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Chair

Ms. Irene Mathysen

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• (1530)

[English]

The Chair (Ms. Irene Mathysen (London—Fanshawe, NDP)): I wish to begin the meeting.

I'd like to welcome our former chair, Ms. Hedy Fry. Your addition here today is most welcome. Your expertise is very much appreciated.

Our first witness, Ms. Brayton, is expected to arrive in Ottawa by train at about 3 o'clock. She may be a bit late, and she is on a very tight timeframe.

In the meantime, I'd like to welcome Madam Vanessa Bevilacqua, who is a policy adviser for FADOQ.

Thank you very much for being here. You have 10 minutes for your presentation. We look forward to what you have to tell the committee.

[Translation]

Mrs. Vanessa Bevilacqua (Adviser, Advocacy, Réseau FADOQ): Thank you.

I will begin with an overview of the organization I represent. Then, I will discuss the topic at hand.

The FADOQ network is composed of affiliated organizations. It aims to bring together people 50 years of age and over and represent them in various forums to ensure recognition of their rights and needs. Its mission is also to promote the participation of seniors in society by organizing activities and programs for people 50 years of age and over. The network currently has 265,000 members, making it the largest organization representing people 50 years of age and over in Quebec.

In the next few minutes, I will focus my remarks on three main issues: the economic vulnerability of older women that makes them more likely to suffer abuse; inconsistencies in the health care system that place them in a situation bordering on negligence; and dignity and respect for older women.

Let's first talk about the economic gap between older men and women. Because of today's socio-economic circumstances, women over the age of 65 have benefited the least from policies aimed at equality between women and men in the labour market. The vast majority of these women remained at home for years to raise their children, as was the norm at the time. Those who entered the labour market did so towards the end of their working lives and held typically female, low-paying jobs. When advancements were first being made in the workforce, many women in this age group were

already at the end of what would have been considered their working life. Moreover, many of them did not have the time to make sufficient gains in terms of personal savings or contributions to the Quebec Pension Plan/Canada Pension Plan to ensure a comfortable retirement.

[English]

The Chair: Ms. Bevilacqua, the interpreter is having a bit of difficulty keeping up with you. Could you slow down just a bit?

Ms. Vanessa Bevilacqua: Sure.

The Chair: Thank you.

Ms. Vanessa Bevilacqua: Do you have my text in English?

The Chair: We'll make sure the committee receives the text.

Ms. Vanessa Bevilacqua: Okay. I thought that if everyone had my text, I could go faster, but I'll slow down.

The Chair: Go ahead.

[Translation]

Mrs. Vanessa Bevilacqua: The figures clearly show a huge economic gap between men and women over the age of 65. In 2008, women aged 65 and over had an average annual income of \$20,495, while older men had an income of around \$28,775. The gap between the incomes of men and women reflects the economic difficulties experienced by women over 65. However, the source of this income is also worth analyzing.

Men receive more income from sources related to work and personal savings, such as benefits under the Quebec Pension Plan/Canada Pension Plan and RRSPs, while women mostly depend on public plans, such as the Old Age Security program and the Guaranteed Income Supplement.

However, relying on a government benefit is far from ideal because it requires seniors to be dependent on policy and live in uncertainty. The women most affected by poverty, and therefore abuse, are single women who live alone or are widows.

They must meet all the day-to-day expenses themselves. Those expenses are constantly increasing, while their incomes are fixed and dependent on the poorly indexed Old Age Security and Guaranteed Income Supplement. The Guaranteed Income Supplement is a federal benefit for seniors most in need. Many beneficiaries of this program are single women. Yet, in many ways the program does not take seniors' needs into account.

In fact, it is estimated that about 40,000 people in Quebec who would normally be eligible for the Guaranteed Income Supplement do not receive it simply because they must take steps and enrol in the program. Enrolment in the program is actually not automatic. However, most people who should be receiving that supplement are women with a limited education. They do not take the necessary steps to apply for this benefit to which they are entitled.

The poverty caused by this economic insecurity makes older women vulnerable. When their resources are limited, they choose to go without their medication or a balanced diet in order to pay the rent and bills. They also choose to cut out any outings or social activities to save money. That puts them in a cycle where sickness and isolation only make their already difficult living conditions even worse.

Automatic enrolment for the Guaranteed Income Supplement would allow everyone to receive the benefits to which they are entitled. The Canadian government has all the necessary information on the income and marital status of seniors, thanks to tax returns, and on their comings and goings in and out of Canada and years of residence in Canada, thanks to immigration and border services, to make enrolment automatic. Better coordination of services and greater cooperation between the provincial and federal governments will be needed for automatic enrolment.

Our universal health care system is an achievement we can be proud of. Its underlying principle of universality is the cornerstone of an inclusive health care policy. However, in recent years, the erosion of the system has been threatening its very existence. Administrative gaps, organizational problems and major shortcomings in the accountability of managers and professionals themselves undermine public confidence in the health care system. The first victims of our sick health care system are women.

I will now talk about the situation of family caregivers. Family caregivers are people who take care of a relative who may be sick. Their situation in Quebec and Canada is especially complicated, as there are very few programs to assist them. Actually, 90% of family caregivers are women. It is estimated that, in Quebec alone, they enable the government to save \$5 billion annually in health care costs.

In addition to taking care of their loved ones, those women must also hold down a job, raise their own children and assume other family responsibilities. That means family caregivers often have to miss work, and that can have a negative impact on their pay and opportunities for advancement. That undermines the financial situation of some women and further increases their vulnerability.

Because of a lack of resources available to allow them to take a break, for instance, by entrusting their relatives for a few hours or a few days to a person employed by the health care system, these women demand a lot of themselves, both physically and psychologically. The issue of family caregivers is a typically female one that deserves special and urgent attention by the government.

• (1535)

Currently, the only practical help for those women is the compassionate care benefit under the employment insurance program. Employment insurance compassionate care benefits are

paid to individuals who must temporarily take time off from work to care for a family member suffering from a serious illness that may cause his or her death in the next 26 weeks, or 6 months. However, a family caregiver is much more than someone who takes care of a loved one in their final days. Family caregivers can spend years taking care of a person suffering from a loss of independence or a chronic illness.

