

One would think that in a parliamentary democracy, we would have a robust debate, back and forth, between both the government and opposition members. However, to this point, there has been very little from the government members.

[*Translation*]

**Mrs. Sana Hassainia (Verchères—Les Patriotes, NDP):** Mr. Speaker, before I begin my speech, I would like to set the record straight. Are the Conservatives aware that, in September 2011, the Supreme Court ruled in favour of InSite? The court noted the effectiveness of the site and the very need for it in Vancouver's east side. I do not understand why we are still debating a law that will ensure that these kinds of organizations will not be able to exist in Canada.

Let us put this in context. We should begin by talking about what is happening in that Vancouver neighbourhood—and many other Canadian cities, I might add—and then try to understand why a place such as InSite is critical to the safety of the neighbourhood and why it is beneficial.

Vancouver's downtown east side is home to some of the poorest and most vulnerable people in our country. There are nearly 4,600 intravenous drug users there, which represents approximately half of the entire city's intravenous drug users. That is significant. That proportion is not at all reflective of the actual size of the neighbourhood, which is very small and has few houses. There are various factors that contribute to the high concentration of drug users in that area of the city. We could talk about the numerous rooming houses, the deinstitutionalization of people with mental health issues, the effects of drug policies throughout the years and, of course, the availability of illicit drugs on the street.

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Before InSite came about, the things you could see on the streets were mind-blowing: people sitting on the ground or sitting on steps, putting on a tourniquet and shooting up. That was a common occurrence in this neighbourhood. Drug addicts come from all kinds of backgrounds, but the one thing they have in common is that they all had difficult childhoods or experiences that led them to drugs. Anyone walking through that neighbourhood, including children, would come across dirty needles.

The researchers who came up with the idea of InSite thought long and hard about how to create a site that would address all of these problems. InSite was developed as part of a public health project by the Vancouver Coastal Health Authority and its community partners, in response to a twelve-fold increase in overdose-related deaths in Vancouver between 1987 and 1993. At the time, the Vancouver area was seeing huge increases in the rates of communicable diseases, such as hepatitis A, B and C, and HIV, among injection drug users.

InSite first received an exemption in 2003 for conducting activities for a medical and scientific purpose, under the Controlled Drugs and Substances Act, so it could provide services and conduct research on the effectiveness of supervised injection sites. Section 56 of this act gives the minister the authority to approve facilities that use drugs for a medical and scientific purpose or for a law enforcement purpose. In 2007, the drug treatment centre OnSite was added to the facility.

In 2008, InSite's exemption under section 56 expired, and the Minister of Health rejected InSite's renewal request. This decision sparked a string of legal challenges leading to the Supreme Court of British Columbia ruling that InSite should be granted a new exemption. The federal government brought the matter to the B.C. Court of Appeal, which also ruled that InSite should remain open. Finally, in 2011, the Supreme Court of Canada ruled that the minister's decision to close InSite violated the charter rights of its clients and was "arbitrary, undermining the very purposes of the CDSA, which include public health and safety".

The court based its decision on section 7 of the charter, which states: "Everyone has the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice". The court stated:

The infringement at stake is serious; it threatens the health, indeed the lives, of the claimants and others like them. The grave consequences that might result from a lapse in the current constitutional exemption for Insite cannot be ignored. These claimants would be cast back into the application process they have tried and failed at, and made to await the Minister's decision based on a reconsideration of the same facts.

The Supreme Court ruled that InSite and other supervised injection sites must be granted a section 56 exemption when the opening of such sites "will decrease the risk of death and disease, and there is little or no evidence that it will have a negative impact on public safety". After this decision was handed down, public health authorities and agencies in Toronto, Ottawa and Montreal began planning to open supervised injection sites.

● (1335)

Why are we here debating this issue when we clearly did not need to come back to it? We are doing so because once again the Conservatives decided to change a law so that it reflects their ideology. They came up with a deeply flawed bill that is based on an

anti-drug ideology and false fears for public safety. This is another attempt to rally the Conservative base, as evidenced by their "Keep heroin out of our backyards" campaign that started mere hours after Bill C-2 was introduced in Parliament. This bill will make it almost impossible to open safe injection sites and will put heroin back in our neighbourhoods.

The NDP feels that decisions about programs that could benefit public safety should be based on fact and not ideology. Evidence has shown that supervised injection sites effectively reduce the risk of contracting and spreading blood-borne diseases, such as HIV and hepatitis C, and reduce deaths from overdoses. Evidence has also shown that these sites do not negatively affect public safety and that, in certain cases, they promote it by reducing the injection of drugs in public, the violence associated with such behaviour, and drug-related waste. Safe injection sites make it possible to strike the appropriate balance between public health and public safety. They also connect people in urgent need of health care with the services they need, such as primary health care and drug treatment services.

This bill imposes a far too heavy burden on communities, which would have to prove what the benefits of such a site would be and could then still be denied an exemption. As the Supreme Court pointed out, this bill brings us back to the arbitrary decision made by the minister against InSite in 2008.

The NDP believes that any legislation introduced by the Conservative government must respect the Supreme Court ruling and strike a balance between health and public safety.

This bill flies in the face of the 2011 decision, which ordered the minister to consider granting exemptions for supervised injection sites in order to strike a balance between public health and public safety. That decision ordered the minister to examine all the evidence in light of the advantages of supervised injection sites, rather than coming up with a long list of principles on which to base decisions.

In closing, I would like to add that the NDP believes that any new legislation regarding supervised injection sites must respect the spirit of the Supreme Court ruling, which this bill does not do. We believe that harm reduction programs, including supervised injection sites, should be granted exemptions based on evidence that they will improve public health and save lives, not on ideology.

● (1340)

**Ms. Laurin Liu (Rivière-des-Mille-Îles, NDP):** Mr. Speaker, I thank my hon. colleague for her speech.

I wonder if she could provide some figures that support our position on Bill C-2. Can she talk about the fact that such sites reduce harm as well as the risk of people injuring themselves? Can she tell us about people who agree with our position?

*Government Orders*

**Mrs. Sana Hassainia:** Mr. Speaker, there are numerous associations that I could name. For example, the Canadian Medical Association and the Canadian Nurses Association both criticized the fact that the government introduced this bill. They believe, as do we, that these types of organizations should be encouraged.

Pivot Legal Society, the Canadian HIV/AIDS Legal Network, and the Canadian Drug Policy Coalition issued this statement on the bill:

The bill is an irresponsible initiative that ignores both the extensive evidence that such health services are needed and effective, and the human rights of Canadians with addictions.... It is unethical, unconstitutional and damaging to both public health and the public purse to block access to supervised consumption services.

I will provide some numbers that demonstrate how effective these sites are, just as my colleague asked. With regard to public safety, 80% of people questioned who work in Vancouver or who live in that part of Vancouver support InSite. They have come to realize that it is very effective.

I can also say that the rate of overdose-related deaths in east Vancouver has dropped by 35% since InSite opened. That is not an insignificant number. In addition, during a year-long study, there were 273 injections at InSite and none of them were lethal, thanks to the on-site nurses and doctors.

**Mr. Robert Aubin (Trois-Rivières, NDP):** Mr. Speaker, I would like to thank my colleague for her presentation.

In this debate, people have mentioned InSite frequently for the past while, and that is understandable. Can my colleague can provide more information about how people in her own riding perceive these facilities that help people who are addicted to drugs? This bill seems to be the epitome of “not in my backyard” syndrome. I think there may well be many ridings where people are in favour of providing assistance to people who have these problems.

**Mrs. Sana Hassainia:** Mr. Speaker, I thank my colleague for his question.

Yes, for the last little while, the members on the other side have been saying that the NDP wants to encourage people to take drugs. In fact, the only thing we want to do is keep people affected by this problem safer.

People who use drugs have a problem. We have to help them; we have to be proactive and set up agencies that will help them and allow them to use drugs safely, precisely in order to stop the spread of diseases transmitted by dirty needles. I am absolutely certain that the people in my riding would rather have a facility like InSite than see dirty needles when they are taking a walk in the park.

[*English*]

**Mr. Kevin Lamoureux (Winnipeg North, Lib.):** Mr. Speaker, I want to quickly pick up on the one point the member referenced. There are many communities. I represent Winnipeg North, where there are many social needs. When we walk around our communities, we see there are back lanes around some of the community schools with drug-related issues and paraphernalia surrounding our facilities.

There is a need for the federal government to work with the different levels of government to ensure that we can make our communities healthier places to live by establishing and having proactive, solid social programs.

Would the member comment on that and how it would apply to all areas?

[*Translation*]

**Mrs. Sana Hassainia:** Mr. Speaker, I would like to thank my colleague for his comment.

What I can say, in conclusion, is that the government is still using the same old strategies to cut back services to citizens. It is not concerned with health or with public safety. These are important issues. When dealing with these issues, we have to put partisanship aside and make sure our citizens, Canadians, have a safe place to live.

● (1345)

**Ms. Laurin Liu (Rivière-des-Mille-Îles, NDP):** Mr. Speaker, I am happy today to talk about Bill C-2, formerly known as Bill C-65.

I am pleased to have an opportunity to denounce this bill, which is intended to terminate the operation of supervised injection sites: nothing more, nothing less. It is in direct opposition to a decision the Supreme Court handed down in 2011.

This is a bill that betrays the irrational ideology of the Conservatives, who believe that repression is the only way to deal with this scourge.

We are not the only people in the world to have considered this issue. There are more than 70 cities worldwide that have supervised injection sites. They are found mainly in Europe and Australia. In Canada, there is but one supervised injection site: InSite, which opened in 2003.

In order to use the services of InSite in Vancouver, users must be at least 16, sign a user agreement, comply with a code of conduct and not be accompanied by children. Users bring their own substances, and the staff provide clean injection equipment. Emergency medical aid is available if required, and expert staff are on site to provide health and social service support.

In addition to providing services to drug users in order to minimize the impact on their health and on public health, InSite conducts research on the effectiveness of supervised injection facilities.

This injection site has already demonstrated its effectiveness by significantly reducing deaths by overdose. It is estimated that overdose deaths in Vancouver have decreased by 35% since the site opened. In addition to reducing overdoses, the facility helps to reduce the rates of communicable diseases among injection drug users. I am referring to hepatitis A, B and C and HIV/AIDS, for example.

Ever since it was established by the Vancouver Coastal Health Authority and its community partners, this public health project has generated controversy. Those who believe only in repression saw it as an encouragement to use drugs.

### Government Orders

At first, the site was able to open because it was given an exemption under the Controlled Drugs and Substances Act to operate for medical and scientific purposes. In 2008, the exemption for InSite expired and the health minister denied InSite's application to renew it. This decision triggered a series of court cases, which led to the B.C. Supreme Court decision that InSite should be granted a new exemption. The federal government then appealed this decision. One after the other, the B.C. Court of Appeal and the Supreme Court of Canada ruled that the closure of InSite violated the rights of its patrons under section 7 of the Charter of Rights and Freedoms, which provides that everyone has the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice.

I would like to quote from the 2011 Supreme Court decision effectively demonstrating the Conservatives' bad faith in this case, as follows:

[The minister's decision to close InSite] is arbitrary...because it undermines the very purposes of the CDSA—the protection of health and public safety.

I would also like to quote another excerpt from that decision:

The infringement at stake is serious; it threatens the health, indeed the lives, of the claimants and others like them. The grave consequences that might result from a lapse in the current constitutional exemption for Insite cannot be ignored.

Furthermore, the Supreme Court decision does not just concern InSite. It opens the door to new similar sites, and I quote:

On future applications, the Minister must exercise that discretion within the constraints imposed by the law and the Charter, aiming to strike the appropriate balance between achieving public health and public safety. In accordance with the Charter, the Minister must consider whether denying an exemption would cause deprivations of life and security of the person that are not in accordance with the principles of fundamental justice. Where, as here, a supervised injection site will decrease the risk of death and disease, and there is little or no evidence that it will have a negative impact on public safety, the Minister should generally grant an exemption.

● (1350)

This ruling by Canada's highest court has led public health agencies throughout the country, including the Agence de la santé et des services sociaux de Montréal, to consider opening supervised injection facilities.

After being turned down twice by the courts, the Conservatives are now trying to get around the Canadian Charter of Rights and Freedoms, as well as the Supreme Court judges, by using Bill C-2 to amend the act.

The Conservatives are acting in a way that is just as reprehensible as the bill itself. Some people go so far as to say that this is hypocritical.

As we saw in this House during the previous session of Parliament, the Conservatives' strategy is plain: to increase the number of requirements that supervised injection sites will have to meet before the department will grant an exemption. These many requirements will make it much more difficult for agencies to open supervised injection facilities in Canada. The Conservatives are so ideologically pigheaded that it is pathetic.

In this House, my colleagues have often heard me say how important it is to base political decisions on fact. Unlike the Conservatives, I have looked at the facts. I have found that 80% of the people questioned, who live or work in Vancouver's Downtown

Eastside, support InSite, primarily because there has been a significant drop in the number of needles discarded and the number of people injecting drugs on the street.

I can cite other figures and percentages. The rate of overdose deaths in East Vancouver has fallen by 35% since InSite opened. It has also been noted that injection drug users who go to InSite are 70% less likely to share needles. In one year, 2,171 Insite users were referred to addiction counselling or other support services. Unlike repression, InSite does not marginalize drug users and does not force them into isolation. These are figures that I think are pretty convincing.

There are more than 30 peer-reviewed studies, published in major scientific journals such as the *New England Journal of Medicine*, *The Lancet* and the *British Medical Journal*, that describe the benefits of InSite. Furthermore, there are other studies that show the positive impacts of more than 70 supervised injection sites that are similar to Insite.

In summary, I think that the science and the evidence are quite clear: supervised injection sites promote public health because they reach vulnerable groups and are accepted by the community. They make it possible to improve the health of their users and reduce high-risk behaviour, in addition to lowering the number of overdose deaths and reducing drug use in public places.

Above all, I believe that safe injection sites make it possible to strike the appropriate balance between public health and public safety. Furthermore, the sites give people who need help access to the necessary health services, such as primary health care and drug treatment services.

Front line workers have been clear: supervised injection sites are necessary. Pivot Legal Society, the Canadian HIV/AIDS Legal Network and the Canadian Drug Policy Coalition issued a joint statement about the bill, which reads:

This bill is an irresponsible initiative that ignores both the extensive evidence that such health services are needed and effective, and the human rights of Canadians with addictions.

It is unethical, unconstitutional and damaging to both public health and the public purse to block access to supervised consumption services...

● (1355)

**Ms. Rosane Doré Lefebvre (Alfred-Pellan, NDP):** Mr. Speaker, I thank my colleague from Rivière-des-Mille-Îles for her excellent speech on a bill I would describe as fairly controversial.

On the other side of the House, the Conservatives often talk about law and order, saying that we have to keep our streets and communities safe. It is all very well to talk that talk, but they should also walk the walk.

The fact is that supervised injection sites, such as InSite in Vancouver, exist in over 80 countries worldwide, including Australia, the Netherlands, Canada and Germany. Such sites exist all over the world.

In Montreal, not far from my colleague's constituency, the Montreal police, the SPVM, is looking to work with community organizations to set up a supervised injection site on the Island of Montreal.



*Statements by Members*

What does my colleague think about the fact that the SPVM wants to set up a supervised injection site and work with the communities involved on the Island of Montreal, and the fact that the Conservatives have a completely different take on the issue and are refusing to allow such sites to be set up in Montreal?

**Ms. Laurin Liu:** Mr. Speaker, that is an excellent question.

In my opinion, this shows that the NDP does not have the same approach as the Conservatives. On the NDP side, we look to facts and scientific studies, whereas the Conservatives rely on ideology.

Moreover, the Conservatives launched a campaign entitled “Keep heroin out of our backyards”, and used it to raise funds and fill their campaign coffers.

I believe that the Conservatives are creating an issue to help build up their campaign funds without really basing their ideas on facts and without adopting a science-based approach.

**Mr. Guy Caron (Rimouski-Neigette—Témiscouata—Les Basques, NDP):** Mr. Speaker, we have heard a number of comments by the government because it is not expressing its view on the question, of course. There has been neither debate nor comment, except for a few questions asked by members from time to time.

Moreover, most of the questions asked by the government focus on the dangers and the popular perception of supervised injection sites. Yet physicians, experts and street workers have shown that such perceptions were incorrect and that on the contrary, supervised injection sites helped improve neighbourhood safety and tackle substance and drug abuse directly.

What does the member think of the fact that the government is totally silent in this debate? Why is the government in no position to defend a public bill that is in fact going to be detrimental to public health?

**Ms. Laurin Liu:** Mr. Speaker, it is clear that this government has always governed with blinkers on and consults neither the public nor the appropriate experts.

We also know that Bill C-2 flies in the face of the Supreme Court's 2011 decision, which called upon the minister to consider exemptions for supervised injection sites as a way to reconcile public safety and health issues.

As we can see, the Conservatives have no respect even for the Supreme Court. We therefore hope that they will come to their senses, look at the facts and change their position on Bill C-2.

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## STATEMENTS BY MEMBERS

[English]

### CITY OF BROOKS

**Mr. LaVar Payne (Medicine Hat, CPC):** Mr. Speaker, Communities in Bloom is a Canadian non-profit organization committed to fostering civic pride, environmental responsibility and beautification through community involvement and the challenge of a national program with a focus on the enhancement of green spaces and communities.

I would like to congratulate the city of Brooks in my riding of Medicine Hat for having won this prestigious award in the 10,000 to 35,000 people category for 2013.

I have had the honour of representing the great people of Brooks since first being elected some five years ago. The Brooks Commemorative Forest received special mention by the national Communities in Bloom committee as Brooks Mayor Shields said, the Brooks Communities in Bloom committee is “so much more. They have worked at greening up Brooks with more than just flowers.”

Brooks is a smaller community with a very big heart. It has had its share of setbacks over the years but it has always rebounded, stronger than ever.

I salute the people of Brooks and wish them the best with the beautification of their city.

\* \* \*

● (1400)

[Translation]

### ROMUALD SAINT-PIERRE

**Mr. Guy Caron (Rimouski-Neigette—Témiscouata—Les Basques, NDP):** Mr. Speaker, today I want to pay tribute to Romuald Saint-Pierre, a community builder who made a huge contribution to the Lower St. Lawrence and Rimouski area and who passed away two weeks ago after a long illness.

Romuald Saint-Pierre left his mark on the entire region. He managed Rimouski's Exposition agricole for 44 years. His work had an impact throughout Quebec during his 18 years as president of the Association des expositions agricoles du Québec. Mr. Saint-Pierre was a strong advocate for and was passionate about rural life, and he helped keep the regional tradition alive and well. He also showed an unparalleled dedication: he taught in the community and volunteered with the Knights of Columbus for over 30 years.

Mr. Saint-Pierre, it is men and women like you who are involved in their communities who make a difference, who unite our communities, who get people involved, and who even make our communities fairer. The Lower St. Lawrence has lost a remarkable man. I offer my sincere condolences to all of his friends and loved ones, and to his family—Marie-Paule, Michel, Isabelle and Annie.

Romuald Saint-Pierre, thank you for leaving a legacy of dedication and hard work. We will miss you.

\* \* \*

[English]

### BRITISH HOME CHILDREN

**Mr. Guy Lauzon (Stormont—Dundas—South Glengarry, CPC):** Mr. Speaker, I am happy to announce that for the first time ever the Ontario East British Home Child Family organization lay a wreath to mark the contributions and sacrifices of British home children and their descendants at the National War Memorial this past Remembrance Day. This wreath was laid by a British home child descendant, Gloria Tubman.

*Statements by Members*

Between 1869 and the late 1940s, over 100,000 orphaned and abandoned children arrived in Canada from Great Britain and Ireland. These homeless children, ages six months to 18 years, relocated to rural communities across Canada. They often worked as farmhands and domestics for room and board, and faced considerable challenges and hardships. However, due to their courage, bravery, and determination, many went on to live productive lives.

The British home children and their descendants have built a legacy in Canada. I am thrilled that their contributions were honoured at the National War Memorial on Remembrance Day 2013. I am also thrilled to note that we have five descendants in Ottawa with us today.

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**WORLD PREMATURITY DAY**

**Hon. Irwin Cotler (Mount Royal, Lib.):** Mr. Speaker, I rise to mark World Prematurity Day on which we recall that one in 10 babies is born prematurely. Premature newborns are the largest pediatric patient group in Canada, and prematurity is the leading cause of death in newborns.

I rise as well to honour the memory of my late grandson, Lavi, who passed away due to complications resulting from premature birth. Earlier this year, my daughter unexpectedly went into labour while only 25 weeks pregnant. What ensued were 18 days filled with great emotion and deep anguish, a situation difficult for any family.

While my grandson lost his battle for life, groups like the Canadian Premature Babies Foundation, Préma-Québec, and the Sandra Schmirler Foundation work to make a difference by raising awareness about prematurity, seeking to prevent preterm birth through education and research, supporting best standards of care for premature babies, and advocating on behalf of premature babies and their families.

I invite all hon. members to join me as we mark World Prematurity Day in solidarity with the families and children affected.

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**RETIREMENT CONGRATULATIONS**

**Mr. Ryan Leef (Yukon, CPC):** Mr. Speaker, it is my honour to rise today to pay tribute to two outstanding Yukon residents.

Helen and Ollie Wirth have operated the Burwash Landing Resort for over 31 years. Mile 1093 is the most picturesque location along the famed Alaska Highway, and Helen and Ollie have served the community and adventurous travellers with pride and dedication for over three decades.

This past weekend the community gathered, drawing in guests from all over the territory to Destruction Bay, to thank Helen and Ollie for their valued commitment and to wish them well in their retirement.

I would like to join the collective voice of all Yukon residents, saying a big thank you to Helen and Ollie for being such a huge part of Burwash Landing, Kluane Country, and indeed the Yukon.

● (1405)

**COMMUNITY SUPPORT IN SCARBOROUGH**

**Ms. Rathika Sitsabaiesan (Scarborough—Rouge River, NDP):** Mr. Speaker, as we return to Ottawa after a week in our communities we have all been struck by the devastation in the Philippines. Many members of my community have family and friends living through this crisis. I join them in praying for the safety and well-being of their loved ones.

This is a sobering reminder about the importance of giving back to our communities, globally and locally. The people of Scarborough are giving back. Recently, the Rosedale community held a food drive and served Scarborough families by collecting over 3,000 non-perishable food items by going door to door. Since 2008, Scarborough has seen a 38% increase in food bank usage. The Rosedale food drive has been doing an incredible job in compensating for the changing realities in our communities as a result of the Conservatives' economic inaction plan.

I am humbled to be partnering with the Toronto Police Service toy drive and the One More Wear Foundation by using my office as a donation location. I encourage anyone in Scarborough to come by and drop off toys and clothing for a family this holiday. I am proud and thankful for these community organizations and the many other people living in Scarborough who give to families in need, at home and abroad.

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**GREY CUP**

**Mr. Tom Lukiwski (Regina—Lumsden—Lake Centre, CPC):** Mr. Speaker, yesterday afternoon I, with millions of other football fans from coast to coast to coast, cheered loudly as Canada's team, the Saskatchewan Roughriders, secured its spot in the 101st Grey Cup coming up next Sunday in Regina, Saskatchewan.

As members know, the Riders are Canada's finest team and they have the most loyal fans in the entire CFL, and in fact, in all of sports. Rider Nation is excited that Coach Corey Chamblin and stars like Kory Sheets, Weston Dressler, and Darian Durant will be hoisting the Grey Cup in victory come next Sunday afternoon.

As members also know, whenever Regina hosts a Grey Cup, it is a great event. Whenever the Saskatchewan Roughriders are in a Grey Cup, it is a great event. Therefore, the combination of the Saskatchewan Roughriders being in a Grey Cup in Regina means this will be the event of a lifetime.

Saskatchewan fans will welcome fans from all football teams from across Canada, including the Tiger Cats, but make no mistake, come the end of the game when double zeros are on the clock, there is only one team that will be standing victorious, the Saskatchewan Roughriders.

*Statements by Members***BULLYING AWARENESS WEEK**

**Mr. Jay Aspin (Nipissing—Timiskaming, CPC):** Mr. Speaker, November 17 to 23 is recognized as Bullying Awareness Week. The 2013 theme is stand up to bullying.

