

House of Commons CANADA

# **Standing Committee on National Defence**

NDDN • NUMBER 022 • 2nd SESSION • 39th PARLIAMENT

**EVIDENCE** 

Tuesday, April 15, 2008

Chair

Mr. Rick Casson



## **Standing Committee on National Defence**

Tuesday, April 15, 2008

**●** (1535)

[English]

The Chair (Mr. Rick Casson (Lethbridge, CPC)): I call the meeting to order.

Today we have two separate issues. Our first witness today is from the Privy Council Office, David Mulroney, deputy minister, Afghanistan Task Force. He's here as a result of a motion passed on April 3, that we have a briefing after the NATO summit in Bucharest.

Mr. Mulroney, we're glad to have you here. We'll give you time to make your presentation. Then, as usual, we will have one round of questions before we move on to our next set of witnesses.

Sir, the floor is yours.

Mr. David Mulroney (Deputy Minister, Afghanistan Task Force, Privy Council Office): Thank you very much, Mr. Chair.

Ladies and gentlemen, thanks for the invitation today. I look forward to giving you a debrief on the Afghanistan-related aspects of the NATO summit in Bucharest, which took place earlier this month. Part of the burden of my song was that Afghanistan was an important part of that summit.

[Translation]

Before I review the results of the Bucharest Summit, I think it would be useful to recall the steps that led us to this point.

The true starting point to the Bucharest Summit was the previous summit of NATO leaders in Riga, Latvia in November 2006. [*English*]

Our own assessment at the time of the Riga summit was that clearly more resources were needed, given the security challenges the alliance was facing in parts of Afghanistan, and particularly in the south. Canada pushed hard at Riga for reinforcements to ensure the success of the mission. We also pushed to ensure that the Afghanistan mission was front and centre on NATO's agenda.

Our efforts to get the resources required in the south didn't end at Riga. One of the points I want to make is that, really, important as the summits are, we need to remember the work that goes on between summits. We continued our engagement with NATO and with our allies to underline the fundamental issue that we needed more resources to be successful and that we needed to share the burden.

The 16 months between Riga and Bucharest marked some critical progress in these areas. Significantly, we saw the number of

countries that contribute forces to ISAF's Regional Command South—where Canada is—increase in the months following that summit. Whereas in November 2006 there were 11 countries providing troops in Regional Command South, there are now 17. More importantly, since Riga, troop levels in the south have increased by approximately 6,000. NATO accounts for approximately 17,500 troops now serving in Regional Command South.

[Translation]

Increased troop levels were absolutely critical to ISAF efforts, but this alone did not guarantee success. Like many of our allies, we realized that in order to succeed, we needed to adopt a comprehensive approach that combined our military and political efforts with development initiatives.

In the months leading up to the Bucharest Summit, Canada played a leading role in efforts to have NATO adopt a comprehensive military-political strategy for Afghanistan. We were convinced that a plan was needed to synchronize the different components of our joint effort

[English]

Everyone knew that security, governance, and development are inextricably linked and mutually reinforcing, yet in the months preceding the summit, it seems that NATO planning failed to reflect that reality, which leads me to what we accomplished at the Bucharest summit.

First, allies agreed to the comprehensive political-military strategy that I just referred to. This strategy took the form of two documents, an internal planning document and a public vision statement. The internal planning document recognizes that ISAF's work on the security front and its support for partners working on governance and reconstruction must be done in a way that is coherent and complementary. This is a fundamental point.

The plan also identifies the strategic outcomes that ISAF needs to achieve or support. At the urging of Canada, it will be updated regularly and used to measure progress. And I should tell you that our delegation at NATO, working in various capitals, including Kabul and London and Washington and Paris and other places, pushed hard for a level of ambition and pushed hard for the notion of a plan that would feature benchmarks and would be updated regularly. We think the result that came through at Bucharest is in part a tribute to that Canadian effort.

### [Translation]

The second component of the comprehensive strategy is ISAF's strategic vision as set out in the Bucharest statement. This declaration underscores the fact that the success of the international force is a priority for NATO, along with the ultimate objective of helping the Afghan people build a stable society.

Much like the internal planning document, the declaration clearly identifies several areas that Canada believes are important. It acknowledges the need for a comprehensive approach that combines security, development and governance efforts. It calls for increased coordination between ISAF and the UN mission to Afghanistan and commits the allies and partners to sharing the burden in Afghanistan. [English]

Of course the Bucharest summit also saw some very important developments regarding troop commitments. France announced its decision to provide several hundred troops to work with U.S. forces in Regional Command East, and that will enable the U.S. to deploy a battalion of troops to partner with us in Kandahar.

As you are well aware, this meets the requirements identified in the Manley panel report and set out in the March 13 parliamentary motion. This reinforcement will significantly boost our efforts there.

Bucharest is not the end of the story. The statements made there were important, but we recognize that progress isn't achieved through declarations alone. We need to implement key elements of our political military plan, such as the training and mentoring of the Afghan National Army and the strengthening of coordination between NATO and the UN.

Importantly, at Bucharest we had the presence of UN Secretary-General Ban Ki-moon and of his new special representative in Afghanistan, Kai Eide. They were both present there.

What we have encouraged in our discussions, both at NATO and with the UN, is a much, much closer collaboration between the work of the UN on the ground and the goals set by NATO.

We will work in the coming months, as we worked before Bucharest, with our NATO allies to ensure that we are reviewing our progress and making changes as appropriate.

So from our perspective, the Bucharest summit needs to be seen as part of a progression. We worked hard at the preceding summit at Riga to ensure that we could bring Afghanistan to the centre of NATO's agenda. By the time we reached Bucharest, the summit was actually preceded by a session of the German Marshall Fund of the United States, where we had the Prime Minister, we had President Karzai, and we had NATO Secretary General de Hoop Scheffer on the same stage. We felt that was a pretty good symbol of the fact that we'd helped to move Afghanistan to centre stage.

We had the commitment of troops and the very welcome news that we would have a partner in Kandahar. And finally we had NATO develop a plan that we think is both realistic and also sufficiently ambitious to move the agenda forward.

So there's lots of work to do in the wake of Bucharest, but we think we're off to a good start.

I'll stop there, if I may.

**●** (1540)

The Chair: Thank you, sir.

We'll start with Mr. Cannis.

Mr. John Cannis (Scarborough Centre, Lib.): Thank you, Mr. Chairman.

David, if I may, welcome. It's good to see you again. Thank you for your brief. Certainly we, on behalf of our constituents, were looking forward to getting this briefing so that we can convey back to them the kind of work that was achieved, etc.

I'd like to open by just going back to 1998, when we had the then-NATO Secretary General address a joint session of the House of Commons and the Senate. I don't have his exact quote, but I'll try to quote him. He said we must move beyond resolutions and statements towards compliance and enforcement.

I personally and other colleagues have been to these various forums, and we somehow at the end of the day manage to make a great statement, which is needed, and then the question is compliance, as the former Secretary General said.

I'd like to initially touch upon France's announcement. It made the announcement. In a short response—because we're limited in time—please tell us when those troops can arrive to lend their support. Is there a time? It's great when we make announcements; it's when the delivery date comes due. Do we have one?

Through you, Mr. Chairman, I will not ask our guest to say anything beyond what he can say in terms of security, etc.

Is there any timeframe, David?

**Mr. David Mulroney:** Mr. Cannis, I can say two things. First, it's important to note that, as welcome as the French announcement at Bucharest was, the French had already established some presence in the south, and in fact they have a number of Mirage aircraft that are flying out of Kandahar airfield and actually providing support to Canadian Forces and others.

As for the various moves that will take place—the French deployment, which is in the planning phases right now, and then the American move to support us—I don't want to speak specifically for them other than to say we're confident that all will be in place in time for the February 2009 deadline that was present in the Manley panel report. So it'll happen in the coming months, and we will have our partner in the south by February 2009.

Mr. John Cannis: Good. That's wonderful to hear.

You also mentioned—if I may use your words—a need for "coordination". You also used the words, "share the burden" in Afghanistan.

We met some time ago with the defence committee from Germany, and part of our exchange was, look, if you're going to be a member of the NATO family, we all know the prerequisites for membership. I'm passing on to you what we're hearing from Canadians, that if you're a member of the NATO family—as much as Canada stood proud in taking on this most responsible role it is now undertaking—the question Canadians have is this: why are we not having these rotations? Why have the caveats not been lifted?

Can you brief us as best you can on the issue of the caveats? It was brought forward by then Minister O'Connor, on which I congratulated him when we were in Slovenia. In this most recent meeting in Bucharest, were the caveats discussed? And if they were discussed, was there any progress? And what was the response from our NATO partners?

#### **●** (1545)

**Mr. David Mulroney:** One of the many things that were very useful in the Manley panel report was that it reinforced the notion that there aren't separate jobs to do in Afghanistan. You can't sort of separate the security and development roles; they are inextricably linked. We feel that should be true for all NATO members.

Has NATO achieved complete harmony in accepting that role? No. Caveats clearly remain. But I think we can take satisfaction from the fact that some caveats are being lifted. Since the Riga summit we have more partners in the south. Admittedly, some of them are from outside the NATO family. Countries like Australia are participating in the south, and France, a major western European player, is clearly willing to play a more robust role.

So that dialogue will continue. We think it's tremendously important that everybody accept that these jobs are really jobs for everybody within the NATO family. We'll try to make progress one country at a time.

**Mr. John Cannis:** I'm pleased to hear that. It certainly gives me some positive news to take back to my constituents.

On the Riga meetings, you said that more resources were needed. Canada indeed pushed hard, and that's wonderful to hear. Can you be more specific about resources? I know we're trying to address manpower per se, but it's not just manpower that is needed. For example, Poland contributed helicopters, but helicopters are no good unless they're manned. Were these types of resources to complement the supply of helicopters from Poland discussed? Can we look forward to these complementary resources coming from other countries? That's the first question.

Second, we know it's not just going to take hardware; it's also going to take funds. We understand some of the methods that are being used for payment of services rendered, whether it's for supplies, manpower, etc. Are the funds that were committed by other nations flowing? We're flowing our resources, to the best of my knowledge. The parliamentary secretary is nodding and I accept that, but are other countries meeting their obligations?