Given our aging population, we must come up with an employment insurance program that supports these women in need—both financially and emotionally—throughout the process. Otherwise, they find themselves isolated. Their having to stop work entirely severely jeopardizes their future and prevents them from saving for their own old age.

Currently in Quebec, those who are 65 years of age and over and who do not receive the Guaranteed Income Supplement must pay a monthly deductible of up to \$80.25 for their medication. Those who receive between 1% and 93% of the maximum Guaranteed Income Supplement pay almost \$50, and those who receive 94% or more of the supplement pay no deductible for their drugs.

A simple calculation points out some inconsistencies. On the one hand, a woman who is 65 or over, lives alone and has an annual income of \$14,775 must pay up to \$600 a year for her medication because she receives less than 94% of the Guaranteed Income Supplement. On the other hand, a woman of the same age with an annual income of \$14,768 pays \$0 a year for her medication because she receives a supplement of over 94% of the maximum amount. For a difference in income of less than \$7 a year, an elderly woman is penalized by \$600 a year, based on the income categories established by the Régie de l'assurance maladie du Québec and the Government of Canada.

When older people complain to the provincial organization or the Guaranteed Income Supplement service, they are forever being sent back and forth between the two organizations. No one wants to take responsibility, so seniors' requests are never taken into account. Meanwhile, older people, and especially women—who, as we know, use more medication because they live longer—suffer the effects of poor communication between the two levels of government.

Can you tell me how much time I have left?

• (1540)

[English]

The Chair: You have about half a minute.

[Translation]

Mrs. Vanessa Bevilacqua: Okay. I will wrap up my presentation with the part on sexual assault.

Sexual assaults against women of all ages undermine the physical and psychological integrity of the victims. The Government of Quebec and the Government of Canada have taken several measures in an attempt to improve things. The federal program New Horizons for Seniors is an excellent initiative that enables community organizations to help elderly women who are victims of abuse. We also participated in the National Initiative for the Care of the Elderly, whose goal is to improve older women's financial literacy. Status of Women Canada is one of the organizations that provide funding for that initiative.

In closing, I want to emphasize the importance of being aware of the potential abuse and fraud involving elderly women. A number of tools are available for that purpose.

If you have any questions about this, I could discuss it further.

[*English*]

The Chair: Thank you very much.

We are still waiting for our second witness, but in regard to time, I would like to get started.

We'll start with the government caucus, with Ms. Young, please.

Ms. Wai Young (Vancouver South, CPC): Thank you so much for that really comprehensive presentation. I think you've included some really interesting information, so if you don't mind, I'm going to ask a few questions about it.

Starting with talking about abuse, you say, "Often this type of assault"—you're talking about sexual assault—"is combined with another form of abuse such as neglect and physical, psychological and financial abuse". You're quite comprehensive in your listing.

Can you tell us what are the major forms of abuse, like in priority...? I mean, it's horrible to say, but what is the most to the least...?

• (1545)

[*Translation*]

Mrs. Vanessa Bevilacqua: Actually, it all depends on the context. Let's look at elderly women, for instance. It depends on whether they live alone in their home or in a retirement home surrounded by many people.

When people live alone in their home and have few family members close by, they are very likely to be victims of neglect. Those people don't necessarily always take care of themselves. Health and social services are unable to help all those in need of assistance.

Those isolated people are also often victims of financial abuse, such as telemarketing or door-to-door sales schemes. Since they are alone and have few people to talk to, they tend to open up and trust people more quickly. They may invite people to come in or may talk to them on the phone. They may also provide personal information they would normally not share.

If we are talking about people living in a retirement home....

[*English*]

Ms. Wai Young: We've heard from other witnesses on this whole area, so in the interests of time, because I have only seven minutes, I'm just going to be a bit more directive.

We also know, because we've heard from many witnesses over many days, that with respect to issues and the different kinds of abuse that go on, there are obviously differences between women who are isolated and live at home and women who live in institutions. So let us talk a little bit about the women who are isolated and live at home, because it would appear that, because they're isolated and living at home, there are possibly fewer people overseeing their care.

In your brief, you have noted that several things are critical. For one thing, you say that family caregivers and having some support for them is a good thing. Would you say that this government's family caregiver tax credit is a good thing?

[*Translation*]

Mrs. Vanessa Bevilacqua: It's a good thing in principle. However, most women we help have such a low income that they don't pay any taxes anyway. So, a tax credit changes nothing for them. Therefore, it's not a good measure.

[*English*]

Ms. Wai Young: For example, my own mother is 78 years old, so if I had to take time off work to take her to her numerous doctor appointments and all those sorts of things, or if she actually was in the hospital for a while because she had cancer and so on, that would be something I could claim, because I'm a working person, right?

[*Translation*]

Mrs. Vanessa Bevilacqua: Yes, but if your mother was chronically ill and you were taking care of her full time, you would not be in the labour market. You would be entitled to a last-resort type of assistance, such as social assistance. Therefore, you would not be paying taxes anyway.

Do you understand what I am trying to say?

[*English*]

Ms. Wai Young: I understand, but there are a lot of working women as well, and there are family incomes where that might be helpful.

[*Translation*]

Mrs. Vanessa Bevilacqua: What I'm saying is that, in the real world, family caregivers have such a low income and pay so little in taxes that, for them, a tax credit is not a useful tool. When a person's income is \$30,000 a year, the small tax credit that's calculated based on the taxation of that modest income is insufficient. It's irrelevant.

[*English*]

Ms. Wai Young: But you do say here that the unemployment support is there as well. There are 26 weeks and six months and a number of other features that do support caregivers. Right?

[*Translation*]

Mrs. Vanessa Bevilacqua: Yes, there are a few of them.

[English]

Ms. Wai Young: I also wanted to ask you about the new horizons for seniors program, which you have in here as well. You say that there are a couple of pan-Canadian projects that support the provincial elder abuse programs and they are two excellent initiatives. Can you describe a little bit your knowledge of or experience with these two excellent initiatives and how they were excellent?

[Translation]

Mrs. Vanessa Bevilacqua: Actually, the Government of Quebec recently mounted a campaign that is in line with the elder abuse prevention plan.