In 2000, Canadian educator, Bill Belsey, launched bullying.org and from there went across the country from community to community and school to school talking about bullying. He realized that bullying was an issue that touches all people directly or indirectly, regardless of their age, gender, culture, religion or nationality. He dreamed of a world where bullying was no longer seen as a normal part of growing up and believed that prevention through education awareness was the key. He realized most people do want to see something done about bullying.

Bullying Awareness Week is an opportunity for people at the grassroots level in communities across the world to get involved in this issue, not by waiting for someone else to do something, but rather for us to work together on preventing bullying in our communities through education awareness.

I encourage all MPs to wear pink during November 17 to 23 to show their support for Bullying Awareness Week in Canada.

\* \* \*

**IMMIGRATION**

**Ms. Irene Mathysen (London—Fanshawe, NDP):** Mr. Speaker, on Thursday, October 31, Mohamed, Shyroz, and Qyzra Walji were found dead in their London, Ontario, apartment, the victims of a murder-suicide. Qyzra had cerebral palsy. Their tragic deaths have left the community heartbroken and asking difficult questions.

Sadly, we may never know all the factors that led to this tragedy, but we do know that this family was facing deportation to Tanzania, despite living in Canada for the past 15 years, building a life here and making significant contributions to the community and our city.

We cannot bring the Walji family back, but we can look at the rules governing our immigration and refugee system to determine if the immigration process is a fair one for this family and others. Surely, there could be some discretion to take into account all factors affecting residency decisions.

I fear for other families facing deportation orders. My plea to the House is that Canada once again become known for its compassion.

\* \* \*

• (1410)

**VETERANS AFFAIRS**

**Mr. Larry Miller (Bruce—Grey—Owen Sound, CPC):** Mr. Speaker, after seven long, quiet days, the leader of the Liberal Party has refused to retract and sack his veterans critic for his baseless and hurtful comments on Remembrance Day and order him to retract those comments.

We already know the Liberal Party does not trust Canadians with their hard-earned money. Who could forget the Liberals accusing moms and dads of wanting to spend the universal child care benefit on “beer and popcorn”?

Sadly, on Remembrance Day no less, the Liberal critic confused his role and began criticizing veterans themselves. That member said that veterans can't be trusted with their own money, saying they will blow it on “booze”. To treat Canadians and especially veterans like that is uncalled for. Shame on him.

How many more days will Canadian veterans have to wait for a full retraction from the Liberal leader? How many more days until he wakes up and fires that disrespectful member?

\* \* \*

[Translation]

**BULLYING AWARENESS WEEK**

**Mr. Dany Morin (Chicoutimi—Le Fjord, NDP):** Mr. Speaker, I rise today on behalf of the NDP to bring attention to Bullying Awareness Week, which takes place from November 17 to 23. This year's theme is “Stand Up to Bullying!”.

Bullying affects everyone—parents, brothers, sisters, friends and victims. Nearly half of Canadian parents say that their child has already been a victim of bullying, and 40% of Canadians say that they themselves have experienced bullying at work. Bullying hurts and it leaves scars.

As parliamentarians, we have a unique opportunity to make a difference. That is why I proposed a national bullying prevention strategy, which the Conservatives voted against, unfortunately. I know that the government is planning on introducing a similar bill soon. I hope that the Conservatives will remember that prevention must be at the heart of the strategy.

This week, as with every other, let us do what we can to create a bully-free environment, be it at work, at home, at school or on the Internet. Let us do it for our youth.

\* \* \*

[English]

**TYPHOON HAIYAN RELIEF FUND**

**Mr. Terence Young (Oakville, CPC):** Mr. Speaker, Canada has been standing with the Filipino people from day one of the terrible tragedy brought on by Typhoon Haiyan.

Today the Prime Minister announced Canada will contribute another \$15 million for emergency shelter, water, food, and other essential services, bringing the total Canadian government contribution to \$20 million.

*Statements by Members*

We have also deployed two of our renowned disaster assistance response teams, DART, to provide medical supplies, water, and engineering expertise to many in Iloilo. However, governments cannot lead this effort alone. That is why on November 10 the Government of Canada established the Typhoon Haiyan Relief Fund. Canadians have donated nearly \$16 million already to this fund.

I would ask all parliamentarians to join me in appealing to the overwhelming generosity of Canadians to help support this fund. I assure this House and the people of the Philippines that Canada stands ready to do what it takes to help the Filipino people through this tragedy.

Our thoughts and prayers are with them in these difficult times.

\* \* \*

**TYPHOON HAIYAN**

**Mr. Kevin Lamoureux (Winnipeg North, Lib.):** Mr. Speaker, the Philippines were devastated by Typhoon Haiyan. Each day, the extent of the destruction becomes clearer. Thousands of lives have been lost, many more have been hurt and hundreds of thousands have lost everything.

Over 700,000 people of Filipino heritage call Canada home, and thousands more are here from the Philippines working, studying and visiting in Canada.

The tragedy in the Philippines has touched us all. Canadians care. In a meeting that I hosted with the leader of the Liberal Party and members of the Filipino community, it was made clear that Canada should continue to look at the ways beyond just donating money and providing military support to the Philippines. Speeding up immigration along with assisting the current and expiring working, visiting and student visas is important too.

We must continue to support the community after the international media moves away. I think I can speak for all of us when I say we are thankful for the tireless work of aid and emergency workers who are there around the clock.

On behalf of the Liberal Party, I extend our condolences and prayers to those who have been personally affected by Typhoon Haiyan.

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**ADOPTION EXPENSE TAX CREDIT**

**Mr. Jeff Watson (Essex, CPC):** Mr. Speaker, our government believes strong families are the backbone of a strong Canada. That is why since 2006 our tax cuts have left more than \$3,200 in the pockets of the average Canadian family. However, we know families come in many different forms, including those who start, or like us, grow through adoption. That is why families who choose to adopt are eligible for the adoption expense tax credit.

However, parents have recently told us that while this credit was helpful, it was not always enough to cover all of their expenses. We heard their concerns. That is why economic action plan 2013 enhanced the adoption tax credit, to better recognize the unique costs associated with adopting a child.

The Adoption Council of Canada praised this move, calling it “an important step in supporting adoptive families”. Despite this, we recognize more can be done. That is why, as highlighted in the recent Speech from the Throne, our government will continue to look at ways to help families defray the costs of adopting a child.

\* \* \*

• (1415)

**TORONTO**

**Mr. Andrew Cash (Davenport, NDP):** Mr. Speaker, the world has been hearing a lot about Toronto, but not the “Toronto the Good” that we know and love.

While the mayor, the Prime Minister's fishing buddy, has become an international embarrassment, I want people to know that Toronto is so much more than Rob Ford.

Toronto is a safe, vibrant, and welcoming city, one of the world's most multicultural cities. Toronto is key to our country's finance, telecom, aerospace, and arts and culture sector, and so many other industries.

Toronto has spectacular beaches, Rouge Park, the Humber River, an excellent public school system, universities, museums, and theatres.

It is home to the Argonauts, the Blue Jays, the Raptors, the Rock, and Toronto FC. Heck, even the Leafs are having a good year.

Toronto is more than a mayor who has lost the moral authority to govern. We are one of the world's most livable cities, and I am so proud to call Toronto my home.

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**LEADER OF THE LIBERAL PARTY OF CANADA**

**Mrs. Kelly Block (Saskatoon—Rosetown—Biggar, CPC):** Mr. Speaker, judgment is something every Prime Minister needs, but does the Liberal leader really have it? Do we remember when he said, “Quebeckers are better than the rest of Canada because, you know, we're Quebeckers or whatever.” Westerners have heard talk like that from Liberals before.

How can someone who believes one region of Canada is better than another treat all Canadians equally? He cannot.

The Liberal leader also went to a Brandon school where, in front of a room full of younger children, he pitched his plan to make marijuana more accessible to kids by legalizing it and regulating it like alcohol and cigarettes.

That is why the Liberal leader is in way over his head.

## ORAL QUESTIONS

[English]

### INTERNATIONAL CO-OPERATION

**Ms. Megan Leslie (Halifax, NDP):** Mr. Speaker, Typhoon Haiyan has caused catastrophic destruction and created a massive humanitarian crisis. The human tragedy unfolding in the Philippines has touched all Canadians.

New Democrats support efforts from the government to help.

Would the Prime Minister please update the House about what assistance the Canadian government will provide for this unprecedented humanitarian crisis?

**Hon. Christian Paradis (Minister of International Development and Minister for La Francophonie, CPC):** Mr. Speaker, we offer our condolences to all of those who have been affected. They are in our thoughts and prayers.

Right from the beginning, we committed \$5 million in terms of immediate assistance. After that, we announced we would match all funds donated by Canadians to charities. We announced, also, that we have deployed DART on site.

I want to tell the House also that the Prime Minister has announced that we will commit an additional \$15 million toward emergency relief activities. That should bring further comfort to the victims of this catastrophe.

This brings Canada's commitment to nearly \$40 million so far.

\* \* \*

[Translation]

### CITIZENSHIP AND IMMIGRATION

**Ms. Nycole Turmel (Hull—Aylmer, NDP):** Mr. Speaker, we are pleased that Canada quickly deployed the DART to provide immediate assistance. It is also important that we give priority to immigration applications from the regions most affected by Typhoon Haiyan. What is more, we should do everything in our power to support family reunification. The government will have the full co-operation of the NDP.

Can the government inform us of the measures implemented to reduce processing times for these applications?

[English]

**Mr. Costas Menegakis (Parliamentary Secretary to the Minister of Citizenship and Immigration, CPC):** Mr. Speaker, Canada is concerned by the unfolding situation in the Philippines and its impact upon the people of the region. We are taking action.

Our government has committed an additional \$15 million toward emergency relief activities. This brings the Government of Canada's commitment to date to more than \$20 million.

We are also carrying out a number of immigration measures, including expediting passport processing for affected Canadians and providing priority processing for family members of Canadians and permanent residents who self-identify as being from areas that are significantly affected by Typhoon Haiyan.

## Oral Questions

• (1420)

[Translation]

### ETHICS

**Ms. Nycole Turmel (Hull—Aylmer, NDP):** Mr. Speaker, I would now like to move on to another matter.

Last June, the Prime Minister said that no one in his office except Nigel Wright knew about the scheme to repay Mike Duffy's illegal expense claims. In October, he changed his version of the facts and said that just a few people knew about it. Then, in November, he said that Mr. Wright acted alone. Only one of these versions can be true. Which one is it?

[English]

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, I believe that Nigel Wright, in the affidavits that have been supplied to the court, identified the individuals who were involved in this plan.

**Ms. Megan Leslie (Halifax, NDP):** Mr. Speaker, let us try that again.

On June 5, the Prime Minister said that no one else in his office knew about Nigel Wright's \$90,000 payment to Mike Duffy.

On October 24, the Prime Minister told the House that very few people in his office knew about the cheque.

However, there is more. On November 5, just two weeks ago, the Prime Minister said that Mr. Wright has acknowledged that these were his actions and that he took them himself.

Which of these three statements by the Prime Minister is the correct one?

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, as I have said on a number of occasions in the House, when Senator Duffy approached the Prime Minister to try to justify his inappropriate expenses, the Prime Minister told Senator Duffy that he needed to repay those expenses.

Moreover, Senator Duffy went on TV and told Canadians, and all of us, that he had actually taken a mortgage out on his home and repaid those expenses. We know that not to be true. We also know that it was Nigel Wright who repaid those expenses. We know that if the Prime Minister had known about this scheme, he would in no way have approved of such a plan.

Mr. Wright is prepared to accept the consequences of those actions, and we are assisting in any way that we can.

\* \* \*

### 41ST GENERAL ELECTION

**Ms. Megan Leslie (Halifax, NDP):** Mr. Speaker, the mayor of Toronto has admitted to some very troubling crimes and misdemeanours, but we have not forgotten the fact that the police are actually investigating the Prime Minister's Office here in Ottawa.

*Oral Questions*

However, let us turn to yet another criminal investigation of the Conservatives.

It turns out that Michael Sona was in Aruba at the same time Conservative officials claimed that he was bragging about voter suppression in Guelph.

Does the justice minister still believe that Michael Sona is the sole culprit behind this voter fraud, as he said on February 26, 2012?

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, as we have said, we will continue to assist with the investigation on this matter. We are working closely with Elections Canada and providing any assistance we can.

At the same time, we believe that those who are found responsible should be held and prosecuted to the fullest extent of the law. That is what we believe on this side of the House, and we are going to continue to assist Elections Canada in this effort.

\* \* \*

**ETHICS**

**Hon. Ralph Goodale (Wascana, Lib.):** Mr. Speaker, the Prime Minister's ethics scandal involved all of his senior advisers: Wright, Gerstein, Perrin, Hamilton, Woodcock, Byrne, Rogers, Novak, van Hemmen, LeBreton, Tkachuk, Stewart Olsen, and the list goes on, but it is not these underlings who are responsible; it is the boss.

To get to the bottom of the conspiracy in his office, did the Prime Minister ask these people what they knew and what they did? As the CEO with ultimate accountability for any corruption on his watch, from February until today, did he ever ask?

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, what is very clear is that Nigel Wright has taken full and sole responsibility for this matter. He acted on his own. He used his own resources to pay.

What is also important is that Senator Duffy went in front of Canadians and told them that he actually had taken a mortgage out on his home to repay those expenses. It was inappropriate for Senator Duffy to accept expenses that he did not incur; it was also inappropriate for Nigel Wright to repay those expenses. That is why the Senate, thankfully, passed a motion that suspended these three senators and that is why the courts, I suspect, will be taking further action not only with these senators but with others.

It is only the Liberals who protect the status quo in the Senate.

**Hon. Ralph Goodale (Wascana, Lib.):** Mr. Speaker, the cover-up involved the payment of \$90,000 in hush money and another \$13,000 in legal fees, the sabotage of Deloitte's forensic audit, the whitewashing of a Senate report, and there was someone in the PMO counselling Mike Duffy to lie to Canadians about his mortgage.

The Prime Minister claims that the lie in fact misled even him. Surely he wants to know who counselled Mike Duffy to lie. Was it Chris Woodcock, or Patrick Rogers? Why is that person still employed by the government?

●(1425)

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, here is another parliamentary tough guy who, in the confines of this room, will make all kinds of allegations knowing that he is covered by immunity, but when he comes outside of the chamber is afraid to say anything.

Let us be very clear. These three senators and the disgraced former Liberal senator are not the victims here. The victims are the Canadian taxpayers who footed the bill for expenses that these senators did not incur.

The other victims, of course, are those who want to see an accountable Senate and know that it was the Liberals who stood in the way of accountability in the Senate by fighting so hard for the status quo in the Senate.

We will fight for change and we will always respect taxpayers on this side of the House.

[*Translation*]

**Mr. Marc Garneau (Westmount—Ville-Marie, Lib.):** Mr. Speaker, after months of saying that there were no documents on the Wright-Duffy agreement, the Prime Minister's Office hands over a pile of documents to the RCMP.

Does that include the email of February 20 in which the Prime Minister's Office allegedly instructed Mr. Duffy to work with Chris Woodcock and Patrick Rogers to come up with certain communication strategies?

In the meantime, Mr. Woodcock and Mr. Rogers have been promoted to ministers' offices. Why are they still employed by the government now that their role in this affair has been made public?

[*English*]

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, we have said right from the beginning that we would assist investigators in any way that we could. At the same time, this is an affair between Senator Duffy and Nigel Wright. Senator Duffy tried to justify expenses that he did not incur, which he should not have, and Nigel Wright repaid expenses without telling the Canadian people that was the way this transaction occurred.

The Prime Minister has been very clear: had he known that this took place, he would have in no way accepted such an arrangement. It is only the Liberals right now in the House who are standing up for these three disgraced senators. We will stand up for the taxpayer.

[*Translation*]

**Ms. Lysane Blanchette-Lamothe (Pierrefonds—Dollard, NDP):** Mr. Speaker, on November 7, the Prime Minister told the House that his office was not being investigated by the RCMP. However, literally one minute later he said, "the Prime Minister's Office has, at all times and in all manner, provided all and any information that the RCMP is requesting".

Is the RCMP investigating his office or not?

*Oral Questions*

[English]

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, no. As the Prime Minister said, it is not, but we are continuing to assist authorities. We do believe it is very important that we assist authorities, as we have said right from the beginning.

What this is really about is accountability in the Senate. Senator Mike Duffy and three other senators accepted expenses that they did not incur. Canadian people wanted accountability, and that is why the senators brought forward a motion that suspended these three senators.

We will continue to assist and move forward with other plans to reform the Senate and give Canadians an accountable Senate that they can be proud of.

[Translation]

**Ms. Lysane Blanchette-Lamothe (Pierrefonds—Dollard, NDP):** Mr. Speaker, do the Conservatives think that exchanging information with a police force is a way of taking part in a police investigation?

[English]

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, again, the Prime Minister's Office is not under any investigation. We are continuing to assist the authorities on this matter.

[Translation]

**Ms. Françoise Boivin (Gatineau, NDP):** Mr. Speaker, I hope that the Parliamentary Secretary to the Prime Minister rested up last week because the next four weeks promise to be quite long.

I have a simple question. Could the Prime Minister, or his parliamentary secretary, tell us whether a member of the Prime Minister's staff has been questioned by the RCMP since November 7?

[English]

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, as I have said on a number of occasions, we are continuing to assist the authorities.

**Mr. Charlie Angus (Timmins—James Bay, NDP):** Mr. Speaker, the problem is that they just cannot seem to get their stories straight. The Prime Minister has given the Canadian people many versions of who knew what in the Prime Minister's Office about the cover-up cheque to Mike Duffy. First, the Prime Minister said that Nigel Wright acted alone. Then, last week, he said "Well, okay, a few knew". Now, he is back to saying that Wright acted "by himself".

Could anyone over there explain why the Prime Minister has such a difficult time answering such a straightforward question?

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, we have answered that question on a number of occasions. As I have said, we are continuing to assist the authorities.

What this is about is the fact that these three senators and disgraced former Liberal senator, Mac Harb, accepted payments that

they did not incur. They need to be held accountable for those actions.

At the same time, we are continuing to work on all of the priorities that Canadians think are important: jobs and economic growth. That is important to Canadians, as is law and order and putting the victims of crime first.

The Minister of National Defence deployed Canada's DART team in record time. When it comes to the issues that matter to Canadians, we are on top of the file.

\* \* \*

● (1430)

**41ST GENERAL ELECTION**

**Mr. Charlie Angus (Timmins—James Bay, NDP):** Mr. Speaker, did I hear law and order?

Speaking of law and order over there, on November 30, 2012, the Minister of Democratic Reform told the House that the Conservative government was "proactively co-operating with Elections Canada" to find out what happened with the electoral fraud in Guelph. Now we find out that Elections Canada is being stonewalled by the Conservatives about the issues of voter fraud.

What happened to the promise that was made in the House to get to the bottom of this fraud?

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, as I just said in response to an earlier question, we are continuing to assist with this investigation. We believe, on this side of the House of course, that any individual who is found responsible for this should be prosecuted to the fullest extent of the law.

We also believe, on this side of the House, that when we make a promise, we keep that promise. Unfortunately, the member over there does not believe the same thing. When he went to his constituents and promised to vote in favour of taking away the long gun registry, he came in the House and did the exact opposite. Promise made, promise kept, that is not the same standard.

**Ms. Chris Charlton (Hamilton Mountain, NDP):** Mr. Speaker, co-operating with authorities is just not something the Conservatives like to do. Jenni Byrne instructed campaign staff not to talk to Elections Canada for three months.

Is it really the position of the minister that Michael Sona did everything to cover his tracks, then miraculously started leaking precise details, but only to favourable Conservative staff? When will the government finally bring forward legislation to clean up this unethical behaviour?

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, here they go again. First, it is the senators who are the victims. First, it is the senators who defrauded Canadian taxpayers. They are the victims. They are the ones they stand up for with their Liberal partners. Now, when it comes to this investigation, it is quite clear that Elections Canada has brought forward an individual who it thinks it responsible. We will let the courts decide that full responsibility.

*Oral Questions*

Let us be clear. Anybody who is found to have acted inappropriately during elections should be prosecuted to the fullest extent of the law. We will continue to assist Elections Canada on this.

[Translation]

**Ms. Ève Pécelet (La Pointe-de-l'Île, NDP):** Mr. Speaker, the minister keeps saying that he is fully co-operating with robocall investigators. However, we have just learned that the national campaign chair, who is now the Prime Minister's deputy chief of staff, told the Prime Minister's entourage not to co-operate. Do they have something to hide?

When will the Conservatives take election fraud seriously and pass legislation to prevent this type of activity?

[English]

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, as I said on a number of occasions, we will continue to assist on this matter. We obviously take this very seriously. That is why the Minister of State for Democratic Reform is working on some new proposals which will make our elections even fairer. However, let us be very clear. It was the NDP that accepted illegal contributions from its union buddies.

It is quite obvious that when it comes to accountability, this side of the House expects accountability. That is why our first piece of legislation when we formed government was the Federal Accountability Act, to take the influence of big money and big unions out of the political process. We are living by that. We are proud of that. Unfortunately, opposition members are breaking the rules all the time.

\* \* \*

[Translation]

**EMPLOYMENT INSURANCE**

**Mr. Mathieu Ravignat (Pontiac, NDP):** Mr. Speaker, we see how accountable the Conservatives are.

For example, the Conservatives came to power by promising to help whistleblowers. However, they have done quite the opposite. The legislation does not have any teeth, and the Conservatives are ganging up on Sylvie Therrien, who spoke out about the employment insurance quotas. It is high time the law was amended so that public servants who witness serious problems, such as the employment insurance quotas or the sponsorship scandal, can speak out about them without fear of losing their job.

Can the minister commit right now to reviewing the legislation?

**Hon. Tony Clement (President of the Treasury Board, CPC):** Mr. Speaker, we want employees to feel confident when they share their concerns about wrongdoing within the public service. We introduced rules after 13 years of scandals and mismanagement under the Liberals. That is why we passed this legislation.

•(1435)

[English]

We will continue to ensure this law is applied and it should be applied fairly.

**Mr. Mathieu Ravignat (Pontiac, NDP):** Mr. Speaker, even the person who blew the whistle on the Liberal sponsorship scandal and who ran for the Conservative Party now says the law is not helping people any more than it did during his time.

Conservatives promised to help people who blow the whistle on corruption and mismanagement. Why did they break their promise and when will the Conservatives introduce real protection for our courageous whistleblowers?

**Hon. Tony Clement (President of the Treasury Board, CPC):** Mr. Speaker, as I just said, this legislation has been put in place by this government. It gives employees options to report their concerns. It imposes consequences for individuals who fail to play by the rules. In fact the commissioner himself stated that whistleblowers "are adequately protected" by our legislation. We stand by that assessment and we will continue to protect those people.

\* \* \*

**41ST GENERAL ELECTION**

**Hon. Carolyn Bennett (St. Paul's, Lib.):** Mr. Speaker, the PMO counselled Mike Duffy to lie. Jenni Byrne counselled Conservatives to stonewall an Elections Canada investigation. Arthur Hamilton marched six Conservative staffers into Elections Canada and surprise, they all had the same far-fetched story: one person acting alone was responsible for sophisticated election fraud across the country.

Has the minister delayed the electoral reform bill because he does not want to give Elections Canada the power to uncover the Conservatives' election fraud and cover-up?

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, again, this is the Liberals trying to defend the status quo. They are trying to make victims out of the three current senators and disgraced former Liberal senator Mac Harb. We are not going to do this on this side of the House. We were very appreciative that the Senate passed a motion that would suspend these three senators without pay. Unfortunately, the Liberals tried very hard to defend the status quo because, as we know, the Liberals are always entitled to their entitlements and they will do anything to protect that.

On this side of the House we will always put Canadian taxpayers first, and that is what we continue to do day in and day out.

[Translation]

**Hon. Dominic LeBlanc (Beauséjour, Lib.):** Mr. Speaker, the Conservatives require only those who support their story to testify about the government's scandals. When someone tries to find out the whole truth, Conservative Party employees, such as Jenni Byrne, order the Andrew Prescotts of the world to block Elections Canada's investigation. People can testify if it will help the Conservatives. If not, they must refuse to do so.

Why is the government forcing only employees who support its story to testify and preventing others from telling the truth?



*Oral Questions**[English]*

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, as I have already stated, we will continue to assist in this investigation and at the same time, we expect that anyone who tried to do any illegal actions during the election would be prosecuted to the fullest extent of the law. That is the standard we accept on this side of the House.