I have been to forums and heard grand statements. They're wonderful to hear. Then a year down the road, we say, "Well, you committed *x* number of dollars for development of schools, roads, new wells." Then a year down the road, the NGOs are saying, as we've heard before this committee in the past, "We need funds."

Can you comment on that with respect to Bucharest and the previous meeting? Have we made any progress there?

Mr. David Mulroney: NATO regularly publishes a statement of requirements for various parts of the mission. The part that gets focused on most often, for obvious reasons, is for personnel and troops. But that also includes estimates on how many helicopters they need and how many training teams they need—what they call the OMLTs. I know you've heard General Atkinson talk about OMLTs before. They really break it down and look at all the enablers, all the parts of the mission they need. NATO has still not met all of their statement of readiness, and that debate continues within NATO and across a variety of forums.

A number of western European countries are trying to think creatively about the fact that western Europe has a plentiful supply of helicopters, not all of which are finding their way to Afghanistan. They're looking at ways of pooling efforts to get more helicopters into the theatre. That's obviously an effort we welcome.

This conversation happens at summits. It happens between summits. It also happens bilaterally. One of the recommendations from the Manley panel was for a focused diplomatic strategy. One of the things I'm working on, and we've been working on in the task force I'm part of, is to ensure that our diplomacy, when we talk to other countries, the UN, and NATO, focuses on these very precise asks that Canada and our NATO alliance need.

When it comes to funds, the story is again mixed. We had a recent report from ACBAR, the organization that was monitoring aid disbursements. Their finding was that some countries are pledging but not delivering. We can take pride in the fact that Canada was with Japan at the top of the list in terms of disbursements, but that again is a subject we take up. France is proposing to hold a meeting of the major donors to Afghanistan in June. That will certainly be one of the subjects that gets raised. It's a subject that gets raised in these larger sessions, but we also raise it with our bilateral partners.

#### • (1550)

Mr. John Cannis: I think I have 20 seconds left, Mr. Chair.

The Chair: No, you're way over your time.

Thanks, Mr. Mulroney.

Mr. Bachand.

[Translation]

Mr. Claude Bachand (Saint-Jean, BQ): Welcome, Mr. Mulronev.

I understand that you work at Privy Council and coordinate the work of the Afghanistan Task Force. Can you tell me who the members of this task force are and how your meetings are conducted? Does the task force include officials from Foreign Affairs or CIDA? Do you personally coordinate the work of this task force? I would imagine the task force is composed primarily of government officials, not elected officials.

Mr. David Mulroney: The task force is made up of officials from CIDA, Foreign Affairs and other departments. I preside over a weekly meeting with the deputy ministers of Foreign Affairs, CIDA, National Defence and Canada's armed forces, including Chief of Defence Staff Hillier, Lieutenant General Gauthier or Colonel Natynczyk. I oversee this task force of deputy ministers that is linked to the committee chaired by Minister Emerson.

[English]

I've created a task force in the PCO of people from various ministries who have a great deal of experience on Afghanistan. Our job is to work with the key departments and agencies to set an agenda that's focused on achieving the Manley panel recommendations, and I work with the deputies of those departments, on a weekly basis, to make sure we're on track to do that.

[Translation]

**Mr. Claude Bachand:** I would like to you calculate something for me. You stated that our troop levels had increased by 6,000 in the past few months, which brings the international contingent in Kandahar to 17,500 soldiers. Does this figure include the 3,200 US soldiers committed by Defence Secretary Robert Gates?

**Mr. David Mulroney:** No, these are additional troops who will be assigned to this mission for six or seven months. However, 1,000 US navy personnel will be participating in operation *Enduring Freedom*, and 2,200 of these soldiers have been temporarily assigned to ISAF. So then, these troops are not part of the 6,000 soldiers I mentioned earlier

**Mr. Claude Bachand:** If we compare current troop levels with the number of soldiers who will remain in February 2009, we see that levels will be lower. Is that right?

**Mr. David Mulroney:** No. Troop levels increased between the time of the Riga and Bucharest summits. The US has also increased its troop levels, but only for a period of six or seven months. These troops will be on a special assignment.

Mr. Claude Bachand: You are referring to the 3,200 soldiers.

Mr. David Mulroney: That's right.

**Mr. Claude Bachand:** So then, they will be leaving the country in February 2009, and there will be fewer soldiers on the ground. About 1,000 will remain behind, but 2,2000 will be going home.

[English]

**Mr. David Mulroney:** I think in this case it's a bit of apples and oranges. The apples are the troops that are assigned as part of the ISAF mission. This is a special deployment of a marine expeditionary unit, which is welcome, but it's not part of that. So it's temporary in that sense.

[Translation]

**Mr. Claude Bachand:** Did you accompany the Prime Minister to Warsaw?

• (1555)

Mr. David Mulroney: No.

Mr. Claude Bachand: The Manley report talks about increasing troop strength and about equipment. I have here a briefing book which was distributed to us for the NATO Summit and the Prime Minister's visit to Warsaw. As the coordinator of the task force of

deputy ministers, could you explain to us how the other two conditions work?

The Prime Minister travelled to Poland to thank the government for its involvement and for making two helicopters available to Canada. As far as I am concerned, that is not enough. We need more helicopters.

Can you tell us a little more about the second condition which involves helicopters and the third condition respecting UAVs? How is the equipment being dispatched? Will it all be in place by February 2009 when Canada will need to decide whether or not to keep its troops in Afghanistan?

**Mr. David Mulroney:** We will have what we want by February 2009.

[English]

We have a plan in place. The Polish helicopters represent a possible component, but National Defence, working with other departments, is well on the way to acquiring the helicopters. They have a variety of options—purchase or lease—and we're very confident that this is in place.

Similarly, the work on the UAV contracts is actually of longer term, but again, we're confident that this is also in place for 2009. There are negotiations that continue, but that's natural.

In both cases the equipment has been identified and we think the Manley conditions have been met.

[Translation]

**Mr. Claude Bachand:** I understand. Is the option that calls for Canada to take precedence over the Americans with respect to the production of Chinook helicopters feasible? Is that option in the process of being negotiated?

**Mr. David Mulroney:** We are looking at various ways of getting more helicopters. Possibly we might purchase them or lease them. A decision has not yet been made. We have been assured that we will get these helicopters.

Mr. Claude Bachand: By February 2009?

Mr. David Mulroney: Yes.

**Mr. Claude Bachand:** With respect to unmanned aerial vehicles, or UAVs, are you familiar with the Noctua project? It involves the leasing of UAVs. In your opinion, will we receive the UAVs by February 2009?

[English]

The Chair: We've lost the interpretation.

It's okay now. Go ahead.

[Translation]

**Mr. Claude Bachand:** Are you confident that through the Noctua project, we will receive the helicopters and the UAVs far enough in advance to respect the 2009 deadline?

Mr. David Mulroney: Yes.

Mr. Claude Bachand: Thank you, Mr. Chairman.

[English]

The Chair: Thank you.

Ms. Black.

Ms. Dawn Black (New Westminster—Coquitlam, NDP): Thank you, Mr. Chair.

Welcome to the committee. It's good to get your briefing today.

When you spoke earlier you said some of the caveats had been lifted, but you weren't specific. Could you tell us specifically which caveats have been lifted and which countries have lifted them?

**Mr. David Mulroney:** By that I meant that we have more countries engaged in the south in robust combat roles, so the presence, for example, of countries like France in the south represents a move forward from where we were, certainly at Riga when France was not contemplating a role in the south. I think that's perhaps one of the most obvious.

As I said, we also have a number of countries with us in the south that had not been with us at the time of Riga. So it's really the growth of the RC South community.

**Ms. Dawn Black:** So in the international community no caveats have been—

**Mr. David Mulroney:** I think the French represent a pretty good example of a country that is now willing to engage in a more robust role in Afghanistan.

**Ms. Dawn Black:** I was talking about the countries that put caveats on their troops; you can't give me an example of a country that has lifted a caveat in terms of what they're doing in—

**Mr. David Mulroney:** In effect, France is now coming south from the capital, where they were, into RC East, which is a pretty significant change. That's the kind of change we'd welcome across the board.

**Ms. Dawn Black:** And that will free up 1,000 American soldiers to come to Kandahar.

Mr. David Mulronev: Yes.

**Ms. Dawn Black:** You were talking about the numbers and I'd like to firm that up, if I could, please. You talked about the 3,200 marines. To my understanding, they've come for seven months.

Mr. David Mulroney: On temporary assignment.

**Ms. Dawn Black:** They are part of Operation Enduring Freedom, not part of ISAF. Is that what you said?

**Mr. David Mulroney:** No. About 1,000 of the marines will be doing Afghan national security force training, and that will be associated with Operation Enduring Freedom; 2,200 will be doing more traditional security roles in the south and they will be part of ISAF.

Ms. Dawn Black: Okay.

When they leave, the 1,000 Americans who are coming to reinforce the Canadian contingent there will be part of ISAF. Is that right?

Mr. David Mulroney: Correct. They'll be part of RC South.

• (1600)

Ms. Dawn Black: That's in February of 2009.

**Mr. David Mulroney:** They'll be here before February 2009, and that will be a longer-term deployment.

Ms. Dawn Black: And the marines will be gone.

Mr. David Mulroney: That's what we've been told.

**Ms. Dawn Black:** You also said that links have been strengthened at this NATO summit between the UN and NATO, that there would be more collaboration, more working together. Could you be more specific about that and tell us in what way, specifically?

Will the new UN Peacebuilding initiative be involved in that too, as the newest organization within NATO, headed by a Canadian woman?

**Mr. David Mulroney:** I think the most obvious example of that is the fact that you had the UN Secretary General at the NATO summit, which I think is a first.

Also, part of the NATO plan going forward calls for increased collaboration with the UN family on the ground in Afghanistan. That seems like a natural thing that should have been happening before, but it wasn't built into NATO's plan, and there was no ability at the level of the NATO structure in Brussels to monitor progress. So NATO is undertaking to work closely and to do their planning.

That means that when NATO sits down and thinks about what it's going to do under the heading of reconstruction and development in the south through the provincial reconstruction teams, the PRTs, it's going to take into account the work that the UN, through UNAMA, the special UN program in Afghanistan, is also undertaking. We're seeing at RC South that those meetings are beginning to take place, and that's really important.

