Legislative Assembly of Ontario



Assemblée législative de l'Ontario

Official Report of Debates (Hansard)

Journal des débats (Hansard)

F-25 F-25

Standing Committee on Finance and Economic Affairs

Comité permanent des finances et des affaires économiques

Pre-budget consultations

Consultations prébudgétaires

1st Session 42nd Parliament Tuesday 21 January 2020 1^{re} session 42^e législature

Mardi 21 janvier 2020

Chair: Amarjot Sandhu Clerk: Julia Douglas

Président : Amarjot Sandhu Greffière : Julia Douglas

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Service du Journal des débats et de l'interprétation Salle 500, aile ouest, Édifice du Parlement 111, rue Wellesley ouest, Queen's Park Toronto ON M7A 1A2 Téléphone, 416-325-7400; télécopieur, 416-325-7430 Publié par l'Assemblée législative de l'Ontario

CONTENTS

Tuesday 21 January 2020

Pre-budget consultationsF-10)33
Poverty Free Thunder BayF-10 Mr. Joshua Hewitt)33
Lakehead UniversityF-10 Dr. Moira McPherson Dr. Heather Murchison)35
Ms. Robyn BuntingF-10)37
Ms. Tracey Allison MacKinnonF-10)40
Children's Centre Thunder BayF-10 Ms. Diane Walker Ms. Terri Lynn Fucile)42
Kinna-aweya Legal ClinicF-10 Ms. Sally Colquhoun)44
Thunder Bay Chamber of CommerceF-10 Ms. Charla Robinson)47
Thunder Bay ECE UniteF-10 Ms. Lori Huston	
Lakehead District School BoardF-10 Ms. Ellen Chambers Ms. Sue Doughty-Smith)52
Matawa Chiefs CouncilF-10 Chief Cornelius Wabasse Chief Harvey Yesno	
Confederation CollegeF-10 Mr. Neil Cooke Ms. Michelle Salo	
Thunder Bay Health CoalitionF-10 Mr. Jules Tupker)59
Mr. Jon PowersF-10)62
Thunder Bay District Health UnitF-10 Mr. Jim Vezina Dr. Janet DeMille	
Neskantaga First NationF-10 Chief Christopher Moonias	
Ontario Association of Children's Aid Societies)67
Ontario Human Rights CommissionF-10 Ms. Renu Mandhane)70
Thunder Bay and District Injured Workers Support GroupF-10 Mr. Steve Mantis)72
Alzheimer Society of OntarioF-10 Mr. Ted Davis Mr. Kyle Fitzgerald)74

Canadian Cancer Society, Ontario division	F-1076
Ms. Helena Sonea	
Mr. Stephen Piazza	
Wasaya Airways	F-1079
Mr. Tom Morris	
Mr. Donavon Macklin	
Mr. Derrick Flynn	
Faye Peterson House	F-1082
Ms. Debbie Zweep	
City of Thunder Bay	F-1084
Ms. Shelby Ch'ng	

LEGISLATIVE ASSEMBLY OF ONTARIO

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

STANDING COMMITTEE ON FINANCE AND ECONOMIC AFFAIRS

Tuesday 21 January 2020

COMITÉ PERMANENT DES FINANCES ET DES AFFAIRES ÉCONOMIQUES

Mardi 21 janvier 2020

The committee met at 0902 in the Valhalla Inn, Thunder Bay.

PRE-BUDGET CONSULTATIONS

The Chair (Mr. Amarjot Sandhu): Good morning, everyone. Welcome to the Standing Committee on Finance and Economic Affairs. We are meeting today in Thunder Bay for the purpose of pre-budget consultations. Each witness will receive up to seven minutes for his or her presentation, followed by eight minutes of questioning from the committee, divided equally amongst the recognized parties.

Are there any questions before we begin? MPP Judith. Ms. Judith Monteith-Farrell: I'd like to move unanimous consent to have the city of Thunder Bay present after the proceedings, at the last slot, because they had a problem.

The Chair (Mr. Amarjot Sandhu): Is there agreement? Agreed.

Ms. Judith Monteith-Farrell: Thank you.

POVERTY FREE THUNDER BAY

The Chair (Mr. Amarjot Sandhu): Now I would like to call upon the first presenter, from Poverty Free Thunder Bay. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Mr. Joshua Hewitt: Hello. My name is Joshua Hewitt. I want to thank you all for having me here today. I'm a proud resident of the city of Thunder Bay and a founder of StandUp4CleanUp, for which I recently received a 2020 Northwestern Ontario Visionary Award in the category of civic pride.

I want to recognize that we're situated on the traditional territories of the Fort William First Nation and a gathering place of the Métis people under the Robinson Superior Treaty.

Today, I bring forward an issue that I understand will not be resolved in just one sitting, but through established actions. I hope our future governments and their prospective budgets will work to ensure that not only are human and environmental concerns actually addressed, but that our people are heard, our voices validated.

I would like to present a 10-point list on what I believe to be the most positive and beneficial impacts that could be fostered through the implementation of a universal basic income program. This I speak on from experience as a recent recipient of the Ontario basic income that was recently cancelled by Doug Ford when he came to power.

(1) I'll start with what has been commonly identified as a form of structured violence in various scientific studies—more particularly in Johan Galtung's work Violence, Peace, and Peace Research—and that's poverty.

Referencing my personal income variances, I'd like to state that being on Ontario Works and current assistance programs—as an individual on Ontario Works, I made \$933. I understand that the average for an ODSP recipient is somewhere around \$1,000 to \$1,100.

Receiving basic income allowed a lot of freedom and independence financially, allowing me an income of up to \$1,800 a month, which is significant, ultimately lifting me above the poverty bracket and into an acceptable income bracket. It also alleviated symptoms from the broken welfare system.

(2) Reducing food insecurity: It gives people the purchasing power to be able to have conscientious decisions about what they're consuming. I was able to shop more locally and, by shopping locally, empower the local economy itself.

Having proper nutrition is really important, as we all are aware. Malnutrition is very prominent, especially in northern communities.

- (3) Housing security: Having a better place to live ultimately leads to making better decisions and to sustaining that place, making your home more livable, being able to always pay rent. Housing security ultimately revolves around the ability to have a safe place to stay at all times, and to base your life around.
- (4) Reduced recidivism: People transitioning both from the prison system and through homelessness and addictions have difficulty reintegrating into society. But with a basic income pilot program, people would have a financial backbone on which to build their life around.
- (5) Encouraging entrepreneurship: As a young individual, the effects could be seen in my example of founding StandUp4CleanUp, which is an organization around Thunder Bay that performs a series of community cleanups, trash crafting and upcycling activities that engage people in civic pride and taking ownership over the waste issue. This came to be because I had the financial resources to sustain myself in my activities in the community.

I'd also like to point out a young musician in the community, Benjamin Lazarus Murray, who has founded a

youth centre in the hopes of fostering creative skill sets for young individuals, particularly Indigenous youth.

It allows us to have the freedom to invest in our businesses without the financial restrictions that would have been imposed before.

- (6) Pursuing higher education: Having the financial freedom allows people to invest in themselves, ultimately. It allows us time to go to school, time for extra employment opportunities and skills training.
- (7) Investments in personal health: access to betterquality foods, access to healthier activities, sports, recreation, gym, and social services as well, such as dental care and mental health and addictions counselling.
- (8) Avoiding stigmas: As we've commonly heard as basic income recipients, "You just didn't work hard enough"—so the—judgments and penalties from broken systems like OW and ODSP "Look and act and feel better."

Income discrimination, a.k.a. classism: I feel that basic income is one of the primary forms in which we can address classism as a systemic form of oppression.

(9) Empowering artists, artisans and musicians: Freedom from financial restrictions allows people to pursue their creative passions in the community, generating cultural content, fostering collaborative spaces and social change.

Once again, I'd like to reference the young artist Benjamin Murray. He was nominated for a Juno award. He has recently been assigned to the United Nations as a liaison for First Nations youth here in Thunder Bay.

(10) My last point is the abolition of means-testing, a vigorous set of standards that finds a lot of people—

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Joshua Hewitt: Sorry?

The Chair (Mr. Amarjot Sandhu): You have one minute left for your presentation.

Mr. Joshua Hewitt: Yes—a vigorous set of standards that keeps people from ascertaining valuable employment. I think it's actually called work disincentive. Often, what it leads to is people finding their support systems as a part-time job—maintaining their support systems is a part-time job for individuals. Should we make more, often we are decreased in the amount of benefits that we're allowed to have. With job security in Thunder Bay not quite what it was in 2013, when our lumber industry collapsed, employment is quite precarious. So it's very difficult for individuals to battle with the social assistance system in the current state.

That's my list, and with that, I'd ask that you consider in the future a universal basic income program for all. Thank you. Meegwetch.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll move to the opposition side for questioning. MPP Shaw.

Ms. Sandy Shaw: Thank you very much for your presentation, Joshua. I support your 10 good reasons why we were piloting a basic income here in Ontario.

I will also share with you that I'm the MPP for Hamilton West-Ancaster-Dundas, and Hamilton was also

a community that was going through the Basic Income Pilot project. Despite the promise of this government that they would continue to keep that going, it was cancelled, and I think it was short-sighted, as you've described here.

I've heard from many constituents. One young woman in my constituency shared with me that, on a promise of four years of basic income, she had quit her job and gone back to community college to finish her degree in—I can't remember what it was; I'll remember in a minute. She was trying to, as you say, further her education by doing this. When the Basic Income Pilot project was cancelled, she said, "Not only can I not get my job back, I don't have a job; I'm not sure that I can get my tuition back." She was really left in worse circumstances than before she started. So that whole idea of "do no harm" didn't apply in this case.

You shared some stories, but can you share with us any of the additional instances where people who were making changes and decisions in their lives based on the promise of a four-year pilot ended up in circumstances worse off than they started with?

Mr. Joshua Hewitt: Certainly. Let's talk about the young musician I mentioned earlier, Benjamin Murray. This individual has two kids at home, a family, and is trying to maintain a home while being a young entrepreneur and an artist. During the course of the Basic Income Pilot, the family decided to finance a new vehicle—I believe it was at a 38% interest rate, which is substantially high. During the course of the year, the Basic Income Pilot was cancelled, leaving them in a situation of "What do we do with a vehicle we can't afford?" It was \$18,000, but by the end of the 38% interest rate, it was \$34,000.