It is unfortunate the Liberals have a different standard. We know, of course, it was only the member for Guelph who has been convicted of any robocalling infraction at this point and I believe the NDP member for Ottawa Centre as well. On this side of the House we stand up for Canadian taxpayers day in and day out and we continue to do so.

**Hon. Dominic LeBlanc (Beauséjour, Lib.):** Mr. Speaker, Conservatives are hoping that Michael Sona takes sole responsibility for this scandal, instead of admitting that he was a mule in the larger Conservative electoral fraud. They get witnesses to testify when they support their bogus story, but they tell others to stonewall Elections Canada when they will not. No wonder they will not introduce tough electoral fraud legislation; it might get in the way of yet another Conservative cover-up.

Why does the Minister of State for Democratic Reform not stand up and tell us why he does not have the courage to introduce tough election fraud legislation before the House?

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, this is coming from a member who is surrounded by people who have actually broken the Federal Accountability Act with leadership debts that they have refused to pay or do not want to pay. This is coming from a member who sat in a caucus in a cabinet that stole money from Canadians with something called the “sponsorship scandal”, something we are still looking for.

When it comes to accountability, the Liberals have nothing to tell Canadians about it because they have never stood up for accountable government. They talk about taxes only during election. They turn their backs on the taxpayer in between.

On this side of the House, we stand up for Canadians every day.

\* \* \*

● (1440)

**NATIONAL DEFENCE**

**Mr. Jack Harris (St. John's East, NDP):** Mr. Speaker, according to new reports, the Auditor General is preparing to tell Parliament that Conservatives have failed to set aside enough money for the national shipbuilding procurement strategy. The shipbuilding secretariat recently said that the total cost for these acquisitions was \$36.6 billion for large ship construction and \$2 billion for smaller ships.

Could the minister tell Canadians if this is still the case? If not, will the minister tell us today what the true numbers are?

**Hon. Diane Finley (Minister of Public Works and Government Services, CPC):** Mr. Speaker, we do not comment on rumours or speculation, but after a decade of darkness under the Liberals, our

government is committed to providing the men and women in the Royal Canadian Navy and the Coast Guard with the equipment that they need at the best value for taxpayers.

By building these ships in Canada, industry analysts have estimated that 15,000 jobs will be created and that there will be over \$2 billion in annual economic benefits for the next 30 years.

We look forward to responding to the Auditor General's report once it has been released.

**Mr. Jack Harris (St. John's East, NDP):** Mr. Speaker, the Parliamentary Budget Officer already showed that budgets set aside for the joint support ships were insufficient, yet the Conservatives have been silent on this procurement mismanagement.

Given that not enough money has been set aside, will the Conservatives be putting more money into the program, or will they be scaling back the ship's capabilities, or will it be the number of ships?

**Hon. Diane Finley (Minister of Public Works and Government Services, CPC):** Mr. Speaker, the national shipbuilding procurement strategy will generate approximately 15,000 jobs and \$2 billion in economic activity over the next 30 years according to industry analysts. Our shipbuilding strategy will finally end the boom and bust cycle that has plagued the industry for many years. So far I am pleased to report that over 75 Canadian companies have received work as a result.

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*[Translation]***INTERGOVERNMENTAL RELATIONS**

**Ms. Annick Papillon (Québec, NDP):** Mr. Speaker, the CEO of the Port of Québec says that the wood pellet terminal project in Anse au Foulon complies with environmental assessments. However, the Canadian Environmental Assessment Act was gutted in 2012.

What environmental assessment is being discussed here? The one done by Arrimage Québec? That is not an independent study.

Will the Minister of Transport tell us whether her department conducted an assessment? If so, will she finally release it, and if not, will she call for one?

*[English]*

**Mr. Jeff Watson (Parliamentary Secretary to the Minister of Transport, CPC):** Mr. Speaker, the Port of Quebec is an arm's-length organization as the member knows and as such is responsible for its own operational decisions. However, as a good corporate citizen, the port officials can consult the population when it comes to their development projects.

*[Translation]*

**Ms. Annick Papillon (Québec, NDP):** Mr. Speaker, ministerial responsibility means being responsible for everything that happens in one's department. That is what ministerial responsibility is. Furthermore, Transport Canada's website indicates that that is indeed the case. Transport Canada owns and manages several public ports, including the Port of Québec.

### Oral Questions

Will the government take responsibility and demand that the work stop immediately until the government can hold proper public consultations in order to ensure that the residents and authorities of Quebec City know what is going on in this regard and can finally have their say?

[English]

**Mr. Jeff Watson (Parliamentary Secretary to the Minister of Transport, CPC):** On the contrary, Mr. Speaker, the Port of Quebec is an arm's-length organization, and as such is responsible for its own decisions. As a good corporate citizen, however, the port can consult the population when it comes to its development projects.

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### INTERNATIONAL CO-OPERATION

**Mr. Wladyslaw Lizon (Mississauga East—Cooksville, CPC):** Mr. Speaker, Typhoon Haiyan hit the Philippines two weeks ago. The destruction that the typhoon caused is horrific. Millions of people have been affected, with thousands of lives lost and absolute destruction of the whole community.

Can the minister please update the House with respect to actions taken by the Government of Canada to help the people in the Philippines who have been affected by this horrible tragedy?

[Translation]

**Hon. Christian Paradis (Minister of International Development and Minister for La Francophonie, CPC):** Mr. Speaker, first of all, we extend our condolences to the families of the people affected by this tragedy. We join them in prayer.

We announced immediate emergency aid of \$5 million when this tragedy struck. Then we announced that a fund would be set up to match charity donations here in the country. We also promptly deployed the disaster assistance response team. I am honoured to inform the House that, just today, the Prime Minister announced that Canada would contribute another \$15 million in emergency aid. The \$20-million contribution from the government combined with the matching funds add up to nearly \$40 million in Canadian aid already in place.

\* \* \*

● (1445)

[English]

### RAIL TRANSPORTATION

**Ms. Olivia Chow (Trinity—Spadina, NDP):** Mr. Speaker, three engineers died and many passengers were injured when a train derailed in Burlington, Ontario. The Transportation Safety Board made key recommendations to prevent future accidents, and now the board is accusing the government of failing to act, failing to put safety first. I met with a widow of an engineer who died in the crash, and she is demanding action from the government.

When will the minister fully implement all of the safety board's recommendations?

**Mr. Jeff Watson (Parliamentary Secretary to the Minister of Transport, CPC):** Mr. Speaker, first I would like to convey my condolences to the families of those who perished in this tragic accident.

The health and safety of Canadians is a top priority of this government. Transport Canada continues to implement the Burlington report's recommendations. As well, VIA Rail, as the member probably knows, has committed to voluntarily installing voice recorders across its entire fleet.

**Ms. Olivia Chow (Trinity—Spadina, NDP):** Mr. Speaker, let us be specific. The safety board recommended installing an automatic braking system called "positive train control" in all trains, and video cameras in all locomotives. Together these measures will save lives. The American government has made emergency braking systems mandatory in all their trains, but here in Canada the minister would rather just talk, meet and delay.

More talk will not protect the public. Why will the government not act on rail safety?

**Mr. Jeff Watson (Parliamentary Secretary to the Minister of Transport, CPC):** That is nonsense, Mr. Speaker. Transport Canada continues to implement the Burlington report's recommendations. Positive traction control is not part of the TSB's recommendation, but Transport Canada is working with industry to look at possible fail-safe train controls. We continue to monitor the implementation of positive train control in the United States.

[Translation]

**Mr. Hoang Mai (Brossard—La Prairie, NDP):** Mr. Speaker, the parliamentary secretary does not seem to have read all the reports.

The Conservatives need to take rail safety more seriously because, as we have said, voluntary measures are not working. In April 2012, the Transportation Safety Board of Canada, the TSB, made recommendations during the investigation into the Burlington accident, but they were rejected. Now, in a new report, the TSB is accusing the Conservatives of not fulfilling their responsibilities.

When will automatic braking systems and video cameras be installed?

[English]

**Mr. Jeff Watson (Parliamentary Secretary to the Minister of Transport, CPC):** Mr. Speaker, as I said earlier, Transport Canada continues to implement the Burlington report's recommendations. VIA Rail has committed to voluntarily installing voice recorders across its fleet, but positive train control is not part of the Transportation Safety Board's recommendation. Transport Canada is working with industry to look at possible fail-safe train controls.

*Oral Questions*

[Translation]

**CHAMPLAIN BRIDGE**

**Mr. Hoang Mai (Brossard—La Prairie, NDP):** Mr. Speaker, on another transportation file, families and elected officials in the greater Montreal area are concerned by the recent developments regarding the Champlain Bridge. For more than a year now, I have been asking the minister to unveil plan B. The public also has the right to know what it is.

Can the minister tell us his contingency plan should the bridge be closed prematurely?

**Hon. Denis Lebel (Minister of Infrastructure, Communities and Intergovernmental Affairs and Minister of the Economic Development Agency of Canada for the Regions of Quebec, CPC):** Mr. Speaker, it is clear that this member would have closed the bridge long ago. He has rejected all of the measures that we have put in place to maintain the existing bridge. In fact, this government has invested \$380 million in maintaining the existing bridge. The bridge is safe. It is monitored daily by groups of engineers. They will continue their work and, in addition, we will build a new bridge.

\* \* \*

[English]

**NATIONAL DEFENCE**

**Mr. Kevin Lamoureux (Winnipeg North, Lib.):** Mr. Speaker, the Department of National Defence is considering chopping an infantry battalion as part of its effort to control its spending. This is of great concern to Manitobans.

My question is for the Minister of National Defence. Can the minister guarantee that 2PPCLI and CFB Shilo are in Manitoba for the long term and will not be impacted by the DND cutbacks?

We are talking about billions of dollars of national defence cuts that are on the horizon. Will the minister stand in his place and give that guarantee today?

• (1450)

**Hon. Rob Nicholson (Minister of National Defence, CPC):** Mr. Speaker, we have grown the size of Canada's military men and women consistently, along with the equipment they need.

This is in complete contrast to what the Liberals did during their years in office. We will never go back to what the Liberals did.

**Ms. Joyce Murray (Vancouver Quadra, Lib.):** Mr. Speaker, the national shipbuilding plan is completely adrift and the Conservatives are hiding the real costs. This is yet another example of financial and management incompetence by the government.

Has the minister, who has so far refused to answer questions today, learned from the F-35 stealth jet debacle? Or is she keeping two sets of books to mislead the public about the true cost of the ships, just as was done with the jets?

**Hon. Diane Finley (Minister of Public Works and Government Services, CPC):** Mr. Speaker, that is so far from the truth that it is hard to comment on it.

What I can say is that we are committed, unlike the Liberals, to making sure that our men and women in uniform, whether they are

in the navy or the coast guard, get the equipment they need and deserve to serve Canadians well.

The new national shipbuilding procurement strategy has been applauded so far, and it is expected by industry analysts that it will create 15,000 jobs and \$2 billion a year in economic activity over the next 30 years.

\* \* \*

**HEALTH**

**Ms. Libby Davies (Vancouver East, NDP):** Mr. Speaker, the Minister of Health made a heartless decision to prevent those who need access to medicalized opiates from having it.

She ignored her own experts and she ignored those who provide treatment when she changed the special access program.

Is it too much to ask of the minister to put ideology aside and support a method of treatment that is scientifically proven to be effective?

**Ms. Eve Adams (Parliamentary Secretary to the Minister of Health, CPC):** Mr. Speaker, our policy is to take heroin out of the hands of addicts, not to put it in their arms.

We do support drug treatment programs that work to end drug use in a safe way, so that those who are struggling with addiction can recover and maintain a drug-free life. Drug treatment should be focused on ending drug use and recovering into a drug-free life.

**Ms. Libby Davies (Vancouver East, NDP):** Mr. Speaker, it is ironic that the only person suffering from addiction and who the Conservatives seem to have compassion for is the mayor of Toronto.

It is inexplicable that the minister went against her own department, attacking the experts. She chose to recklessly put lives at risk. No wonder her decision is now facing a court challenge.

Did the minister not learn anything from the Supreme Court decision on InSite? Will she reconsider providing this needed treatment?

**Ms. Eve Adams (Parliamentary Secretary to the Minister of Health, CPC):** Mr. Speaker, under the special access program, Health Canada can approve emergency access to certain medicines for Canadians with rare diseases or terminal illness. This program was not intended as a way to give illicit drugs to addicts.

Our government's position against the use of dangerous and addictive drugs is clear. To keep dangerous drugs like heroin out of Canadian communities, our government has taken action to protect the integrity of the special access program and closed that loophole.

### Oral Questions

I will continue to protect Canadian families and continue investing in drug prevention programs for individuals and children.

**Mr. Robert Sopuck (Dauphin—Swan River—Marquette, CPC):** Mr. Speaker, studies have shown that marijuana puts some teens at risk of developing addiction and mental health problems as adults.

Were the parents of the students at Sioux Valley first nation school, in Manitoba, told that the Liberal leader was going to promote marijuana legalization in front of their young children? This school is right next to my constituency.

Will the parliamentary secretary explain to my constituents what our government is doing to protect children from illicit drugs?

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, promoting the legalization of illicit substances to young children is completely unacceptable and completely inappropriate. The Liberal leader should immediately apologize to the parents in Brandon, and to parents across Canada.

Being an overgrown flower child is no excuse for the remarkably poor display of judgment that the leader shows.

\* \* \*

### VETERANS AFFAIRS

**Mr. Rodger Cuzner (Cape Breton—Canso, Lib.):** Mr. Speaker, last week over 3,000 people took part in a march to protest the closure of the Veterans Affairs office in Sydney, Nova Scotia. The march was led by veterans of the Second World War and Korean peacekeepers, some with walkers, others in wheelchairs. These same men and women were proud to march into battles all around the globe for their country, but they know it is wrong now to make them march to Halifax to see a caseworker.

Please do not give us the 600 points of service drivel. Do not insult the veterans with that. All they got was an 800 number and a busy signal.

Will the minister reconsider this wrong-minded decision?

• (1455)

**Hon. Julian Fantino (Minister of Veterans Affairs, CPC):** Mr. Speaker, among the variety of options available to veterans, Veterans Affairs Canada caseworkers and nurses do personalized home visits for those who need them.

While the member opposite engages in scare tactics, we will continue to deliver services and support the veterans, no matter where they live in Canada.

If they need assistance, among the many services we offer, we will cut their grass, shovel their snow and clean their homes. That is our commitment to Canadian veterans, not the rhetoric from that side.

\* \* \*

[Translation]

### THE ENVIRONMENT

**Mr. François Choquette (Drummond, NDP):** Mr. Speaker, the Conservatives continue to be dunces when it comes to the

environment. They are not going to achieve their target of reducing greenhouse gases by 20%.

The minister still claims that she will reach her target despite the fact that she has failed to present any decent plan. The fight against climate change deserves better than the minister's wishful thinking.

People living in coastal regions and farmers deserve better than the Conservatives' inaction. Do the Conservatives understand that concrete action is needed in order to reduce greenhouse gas emissions and to avoid the cost of inaction?

[English]

**Mr. Colin Carrie (Parliamentary Secretary to the Minister of the Environment, CPC):** Mr. Speaker, our government is taking action to address climate change. We have introduced new emissions regulations for vehicles, and we were the first major coal user to ban construction of traditional coal-fired plants.

Thanks to our action, carbon emissions will go down close to 130 megatonnes from what they would have been under the Liberals.

We are accomplishing this without the Liberal and NDP carbon tax, which would raise the price of everything.

\* \* \*

### THE ECONOMY

**Mrs. Nina Grewal (Fleetwood—Port Kells, CPC):** Mr. Speaker, today marks the beginning of Global Entrepreneurship Week, hosted by the Canadian Youth Business Foundation. It is the biggest celebration of entrepreneurs in the world.

With seven in ten jobs created by small business entrepreneurs in Canada, I ask the Minister of State for Small Business and Tourism, what is our government doing to create the right business conditions for our big job creators?

[Translation]

**Hon. Maxime Bernier (Minister of State (Small Business and Tourism, and Agriculture), CPC):** Mr. Speaker, I want to thank my colleague for the work she does for the entrepreneurs in her riding. I just want to say that we too believe in entrepreneurs. We believe in their talents.

[English]

Our government is working with entrepreneurs all across the country, by returning to balanced budgets by 2015, by lowering taxes to entrepreneurs and families, by keeping our budget clean, and also by freezing the operating budget and cutting red tape.

We are doing that for entrepreneurs because we know it is the entrepreneur who creates wealth and jobs in this country.

*Oral Questions***INTERGOVERNMENTAL RELATIONS**

**Ms. Jinny Jogindera Sims (Newton—North Delta, NDP):** Mr. Speaker, once again, Conservatives are acting unilaterally and refusing to work with the provinces. The provinces want a skills training program that works, one that helps Canada's most vulnerable workers, and experts agree.

However, the Minister of Employment and Social Development and Minister for Multiculturalism stubbornly refuses to listen. It is the attitude of the minister and the government that is unacceptable.

When will the minister sit down with the provinces, listen to experts and put Canadians first?

**Hon. Jason Kenney (Minister of Employment and Social Development and Minister for Multiculturalism, CPC):** Mr. Speaker, I already did that. Ten days ago, I met with the provinces and expressed a great deal of personal interest. I was glad to hear from the provincial premiers of a willingness to make a counter-offer as to how we could administer the Canada job grant.

We listened to the experts, who have pointed out that in Canada governments spend more than any other developed country on skills development, but the private sector spends less. The job grant is designed to leverage a stronger, larger, private sector investment in skills development and, here is the key, to provide a guaranteed job at the end of the training.

\* \* \*

[Translation]

**CHAMPLAIN BRIDGE**

**Mr. Jean-François Fortin (Haute-Gaspésie—La Mitis—Matapédia, BQ):** Mr. Speaker, in the Champlain Bridge saga, the Minister of Infrastructure refuses to give the Government of Quebec its fair share of the new \$4 billion discretionary fund, which would help cover the cost of the LRT that Greater Montreal is looking for.

The minister claims that it is not a discretionary fund since the projects will be selected on merit. However, with no regional distribution or any known criteria, it looks an awful lot like a discretionary fund. Quebec has found a project with merit: the LRT. The minister must commit to giving Quebec its share of the new fund for the Champlain Bridge.

• (1500)

**Hon. Denis Lebel (Minister of Infrastructure, Communities and Intergovernmental Affairs and Minister of the Economic Development Agency of Canada for the Regions of Quebec, CPC):** Mr. Speaker, I want to point out that under the building Canada plan, which expires on March 31, 2014—it is still in effect—a number of provinces made public transit one of their priorities when choosing the investments to make from these envelopes. In Quebec, 9% of the envelope was devoted to public transit, while the other provinces invested up to 70% or more in public transit. The Province of Quebec already knows roughly how much money it will get as part of the transfers to the provinces. It is free to choose to make public transit a priority in the next infrastructure plan.

**CITIZENSHIP AND IMMIGRATION**

**Mrs. Maria Mourani (Ahuntsic, Ind.):** Mr. Speaker, Ms. Djemai, who is 35, has been ordered removed from Canada this Friday, November 22. She is currently being treated for an aggressive form of breast cancer. Her oncologist has confirmed in writing that she cannot travel. For her treatment in Algeria, Immigration Canada doctors referred her to an allergist—completely irrelevant—who in turn referred her to an oncologist who is not taking any new patients until 2014.

Will the Minister of Public Safety issue a stay of removal until her condition stabilizes and her treatment in Algeria can be confirmed? This is a matter of life and death.

**Hon. Steven Blaney (Minister of Public Safety and Emergency Preparedness, CPC):** Mr. Speaker, I thank my hon. colleague for her question. I have had the opportunity to discuss this with her and I will let her know as soon as I receive an update on this case.

As we all know, Canada accepts more than 250,000 immigrants, and those who do not meet the proper requirements must be returned to their country of origin with all of the necessary assurances regarding health and safety.

\* \* \*

[English]

**FOREIGN AFFAIRS**

**Mr. Dean Del Mastro (Peterborough, Cons. Ind.):** Mr. Speaker, just over a week ago, the leader of the Liberal Party made some comments that I found astonishing. He was asked what governments around the world that he respected, what government, besides Canadian, he most respected. He selected China, and perhaps most surprisingly, did so because of its action on the environment.

I have been right across Canada. I have been to China. Canada is cleaner and greener than China will ever be. Could the Minister of Foreign Affairs please comment on whether the Government of China is one that should be his top choice of government?

**Hon. John Baird (Minister of Foreign Affairs, CPC):** Mr. Speaker, I have served for eight years in this place, and that is the best question I have had from a member outside the government caucus.

Under this government, the air is cleaner here than it is in China. Under this government, we have seen unprecedented land conservation. Under this government, we have a tremendous amount to be proud of: expanding the Great Bear Rainforest; expanding many green areas; and especially, that we do it all under having a democracy. That is a rather extraordinary accomplishment, and we should remind the Liberal leader of that.

\* \* \*

**PRESENCE IN GALLERY**

**The Speaker:** That concludes question period for today.

I would like to draw the attention of hon. members to the presence in the gallery of the Honourable Cal Dallas, Minister of International and Intergovernmental Relations for the Province of Alberta.

**Some hon. members:** Hear, hear!

*Routine Proceedings***POINTS OF ORDER**

## ORAL QUESTIONS

**Mr. Paul Calandra (Parliamentary Secretary to the Prime Minister and for Intergovernmental Affairs, CPC):** Mr. Speaker, last week, in response to a question from the member for Vancouver Quadra, I called the member a disgrace.

I am told that is unparliamentary, and I withdraw that. I did not appropriately make the distinction between the disgraceful question and the member, so I withdraw that.

**The Speaker:** I appreciate the withdrawal.

**ROUTINE PROCEEDINGS**

[*English*]

**GOVERNMENT RESPONSE TO PETITIONS**

**Mr. Tom Lukiwski (Parliamentary Secretary to the Leader of the Government in the House of Commons, CPC):** Mr. Speaker, pursuant to Standing Order 38(6), I have the honour to table, in both official languages, the government's response to 33 petitions.

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**COMMITTEES OF THE HOUSE**

## LIAISON

**Mr. Dean Allison (Niagara West—Glanbrook, CPC):** Mr. Speaker, pursuant to Standing Order 107(3), I have the honour to present, in both official languages, the first report of the liaison committee, entitled "Committee Activities and Expenditures - April 1 to June 30, 2013".

The report highlights the work and the accomplishments of each committee and details the budgets that fund the activities approved by committee members. It is the Liaison Committee's intention to present such reports to the House three times a year.

● (1505)

## JUSTICE AND HUMAN RIGHTS

**Mr. Mike Wallace (Burlington, CPC):** Mr. Speaker, I have the honour to present, in both official languages, the first report of the Standing Committee on Justice and Human Rights, entitled "C-489, An Act to amend the Criminal Code and the Corrections and Conditional Release Act (restrictions on offenders)".

## SCRUTINY OF REGULATIONS

**Ms. Chris Charlton (Hamilton Mountain, NDP):** Mr. Speaker, I have the honour to present, in both official languages, the first report of the Standing Joint Committee on Scrutiny of Regulations in relation to section 19 of the Statutory Instruments Act, and I should like to move concurrence at this time.

**The Speaker:** Does the hon. member have the consent of the House to propose the motion?

**Some hon. members:** Agreed.

**The Speaker:** The House has heard the terms of the motion. Is it the pleasure of the House to adopt the motion?

**Some hon. members:** Agreed.

(Motion agreed to)

\* \* \*

**PETITIONS**

## SHARK FINNING

**Mr. Fin Donnelly (New Westminster—Coquitlam, NDP):** Mr. Speaker, I rise to present a petition in which the petitioners say that measures must be taken to stop the global practice of shark finning to ensure the responsible conservation and management of sharks. The petitioners call upon the Government of Canada to immediately legislate a ban on the importation of shark fin to Canada.

## FOREIGN INVESTMENT

**Mr. Frank Valeriotte (Guelph, Lib.):** Mr. Speaker, it is my honour today to table two petitions from many constituents in my riding of Guelph with regard to the Canada-China investment treaty. My constituents continue to be concerned about the lack of public consultation and the secretive process by which the treaty was negotiated. The petitioners are also concerned that the treaty would provide state-owned enterprises with the ability to claim damages and to complain to federal governments about laws or regulations made at any level of government that reduce their expectation of profits.