A telephone line was set up for referral purposes. Any senior in Quebec can call a single number if they feel they have been the victim of abuse. Their call is immediately transferred to the health and social services centre in their area. And right away, they come under the care of a social worker.

Last year, the Government of Canada also conducted a big media campaign for the prevention of elder abuse.

Obviously, it is an excellent initiative. Sometimes, elderly people have been abused for so long or do not even realize that what has been happening to them is abuse, so they do not report it. Seeing it on TV or hearing about it on the radio helps them realize what is happening.

The telephone line I am referring to is called the Elder Abuse Help Line. Last year, three times more calls came in than expected. So there is no doubt that these are excellent tools.

The new horizons for seniors program is a Canada-wide initiative that aims to prevent elder abuse. The funding for our senior aware program comes through new horizons for seniors. By the way, I brought some pamphlets that I could hand out later, if you are interested. Senior aware helps us educate seniors. In fact, we tell them what constitutes abuse. We also give them the necessary tools and resources if they feel that they, themselves, a neighbour or a friend is suffering from abuse.

• (1550)

[English]

The Chair: Thank you very much.

Now I'd like to welcome Ms. Bonnie Brayton.

It's good to see you. You're no stranger to this committee, and we welcome your input.

Ms. Brayton has a brief, but it's not translated yet. As soon as it is, it will be distributed to the committee.

Ms. Brayton, you have 10 minutes. Please begin. Thank you for being here.

Ms. Bonnie Brayton (National Executive Director, DisAbled Women's Network of Canada): Good afternoon, everyone.

We thank the Status of Women committee for inviting us to present today in this dialogue about the impact of elder abuse on women with disabilities and deaf women in Canada. It is vital to give us meaningful ways to participate at policy tables in the decisions

that affect our lives. We are grateful for this opportunity to open what we hope will be an ongoing dialogue.

As visitors to the lands of the Six Nations peoples, we thank the Haudenosaunee people for the use of their lands for us to come together today.

Today we are here to offer the expertise of our lived experience as the basis for input and collaboration to increase our opportunity for inclusive attitudes and practices for Canadian women with disabilities in their quest to be free from violence. The reality is that very little attention has been focused in Canada on the issue of abuse against older women in general, but there is an acute absence of this focus on women with disabilities and deaf women.

The federal government's Human Resources and Skills Development Canada statistics page on their elder abuse website, for example, states the importance of understanding elder abuse from a gendered perspective: "On the issue of abuse of older adults there are indications that not only age, but gender, and power and control dynamics are at play, so the entire complexity of causes and remedies needs to be considered".

Further, it states:

Some studies indicate that spousal abuse is a significant dimension of abuse of older adults. Many scholars believe that abuse of older adults is a form of spousal abuse "grown old". Some feminist scholars explain it as one of the consequences of family patriarchy, which is identified as one of the main sources of violence against women in society. Some scholars have questioned whether spousal abuse is ever first-time abuse in old age. The model views this power imbalance between men and women in our society as rendering women more vulnerable and open to abuse, whether they are young or old.

Not taken into account in both of these theories put forward for understanding elder abuse are disability, race, immigration status, first nations experience, etc. Most definitely, how people are valued and the amount of access they have to power in society impacts their vulnerability to abuse. All we can do at this point is talk about the devaluing of women, older women, and people with disabilities. Each layer of marginalization creates more barriers and an increased risk to abuse in our lives.

Since there is a pronounced absence of work focused on the issue of older women with disabilities and abuse, I can share with you today some of our thoughts about its prevalence and the needs for women with disabilities. Currently we are applying to Human Resources and Skills Development Canada's elder abuse call for proposals—the new horizons program—to address this absence in applied research and, thus, strategies to combat what we feel is a critical issue.

We know that people with disabilities, particularly people with intellectual disabilities, are experiencing an increased life expectancy beyond the typical mid-life. With this increasing aging population of people with disabilities comes a wide range of housing, legal, financial, caregiving, transportation, and community support and access issues, all of which have implications regarding the extent to which aging people with disabilities are safe and included in society.

• (1555)

The Chair: Ms. Brayton, the translators are having some difficulty. If you could just slow down a little bit, we'd appreciate it.

Ms. Bonnie Brayton: I'm sorry. Thank you.

The current policy framework cannot adequately provide for the support and financial needs of aging people with disabilities. This has resulted in aging people with disabilities in situations of increased vulnerability, and a lack of access to appropriate services and supports in both the disability and the seniors sector.

Research has also clearly indicated that people with disabilities, particularly women with disabilities and seniors, are more likely than others to be subjected to acts of violence and/or to live in abusive situations. Numerous national and international research studies have confirmed that people with disabilities experience violence at a much higher rate than non-disabled populations. National and international research studies conducted over the last decade confirm that women with disabilities are abused at much higher rates than women without disabilities and than men with and without disabilities.

Studies indicate that women with disabilities are sexually assaulted at a rate at least twice that of the general population of women. The rate for women with intellectual disabilities and deaf women is even higher than for other women with disabilities. Almost 80% of women with disabilities have experienced physical violence by their intimate partners, compared to 29% of women without disabilities.

Research affirms that sexual offence is the most common type of abuse against women with disabilities. The nature of abuse against women with disabilities and deaf women differs from that in non-disabled populations due to systemic socio-economic exclusion and a related lack of appropriate supports and services. Like seniors, for women with disabilities there is an increased dependency on others for primary care and financial support, which makes them more vulnerable to abuse.

Internationally known researcher and disability rights activist from the John Dossetor Health Ethics Centre, in Alberta, Dr. Dick Sobsey, was consulted for his input into the fact-finding working group on older people with disabilities and abuse—this was in the Office for Disability Issues, in 2009-10—in which DAWN Canada was a primary participant. He identified the critical need to examine the prevalence and nature of elder abuse for people with disabilities for the primary purpose of using the information to obtain and develop tools and strategies for addressing it. Dr. Sobsey indicated that information on elder abuse and people with disabilities is grossly absent in the literature to date in Canada. He said, "This kind of research is very basic but it is badly needed in elder abuse studies."