As you said yourself, people left jobs in order to focus on advancement opportunities. I was working a full-time job and a part-time job. I left my full-time job to work a part-time job and start my own business. I had to do that because I didn't have the time and the freedom to pursue my passions. During the course of the Basic Income Pilot, when the cancellation came about—I lost my income in March, last year—it put a significant damper on the activities that I was able to do in the community, the amount I was able to commit to my organization as I previously did before, and the amount of time that I had versus working to sustain myself.

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Sandy Shaw: You're probably aware that this is not something that we just thought up in Ontario, and that there are researchers around the world who see much promise in pursuing a basic income pilot strategy to lift people out of poverty and to break the cycle, as you said, of some of these systems that are full of judgment and penalties and don't allow people to get ahead.

We had a conference in Hamilton on the Basic Income Pilot. People from around the world—from Scotland, from Australia—came to talk about the things they had done with basic income in their countries and the benefits that they continue to see.

It wasn't just in Hamilton; this is a worldwide initiative. Were you aware of that, as well?

Mr. Joshua Hewitt: Absolutely. In Scandinavian countries, they're already spearheading the charge on basic income and social reform.

And as I mentioned earlier, poverty is a form of structured violence. If we're going to do anything about poverty, it means that—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. We'll have to move to the government side now. MPP Skelly.

Ms. Donna Skelly: Good morning, sir. Like my colleague across the floor, I too am from the Hamilton area. My riding is Flamborough–Glanbrook.

I was actually supportive of our government when we cancelled the Basic Income Pilot project not only in Hamilton but across the province. I'm not sure that you're aware of the true cost of fully implementing a basic income project across Ontario. It would have been \$17 billion annually, which is a number that is simply unsustainable.

We started meeting with stakeholders in these discussions. Last Friday was our first day. To date, we have an additional ask with the stakeholders who have presented, not including anything that's going on in our education discussions—about \$3.6 billion in additional annual asks. Consistently, stakeholders feel that that can come through increased taxes borne by our business community, who then present and say, "We can't do it. We can't absorb this type of a tax increase, and if it's large enough, we will simply go south of the border. Their tax incentives are far greater. They have far more perks," which would mean we start losing jobs.

One of the other messages that we have heard, not just this year but last year, in almost any committee that deals with a person, a company or even someone in the health care sector: We are facing a crisis when it comes to finding workers. We do not have enough skilled workers; we do not have enough unskilled workers. One of the reasons I believe our government made the right decision is because, in many cases, and you mentioned that you have and we would certainly encourage anyone to pursue their dreams, whether it's in arts, or whatever. But there is also this crisis brewing, of not having enough people in the workforce. Do you see that there is an opportunity for people such as yourself-you're articulate, you're passionate, you're well-spoken and well-researched-to perhaps look into some of these areas where there is massive underemployment?

Mr. Joshua Hewitt: I think that, in a personal reference, I shouldn't have to compromise my own passions and my own opportunities to go with the grain, per se. I think in the case of Thunder Bay in particular—while it may be fine to say that jobs are the solution in southern Ontario, in northwestern Ontario, we don't really have a large job market.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Joshua Hewitt: We also have an aging population. One of the things that we need to do is bring young people to Thunder Bay. Right now, we don't have the industries or the jobs to do that. I, myself, love living in Thunder Bay, and I'm not willing to move anywhere to—

Ms. Donna Skelly: I agree, and I'm not asking—sorry; I don't mean to interrupt. It's just time, truly.

I hope you stay for the remainder of the presentations. You may not have the opportunity, but I can guarantee you will hear from stakeholders that we don't have enough PSWs. We don't have enough truck drivers. We don't have enough skilled workers. We heard this just up in Sioux Lookout.

Mr. Joshua Hewitt: But maybe it's just because they don't have the time and the access to the resources to pursue those passions.

Ms. Donna Skelly: And the training: A lot of these stakeholders are willing to train. In the trucking industry, there is a huge shortage of truck drivers in northern Ontario—

The Chair (Mr. Amarjot Sandhu): Thank you. Sorry to cut you off. That concludes our time. Thank you so much for your presentation.

LAKEHEAD UNIVERSITY

The Chair (Mr. Amarjot Sandhu): Next, I will call on Lakehead University. Please come forward.

Please state your name for the record, and you have seven minutes for your presentation.

Dr. Moira McPherson: I'm Moira McPherson. I'm the president and vice-chancellor of Lakehead University. Good morning, Mr. Chair and members of the standing committee.

I've served in this role, as president and vicechancellor, since January 2018. I've been with the university in a variety of capacities for over 30 years. Working at Lakehead has provided me a unique perspective and appreciation for the vibrant and diverse communities in our region.

0920

Thunder Bay is the gateway to the region, and Lakehead University is core to fulfilling the vast potential of northwestern Ontario. In 2019, Lakehead University contributed over \$1.4 billion to Ontario's GDP, with almost \$1 billion of that impacting the city of Thunder Bay alone.

Lakehead places an emphasis on accessibility, a commitment to Indigenous learners and the delivery of a comprehensive array of programs.

For the fifth consecutive year, Research Infosource has named Lakehead the number one research university in Canada in our category. Our total research funding has increased 143%, which speaks to the quality of our researchers and our growing industry partnerships.

Maclean's University Rankings place us second in Ontario in the undergraduate category, and the Times Higher Education's rankings place Lakehead in the top half of global universities.

We've been recognized as one of the province's equityof-access powerhouses due to the university's commitment to serving a greater proportion of under-represented student groups. Some 95% of our students face barriers to accessing post-secondary education: 44% of our students are the first in their family to go to university; and 14% of our students self-identify as Indigenous; some 56% of these students are from northern communities. We had over 1,800 international students enrolled at our campuses this past fall, a 22% increase from the previous year. We also have one of the highest graduation rates among Ontario's universities.

Graduates from Lakehead's core programs, in fields such as forestry, geology and resource management, experience a 100% employment rate. We are a university that provides a transformative experience and a better future for our students, evidenced by our outstanding and successful graduates.

At Lakehead, we are constantly seeking to partner with all levels of government. Today, I am seeking your support for an important initiative at Lakehead University.

The Gichi Kendaasiwin project is being undertaken to provide critically needed community and cultural infrastructure for Thunder Bay and northwestern Ontario. We have submitted our project to the Ministry of Infrastructure's Investing in Canada Infrastructure Program: Community, Culture and Recreation. Located in the heart of the campus, this facility will be a community destination that will be an expression of Indigenous culture, a centre focused on reconciliation in the land of the Anishinaabe. The centre will provide multi-faceted programming. It will be available for public gatherings, hosting exhibits and serve as a repository for historical documents, artifacts and Indigenous oral histories.

The centre is a signature project that will transform learning and grow a mobile, skilled workforce that meets labour market demands. It will ensure the development of the skills necessary to participate in regional economic opportunities.

By providing greater access and outreach to rural and remote communities via our immersive technology spaces, an entire world of possibilities will be expanded for lifelong learners, businesses and communities.

Lakehead's industry connector Gateway will be strategically placed to serve economic development agencies such as the Ontario First Nations Economic Developers Association, the Canadian Council for Aboriginal Business and the Nishnawbe Aski Development Fund, to name just a few. Through these partnerships, Lakehead will identify sector-specific needs that will result in timely industry-specific programming and training.

Lakehead University is also committed to continuing to advance the Truth and Reconciliation Commission's Calls to Action, acknowledging that education is key to reconciliation and to the creation of a culture of understanding across communities that will support a more equitable and inclusive future for Indigenous people.

The centre will help foster greater awareness of Indigenous perspectives, cultures and histories. This project has been developed with the guidance of the university's Ogimaawin governance council, along with Indigenous and other community organizations. We are very proud that this application includes many letters of support, including from Anishinabek Nation, Anishinabek Employment and Training Services, Fort William First Nation, Matawa First Nations Management, Seven Generations, Thunder Bay Regional Health Sciences Centre, and many more.

Mr. Chair and committee members, my reason for being here today is to request that you recommend to the Minister of Finance that the government support this project and prioritize it through the Investing in Canada Infrastructure Program.

The successful realization of this project will impact over 230,000 residents, across half a million square kilometres of land, by creating a central community hub to bring together Indigenous and non-Indigenous people, learners, and to advance reconciliation to support improved social and economic outcomes in our region.

Merci. Meegwetch. Thank you very much for your time. We're looking forward to answering questions.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll go to the government side this time for questioning. MPP Piccini.

Mr. David Piccini: Thank you, President McPherson, for being here this morning and for this presentation and, of course, for the work that you do, training our next generation. I know it's so important. I've enjoyed getting to know you and the wonderful work Lakehead is doing, over the past year plus.

You spoke to the centre on industry-specific programs and training. You know that one of the focuses of the government, with the refresh of strategic mandate agreement 3—and a real intent of the government is to tackle the problem of jobs without people, people without jobs. There was an excellent report at the Toronto board of trade on that. I know you're well versed and well positioned here—I don't know if I should say this—probably more so than many, to position our next generation into the jobs of the future.

So speak to me a bit about the work you are doing, and the role that the centre will play, in connecting our next generation with the fundamental skill sets and competencies they need to enter a career.

Dr. Moira McPherson: Absolutely, and I'll answer that. I have my colleague here who is our strategic adviser, and she'll also be chiming in on some answers.

I'll start by saying, first of all, Lakehead University offers their students in the undergraduate programs—in every undergraduate program, every student receives an experiential learning opportunity. Along with those opportunities are many opportunities for work-integrated learning. One example would be our new RBC work-integrated learning initiative, that places our business students into small and medium-sized businesses, to provide them with an opportunity to develop the skills and the employability—the skills and experiences that will connect them to that job post-graduation.

Along with our work-integrated learning opportunities, we also have entrepreneurship development programs. We have a centre for ingenuity that actually prepares our students to go and to be entrepreneurs and to be those individuals who are creating more jobs in our community.

I would also like to say and reinforce that graduates from many of our programs have a higher-than-95% employment rate, and that's because of the work that we do during their programs to connect them to those jobs immediately upon graduation.