The petitioners ask the government to take immediate steps to limit the influence of state-owned enterprises over our democracy in the interest of ensuring that the power over Canadian laws remains in Canadian hands.

## NUCLEAR WEAPONS

**Mr. Don Davies (Vancouver Kingsway, NDP):** Mr. Speaker, I am proud to stand in the House to introduce a petition signed by many people in Vancouver, including from Vancouver Kingsway, who are calling upon the Canadian government, and all governments, to negotiate a treaty banning nuclear weapons and leading to their complete eradication.

The petitioners point out their deep concern about the continuing threat posed by many thousands of nuclear weapons across the globe. They point out that any use of these ultimate weapons of mass destruction, whether by accident, miscalculation, or design, would have catastrophic consequences for humanity and the planet as a whole.

The petitioners plead with us to note that the only way to guarantee that they will never be used again is to outlaw and eliminate them, without further delay, around the globe.

## MULTIPLE SCLEROSIS

**Ms. Kirsty Duncan (Etobicoke North, Lib.):** Mr. Speaker, the debate concerning CCSVI should be based on science, evidence, and improving the quality of life for Canadians with MS, who wonder how the government is going to judge the radically different CCSVI data from the east and west of Canada.

*Routine Proceedings*

Canadians with MS ask, if the debate had been based on evidence, why the Minister of Health did not meet with CCSVI groups across the country and with Canadians who had been treated to learn about their experience, why she did not include experts in CCSVI in her expert working group, and why the decision to kill Bill S-204 was taken eight months before the Senate hearings.

The petitioners are calling upon the minister to consult experts, to undertake Phase III clinical trials on an urgent basis, and to require follow-up care.

## IMPAIRED DRIVING

**Mr. Mark Warawa (Langley, CPC):** Mr. Speaker, I am honoured to present a petition representing thousands of people from beautiful British Columbia. The petition highlights that last year, Cassandra Kaulius was killed by a drunk driver. A group of people who have also lost loved ones to impaired drivers, called Families for Justice, says that the current impaired driving laws are too lenient.

The petitioners are calling for new mandatory minimum sentencing for people who have been convicted of impaired driving causing death. They also want the Criminal Code changed to redefine the offence of impaired driving to vehicular manslaughter.

## NAVIGABLE WATERS PROTECTION ACT

**Mr. Mike Sullivan (York South—Weston, NDP):** Mr. Speaker, I have the honour to table petitions signed by my constituents calling on the government to amend the Navigable Waters Protection Act in order to reprotect Canada's lakes and rivers, including the heritage river, the Humber River, in my riding.

## FOOD AND DRUGS ACT

**Mr. James Lunney (Nanaimo—Alberni, CPC):** Mr. Speaker, I have three petitions to present today. Two of them deal with the same issue, which would be Bill C-257, an act to amend the Food and Drugs Act with regard to mandatory labelling for genetically modified foods.

The petitioners come from communities across Vancouver Island, including Parksville, Qualicum Beach, Nanoose, Errington, Bowser, and Nanaimo. They would like us to address this issue so that Canadians know what they are eating.

## MEDICAL EXPENSE TAX CREDIT

**Mr. James Lunney (Nanaimo—Alberni, CPC):** Mr. Speaker, the other petition is from Canadians concerned about the medical expense tax credit for vitamins, herbs, and nutritional supplements. They draw attention to the fact that nutritional supplements help Canadians with a whole range of conditions and that Canadians are spending millions of dollars and lowering health costs by looking after themselves.

The petitioners, with just short of a thousand signatures from across Vancouver Island, would like their investment in their health to be recognized through the Income Tax Act with an amendment.

● (1510)

## NORTHUMBERLAND FERRIES LIMITED

**Hon. Wayne Easter (Malpeque, Lib.):** Mr. Speaker, I am pleased to present a petition on the Northumberland Ferries Limited, which is the link that connects Wood Islands to Pictou, Nova Scotia.

Petitioners are concerned about the new contract and are directing the Government of Canada to negotiate a new contract that is equal to or greater than the previous three-year contract with Northumberland Ferries Limited, taking into account the increase in the consumer price index, and to provide adequate public funding in order to ensure that the associated infrastructure meets or exceeds the levels of today's standards.

## NAVIGABLE WATERS PROTECTION ACT

**Ms. Irene Mathyssen (London—Fanshawe, NDP):** Mr. Speaker, I have a petition regarding my private member's bill, Bill C-498. The petitioners are asking that the Thames River be reincluded in the Navigable Waters Protection Act, granting heritage protection to the North Thames, Middle Thames, and Thames Rivers. This would ensure that any development that would impact its navigation would undergo a strict environmental assessment.

The petitioners want the government to realize the detrimental impact that reckless changes to the Navigable Waters Protection Act have on these treasured waterways across all of southern Ontario and, indeed, across this country.

## CANADIAN BROADCASTING CORPORATION

**Mr. Bruce Hyer (Thunder Bay—Superior North, Ind.):** Mr. Speaker, it is my pleasure to table a petition regarding CBC/Radio-Canada, which provide Canadians with a voice with which we are all able to take part in our national consciousness and cultural identities.

The petitioners are calling on the government to provide stable and predictable funding so that CBC remains a strong voice for all Canadians for all time.

## NORTHUMBERLAND FERRIES LIMITED

**Mr. Rodger Cuzner (Cape Breton—Canso, Lib.):** Mr. Speaker, I too, like my colleague from Malpeque, want to rise on behalf of a number of people who are concerned about the expiration of the contract for the Northumberland Ferries Limited, the ferry that connects the world to Prince Edward Island. The expiry date is March 31, 2014.

We want the government to proceed with negotiations and hopefully look at a contract that is equal to or greater than the previous three-year contract so that this service, which has an impact of about \$27 million on the province of Prince Edward Island, is maintained to help this beautiful part of our country.

## CANADIAN BROADCASTING CORPORATION

**Mr. Matthew Kellway (Beaches—East York, NDP):** Mr. Speaker, I have the honour of presenting two petitions today, signed by citizens from within and around my riding of Beaches—East York in Toronto.

*Routine Proceedings*

The first calls upon the government to support the New Democratic Party's plan to immediately stabilize CBC/Radio-Canada funding and to provide reasonable increases as economic conditions improve.

## TORONTO ISLAND AIRPORT

**Mr. Matthew Kellway (Beaches—East York, NDP):** Mr. Speaker, the second petition calls upon the Government of Canada to block any changes to the tripartite agreement that would allow jet airplanes or extensions of the Toronto Island airport runways, to stop subsidizing Porter Airlines, and to compel the Toronto Port Authority to pay millions of dollars in back taxes owed to the people of Toronto.

## DEMOCRATIC REFORM

**Hon. Carolyn Bennett (St. Paul's, Lib.):** Mr. Speaker, I wish to present a petition on fair electoral representation. The petition is to ensure that Canadians have a fair electoral system. The petitioners are saying that it is completely unfair when the number of MPs that party supporters elect does not reflect the number of voters who cast ballots for that party.

The petitioners pointed out to me in a number of town hall meetings at Christie Gardens that it seems exceptionally unfair that many more people voted against the governing party, which is ruling with a majority.

As fair voting systems better reflect the will of voters and let them vote for the candidate and party they prefer and give each community fair and accountable representation, the petitioners are calling upon the House of Commons to immediately undertake public consultations across Canada to amend the Canada Elections Act to ensure that voters can cast an equal and effective vote to be fairly represented in Parliament.

I am particularly honoured to present this particular petition in that it is signed by one of the real heroes of citizen engagement, my dear friend Ursula Franklin.

• (1515)

**Mr. Scott Reid (Lanark—Frontenac—Lennox and Addington, CPC):** Mr. Speaker, I have several petitions here today.

One is identical to the petition just presented a moment ago by my colleague from St. Paul's, so I will not repeat the content of it.

## GENETICALLY MODIFIED ALFALFA

**Mr. Scott Reid (Lanark—Frontenac—Lennox and Addington, CPC):** Mr. Speaker, the second petition deals with genetically modified alfalfa and is similar to the petition presented earlier by my colleague from Nanaimo—Alberni, so I will not deal with the content of that, except to note that these are being submitted by people from across the country.

## MINING INDUSTRY

**Mr. Scott Reid (Lanark—Frontenac—Lennox and Addington, CPC):** Mr. Speaker, the third petition relates to the regulation of Canadian mining companies operating abroad.

In a very lengthy petition, the petitioners draw to the attention of the House the fact that Canada is a very significant player, indeed the most significant player, in mining investment abroad, and therefore

we have particular responsibilities to ensure that mining operations that are financed through our stock markets are carried out in a way that is sensitive to both environmental and human rights concerns abroad. This is a matter that we have studied in the human rights subcommittee that I chair.

## FALUN GONG

**Mr. Scott Reid (Lanark—Frontenac—Lennox and Addington, CPC):** Mr. Speaker, as well there is a petition here relating to the Chinese government, its Communist regime, and the organ harvesting of Falun Gong practitioners that has gone on in that country. The petitioners draw attention to the fact that two prominent Canadians, David Matas and David Kilgour, have written extensively on this and provided very powerful evidence of this unspeakable human rights abuse.

## URBAN WORKERS

**Mr. Andrew Cash (Davenport, NDP):** Mr. Speaker, today we hear news that Walmart has embarked on a food drive for its own employees. That fact underscores the reality of the economy today. More and more workers are living in very precarious circumstances without access to a pension, benefits, or any modicum of job security.

I have a petition here on behalf of members of the city of Toronto who are calling on Parliament to support my national urban workers strategy. I would like to submit that.

## CONSUMER PROTECTION

**Mr. Andrew Cash (Davenport, NDP):** Mr. Speaker, I have another petition here from members of my community who are increasingly concerned about extra fees on their phone, cable, and telecom bills, especially the \$2 fee that is charged when they get their bill in the mail.

Many people in our country do not have access to the Internet. Many seniors who are on fixed incomes cannot afford the extra \$50 or \$60 a year that accumulates for these \$2 fees. We want to see those fees gone from those bills, and this petition speaks to that issue.

## NORTHUMBERLAND FERRIES LIMITED

**Hon. Lawrence MacAulay (Cardigan, Lib.):** Mr. Speaker, pursuant to Standing Order 36, I am pleased to join my colleagues to present a petition to the Government of Canada from a large number of constituents and people from Atlantic Canada who are very concerned over the Wood Islands—Caribou ferry service. It has an enormous impact on Prince Edward Island and Pictou County, Nova Scotia.

The petitioners request that the Government of Canada ensure that the contract is signed and is equal to or more than that for the previous three years. If not, this will have, yet again, another financial impact on Prince Edward Island.



## LABOUR-SPONSORED FUNDS

**Hon. Judy Sgro (York West, Lib.):** Mr. Speaker, I am pleased to present a petition on behalf of hundreds of Canadians from Quebec who are denouncing the decision made by the government on Bill C-4 to terminate the tax credit on the labour-sponsored venture capital funds, which will clearly end a huge economic benefit and destroy a system providing retirement income for many.

\* \* \*

• (1520)

## QUESTIONS ON THE ORDER PAPER

**Mr. Tom Lukiwski (Parliamentary Secretary to the Leader of the Government in the House of Commons, CPC):** Mr. Speaker, I ask that all questions be allowed to stand.

**The Speaker:** Is that agreed?

**Some hon. members:** Agreed.

## GOVERNMENT ORDERS

[Translation]

## RESPECT FOR COMMUNITIES ACT

The House resumed consideration of the motion that Bill C-2, An Act to amend the Controlled Drugs and Substances Act, be read the second time and referred to a committee, and of the amendment.

**Mr. François Pilon (Laval—Les Îles, NDP):** Mr. Speaker, I am pleased to rise today in the House to debate Bill C-2, an act to amend the Controlled Drugs and Substances Act.

The bill before us today brings into sharper focus what is happening under this Conservative government. This bill is driven solely by ideology and completely ignores the facts. That is nothing new for the Conservatives. Bill C-2 is nothing more than a thinly veiled attempt to put an end to supervised injection sites.

As we have seen routinely for some time, this government has no qualms about introducing bills that disregard recent rulings by the highest court, the Supreme Court of Canada. In fact, in 2011, the Supreme Court ruled that InSite provided essential services and had to remain open under the exemption set out in section 56 of the Controlled Drugs and Substances Act. The Court also ruled that the charter authorized users to access InSite services and that the provision of similar services should also be authorized under the same exemption.

In addition, a number of studies published in major scientific journals, such as the *New England Journal of Medicine* and the *British Medical Journal*, describe the benefits of the InSite supervised injection facility.

We have noticed over the past few years that the Conservatives are not fond of scientists who express their opinions, particularly when those opinions are critical of the Conservatives or when they go against the Conservatives' ideology.

A government's mission is not to muzzle scientists or to gag members of the House of Commons a record number of times. The

## Government Orders

government's role is to take note of the facts and, on the basis of those facts, make the best decisions for Canadians. With Bill C-2, the government is again falling into the embarrassing trap of grandstanding and ignoring facts that clearly prove that supervised injection facilities like InSite have a wide range of benefits for the general public.

Just a few hours after introducing Bill C-2, the Conservatives launched a campaign called "Keep heroin out of our backyards", designed to rally grassroots support and, once again, to fuel the public's unfounded fears about safety. I am really looking forward to hearing the arguments they make to the Standing Committee on Public Safety and National Security.

Let us just take a few moments to think about this seriously. Are the Conservatives really so keen on magical thinking that they believe that, if InSite were closed, heroin use would automatically disappear? I hope their cognitive reasoning is a little more advanced than that. The reality is that, after the closure of supervised injection facilities, heroin use would not disappear but would once again be widespread in neighbourhoods and could at that point become a real danger for the general public. This is the exact opposite of what the Conservatives are claiming.

This is a fact. Let us forget the Conservatives' ideological inflexibility that results in the exact opposite of what they claim, and talk about the facts, the real facts, about InSite and the positive benefits of supervised injection facilities.

The InSite project was set up as part of a public health initiative by the Vancouver Coastal Health Authority and a number of other community partners following a 12-fold increase in the number of overdose deaths in Vancouver between 1987 and 1993. Over that seven-year period, the Vancouver area also saw a disturbing increase in the rate of blood-borne diseases, such as hepatitis A, B and C and HIV/AIDS, among injection drug users.

In 2003, InSite secured an exemption under the Controlled Drugs and Substances Act for activities with medical and scientific applications, in order to provide services and conduct research into the effectiveness of supervised injection facilities.

In 2007, the Onsite Detox Centre was added at the same location.

In 2008, InSite's exemption expired. The Minister of Health denied its application for renewal, in a portent of the bill now before this House.

• (1525)

The Minister of Health's decision triggered a series of court cases, following which the British Columbia Supreme Court found that InSite had to be given a further exemption. The Conservative government appealed that decision, but lost its appeal in the British Columbia Court of Appeal, which also found that InSite should remain open.

*Government Orders*

Finally, in 2011, the Supreme Court of Canada ruled that the Minister's decision to close InSite violated its clients' charter rights, was arbitrary, and was contrary to the very purpose of the Public Health and Safety Act. In the NDP, we believe that government decisions should be made in the best interests of the public, and not in accordance with an ideological stance.

Evidence has shown that supervised injection sites are effective in reducing the risk of contracting and spreading blood-borne diseases and overdose-related deaths. It has also shown that such sites are not bad for public safety and that in many cases, on the contrary, they promote it by reducing drug injection in public places, the associated violence, and the waste materials that result from drug use. They also make it possible to strike a fair balance between public safety and public health and to connect users with the health care and drug treatment services they need in order to escape the hell of drug use.

In this case, the facts are clear and unequivocal. Between 1987 and 1993, before InSite opened, the number of overdose-related deaths in Vancouver rose from 16 to 200 a year. Since it opened, the number of overdose-related deaths in east Vancouver has fallen 35%.

For our Conservative friends who believe that InSite is a dangerous place that poses a threat to the public, here are some more facts. Over a one-year period, 2,171 InSite users were referred to addiction counselling and other support services. People using InSite's services at least once a week are almost twice as likely to enrol in a detox program than those who visit only occasionally.

There was a very significant drop in the number of discarded needles, injection-related waste materials and people injecting themselves with drugs, just in the year following the opening of InSite. It was found that 80% of respondents living or working in Vancouver's downtown east side support InSite. A number of studies have looked at the possible negative impact of InSite. Not one produced any evidence of harm to the community.

The facts are clear. An initiative like InSite is a step in the right direction in terms of public health and public safety. In contrast to what the Conservatives claim, it gets drugs off our streets and moves them to supervised sites where people are attended to and strongly encouraged to explore the possibilities for drug treatment and social reintegration.

That is why we will be voting against Bill C-2, which is based—as is all too often the case on the other side of the House—on magical thinking, rather than facts.

• (1530)

**Mr. François Choquette (Drummond, NDP):** Mr. Speaker, I want to thank the hon. member for Laval—Les Îles for his excellent speech. He explained very clearly why we should all vote against this bill.

The bill is based on nothing but ideology. Its only goal is to get money from the Conservative base by using scare tactics, even though scientific research and health studies have shown the benefits of InSite, as my colleague explained. I would like to ask him a question, so that he can offer more details and examples.

Does he think the Conservatives should step back from this bill, given the positive impact programs like InSite can have on health?

For example, users are referred to addiction treatment options, at some point, so that they can control their drug use and improve their health.

**Mr. François Pilon:** Mr. Speaker, I thank my colleague from Drummond for his excellent question.

I come from an area where there are a lot of drug addicts and there is no facility like InSite. I see people from day to day, and it is clear just from looking at them that they have a lot of problems. I even know some people who died from an overdose. If there had been a place like InSite, they would probably still be alive today.

**Ms. Laurin Liu (Rivière-des-Mille-Îles, NDP):** Mr. Speaker, what I find particularly appalling in this whole thing is that the Conservatives are using this InSite situation to raise campaign money. They launched a “Keep heroin out of our backyards” campaign.

It is disgusting that they would try to profit from this and that they are sensationalizing the issue. That is petty politics.

Could my colleague talk about the evidence that supports our position? Could he give us some figures, such as the number of people InSite has helped, to illustrate why we have taken this position?

**Mr. François Pilon:** Mr. Speaker, I thank my colleague from Rivière-des-Mille-Îles for her question. I would have to look at my notes, because I do not have the exact figures. However, I agree that it is disgusting that the Conservatives are using this issue to raise money and that they launched a campaign with a title like “Keep heroin out of our backyards”. That is the exact opposite of what will happen.

I live across from a park and I sometimes see people there at two in the morning. I do not need to go over there to know what teens and other people are doing at that hour. Contrary to what the Conservatives claim, I think that having a place like InSite in my neighbourhood would keep heroin out of my backyard.

[*English*]

**Mr. Randall Garrison (Esquimalt—Juan de Fuca, NDP):** Mr. Speaker, I wonder if the member is finding the same thing that I am finding. Many people in my community who are very concerned about harm reduction would like to get the message through to the House of Commons. There are many people who have expressed interest in appearing at committee when the bill gets to committee. With a Conservative majority I am expecting it will. I am committed to making sure that as many of those people as possible are heard because the evidence in favour of safe injection sites is so overwhelming. I am wondering if the member is finding the same kind of interest in Montreal that we are finding on the west coast.

[*Translation*]

**Mr. François Pilon:** Mr. Speaker, I thank my hon. colleague for the question. I will not say the name of his riding, since it is even more complicated than mine.

As I was saying, that is a concern in my community. We would really like to have a place like InSite. Many people would be willing to appear before the Standing Committee on Public Safety and National Security, which I have been a member of for a few months.

Indeed, I know many people who would be willing to come and tell the committee how beneficial it would be to have a place like InSite in their community.

• (1535)

[*English*]

**Ms. Irene Mathysen (London—Fanshawe, NDP):** Mr. Speaker, I want to begin by making it clear that the NDP and I oppose Bill C-2. The bill is a thinly veiled attempt to arbitrarily shut down InSite. Beyond Vancouver's Downtown Eastside, Bill C-2 would make it next to impossible to open a safe injection site anywhere, no matter how desperately a community may need one, no matter how much suffering exists.

It is not pleasant to think about intravenous drug use. However, it exists, and it is happening on a scale that makes it a public problem in need of a public solution. Bill C-2 is a move in the wrong direction and will only exacerbate the problem further.

There are approximately 100,000 Canadians who say they have injected themselves with drugs like cocaine, heroin, OxyContin, and crystal meth. Bill C-2 does nothing to help Canadian drug addicts. It does nothing to address this as a public health issue.

Though the short title of the bill is “respect for communities act”, we must make no mistake that this legislation will hurt our communities. The title is the usual Conservative Orwellian newspeak, meant to pretend that the government is acting positively. If Bill C-2 is passed and communities that need supervised injection sites cannot build them, where does the government want drug users to go? There certainly has not been any real answer articulated on that question.

Let me tell members about the impact that Bill C-2 will have. It will push drug users into our communities, into the alleyways, on to our town streets, and into our neighbourhood parks. There will be nowhere else for addicts to go but to the public spaces in our communities.

One year after InSite opened, there was a significant drop in the number of people injecting on the streets and much less injection-related litter, such as discarded syringes. If for no other reason than to keep intravenous drug users off the streets of our communities, we need supervised injection sites like InSite. The element of protection that these sites provide is not just for the drug users but for the community at large.

We must also remember that supervised injection sites facilitate contact between drug users and those specialists who can help them to get off drugs or become sober. InSite has proven that its frequent patrons are one and a half times more likely to eventually enrol in detox programs.

Standing in the way of supervised drug injection sites means standing in the way of helping people to get sober and kick dangerous habits. Therefore, I wonder why the government is so hostile to supervised drug injection sites. Does it want an increase of

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unsupervised drug users? Perversely, could it be that the government wants to fill its prisons with drug addicts? For those who mindlessly support the prospect of more prisons, the prospect of more full prisons must be quite satisfying.

Bill C-2 does nothing to stop drug use or encourage sobriety. It does not deter Canadians from injecting themselves with drugs. Denying Canadian drug addicts access to supervised injection sites unfortunately denies the people who use drugs a safe and clean way of doing so. We do not have to condone drug use to see the benefit of supervised injection sites. We must face reality. Drug addicts use drugs. The least we can do is to reduce the harm around this activity and try to steer addicts toward help. They deserve this offer of help. There is no such thing as a throwaway human being.

It is not an exaggeration to say that access to facilities such as InSite is a matter of health and safety, life and death. Let me remind members that in 2011 the Supreme Court ruled in support of InSite. The Supreme Court told the federal government that it could not inhibit safe injection sites from operating. The ruling was based on section 7 of the charter. Therefore, according to the Supreme Court of Canada, legislation such as Bill C-2 is against the fundamental right to life, liberty, and security. The people in this chamber demand those rights for themselves. Why on earth would they deny these rights to others?

• (1540)

Elsewhere in the world, safe injection sites operate in 70 cities in six different European countries and Australia. Safe injection sites reduce harm. They improve a community's public health, reduce disease and have absolutely no negative impact on public safety. In fact, they enhance public safety, all the while preserving human lives. These are the lives of people who are someone's brother or sister. They are people who were once beloved children, cherished family members. They were not always drug addicts. These are the lives of people who deserve to be saved and respected and who deserve to be healthy and safe.

Vancouver's Downtown Eastside has been described as home to as many as 5,000 injection drug users. Despite being drug users, these 5,000 people remain Canadians, much to the chagrin of the current government. Even if we do not agree with their life choices and drug use, the government must not abandon them. They are Canadians. They are human lives, and they are vulnerable. If their government is able to help, it is morally obligated to do so. However, Bill C-2 does not help; in fact, it hinders.

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In Vancouver's Downtown Eastside, InSite has made a positive difference. Human lives have been saved since InSite first opened. The number of accidental drug overdose deaths has been reduced by 35. Those who use InSite once a week have been shown to be 1.7 times more likely to enrol in detox programs than those who visit infrequently. Injection drug users who use InSite are 70% less likely to share needles. Reduced needle sharing is an internationally recognized best practice to reduce the rate of HIV-AIDS and various other diseases. Finally, InSite patrons are more likely to seek medical care through the program, which results in fewer emergency room visits and improved health outcomes. It might also be of interest to the Conservative government that fewer emergency room visits equal cost savings to our health care system.

This is just a smattering of InSite's positive impact. This impact has been proven in over 30 peer-reviewed studies, published in journals like the *New England Journal of Medicine*, *The Lancet* and the *British Medical Journal*. Further, the experts at the Canadian Medical Association and the Canadian Nurses Association are also against Bill C-2.