Canada plays a key role in that. I spoke to a former UN special representative in Afghanistan who is now retired, and he was saying that one of the things he found very helpful was when countries like Canada really illustrated ...on the ground in Kabul by meeting and attending to and supporting him. The fact that serious countries like Canada supported him actually enabled him to make progress in Afghanistan and to have a degree of credibility.

We're working very closely with Kai Eide, the UN representative, to be sure that it's clear to everyone on the ground that he's someone Canada supports. We value his work, and we want to see him succeed. We're looking to make the connections ourselves and to help make the connections between the UN and NATO.

**Ms. Dawn Black:** One of the issues that have certainly been on the agenda here and in the other NATO countries too, I believe, is the issue of detainees and transfer to Afghan authorities. I wanted to ask you if that was on the table in the NATO discussions. What came out of that? Obviously it's a joint problem for all of the NATO countries. Were any joint solutions discussed, and if so, what were they?

Mr. David Mulroney: There was no discussion that I was aware of at Bucharest on the subject of detainees. We certainly report into NATO and ISAF about what we're doing and how we do things, and we're aware of what our partners are doing. I can say that even when we've met informally with our partners, and particularly our partners in the south, when we have described the range of things that Canada does in terms of building capacity in Afghanistan, in terms of training the people who work in the detention system in Afghanistan, in terms of investment in physical structures in Afghanistan, we are significantly in the lead.

So I think Canada plays a fairly important role in ensuring best practices, because we have the most developed doctrine of working with the national directorate of security, the primary ones that detainees get handed over to.

**Ms. Dawn Black:** I wanted you to elaborate a bit on your task force and how it relates to the cabinet committee that is chaired by David Emerson. Do you meet with the cabinet committee as well to share your information with that committee?

Mr. David Mulroney: This task force was created as a result of the government's response to the Manley panel. I was previously doing a coordinating role from Foreign Affairs. I think the recommendation of the panel was that as important as that coordinating role was in a department, it would be easier to do it in the Privy Council Office—and that is, I think, a fact.

So the government's response created a cabinet committee, chaired by Minister Emerson and including Minister Day, Minister Bernier, Minister Oda, and Minister MacKay. It also created this new task force.

I'm a secretary to the cabinet committee. The cabinet committee sets out a work program, and we ensure that we're meeting it. The work program, as Minister Emerson mentioned in his technical brief the other day, largely follows the Manley panel.

So it's all about ensuring that we have very clear and very limited Canadian government priorities for Afghanistan. We're not trying to do everything. We're trying to do the very most important things to transform a place like Kandahar. We ensure that our programming is aligned with those priorities, and, most importantly that we have benchmarks we're willing to be held to, which are clear, measurable objectives that we report to Canadians on. We're putting that work program in place right now.

A lot of the work has been done in various places, but it needs to be put in a coherent way and really focused on our 2011 timeline for Kandahar.

**(1605)** 

The Chair: Thanks, Ms. Black.

Mr. Hawn.

Mr. Laurie Hawn (Edmonton Centre, CPC): Thank you, Mr. Chair, and thank you, Mr. Mulroney, for being here.

I'd like to carry on with the roles that DFAIT and other organizations can play in the future. There has been criticism, obviously, of DFAIT and CIDA not getting out and about with the CF, staying back in KAF and so on.

How do you see that role evolving now with DFAIT and the CF and the new Canadian representative there and the ambassador? How do you see all that moving ahead? And can you give some specifics about how you see that evolving?

**Mr. David Mulroney:** Over the course of the last year, we've basically doubled the number of civilians we have in Afghanistan, doubled the size of the embassy, and doubled the number of people we have in Kandahar. In Kandahar we have some folks who work at the Kandahar Airfield, but we have even more who work with the provincial reconstruction team.

We've also created a new position, the representative of Canada in Kandahar, who is the senior Canadian, the boss of all the civilians on the ground, and who represents the ambassador. Their job is to make sure that everybody is focused on the same set of objectives.

So that's been a big change. But I think the Manley panel was telling us, "That's okay, but you have to step it up to the next level and you have to do even more." So what we're working on now, in addition to the policy work and ensuring that we're all clear in terms of core priorities, is to be sure that we've got the people on the ground to operationalize that. We're working with the departments right now to look at the next level of deployments of civilians to Afghanistan. That's going to mean more people on the civilian side and more senior people.

We then have to work through some issues with the Canadian Forces: how do we enable them to do their work safely and securely in Kandahar? I know we're going to find solutions to that, but that's a challenge we're working through right now.

**Mr. Laurie Hawn:** Now, do you have any idea of the numbers of civilians you're talking about? Up to this point, of course, the workforce, per se, has been mostly military. You know, people throw out \$1 in \$10, but a big chunk of that \$10 for the military has been in fact development work, and military people doing that work.

What kind of numbers of those extra civilians are we talking about?

**Mr. David Mulroney:** Right now we have roughly 25 civilians down in Kandahar, at the PRT. It will grow to 30, and I think over time we're aiming to double that, over the course of the next year.

If you look at deployments to PRTs, although it's not as many, obviously, as the Canadian Forces—there isn't a need for real parity there—we're doing quite well in terms of the size of our civilian deployment at the PRT, but we think we can take that, as I say, to the next level.

The other thing that was certainly present in the Manley report, and it's in the thinking of a lot of our like-minded, is to move to greater civilian oversight and leadership of the actual development programs on the ground. That's going to take, as I say, getting more senior people out into the field.

**Mr. Laurie Hawn:** I'd just like to talk about benchmarks for a minute. Obviously, the more specific the benchmark and the more fluid the environment, the more difficult it is to stick to that. What are the sort of benefits and risks of specifics, and sort of the limits of significance that we should attribute to meeting, falling short, or exceeding those kind of benchmarks in what's obviously a very fluid environment?

**Mr. David Mulroney:** That's one of the biggest challenges we face right now, to get those right so that they're meaningful, they're ambitious, and they stretch us in terms of what we're trying to achieve, but that they're also realistic.

Minister Emerson spoke the other night at the technical briefing about having a realistic estimate of what Kandahar in, say, 2011 is going to look like.

I first visited Afghanistan in 1976, well before I joined government. That was just at the end of that kind of golden period when Afghanistan was at peace. It was a peaceful country; I was able to drive from Kabul to Kandahar to Herat. But there were still lots of parts of Afghanistan that weren't safe to go to. Corruption, I think, was still a problem. There were still a lot of the issues that you find in any developing country.

I think that's something we need to get our minds around: for a long, long time, Afghanistan will be a developing country and will have some of the problems associated with it.

We're aiming to move Afghanistan to a state in its transition where Afghans, while the country may still have some of those same problems, are capable of managing it themselves. They're increasingly capable of providing their own security; they're increasingly capable of dealing with issues of corruption, which will probably continue, but they'll have the means of dealing with it that they don't have now.

So it's really about moving Afghanistan along a continuum. The end state of developed status, if we look at any of the countries in the developing world, can be a long time coming, but there comes a time when the government itself has the ability to meet some of those challenges.

**●** (1610)

**Mr. Laurie Hawn:** What's our biggest challenge or biggest risk of failure over the next three years?

**Mr. David Mulroney:** I think we have to be frank about the security situation in southern Afghanistan. It has changed over time. In 2006, at the time of Operation Medusa, you had set-piece fights with the Taliban; that has changed to a more asymmetric form of attack, which is quite insidious. Its whole effort is to undermine civilian confidence, to make NGOs wary of doing work there, to really strike at what we're trying to do.

We have a challenge in terms of meeting that. I think the Canadian Forces is coming up with some very effective means of addressing it, but it's a challenge that remains. I think that is probably the number one issue, trying to address that security situation so that we can work effectively and deliver what we need to deliver to people in southern Afghanistan.

Mr. Laurie Hawn: So basic physical security is still the key to success.

Mr. David Mulroney: It's still a major key to success, yes.

The Chair: Thank you.

Thank you, sir. We appreciate your being here. We appreciate Mr. Cannis's bringing this issue forward and giving us this opportunity to hear from you.

Just before you go, one issue that was raised by the Manley panel was having a signature Canadian project. Is there any advancement on that? Are you free to comment?

Mr. David Mulroney: I was a secretary to the Manley panel, so I had a chance to travel with them. The argument that CIDA has traditionally put forward is that they're working on long-term development and long-term capacity-building in Afghanistan. The panel basically said we get that and understand that it's important, but it's also important that Afghans feel immediate relief and sense that the international community is having an impact. In places like Kandahar, they need to see benefits now. They can't wait three or four or five years. That was really at the heart of what the Manley panel was talking about. They felt that we needed to do something that would have that degree of direct impact on Afghans.

We're now looking at where we're spending our programming money, and that's an issue before us right now. We are determined that the review will include reference to a project or projects that are more definably Canadian and that have some resonance in Kandahar. So that's an issue. It hasn't been discussed by ministries yet, but that's very much on the agenda.

**The Chair:** Good. I hope we have some opportunity for input on one of those.

Again, thank you, sir. We appreciate your time here.

We'll suspend for a short time while we set up our next panel.

\_\_\_\_\_(Pause) \_\_\_\_\_

• (1615)

**The Chair:** We'll reconvene and move on to our next order of business. We continue our study on the health services provided to Canadian Forces personnel.

Today we have four witnesses before us. From Military Family Services, we have Celine Thompson, director. From Military Family Resource Centre, Halifax and Region, we have Colleen Calvert. Colleen says that spring has sprung in Halifax, finally. From Gagetown Military Family Resource Centre, we have Beth Corey. And from Petawawa Military Family Resource Centre, we have Theresa Sabourin.

I understand that you all have short presentations to make.

Celine, are we going to start with you and work our way across? Go ahead.

**Ms.** Celine Thompson (Director, Military Family Services): Mr. Chairman, members of the committee, ladies and gentlemen, good afternoon.

It's an honour for me to be here to speak about the military family services program.

As mentioned, my name is Celine Thompson. I am the director of Military Family Services. It's the responsibility of my office to manage this national program on behalf of the chief military personnel and on behalf of this department. These responsibilities include central funding, policy development, monitoring, evaluation, technical guidance, etc. In short, I am the bureaucrat.