Mr. David Piccini: What do you think of the government's push to ensure that we are really preparing our next generation to enter into the workforce and to find a meaningful career? I know our next generation is predicted to have upwards, at times, of 10 jobs in a career, so having those opportunities for experiential learning at the younger age—I can't, on a personal note, overstate how important that is.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. David Piccini: So what do you think of the government's push to ensure more experiential learning and outcomes-based results?

Dr. Moira McPherson: I think it's critical. Something we've been doing at our university, I want to say for about 12 years, is gradually growing those opportunities for our students. We know that our students not only have to learn their discipline content; they need to be able to step out of those programs and immediately find employment, because that serves our priority of being a university not only with a commitment to our community, a commitment to the province, but a commitment to our region. We need to be able to prepare these students to move on and meet the objectives that are so important for both of the regions we serve.

0930

Mr. David Piccini: And lastly, the community effect piece—I think you just spoke to it—within SMA3?

Dr. Moira McPherson: Yes, absolutely—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. We have to move to the opposition side now. MPP Arthur.

Mr. Ian Arthur: Good morning. Thank you so much for your presentation. I was struck by how high, when you were talking about the barriers and what your student demographics are—would you just elaborate on that a little bit? What are some of the barriers those students are facing, and how has Lakehead worked with those students to make sure they can get access to education?

The Chair (Mr. Amarjot Sandhu): Can you please state your name for the record?

Dr. Heather Murchison: My name is Heather Murchison.

We've done quite a bit of analysis on this, because there was a Higher Education Quality Council of Ontario report a couple of years ago that looked at differentiation across the university sector and identified Lakehead University as one of the equity powerhouses in the province. We've looked at our student population, and our domestic undergraduate student population faces extensive barriers to accessing post-secondary education. Over 95% of our undergraduate students face at least one barrier, such as financial barriers; coming from a rural and remote community—for example, if you're coming to a centre such as Thunder Bay, it could be the first time that you're ever coming into an urban centre—and then into an education

environment is another perceived barrier, if you're coming from a family that, for example, doesn't have experience with post-secondary education, if those students are the first in their family—and in many cases with our student body, the first in their community—to go on to university.

So the barriers that we've looked at include financial need, first-generation students, students from rural and remote communities, and then other known barriers to accessing education.

Mr. Ian Arthur: How has Lakehead adapted for that? What does that mean for your university?

Dr. Moira McPherson: We take many steps. First of all, we have extensive student supports that are in place for all of our students—I would say, perhaps, a greater breadth and depth of student supports that we provide our learners—but not only that; we provide all sorts of opportunities for pathways into the university. We provide access programming. We provide something called our Gateway Program, which prepares students to better make that transition throughout the first year into their discipline program. Of course, we have extensive financial aid packages—probably one of the highest—in the university for students, and many health and wellness supports as well

Mr. Ian Arthur: That's really interesting.

The Chair (Mr. Amarjot Sandhu): MPP Monteith-Farrell.

Ms. Judith Monteith-Farrell: Thank you for your presentation. I'm a big fan of Lakehead's, as you know.

Could you elaborate a bit on how the new centre, if built, would support the professional activities of the nursing school, the medical school and the law school?

Dr. Moira McPherson: I'll start, and then I'll pass it to my colleagues.

There are many components to this new centre. First and foremost, it's a place where Indigenous people in our community, in our region, learners of all ages, will see themselves reflected on this campus, in this city—the only university in an 800-kilometre radius.

Along with those components, we also have many different supports that will be in place for different types of learners—not only traditional students coming into the university, into a four-year degree program; but also students who are wanting to stay in their community, perhaps to take their first year of nursing courses that will allow them to be able to serve in their community. For example, we're currently partnering with Seven Generations—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. That concludes our time. Thank you so much for your presentation.

Dr. Moira McPherson: Thank you to all of the committee. Merci. Meegwetch.

MS. ROBYN BUNTING

The Chair (Mr. Amarjot Sandhu): Next I would like to call upon Robyn Bunting. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Ms. Robyn Bunting: Good morning. My name is Robyn Bunting. I'm from Constance Lake First Nation, and I am located in northeastern Ontario. I'm about 36 kilometres away from Hearst.

I started working in the child welfare system when I was 19 years old; it's been almost 20 years. I've answered phone calls, completed investigations alongside the police, sat in hospitals with children who were hurt. I've done it all, to the very best of my capability. I've given 100% in everything that I do because nothing to me is more important than that broken child. I've worked all over the north and in different regions, all in the hopes that I could help our people, that I could help them see who they are in hopes that they will one day feel that spirit inside of them, that one that was broken long ago. It's not broken because it is their fault; it is broken because of who they were born as, because they were born a First Nations person.

So I go to them, into their homes and into their communities and I tell them it will get easier and to hold on just a little bit longer; then I go home and I pray that they will hold on. I pray that that child does not give up. I pray for strength for him and her. I've been praying and hoping for almost 20 years. It's getting harder and harder, but I'll continue to pray and to hope that they will see it will get better. But will it?

I can see—I always see it and I hear it every time I meet and talk to people, ministry people—the inhales and exhales and the expressions on their faces where I can see and I can read that they're saying, "Oh no, not this again," or, "It can't be that bad." I wish it wasn't so.

Whether you are young or old, every day is a struggle when you live in our communities. You are not living; you're surviving. We don't know how to live. We don't know who we are; that was lost generations ago. This was lost when the systems were forced upon us, so here we are in 2020, and barely alive, because we can't see tomorrow. We go to bed at night crying and praying, "Please don't take any more."

This is not life. You must be wondering, "Why don't you just go get help?" Where? In our communities, we don't have mental health workers. We don't have counsellors, psychologists, psychiatrists. We don't have anything there. We're forced to live in the boundaries that were set for us, forced to live in systems that were meant to break us, forced to live in systems that are not us, and decades later, we are still here, but we are dying. Our sons and our daughters are dying. They are killing each other. They are killing themselves. They are choosing death over the life they were given, and nobody is there to help them.

I'm not exaggerating. I only speak the truth. It's hard for me to be here today. It's scary, because I only know pain; I only know disappointment. I know I'm just another First Nation person asking for something that I can't have, something that I don't deserve. I have very little hope that I will be respected and honoured, but it's with that little bit of hope that I'm able to stand here today. I'm standing here for my people, for our children. I have to try.

On November 27, 2019, my niece hung herself. She hung herself in a closet in the basement of her home in

Constance Lake First Nation. My niece died as a result of suicide. She was 13 years old. My baby sister, her mother, had taken her to the hospital weeks before because my niece slit her wrists in another suicide attempt. The hospital then wiped their hands clean by following a protocol and referring her to a mainstream mental health agency. That mainstream mental health agency then referred her to child protection services because she was under the age of 16. That child protection agency then referred her to an onreserve mental health service, a service that is not there, a service that has never been there. Then myself, as a band representative—I am responsible, too. I am a strong advocate and I speak for children who cannot speak. I've dedicated my whole life to speaking and helping children. I have given my life for people I don't even know, for children I have never met.

0940

But because she was my niece, I was considered a conflict of interest. Because of this legality—which, again, isn't a First Nations law—they protected the agencies and the people involved and they did not feel the need to ask me or my family what we should do to help my sister or my niece. She was asking for help.

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Robyn Bunting: She was crying for help and I couldn't see. A lot of people are responsible for my niece's death: the health care system, the child welfare system, the non-existent mental health system and the colonized First Nations.

I'm just going to go right down to what I want—

Ms. Sandy Shaw: You can use some of our time.

Ms. Robyn Bunting: Sorry?

Ms. Sandy Shaw: You can use some of our time.

Ms. Robyn Bunting: Oh, okay.

I always hear the proud phrase, "It takes a community to raise a child." It also takes a community to kill a child. These systems are set up to help First Nations children kill themselves, and everyone who knows what is happening or what has happened has a piece of paper, a suicide protocol, that rids them of any responsibility. These systems are killing First Nations children every day. This is a reality. This is a proven fact.

Look at the tribunal orders. It states there clearly that Canada is found guilty of discriminating against First Nations children. Ontario is a part of Canada. Ontario is a signatory to Treaty 9. You are guilty too.

The Chair (Mr. Amarjot Sandhu): Thank you. That's the end of your time, but I understand that the opposition has allotted their time to you, so please continue.

Ms. Robyn Bunting: We need to continue with a suicide strategy that is going to help our children, a solution that will help our children see life and not despair. We can't continue to point fingers at each other; we have to work together. We will continue to see the fatal effects of these mainstream systems because our communities do not have the resources or the capacity to protect our lives.

Ontario should ensure that First Nations have a longterm commitment to investment into a suicide strategy. This support will address the suicide epidemic among First Nations children and their community. Thank you, but first, before I go, I want to acknowledge my sister—I don't know where she went; she was back there—Kerri-Lynn's mother, my older sister and my daughter for being here with me today. We're not here just for our family; we're here for every mother and every father out there who have lost their sons and their daughters to suicide.

I watched Kerri-Lynn come into this world. She was a gift by our creator. He gifted her to us, and it was our responsibility to look after her and to protect her and to make her strong, and we tried. We tried our very best.

Upon her death, we followed our ways and honoured my niece in a ceremony. This is our way, our system.

I am Robyn Bunting from Constance Lake, and this is my niece Kerri-Lynn. I just wanted to show you her face, because she's not just another statistic. She is a person, somebody we loved. Thank you.

The Chair (Mr. Amarjot Sandhu): Thank you. I'm so sorry for your loss. Please accept our deepest sympathies.

The opposition still has two minutes. MPP Mamakwa?

Mr. Sol Mamakwa: Thank you very much, Robyn, and also to your family. As part of the NDP, as well, our condolences for your loss. I know I appreciated the family, as well—to bring out the name and also the community in question period; I think it was towards the middle of December when we were just about to recognize that.

I know that one of the things that you mentioned was about how the province of Ontario should be able to assist. I'm just wondering if you have any ideas on how the province can help, even if it's off-site, on-reserve or off-reserve. Can you explain that a bit?

Ms. Robyn Bunting: I've always said in all my years—I've worked in social services for almost 20 years, and we've always used people who were off-reserve. That doesn't work, because they're short-term. They come in during the crisis or whatever the situation is for just a few days, maybe a week, and then they're gone again. They don't do anything for us.

I think what we have to do is that we have to come up with a strategy to address the situations that are there, the hurt that is there.