I implore the government to listen to the science, to Canadian doctors and nurses, and abandon Bill C-2.

InSite does good work. It must be allowed to continue to operate. More than 80% of people surveyed in Vancouver's Downtown Eastside want it to continue to operate. Will the Conservative government listen to the only community in Canada that currently has a supervised injection site? Will it listen to the people of Vancouver's Downtown Eastside and respect what they want because they support InSite?

We can only ask why the government refuses to respect the scientific and medical communities that support safe injection sites. Why does the government want to abandon those who have been so vulnerable and unfortunate as to become drug addicts? Why does the government not understand that safe injections sites are part of a community harm reduction strategy? Such sites improve the community for everyone who lives alongside drug users.

Bill C-2 goes against all scientific evidence and experts who show that supervised injection sites reduce harm. The bill goes against the charter and the Supreme Court of Canada, and the Conservative government goes against the moral obligation to reduce harm to drug users.

[Translation]

We must not give up on people, even if they seem to have given up on themselves. Without solutions to address substance abuse, we must at least try to implement harm reduction strategies.

[English]

We must not abandon people, particularly when they are in despair. Without a solution to drug addiction, we must, at the very least, try to implement harm reduction.

For these reasons, the New Democratic Party and I oppose Bill C-2.

As a sideline, the Heinz company just announced the closure of its plant in Leamington. U.S. Steel is shutting down in Hamilton. In my town of London, Ontario, we have lost far too many good-paying

jobs. Despite all that, the Conservative government chooses to assault the vulnerable instead of focusing on the economy and the good jobs that we need to support families and communities.

I rest my case.

• (1545)

**Mr. Jasbir Sandhu (Surrey North, NDP):** Mr. Speaker, I want to thank my hon. colleague for the wonderful speech she gave and for laying out the facts. I know the Conservatives do not believe in facts, but she laid them out very nicely.

We have talked about Conservatives, but let us talk about Liberals. Liberals claim to respect Parliament and to stand up for the democratic process, and this is a quote from their platform in 2011. It stated, "Canadians expect their leaders to respect our democracy between elections, not just when we vote". I do not hear Liberals speaking up on this issue. They claim they are against this bill, yet Liberal members are not coming forward to speak on this very deep issue.

I want to ask a question of my hon. colleague. Does the hon. member find it strange that during elections Liberals say one thing and yet practise something completely different when they get into the House?

**Ms. Irene Mathysen:** Mr. Speaker, it is very interesting. As members may tell from my vintage, I am a veteran of Liberal campaigns. I remember all the red books. There was a red book in 1993, and then again in 1997 and 2000. There was one red book after another. In each and every one of those red books, there were promises for child care, pharmacare, and improving the lives of Canadians. I ran in a couple of those elections when the Liberals won, and strangely enough none of those promises were kept. They talk a good game and are very persuasive. They have the name recognition and the coiffure to influence. However, when it comes to substance and to standing up and effecting change when they have power, it is not there.

I thank my colleague for the question. I can only say that we should judge them by what they do, because they do not do much.

**Mr. Kevin Lamoureux (Winnipeg North, Lib.):** Mr. Speaker, hypocrisy is unparliamentary, so I will not use that word in describing what I just witnessed. Not only has the Liberal Party been putting members forward, the very site she referenced was the creation of the Liberal government working hand in hand with the many different stakeholders to make it come into being. Not only have I spoken on the issue, but others from within the Liberal caucus have spoken on the issue.

When we talk about commitment, in Manitoba there is the big lie. The NDP premier of Manitoba said he was not going to increase the PST when he was on TV, but in government he increased the PST. The Liberal Party does not have to take any lessons on the issue of hypocrisy from the New Democrats.

My question to the member is this. Will she at the very least acknowledge with some honesty that it was the Liberal Party working in co-operation with stakeholders in Vancouver that ultimately put in place the one that is in Canada today?

**Ms. Irene Mathysen:** Mr. Speaker, I guess we touched a nerve.

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I am very happy to reply. It is very important for a community to have safe injection sites like InSite. Given all of the promises of all of the Liberal governments, if it came through once, that is not such a bad thing.

However, I also remember no child care. I also remember their promises to help first nations. I also remember that when it came to the most vulnerable of Canadians, those who had lost their jobs, it was the Liberal government and then the subsequent Conservative government that took—and I use the word “took”—\$57 billion out of the employment insurance account and then said it was so sad that they could not support the families and people who were unemployed.

I do think there is perhaps hypocrisy in the air, but I will not name it.

**Mr. Jasbir Sandhu (Surrey North, NDP):** Mr. Speaker, before I speak to the bill, I just want to comment on a couple of activities in my community that took place over the last week.

I had an opportunity to visit the Surrey Traditional School's grade 5 and 6 students. They were about 12 years old. It was part of a UN program, where their MP is brought to the school. I am glad to have had the opportunity to visit this school. I want to assure the House that we have a bright future because of these young people. They are very bright and asked very thoughtful questions. These students were very engaged in Canadian politics. Not only that, we discussed lowering the age limit for voting to 12 years old. We had a lively discussion about that.

They are wonderful young people, and I think Canada has a bright future with young people like those in the Surrey Traditional School.

I also want to give a shout out to a fundraiser that went on in my community. I am so happy to say to the House that I am from Surrey. The entire community came together to raise funds for the Philippines typhoon. It was standing room only in the banquet hall.

I want to give a special shout out to the organizers who brought this function together in a very short period of time. Sukhi Bath, along with Kultar Thiara of the Grand Taj, and also Narima Dela Cruz, were the main organizers for this. They raised over \$100,000 for the Philippines disaster that happened last week. My thoughts and prayers go out to all of those who were caught in this terrible tragedy. Also RED FM, another radio station, held a radiothon to raise money for the victims of the Philippines typhoon.

I want to thank everyone in my community who came together and raised hundreds of thousands of dollars to help out folks in the Philippines. I thank all of those people. I made a small donation, and I encourage all Canadians to make a small donation to the Canadian Red Cross. I encourage all members of the House to make a contribution directly to the Red Cross, which is helping the people who are affected by this typhoon.

I have heard a number of speeches today. I have not heard many from the Liberals, as the member claims. They seem to be missing. I have not heard anything from the Conservatives. The government is bringing forward a bill, yet it is not telling us why it is bringing it forward.

The rumour is, as always, that ideology triumphs over facts and figures. I believe the Conservatives are not standing up because we are going to be asking them questions, and it is pretty difficult to defend ideology over facts and figures. The facts and figures show that InSite has been operational in the Vancouver area for many years. It started operating in 2003. In 2008, the five-year certificate expired, and they reapplied to get the exemption under the Health Act.

However, the Conservatives fought this. They did not want to renew the licence for this particular facility, which actually helps people. It has been shown to reduce crime in the area. It has brought down the number of people dying because of drug overdoses. It has helped to clean up downtown neighbourhoods where people were shooting up and doing drugs in the streets. They can now get this service in a secure place.

● (1550)

In 2011, the Supreme Court of Canada directed the Conservative government not to interfere. It ruled in favour of having InSite in Vancouver. Research and medical professionals had input in putting this site together. They have shown facts and figures on why it is working. Yet the Conservatives want to put in obstacles in the way so scientifically and medically proven techniques for harm reduction are not realized in our communities.

We have a role to play as parliamentarians and that role is to make sure that we take into consideration all the facts and figures to come up with policies that reduce harm in our communities. That is our role, yet the Conservatives are trying to put roadblocks in place so that people cannot have this. Whether it is public safety or harm reduction or public health, that is the case with the legislation.

We often hear about a policy coming down from Ottawa that does not take into consideration the local interests. I believe the bill does that. Basically Ottawa is telling communities what they need to do. I believe it is better left for communities at the local level, with their law enforcement agencies, police, health care professionals, to decide. The community decided to have this facility available in Vancouver. Yet now Ottawa is telling communities across this country what they need to do and what they need not do. I think that is wrong.

Communities will make better decisions, localized decisions. They can do this on their own. They do not need Ottawa coming up with obstacles, rules, regulations or laws to have this implemented at the ground level. Basically, the Conservatives are telling our communities what they can or cannot do in their backyards. I believe that is fundamentally flawed.

When we talk about ideology and evidence, we should be making decisions based on evidence, research and input from professionals, yet this is not the case. There have been over 30 peer reviewed studies that have shown the benefits of these kinds of sites in preventing harm to people. Conservatives are ignoring all of those facts, figures and research in coming up with this legislation.

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Facts from InSite are that it has reduced crime in the area. It helps people who come to the site. There is another facility located above it where the users have access to rehabilitation services. One year there were over 2,000 referrals made to this on-site facility, which provided counselling and rehab services to people who were using drugs. It is another way to capture an audience and maybe help them get off drugs.

In my community in the Fraser health region we had over 100 deaths in 2001 due to overdose. When people overdose they also put a burden on our medical emergency services. It is fair to say that this sort of policy, this sort of law, will not reduce that burden on our health care. In fact, it will make it worse, because of the ideological approach that the government is taking. We need to take a practical approach that leaves these decisions to local bodies and let the professionals and facts decide how we want to deal with these situations.

• (1555)

**Hon. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Mr. Speaker, if anyone is ideological on this issue, it is the NDP. In listening to the debate today, New Democrats have not talked about the safety of society as a whole. They are focused solely on the drug user, and they are advocating something that is bad for a drug user, which is drugs, obviously.

The bill is for the protection of public health and the protection of public safety. It prohibits certain activities associated with harmful substances and allows access to those substances. These substances are frequently used in the production of illicit drugs. It is a worldwide problem that has a significant impact on Canada.

I wish I could read the whole bill. Anyone who has read the bill would say, yes, let us pass it for the sake of the children.

• (1600)

**Mr. Jasbir Sandhu:** Mr. Speaker, I do not know where the Conservatives come up with their facts. On this side of the House we rely on research, on medical professionals, on community workers, on health authorities, and on law enforcement agencies. All of them have said that having a site similar to InSite actually reduces crime. It takes drug users off our streets.

How can the hon. member justify that this somehow pushes drugs on to our children? It is beyond me. This is clearly an ideological position of the Conservatives. There are no facts at all behind the legislation.

[*Translation*]

**Mr. François Lapointe (Montmagny—L'Islet—Kamouraska—Rivière-du-Loup, NDP):** Mr. Speaker, I rise spontaneously after hearing the arguments from our friends across the floor. I feel as though I am listening to a sixth-grader who has not done his homework before speaking to the class. This is incredible. Their argument is black and white and borders on the absurd. It makes no sense. This is Conservative magical thinking, pure and simple. According to them, we just have to say to people who are unfortunately addicted to hard, intravenous drugs that that is bad. Then they will stop using drugs immediately. If we do not agree with the Conservatives, it means we support drug use. It is ridiculous. I cannot believe this. We are not in the sixth grade, and the committee

is not made up of twelve-year-olds. In fact, my twelve-and-a-half-year-old son is capable of taking a longer-term view.

I wonder if my colleague could talk about how ridiculous this is.

[*English*]

**Mr. Jasbir Sandhu:** Mr. Speaker, prior to my speech, I talked about 12-year-olds in grade 6 at the Surrey Traditional School I visited. I can assure my colleague that they certainly came prepared to ask the right questions.

I can see what the hon. member is trying to say in regard to the Conservatives. The Canadian Medical Association approved having InSite facilities available that reduce harm. It is good for public safety and it is good for public health. The Canadian nurses' union endorses the position of having these facilities open for people to use.

If we are to be making laws in this place, they should be based on facts, research, and science, not on ideology. Unfortunately, the Conservatives do not respect the decision that was made by the Supreme Court, and they need to rethink that.

[*Translation*]

**Mr. Robert Aubin (Trois-Rivières, NDP):** Mr. Speaker, I would like to thank my colleagues and apologize first off: I am really going to try my very best to freshen up the debate by presenting the same facts in a new light.

It is now clear that we have been discussing Bill C-2 for three or four hours, and I am the 12th or the 13th speaker for the NDP. Obviously, we have a shared vision of the whole thing, because that is what we have been talking about.

In the House of Commons, the place where all debates to enhance draft legislation should be held, the Conservatives are using one of two strategies: they either systematically gag the opposition, to reduce members' speaking time in the House, or else they give us what we are getting today, nothing but silence from the Conservative members, who are probably now well aware that they have introduced a bill that is completely indefensible.

This government has lost the basic quality that allows any ruling class to claim that it is working on behalf of the people it represents. That quality is the ability to listen. I would even go so far as to say that it is especially the ability to listen.

Encased in its guiding ideology, the Conservative government is showing once again, with Bill C-2, that the Conservative way of thinking overrides reflection, analysis, any empirical findings, the desire of the majority of Canadians to do things differently, and even rulings handed down by the highest court in the land, the Supreme Court.

By way of introduction, I would like to remind members that in 2008, when InSite's exemption was about to expire, the minister refused to renew it. The incident prompted a series of court cases that revealed how, even then, the Conservative government was on the sidelines of a society that was looking for solutions and ways to provide assistance to people who were dealing with many different issues.

To use a baseball metaphor, everyone would understand quite quickly that, after three strikes, the batter is out. However, in the Conservative ideology, that is not the case: either you believe or you die. After a defeat in the British Columbia Supreme Court, a second defeat in the B.C. Court of Appeal, and finally, a rejection of its case in the Supreme Court of Canada, the Conservatives are still ignoring the consensus among the majority of Canadians, to try to satisfy its voter base so that it will line the Conservative coffers again, I guess.

Do not forget that in 2011, this same government—elected with just 39% of the vote from the 60% of the population that voted—claimed to have been given a strong mandate. We can see that the government does not really understand what it means to consult a majority.

However, I feel it is crucial to remind the House that in 2011, the Supreme Court of Canada ruled that the minister's decision to close InSite violated the rights guaranteed by the charter and that it was arbitrary, going against the very objectives of the act, particularly with regard to health and public safety.

The court based its decision on section 7 of the charter, which states that:

7. Everyone has the right to life, liberty and security of the person...

That means that even if someone uses drugs, they have the right to life, liberty and security of their person.

Continuing with the quotation:

...and the right not to be deprived thereof except in accordance with the principles of fundamental justice.

No matter, if the law does not allow the Conservatives to do as they see fit, they will change the law. That is basically what Bill C-2 is doing. This is not the first example of this style of governance, which has practically become a trademark of this government. It seems to think that democracy and democratic institutions are a hindrance and a burden to be contended with.

While the NDP recognizes the sensitive nature of the permits granted to organizations such as InSite, we firmly believe that these decisions need to be based on proven facts and expertise.

How can the Conservatives scrap the results of no fewer than 30 studies published in journals with recognized credibility, including the *New England Journal of Medicine*, *The Lancet* and the *British Medical Journal*?

• (1605)

How can they ignore the studies of sites similar to InSite in European countries and in Australia, which are not exactly developing countries? How can they push under the carpet the very telling results obtained by InSite? There is only one answer to all these questions: you have to see things in absolute terms and reduce complex problems to a simplistic black and white. For the Conservatives—I have said this about numerous bills, and it remains applicable today—everything is black and white. The good guys are on one side and the bad guys on the other; white on one side and black on the other; drug users on one side and sober people on the other; better still, the Conservatives on one side and the rest of the world on the other.

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The campaign launched a few hours after Bill C-2 was introduced is a wonderful illustration of this narrowness of mind. When a slogan like “Keep heroin out of our backyards” is used, you quickly understand that for those opposite, the ability to offer a measured response to a many-sided problem is completely non-existent. It is the not-in-my-backyard argument to the power of 10.

If my remarks were designed to convert my friends opposite, it would be rather like a voice crying in the wilderness. However, through the media, I know that some people are trying to gain a clearer idea about this bill and the pros and cons associated with a facility like InSite. The silence of the Conservatives with regard to their own bill readily demonstrates the paucity of facts underlying their position.

I will take the liberty of quoting a few statistics to show the benefits of an approach like InSite's to public and individual health and the impact on public safety, which is often the blockbuster argument.

Between 1987 and 1993, the number of deaths by overdose in Vancouver rose from 16 to 200 a year. If that is not enough to indicate a problem requiring a solution, I have to wonder what it would take. In Vancouver East, however, since InSite opened, the rate of deaths from drug overdose has fallen by 35%. A reduction of 35% from 200 deaths means some 70 deaths avoided in a few short years.

Over a one-year period, moreover, 2,171 users of InSite's services were referred to addiction counselling. That means a similar number of people who may get off the streets and resolve their problems, because they have been taken in hand by community resources.

While we cannot quantify it, there has been a significant drop in the number of discarded needles on the streets or in parks. This contributes to the safety of all citizens, particularly children who often play in parks.

A number of studies have focused on the negative impact of injection sites such as InSite, but none was able to show evidence of harmful effects on neighbouring communities.

Moreover, studies conducted by the European Monitoring Centre for Drugs and Drug Addiction show that supervised injection sites have significant benefits. For example, they reach out to vulnerable groups and they are accepted by communities. That is indeed the case. Of course, some educational efforts are necessary, but it is possible. These sites also help improve the health of people who use them and they reduce drug use in public places. If that is not a major component of public safety, I wonder what we are talking about. As I mentioned, these sites also reduce overdose deaths.

However, it does not take a rocket scientist to see that the Conservative logic puts in place procedures aimed at deterring the individual or the organization from fulfilling the stated mission or objective, if they want to open such a centre.

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In this regard, Bill C-2 is no exception to the methodology developed by the Conservatives, as in the case of employment insurance for example. Accessibility is cut back, controls border on the inquisition, and it is increasingly difficult to have individual rights recognized. The result is that people get discouraged by all these obstacles and they simply get out of the system. This may improve statistics, but it does not address the situation of workers or, in the case of this legislation, of people struggling with substance abuse.

Since I am running out of time, I will move on to the conclusion right away.

• (1610)

Obviously, I am adding my voice to those of my NDP colleagues to strongly oppose this government's approach and this foolish binary vision of the world.

While the Charter of Rights and Freedoms provides that all people are born equal, we know that we cannot hide behind such a declaration to avoid seeing our reality.

Our society is made up of individuals with very diverse life experiences, and our ability to live together harmoniously rests on being able to extend our hand to those who suffer, without passing judgment on the events that led them to this situation.

I will be voting against Bill C-2.

• (1615)

[*English*]

**Hon. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Mr. Speaker, again, the NDP shows no regard for public safety or the greater community. I am going to read three clauses in the bill. They state:

Whereas the money that is used to purchase controlled substances that are obtained from illicit sources often originates from criminal activity such as theft, and that money, in turn, often funds organized crime in our communities;

Whereas the substances that are subject to the Act may pose serious risks to the health of individuals and those risks are exacerbated when those substances are unregulated, untested and obtained from illicit sources;

Whereas the negative consequences associated with the use of illicit substances can have significant impacts on vulnerable subsets of the Canadian population;...

Why would the member possibly have anything against such a well-written bill?

[*Translation*]

**Mr. Robert Aubin:** Mr. Speaker, I apologize. I probably spoke too quickly for the translation to keep up with me. It seems that my esteemed colleague missed out on several pages of my presentation, because I indeed talked about public safety. However, instead of speaking theoretically, I spoke to concrete facts.

When a place like InSite reduces the number of drug users because they get support from organizations that work to meet addiction needs, it is serving the interests of public safety. When I say that a place like InSite makes it possible for parks and streets to be clear of dirty needles that could infect others who do not use drugs, I am also talking about public safety. I have done so many times.

My colleague brings up completely theoretical points. He does make some sense. I would like to see him rise to defend his party's bill, rather than trying to impose his views with questions that are just too far-fetched.

**Mr. François Choquette (Drummond, NDP):** Mr. Speaker, I thank my hon. colleague from Trois-Rivières for his excellent speech and impressive presentation.

Indeed, as he mentioned, New Democrats have risen in the House all day to explain their position and provide facts. Unfortunately, throughout the day, the Conservatives have not even had the decency to rise to present and defend their own bill and to make their arguments.

This really bothers me and leads me to believe, as my colleague does, that perhaps they do not believe in it that much, and they realize that, as all the courts have previously mentioned, this bill does not hold water. In this regard, I would like to ask my colleague the following question.

Places like InSite are there to help people. They work to protect public health and to promote prevention and detox. This therefore helps ensure public safety. It does not compromise public safety. On the contrary, a place like InSite promotes public safety, and it is a place that can even help prevent crime.

I would like my colleague to comment on the fact that a place like InSite does not work against people's safety or crime prevention and that, on the contrary, it works precisely to help prevent crime.

• (1620)

**Mr. Robert Aubin:** Mr. Speaker, I thank my colleague from Drummond for his question and preamble.

In response to the preamble, I will engage in some political science fiction and imagine that I am a Conservative for a few seconds. I believe that I would also find it hard to rise today in the House to defend a bill that is quite simply indefensible.

With respect to InSite or any such facility, what I find to be most perverse about the bill before us is that it completely ignores the humanity of addicts. Only by visiting an addiction centre or a shelter for homeless people, who often have multiple problems, do we come to realize that they are people who need help. Drug addicts are not second-class citizens.

**The Acting Speaker (Mr. Barry Devolin):** It is my duty, pursuant to Standing Order 38, to inform the House that the question to be raised tonight at the time of adjournment is as follows: the hon. member for Gaspésie—Îles-de-la-Madeleine, Fisheries and Oceans.

[*English*]

**Mr. Craig Scott (Toronto—Danforth, NDP):** Mr. Speaker, I am privileged to rise to speak to Bill C-2, which I believe bears the short name of safer communities act, or something along those lines.



*Government Orders*

Once we get to committee, we will likely be wanting to move an amendment at the clause-by-clause stage. I think a more appropriate new name for the bill might be “an act to make it look like communities will be made safer by spreading drug users to the alleys, parks, and backyards of our cities while simultaneously undermining public health and individuals' rights to security of the person and life itself”. To me, that would be a much better title for this bill.

**Mr. Kyle Seeback:** It is a charter rights issue.

**Mr. Craig Scott:** What I would like to speak to is exactly what my hon. member is shouting about from across the way, a little bit about constitutional law and the constitutional values that are impacted by this bill.

Let me begin by mentioning that in 2011, the Supreme Court of Canada, in the PHS Community Services case, did make clear that section 7 of the charter, the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice, did apply.

Health and life itself are at stake when the federal government decides to treat as criminal, under federal jurisdiction over criminal law, a health initiative by a province. This decision to treat it as criminal, and in that way not permit the provincially approved activity, occurs by way of the Minister of Health declining to grant an exemption from the ordinary application of, in this case, the CDSA, the Controlled Drugs and Substances Act.

The Supreme Court ruled that the government had indeed violated the charter in the following terms. Let me please read the key paragraph, which is paragraph 136 of that judgment:

The Minister made a decision not to extend the exemption from the application of the federal drug laws to Insite. The effect of that decision...would have been to prevent injection drug users from accessing the health services offered by Insite, threatening the health and indeed the lives of the potential clients. The Minister's decision thus engages the claimants's s.7 interests and constitutes a limit on their s.7 rights. Based on the information available to the Minister, this limit is not in accordance with the principles of fundamental justice. It is arbitrary, undermining the very purposes of the CDSA, which include public health and safety. It is also grossly disproportionate: the potential denial of health services and the correlative increase in the risk of death and disease for injection drug users outweigh any benefit that might be derived from maintaining an absolute prohibition on the possession of illegal drugs on Insite's premises.

I would remind everybody in this House today that this was a unanimous decision by the Supreme Court of Canada. I would also note two key shorter passages, which I will turn to briefly, that make clear that the combination of the legal effect of section 7 of the charter and the guidance for the exercise of discretion in the CDSA itself means that ministerial discretion is not unfettered. It must be undertaken in accordance with the rule of law, which refers, of course, to both the Constitution and the statute itself.

Let me draw everybody's attention to the last sentence in paragraph 151, which says:

As always, the minister must exercise that discretion within the constraints imposed by the law and the Charter.

The court then goes on, in paragraph 152, to say:

The dual purposes of the CDSA—public health and public safety—provide some guidance for the Minister. Where the Minister is considering an application for an exemption for a supervised injection facility, he or she will aim to strike the appropriate balance between achieving the public health and public safety goals.

Where, as here, the evidence indicates that a supervised injection site will decrease the risk of death and disease, and there is little or no evidence that it will have a negative impact on public safety, the Minister should generally grant an exemption.