Developing safe and affordable housing options for older women with disabilities and assistance in the transition to independent living

is an option that is preferable to residential or long-term care for seniors. It is a well-documented reality that institutional and congregated living settings for people with disabilities—particularly women—people with intellectual and psychosocial disabilities, and deaf people have been environments where abuse is widespread and ongoing. In addition, as I'm sure you have heard from other experts, elder abuse in seniors residences, long-term care facilities, and nursing homes has been identified over and over as a critical issue.

Ironically, the potential for abuse occurring in congregated or institutional settings occurs for the same reason for bringing people into such settings: the need for support with everyday living. Abuse can and does occur when other people are making decisions for the resident, where people's wishes are denied, and where attitudes and practices deny people their respect and dignity.

Older women with disabilities and deaf women are at a double disadvantage and are extremely vulnerable to abuse, with their increased need for health and social supports and different communication styles that often make it difficult to express themselves, and the lack of knowledge of how age-related conditions affect people with disabilities.

This excerpt from the Public Health Agency's "Seniors on the Margins" provides a good example of how the needs of older women with disabilities may result in increased vulnerability:

Differentiation between dementia, depression and those behaviours directly linked with the developmental disability is especially challenging, as is the difficulty the senior may have in expressing psychological problems. As well, there are few specialists with expertise in both developmental disability and psychogeriatrics.

This is the rationale behind the work of the disability movement in Canada, including the Community Living and Independent Living movements, which actively seek the inclusion of people with disabilities in living a safe and supported life in their communities, like other citizens. DAWN-RAFH Canada and the Canadian Association for Community Living have developed a national strategy that pursues this objective by implementing a local-level community development approach that operates on all levels—municipal, provincial, territorial, and federal—and in all key sectors to develop a coordinated response to addressing the issue of abuse of older people with disabilities and the elderly deaf, with DAWN focusing particularly on women.

The Government of Canada, through the federal departments of Status of Women Canada and Justice Canada, is acknowledging the critical need to address the issue of violence against people with disabilities and deaf women and has demonstrated this support by working closely with the Canadian Association of Community Living and DAWN Canada in the development of a pan-Canadian initiative entitled “Preventing and Responding to Violence in the Lives of People with Disabilities and Deaf People”.

● (1600)

This strategy would bring the key sectors and people with disabilities together in local communities to assist in the development of sector-specific tools and activities that will address the issue of abuse against people with disabilities. DAWN-RAFH Canada and CACL, the Canadian Association for Community Living, came together earlier this year, with support from the Canadian Women's Foundation, because of the critical need to address the alarming rates of violence that people with disabilities, particularly women with disabilities and deaf women, are experiencing throughout Canada.

Currently many women with disabilities and deaf women are unaware of their rights, are not being appropriately protected from violence, and are not able to access and fully participate in the systems that are there to prosecute their abusers. DAWN-RAFH Canada and CACL are aiming to address this issue as soon as possible in order to put an end to the violence that is too often a part of the lives of people with disabilities.

In summary, older women with disabilities and deaf senior women face multiple risks of abuse, yet elder abuse in these populations has not been examined or addressed in any practical and effective manner. DAWN-RAFH Canada and the Canadian Association for Community Living are proposing a cross-ministerial, cross-sectoral strategy that aims to combat the many manifestations of violence and abuse that women with disabilities and deaf women in Canada are experiencing.

We ask you to ensure that women with disabilities and deaf women are empowered to protect themselves from abuse and discrimination and that public policies, programs, and funding reflect the stated value through legislation with impact and regulatory power.

We will be happy to expand on these points in any questions you have. We thank you for your time and for this opportunity. We ask that you use us and call on us as we work together for equality for all Canadians through addressing the issues of women with disabilities.

Thank you.

The Chair: Thank you, Ms. Brayton. I know that you took extraordinary measures to get here. We appreciate it.

Madam Boutin-Sweet.

[*Translation*]

Ms. Marjolaine Boutin-Sweet (Hochelaga, NDP): Thank you, ladies.

My question is for Ms. Bevilacqua and Ms. Brayton.

Other witnesses have told us that cases of abuse often go unreported. You also said that. And when they are reported, they do

not necessarily make it to court. But even when they are reported and heard by a judge, the problems do not go away. I have here a statistic saying that 49% of single elderly women live below the poverty line. They can report abuse over and over again, but they still need the resources to pay a lawyer.

The federal government used to help pay for legal aid, but in the 1990s, that funding was cut and eventually disappeared altogether.

I want to know whether you think the federal government should once again help pay for legal services.

Mrs. Vanessa Bevilacqua: Thank you for bringing that up, especially since it was the last item in my presentation and I ran out of time before I could get to it.

I don't know what the scales are in each province, but in Quebec, when someone receives the maximum Guaranteed Income Supplement benefit and is now able to reach the low-income cutoff level for Canada thanks to the top-up that was recently introduced, that person no longer qualifies for free legal aid because they have hit that threshold. Actually, people can access legal aid through a contribution that can be as much as \$800. People don't have that kind of money. When your income is \$1,100 a month, you pay for your rent, your medication and the necessities, but you don't go out and you certainly can't afford to see a lawyer.

Even when people call us to report a situation, we tell them they need to see a lawyer. In some areas of the law, it is not enough just to file a complaint with police; you really have to go through a lawyer to assert your rights. But these people cannot even do that.

Thank you for your question. You raised an excellent point.

● (1605)

Ms. Bonnie Brayton: The poorest women in Canada are those with disabilities. We are talking about women whose annual income is sometimes less than \$10,000. When it comes to legal aid access, there are certainly major barriers for women with disabilities.

Take, for example, a woman in Nova Scotia who called me because she was being abused by her spouse. She was an older woman. She had tried contacting the legal aid service in Nova Scotia but was told that she had to go to the office in person to file a complaint. The woman was alone and lived in the country. She was completely dependent on her husband, who would not let her eat or receive any personal care. I could spend the whole day listing off examples of women in similar situations.

Ms. Marjolaine Boutin-Sweet: Thank you.

I am now going to hand the floor over to my colleague, Ms. Freeman.

Ms. Mylène Freeman (Argenteuil—Papineau—Mirabel, NDP): Thank you.