It goes back generations and generations. It's not going to be something that we can fix today. I know a lot of people in my community, and all the communities that I have been to, are afraid, because they don't want to address that hurt. They want to hold it. Many of my people are suffering and dying because of that.

So I think that we have to hit it dead-on, straight on, and tackle the generational trauma, and then build that capacity within our people on-reserve and not rely on people from the outside. I always say the answer lies with this.

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. We'll have to move to the government side now. MPP Roberts.

Mr. Jeremy Roberts: Robyn, thank you so much for your presentation today. Let me begin by just expressing my condolences, and all of our condolences, on the loss of Kerri-Lynn.

Over the course of this week, we hear from a couple of dozen presenters, and all of them bring forward interesting perspectives and proposals. But every once in a while, we get a chance to hear a really human story like this, and I can tell you that it makes an impact. All of us, I think, appreciate your courage in sharing your story.

My experience with youth suicide first began about six years ago, in Ottawa. We had two very high-profile youth suicides. The son of a city councillor and the daughter of a hockey coach both committed suicide. It started a conversation in Ottawa about the fact that for many, many years, we never spoke about youth suicide. Whenever it happened, everybody just kind of swept it under the rug. "We don't want to talk about it. The more you talk about it, the more it will promote the idea that other people should do it." That flipped on its head when these two incidents happened, and we started talking about it, and we started doing news coverage, and we started trying to get at some of the root causes.

What do you think we can do, in terms of perhaps in the education system, to start looking at some of the root causes here, and to start promoting that healthy dialogue amongst our youth about working towards preventing this happening again? Are there any thoughts that you might be able to share on things we can do, from that perspective?

Ms. Robyn Bunting: In regard to the education system?

Mr. Jeremy Roberts: Yes.

Ms. Robyn Bunting: We've tried. In our community, we've had social issues that are just out of control. We've had homicides and suicides. We're just used to it. Every First Nation out there—we're just used to it. So it's hard to even think about what we could do at the education level, because we're always reacting. We don't have time to think. We don't have time to plan. We don't have that. So we need assistance, we need help, to do that.

In our communities, our front-line workers, are burnt out. Our teachers are not teachers; our teachers are social workers. And they leave. They're often people from the outside, and they come in, and they leave right away because they can't handle the reality of what it's like to live in a First Nation.

So I'm not sure what we can do at the education level. I only know how to react.

Mr. Jeremy Roberts: Yes.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Jeremy Roberts: From the health side, then, touching on that piece, we know that we've got an investment coming in, both from the federal government and the provincial government. I think it's about \$3.8 billion over 10 years, committed to mental health. I know the provincial government right now is looking at how we best direct those dollars. If you had a chance to get a message directly through to the Minister of Mental Health and Addictions—all of us speak with Minister Tibollo quite regularly—what would you tell him about how those dollars could best be spent in your community?

Ms. Robyn Bunting: I don't know about the dollars. I don't think that money—I don't know if that's going to

help. But I think that if I had my way, and if I could think of what was going to help us, I would say that the systems are going to have to change.

Again, we're First Nations people. We don't work the way—like, this is not the way we meet. We don't sit like this. This is not how we respect each other. We don't do it this way. We don't—

The Chair (Mr. Amarjot Sandhu): Thank you. I sincerely apologize to cut you off. That concludes our time. Thank you so much for your presentation.

0950

MS. TRACEY ALLISON MacKINNON

The Chair (Mr. Amarjot Sandhu): Tracey Allison MacKinnon: Please state your name for the record, and you have seven minutes for your presentation.

Ms. Tracey Allison MacKinnon: Thank you. Tracey Allison MacKinnon.

Boozhoo. Mino gigizheb. Hello, and good morning. *Remarks in Indigenous language.*

My spirit name I was given by a traditional medicine man is Yellow Thunderbird Woman. I am from Cornwall, Ontario, which is an hour south of Ottawa along the St. Lawrence River. My clan is Sturgeon. My colours are yellow and white. My pronouns are she and her. My given name is Tracey Allison MacKinnon.

I would first like to acknowledge that the city of Thunder Bay is built on the traditional territory of Fort William First Nation, signatory to the Robinson Superior Treaty of 1850. I would also like to acknowledge the contributions made to the community by the Métis people.

Who am I? I am someone's mother. I have four adult sons. I am a kokum, a grandmother, of one. His name is Lincoln. I am someone's sister, someone's aunt, someone's friend, someone's cousin and someone's neighbour.

I have been a resident of Thunder Bay for almost 10 years. I'm someone with autism. I'm someone with mental health and health challenges. I am both a former resident and employee of a local emergency shelter. I'm someone with lived experience. I'm someone with first-hand knowledge of the social injustice issues affecting our most vulnerable and at-risk community members. I am one of them. I am a domestic violence sexual assault survivor. I have gone from victim to survivor to contributor.

I'm also a former recipient of the now-cancelled Ontario Basic Income Pilot project. I'm also one of the cofounders of a program called Women Walking with Women, which wasn't so much about walking but, rather, lifting each other up, being a mentor to others, feeling a part of something, feeling valued, validated and appreciated, and all the while learning from one another.

I am a One Woman Fearless, Overcoming Adversity award winner, along with the Beendigen First Nations Women's Day award winner. I'm a previous co-presenter at the Ontario Coalition of Rape Crisis Centres, formed this time last year in Toronto, as well as part of our project called Honouring Our Stories. I was a presenter at the Art of Resistance conference last year as well.

I have been the lead hand drummer for numerous events throughout the city, from Pride parades to Take Back the Night marches, to memorial Memory Walks, to rallies and MMIW events, to powwows and national Indigenous day events, concerts and many more. I was even the lead drummer for the Uncommon Woman live tour in Thunder Bay in 2018.

I'm also an advocate in the fight for justice and truth and reconciliation with the Indigenous people.

I am also an injured worker.

I'm also a former candidate for councillor at large, 2018. I placed 20th out of 26 in the crowded at-large race. There were five positions available. I didn't make it.

I'm also a former nominee for the Green Party of Canada this past fall, Thunder Bay–Rainy River. I withdrew my name and gave it to Amanda Moddejonge.

I'm also someone living with HIV.

I have been a front-line support worker in downtown Fort William, the older part of town. I have assisted with programming and sat on boards for the vulnerable and marginalized community members, advocating for their needs, as someone who has been there with them, in their shoes. I slept outside and in the rain, and I went to work the very next day because I had nowhere else to go. I had no bed to sleep in for more than one night, not knowing where my next meal was coming from.

I was a missing mother of four from BC with the Thunder Bay police from 2012 to 2015.

I was also almost kidnapped two weeks ago by three guys on my street as I was walking home.

I've thought about suicide more than once. I know that pain all too well.

Major challenges affecting our community members are racism, discrimination, homelessness, poverty, lack of funding for major crimes, guns and gangs, mental health and health challenges, lack of affordable housing, lack of resources for autism. We need more programming for our youth—more, not less; recreational options; funding for our seniors and elders. We need funding for more programming. Cuts hurt. We have the skilled workers with Bombardier—however, not enough work and contracts. We must tackle these issues. Enough of our daughters, sisters, mothers, brothers, sons, fathers, aunties, uncles, parents and grandparents have been lost. We must do better. We can do better. We need funding for anti-guns and gangs now. We need preventable measures to combat issues in our neighbourhoods and streets. We don't want to be the murder capital of Canada yet again.

We're not off to a very good start already this year. We must declare a state of emergency on the war on drugs now. No more lives need to be lost.

You don't know something until it happens to you. My best friend's daughter was murdered just over a year ago, on Dufferin Street—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Tracey Allison MacKinnon: —in October 2018.

We need to claim our land, our city, our country, our Canada

I'm not a doctor, lawyer, politician or environmentalist. I'm an ally for Indigenous people. My late father was from

Ingonish, Cape Breton, Nova Scotia. His mother married a white man and lost her status. I'm a graduate of Advocacy North Social Justice Speakers' School, a former graduate and mentor of Lakehead University's Humanities 101 program, and a graduate of New Directions Speakers' School. People see me all the time yet don't really know who I am until I put on my ribbon skirt that I wear today, pull out my hand drum and start to sing traditional songs. I am that white Nish girl.

I've gone from victim to survivor to contributor within my community. What was missing in my life was connection. It was when I was lost, broken, homeless, hungry and broke that I found—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. We'll have to—

Interjection.

The Chair (Mr. Amarjot Sandhu): Oh, okay. The government side has allotted their time to you, so please continue.

Ms. Tracey Allison MacKinnon: Thank you. It was when I was lost, broken, homeless and hungry that I finally, truly found myself. I was lost in a cycle of poverty. It was when I attended a Mother's Day memorial walk years ago at Waverley library that I finally felt I belonged. Hearing the heartbeat of a drum as I walked with the crowds towards Marina Park, I finally felt I was home. It was during this walk that I finally let go of the tears I had been carrying with me for years, since I lost my own children due to domestic violence. I lost them all while staying in a women's shelter in Victoria, BC. Authorities came into the women's shelter with an ex parte custody order—granted them custody—and removed them. Not being able to see my children for years almost killed me. It broke me. I was never successful in having them returned to me.

There are reasons I'm here today. I came from northern Vancouver, BC, 10 years ago. It was supposed to be for two weeks, and I'm still here. There are reasons I do what I do in the community, and my grandson is one of them. It was when I felt part of the community that I finally cried, that I finally started to heal those wounds. Being with Indigenous people made me feel safe and secure, protected and loved.

Not long after this walk, I had the opportunity to make a traditional hand drum. I wanted to learn those healing songs I had heard. I now sing in Ojibway. I was gifted with this white eagle feather by a traditional medicine man when he gave me my spirit name and colours a couple of years ago.

When I was a recipient of the Basic Income Pilot project, I received \$1,915 a month. My rent is \$855. I'm now back on ODSP. My rent is still the same. My Internet, cable and cell and security system come to \$300. That's \$200 left. I have a prescription for medical marijuana. That's \$450 a month. Oh, wait; I forgot about food. I'm sure I'm going to need food. I'm already over my overdraft.

1000

We need a universal basic income. We need a clear, holistic, 10-year plan to tackle these issues. Leaders need

input from community. So thank you for being here. We need to tackle these issues now. We look forward to the day when we can govern ourselves—Glen Hare, Anishinabek Nation Grand Council Chief.