Conversely, the three women with me have the privilege and indeed the challenge of trying to deliver this program to the local communities they serve. Unlike me, they are not here as departmental representatives, but rather as the senior staff person of their respective military family resource centres, accountable to their communities and employed by their community-based boards of directors. These boards of directors are nominated and elected by the communities served and are, by mandate, always led by a majority representation of civilian spouses of Canadian Forces members.

The structure and governance of the military family services program is probably best understood in its historical context. Prior to the establishment of the program in 1991, we were made aware, through research, that family support within the Canadian Forces, when in fact it did exist, was at best ad hoc, piecemeal, and largely ineffective. In addition, we discovered through the documented voices of spouses of Canadian Forces members that they felt they didn't have influence, never mind leadership, over the programs and services that so impacted their lives. The same research revealed that there were pervasive concerns with families that issues presented to the chain of command would not be held in confidence and would indeed negatively impact the CF members' careers.

The current structure of the military family services program largely addresses those historic systemic concerns. The military family resource centres are third-party organizations, working at arm's length from the department. Civilian spouses have legitimate voice in their operation and governance, and they guide the local response to local priorities. Information secured by military family resource centres is held in confidence and protected by the program's own privacy code.

The military family resource centres are the most visible demonstration of the department's support for families. Established at virtually every location where we have families in significant numbers, these provincially incorporated, non-profit organizations work under the leadership of the communities they serve, but they work in close collaboration locally with their base commanders and nationally with the staff of my office.

The program has grown substantially since 1991. Our last full review of the program was in 2002-03. At that time we developed, in consultation with our stakeholders, a refined set of deliverables for the MFRCs to achieve based on the unique stresses associated with the Canadian Forces lifestyle. We formally recognized that families' health and well-being were critical to the operational effectiveness of the Canadian Forces, and we reaffirmed our commitment to continuing to work with the families to ensure that their needs guided our actions and our priorities.

Five years on and we are again in the throes of transformation. Our environment has changed substantially within these past few years. The operational tempo and the demand that places on communities and families can't be understated. Critical to your deliberations is our realization that when a Canadian Forces member is injured or ill, it is the family that is often the primary caregiver, irrespective of what resources the department may provide. We also know that our current operational demands are not without impact on the families themselves. We have an obligation to bolster their

inherent strength and their inherent resilience, and to see this through.

The chief of military personnel, on behalf of the CDS, has tasked us with significantly enhancing our range of programs that we provide to the families of Canadian Forces members. His intent is that we will do so by building on the strengths of the military family resource centres. As we are just about to embark on this task, your conversations with us today are timely and will no doubt move the process forward.

Thank you. I'll conclude my comments now.

• (1620)

The Chair: Thank you very much.

Ms. Calvert.

Ms. Colleen Calvert (Executive Director, Military Family Resource Centre, Halifax and Region): My presentation today is entitled "Strength through Partnership."

I'm Colleen Calvert, director of the military family resource centre in Halifax and region. We have the largest family resource centre in Canada, serving most of Nova Scotia except the South Shore and valley. It's an incredible honour to work with these families.

Military families are the strength behind the uniform. The military family resource centres believe all military families are strong, independent, resilient, and resourceful. They cope with many unique and challenging circumstances, not least of which are the challenges that come with long deployments and postings. These challenges are then exacerbated by the fact that they are usually far away from their normal supports—family, community, and friends.

The Canadian Forces has been visionary, and it has been on the cutting edge of family support. Many of our NATO allies are many years behind and have used Canada as a model to develop their family support programs. What makes Canada's program so successful and so different is that it is by the families, for the families. We exist because military families advocated for family support when they increasingly found the chain of command unresponsive to their account of what kinds of supports they needed.

Families have repeatedly said, "The military has control over everything else, but they're not controlling us"—referring to the military presuming to know better than the families themselves just what these needs were.

As leaders in military family services, military family resource centres have embraced the value and significant role that families play in the welfare and well-being of Canadian Forces members. Recognizing their importance, I believe it is time for all of the Department of National Defence and others to join in a full partnership to provide the member and their family with firsthand information and an extensive array of professional services, programs, and resources that address the social, physical, and emotional needs of military families.

I'm just going to tell you a little bit about the strengths of military family resource centres.

Military family resource centres respond quickly and are agile and able to adapt creatively to all situations. We can be much more agile than the military because we have no bureaucracy. MFRCs have roots in the community. In a changing military, we're the ones who represent continuity in that community.

MFRCs respond to family issues outside the chain of command, which allows the chain of command to focus on operational tasks. We're very effective in helping families support operational readiness. Many COs have reported fewer family-related repatriations during deployments, less stress on family members, reduced financial costs, improved morale, and reduced stress on the family when there has been an engagement with a military family resource centre.

MFRCs have established trusting relationships with the families and members. We're a safe place where families can access programs, services, and resources without having fear of a negative impact on the member's career. We are a trusted and effective first point of contact for our families. MFRCs are professional, independent organizations with professional staff and volunteers whose passion is to support families in a way that meets their actual needs, not the perception of needs. We are a vital and valuable resource to the Canadian Forces and to the chain of command.

MFRCs know and understand the challenges as they relate to the community in which they live and to the unique CF challenges. We are a conduit between the military and the community, family, schools, and others.

One of the challenges we've faced is around communications and relationships. One of our goals is to ensure that families are informed, supported, and connected. MFRCs across Canada unfortunately experience some communication and informationsharing challenges. Some bases and units are very good at engaging and providing support and information to their family resource centre, but many MFRCs continue to have challenges.

Despite directives being written to provide family contact, posting, and deployment-related information to family resource centres, there is reluctance still at some CF units to communicate, to share vital family contact information, or to engage the family resource centres. If MFRCs are not aware of who is posted or who is experiencing deployment or work-related absences, we cannot provide services to their families. If MFRCs are not provided this most basic of information, families may receive no support, services, or information, which impacts the family as well as the military unit. It is vital that MFRCs consistently receive current and accurate family contact information on all members posted or deployed from their base wing or unit.

One of the other challenges that families face today is one of day care and child care. The needs of Canadian Forces families are not being met. When a CF family is posted to a new city, base, or unit, they usually have 90 days to buy a home, sell their home, change schools, move to a new province, and then secure day care.

#### • (1625)

Waiting lists for many full-time day cares range between six months and two years. This does not meet the needs of the Canadian Forces family upon posting. Many cannot find or secure adequate full-time day care. This then may impact their ability to work and adversely impact the Canadian Forces.

Currently, in Halifax alone, I have 400 military families on the waiting list, and posting season hasn't even started. It should be noted that family resource centres are not responsible for providing child care, nor are they funded to provide child care. Many MFRCs across Canada have taken on this role voluntarily to meet the high demand of Canadian Forces and their families.

Based upon feedback, lack of adequate child care spaces is a significant frustration for families. In the larger scope, this dissatisfaction likely equates to a reduction in retention and possibly recruitment rates in the military. While there are initiatives in place at the quality of life department to study the national day care crisis for DND families, resolution may take many years. The best short-term solution is for the Canadian Forces to take ownership of this issue and provide additional child care spaces for our Canadian Forces families. MFRCs must take on the mandate of child care. Given the unique needs of the CF family, the need for adequate child care facilities, I believe, should be a top priority.

In addition to some of the other challenges you'll hear from my colleagues, I want to hit on one other. Military families, upon being posted to a different city or province, have experienced real challenges trying to find a general practitioner for their families and for themselves. Some have even had to enter lotteries held by general practitioners in their new community. Canadian Forces families should not have to be left without a family doctor because the Canadian Forces member is posted. The additional stress and anxiety this may cause a family is, I believe, unacceptable.

It's important that we, as military family resource centres in the Department of National Defence, reaffirm our family support roots, which are based upon the needs of the family, not necessarily the needs of the Canadian Forces. Knowing the challenges and needs of the family and CF, MFRCs are proven effective and internationally recognized professionals who are passionate about ensuring that families are equipped with all the tools necessary to deal with the unique challenges of the military lifestyle.

It is absolutely vital that our families are seen as and are treated as full partners with the Canadian Forces and that they receive the best services and resources our nation can offer them. Keeping families connected, informed, and supported does result in better relations, trust, and improved morale that has and will continue to pay dividends to the Canadian Forces and to Canada.

• (1630)

The Chair: Thank you very much.

Ms. Corey.

Ms. Beth Corey (Executive Director, Gagetown Military Family Resource Centre): Good afternoon, ladies and gentlemen.

Thank you very much for the invitation to be here today. Listening to my colleagues, I'm inspired by the program I'm involved in.

My name is Beth Corey. I'm executive director of the Gagetown military family resource centre located at CFB Gagetown, in a nice little place called Oromocto, New Brunswick.

I've been the executive director for over seven years. I have an extensive background in community development, working with boards of directors and not-for-profit agencies. My particular passion is family support programs.

I recognize that this particular panel is specifically interested in health services provided to the Canadian Forces personnel with an emphasis on PTSD. The impact that I'm going to talk to you about is on the family. My opinion on this issue is inspired by the direct experience of working every day with military families. This issue, directly related to the member, is not the area that I will focus on; it is the family.

I believe there is a philosophical stand and a commitment from the general public, our federal and provincial and local governments, that military families play an integral part in the Canadian Forces, and their commitment to service and sacrifice are nothing short of extraordinary.

In keeping with this philosophy, there can be no question that military families, specifically spouses and children, have earned the right to receive exceptional services. Military family resource centres across this country are providing that wide range of valuable services and support in the context of community development, giving military families a direct and powerful influence on the wide variety of programs and services available to them. Working in the context of not-for-profit, governed by the people we serve—the spouses and the Canadian Forces members themselves—our work is extraordinary. But I'm here to tell you that we can do better. Now more than ever, in the history of the Canadian Forces, it is time to do more for our military families.

I'm going to talk to you directly about the impact of an operational stress injury on the family. There is no question that those injuries have a serious impact on the extended and immediate family. Issues, supports, and services that are required from a family perspective could include the following: better education on and awareness of what an operational stress injury or PTSD is, what the warning signs are, what loved ones can do to ensure their member is getting the support he or she needs, and how to talk to children about what an operational stress injury is.