Ms. Bevilacqua, I want to pick up on a question Ms. Young asked you.

The NDP is trying to introduce a new benefit for informal caregivers to help low-income families caring for an elderly family member bear the cost of life's daily necessities.

Would that kind of thing help?

Mrs. Vanessa Bevilacqua: There is no doubt that receiving a monthly benefit is a much more tangible form of assistance; receiving a tax credit a year down the road doesn't help all that much, especially for people who don't pay any taxes anyway.

In some cases, working women take care of an elderly person, but when that person suffers from Alzheimer's or dementia, for instance, these women can no longer work at all. Some people opt to stay home so they do not have to put their parent or relative in a nursing home, and obviously their income drops. Clearly, a benefit would be better suited to their needs.

Ms. Mylène Freeman: Thank you.

[*English*]

Ms. Brayton, I have a question for you. We hear again and again in this study that housing and poverty are major issues for women, for older women, and for women who are facing violence. Can you speak specifically about the condition of poverty in which many disabled women may find themselves?

Also, can you make a couple of concrete recommendations to the government about how we could target poverty among disabled women and elderly women?

Ms. Bonnie Brayton: There are big systemic problems and there are already recommendations in place with respect to these.

"End Exclusion" is a well-known activity that takes place here in Ottawa. It was last held just a few weeks ago. End Exclusion has been looking exclusively at the issue of poverty and people with disabilities. As I said earlier to your colleague on the panel, women with disabilities and deaf women are the poorest people in this country. Senior women with disabilities and deaf women have absolutely one of the greatest risks of finding themselves alone and with very little means.

In terms of concrete recommendations regarding poverty, the most fundamental way this country is going to address poverty among people with disabilities is through changing from the approach we have now to one of full inclusion. Canada signed and ratified the Convention on the Rights of Persons with Disabilities two years ago, and we're no further along than we were when we signed. We've signed, but we haven't implemented. The convention clearly articulates Canada's obligations, and those are very clearly pointing to the issue, first and foremost, of social and economic inclusion of people with disabilities.

Ms. Mylène Freeman: That's perfect.

Thank you.

I'm going to pass this on quickly to my colleague, Ms. Brosseau.

The Chair: I'm sorry, but we'll have to go to the next round for that. We're out of time.

We'll go over to the government caucus, please.

Mrs. Susan Truppe (London North Centre, CPC): Thank you, Madam Chair.

We do appreciate both of you coming here today, as we're all here for one common cause, which is to end violence against elderly women.

This question is for Vanessa.

In your speech—and I'm reading the English one—you showed the economic gap between older men and women, and you talked about the first victims of a sick health care system. You talked about how there is not enough GIS and about how much money they're making, but our focus is actually on the abuse of elderly women, so I'm going to jump to page 4, which is the part that it pertains to.

You mentioned that the program was funded by the new horizons program and Status of Women. Could you elaborate on that? I really didn't get much information on that because you were focusing on the other stuff. Could you just elaborate on what exactly the funding was for in both of these and how it helped you?

• (1610)

[*Translation*]

Mrs. Vanessa Bevilacqua: I see the economic and health considerations as crucial, so that is why I talked about them. Women who are in good health and who have very good incomes are much less likely to suffer from abuse. In my view, you absolutely have to understand that before you can discuss abuse. As was also mentioned, able-bodied women are not the ones who are usually the victims of abuse, but rather people who are disabled or vulnerable. That is why I talked about income and health first.

Now let's discuss the two programs. As I explained earlier to Ms. Young, the program that Quebec put in place was a telephone help line. It does not qualify us for funding, but it was created so that any senior in Quebec could call and receive a referral to the health and social services system.

The new horizons for seniors program allowed us to establish Senior Aware, an awareness and information program designed to educate seniors on the various types of abuse and fraud, and make them aware of the necessary resources that are available if they are suffering from abuse or know someone who is. We have been receiving funding through new horizons for seniors for three years now, and we are renewing our application to extend our reach to informal caregivers and remote French-speaking communities that are cut off from the rest of the country.

[*English*]

Mrs. Susan Truppe: Great. Thank you.

I am going to pass the rest of my time to Madam O'Neill.

Mrs. Tilly O'Neill Gordon (Miramichi, CPC): Thank you.

Welcome. We are happy to have you with us today and we enjoyed your presentation.

As you are aware, our government certainly focuses on the work that is done by caregivers and how we can better help elders—men and women. We know this is something that our government considers very seriously.

I would like both of you to name some of the best shared practices that our government has put in place to make things easier. I can think of the GIS, for one, and I can also think of the new horizons program, which my colleague just mentioned. As well, in my own riding I hear talk about income splitting. These are things our government has put into practice that make things a little easier for our seniors. It's a very important practice, which we are happy to be a part of. I wonder if you could name some of the best shared practices that the Canadian government has put in place.

Ms. Bonnie Brayton: Thank you.

When I was addressing the committee earlier, I mentioned that we've been working with the Department of Justice and Status of Women Canada. I would certainly say that your colleagues who work in the national office at Status of Women Canada have been paying very close attention to the information we've been sharing with them over the last few months.

We've also had some very fulsome and excellent discussions with the justice department, particularly with Sue O'Sullivan and the victims of crime office. They've been doing an extraordinary job in terms of leadership on access to justice for victims. I think that's a key piece of this government's work, which DAWN Canada is quite happy to acknowledge is an important step forward.

People with disabilities have been victimized, and they're victimized over and over. This is the kind of oppression that might be hard for people to imagine. Many of the women I have talked to have been abused more than 20 times. They are victims of sexual assault, financial abuse—all types of abuse. There is a systemic problem, as I said before, and it's only going to be addressed if we take a big step forward in developing a national strategy. There is no other way to do this. There is no one good program. This is a large country. We have rural and we have urban.... When you talk about disability, you're talking about a huge range of different issues for different women. Women who have episodic and chronic illnesses experience violence as well.

I haven't talked specifically about different disabilities simply because we're a cross-disability organization, but the complexity of this work and the depth of the challenges are great. Having the government step forward to support the work we're doing with the Canadian Association for Community Living and with our other partners in the disability community and the women's community is a key way for us to be able to move this issue forward.