The court went on to order the minister to grant such an exemption in this case, which leads us, of course, to the present bill, which is, in effect, an attempt to do either an end run around the Supreme Court judgment or to perhaps even overturn and resist that judgment.

● (1625)

Now, it may be that the government is hoping that it can do an end run around, or even circumvent, the Supreme Court judgment by downplaying, in the new amendments to the CDSA, references to the positive health effects of a system like the injection site system and to public health, despite the fact that public health remains one of the two purposes of the CDSA. They cannot get away from that.

Also, the Conservatives have written into the act that in the final analysis, when the minister ultimately decides whether she is going to accord an exemption, this is to be done only in exceptional circumstances.

The government may think that by writing the law in this way, it would escape the scope of the Supreme Court ruling. However, the government would really be throwing the question back to an inquiry that will eventually end up in the courts over whether the amended act itself violates section 7 of the charter for totally failing to give the health of users the kind of priority that section 7 of the charter would suggest is necessary.

Here I would like to believe that the Minister of Justice has had thorough advice from his officials on the constitutionality of the bill so as to exercise the duty he has under section 4.1(1) of the Department of Justice Act.

Regrettably, we have all come to learn in the last year that the standard of review that goes on in the Department of Justice these days, and perhaps for longer than we realize, borders on the farcical. A whistleblower has come forward to tell us that instructions have been sent to lawyers to say that if there is a 5% chance that a provision or law would pass muster in the courts under the charter, then it is fine to recommend that it go ahead as being constitutional from the perspective of introducing the law.

I have no confidence at all that the mere fact that this is before the House means that some kind of analysis has been undertaken that suggests that it is presumptively constitutional. Under the current government, that is not the case.

Apart from the fact that on the face of the text it might be unconstitutional, there are two other ways in which the bill would almost certainly be found constitutionally suspect.

The first is that the very intention of a statute under our constitutional law, of course, cannot be to infringe upon a constitutionally protected right. Here, and very unusually, there is every sign that the very intent of the government is, in fact, to block approval of any safe injection site anywhere in this country.

*Government Orders*

Now, it is very rare for courts to find such direct intent to actually infringe a right, but in the situation at hand, judges will find a good deal of evidence, including in speeches made prior to this House rising for a break and in speeches made by Conservative members of Parliament. It can also be found, I would say, by inference from two things. In clause 5 of the bill, there is a listing of no fewer than 26 criteria the Minister of Health would need to consider by way of information sources if he or she was going to grant an exemption. It is not just 26; a number of these have subsections. Well over 30 separate kinds of detailed information would have to accompany an application for such a safe injection site before the minister even decided whether she was going to look at the issue.

There is also the excision of all public health references and individual health benefits from the guiding principles listed in proposed subsection 56.1(5) of the amended act.

The second thing that might cause this to be looked at suspiciously, from a constitutional point of view, is that there is a constitutional principle of fundamental justice under section 7 according to which it is unconstitutional to hold out a defence or an exemption from a criminal law prohibition if that defence or exemption is arbitrary or illusory. Such a defence or exemption is arbitrary if it is available to some but not to others. This was essentially part of the basis for the Morgentaler ruling. A defence or an exemption is illusory if nobody will be able to access the defence or exemption or where access is so uncertain or unlikely that the defence or the exemption is essentially unavailable.

On that basis alone, given the structure of Bill C-2, I would go so far as to predict that there will be courts finding that it is unconstitutional under section 7 of the charter.

• (1630)

**Hon. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Mr. Speaker, I am fascinated by the member presuming what the Supreme Court will or will not say. If we follow his logic to its logical conclusion, we should not even have the debate and just go straight to the Supreme Court, but the fact is that Parliament will vote on this legislation.

As we are all representatives of the people of Canada, the people of Canada would agree that the preamble of the bill, which I have read in part already, is sound and important for public safety and communities. We are putting communities and families first and we do have additional programs, other than being complicit in the illicit drug trade.

Why does the member want to be complicit in the illegal drug trade?

**Mr. Craig Scott:** Mr. Speaker, at least he did not call me a child pornographer.

The fact of defending the rights of individuals under the charter does not make me want to be complicit in the organized drug trade. The fact is that this bill stacks everything along the lines of public safety. That is all that the purpose would suggest, and the five principles in proposed subsection 5(5) that the minister must look to when she finally makes her decision make no reference at all to either life-saving or individual health effects for users or to public

health. This act hits the balance entirely wrong in a way that does not even come close to the spirit of the Supreme Court's judgment.

To go back to the premise of the question from the hon. member, the fact is that we have a duty under our Constitution to do what we can to ensure that the laws that pass the House are not in violation of the Constitution. We do not wait for the courts to rule. I am simply saying what some courts will likely do.

[*Translation*]

**Mr. Marc-André Morin (Laurentides—Labelle, NDP):** Mr. Speaker, I would like my colleague to explain something to me. When a person is judged differently depending on whether he is the mayor of a major city, a very powerful person, or a person who is very marginalized by a health problem such as addiction, it is impossible to apply the concept of law and order. At that point it becomes the concept of law and order for all the others.

**Mr. Craig Scott:** Mr. Speaker, I would like to thank my colleague for his comment, which I find to be quite accurate. The law and order argument does not really apply to the situation currently before us. The issue of public safety is important and relevant. However, the general idea of law and order is more of a distraction than something concrete in the circumstances.

• (1635)

**Mr. François Choquette (Drummond, NDP):** Mr. Speaker, as a number of my NDP colleagues have done throughout the day, I will be speaking on Bill C-2, An Act to amend the Controlled Drugs and Substances Act.

At the outset, I would like to say it is quite astonishing that this bill was introduced by a private member. It is unbelievable that a bill that has such great importance for public health was introduced by a private member and not by the government. It is also clear that this government, having introduced the bill, has no members here to defend it today. As my colleague from Trois-Rivières said so clearly, it is as though the Conservatives were a little bit embarrassed by the bill, because they are not even standing up to defend it today. That is a shame.

We are going to vote against this bill for number of reasons. I listened to the statements by my colleagues who know a great deal about the issue, much more than I do. The primary reason for our opposition is that the bill failed to pass the test of the courts three times. It is also regrettable that taxpayers' money, including money from the people in Drummond, was used to challenge an initiative like InSite, while the money could have been put to good use in public health prevention activities, for instance.

Once again, it is a case of mismanagement of public money by the Conservatives. Their work is always short-term. They do not have a long-term goal.

It is important to understand that a project like InSite aims at prevention and action intended to lower the crime rate. There should be fewer addicts, and these addicts could perhaps be directed to drug treatment programs, as my hon. colleague from Laval—Les Îles said so well in his speech, which I listened to carefully. He has done excellent work on this issue.

*Government Orders*

I am also shocked to see that the Conservatives are targeting the initiatives of a group of people who are doing their best to solve current problems in their area. InSite came from a community endeavour, from actions by citizens, by community groups and the health care sector, to respond to a real need. The problem had two components, the first was blood-borne and sexually transmitted diseases, and the second was crime and the waste products from drug use found in parks.

This problem has to be addressed because, as other members have already pointed out, it is also a health problem. It should not be seen primarily as a crime issue, but as a public health issue. From that point of view, using resources like InSite to make connections between health care and drug users does not work against efforts to control crime—far from it. Facilities like InSite are indeed combating crime. They are promoting prevention and providing supervision so that people can take the drugs on which they are dependent in a safe environment. This reduces the costs generated by hospitalization, which can be very substantial in many cases. These facilities also provide supervision so that people do not end up high in the streets. They thus reduce the crime rate. They may also refer them to detox facilities or programs.

• (1640)

As I said, what shocks me about this bill is that it attacks a community initiative. In Drummond, fortunately, there is no need for supervised injection sites. On the other hand, a number of organizations provide resources for people in the Drummondville area affected by public health issues, substance abuse, homelessness and so on. I would be shocked to see the Conservatives attacking community initiatives in my constituency designed to reduce crime, prevent problems, and promote public health and safety in our streets. That is, unfortunately, what I heard from the Conservatives when they deigned to speak. On the rare occasions when they did speak, it was to say that the NDP is opposed to public safety. On the contrary, community initiatives like InSite promote public safety.

I will take this opportunity to emphasize the excellent work done by community workers, volunteers and prevention caseworkers in Drummond. I have met with them on several occasions in my constituency office, and I am genuinely proud of them. They do an outstanding job preventing crime and ensuring that our young people have access to sports and recreational activities, and can go to youth centres and participate in activities. Communities that want to be strong and stable have to take charge. That is why I urge the Conservatives to withdraw the bill, which is harmful and at odds with the charter, has been contested in the courts, and does not promote public health. I therefore encourage the Conservatives to withdraw this bill, and show respect for communities and workers who are doing excellent work in the field to reduce problems such as substance abuse.

Something else that bothers me is that when the Conservatives introduced the bill, they launched a simultaneous campaign. I liked how my colleague from Montmagny—L'Islet—Kamouraska—Rivière-du-Loup explained earlier that the campaign was childish and simplistic. The Conservative Party launched the “Keep heroin out of our backyards” campaign. The campaign would have the public believe that if we shut down places like InSite, heroin will magically disappear from their streets. That is simplistic to the point

of being demagogic. It is sad to see them resorting to such arguments.

The exact opposite will happen, as many of my colleagues and I have pointed out today. People will be left to their own devices, which will lead to public health, crime and safety problems. We will also see more concerns about our young people. If we want to look after our young people and our community, we need to encourage initiatives like InSite.

• (1645)

[*English*]

**Mr. Kyle Seeback (Brampton West, CPC):** Mr. Speaker, I have a couple of questions for my colleague.

First, does he support the provisions that require community input before a safe injection site is put into a neighbourhood? I sent out 5,000 direct mail letters to my constituents, asking them what they thought about that idea, and 87% of them wrote back saying that they liked that idea.

Second, if he is not in favour of that aspect of the legislation, has he polled his constituents to find out if he is representing them in this matter?

[*Translation*]

**Mr. François Choquette:** Mr. Speaker, I thank the hon. member for his question. He neglected to mention that this bill has been the subject of three court disputes and that it violates the Canadian Charter of Rights and Freedoms.

That said, I have not polled the public. I probably do not have the kind of money my colleague has to spend on that kind of poll. I believe we need to be very careful about how we use taxpayer money.

I think my colleague should listen. When I am in my riding I meet with my constituents every day. They always tell me that it is very important to support community initiatives. When communities take charge to tackle challenges, for example, what Vancouver did with InSite, we need to respect that.

It is easy to make people afraid and to send them letters, but we also have to explain to them that issues are not always black and white.

[*English*]

**Mr. Kevin Lamoureux (Winnipeg North, Lib.):** Mr. Speaker, it is important to recognize that when we talk about safe injection sites in particular the one and only one we currently have in Canada, we need to acknowledge that the community was involved in the establishment of that site. It has been exceptionally successful on many different fronts, such as providing our communities that much more safety and an environment in which we see lives being saved, and so forth.

Would the member not acknowledge that one would expect in any sort of establishment of a site of this nature, or something of a similar nature, that there would be consultation with our community members?

*Government Orders*

[*Translation*]

**Mr. François Choquette:** Mr. Speaker, I would like to thank the member for his question. He very eloquently stated the factors that have contributed to InSite's success.

This was an exercise in consultation where all of the community groups involved in public health and safety were brought together to achieve this success. There has been a reduction in crime and the spread of disease. Far more of the people using InSite are being directed to detox programs.

That is why I mentioned that we need to respect communities that take charge, as Vancouver has done with InSite, and as my community of Drummond has done. My community has taken charge with different programs, programs that address greater Drummond's needs. That is what is important.

We cannot just come at this from one angle and say that it is good or bad. We need to define the community's needs and respect the people who are taking charge, especially with regard to public health and safety. We cannot start scaring people and asking if they are for or against a centre like InSite setting up in their community. Obviously no one will say yes.

However, people need to take charge in their community and they should address a need. If they feel it is a need and if the community supports it, we cannot go before the courts and spend the money of Drummond's taxpayers, for example, when it makes no sense and does not respect the Canadian Charter of Rights and Freedoms or the community's needs.

• (1650)

**Mr. François Lapointe (Montmagny—L'Islet—Kamouraska—Rivière-du-Loup, NDP):** Mr. Speaker, could you let me know when I have five minutes left rather than one minute? I fear that the 10 minutes I am allotted today will not leave me enough time to express how aggravating I find the government's approach to this issue.

That being said, I am pleased to rise in the House to discuss Bill C-2, An Act to amend the Controlled Drugs and Substances Act. I want to state clearly that the NDP will be voting against this bill at second reading. During the previous session, last June, Bill C-2 was known as Bill C-65. We are now coming back to the debate after a prorogation that was very costly for Canadian voters, as the government used it not to start on a new path, but to hide from its responsibilities during the Senate scandal.

I would like to clarify a few things for those who are honouring us by watching us on CPAC at home. Bill C-2 is a government bill. As it is now past 5 p.m., the House has already spent more than five hours debating this bill today alone, and not a single Conservative has spoken for 10 minutes in favour of the bill. Not a single Conservative has done so in five hours of debate on a bill introduced by their own government.

Like my colleague from Charleswood—St. James—Assiniboia, they just keep saying that supporting supervised injection sites makes the NDP an accomplice of drug pushers and who knows what. Their reasoning reflects their bad faith. According to their logic, social workers are also complicit in crime, as are the Supreme Court judges, who rejected the government's interference in

supervised injection sites. Their childish, black and white thinking means that everyone in our society, except the Conservatives with their incredible ethics, is complicit in organized crime in Canada.

What is happening today is another example of the worst failure of the Conservative government: its unwillingness to fulfill its duties as the government, which include consulting. As shown by the lack of speakers and the lack of answers during question period, the Conservatives are breaking with the principle of responsible government. They are showing complete disregard for their duty to protect a vulnerable minority, in this case people who are addicted to hard, intravenous drugs. The government is disregarding the consensus among leading experts and even the decisions by the judges of our country's highest courts.

The contents of Bill C-2 and this government's attitude fit in with the Conservatives' appalling tendency to scorn what should be defended as state responsibilities, especially by a government leading a lawful society. This government will go down in the history books as being increasingly dogmatic and really, completely narrow-minded.

Bill C-2 addresses a truly sad reality. In fact, it tries to deny this reality. Politics is the art of the possible in a world that is never perfect. How can we know in an imperfect world if the decisions we make in this House as elected representatives are the best possible decisions? Well, we have to base our decisions on the real situation and implement changes that are likely to bring the least amount of harm to the largest number of citizens. That is what we are reduced to doing. It is our duty to ask ourselves if our actions and our decisions are likely to make fewer people suffer or make more people suffer.

Bill C-2 is a perfect example of a bill from a government that chooses to ignore its duty to make fewer people suffer, in spite of all the facts, in order to please the ideological perceptions of its supporters. This is evidenced by the debates and extremely negative press this government received when it launched its "Keep heroin out of our backyards" campaign. Coincidentally, this was in line with the court challenges brought against InSite.

It is important to get back to the facts, which are serious, striking, sharp and clear on this issue.

In 2011, the Supreme Court ruled that InSite, which is in Vancouver and is currently the only such site in Canada, provides an essential service. It was not the NDP or the nasty leftists who said so; it was the Supreme Court.

• (1655)

Over 30 peer-reviewed studies published in journals such as the *New England Journal of Medicine*, *The Lancet* and the *British Medical Journal* have described InSite as a very good thing.

*Government Orders*

As was previously mentioned, the InSite supervised injection site is located in Vancouver. Since this site opened, Vancouver has seen a 35% reduction in overdose deaths. The Conservatives have to remove their narrow little ideological glasses; they have to take them off at some point and see the world as it really is. The idea is to ensure that, beyond our ideologies, there will be fewer people who suffer as a result of our decisions. That is an idea.

Is it good news that we have to consider opening supervised injection sites in several major urban centres? No. Will not doing this cause exactly the opposite effect of what we should do, in other words, cause more human suffering? Yes. The proof is that there was a 35% decrease in Vancouver after the city started taking care of people struggling with serious addictions to intravenous hard drugs.

Vancouver has seen a decrease in crime, as well as the rate of infection of sexually transmitted diseases. This also means that the costs for a site like InSite may turn out to be zero. We need smart studies to look into this, not ideological perspectives. Indeed, if we leave these people in some back alley to inject drugs and catch all kinds of diseases, where will they eventually end up? In the health care system, that is where. These people end up costing a fortune to treat.

The Conservatives like to brag about their great economic skills, saying that they are the best in the G8, but they should take a good look and start calculating the costs of public services under their approach, which is bad.

In 2011, the Supreme Court of Canada ruled that the minister of health's decision not to renew the exemption and close InSite violated the rights of its patrons under the charter and that the minister's decision was arbitrary and undermined the very objectives of the Act, namely, public health and safety.

Once again, we heard the same two arguments that come back time and time again, that are completely childish and simplistic. I know my colleague is an intelligent man. I am quite sure that he is having trouble with his party's talking notes, as we call them. He must have trouble believing the lines himself when he reads them. He must say to himself, "That cannot be right, that cannot be possible, we are not in grade 7".

The other idea is that it would be detrimental to public safety, while even the Supreme Court concluded that such facilities were beneficial. That was clear with what happened around the only supervised facility currently in operation in Canada.

I heard another of my Conservative colleagues say that he had sent out a letter to his constituents and that most of the people who answered were against it. Among the people who worked to set up the InSite facility, the people of Vancouver, 80% of those asked who lived or worked in Vancouver's downtown eastside supported InSite. They saw the benefit of not leaving people outside in the back lanes with all sorts of consequences—used needles on the ground and people who become ill—but having a safe area where there is a chance that some of them might recover from their addiction, or at least suffer a little less from it.

Injection drug users who go to InSite are 70% less likely to share needles. Again, it is about health and public safety. Of course, this is not a perfect solution. In an ideal world, I would like to live in a

country where, for all sorts of reasons, because of the social systems, everyone has a perfect childhood and no one is addicted to hard drugs, but this is not the case. As a government, we must deal with the real situation.

The Conservatives' hypocrisy on this issue, especially over the past few weeks, has been remarkable and incredible. The current health minister said that she did not judge Rob Ford and that she hoped he would receive some help. One week earlier, she said she wanted to ban prescriptions for heroin, which are supported by the doctors who help people who want to recover from their addiction.

● (1700)

Are we to understand that supervised crack houses would be acceptable to the minister, but that supervised drug injection facilities would not? Do you see how utterly nonsensical this reasoning is? Perhaps the Conservatives would agree to a supervised drug site reserved strictly for Conservatives. This is nonsense, and it must stop.

Let us make decisions based on facts and let us make sure that in Canada there are fewer, not more, of our fellow citizens who are suffering.

[English]

**Hon. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Mr. Speaker, I listened to the member's comments with disappointment. In fact, the NDP is the ideological party when it comes to this issue. I appeal to the common sense of Canadians when they are watching this debate and ask if helping people inject illicit drugs over long periods of time is good public policy. New Democrats seem to say yes.

I would suggest that this bill would protect the public from criminal elements that are often found in and around injection sites. It is obviously more healthy to have a treatment program. This government invests billions of dollars in housing strategies, we work with the provinces on drug addiction, and the NDP votes against all of it. Who are the hypocrites? It is the New Democrats.

[Translation]

**Mr. François Lapointe:** I feel like I am hearing: "It is not me, it is you". This is incredible. I said it looked like a grade 6 classroom, but I was wrong. It is more like a grade 4 and, perhaps, even a grade three class. It is incredible.

People at home must understand that InSite is a serious initiative. In order to receive services provided by InSite, users must be at least 16 years old, sign an agreement and comply with a code of conduct. For example, they cannot be accompanied by a minor when they show up at that site. Users bring their own substances and they are monitored. On the top floor of the InSite facility, sick people are monitored to alleviate their distress and they get help to move away from their addiction. It is certainly not in a dark alley, with used needles, when they are sick or half dead that these people will have the opportunity to turn their lives around.

*Government Orders*

**Ms. Rosane Doré Lefebvre (Alfred-Pellan, NDP):** Mr. Speaker, it is always a pleasure to listen to my colleague from Montmagny—L'Islet—Kamouraska—Rivière-du-Loup, because he always delivers passionate speeches. He does not do things by halves, and I commend him for his work in the House.

My question is simple. As my colleague knows, a Conservative fundraising activity was held through emails using the message “no heroin in my backyard”. That activity was based on Bill C-2, which is now before us. I wonder if the hon. member could give us his thoughts on this initiative.

**Mr. François Lapointe:** Mr. Speaker, I thank my colleague. This will give me a chance to talk about something I did not have time to mention during my speech.

I used to co-own studios in two Montreal neighbourhoods, the Mile End and Little Italy. These neighbourhoods have since been gentrified and they are now beautiful. However, at the time, they were fairly rough. Next to these studios, there was a park with swings and slides, but I could not even go there with one of my children who was four or five at the time—he is now 15—because there were so many needles barely hidden in the shrubs next to the swings. We could not use the children's park. In two years, three murders related to the smuggling of hard drugs took place at night, less than 200 metres from my studios. At the time, if I had been asked whether I was prepared to contribute to the opening of a site to monitor all this activity and thus reduce the number of needles in shrubs, traffic on the street and murders, if I could have spared all that to my children through a well thought initiative such as InSite, I would have signed up to put the first brick myself and I would even have given a portion of my salary for two years.

• (1705)

**Ms. Mylène Freeman (Argenteuil—Papineau—Mirabel, NDP):** Mr. Speaker, unfortunately, this bill is another example of how completely out of touch the Conservatives are with the real world.

In 2011, the Supreme Court of Canada ruled that InSite was providing essential services and that it must remain open in accordance with an exemption under section 56 of the Controlled Drugs and Substances Act. The Court ruled that the charter authorized users to access InSite's services and that an exemption should be granted to authorize similar sites to open.

The Conservatives are disregarding this ruling. At the end of the day, this shows that they have no respect for the separation of powers or for legal authority. They have no respect for any authority other than their own and this is made clear in Bill C-2, which goes completely against the Supreme Court's 2011 ruling.

The ruling called on the minister to consider exemptions for supervised injection sites, in order to address public health and safety issues. This ruling invited the minister to consider all the aspects in light of the benefits of having supervised injections sites, rather than provide him with a list of principles upon which to base his decisions.

As usual, the Conservatives are showing no respect for a legal process that has demonstrated how important a place like InSite can be. Apparently, as I said, they do not understand the importance of

the principle of separation of powers. Worse yet, they are deliberately disregarding the Supreme Court's ruling.

To add insult to injury, in addition to their lack of respect for court rulings, the Conservatives are implementing measures that illustrate their lack of empathy, and I would go so far as to say their lack of humanity. They are tough on crime when it comes to Canadians, but soft on crime when it comes to their friends. It does not make sense. The benefits in terms of harm reduction are known and proven. Ignoring these facts is nothing more than ideology.

Since this morning, the Conservatives have been focusing on their personal opinion, but, unfortunately, they have not stood up to defend their bill.

Perhaps we need to go over the facts again. I know that many of my NDP colleagues have done so, but I will go over the facts again because it is important to show how disconnected Bill C-2 is from fact.

More than 30 peer-reviewed studies published in journals such as the *New England Journal of Medicine*, *The Lancet* and the *British Medical Journal* have described the benefits of InSite. Studies of more than 70 supervised injection sites in Europe and Australia have reported similar benefits. InSite is one of the biggest public health success stories in Canada.

The number of overdose deaths has dropped by 35% in Vancouver since InSite opened. That is a very significant statistic. It has also been proven that InSite has reduced crime, the rate of communicable disease infection and relapse rates for drug users. Once again, these are very significant statistics.

The Supreme Court established that InSite and other supervised injection sites must be granted a section 56 exemption because opening such sites:

...will decrease the risk of death and disease, and there is little or no evidence that it will have a negative impact on public safety...

I am not the only one to talk about these statistics. In fact, the Supreme Court of Canada said that it was well established that a facility like InSite reduces overdose deaths and crime.

• (1710)

The evidence showed that supervised injection sites effectively reduced the risk of contracting and spreading blood-borne diseases such as HIV and hepatitis C. Once again, there are fewer fatal overdoses. It was also shown that InSite does not jeopardize public safety. On the contrary, it improves public safety by reducing injections in public, related refuse and violence associated with drug use.

As my colleague from Montmagny—L'Islet—Kamouraska—Rivière-du-Loup mentioned, where he lived before, there was refuse and he really did not want his children to see it. A place like InSite prevents that type of situation.