When I was lost, alone, broken and traumatized with my Indigenous friend—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Tracey Allison MacKinnon: I attend powwows, sweat lodges, full moon ceremonies, sharing sacred circles, healing circles, marches, walks and rallies. How does one get over losing one's children? You never do. I still get triggered when I see a family of three or four young sons, and it's now 18 years later. This is my lived experience. This is how I can relate to Indigenous people having lost their own children. We must tell our stories. This is how we learn from the past.

"Racism is part of the social landscape of Thunder Bay. It is recognized to be an issue, and many people in the city have been standing up against it for years"—Gerry McNeilly, Office of the Independent Police Review Director, in Broken Trust. Powerful words.

If you have not spent time in a First Nations community and listened to their stories, then you have no right to pass judgment on them. Racism is taught. Please be mindful of your opinions and think about how you come to your conclusions about First Nations peoples. Canada was not discovered; it was invaded.

The truth is that the recent past and current oppression is still affecting—

The Chair (Mr. Amarjot Sandhu): We are now at the end of the four minutes, but the opposition has allotted their share of time to you as well. So please continue.

Ms. Tracey Allison MacKinnon: The truth is that the recent past and current oppression is still affecting First Nations, and the road to healing is not going to happen overnight. But what can happen overnight is the way we all acknowledge the wrongdoings, the way we listen to their stories in order to give them closure, to help them heal.

"We all deserve to have the sense that we matter, that we belong and that we're all respected"—Montreal Canadiens goaltender Carey Price, proud member of Anahim Lake First Nation, BC.

Some of us with mental health and health challenges can't just get a job. It's a daily fight to fight those inner demons. Yesterday, my mailman said to me, "You're dressed today, Ms. MacKinnon." We both laughed. He has seen me at my worst. I have good days and I have bad. Meegwetch.

The Chair (Mr. Amarjot Sandhu): Thank you. MPP Monteith-Farrell.

Ms. Judith Monteith-Farrell: Thank you, Tracey, for all you do in the community. I've never heard your full story, and I really appreciate it.

You mentioned the violence and the guns and gangs. Can you maybe explain to the committee what impact that has on the neighbourhoods we live in, having those gangs invade our city?

Interjection.

The Chair (Mr. Amarjot Sandhu): Please state your name.

Mr. Joshua Hewitt: Yes. My name is Joshua Hewitt. I spoke earlier here. I'm going to answer this question for Tracey the best I can.

I believe that in terms of guns and gangs in our community, if we look at our south-side neighbourhood, we see a growing opioid crisis. We see our Indigenous youth, our people coming from the northern communities who are susceptible to this violence that's happening in our community.

We really don't just want to see the investment to the police services to fight the guns and gangs—but to look at the root causes of why these guns and gangs are coming to Thunder Bay, and really trying to address that.

The Chair (Mr. Amarjot Sandhu): Any further questions?

Ms. Judith Monteith-Farrell: I would just like to thank you for your presentation.

The Chair (Mr. Amarjot Sandhu): Thank you so much for your presentation.

CHILDREN'S CENTRE THUNDER BAY

The Chair (Mr. Amarjot Sandhu): Next, I will call on the Children's Centre Thunder Bay. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Ms. Diane Walker: Good morning. Thank you for this opportunity to speak. My name is Diane Walker. I am the CEO of Children's Centre Thunder Bay.

Ms. Terri Lynn Fucile: My name is Terri Lynn Fucile. I am a parent and I am the co-chair of the parent council at Children's Centre Thunder Bay.

Ms. Diane Walker: We have three messages for you today.

Message number 1, broken promises: Three years ago, the federal government committed to investing \$1.9 billion in expanding community mental health and addictions services—it seems to be an important topic today, as I listened—with \$265 million targeted to reduce wait times for child and youth mental health. Two years ago, political parties—all of you—campaigned promising to address mental health and addictions, in particular child and youth mental health. Upon election, this government committed to match federal funds dollar for dollar, yet nothing has really flowed. The children of this province are owed \$67 million from last year and \$150 million this year

Simply stated, my ask to you is that \$217 million be allotted in this year's budget for community-based child and youth mental health to reduce wait times and ensure intensive services are available for our children.

Ms. Terri Lynn Fucile: I'm a parent of three children, who all struggled with mental health issues. For the last three years, I've been advocating with MPPs like you to invest in children's mental health. When the announcements were made by the Ontario government, and the federal, that promised to invest in child and youth mental

health, I was so relieved. I felt heard and I felt understood. And yet, here I am today. I stand before you devastated in the knowledge that this promise was broken. This government has not followed through with its commitments. We were given hope, and that hope was taken away.

I'm constantly bearing witness to children and families not getting the services that they so desperately need. It's a frightening and lonely time for families who are waiting for help to arrive. For many, it's a crisis that often requires hospitalization, school failure, self-harm and suicide.

Keep your promise. Invest in children's mental health and put the \$217 million into the budget for child and youth mental health.

Key message number 2, wait times: Long wait times for children's mental health services are simply unacceptable. These are precious developmental years; time is of the essence. Mental health issues left untreated are just as detrimental as leaving an infection untreated. It will fester. It will progress. It impacts the family and the peers surrounding. The longer it's left, the more damage is done, and therefore it requires more time and more resources for recovery.

When a parent is told that their child is going on a waitlist, what that parent hears is that their child is being left untreated, and that illness will progress until the whole family is in crisis. That's what happens to many families here in the north.

One example is that my friend's son was having some serious difficulties—four years old. He would tell her every day that he wanted to die. He would try and jump out of moving vehicles. He couldn't attend school. He had no friends. He needed intensive treatment, and this family needed support. They were put on a waiting list. Things had to get dire in order for them to receive any help. And dire it got. She ended up losing her business, they lost their home, and they ended up on social assistance—all because this family was in crisis and they were waiting to receive the help they needed.

Ms. Diane Walker: As of January 14, my centre had 539 children on the wait-list; 151 of those, some as young as two, are going to wait for 155 days, or half a year, and some wait for almost a year. They are stuck in the hallway, so to speak. And similar to the emergency department, we at our centre triage the critically ill first. So those 151 who are just ill and on the verge of becoming ill, once they are sick enough, because they're expelled from school, they hit their parents, they've committed a crime or were hospitalized—it's then they qualify for services.

Because of the chronic underfunding in child and youth mental health, the only way to reduce times is to reduce the amount of service a child receives. It is kind of like getting half your chemo if you have cancer. We need to invest in children's health by supporting the hiring of mental health professionals who can work in community-based mental health centres. For every staff we hire, we can take 30 wait-list orphans off that list and reduce the wait time by two to three months.

1010

Finally, our last message is—and you heard it earlier—serve our kids closer to home. Currently, Children's

Centre Thunder Bay is one of two intensive residential treatment programs between Manitoba and North Bay. We operate six beds and serve the most ill and critically at risk.

Our evaluation data tells us that the youth served have the most severe challenges with respect to school attendance, anger control, social functioning, mood and trauma, and that they are at high risk for self-harm and suicide, and that the treatment we provide produces positive outcomes and reduces that risk and that self-harm. But waiting increases the likelihood that a youth will not complete treatment.

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Diane Walker: Without further investments, those 11 kids waiting 204 days equals 2,000 days of hallway waiting for our most critically ill kids. These kids will likely end up hurting themselves, or in hospital in southern Ontario, far away from their homes and families, which is a violation of best practice and, at maximum, simply inhumane.

Ms. Terri Lynn Fucile: Can you imagine hearing that your child has complex mental health issues, and being told that the services you have a right to are not available in your community? Can you imagine telling your frightened and ill child that they're going to go live somewhere else and you can't go with them? As a parent, I find this abhorrent, and yet this is the reality for many northern Ontario families whose children are sent away for years for treatment, because those services aren't available near home.

My friend had no choice but to send her 12-year-old son to a group home in southern Ontario, so that he could receive the treatment he requires. He's now 19, and he's still not home.

This impact has had insurmountable—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. We'll have to move to the opposition side for questioning now. MPP Monteith-Farrell.

Ms. Judith Monteith-Farrell: Thank you for your presentation. I know you're both very passionate advocates. Thank you for the work you do.

I'd like for the committee to hear a bit about the challenges of servicing the surrounding communities of northwestern Ontario.

Ms. Diane Walker: As I understand it, I think you went and visited some communities in northwestern Ontario. You know the geography is vast and the resources are slim. Many of the children are required to come to Thunder Bay—and Thunder Bay is under-resourced, as a hub—and often then are transported out into southern Ontario. For short-term illnesses, this is normal in our health care, but for long-term illnesses, this is just simply not okay. So that's part of the problem: We're simply under-resourced.

When you cost service—as you probably know, if you think about it from a business perspective, it costs a lot more to provide service at a distance. And I'll tell you the truth: Video-based therapy is not the answer.

The Chair (Mr. Amarjot Sandhu): MPP Mamakwa.

Mr. Sol Mamakwa: Thank you for the presentation. I think you've painted a picture of how developmental services and also mental health services for children and youth are very minimal at best and, at worst, non-existent. I think we hear it, and I think it goes in line with the previous presenter, who presented on mental health issues for children and youth.

I know that you're asking for Ontario to invest in bringing services closer to home. Moving forward, I think it is an opportunity for Ontario to be part of the solution rather than be a barrier or a challenge for our people.

I'm just wondering: In the next three months—what would you ask for immediately?

Ms. Diane Walker: Keep your promises real. Follow through on the promises that the government and the province have made. Invest \$217 million in child and youth mental health, in wait-lists, and in treating kids closer to home. Let the centres that are qualified to do the work do the work that they can do.

Lastly, I would say—and I know the plight of our Indigenous youth—work with our Indigenous communities to figure out how to best serve them. I think sometimes—and people have spoken to it—it's not for us white people to tell Indigenous people what to do.

The Chair (Mr. Amarjot Sandhu): Any further questions? MPP Shaw.

Ms. Sandy Shaw: I just wanted to commend you for your presentation. You've put it really straight to us.