• (1615)

Mrs. Tilly O'Neill Gordon: I'm happy to hear you speak of the great cooperation your office is receiving from our office and from our government as well.

Do you have anything to add, Vanessa?

[Translation]

Mrs. Vanessa Bevilacqua: As you said and as I mentioned, thanks to the increase in the Guaranteed Income Supplement benefit, in other words, the top-up, seniors have been able to reach the low-

income cutoff. That is nothing to scoff at. In fact, that is wonderful. Consequently, we are not asking for an increase in the Guaranteed Income Supplement, but rather automatic enrolment for this benefit. It would not cost much to set up; all it would require is some cooperation between the levels of government so that everyone who qualifies can access the benefit.

One of your government's recent achievements that is quite worthy of praise, despite perhaps having less to do with abuse, involves experienced or older workers. It is important, in my view, to have a policy that reflects senior workers. In fact, female informal caregivers often have to divide their time between caring for their own children as well as their parents and going to work, if they do not want to end up living in total poverty.

[English]

Mrs. Tilly O'Neill Gordon: Do I have more time?

The Chair: Actually, you're pretty well finished.

We will go to Ms. Fry for seven minutes, please.

Hon. Hedy Fry (Vancouver Centre, Lib.): Thank you very much.

Excuse me if I can't speak very well; it's my allergies. It's the wrong time of the year for me. I sort of lose my voice and all of that.

You're suggesting, Ms. Brayton, a comprehensive national strategy. Having done a lot of work on senior abuse in my other life as a physician, I think that disabled women obviously carry three specific burdens: being a woman, being a senior, and being disabled. This makes it far more difficult for them than for other seniors. However, I would like to hear you tell me a little bit more about abuse and the fact that it's not only women who are living alone.

Senior women suffer abuse from three sources. The first is family: if they're living with a family who may abuse them financially by taking away their paycheque when they get it, their GIS, etc., and keep it, and who may verbally abuse them. They may benignly neglect them and quite often just basically give them really poor care. That's a form of psychological as well as physical abuse.

Then you have caregivers in seniors homes, where we hear there are many incidents of abuse by caregivers in seniors homes, especially if the senior person is disabled or has some neurological disorder and is unable to think or remember clearly.

Third is societal abuse, which I think I heard you talk about. It is that benign abuse of society that doesn't seem to really care about a particular group and, just by neglect, by lack of good public policy, etc., abuses certain groups of society.

If we looked at those three areas, and if we looked at the obvious housing, etc., what are the elements—just broad-based, you don't have to go into them in detail—of a national comprehensive strategy that would address prevention of seniors abuse?

There is also the issue of notification. Seniors, like most abused people, don't like to tell you they're abused because they're terrified of the abuser—that they might be abused a bit more or they'll get kicked out of wherever they are. How do we do notification? How do we find a way of ensuring that we prevent this kind of thing?

Also, how do we deal with the psychological effects of abuse? Obviously if you have physical abuse you can deal with the bruises, etc., but what about the psychological effects? There aren't very many mental health solutions for seniors. Can those fit into a five-part strategy? What would you see?

Ms. Bonnie Brayton: The strategy is based on many years of working with different communities. The Canadian Association of Community Living developed a safety audit tool for communities several years ago. It's very much based on the concept of identifying gaps at the community level. The process of identifying those gaps, however, has to be one that is through community engagement.

Hedy, when you're talking about how one addresses those different things and with whom, you have to involve the local police. You have to involve local community organizations and people with disabilities in the process. That's fundamentally where this starts: with the inclusion of people with disabilities in the process at the community level.

It's a national strategy, but it has to be drilled down into by going into each province, territory, and municipality. Initially we plan to do 13 locations across the country, some urban, and some rural. We certainly recognize the fact that it's not a one-size-fits-all kind of approach. Again, the audit tool that's been developed and will be transferred, if you will, from the application CACL had for people with intellectual disabilities to the broader community of people with disabilities is one that is really focused on inclusion of people with disabilities and inclusion of local actors in the community.

One of the things I face all the time is trying to get access to the violence against women sector, if you will. The violence against women sector is a sector, and we all know, especially here at the Status of Women, that there is a whole body of work and a whole bunch of organizations, people, and so on involved in this work.

• (1620)

Hon. Hedy Fry: This is the first step. What are the other elements of a national strategy that you see? For instance, will housing be one element of a national strategy? Would institutionalization be an element?

Ms. Bonnie Brayton: In the medium and long term, I would say absolutely yes. The first thing you have to do—and what we plan to do in the first phase—is identify where those gaps are, to concretize housing issues, to concretize the justice system issues, to take them from the place of recognizing that there's a problem to starting to work through the solutions.

One thing, for example, that would be an element of this work would be CACL working with the Department of Justice on the concept of informed consent and the right of a person with a disability to speak on their own behalf. This is a really key piece in the justice and legislative systems: recognizing that people with disabilities, women with disabilities, have the right to speak for themselves, that they are capable of identifying their own abuse.

Also, I will say that another really important piece of this is education. One thing I can tell you from working over the last five years on this file is that many women with disabilities are so used to abuse that they do not even recognize that they are victims of it. One of the first things we did, earlier this year, was run an ad campaign through *Abilities* magazine and at Women's Worlds 2011. That spoke to women with disabilities about helping them identify what abuse is and how they can seek resources and support.

There are many elements to the way this has to be done. I quite agree with you that we have to go through a process that starts with the audit process, engaging the community, identifying the gaps at that provincial or territorial level, and then going forward in the next phase of this work in starting to develop partnerships that begin to take this from something that's an abstract to real inclusion.

Fundamentally, to bring it back to the convention—I'm sorry to bring it back to that, but it's such a fundamental and important piece of legislation—people with disabilities need to be included in community. If they're included in community, there's a process that will allow them to identify how their needs can best be met. One of the things we must stop doing is assuming that we know how people with disabilities need protection. We need to work with them and we need to work with their families, with their caregivers, and with the government at every level.

Thank you.

Hon. Hedy Fry: Thank you.

Do I have any more time, Madam Chair?

The Chair: You only have nine seconds left.