*Government Orders*

A 2004 study by the European Monitoring Centre for Drugs and Drug Addiction indicated that supervised injection sites reach out to vulnerable groups and are accepted by communities. In addition, they also improve the health of their users and reduce high-risk behaviour. Furthermore, they reduce fatal overdoses and the consumption of drugs in public places.

That is some compelling evidence in support of supervised injection sites like InSite. However, the Conservatives have opposed this and have launched a campaign based on fearmongering and misinformation. This is nothing new. They deny the facts, disregard any opinions that contradict their own and resort to fearmongering to obscure the debate. A bill like this makes it clear that the Conservatives would rather abandon people instead of trying to rehabilitate them.

Their many justice bills—or should I call them injustice bills—all follow the same model: they ostracize, isolate and divide people. Instead of trying to address the root issue, the Conservatives tackle symptoms without ever looking for the source of the problem. Throwing people in jail without helping them reintegrate into society does not solve the problem. It simply makes things worse, since these people do not have access to what they need to reintegrate.

The Conservatives show the same lack of understanding with every problem they tackle, whether it is poverty, illness, crime or addiction. They revel in state violence instead of trying to address it. It sure makes for some good fundraising campaigns.

That is the driving force behind this bill. Instead of trying to fix a very important problem, the Conservatives are promoting a cold and violent ideology with their fearmongering, their concrete action against prevention and their disdain for justice.

In the winter of 2012, I had the opportunity to visit the Downtown Eastside neighbourhood and the surrounding area. I met with people from organizations that support people from the neighbourhood, such as women's groups like the WISH Drop-In Centre Society or the Downtown Eastside Women's Centre. These people are on the front lines and understand the reality, unlike the Conservatives, who refuse to face the facts, whether we are talking about the legal system, statistics, their own department or even the consensus of the scientific community. They ignore it all.

A number of my colleagues mentioned that earlier in this debate. The Conservatives are entitled to their own opinion. However, they need to look at facts and statistics—at reality—when they are introducing bills and governing a country. The Conservatives are showing their inability to manage the most basic government duties and their inability to govern. There is no shortage of evidence of that.

Before I finish, I would like to share some more statistics. In one year, 2,171 InSite users were referred to addictions counselling and other support services. Thanks to InSite, those people were able to get back on track. Individuals who used InSite at least weekly were 1.7 times more likely to enrol in a detox program than those who rarely visited the centre.

• (1715)

There has been a dramatic drop in the number of discarded needles, the amount of discarded injection paraphernalia and the number of people injecting drugs in the street.

All of those things are extremely important to remember. They prove that InSite is successful.

The NDP feels that any new legislation concerning safe injection sites must respect the spirit of the Supreme Court decision. That is not the case with this bill. I will be opposing it. The NDP believes that harm reduction programs, including safe injection sites, should be granted exemptions based on their proven ability to improve the health of a community and preserve human life. This should not be based on ideology.

[*English*]

**Hon. Julian Fantino (Minister of Veterans Affairs, CPC):** Mr. Speaker, I listened with a great deal of attention, trying to understand how a slam on the Conservatives has anything to do with the reality of how the whole network of illicit drugs connects back to international organized crime and even some terrorist groups.

I would like to ask the member opposite if she has any clue whatsoever about the origin of illicit drugs that she so willingly wishes to be used in these injection sites, as opposed to working on programs and initiatives to support our law enforcement people in dealing with drug use, criminality, and organized crime? Does she have any clue whatsoever about the reality?

[*Translation*]

**Ms. Mylène Freeman:** Mr. Speaker, no, I have no desire to do that. Throughout my speech, I laid out the facts and said how distressing it was to hear only about the Conservatives' ideology. The Supreme Court said that this should be protected. The court based its decision on section 7 of the charter, according to which everyone has the right to life, liberty and security of their person.

I do not understand how someone can object to this Supreme Court of Canada decision. My colleague says that we are encouraging drug-related problems. However, if a person cannot do this at a supervised site, how will the problem be addressed? The Conservatives say they want to keep heroin out of our backyards. How will they do that without something that is properly regulated, such as InSite?

[*English*]

**Ms. Megan Leslie (Halifax, NDP):** Mr. Speaker, I have a question for my colleague after her excellent speech on this subject. It relates to the question from the minister.

This is not a bill about international terrorism. This is not a bill about controlling illegal drugs. This is a bill that comes directly from a Supreme Court of Canada case that is about health and health outcomes. It is about saving lives, it is about harm reduction, and it is about preventing the spread of disease—in theory. This is what the Supreme Court of Canada has told us. However, the bill actually does not match the Supreme Court of Canada case, and if we look at the bill, we see that it does not even talk about health.

*Government Orders*

Therefore, would my colleague not agree that this bill is the worst possible interpretation of that Supreme Court case? It is because we are not talking about saving lives here. We are not talking about health outcomes. It does not even say the word “health” in the bill. Would she agree that this is a morally bankrupt version of what the Supreme Court of Canada intended?

• (1720)

[Translation]

**Ms. Mylène Freeman:** Mr. Speaker, I agree completely. This is about both health and public safety. It does not address the health issue, because the facts show that their bill is not consistent with reality. I repeat: there has been a 35% decrease in overdose deaths. In addition, there has been a decrease in the rates of infection and communicable diseases, the relapse rate for drug addicts, and crime.

In 2011 the Supreme Court of Canada ruled that the minister's decision to close InSite violated its patrons' charter rights and that the minister's decision was arbitrary, undermining the very purposes of the Controlled Drug and Substances Act, including public health and safety.

Not addressing the health issue, ignoring the facts and going against the Supreme Court decision clearly shows just how incapable the government is of governing for all Canadians.

[English]

**Mr. Andrew Cash (Davenport, NDP):** Mr. Speaker, it is an honour to rise in the House to represent the good people of Davenport in the great city of Toronto.

I have listened to this debate all day with great interest. It must pain the Minister of Veterans Affairs to get up and hector the opposition around an issue that he very much knows, based on his past work experience, is an incredibly complicated, complex issue that interweaves both public safety and public health. This is why we are here today, to debate this issue, but it must pain him to have to get up and try to present the ultrasimplistic description of the bill in the talking notes that the Conservatives foist upon their members, including their cabinet ministers.

What we are dealing with today from the Conservatives vis-à-vis this bill is a document that they use for fundraising. Of course, we see this time and time again with the Conservative government. They isolate refugees, limit their access to health care, and then send a fundraising letter out to see what kind of manna falls from heaven.

This reminds me of several issues that are at play in my own community. People everywhere in Canada, I think it is fair to say, want safe streets. Everybody wants to be able to walk their kids down the street and not have syringes lying around. I think it is fair to say that we like to see our streets safe. That is why it is important to have safe injection sites in Canada.

I find it amazing that we have a government that cannot brook any kind of large-scale public engagement plan when it talks about, for example, line 9 reversal in Toronto or when it talks about, for example, a nuclear fuel processing facility in the riding of Davenport, which, by the way, exists and has existed there for 50 years. Section 2.5 of its operating licence says that it must engage in a comprehensive public information program with the residents. For 50 years, very few people knew that the plant existed. Even the folks

that I have spoken to, who have lived there for at least 40 years, were never once informed of what was going on in that factory.

Some folks on the other side of the aisle might start wondering why I am exposing their lack of interest in public information and public engagement. It is because they are not interested so much in that. In fact, with the line 9 reversal, they made it so difficult for people in my city to depute during those hearings that the hearings became a sham, yet the principles around public consultation for the setting up of a safe injection site are exhaustive.

Let us go through some of that. It requires a letter from the provincial minister who is responsible for health. It requires a letter from the local municipal government. It requires a letter from the head of the police force outlining any issue that it has. It requires a letter from a leading health professional organization. It requires a letter from the provincial minister responsible for public safety. It requires a statistical analysis. It requires police checks for people. It requires extensive public consultation.

All of this has to be gathered, in addition to a 90-day public notification period that the minister herself can also conduct. There are two streams of information coming in, and even then, as we can see from the bill, the minister does not have to even consider the application. In other words, once all that rigorous public engagement happens, the minister can decide whether he or she wants to even entertain the application.

I read that and I think that is very rigorous public engagement. I can tell the House that in my community, we are looking for rigorous public engagement when we are debating and considering very serious development projects in our community.

• (1725)

That public engagement is lacking. What is also lacking is a willingness on the part of the government to hold the relevant agencies to account to ensure safety in our communities. The reason is that it does not play well politically for the government members in their base, whereas this is a whole different story.

I want to go back to an issue that is very important in my community, and that is refugee health. We have people in our community, people living here in Canada, who cannot access health care and have to rely on volunteer doctors and nurses and donated medicine in order to deal with their illnesses. What is happening with these decisions to cut the federal interim health program for some refugees is that it is creating a public health issue as people delay care for illnesses until those illnesses get worse. Some of them are communicable illnesses. We have pregnant women who are not getting the kind of care they need because they are not able to access health care.

However, that is okay for these guys over here, because for them it is all about fundraising, as we saw very shortly after decisions were made with respect to safe injection sites, with a letter going out to the Conservative base and a website set up to scare Canadians.



*Government Orders*

That is national leadership. That is the kind of leadership that we are getting from the current Conservative government. Instead of a government that understands the complexity of issues like drug addiction, we are seeing it writ large and played out in public today. I am sure that the Minister of Veterans Affairs and members of cabinet and certainly the Prime Minister are good friends with a well-known public figure who is struggling with drug addiction right now, yet what they are trying to do is vilify people who are often poor and powerless, people who cannot access the kind of care they need. Sometimes it is folks struggling with mental health issues as well.

The debate we are having today is about safe injection sites, and it is about something bigger than that. It is about who we are as a country. It is about who we look after. It is about what the role of government is if we are not attempting to solve complex issues with rigorous consultation, with scientific fact-based arguments, with a view on public health and public safety. That is what this debate is about, that is why this is so important, and that is why Canadians who are watching it are not buying the simplistic argument that people are going to have heroin in their backyards.

I represent a downtown Toronto riding. I get people calling my office constantly, asking me what kind of programs we have to serve addicts and help them get off the street and have the streets safer. They want to see real solutions. They do not want to see another attempt by the Conservatives to divide Canadians in order to fill their party's coffers for the next election.

• (1730)

**Hon. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Mr. Speaker, I listened to my colleague and I am surprised that he would have a problem with public consultation and studies of the science of having a supervised injection site and getting other stakeholders in the community to provide their input. Is his fear perhaps that if people found out that there was going to be an injection site, they would disallow it, or is he just not confident in his own argument on the healthiness of these injection sites?

**Mr. Andrew Cash:** Mr. Speaker, there have been at least 30 scientific studies on the one safe injection site we have right now. There is a boatload of data that speaks to improved markers around public safety, the transmission of HIV-AIDS. The data is in on this, so the member might want to take a look at the data. I think he would be convinced of the rightness of this.

I would also encourage the member to speak to his colleagues about developing more rigorous public participation around some of the significant infrastructure projects that we have in Canada right now. That would be a solution.

**Mr. Kevin Lamoureux (Winnipeg North, Lib.):** Mr. Speaker, in talking about this issue it is important for us to recognize that we do have stakeholders, whether they be the City of Vancouver, the Vancouver police or the Government of British Columbia. There are many ground-game stakeholders that are directly involved. There are outside organizations that are very supportive. They look at the facts. The facts do matter. Science does matter. It all boils down to the fact that this site in Vancouver has been a huge success.

I wonder if the member might want to provide some comments on that fact.

**Mr. Andrew Cash:** Mr. Speaker, the government does not like science or science-based facts much. However, let us talk about Dr. Evan Wood, a renowned scientist, who works for the BC Centre for Excellence in HIV/AIDS. He points out that one of the important aspects of a safe injection site is that, given that each HIV infection costs an average of approximately \$500,000 in medical costs, InSite has contributed to a 90% reduction in new HIV cases caused by intravenous drug use in British Columbia. That is why the B.C. government has been such a strong supporter of the program.

That underlines some of the very important reasons we need to take this seriously. We need a complex and comprehensive conversation. It has already happened. Those debates and those studies have already taken place. We have the stats that show the great success of this facility.

• (1735)

**Mr. Robert Chisholm (Dartmouth—Cole Harbour, NDP):** Mr. Speaker, I must congratulate my colleague on his intervention. It was a balanced and thoughtful presentation.

I want to pick up on this point. He talked about the fact that there are members of our society who are not being served by programs that now exist to provide services to Canadians. He talked about people in health care receiving services from nurses who are volunteering their services and receiving donated drugs and so on in order to keep them alive. He speaks very much to the generosity of spirit of many Canadians.

Would the member agree that some of the suggestions made by members opposite as they relate to this particular group of Canadians, who the Supreme Court says have rights, and the way the government is responding to this very much show a lack of generosity toward these Canadians?

**Mr. Andrew Cash:** Mr. Speaker, in many different ways we see this kind of narrowing of focus, expanse, and breadth by the government of the definition of who we are as Canadians. Are we a compassionate country? Do we care for one another? Do we try to find the most balanced way to move forward on complex issues? Time and time again the government has shown that it is not interested in that definition of Canada and who we are as Canadians. It is trying to narrowcast that. In truth, there are times when the government is trying to appeal to some of the worst in us, to the fear in us, as opposed to showing Canadians where we can go as a country and a community.

[*Translation*]

**Ms. Rosane Doré Lefebvre (Alfred-Pellan, NDP):** Mr. Speaker, I am very pleased to rise today to speak to Bill C-2, which was introduced by the Conservative government. I would like to start by saying that, like all my NDP colleagues in the House, I will vote against Bill C-2.

*Government Orders*

My speech will primarily rely on a very informative document that includes many scientific studies. It was authored by Richard Lessard and Carole Morissette in 2011 and concerns a request from the Montreal metropolitan area to establish a supervised injection site. The document is entitled “Toward supervised injection services - Report of a feasibility study on the implementation of regional supervised injection services in Montréal.” This document is very interesting. It discusses, among other things, what is happening in the world. More than 80 countries around the world have supervised injection sites. They are funded sometimes by the proceeds of crime that have been seized by the government and sometimes directly by the government itself. This document is therefore very interesting.

I would like to quote from this paper, as follows:

Supervised injection services (SIS) are medical and nursing services provided in response to addiction, which is a disease

Indeed the dual objective of a supervised injection site is:

...to help prevent diseases and deaths among people who inject drugs and reduce social inequalities in health that affect one of society's most vulnerable groups.

This really sums up why issues related to supervised injection sites used to be addressed by the Standing Committee on Health and why they are still presented by the Minister of Health. However, for some reason that is completely unknown to me, this bill will be referred to the Standing Committee on Public Safety and National Security. The Conservatives need to give us a little more information in that regard, because all the answers they give us have more to do with health, and that is the minister in charge of this file.

I would like to point out the documented benefits of a service such as a supervised injection site. In addition to InSite, whose results formed the basis of the Supreme Court ruling, there are over 90 supervised injections sites around the world, including in several European countries as well as Australia.

Although there is a wide range of models, it is generally recognized that the service offers the following benefits: it reaches the most marginalized, high-risk people; it helps prevent overdoses and related deaths; it acts as a protective factor by providing sterile injection equipment and a safe place to inject and teaching safer injection practices, thereby helping to reduce the HIV and hepatitis C epidemics; it does not promote initiation into injection, as some members opposite claim; it helps stabilize the health status of users by providing other services such as HIV and hepatitis C screening, vaccination, primary care and referral to detox, addiction treatment and substitution programs; it relieves pressure on emergency services including ambulance transportation and hospitals by promoting on-site overdose management; lastly, it alleviates the negative impacts on public order by reducing drug use in public places as well as associated nuisances such as discarded syringes; it does not increase drug-related crime.

That has been the case at more than 90 supervised injection sites around the world. Members opposite should not try to make us feel afraid and believe certain things.

I represent a rather unique area, the Island of Laval in the Montreal Urban Community. There is a lot of urban sprawl. Montreal is very urban; Laval, which is right next door, is becoming quite urban. In the past few years, the subway from the Island of Montreal has reached our area. There are several poor neighbour-

hoods along the Rivière-des-Prairies and they are very close to the Island of Montreal.

• (1740)

One can just as easily travel from Laval to Montreal. According to Laval's public health agency, approximately 4,000 people inject drugs on Île Jésus in Laval. That is a lot of people.

At the time, it was thought that people were shooting up in the privacy of their homes. Over the years, this has changed mainly because of urban sprawl. People shoot up in public places on the Island of Laval.

I decided to consult various community organizations in Laval that have experience with supervised injections, among other things. I contacted outreach groups including TRIL, Travail de rue de l'île de Laval, and Sida-Vie Laval, which have done a lot of work in this area.

I would like to quote one of these two organizations in my speech. I recently spoke to Sida-Vie Laval. This organization agrees with the New Democrats and is strongly opposed to Bill C-2. I would like to read from an email the organization sent me yesterday:

...the impact on the health of the people who visit these centres reduces the risk of transmitting HIV and/or [hepatitis C], having another person there lowers the risk of overdose and/or cotton fever... [W]e know that over the medium and long terms, people improve their quality of life and decrease or stop drug use. Furthermore, injection sites provide a safe and healthy place for people to inject, in the presence of doctors, nurses and qualified professionals.

Drug users often become isolated and surround themselves with people who have a negative influence on them. The supervised injection site helps users take the first step towards reintegrating into society by learning to trust the professionals supporting them and to trust the health care network.

I think the organization touched on a very important aspect of supervised injection sites. The people who visit these facilities do not simply go for injections. There are nurses, doctors and other community workers there. They may go the first time for an injection and then leave, but they will return. Each time they have to see a nurse and a social worker. They will start to build relationships with these people. As they slowly build trust with these community workers, they will be able to find a way out. This is an extremely important resource for getting people off the street, getting them back on the job market and helping them reintegrate into society.

People may be aware that I am the NDP deputy critic for public safety. Public safety on our streets is extremely important to me.

I would like to point out that the Montreal police force has been quite involved in the study to set up a supervised injection site in Montreal. It is prepared to work hand in hand with all medical and community stakeholders to ensure that these locations are safe. The police force stands behind the stakeholders, the NDP, and medical services when it comes to the need for a supervised injection site and agrees that the government must not put up any obstacles for cities that want to have such a site.

*Government Orders*

It is very important to provide a location for using drugs and disposing of syringes away from the public eye. Supervised injection sites have had positive or neutral effects in terms of reducing the nuisances associated with public injection drug use.

Cites with supervised injection sites do not seem to have experienced an increase in crime or crime displacement.

There are many points I wanted to address, including the positive impact on violence against women, comments by correctional services officers, and the fact that the bill is before the Standing Committee on Public Safety and National Security instead of the Standing Committee on Health.

● (1745)

Most of all, I would like to mention that the closure of sites like Canada's InSite makes our communities less safe. Ever since I was little, whenever I go to Montreal I look at the ground when I walk in the parks and on city lawns because I have found used needles on the ground.

Now that I am the mother of a little girl, I can assure my colleagues that as long as the Conservatives' policy does not change I will not be taking my daughter to play in Montreal's parks and if I have to walk on the grass in Montreal's parks, I will be looking at the ground and holding my daughter in my arms.

[*English*]

**Mr. David Anderson (Parliamentary Secretary to the Minister of Foreign Affairs, CPC):** Mr. Speaker, it is good to be here this afternoon to listen to this discussion. I have become more concerned as the day has gone on that it is the willingness of the opposition to allow people to continue to live in the misery of addiction.

We heard talk about abandoning people, about public health safety, and about freedom of expression. It seems to me it is a justification for what we hear coming from the other side, which is putting people in a situation where the best they can expect is to be given a room where they can inject street drugs polluted with who knows what contaminants and then leaving them alone until they overdose in some situations and then finally getting them medical help.

It seems to me the opposition could come up with something better than that. Certainly we think it is more important that we do not condemn people to a miserable twilight existence of addiction and that there are other solutions that can be brought in. A couple of our people have already brought those forward.

Instead of giving people the opportunity to live the rest of their lives as free people, why do members opposite seem to be willing to condemn them to lives of the misery of addiction?

● (1750)

[*Translation*]

**Ms. Rosane Doré Lefebvre:** Mr. Speaker, if I had 10 minutes, I would read my whole speech again, since it looks like the parliamentary secretary was not paying attention to most of it, I am sad to say.

We do agree on one thing: we cannot leave people in distress. It will not help them, however, if we shut down safe injection sites

staffed by trained community field workers and health professionals who can help those in need. The city police, community organizations and health services are working together to help people in need. There is a solution already, a solution that is getting people off the streets. Everyone but the Conservatives sees how well that system works.

I could lend the parliamentary secretary a whole pile of scientific documents and data, if he were inclined to read them. The fact remains, however, that our friends across the way do not care at all for scientific facts in this debate, and that does not come as a great surprise.

**Mr. Alain Giguère (Marc-Aurèle-Fortin, NDP):** Mr. Speaker, today we learned that 4% of Quebecers have an addiction problem, whether it involves drugs, alcohol or gambling. With all due respect to the Standing Committee on Public Safety and National Security, this is a public health issue. I have a hard time understanding how enforcement will solve a problem that affects 4% of the population. Billy clubs and prison sentences will not make these problems go away. People use drugs in prison.

I would like to know how we can develop a solution to help that 4% of the population through a public health program.

**Ms. Rosane Doré Lefebvre:** Mr. Speaker, I would like to thank the member for Marc-Aurèle-Fortin. It is always a pleasure to work with him. We represent the same populations in Laval. He knows full well the issues that we are facing with urban sprawl and with the drug abuse we witness in our area and in public spaces.

He touched on an important issue. We are using this debate to try and find a solution. It is a broad debate. Addiction is a very serious problem. My colleagues from Marc-Aurèle-Fortin, Esquimalt—Juan de Fuca and Drummond, along with all of my NDP colleagues who spoke before me and gave passionate speeches about Bill C-2, are trying, as I am, to prove that we need to trust science and the stakeholders involved. We need to listen to experts who have tried to drive home the point that forcing sites such as InSite to close, keeping other cities from having safe injection sites, keeping those sites from functioning, keeping experts from doing their work is really—and I do not know what word to use that would be parliamentary—a serious mistake.

[*English*]

**Mr. Robert Chisholm (Dartmouth—Cole Harbour, NDP):** Mr. Speaker, I am pleased to speak for a few moments to Bill C-2. I have listened to my colleagues most of the day, and they have presented some very personal explanations and descriptions of why the government needs to rethink Bill C-2.

Bill C-2 deals with a public health issue. We believe that decisions about programs that may benefit public health must be based on fact. That is at the heart of this issue. All Canadians, regardless, must have the opportunity to gain the benefit of those programs.

### *Government Orders*

This all stems from a program called InSite. It was opened as part of a public health plan by the Vancouver Coastal Health Authority and its community partners following a 12-fold increase in overdose death in Vancouver between 1987 and 1993. As a result of the efforts of this site, there was a 35% decrease in overdose deaths. Furthermore, InSite has been shown to decrease crime, communicable diseases, infection rates, and relapse rates for drug users.

In 2008, the government began to take action to close InSite. It took action in British Columbia. The minister of health at that time denied InSite's application to renew an exemption that existed under section 56. The B.C. Supreme Court ruled that InSite should be granted a new extension. The federal government then took it to the B.C. Court of Appeal, which ruled again that InSite should remain open. In 2011, the Supreme Court of Canada ruled that the minister's decision to close InSite violated its patrons' charter rights and that the minister's decision was "arbitrary, undermining the very purposes of the Controlled Drugs and Substances Act", which includes public health and safety.

The decision by the Supreme Court hinges on section 7 of the charter, which says that everyone has the right to life, liberty and security of the person and the right not to be deprived thereof, except in accordance with the principles of fundamental justice.

The court found that section 56 exemptions must be granted where they decreased the risk of death and disease and there was little or no evidence that it would have a negative impact on public safety.

I have heard members opposite say that if we poll our community and our community decides that it does not want to have that facility, then why should it have to have it there? The Supreme Court of Canada actually dealt with that question by saying that the government was not able to show that it undermined public safety and, in some instances, had proven to promote it.

We have heard members talk about the problems that result in the injection of drugs in areas that are not safe, with contaminated needles on the ground in parks and with people being exposed to those kinds of health risks. It reduces those health and safety hazards, reduces public drug injections, reduces violence associated with drugs, and reduces drug-related litter.