I wanted to ask in the time that we have left—I know we talk about this being a reduction in the promised mental health investment in the province. In many ways, it was already bad in terms of access, and now it's not getting any better. In fact, I would argue that it's getting worse. Can you just comment a little bit, also, on whether there's an impact, cross-impact with the chaos in the autism funding? Because I know, I understand that we're losing providers, as well, while that sits in complete limbo,

Ms. Diane Walker: It's super chaotic at my work. We provide autism services as well. Many kids with autism have mental health issues, and they go together often. So that just makes it all the more complex and all the more difficult. So there's more pressure on mental health services which are currently funded to serve kids with autism that are not funded, and so the system starts to balloon under this pressure, and kids and families, in particular, are super frustrated. I hear it every day. I could speak to that as well. But it's because we're under two different models, but they're the same kids.

Ms. Sandy Shaw: Thank you very much.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll go to the government side for questioning. MPP Piccini.

Mr. David Piccini: Thank you both very much for speaking to us today. I appreciate the opportunity to hear from you.

I know you had a very clear ask there of \$217 million. I think just using a local example—I'm from rural Ontario, and I know, when we take a deep dive into the specifics, you're right. Both governments, federal and provincial, have made a substantive—a record investment, in fact. But

it's how those monies flow where the rubber hits the road, and the proof is in the pudding.

So I know locally, one of those projects with our OHT and in health care was MHART, which is a rapid-response team, to try to get access at people upstream before they end up in the emergency rooms with some chronic issues. We funded that, as the provincial government, and it helped in rural Ontario community paramedicine as well—an opportunity to get upstream. That's a project we're working on now. So working with an embedded mental health expert within the hospital that also runs the centre for youth in my community, we were able to identify some projects that the government has now stepped up and funded.

Given a local example that I just gave of an increased investment this government has made to tackle a specific project—give me an example of one or two projects that you would utilize that \$217 million to support.

Ms. Diane Walker: I'm going to answer honestly and maybe get myself in trouble: I don't think projects solve the problem. They're temporary. We don't do projects in cancer. We serve kids and we provide treatment to kids. So I'm kind of not answering your question. I really believe that our system is chronically underfunded to provide basic treatment. Projects are fantastic to move specific issues forward—no doubt about projects. But this isn't about projects. This is about investing in treatment for kids who are ill. I just want to emphasize that.

Mr. David Piccini: Just the upstream before they end up critically ill—is what I'm saying. This funding is now tackling people upstream before they get critically ill, and that's based on the advice of mental health experts in our community. So if that's not the answer and the experts in my community are wrong, then what is the answer here? I'm just trying to get a sense of where that \$217 million is going to go.

Ms. Diane Walker: It's going to go to counselling, therapy and intensive treatment for kids that were not the beneficiaries. It would be like having nutrition and health counselling programs upstream, but still, we have people that get diabetes. So it's finding that balance between upstream work, which I 100% believe in—

Ms. Terri Lynn Fucile: Absolutely.

Ms. Diane Walker:—and the downstream work, because those kids are the ones who are not being served well.

Mr. David Piccini: And would you invest—talk to me about some of the problems getting clinicians and experts up here, psychiatrists and others. Any recommendations on things we can do?

Ms. Diane Walker: You can make some of the Toronto ones move.

Mr. David Piccini: I wish it was that easy.

Ms. Diane Walker: Just saying.

Mr. David Piccini: I'd love to see that in my communty.

Ms. Diane Walker: Part of it is to give incentive— The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Diane Walker:—to come up. We do have universities and colleges that are producing, and it's to have the

jobs here. The way you get people to come to communities that are smaller is to create jobs. When you have jobs for people and you have jobs for their partners, they come. We have 180 professional staff working in all different areas. They come and they stay, if they can make a living. So it's jobs.

Mr. David Piccini: Thank you. Just a small plug—you heard from Moira at Lakehead. Part of the new funding model for our universities is to incentivize a community impact piece, which is never-before. That is to hopefully incentivize them to partner with local organizations to keep their graduates staying. It's small, but I hope that goes forward.

Ms. Diane Walker: It's important. Ms. Terri Lynn Fucile: Agreed.

Mr. David Piccini: Thank you.

1020

The Chair (Mr. Amarjot Sandhu): Thank you so much for your presentation.

Ms. Diane Walker: Do I have a minute?

The Chair (Mr. Amarjot Sandhu): You have 10 seconds.

Ms. Diane Walker: Keep your promises, help us deal with wait times, and provide treatment closer to home. Thank you.

The Chair (Mr. Amarjot Sandhu): Thank you.

KINNA-AWEYA LEGAL CLINIC

The Chair (Mr. Amarjot Sandhu): Next, I will call on Kinna-aweya Legal Clinic. Please come forward.

Please state your name for the record, and you have seven minutes for your presentation.

Ms. Sally Colquhoun: Thank you. My name is Sally Colquhoun. I'm a lawyer and the coordinator of legal services at the Kinna-aweya Legal Clinic.

Kinna-aweya Legal Clinic is funded by Legal Aid Ontario to provide poverty law services to low-income residents in the district of Thunder Bay—not just in the city of Thunder Bay, but throughout the district. We have full-time branch offices in Geraldton and Marathon, communities that are each about 300 kilometres from Thunder Bay. We also provide services north of Thunder Bay in the Armstrong and Gull Bay area, in Whitesand First Nation and about 12 other small First Nation communities throughout the district.

We focus primarily on income maintenance issues and tenancy matters. In addition to providing summary advice and ongoing representation, we provide community legal education. We do community development and law reform work towards systemic solutions for the problems that our clients face with respect to social assistance systems and housing issues.

Our clients, for the most part, are people who are struggling to survive on social assistance in Ontario, a struggle that is becoming more and more desperate.

Thank you for the opportunity this morning to speak on behalf of our clients, and to urge this committee to recommend a significant increase in spending on social assistance in the coming budget, to reverse the devastating cuts that were made last year to the budget for Legal Aid Ontario and compensation for victims of crime.

The amounts paid for social assistance in Ontario are hopelessly inadequate when compared to the actual cost of basic needs such as shelter and food. The gap between what families receive and what they need for basic necessities is hundreds of dollars a month in all communities in Ontario.

It's important to remember that we're talking about people who everyone agrees need to rely on social assistance for their basic needs. We're proud of the fact that there is a social safety net in Ontario to protect people who are temporarily out of work, who are involved in participation requirement activity in order to maintain their eligibility for social assistance; people who are doing everything they can to find work, or who are unable to work for a period of time because of health problems or other crises; or people who are recognized to have disabilities that restrict their ability to function in a workplace.

Decreasing the number of families living in dire poverty would positively affect the budget in other areas. Poor people have more health problems. Children living in poverty have more challenges in the education system. People end up in the criminal justice system because of poverty. Social assistance recipients would die without food banks and soup kitchens. This isn't because they lack budgeting skills or are frivolous with their money; it's because they don't get enough money in a month to allow them to pay rent and eat every day.

In from the Margins is a 2009 report, from a bipartisan Senate committee, which was authored by Senator Hugh Segal and Senator Art Eggleton. In that report, they state, "Poverty expands health care costs, policing burdens and diminished educational outcomes. This in turn depresses productivity, labour force flexibility, lifespans and economic expansion and social progress, all of which takes place at huge cost to taxpayers, federal and provincial treasuries and the robust potential of the Canadian consumer economy....

"Eradicating poverty and homelessness is not only the humane and decent priority of a civilized democracy, but absolutely essential to a productive and expanding economy benefiting from the strengths and abilities of all its people."

It's essential that the provincial government move ahead with poverty reduction. Give people enough money to pay rent and buy groceries, and they will. We won't need a food bank industry.

Build affordable housing, and fewer people will need emergency shelter, which actually costs significantly more every month than rental housing.

Fund affordable licensed daycare so parents can work at a minimum wage that lifts them above the poverty line.

In difficult economic times, recognize that an increase to social assistance rates and to the minimum wage is a great economic stimulus. All of that money gets spent in Ontario.

Our outcomes measures at our clinic show that in 2018, we assisted our clients in obtaining almost \$1 million in

one-time payments for retroactive social assistance income that they were entitled to, or other one-time payments. The chamber of commerce recognizes the value of the work that we do in the community. All of those funds are spent locally, paid to landlords and local grocery stores.

Last year's budget included very modest increases for social assistance, but 1.5% of \$700 is only \$10.50 a month. Currently, a single person on Ontario Works is still only entitled to a maximum of \$733 a month for all of their basic needs, including rent, food, clothing and transportation, in a province where the average cost of a bachelor apartment is over \$1,000 a month.

There are many social assistance recipients who have insurmountable barriers to being involved successfully in the workforce, and many others who are working as many hours as they can. These vulnerable people should get enough money each month to meet their basic needs.

It's cheaper in the long term to provide adequate housing and adequate income to vulnerable people than to pay for the costs associated with homelessness—costs both in terms of dollars and, more importantly, in terms of hardship and despair.

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Sally Colquhoun: Basic income is one of the upstream solutions to the health care problems that you're hearing about. Our clinic does a lot of work to support clients obtaining ID, and we have some funding through the Poverty Reduction Strategy to do that. But in the long term, the Ontario government should provide an Ontario photo ID card to every low-income person.

The Criminal Injuries Compensation Board was closed this spring by the provincial government, leaving many victims of serious crimes of violence with no opportunity for compensation or acknowledgement of the devastating impact on their lives. We ask that it be reinstated.

Another devastating cut in last spring's budget was the reduction of the budget for legal aid by \$130 million. We're grateful that the Attorney General has recently announced that the additional cuts announced in last year's budget will not be proceeding, but the legal clinic system is struggling with the impact of last year's cuts. Research indicates there is a significant return on investment from investing in legal aid.

The Chair (Mr. Amarjot Sandhu): Thank you. I'm sorry to cut you off. We'll have to go to the government side for questioning now. MPP Rasheed.

Mr. Kaleed Rasheed: Thank you very much, Sally, for your presentation this morning. I'm from Mississauga and I've had many, many conversations with our Legal Aid Ontario team over there.

But before I go further, did you have a chance to look into the Auditor General's report of 2018?

Ms. Sally Colquhoun: Of 2018?

Mr. Kaleed Rasheed: Yes, the 2018 Auditor General's report that came out.

Ms. Sally Colquhoun: Yes.

Mr. Kaleed Rasheed: You know how the Auditor General talked about that in recent years, more and more funds have been allocated—

Ms. Sally Colquhoun: Yes.

Mr. Kaleed Rasheed: —but they have not been utilized properly for—

Ms. Sally Colquhoun: Yes, I would disagree. I don't think that that's—

Mr. Kaleed Rasheed: So you disagree with the Auditor General's report?