Hon. Hedy Fry: That's okay. Thanks.

The Chair: We're very close to 4:30, and Ms. Brayton must leave at 4:30. I'll give you a choice: one very quick two-minute question and answer per caucus, or the opportunity for our guest to summarize or have a last word in regard to their information.

Ms. Roxanne James (Scarborough Centre, CPC): Excuse me—

The Chair: Yes?

Ms. Roxanne James: On a point of order, let me ask who the next person is in the rotation. I think I would like to request that we keep the regular rotation so that we have five minutes on this side, and if the one witness has to leave, then we can direct our questions to the second witness, who will still be here.

The Chair: This is a new round.

Ms. Roxanne James: So would it be seven minutes for our side...?

The Chair: No. Ms. Brayton needs to leave. So five minutes per caucus—

An hon. member: Yes.

The Chair: —and Ms. Brayton would have to leave then.

So what is your decision, please?

Mrs. Susan Truppe: I think we're next in the rotation with our five minutes, so we'll take our five minutes and that should pretty much take us right to 4:30 anyway.

Madam Bateman is next.

• (1625)

The Chair: Is that agreeable with the other two caucuses? No?

Ms. Mylène Freeman: No. There are two different rounds, so everybody gets seven minutes, then everybody gets five minutes.

An hon. member: Right, and we start for five—

Ms. Mylène Freeman: So now we're at the five minutes, and you guys are the only ones who are going to get five.

An hon. member: Right—

The Chair: Excuse me.

Madam Fry.

Hon. Hedy Fry: I just want to follow up on your suggestion. I think that when witnesses take a lot of time to come to visit with us—especially seeing that Ms. Brayton came and went on a train, taking up a lot of time—it would be really nice if we could accommodate our witness.

Mrs. Susan Truppe: We will be accommodating our witness.

Madam Chair, there are five minutes left in this round. It is another round that starts with this side of the table and we have five minutes left; it's seven, seven, seven, and seven, and then it starts with the five. It's our turn for the five. I don't even know why there's discussion.

An hon. member: There should be no discussion—

Mrs. Susan Truppe: We've accommodated the last two times, actually, when you weren't here.

An hon. member: Thank you so much—

The Chair: All right.

Ms. Boutin-Sweet.

An hon. member: [*Inaudible—Editor*]

[*Translation*]

Ms. Marjolaine Boutin-Sweet: Can I ask for a recorded division? I am asking.

[*English*]

The Chair: Excuse me. I'm sorry, Ms. Bateman.

I'm sorry. What did you want to vote on, Madam?

Mrs. Joy Smith (Kildonan—St. Paul, CPC): I have a point of order, Madam Chair. You do have to recognize a point of order—

The Chair: Yes.

Mrs. Joy Smith: You used to be on my committee.

Thanks, Madam Chair. The fact of the matter is that Ms. Freeman was totally right. There are two rounds: seven minutes on that side, five minutes on this side. All we have to do is start the five minutes on this side, starting with the government side, and we're good to go. Then Ms. Brayton can leave.

So let's just get going on it.

The Chair: Is that agreeable with the committee? You won't be able to—

An hon. member: It doesn't—

Mrs. Susan Truppe: That was done in the resolution at the first meeting.

Mrs. Joy Smith: There's a procedure, Madam Chair.

Ms. Susan Truppe: It's a procedure. It's not a votable thing.

Ms. Joyce Bateman (Winnipeg South Centre, CPC): Point of order—

The Chair: Just a moment, please—

Ms. Joyce Bateman: No, point of order—

The Chair: I'm conferring with the clerk. One moment, please.

Ms. Joyce Bateman: But on a point of order, neither the clerk, nor the chair, nor Madam Boutin-Sweet was here when this committee sat and determined exactly what the round was. We took pretty well two complete meetings to do that. Now, in fairness to the new chair, the new clerk, and the new members, it's not reasonable that you would know that, but time was invested by this committee.

The Chair: Thank you very much.

Would you just give me two minutes to talk to the clerk for clarification?

Ms. Joyce Bateman: Well, you only have two minutes, Madam Chair.

Mrs. Susan Truppe: Madam Chair, I have that in front of me, since no one here has it.

Ms. Mylène Freeman: I was here when we did this. The way it works is that there are rounds, right? We do seven, seven, seven, and seven minutes, and then after that it's five, five.... But we aren't going to get five, so we want to split it.

Voices: Oh, oh!

The Chair: Excuse me. I cannot hear. I would ask the indulgence of the committee so that I can confer with the clerk, please. Thank you very much.

All right. Thank you. In an effort to be fair and allow everyone a chance to have the witness of Ms. Brayton, I tried to suggest a compromise. Clearly that is not of interest to the committee—

Ms. Roxanne James: Point of order—

The Chair: —so we will proceed with the rotation. We have five minutes with the government caucus.

Ms. Roxanne James: Point of order.

The Chair: Yes, Ms. James.

Ms. Roxanne James: I don't think it's fair for you to say that you suggested a compromise when we decided in the first two meetings that we had to set the order of rotation and the number of minutes per rotation. You cannot sit in a committee and change that rotation on the fly or tell us who is to get what number of minutes. It goes by rotation. It should never be up for discussion, period.

So I'm sorry that you think you tried to suggest a compromise, but in all fairness I don't think you're in the position to suggest a compromise at all.

Thank you.

The Chair: Thank you very much, Ms. James.

I can see that my effort to be fair and accord everyone a chance is not acceptable.

We go to the government caucus for five minutes.

• (1630)

Ms. Joyce Bateman: Thank you so much.

It's my pleasure to have the opportunity to ask questions of both of you on work that clearly matters and that clearly is work that will make a difference. Thanks to both of you for the good work you do.

I just want to focus briefly.... Bonnie, you mentioned your work with Status of Women. Our government is very proud to fund Status of Women significantly. I'd love to get an explanation of exactly how —

[*Translation*]

Madam Clerk, a little quieter please.

[*English*]

Madame la greffière, less loud, please: I'm talking to a witness.

As a courtesy, I'd like my time adjusted by at least 30 seconds, because I've been trying to get your attention, and I think the translators could verify that.