• (1755)

This is key. Safe injection sites, therefore, strike the balance between public health and public safety. They connect people in dire need of assistance to needed health services such as primary care and addiction treatment.

The point here is this. How do we deliver the services that Canadians need to make them safe? How do we ensure that our communities are safe and healthy? We need to base that not only on facts but on the understanding that every Canadian, every human being in this country, has the right to live life and to liberty and to have access to life-saving drugs and programs.

In relation to further exemptions for additional programs, this is what the Supreme Court said. It directed the following:

...the Minister must exercise that discretion within the constraints imposed by the law and the Charter, aiming to strike the appropriate balance between achieving public health and public safety. In accordance with the Charter, the Minister must consider whether denying an exemption would cause deprivations of life and

security of the person that are not in accordance with the principles of fundamental justice. Where, as here, [referring to InSite] a supervised injection site will decrease the risk of death and disease, and there is little or no evidence that it will have a negative impact on public safety, the Minister should generally grant an exemption.

What we have in Bill C-2 is something completely different. It ignores the direction that was provided by the Supreme Court of Canada. It has been cited by my colleague, who knows much of the constitutional law in this country. Bill C-2 will probably be deemed unconstitutional, which does not seem to bother members opposite. The point is that it not only flies in the face of the recommendations of the direction provided by the Supreme Court decision but goes against the spirit, I would suggest, of what makes us Canadian, what makes us special in the world in our ability to be generous and humane and to show compassion to our sisters and brothers regardless of their circumstances.

If we determine, as has been determined in the case of InSite, that in fact this program saves lives, reduces crime and ensures that the public is safer, then these are the types of programs that we need to make available to people. Some have suggested that New Democrats do not care about addictions, that we just want to make sure people get the opportunity to shoot up. We want to make sure that Canadians are made safe and healthy. This is the safe part and the healthy part is the supervision. Now we have to make sure that the government opposite backs up its words about commitment to addiction to ensure there is follow-up, that there are beds in detox programs and other addiction-related programs, and that there is the support to allow people, when they are ready and able, to kick whatever their addiction is, to turn their lives around and to be more healthy for themselves, their families and communities.

This is fundamental. It is a fundamental principle that has been outlined by the Supreme Court of Canada, and the government is ignoring it. Bill C-2 flies in the face of this principle. The government is going to be told again, as it was in 2008 by the Supreme Court, the B.C. Supreme Court, and the B.C. appeal court, and again in 2011 by the Supreme Court of Canada, that it is on the wrong track, pitting one type of Canadian against another type of Canadian.

We are all Canadians. The Supreme Court will protect that to ensure that this kind of discrimination is not allowed to happen.

• (1800)

**Hon. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Mr. Speaker, the bill is very clear.

I am not sure why the member is opposed to the minister gathering the scientific evidence. The bill would provide the Minister of Health with the information needed to make informed decisions. Why does the member opposite not support organizations providing basic information on science, public safety and community views?

Obviously community views are going to be important in any decision. The opposition seems to brush that away, as if that is not important. Well, it is important, and this bill is important to protect Canadians. Why is the member opposed to community views?

*Government Orders*

• (1805)

**Mr. Robert Chisholm:** Mr. Speaker, I am not in the least opposed to community views. In fact, what we have seen as a result of the 30-plus peer-reviewed studies of communities like Vancouver East, and other communities around the world, is that these programs work at making communities safer.

The point, though, is that the bill would turn the onus of responsibility on its head. Whereas the Supreme Court of Canada has said that when the evidence presents the fact that this is of value and that the values of safety and health are balanced, then it is up to the community to prove that it would not provide that balance of safety and health.

My concern with the authority that would be given to the minister in the bill is that it would make it that much more difficult for the applicants to achieve the bar that she would set.

**Mr. Kevin Lamoureux (Winnipeg North, Lib.):** Mr. Speaker, I think it is important to recognize that in terms of history in Canada in the last decade, there is one safe injection site.

What I liked about the approach to its coming into being is that it was one of co-operation. We had the federal government working with the provincial government, which in turn worked with the community leadership that had a wide spectrum of consultation. Professionals were engaged, and ultimately it came into being. This was done because of the need to meet the safety and health concerns of a community.

The question I have for the member is this: would he not agree that it has been a huge success? It has been clearly defined, facts and science have been brought to the table, and that particular community is better off today as a result of the InSite location.

**Mr. Robert Chisholm:** Mr. Speaker, the member is absolutely correct. The establishment of this or any site needs to be done in consultation with the community and the individuals involved.

The bottom line is that the facts will speak for themselves, on this and any other matter. It cannot be that the biases and prejudices of people within a community are allowed to prevent any other Canadian from exercising his or her right to life and liberty. That is what the Supreme Court has said.

[*Translation*]

**Mr. Philip Toone (Gaspésie—Îles-de-la-Madeleine, NDP):** Mr. Speaker, I am pleased to rise today to present my views on Bill C-2. I believe this bill should be rejected.

This bill is bad for human rights. It will put the lives of many Canadians at risk. Furthermore, it flies in the face of the Supreme Court ruling that stipulates, based on the Canadian Charter of Rights and Freedoms, that people have a right to medical services and to the security of the person. This bill seems to take us in the complete opposite direction.

Many members will recall when InSite first opened in Vancouver over 10 years ago. It was granted an exemption from the law in order to be able to offer addicts access to a service that they could not have otherwise received. This service means that people do not have to put their lives at risk, as it allows them to inject their drugs in a clean, safe place where medical services are available. It also provides the

possibility of more involved medical services. Basically, it can open the door to detox services for some addicts.

The spirit of this bill does not seem to promote injection sites in Canada. On the contrary, it creates 26 conditions that must be met or they will be rejected. Canada currently has one site, InSite in Vancouver. There is talk of opening a site in Montreal, perhaps one in Toronto and one in Victoria. Other municipalities would like to do the same. I can say that in my riding of Gaspésie—Îles-de-la-Madeleine, officials are seriously considering the possibility of having open sites available to addicts. In my riding, people could benefit from having a site that is closer to home, in Montreal for example, instead of having to go all the way to Vancouver to obtain the services that are available to the people of that region.

InSite helps addicts not to risk their lives. I want to mention some facts that the government may have forgotten when it drafted the bill. In one year, 2,171 InSite users were referred to substance abuse counselling. That is a significant number. All these people will have access to a service they otherwise would probably not benefit from. This is about eliminating or reducing the number of people shooting up on the streets. The Conservatives would have us believe that initiatives such as InSite and other supervised injection sites could make our communities less safe, but we are saying just the opposite. These sites make communities even safer. In Vancouver, the benefits of InSite are clear: fewer people are on the streets and more are benefiting from medical services to treat their addictions. This is really the best and most effective way to make our communities safer.

In Bill C-2, the government proposes 26 conditions. The process is very cumbersome and onerous. Those interested in opening a supervised injection site are asked to meet 26 conditions in a relatively short time. However, even if these 26 conditions are met, the minister is still under no obligation to issue a licence for a supervised injection site. He or she may do so, but there is no obligation.

Therefore, people must meet 26 conditions in a relatively short time. It is very difficult for them to meet all these requirements. However, even if they manage to fulfill these 26 conditions, the minister is under no obligation to issue a licence.

• (1810)

Moreover, the minister has no deadline to meet. She can take all the time in the world to issue a licence if she decides to extend the deadline.

These are very onerous conditions. If I were cynical, I would say that this is to avoid having to deliver a licence and authorize the opening of a supervised injection site. The police chief must also agree, as well as city council and the provincial minister of health. These authorities will not simply give their approval because they are asked to do so. They have responsibilities and requirements. They must respect their own process and they only have 90 days to do so.

*Government Orders*

If someone manages to meet the 26 conditions, the minister may deliver a licence. This is no way to respect those who work in this area. Moreover, it certainly does not promote the establishment of a new injection site in Canada. I think it ignores the will of the Supreme Court, which ruled unanimously that InSite in Vancouver should remain open. It cannot be closed.

Let us take a look back and remember that in *Attorney General of Canada, et al. v. PHS Community Services Society, et al.* the Supreme Court did not rule that public safety was the priority, but that the right to health and life was the basis for its decision.

Bill C-2 seems to express the opposite. The bill is immensely concerned with public safety, but makes no mention of the right to life. That is the aspect of the bill I find most surprising. It totally ignores the fact that the root of the debates on the bill is that the Supreme Court ruled that a person has the right to life and must have access to medical services. The bill would have Canadians believe that detoxification centres, such as the InSite supervised injection site, are a public safety issue.

According to the government, if the bill passes at second reading, it will be referred to the Standing Committee on Public Safety and National Security and not to the Standing Committee on Health. I do not understand what motivates a government that does not believe in a basic principle like the right to life that everyone has.

Public safety is important, but the facts have shown that a supervised injection site ensures public safety, since people are not in the streets and public parks, where our children play, are needle free. We want safety for everyone. The InSite location in Vancouver is proof that we can do it, that we have the capacity for it and that we must do it. It is a way of respecting people and respect is a Canadian value that is important to all of us. What is more, this is consistent with the Supreme Court ruling and does not ignore it or instill fear in the public. Some might think that a place like InSite increases risk, but the opposite is true.

I want to point out that we have seen the benefits of InSite time and again. For example, injection drug users who use InSite are 78% less likely to share needles. That is a public health issue. A centre such as InSite has tremendous benefits. It helps prevent emergency room visits, which are very expensive. We want to avoid situations in which people have to use costly emergency medical services. We want these people to have the use of a very inexpensive service that also benefits public safety and public health.

• (1815)

[English]

**Mr. Jasbir Sandhu (Surrey North, NDP):** Mr. Speaker, I keep hearing the Conservatives talking about going to the community and getting their views and that this is what this bill reflects.

Let me give members a little history. We had a site in Vancouver that was established in 2003. In 2008, the community wanted to renew their licence, but the Conservatives chose to take that to the courts. They wasted millions of dollars of taxpayers' money trying to oppress the views of the community.

Now the Conservatives are saying that they want to go to the community and consult them. Basically, they are putting roadblocks in place so that the community does not get its wishes.

Would the member agree that the Conservatives are basing this bill on ideology rather than on facts and figures?

[Translation]

**Mr. Philip Toone:** Mr. Speaker, I thank my colleague for his question and I congratulate him for all the work he is doing in his riding. I very much appreciate his great support for InSite, which is located in Vancouver, in the Surrey region, not far from his community.

It is obvious that this approach is rooted in ideology. The government is not looking at the facts and making a decision based on science. In fact, the Prime Minister's government seems to be incapable of examining the facts and moving forward on the basis of the studies done.

More than 300 studies have been published in journals such as *The Lancet* and the *New England Journal of Medicine*, and in other very respected publications. They all report that supervised injection sites are very beneficial.

We have to get past the ideology and look at the facts. Decisions made in Canada must be based on the facts and public health, and not on Conservative ideology.

• (1820)

[English]

**Hon. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Mr. Speaker, the bill would simply provide a road map on how one would proceed in the future when it comes to supervised injection sites. I do not know why the member opposite does not support requiring organizations to provide basic information on signs and public safety or to consult the community. The community's views are very important.

Why does the member want to disregard all that? These are all good provisions in the bill. That is why he should support it, so support the bill.

**Mr. Philip Toone:** Mr. Speaker, I would like to thank the member for his encouragement that I should support the bill. Unfortunately, I will not.

The problem with the bill is not that we are lacking in consultation. In fact, we could use InSite as a prime example of the public being consulted. Whether it be the local community, the business community, or the municipal councils, all those people were consulted. I never said in my discourse, and I do not know where he got that from, that I do not want the community to be consulted.

What I am saying is that after all 26 conditions are met, and many are new conditions that were never done in the past, they still do not have any guarantee that they are going to get their injection sites.

I would like the member to press his minister and ask the minister to actually make it binding. If we could actually get through those 26 conditions, I would like to see the member push for the idea that it be binding on the minister to supply the licence to open an injection site.

*Government Orders*

**The Acting Speaker (Mr. Bruce Stanton):** We will be resuming debate. I would just let the member for Vancouver Kingsway know that we will not have the full 10 minutes. It will be approximately seven minutes, and I will give him the usual signal before the end of that time.

The hon. member for Vancouver Kingsway.

**Mr. Don Davies (Vancouver Kingsway, NDP):** Mr. Speaker, it is a privilege to stand in the House today to speak to this issue. It is a very important one, not only for the people of our country but in particular for the community that I represent in Vancouver Kingsway, and in Vancouver.

In many ways, the bill before us causes us to think about two things. The first is about the proper and appropriate way to make public policy in this chamber for the people of this country. Second, of course, is the specific issue of the proper policy approach to supervised injection sites. In summary, there has been a lot of talk on this, but in its essence Bill C-2 represents an attempt by the government members to make it very difficult to open up a supervised injection site in this country. We presently have one supervised injection site in Canada, and that operates in my hometown of Vancouver.

I want to start by sharing with the members in this House, and Canadians, some of the realities of what we are dealing with.

Again, I come from Vancouver. It is a port city, and it has one of the highest rates of heroin addiction in the country.

Let me tell members what Vancouver looked like before InSite was opened. I had people coming to my office asking me as a member of Parliament to do something about needles that were found in the alleys behind their houses where their children were playing. I have had parents and teachers come to me to tell me that they had to do a walkabout of their schools in the morning to pick up used needles in their schoolyards.

We had an epidemic of heroin overdose deaths in Vancouver, where for a period of time there were deaths from overdoses almost weekly. I have had business people, particularly in Chinatown where a lot of the drug market is in Vancouver, who complained to me that their customers were being chased away by the prospect of seeing heroin addicts openly shooting heroin outside the doors of their stores and in the alleys, never mind the ambulances and police sirens that inevitably come when people have had overdoses.

That is what Vancouver looked like before InSite opened.

I want to talk about facts, because we will put facts before this debate. Between 1987 and 1993, the rate of overdose deaths in Vancouver increased from 16 deaths per year to 200 deaths per year. The rate of overdose deaths in east Vancouver dropped by 35% after InSite opened in 2003.

Over one year, more than 2,171 referrals were made for InSite users to addiction counselling or other support services. Those who use InSite services at least once a week are 1.7 times more likely to enrol in a detox program than those who visit infrequently.

Commencing one year after Insite opened, there was a significant drop in the number of discarded syringes, injection-related litter, and

people injecting in the streets. Injection drug users who use InSite are 70% less likely to share needles. Reducing needle sharing has been listed as an international best practice in the reduction of the spread of HIV/AIDS and hepatitis.

InSite users are more likely to seek medical care through the site. This means fewer trips to the emergency room, an improvement in health outcomes, and a savings in taxpayer dollars.

Over 30 peer-reviewed studies published in journals, such as the *New England Journal of Medicine*, *The Lancet*, and the *British Medical Journal*, the most respected medical journals in the world, have described the beneficial impacts of InSite. Conversely, multiple studies have looked for the negative impacts of InSite, but none of them have come up with evidence demonstrating that it harms the community.

Safe injection sites operate in 70 cities and six European countries and Australia. A study by the European Monitoring Centre for Drugs and Drug Addiction in 2004 showed that supervised injection sites reach out to vulnerable groups. They are accepted by communities, help improve the health status of the users, and they reduce high-risk behaviour, overdose deaths, and drug use in open spaces.

Illicit drug use is an issue that all of us in this chamber regard as a problem. People from all parties across the country would like to look for strategies whereby we can assist people who are addicted to drugs get off the drugs. We share that goal.

• (1825)

The issue really is this. Where we have drug use, what is the appropriate way to achieve that goal? I am here to tell the House that in Vancouver, if members drive with me down to Hastings and Main Street any day of the week, at any time of day, they will see hundreds of people in the streets who are drug addicts. The question is not whether or not they will use drugs. The question is whether or not we will provide them with a safe, clean place where they can do drugs under the supervision of a nurse, where if they overdose or have a problem, they can get medical care, and most importantly, where if by any grace of God they want to access treatment, they have someone there.

Alternatively, we can ignore this and we can continue to let those people purchase and use their drugs in alleys and public spaces or in front of businesses in Vancouver with no medical attention, where they are sharing needles, spreading disease, harming business, costing taxpayers money and dying.

That is the reality of the debate before us. What we have here is an issue of science and evidence-based policy-making versus a moral, ideological one. We have a question of public policy where we ask whether we want to try to make it easier to provide these kinds of health services to Canadians or whether we want to set up roadblocks, as the bill would.

*Adjournment Proceedings*

The bill would set up a set of criteria that would make it almost impossible for Canada to open a second supervised injection site. That is harmful for public policy. It is bad for the health of Canadians. It is bad for taxpayers. It is bad for business. I implore every member of the House to put science before ideology and stop the bill from going forward.

• (1830)

**The Acting Speaker (Mr. Bruce Stanton):** The hon. member for Vancouver Kingsway will have three minutes remaining for his remarks should he wish to use that time at the next instance where the House resumes debate on the question, and of course, he will have the usual five minutes for questions and comments.

## ADJOURNMENT PROCEEDINGS

A motion to adjourn the House under Standing Order 38 deemed to have been moved.

[*Translation*]

FISHERIES AND OCEANS

**Mr. Philip Toone (Gaspésie—Îles-de-la-Madeleine, NDP):** Mr. Speaker, I would like to ask the Conservatives why they refuse to take protecting marine life seriously.

The changes to the Fisheries Act show that they do not understand and have no interest in how a marine ecosystem works. By restricting the act to protect only fish consumed by humans, the Conservative government is ignoring the vast majority of marine species. More than 80% of fresh water fish will no longer be protected.

This lack of habitat protection will have a disastrous effect on the quality of water in Canada and, as a result, its fisheries. Does the minister understand that the fish we consume depend on their entire ecosystem to survive?

Once again, the Conservatives are ignoring the recommendations made by experts and scientists. Their decisions are based only on ideological considerations. The Fisheries Act has been completely gutted. The big oil companies can now proceed with drilling for oil without any regard for the environmental effects. Once again, the Conservatives are letting the interests of their friends override environmental considerations and the interests of Canadians.

The Department of Fisheries and Oceans will no longer even participate in the review of development applications. From now on, we must rely on scientific data provided by the big oil companies to determine whether a proposed development would have adverse effects on the ecosystem. Does the minister really believe that these data can be objective and unbiased?

The new legislation significantly limits the ability of the Department of Fisheries and Oceans to fulfill its mandate to protect marine life. The Conservatives are effectively abandoning the coastal communities that depend on marine life. How can the minister justify this abdication of her responsibilities?

The fishing industry does not just depend on fish that are caught and consumed. The fishing industry depends on a healthy marine

ecosystem. It is the duty of Fisheries and Oceans Canada to protect this ecosystem. However, the new legislation is tying the department's hands behind its back.

The changes to the act limit the powers of the department and open the door to oil and gas development by the big companies, without any regard for the environmental consequences. Our oceans are precious and fragile. Why does the minister want to limit her own powers to ensure the continued survival of the industries, jobs and communities that depend on these oceans?

The economy of the Gaspé and the Magdalen Islands depends on fishing and tourism. These two industries cannot survive without the security of a healthy marine ecosystem. Why are the Conservatives again abandoning our region?

The reform of the employment insurance program showed how much the Conservative government disregards seasonal industries in resource regions, such as the Gaspé and the Magdalen Islands. The Conservatives accused decent Canadians who work tirelessly for their families of being dishonest and lazy. Now, with these amendments to the Fisheries Act, the government is washing its hands of the marine habitat protection upon which our fishing and tourism industries depend.

Will the Conservatives cancel these amendments so that all fish species can again be given the protection they need? Will they stop their assault on coastal communities that depend on fishing?

• (1835)

[*English*]

**Mr. Randy Kamp (Parliamentary Secretary to the Minister of Fisheries and Oceans, CPC):** Mr. Speaker, I appreciate the opportunity to respond to the member opposite. His original question was based on some faulty premises, so I appreciate the opportunity to correct those.

The fact is that over the years we have had many discussions with our partners and stakeholders about the Fisheries Act. We have spoken with and heard from provinces and territories, conservation organizations, aboriginal groups, industry associations, municipalities and the general public.

These groups asked us to focus on the significant impacts to significant fisheries. They asked us to find ways to work more effectively and efficiently with other regulators. They asked us to develop productive partnerships with those working on the ground such as conservation groups. They asked us to apply our limited resources strategically to ensure that Canada's fisheries can benefit Canadians today and tomorrow.

We have heard from Canadians from coast to coast to coast that the rules protecting fish and fish habitat go beyond their intended goals. Concerns about the broad and even the unintended scope of the application of the regulatory regime have been raised by stakeholders across the country. For example, farmers and land-owners have criticized the Department of Fisheries and Oceans for applying its mandate and resources to protect areas with minimal contribution to fisheries while sometimes insufficient attention is paid to the most significant threats.



*Adjournment Proceedings*

The message we received was that the laws are indiscriminate, which means that all bodies of water where fish live or could live are subject to the same rules and evaluation, regardless of size, environment, or contribution to a fishery.

We know that there are better ways to protect important wetlands, rivers, lakes, and oceans. In addition, significant risks to fisheries have emerged that are not appropriately considered in the Fisheries Act before it was amended, such as those posed by aquatic invasive species. I know my colleague is familiar with this.

Recognizing the importance of Canada's fisheries across the country but also the need to concentrate our efforts and resources, our government introduced amendments to the Fisheries Act last spring to focus our fisheries protection regime on Canada's commercial, recreational, and aboriginal fisheries. By renewing and strengthening our approach to fisheries protection, the Government of Canada is responding to the current concerns and challenges raised by partners, stakeholders, and Canadians across the country.

Through the amended Fisheries Act, the Department of Fisheries and Oceans is transforming its approach to fisheries protection in order to focus the act's regulatory regime on managing threats to the sustainability and ongoing productivity of Canada's commercial, recreational, and aboriginal fisheries. They will provide clarity, certainty, and consistency of regulatory requirements through the use of tools such as standards and regulations. They will enable enhanced partnerships with agencies and organizations that are best placed to provide fisheries protection services to Canadians.

Now that we have set the direction by making much needed changes to the Fisheries Act, we will continue working with stakeholders and partners to develop the regulations, policies, and other tools needed to effectively implement these changes. Through this process we will further define our new approach and develop the tools required to implement it in order to provide predictability and clarity for Canadians working on or near water.

The Government of Canada takes the protection of our country's commercial, recreational, and aboriginal fisheries very seriously. Given the extensive nature of the fisheries from coast to coast to coast, we must focus our efforts on the effective protection of these significant fisheries, and that is what we are doing.

**Mr. Philip Toone:** Mr. Speaker, I would like to thank my colleague for his efforts. We work together on the fisheries committee and I know that he is a very diligent and effective speaker in the House.

When it comes to the modifications to the Fisheries Act that were introduced in Bill C-38, I would posit that the government went way too far. We saw it when we did our study for invasive species in the Great Lakes, as he mentioned.

We do not know what the consequences are of changing environmental conditions. We do not know which species are going to be best placed to survive in the future. We know that there is change. We know that we lose species all the time and we know that nature tries its best to compensate. It needs all the tools that can be had, and that includes protection of fisheries habitat.

I do not have a crystal ball. I do not know what the commercial fishery is going to be in 20, 50, or 100 years. However, I know that if we destroy the fisheries habitat today without any form of compensation, those fish that might be replacing today's commercial fish might not exist in the future. We are putting our future at risk.

● (1840)

**Mr. Randy Kamp:** Mr. Speaker, let me put this as simply as I can. We are adopting a common sense approach that focuses on managing threats to Canada's commercial, recreational, and aboriginal fisheries. We are doing that with the amended act, which prohibits serious harm to fish that are part of these fisheries and the fish that support them—which might not be eaten by humans—and protects the habitat on which they depend, including in the marine environment.

To focus our resources most effectively, we are drawing clear distinctions between different types and sizes of projects. We are taking into account the potential impact on the sustainability and ongoing productivity of our fisheries. We make no apology for making our highest priority the ongoing productivity of our commercial, recreational, and aboriginal fisheries.

As I have already said, now that we have put the rules in place, we will continue our work with partners and stakeholders to develop the regulations, policies, and other tools to effectively implement these amendments.

**The Acting Speaker (Mr. Bruce Stanton):** The motion to adjourn the House is now deemed to have been adopted. Accordingly, the House stands adjourned until tomorrow at 10 a.m. pursuant to Standing Order 24(1).

(The House adjourned at 6:41 p.m.)



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