Oftentimes, spouses are the first people to identify that something is just not right, the feeling that spouses are overwhelmed and often suffer residual effects of operational stress injuries, including an onset of their own depression and mental health capacity, and some compassion fatigue. It is also common that existing issues are compounded. For example, if the family has children with special needs or there are already financial stressors or relational or marital issues, things that were once manageable have become now unmanageable.

In general there have been a number of what I would call "misleading" definitions of serving the families, from a variety of organizations. The general term or add-on these days to many mandates tends to include the veteran, the member, and their families. But what does this really mean? That's my question.

We are discovering in the field that it sometimes means that families must jump through some policy and territorial divides between Veterans Affairs Canada and the Department of National Defence. Sometimes it means they must meet specific eligibility requirements before they can be serviced and supported specific to their own needs and requirements.

For example, we have been hearing from Veterans Affairs Canada that they are struggling with the fact that they want to offer services to family. If the operational stress injury sufferer is a VAC client, they can do so, but changes need to be made in order to recognize that family members deserve to be served in their own right, regardless of whether the ex-military member or the serving member has received or even refuses to seek support.

Operational stress injury clinics need to provide services to families. The eligibility of clients means the active CF member can be considered for services at operational stress injury clinics, but only if they receive a referral signed by the Canadian Forces medical officer, and the family is only served if it's deemed appropriate to the Canadian Forces member's treatment. As a system, we need to give families the tools they need to manage the care of themselves and their families, and we need to do better for our military families.

#### • (1635)

The bottom line is that specialized services and support should be readily available to families regardless of the situation, since these families are being impacted by the consequences of military service and quite often the residual results of trauma from war, which has long-term effects.

It is no longer good enough that we rely completely on referrals to community mental health agencies, civilian counsellors, or to services through the Canadian Forces military assistance program. The programs that I'm mentioning to you come with great difficulties. Sometimes only short-term counselling is available—one to eight sessions—and there are extreme waiting lists. Or issues are compounded because the providers may have little or no experience in military service operations or general understanding of military lifestyles and stressors.

Clearly there is room for better coordination between specialized services and the military family resource centres. More human resources are required for specialized mental health issues associated with unique military lifestyle stressors and issues, perhaps embedded within the military family resource centres or co-located in something like a casualty support unit or transitional support unit, being stood up across the country.

As it stands now, families of serving and released members are not always guaranteed specialized services and support. Initiated programs in the civilian system of support may not be set up to serve their unique needs.

Another population I'd like to talk about are our reservist families. They are perhaps the most vulnerable and under-researched population in the context of families dealing with operational stress injuries. Other casualties are the spouses, parents, and extended family of the reservist. There is no doubt that the military family resource centre in Gagetown meets the needs of those families living close to our facility, but my grave concern is the extent we are able to help families living in the surrounding rural communities of New Brunswick that encompass much of the reserve units.

Although great efforts have been made to travel to reserve units to provide briefings and information, the truth remains that reserve families live too far from their local military family resource centres or the specialized military services and supports that are available on most major bases to make significant use of the resources. We are beginning to see more and more difficulty meeting those needs. Many of these families in reserve force areas are presenting with post-deployment issues. Reservists and their families need extensive education. They need information. They need support services like those provided to all other military families, especially during post-deployment.

Thank you.

The Chair: Thank you.

Ms. Sabourin.

Ms. Theresa Sabourin (Executive Director, Petawawa Military Family Resource Centre): Good afternoon.

My name is Theresa Sabourin. I'm the executive director at the Petawawa military family resource centre. I have been the executive director there for the past 20 years, so pre-inception of the MFSP program.

I'm delighted to be here today to talk to you about fragmentation of services relating to OSIs. I would also like to state that I echo the issues and challenges and the opportunities that have been previously expressed by my colleagues.

Military family resource centres are safe places for families. Many MFRCs work closely with operational stress injury social support, OSISS, peer support coordinators, but many do not have well-established relationships. These two services are often the first line of support for a family with an undiagnosed OSI or PTSD member, and both services are seeing an increase in families reaching out for support. We see this as a positive first step in helping families and, although some families report they're concerned about potential career implications, their family health is more important.

Family members are often the first to identify the signs of an OSI in their military loved one. Families need to be able to access supports for their mental health and for the mental health of their children prior to the clinical diagnosis of their military member by a psychiatrist. Families need support to deal with the daily challenges of caring for their loved one, as these families are at greater risk of depression and suffer compassion fatigue. This leads to increases in stressors on family functioning and contributes to family disintegration. We as a service system need to provide timely information about OSIs and PTSD and where to go for resources and support.

When the military member is diagnosed and accessing treatment at the operational trauma and stress support centre, OTSSC, the family is not always included as part of the process. Although the family receives information about what an OSI is, they may not have an opportunity to discuss the impact of this on their family unless the military member identifies this as a priority.

For example, in a home where a military member is functioning with an OSI and that member is being verbally abusive toward his or her spouse, that spouse is not necessarily being validated at the OTSSC level and sometimes cannot participate in a meeting to

discuss these issues, thereby increasing the stress in this family. Families often come forward when there is caregiver burnout. The MFRC provides a number of services, such as respite child care, but cannot coordinate with the OTSSC because its mandate is to support the members where they are. Unfortunately, there is no client consent to share information with MFRCs; consequently, we cannot work together as colleagues on behalf of supporting family needs and the needs of the entire family.

Further, Veterans Affairs Canada can only support a family if the OSI sufferer is currently a VAC client. Other CF services, such as local-base mental health, do not have the capacity to support the family member and often families must be referred to external community resources for which there are extensive waiting lists. At times, these particular service providers lack military experience, which impacts their capacity to treat the family. For example, if a spouse states to her counsellor, "My husband may have PTSD, because he was involved in an IED explosion while he was travelling in his LAV", this may mean very little to a counsellor with no military experience. We need to have dedicated clinical resources available to these families.

MFRCs are often challenged in our outreach capacity to families due to the lack of provision of basic information, such as nominal roles or inclusion in critical incident stress teams. MFRCs are not consistently informed of casualties in theatre of operations, and this causes inequities in our ability to reach out in a timely manner to connect with and offer support to our families. It is crucial to connect with families early, to provide early interventions and referrals as needed.

In conclusion, I would like to share with you two initiatives that demonstrate our support capacity and give hope to our systemic ability to support our families.

The Petawawa MFRC is currently working with a local children's mental health service, which is funded by the province. We are providing access to immediate therapeutic services relating to child and family functioning as a result of the stressors of military operations. We are working together with a panel of experts to gain from the collective wealth of experience that services such as CHEO and SickKids have that will contribute to our effectiveness for military families and using this to develop our best practices.

• (1640)

We have also identified the need to orient community service practitioners and professionals to the military lifestyle, and are presently developing an orientation practice and process. My colleagues can certainly also share many other examples of local initiatives that are responsive to family needs.

What I'm most excited about, and what I believe will defragment our services, is an opportunity I had to participate in a working group to address a multidisciplinary network to support military families and their members who are ill or injured through a one-stop access to services and supports. This is very exciting for military families, because it will mean that all services, including the MFRC, will colocate to provide a holistic approach to supporting these families, and greatly reduce our service gaps and increase our effectiveness.

In my 20 years working with military family support, we have come a long way. I'm just here today to state that we still have a ways to go.

Thank you.

The Chair: Thank you very much.

We'll start the first round with the official opposition.

Mr. McGuire and then Mr. Rota, go ahead, please.

Hon. Joe McGuire (Egmont, Lib.): Thank you very much.

Welcome, everyone. I met some of you last summer in Moncton. It's not often that we get the perspective of the family at this committee. It's really good that you have come. Your presentations have been very informative.

Colleen gave the impression that you'd like the military to step away a little bit and let you do your job. I know the military is an allpervasive career, much more so than other careers.

I was wondering, with the constant rotations that are going on and the constant training that's going on the last number of years, are there a lot of families just saying they've just had enough, and leaving?

• (1645)

**Ms. Colleen Calvert:** I can only speak anecdotally, I can't speak from fact. Perhaps one of my other colleagues can speak a little bit more to that.

No?

Anecdotal information is all we have. We know that there definitely is deployment fatigue. We've heard the term, and we've seen families quite frustrated, sure.

**Hon. Joe McGuire:** Anecdotally speaking, how serious is that situation?

Ms. Colleen Calvert: I don't have the facts. I would hate to mislead you.

Hon. Joe McGuire: Well, I hear anecdotally too that it is a serious problem, what's going on. I don't know how you address something like that. We do have a small military, and they are under constant.... Particularly with our Afghanistan commitments and other commitments, they're pretty well away a lot, and so on. Other people are bringing up the children. They're not getting the support they think they need.

When they do come home, there are problems with the soldiers who've just come out of a military situation, particularly those on the front lines. We've heard from previous testimony that they're not believed. When the solider says that he's not right or he's not feeling right, he's told that he's shirking, he's pretending, he's looking for a pension.

Is there much of that going on that you have to deal with that at the resource centres? Or is that between the soldier and the DVA or other people?

Ms. Colleen Calvert: Can either of you answer that? I can't.

Ms. Beth Corey: I'd like to respond to the first statement, actually, going back to the families. I don't have any research or numbers, but

this is what I often share with members of the chain of command. Gagetown is both a deployable base and a training base, one of the largest training bases in Canada.

We often say to the chain of command that if the family is good and the family is well, the soldier is well, and if the soldier is well, the training, the operation, and the task at hand are well. That creates a lot of buy-in both in a moral sense and a sense of effectiveness of the Canadian Forces. I think it's fair to say that the health and well-being of families is definitely attached to the effectiveness of the Canadian Forces. I don't have stats on that, but I think it is a very good thing just to state that.

As far as the misdiagnosis or the diagnosis piece goes, I have not heard that. In fact we just finished up Task Force 1-07 in Gagetown, and what I have heard and what I am seeing is that there's more understanding of what operational stress injuries are, and there's better education out there. I don't have the sense that there is that denial, as you say, of what it is, but really, I don't have any research on that either.

**Hon. Joe McGuire:** I would just encourage you to be free—this is not for public consumption, this is not going to be in the press, and this may not even be read for 30 years—and to say exactly what's on your mind. We have to write a report and recommendations—

The Chair: Joe, that's not right. This is an open session.