Ms. Sally Colquhoun: Yes. I think that there are issues with respect to reporting statistics through legal aid, in part because of the new data management program that was rolled out. I think the government has recognized that there have, in fact, been increased services provided with the increased funding that legal aid received.

Mr. Kaleed Rasheed: It's surprising because during my conversations with some of the Legal Aid Ontario team in Peel region—they do agree with the Auditor General's report that there has been a lot of waste that has been taking place. The whole idea of the Auditor General's report, and what we as a government are trying to do, is to make sure that the funds that are allocated to Legal Aid Ontario are used properly.

Ms. Sally Colquhoun: Absolutely. I agree 100% that we want to ensure that the funds are used properly.

I think it's important to note that legal clinics are only one part of Legal Aid Ontario, and legal clinics have always had capped funding. We're very lean organizations. So when you talk about Legal Aid Ontario, only about 20% of the budget for Legal Aid Ontario is allocated to clinics.

1030

There have been a number of processes recently—there is an administrative savings plan that was undergone through the previous president and CEO of Legal Aid. The clinics are very efficient organizations. We provide a high level of service and high-quality legal services to low-income people.

The cuts are going to mean less service to people. There are things like—

Mr. Kaleed Rasheed: Sorry to cut you off, but I know I have limited time.

You know that our government has listened to the AG's recommendations, and we will be implementing some of those recommendations based on the Auditor General's report. Are you aware of that?

Ms. Sally Colquhoun: I'm not exactly sure what—

Mr. Kaleed Rasheed: Because you've been talking about the AG's report for Legal Aid Ontario, and—

Ms. Sally Colquhoun: So in terms of the modernization project with legal aid? Yes, absolutely.

Mr. Kaleed Rasheed: In terms of modernization, to make sure that we find efficiencies, so that the funds that our government is allocating to Legal Aid Ontario are used appropriately.

Ms. Sally Colquhoun: Absolutely, yes. We've been part of that modernization project. One of my staff members is on the Association of Community Legal Clinics—

Mr. Kaleed Rasheed: So us as a government—you see that we are looking at the best interests of the people of

this province, and also Legal Aid Ontario and the recommendations.

Ms. Sally Colquhoun: That's what you say you want to do, but you can't do more with less.

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. We'll have to move to the opposition side now. MPP Shaw?

Ms. Sandy Shaw: Thank you very much, Sally. I'd love to just pick up where MPP Rasheed left off. It's my sense that the Auditor General's report didn't intend to deny access to justice to the people of Ontario, which is essentially what we have seen with the gutting of legal aid funding.

I want to go back to the beginning of your presentation, when you talked about the people who you serve in this community. We have heard similar stories from legal aid clinics all across Ontario. They serve people who are really struggling just to access basic needs like housing. You talked about people having an inability to access health care, and people struggling to just get adequate nutrition and food.

Now, with this \$133-million cut from the legal aid clinics across Ontario, people are now being denied access to justice. Would you agree with me that this will be the net effect—that people will now no longer be able to access justice, as should be the right of everyone in Ontario, not to say all of Canada?

Ms. Sally Colquhoun: The \$133 million was the cut from the entire legal aid program. For legal clinics, it was approximately \$15 million, and the cuts ranged from between 5% and 50% of the budgets for the 73 legal clinics across Ontario.

We're very grateful that the Attorney General has recently announced that the additional cuts that were announced in last year's budget aren't going to be proceeding, but the legal clinic—and all legal clinics; the system—is struggling with the impact of last year's cuts, because in addition to various budget cuts to each specific clinic, there were a number of systemic cuts.

There's a freeze on rents. Our landlord reasonably wants a rent increase when we're trying to negotiate an extension of our lease, and there's no money to pay us a modest increase in our rent.

We have legal obligations to pay equity. We're legally obliged to make payments to meet our pay equity obligations, and there's no money in our budget anymore for that.

There's no funding anymore for training. Obviously we have our obligations, as licensees of a law society, to do continuing professional development, but also to our clients to make sure that we're knowledgeable and up to date on the law, and all of the funding has disappeared for training.

There are going to be significant repercussions with respect to the cuts to legal aid clinics, as well as the general cuts to legal aid.

Research indicates that there's a significant return on investment from investing in legal aid. Every dollar invested in legal services saves \$9 to \$16 from other

programs such as health, housing, and courts administration. So last year's cuts are going to have—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Sally Colquhoun: —long-term negative repercussions, including homelessness, incarceration, hospitalization and health care. We would urge this committee to recommend that the government reinvest in legal aid to stop further cuts to clinics and repair the damage done by last year's cuts.

Ms. Sandy Shaw: So you will agree that the cuts—

Ms. Sally Colquhoun: They are going to impact client service. We are going to be able to do less for low-income people, and it's an access-to-justice issue, certainly. Absolutely.

Ms. Sandy Shaw: Right, and a good Tory like Hugh Segal recognized that this is not the way to balance a budget—on the backs of low-income people and their entitlement to be represented fairly before the courts.

I'd just like to let you know that the Attorney General, MPP Doug Downey, in his recent legislation has language in there that will allow the province of Ontario to download any additional costs they choose to Legal Aid Ontario. So despite the fact that it looks like they're rolling back cuts, they have in that the language that will download more costs, just so that you're aware.

The Chair (Mr. Amarjot Sandhu): Thank you. That concludes our time. Thank you so much for your presentation.

THUNDER BAY CHAMBER OF COMMERCE

The Chair (Mr. Amarjot Sandhu): Next I would like to call upon the Thunder Bay Chamber of Commerce. Please state your name for the record, and you have seven minutes for your presentation.

Ms. Charla Robinson: Good morning. I'm Charla Robinson. I'm the president of the Thunder Bay Chamber of Commerce. We represent about 800 member companies with over 20,000 employees here in the city of Thunder Bav.

We're hopeful that the upcoming Ontario budget will focus on supporting economic opportunity for business in Thunder Bay and across the province. We appreciate the reduction of the aviation fuel tax for northern Ontario—this is something we've been asking for for some time—and also the small business corporate income tax rate reduction to 3.2% as government steps to improve competitiveness for our business community. We're pleased to provide examples of additional actions that the province can take to grow a stronger business climate by investing in economic opportunity and addressing our workforce needs.

First we'll talk about mining. Northwestern Ontario is home to hundreds of active mining projects representing literally billions in mineral value, and will have a significant impact on the economy of both the northwest and the province as a whole. The mining industry stimulates economic growth in large urban centres and in rural

and Indigenous communities. The Mining Association of Canada indicates that mining is the largest private sector employer of Indigenous Canadians on a proportional basis.

Mineral deposits are often located hundreds or thousands of kilometres from road, rail, energy and technology infrastructure. As a result, companies are faced with costs of hundreds of millions of dollars in order to access their mining claims. The cost to establish the required infrastructure is frequently too prohibitive for private sector investment alone. Federal and provincial financial support is needed at the front end to make these projects happen. We know that the return on investment in tax revenues and economic growth will more than offset these costs in the decades to come.

Let's talk now about transportation. Intercommunity bus service in northwestern Ontario provides a vital link to health care services, to employment opportunities, for parcel delivery and just for connecting with family. We're pleased that private providers are investing into our region to ensure that intercommunity service is available. We believe that these services could be further expanded and enhanced through a financial subsidy to local providers in the northwest, which would be similar to those provided in other areas of the province.

Let's move on to forestry. Forestry continues to be a major contributor to our economy. Through the development and implementation of a forest sector strategy, Ontario has committed to positioning itself as a leading forestry jurisdiction within Canada. Increasing available wood supply and ensuring free and open access to American markets is critically important, and these items continue to be top of mind to our members. We're also concerned with the 2019 budget cut to the Provincial Forest Access Roads Funding Program. These roads are public infrastructure, and they support jobs and economic development across the region. We recommend the return of the Forest Access Roads Funding Program to the required \$75 million per year.

Procurement processes: The government recently announced its intention to centralize all public procurement. While we support efforts to improve the efficiency of procurement, we have concerns about the unintended consequences that may result. Large provincial contracts cannot effectively be fulfilled by regional suppliers, which could result in large contract awards being made only to national or multinational distributors, thereby damaging regional suppliers and economic development.

We encourage the Ontario government to implement an approach that mandates public buyers to use a blended portfolio of contracts, including national, provincial and regional suppliers. A public buyer would be mandated to select a contract which derives the greatest total value for that agency, where "total value" is defined as the balanced consideration of price, regional economic impact and other important factors, including but not limited to sustainability and cultural inclusion.

1040

Speaking of procurement processes, I would be remiss if I did not mention the challenges currently facing our

Bombardier plant. The plant has recently laid off over 450 employees, and further staff reductions will continue unless new work is found. Bombardier is working hard to maintain new contracts and to keep the local plant viable. But the private sector doesn't buy mass transit; governments do. We need those governments—your government—to implement Ontario content requirements, whenever you can, for mass transit projects.

The economic impact of our plant building mass transit vehicles is significant to the entire province. From September 2018 to September 2019, Thunder Bay built 107 bi-level GO trains and 80 TTC LRVs. In that period, the Thunder Bay operation spent just under \$140 million with suppliers in Canada. Of that number, over \$100 million was spent within Ontario and over \$40 million was spent in the GTA.

Bombardier's suppliers are located in Toronto, Brampton, Mississauga, Vaughan, Markham, Oshawa, Hamilton, St. Catharines, Niagara Falls and many other communities, creating hundreds of jobs in the GTA and paying taxes to federal, provincial and municipal governments. The numbers show that the return on investment of tax dollars into a product built here in Thunder Bay is 10 times the return of building it in California, Mexico or China.

Thunder Bay's Bombardier plant is part of a unique Ontario ecosystem—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Charla Robinson: —for advanced manufacturing of mass transit. There is nothing else like it in Ontario for mass transit. We don't want to lose it.

Quickly, there are two other areas that we need to discuss. Skilled trades: We appreciate the changes to journeymen and apprenticeship ratios, as well as the recent campaign to encourage new entrants. But we also think there should be an implementation of a pilot project, similar to what is happening in Nova Scotia, to allow small employers in rural communities to apply for apprenticeship ratio increases on a per-project basis.