An hon. member: That was two seconds—

Ms. Joyce Bateman: I don't think it was two seconds, but we can verify that.

Anyway, Bonnie, could you explain exactly your interactions with Status of Women? Also, could you explain your funding components? How are you funded? Is it directly with Status or...?

Ms. Bonnie Brayton: It's pretty skinny right now. We receive some funding from the Office for Disability Issues under the social development partnerships program, the SDPP-D.

I became executive director five years ago. When I did, DAWN Canada had been in service to Canadian women with disabilities for about 20 years, but my responsibility as the first national executive director was, first and foremost, to establish a national head office and a national strategy for addressing women with disabilities issues.

We had one seed grant from Status of Women at that time. That would have been in 2007. We did a project called "Bridging the Gaps". That project was to look at and update work that we had done quite a few years ago on access to shelters for women with disabilities and for deaf women. The result of that study was quite clear: nothing had changed significantly for women with disabilities. There were some updates—certainly, yes, there were more ramps at shelters—but in terms of the fundamental practice of inclusion, it wasn't there, and it still isn't there.

As I was saying when I was speaking to Dr. Fry, in terms of the violence against women sector, we're still at the outside of the sector.

DAWN has been working hard to develop paradigms for inclusion, including paradigms for inclusion in the women's sector. Women's Worlds 2011 was a wonderful example of that because DAWN was involved for two years in advance of Women's Worlds. As a consequence, two of the plenaries, 39 presenters, and several hundred women with disabilities participated. This was a first, a global first.

As I was going to say, certainly both the Office for Disability Issues and Status of Women had a huge impact on our ability to participate in that, because we were hired as consultants, which was an appropriate way for us to be involved, because we have an expertise. We have the ability to develop those paradigms and practices that can take us from a place where women with disabilities are on the outside. This committee is a wonderful example—

Ms. Joyce Bateman: What year was that?

Ms. Bonnie Brayton: It was in 2007.

Ms. Joyce Bateman: In 2007.

Ms. Bonnie Brayton: Yes, and Women's Worlds 2011 was of course held this summer here in Ottawa.

In terms of our interaction with Status of Women and where I was going with this, there has been access to funding for us, as there has for every women's organization over the last few years, through the community fund. We took the hard decision not to go after funding until we really had a solid strategic plan, which brings me back to what I've been talking about today. DAWN has been carefully building partnerships and relationships over the last few years with our partners in the disability sector and the women's sector because that's the only way we're going to see systemic changes: if we engage with government and with the people who really are on the ground and present for women with disabilities across this country.

This is the first application we've made since 2007 because we felt that our strategic mandate was to develop medium- and long-term plans, and not some quick fix, not "let's do a project and create a little tool here". It's really about long-term change and real inclusion for women with disabilities.

I will come back to Women's Worlds and what that represented. The fact is that DAWN Canada will be at the second World Conference of Women's Shelters in Washington, D.C., in March 2012. The subject of my abstract is precisely that: breaking down the barriers between the disability sector and the violence against women sector so that we are finally and completely part of the sector.

One in five Canadian women is a woman with a disability—one in five. The World Health Organization and the World Bank released a report in July 2011, the first report done on disability over the last 20 years, and that report—and I can certainly send it to anyone on the committee who's interested—reveals that there are more than one billion people with disabilities on the planet. If you remember the seven billion we've been talking about recently, this means one in seven people on the planet, and more than half of those people are women.

In this country and around the world, we are the largest minority in the world. I hope it stays with you after I leave and take my train. We're the largest minority in this country because we're inside every population you look at. If you look at aboriginal women, immigrant women, white women, black women, or any women in this country, you're looking at women who face disability. You're looking at women who will age into disability.

To come back to the question of elder abuse, this is not something that's going to get better. It's going to get worse. That is why it's really important for all of you to remember that when you go forward in your work for the government you support every initiative that will bring about better housing and better economic, social, and health inclusion for women with disabilities in this country, because they are the most overlooked, most forgotten women in this country.

• (1635)

Ms. Joyce Bateman: Thank you very much.

In your details—

The Chair: Excuse me. I'm sorry. I have given you more than your time.

Ms. Brayton, I am very aware that you have a train to catch. Please feel free to stay or go as it meets your needs and suits your schedule. If I don't have an opportunity again to say so, thank you very much for your generous contribution.

Now we'll go over to the NDP caucus for five minutes.

Ms. Bonnie Brayton: I just wanted to point out that I've also brought to the committee a fact sheet about violence against women with disabilities. I have 20 copies here in French and in English. I would really encourage everybody here to take this, tuck it in your files, and remember us. Every time you come here and every time you have an issue, you should invite me to speak, because every time you listen to any issue on women, you need to hear from women with disabilities and deaf women.

Thank you.

The Chair: Thank you very much.

My sincere apologies to the NDP caucus and to Ms. Fry. I deeply regret that you did not have the opportunity to ask your questions. Please accept my apologies.

Ms. Roxanne James: On a point of order again, Madam Chair—

The Chair: Yes.

Ms. Roxanne James: —I'm not sure what you're apologizing for, because in all reality this was all discussed in the first committee meetings as to who would go first and what rounds. I'm not sure whether you need—

Please don't cut me off. I would really appreciate it if you would listen.

In all fairness, I think for you to apologize to the NDP and the Liberal because they didn't get another opportunity to speak is like saying that we all have to have equal opportunity to speak, and that's not the case when we have rotations. We could have three or four guests up here that may take longer, with not the correct percentage of Conservatives getting an opportunity to speak. It's the rotation; it's based on the percentages of the number of seats in the House. I think for you to sit in this committee and publicly announce an apology to the NDP and the one Liberal member is really an atrocity to this committee, and I think you should be apologizing to the Conservative side.

Thank you.

The Chair: I'm sorry, but I saw that as a matter of good manners.

Yes, we do have a rotation, and the rotation is very clear that each caucus gets a certain amount of time.

My apologies were extended to the witnesses because we kept them beyond the time that they had indicated they would be here.

So again, I apologize to the witnesses for inconveniencing you and thank you for the time you've spent here.

Let's suspend, please, so we can go in camera.

[*Proceedings continue in camera*]

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