Hon. Joe McGuire: This is an open session?

The Chair: Yes.

**Hon. Joe McGuire:** So we're not operating on the same rules as last week?

The Chair: Not with these, no. Just with the service people.

So we are in open session. This is public information.

Hon. Joe McGuire: Say what you want anyway.

Voices: Oh, oh!
The Chair: Be free.

Go ahead, Mr. Rota.

Mr. Anthony Rota (Nipissing—Timiskaming, Lib.): Thank you for coming. This has been very informative. I really feel there's a disconnect between some of the reports we got from some of the higher-ups and what you actually see on the ground, and it's some of this stuff that I'm hearing in my office as well. So it's nice to hear it

and to have it confirmed. I wish I didn't have to hear it. Unfortunately we are hearing it and it is confirmed.

Now, there are some major sacrifices made by individual soldiers. They're shifted around. They have to change every so often, and especially when there are children involved.... Sometimes you have family nearby and you can send them to family. Obviously when you're shifted around, you don't have that capacity so there's an issue of day care. When I hear six months to two years, that pretty well caps a salary on a spouse, which puts financial hardship on our enlisted men and women, which is really not a hardship we should be looking at.

The other one I know is out there is the reluctance to engage MFRCs within the decision process or a feedback mechanism.

I have a whole list of questions, but I'm going to limit it to two. Are there any estimates on how many day care spaces we would need nationwide to service our serving men and women so that their spouses would have the ability to go out and get a second income or maybe a primary income, depending on what the spouse does, so they would start off at the same level as most Canadians?

The other question is that there's the reluctance to engage MFRCs. In your opinion, what is stopping them from engaging you in the process? Is it a turf war? Is it embarrassment? I'm at a loss there. I'd just like to know exactly what it is that is stopping them from engaging.

**(1650)** 

**The Chair:** Could we get short responses? We're already out of time with this slot. But go ahead with your answer.

**Ms. Celine Thompson:** Are you referring to the engagement of the local chain of command with the military family resource centre?

Mr. Anthony Rota: Exactly.

Ms. Celine Thompson: I think you'll have some excellent examples of extraordinarily collaborative relationships locally amongst all three. I'll just allow them to respond, because that's out of my lane.

**Ms. Colleen Calvert:** All I can say is that it's not across the board. In Halifax we have probably one of the most incredible relationships with our chain of command. We have a tremendous military leadership there. Unfortunately for some of my colleagues across the country, their chain of command....

I don't know; I don't know if it's a "I know what your problem is, I can fix it, I can tell you how to fix everything"—the military mindset. I don't know if it's the difference between the military and the civilian culture. It's very much personality-driven, from what I've seen, so I think some more relationship building would help. Unfortunately it's very much personality-driven.

**The Chair:** I have to apologize, but we'll have to come back to you. There will be time for another slot if we keep to the schedule here. We'll give you an opportunity to ask that question again.

Go ahead, Mr. Bachand.

**Mr. Claude Bachand:** I think you'll need your translation device. I'll be talking in French.

[Translation]

I want to congratulate you and thank you for coming here today. Before I go any further, I have a question for either the Chair or the clerk.

I do not understand why a representative of the Centre de ressources du Québec was not invited to testify. Has anyone from Valcartier or Bagotville been invited? People in Quebec often see things in a different light. Since Canada is a country that includes two recognized nations, it would have been interesting to hear the viewpoint of the Quebec nation.

Would you agree with me, Mr. Blaney?

Do you know if they were invited?

[English]

The Chair: I'm not sure we did.

The Clerk of the Committee (Mr. Samy Agha): They weren't invited. They weren't suggested by the committee.

The Chair: Yes, these suggestions for witnesses came from the committee members. So we're having a steering committee meeting

Mr. Claude Bachand: So it's my fault then.

Voices: Oh, oh!

**The Chair:** We're going to have a steering committee meeting when we get back on the 29th, and you can bring it up at that time.

[Translation]

**Mr. Claude Bachand:** Ms. Thompson, you stated that all programs were reviewed in 2002-2003. What are the four or five most important programs? What types of programs do family resource centres offer to military families?

[English]

**Ms. Celine Thompson:** The programs of the military family resource centre are really broken down into four broad categories, each linked to the specific exigencies of the military family lifestyle. One of the core components, for example, is family separation and reunion. The array of services within that category would be outreach, pre-post, and during deployment support services.

The other primary component is support to parents, children, and youth, recognizing that there are specific issues around capacity when we place our special brand of hardship on them.

The third category—there's a range of services under each of these—is personal development and community integration. This is intended to address all of those issues that result from us bouncing our families from community to community, and to help them settle into those communities, second language services, welcome information, education, career development, etc.

The final is prevention support and intervention. This allows the military family resource centres the funded mandate to provide primary preventative work to the families they serve.

• (1655)

[Translation]

**Mr. Claude Bachand:** Could you get that information to us, namely the four categories of programs you spoke of and the various programs offered? We would appreciate it very much if you could send that information to the clerk. It would help us to get an overall picture of the situation.

You say you have that information handy? Could you make some copies for us?

[English]

The Chair: Only if it's in two official languages.

Ms. Celine Thompson: It is in both.

The Chair: Okay.

Ms. Celine Thompson: My apologies.

[Translation]

**Mr. Claude Bachand:** Ms. Thompson, can you tell us whether DND provides all of the funding for the family resource centres? [*English*]

**Ms. Celine Thompson:** The core funding comes from DND, my office. We fund what we characterize as mandated services. In addition, the MFRC will receive some funding locally from their base commander. As well, because they're not-for-profit organizations as well as, in the main, charitable organizations, they secure funding from the local provincial authorities as well as from fundraising.

[Translation]

**Mr. Claude Bachand:** Do funding levels really differ from one centre to another, from Petawawa to Halifax, or Gagetown, for instance? To what can we attribute this variation? Is troop strength a factor?

[English]

**Ms. Celine Thompson:** It's a number of factors. Currently the funding model is based on a very vigorous funding review annually. The factors that we look at are, indeed, the number of families within the local community that the MFRC provides support to. In addition, the operational tempo will dictate a level of funding. The particular isolation of that community and their access to other provincial resources will dictate that level of funding.

So it's a host of variables that we revisit on an annual basis. [*Translation*]

**Mr. Claude Bachand:** Generally speaking, would you say that family resource centres are underfunded?

[English

**Ms. Colleen Calvert:** In 2006-07, only 55% of my overall budget was from the military family services. I had a \$220,000 shortfall this year in my funding application.

Mr. Claude Bachand: Is that the same for all of you?

**Ms. Theresa Sabourin:** In Petawawa our budget is about \$2.2 million to \$2.3 million. We received about \$923,000 through the MFSP.

**Ms. Beth Corey:** For Gagetown, our overall budget is about \$1.5 million and we have about \$756,000 from DND. The rest is realized through user fees, fundraising, and our local command support. [*Translation*]

**Mr. Claude Bachand:** That is interesting. Regarding reservists, Ms. Corey, I would just like to say that an excellent report was produced by the woman who is replacing the ombudsman. I hope you have had a chance to read it. It identifies some major problems. The committee will certainly be looking into this report.

You also talked about a territorial divide between DND and Veterans Affairs. As it so happens, the federal government and the provinces are also waging a war of sorts over jurisdiction. As far as I know, the federal government assumes responsibility for a soldier suffering from post-traumatic stress disorder. However, if his situation causes major problems for his family, the latter does not necessarily receive the help it needs. In such cases, the family must rely on the provincial system.

Do you think we should recommend that from now on, DND should assume responsibility for soldiers and also for their families? [English]

**Ms. Beth Corey:** I think it has to be a multi-organizational responsibility that involves DND. I believe VAC has a role to play, especially for our veterans' families. And certainly the military family resource centre has a role to play. I think it has to be a multi-organizational responsibility.

[Translation]

**Mr. Claude Bachand:** I was more interested in hearing your views as to whether sole responsibility for ill soldiers and their families should be left to DND or to the provinces, so that decisions are ultimately made by only one level of government.

(1700)

[English]

**Ms. Beth Corey:** As I said in my presentation, I think our provincial services, at this point, are very much saturated with civilian people. I think that would oversaturate them.

I made the philosophical statement that military families, I believe, deserve exceptional service. I believe that with my whole heart, because I believe they have sacrificed the same as our Canadian Forces members have. What I'm saying is that I believe they deserve exceptional services, whether that be through Veterans Affairs Canada or through National Defence.

The Chair: Thank you.

Ms. Black would normally take this spot. She apologizes, but she had another commitment. We'll move on—

Mr. Claude Bachand: May I take it?

The Chair: No. Voices: Oh, oh!

The Chair: We'll share it amongst all.

We'll move over to Mr. Blaney.

Mr. Steven Blaney (Lévis—Bellechasse, CPC): Thank you, Mr. Chairman.

Thank you to the panel for being here. It's highly interesting to have the family feedback.

My question will be mainly about post-traumatic stress disorder syndrome.

There are two issues you raised in your presentation. You were talking about the referral. It seems to be something you have recognized as a problem, I think. If the military itself doesn't acknowledge that there's a problem, the family cannot be supported. I would like you to expand on this issue.

Another issue I'd like to hear about is geographical access to services when you are not near a base. The other issue is reservists, which was covered a little bit. Maybe you could give me some basic knowledge on how referral works and how it could work so that the family could have support. I guess it's when you don't acknowledge that there's a problem that it's toughest for the family.

**Ms. Theresa Sabourin:** When we speak about the military member having to identify it as a priority for him that his family receive information or receive support, what I'm referring to is that often there will be a host of issues that have been raised and identified. And if the military member is in denial or is not able to actually focus on the issues external to himself, that's when the family can sometimes fall through the cracks. Presently there is no mechanism in place to engage other resources.

For example, with a straight referral through a consent form to release information so that this information could come over to the military family resource centre or to another professional organization, they could in fact be engaged at that time. Often families will sort of wander a bit until they are able to access the military family resource centre.

**Mr. Steven Blaney:** Are you telling me that if the military doesn't acknowledge or identify someone as having some problem, the family has no support? Is that what you're telling me?

**Ms. Theresa Sabourin:** I'm not telling you that wholeheartedly; it's just that DND does not have authority over families. It's very much a partnership approach whereby the information is given to the military so that the outreach capacity can in fact occur.

Did you want to add anything to that?

**Ms. Beth Corey:** In my presentation I talked specifically about the operational stress injury clinics. Currently we have six that have been set up across Canada. They in particular will see the family only if they have a diagnosis or a referral from the Canadian Forces.

What I'm saying is that for specific things, especially operational stress injuries, that are very much connected to direct military service, the families need to be served. They deserve to be served, without thinking about the member. If they want to go there on their own without referral forms, without navigating through several systems, they should be served.

**Mr. Steven Blaney:** So this would be one of your main recommendations, that the family, whenever they—

**Ms. Beth Corey:** Absolutely. There's no question that when a family goes to an operational stress injury clinic, regardless of the situation with the member, they deserve to be served.

(1705)

**Mr. Steven Blaney:** Then the specialist can evaluate whether they need support or not, and to what extent.

Ms. Beth Corey: Correct.

**Mr. Steven Blaney:** Because now they say that since the military has not acknowledged it, they cannot serve you.

**Ms. Beth Corey:** Correct. There's some eligibility requirements in order for them to be served.

That's not to say that they won't be served, but only if they meet those eligibility requirements, which, when you're a family working with someone with an operational stress injury, the last thing you want to do is navigate through another system.

**Mr. Steven Blaney:** You mentioned that those mental specialists could be linked to the services you are offering. How is it working now, and how would you see it working?

**Ms. Beth Corey:** Certainly there are relationships built between operational stress injury clinics and the MFRCs. But something that my colleague Theresa and I have been working on at the army bases are these transitional support units or casualty support units, with the concept in mind that it's very exciting for families because there's a recognized need for supports for the families themselves. So I absolutely see that this would be ideal.

**Mr. Steven Blaney:** I have one last question. We can see that there's a lot of rotation and involvement in a mission abroad, especially in Afghanistan. Do you see an increased number of mental impacts on the military? Would you say there's a growing trend? Do you see more impact than in other deployments?

**Ms. Beth Corey:** Locally I don't have the stats on that, but Theresa may have some.

**Ms. Theresa Sabourin:** I certainly can't comment on the military, but what I can say is that in Petawawa that's part of the reason for our partnership with the Phoenix Centre for Children and Families and their children's mental health services. We went from 10 families to 90 families that were expressing serious issues relating to their own mental health and the mental health of their children that they were directly linking back to the service of their military member.

Mr. Steven Blaney: From 10 to 90?

**Ms. Theresa Sabourin:** Yes, it went from 10 families identifying to 90 families presenting within about a year.

Mr. Steven Blaney: Thank you.

**Ms. Theresa Sabourin:** Might I provide a little bit of clarity on that? Perhaps I wasn't very clear with my other comment pertaining to when military members are diagnosed. In that case, the linkages are very clear and relatively well established. When it is not a diagnosis, that is when there is the lag time and often, due to the lack of psychiatric capacity, diagnoses take a while.

When family members see some difficulties and some challenges, and they think their loved one has some concerns and issues, they don't really have an alternative presently within the system that they can go to for support. So I think that would be a number one recommendation.

**Mr. Steven Blaney:** Thank you very much. I think that's well heard, and will be well taken into consideration.

The Chair: Thank you very much.

That ends our opening round. Now, for the second round, over to the official opposition....

You're pat? Okay.

We'll go to Mr. Lunney for five minutes, and then we'll go back to the Bloc if Mr. Bachand has more questions.

Mr. James Lunney (Nanaimo—Alberni, CPC): Thank you.

I thank you for coming and for your service to the military families. It's front-line work, a lot of grassroots involvement. We all recognize the military being tasked with challenging assignments recently, with a lot more stress on not only the soldiers but on their families.

Certainly the family is an important thing that has to be talked about. We hear a lot of times from the military family. I think someone made reference to whether the military culture is a little bit different from the rest of society in general. There is this camaraderie and fellowship in the military that isn't found in every community. I witnessed that when I visited Trenton—not any of the bases that you are directly working with—over the summer in the MP program, and I was really impressed with the team work and camaraderie and the focus and discipline in the military, which we certainly appreciate.

Family is important. We certainly have to see the family supported. I think we have heard some of the concerns that you've raised here about the services and availability.

Some of you have been on the front lines for some time. I wanted to ask about the efforts the military has made in recent times with the soldiers coming back, the debriefing, the stopover in Cyprus for a little time for the soldiers to spend some time together before they end up back in their civilian environment, the other lives that they've left behind, and the peer support program. I would like you to comment on how you value that and comment on whether you see improvement related to those initiatives.

• (1710)

Ms. Theresa Sabourin: I think with respect to the four days, there's a lot of opportunity to decompress. There's also a lot of education and information that is passed to the soldier in regard to going from the site of operations back into home—how to make that transition successfully, and what some of the challenges have been that perhaps a family has faced to help them have an understanding of what they're going back to. It's called battlemind training.

Simultaneously, we do battlemind training for spouses as well, and that's an opportunity to bring spouses together to help inform and educate them as to some of the stressors and some of the realities their loved ones have experienced, to perhaps give them a bit of a bird's eye view as to where they're coming from and why. If perhaps they come home and they're not necessarily as warm and loving towards the family, that may not necessarily be a big issue, because they need some time to reintegrate into the family. From a family perspective, increasing the awareness and helping people normalize and understand their expectations are really very valuable.

Of course, what we've heard is that the anticipation at that stage is almost a bit overwhelming. They want them home now, so four days is four more days to have to wait. I think the fact that they're being educated, and the fact that they are understanding and being equipped with some tools to be able to help navigate those initial days and whatnot, does add great value.

Mr. James Lunney: Thank you.

Does anybody else want to comment or add to those comments?

There was a remark about the number of professionals. We know there's a shortage of professionals. The military is working hard on trying to recruit more. The numbers are certainly increasing, but the need is great. We know that in society, in general, there's a shortage of physicians right across the country. We have communities that are advertising different things: we'll pay this, we'll pay off your student loans, we'll pay you an extra bonus of \$100,000 just to come to our community. It's a bit of a challenge to recruit doctors into the military

when there's such a shortage. That's just something we're experiencing as a nation. In general, we want to get more resources in to address these needs.

I'm particularly interested in the treatment of post-traumatic stress disorder and so on. I guess it's not your position to respond to this, other than in terms of availability, but we had a soldier here recently talking about treatment. We've had others talk about their outcomes and the challenges they're facing. We had some very encouraging responses with EMDR, which is eye movement desensitization and reprogramming.

Do you have any comments on whether you've seen these treatments being applied successfully? Are they available, less available? Are there any comments on what your observations are from the grassroots?

Ms. Theresa Sabourin: I'm sorry, I don't have any.

Ms. Beth Corey: I don't either.

Mr. James Lunney: Okay, thank you.

The Chair: Thank you.

Mr. Bachand, five minutes for the questions.

[Translation]

Mr. Claude Bachand: Thank you, Mr. Chairman.

Ms. Thompson, how many family resource centres are there in Canada?

[English]

**Ms. Celine Thompson:** We have 32 incorporated, not-for-profit organizations in Canada. Those individual entities don't count sites. A number of them will have outreach offices as well, but there are 32 bona fide corporations.

We have five centres in Europe and the United Kingdom. We also have three centres in the United States and three outreach offices in the United States.

[Translation]

**Mr. Claude Bachand:** What is the overall operating budget? Does each centre have a separate budget?

[English]

**Ms. Celine Thompson:** Everything gets paid out of the same pot. It's about \$20.5 million currently.

[Translation]

**Mr. Claude Bachand:** You say there are 32 family resource centres. However, I would imagine that not every base has its own centre. I can't imagine that Alert in Canada's Arctic has a family resource centre. How can we talk about geographic equity in Canada? Generally speaking, are service levels comparable from one region to another? Are there some locations where no services at all are provided?

**●** (1715)

[English]

**Ms. Celine Thompson:** I wouldn't say so. My rule of thumb is that if there are 20 families, I'll fund it. As a result, we have those organizations overseas. One of those locations is Naples, Italy, for example, where I think the last count of families was 26.

But the isolation and some of the frustration, as well as the deployability of our families there, mean that I have an obligation to ensure they have resources to set up a core of support there.

Looking across the Canadian Forces, again, last I looked, we had no families in Alert, so we're good. But I can't think of a base, wing, or detachment that we have where we don't have some kind of physical presence.

The outreach offices that the MFRCs have largely initiated to be able to reach the reserve populations as well as their more distant ones actually give us an even larger footprint. So Winnipeg operates an organization in Thunder Bay, for example. Colleen has several offices over the province of Nova Scotia.

Our smaller organizations, like London and some of the detachments in Ontario, again, are spread out further.

We expanded our population a year and a half ago to include parents of our serving members as well. I believe we're the only program that does that. Those parents have the annoying habit of not living anywhere close to a CF establishment, so they've created some real challenges for us to reach out to those virtual families.

[Translation]

**Mr. Claude Bachand:** One way of avoiding problems is to ensure that soldiers are able to keep in touch with their families while deployed in a theatre of war. I think this is good for troop morale. I saw this first hand when I visited Bosnia. Each soldier had been given a phone card to keep in touch with family.

Are soldiers on deployment given enough opportunities to communicate with their families, whether by mail or telephone? They should also have access to webcams. I read one interesting story about a soldier who, thanks to a webcam, was able to see his child who had been born only a few hours earlier.

If Canadian Forces provided more opportunities for soldiers to correspond and communicate with their families, do you think this would have a positive impact on them?

[English]

**Ms. Celine Thompson:** I've seen those touching stories as well. It's absolutely heartbreaking, watching the babies being born and having their dads see them for the first time on camera.

I believe all of these organizations have video terminals, so I'll turn that question over to them. They'll know more than I will about family usage.

**Ms. Colleen Calvert:** I can just talk very briefly. All of the sailors get telephone cards, and I'm pretty sure the army does, too.

We have video conferencing facilities with Afghanistan, with Kandahar, so all the members can just book a time. Families can come in 24 hours a day, seven days a week and have live video conferencing. And in addition to that, there is morale mail that is provided as well, so I think the Canadian Forces is doing quite well in that area.

The Chair: Is there anybody else? Thank you.

Mr. Cannis, you have five minutes, and then we'll go over to Mr. Harris to finish up.

Mr. John Cannis: Great. Thank you.

First of all, thank you for your presentation, and welcome to our committee.

I want to follow along the lines of my colleague Claude Bachand on the topics of budgeting and expenses, because some of the statements you made were very constructive—that it is time to do more, that things that were once manageable are now not manageable, that family members deserve to be served and have earned the right to receive exceptional service.

Let me assure you that we all agree with that. Nobody is disagreeing with that. If anything, this committee is undertaking to see how we can address some of the things we've heard. When we ask some of the questions, let me assure you that at least on my part—I'm sure on the part of everybody—it's all well-intended. It might be a bit tough at times and difficult for you to answer, but we'd like you to give us your blunt opinion. I'm going to be very blunt with what I am about to say.

It all boils down to money, dear friends. We heard just last week from former military service people who were not treated properly, where certain people made decisions that, no, they were okay. We also heard from the service providers. It was a wonderful story, I will tell you. But then last week I kind of was shocked, if I may say. As I said, I think it boils down to money.

I have a question. Do the military family resource centres receive a budget, per se, from the overall...? We have youth service centres and different types of service centres in my city of Toronto to address specific needs—youth, seniors, people who have come out of difficult relationships. They get funded by various departments, whether they be municipal, provincial, or federal.

Do the military family resource centres receive specific targeted funding for the service they provide, or is it just through fundraising?

• (1720)

**Ms. Celine Thompson:** For my office, it's targeted funding. So for those service categories that I provided to the committee, that's what I'm funding them to provide. There are a series of outcome measures that are associated with those.

Mr. John Cannis: The money comes from where?

**Ms. Celine Thompson:** It comes from the Department of National Defence, Canadian Forces C108. That's my responsibility.

**Mr. John Cannis:** Great; there is a specific amount allotted for your services.

Ms. Celine Thompson: Exclusively for these services.

Mr. John Cannis: Excellent. I'm pleased to hear that.

So the message, if I understand it correctly, for all of us to understand is that as much as these resources are there, we're strained. Can I use that word?

**Ms. Celine Thompson:** I think what we're starting to see across the country are some very dedicated people who have been working very hard for a really long time. I think we've counted on these staff members and other volunteers working very hard for a very long time. This operational tempo is hard on families, but I would suggest it's hard on staff as well.

Mr. John Cannis: No question.

**Ms. Celine Thompson:** So when I'm being tasked to transform the program in the next three months or so, I believe that's the full range of what they want me to look at. They want me to take care of it.

Mr. John Cannis: No question, you've been very straightforward with me. What I'm really driving at is that we do need the helicopters; we do need the hardware, the software, and so on. But sometimes, in my view, if the helicopter is there, unless the individual who is to operate it is properly ready, mentally, physically, and so on, really that piece of hardware doesn't do us any good. So I'm just driving in the direction of trying to find a balance to address the needs.

**Ms. Celine Thompson:** I believe what you're saying is exactly being echoed by the CF leadership currently. They know and have been very clear in their direction to me: we need to take care of—

**Mr. John Cannis:** Let me tell you something that hurts me and upsets me personally, as an individual, and I'd like your comments on it or how we can address it.

We are a prosperous nation, a nation that has done its duty internationally and domestically. We are blessed to find ourselves in surpluses and balanced budgets, but it upsets me as the son of a veteran when I see undertakings in various communities, in my community specifically, to raise money.

I will give you two examples of that: not just for our military, but for our athletes to go and represent Canada at the Olympics. I find that very upsetting when I see other nations that are literally bankrupt compared to us, and none of that unfolds.

I find it very disappointing that we have to conduct fundraising to support our families. Why?

Again, I'm putting this on the table constructively, because it hurts me, it upsets me, it embarrasses me as a member of Parliament as well. I find it difficult to answer these questions that I'm being asked when I find myself in my riding: "Why are we raising moneys for the families; why don't you guys take care of them?"

I know that back in 1994-95, even after program review, we addressed the payroll problems that were there, and slowly, as we came about doing that, we started to improve housing and so on. But what can we do to address this and to show the world out there that we ask our people to sign up and we are compensating them properly? Can you elaborate on that?

The Chair: Can we have a short response, please?

**Ms. Celine Thompson:** I think the funds being raised by the military family services program are to augment programs and services for families. I don't think you'll get a lot of disagreement, certainly from the panel here, that it's time to transform those programs and services and to bolster them. By the same token, this isn't a financial question for families.

Thank you.

The Chair: Thank you.

Mr. Harris, you get the last word.

**●** (1725)

Mr. Richard Harris (Cariboo—Prince George, CPC): Thank you, Mr. Chairman.

Can I start by complimenting you on your presentation? It was very informative. Apart from that, I can hear the dedication and the commitment to what you're doing just in how you presented that. Certainly it's such a vital role that you play.

I'm going to end up talking about budgets, because I'm concerned about that as well. I have an organizational chart here. I just want to make sure I have it right.

Ms. Thompson, you're employed by DND as the director of military family services.

You other ladies are executive directors of the base military family resource centres, and the board of directors within your communities appoint you.

So do you answer to them as well as...?

Ms. Colleen Calvert: We don't answer to her.

Voices: Oh, oh!

**Mr. Richard Harris:** Okay, so it's the board of directors that oversees what you do. If you have concerns or you need more money or you want to expand your work, you go to the board of directors to seek approval. Is that correct?

**Ms. Colleen Calvert:** It's usually a need that's recognized by sometimes the chain of command. They come to us and say, "I really need day care, because I'm losing people left, right, and centre." Then we go out and raise the funds to provide that service to them.

**Mr. Richard Harris:** But the board of directors, of course with your input as the executive directors, course, control the operation at the local base level. Is that correct?

Ms. Beth Corey: That's correct.

Mr. Richard Harris: Now I want to talk about funding.

Ms. Sabourin, you mentioned that your budget was \$2.2 million for your base. I didn't understand what you meant; when we were talking about budget shortfalls, you said \$2.2 million, and then you mentioned \$923,000.

What's the relationship between those two numbers?

Ms. Theresa Sabourin: The \$2.2 million is our total budget capacity. The \$923,000 are the funds that we get—under the parameters that have been circulated—to deliver the core programs through the MFSP program. The delta between that is achieved through a number of means. It could be through provincial partnerships, local United Way fundraising fees, those other means.

Mr. Richard Harris: So you get \$923,000 from DND—

Ms. Theresa Sabourin: Correct.

**Mr. Richard Harris:** —through Celine's department. And for the difference, you get provincial moneys, and you have fundraising and things like that.

Ms. Theresa Sabourin: That's correct.

Certainly in local areas you may have opportunities that may not be present in other areas. You may be able to work very closely with the local base commander or the United Way or the Ministry of Training, Colleges and Universities to enhance, as Celine said, the basic level of provision according to your community's needs.

**Mr. Richard Harris:** Ladies, are you normally able to meet the difference between what you get from DND and your budget? Are you normally able to get there?

**Ms. Celine Thompson:** They don't want to admit that in front of me.

Mr. Richard Harris: You'd like to get more, right?

**Ms. Colleen Calvert:** We are normally able to do that. Some of us are incredibly fortunate to have our local military leadership kick in and support us.

It's incredibly difficult to fundraise. You tell people that you're not National Defence and you're not federal and you're not this and why you're fundraising for military. They see military families, and they assume it's National Defence. It is a huge challenge for us to fundraise and compete with the 80,000 other charities in this country.

Mr. Richard Harris: Ms. Corey, let me leave this last question for you.

If I were a prospective donor to the MFRC and I wanted to know whether the money was being well spent, how would I do that? As a non-profit agent, are you required to file a statement every year?

**Ms. Beth Corey:** Correct. There are a few ways. There's the charitable return, of course, because we're all registered charities. We have to do a charitable return every year. As well, if you were a donor, we would educate you about where we were going to provide the dollars. All of our fundraised dollars and the donor dollars went to casual child care for our deployed families, which addressed the burnout of a lot of solo parenting for a very, very long tour.

Mr. Richard Harris: So you file a year-end statement with your charitable—

**Ms. Beth Corey:** Yes, and we educate the community about where the dollars will go. That's an enhancement of the program. Currently the mandated program does not cover that.

• (1730)

**Ms. Colleen Calvert:** The annual report is the other one. Our annual report absolutely is available.

Mr. Richard Harris: That's great.

Thank you again for your presentation. I'm a visitor to this committee today, so....

The Chair: Thank you, Mr. Harris.

Before we end, I want to ask Ms. Sabourin one question. From what you hear from your people, is there any difference in getting help for a soldier who has physical problems than for a soldier who has mental problems? Is there any difference that has been brought to your attention?

**Ms. Theresa Sabourin:** I can speak from a family perspective. The reality is that there's a strain on services at a local level. The issue in Petawawa is more the immediacy of the provision of that support versus the lack of provision of that support.

As I said, we have worked with our local mental health services to try to raise the priority level of our military families, and we have been very, very successful around operational stress injuries, as an example. And that occurred as a result of the new realities with the injuries in theatre.

**The Chair:** Thank you all very much. We really appreciate it. That was a great meeting—good questions from all, and good presentations.

The meeting is adjourned.

Published under the authority of the Speaker of the House of Commons Publié en conformité de l'autorité du Président de la Chambre des communes Also available on the Parliament of Canada Web Site at the following address: Aussi disponible sur le site Web du Parlement du Canada à l'adresse suivante : http://www.parl.gc.ca The Speaker of the House hereby grants permission to reproduce this document, in whole or in part, for use in schools and for other purposes such as private study, research, criticism, review or newspaper summary. Any commercial or other use or reproduction of this publication requires the

express prior written authorization of the Speaker of the House of Commons.

Le Président de la Chambre des communes accorde, par la présente, l'autorisation de reproduire la totalité ou une partie de ce document à des fins éducatives et à des fins d'étude privée, de recherche, de critique, de compte rendu ou en vue d'en préparer un résumé de journal. Toute reproduction de ce document à des fins commerciales ou autres nécessite l'obtention au préalable d'une autorisation écrite du Président.