Finally, immigration: One part of the solution to the skills challenge is through progressive immigration policies. We know that the government took much-needed steps to improve the Ontario Immigrant Nominee Program by expanding the in-demand skills stream to include transport truck drivers and personal support workers. We believe that additional policy changes are needed to support rural and northern communities by expanding eligible occupations—

The Chair (Mr. Amarjot Sandhu): Thank you. Sorry to cut you off.

Ms. Charla Robinson: Thank you for the opportunity. The Chair (Mr. Amarjot Sandhu): We have to move to the opposition side for questioning now. MPP Arthur.

Mr. Ian Arthur: Good morning, and thank you for coming in and presenting. I have a couple of questions here. On the transportation one, you mentioned a financial subsidy to local providers in the northwest similar to those provided in other areas of the province. What is that discrepancy like? What would it look like in Thunder Bay versus another part of Ontario?

Ms. Charla Robinson: We don't have any subsidies. So if you look at ONTC, if you look at TTC, if you look at GO Transit, they're all supported through government funding. Our provider has no provincial subsidy.

Mr. Ian Arthur: In terms of geography, significantly larger population base, significantly smaller—what are the economics of that?

Ms. Charla Robinson: Obviously the population would be a lot smaller, which is also why it makes it more challenging to offer the service, because there are less riders to pay for it.

The geography is significant. Northwestern Ontario is a huge area, and to be able to connect communities all the way from Rainy River to Manitouwadge is—you're looking at eight or nine hours of travel time between those communities. This isn't just the same as Toronto to Hamilton or Toronto to Ajax; this is a significant area that has to be serviced through these private providers, and they really could use some extra help.

Mr. Ian Arthur: That's cool.

I want to touch on one other thing that wasn't in your presentation. I want to talk a little bit—you're the chamber of commerce; you represent businesses. I want to talk about the cost of hydro. It's a significant factor for small businesses across Ontario. It was a huge factor in the last election. There was some relief with the Liberals' Fair Hydro Plan, although that was really just a shifting around of debt that is going to result in rapidly skyrocketing prices going forward. I have not seen a change in approach from this government. Is that still a struggle for businesses up here, from time-of-use pricing to—the energy cost for operating small businesses in Thunder Bay?

Ms. Charla Robinson: Certainly anything that is a public policy that impacts costs is always a concern. In Thunder Bay we're very lucky to have Synergy North, which does have very competitive hydro rates for our community, which is different from some of the just-outside-of-Thunder Bay communities—Oliver Paipoonge—because they're under Hydro One, and their rates are perhaps a little bit higher than those in the city of Thunder Bay. The city of Thunder Bay owns Synergy North, so there is a municipal control there, which helps as well.

But definitely, anything that the province can do to help keep the costs of hydro down is important. What we also find in areas like Thunder Bay, not just within the city but around, is more the limitations of natural gas, and needing support to be able to expand natural gas availability which is a way to reduce electricity costs and heating costs for businesses and residents in the area.

Mr. Ian Arthur: What about road clearing—

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Ian Arthur: —in terms of getting the highways clean that you need for your members to be able to operate those businesses? Is it adequate? Is there a need for better road maintenance in the north?

Ms. Charla Robinson: I can't really speak to the north. We represent the Thunder Bay Chamber of Commerce, so most of our members are within the city proper. Most of our roads are maintained by the city of Thunder Bay.

Certainly the highway does go through Thunder Bay, which is a very important connector to our community—

Mr. Ian Arthur: You spoke about forestry and stuff as well, which I imagine isn't within—

Ms. Charla Robinson: Exactly—a very important connector to our community for those businesses that are bringing product and supplies from elsewhere. So it is very important to ensure that we have safe road conditions at all times. I have not heard specific concerns recently, but certainly there have been times when there have been concerns around highway maintenance. That continues to be something that we're keeping an eye on.

Mr. Ian Arthur: Thank you.

The Chair (Mr. Amarjot Sandhu): We'll move to the government side for questioning. MPP Skelly.

Ms. Donna Skelly: Good morning, and thank you for your presentation.

Earlier, we heard from some people speaking in support of the Basic Income Pilot project. Being from Hamilton, as I mentioned, I was one of the people from the government side who believed it was the right thing to do, to eliminate this pilot project. The cost—it was something like \$17 billion. To cover the cost to taxpayers, it would have been an additional—well, let's put it this way: The HST would be sitting at 20%. How would that impact your members, if we had to raise the HST to 20% in order to cover the cost of fully funding the basic income program?

Ms. Charla Robinson: But the decision, with all due respect, was not to—you cancelled the pilot. The pilot had a very short-term duration—three years. Until the pilot was complete, it's kind of hard to know what the pilot's results would have been. So to suggest that that would have increased this tax or that tax—the intention of the pilot, as I understand it, was to actually investigate and to find evidence to determine whether a different type of social assistance would result in better outcomes for social assistance clients, as well as for the taxpayer, in the delivery of those services. So I disagree with the premise of your question.

Ms. Donna Skelly: My question to you would be: Would your members support an increase to cover that or any of the asks that we've had so far? Exclusive of the pilot project, we had, up until today, about \$3.7 billion in asks. All of the presenters suggested that to cover that additional cost, we shouldn't go to the residential taxpayer, but rather business. Could you and would you, as a representative of the chamber, support an increase to business taxes to cover either the rollout of a Basic Income Pilot project or other asks from other stakeholders? Can your members support an increase in business tax to cover those costs?

Ms. Charla Robinson: I think what's also important, what I heard from the presenters who were at this table just in advance of me—

Ms. Donna Skelly: My question to you is about that. Could you—

Ms. Charla Robinson: I understand your question.

Ms. Donna Skelly: Could and would your members support an increase to taxes to cover these?

Ms. Charla Robinson: I understand your question, but the premise of the question I do not agree with, because those same folks also said that if you improve services for some of these programs, that it would actually result in reducing costs to other areas.

1050

Interruption.

The Chair (Mr. Amarjot Sandhu): I'll ask the audience not to interrupt the committee, please.

Ms. Charla Robinson: So I think we need to be looking at the balance of costs. Certainly, business—

Ms. Donna Skelly: Okay, great. So the chamber would support an increase in taxes?

Ms. Charla Robinson: I did not say that.

The Chair (Mr. Amarjot Sandhu): Fifty seconds.

Ms. Charla Robinson: I did not say that. What I said was, we need to look at the balance of the total increase of costs.

Ms. Donna Skelly: So is it a yes—

Ms. Charla Robinson: If putting money into a program here results in cost savings elsewhere, which it may, then that would not result in an increase in total costs.

So we would hope that the government would look at those opportunities.

Ms. Donna Skelly: That's fair. MPP Piccini had a question.

Mr. David Piccini: How much time do we have?

The Chair (Mr. Amarjot Sandhu): Twenty-five seconds. MPP Piccini.

Mr. David Piccini: How do your members feel about some of the measures we've taken to reduce some of the red tape and regulatory burdens in the sector?

Ms. Charla Robinson: Definitely, we're pleased with the movement in those directions. Some of the examples I gave—the change to the aviation fuel tax; that's not only an increase in red tape costs etc.—immigration changes to allow more participants. Those are all areas that we support, and we encourage you to continue.

The Chair (Mr. Amarjot Sandhu): Thank you. That concludes our time. Thank you so much for your presentation.

THUNDER BAY ECE UNITE

The Chair (Mr. Amarjot Sandhu): Next, I will call on Thunder Bay ECE Unite. Please come forward.

Please state your name for the record, and you have seven minutes for your presentation.

Ms. Lori Huston: Lori Huston. With me, I have a professional colleague, Marilyn Junnila. I will do the speaking, but she's here in support. Meegwetch.

The Chair (Mr. Amarjot Sandhu): You may start.

Ms. Lori Huston: Good morning. My name is Lori Huston. I sit here today as a mother, an early childhood educator, an advocate for child care and a strong ally to the Indigenous early learning educators and programs. I thank you, the standing committee, for the opportunity to share with you.

I'd like to start by telling my story of navigating child care in Thunder Bay for the last 12 years as a registered early childhood educator and a single mother for the last seven years.

With over 20 years in the profession of child care, I value quality care, and I know exactly how important it is for our children to receive a healthy start in education. Unfortunately, with my professional salary in child care, I couldn't afford to have my own sons in child care, which delayed my return to the paid workforce until my son was 16 months old. The cost of child care was down at that time, from a \$66 infant fee to a \$49 toddler fee, which allowed me a window to get back in.

Once my son was in child care, for the following two and a half years, I was paying an average of \$17,000 annually for his child care.

Thankfully, I timed my second child for the year that full-day kindergarten came into effect. I only needed to come up with fees for one full-time child spot and one after-school child care spot—still very expensive. Due to the lack of child care spaces here in the city, I couldn't find a centre to accommodate my needs. I was then in a situation of having to place my sons in two separate child care centres, making for longer commutes and additional stress.

Then my second child was old enough for full-day kindergarten. I couldn't find after-school care to accommodate two children, despite being on many waitlists. I was forced to use my own vacation time at work to supply an hour each day to meet them off their school bus. This went on for four months.

So, this is my child care story. I'm sure if you ask any others in the room, their story will have some similarities. Navigating child care over the last 40 years—not much has changed, unfortunately, for children and families in Ontario. Many of the stories may be far worse.

Today, I ask the government to reverse cuts to child care, and increase operating funding to keep pace with expansion. Child care is facing at least a \$48-million funding cut in 2020. These cuts will directly impact parent fees, access to child care subsidies and educators' wages in communities across Ontario. Municipalities have warned that cuts to child care will destabilize local child care programs.

The specific figures for Thunder Bay over 2019 and 2020 result in \$550,000 in cuts to their municipal child care centres.

Over 460,000 Ontario children and their families use child care every day. Child care cuts must be reversed, and child care funding should be increased to ensure child care programs do not have to close. Operating funding must be increased, to keep pace with the capital expansion of child care, or it will become even more expensive for parents.

We know that budgets are about choices. Spending on children is wise, mainly because if the government makes it affordable, with good quality care, our society will benefit

We know that child care often falls on the shoulders of women. With affordable child care, more women will join the paid workforce, there will be growth in the economy and more money in the pockets of parents. We know that this is a base for our province of Ontario and many other provinces—that we need to support women in the workforce. Child care plays a big role in that.

Early childhood educators bring a wide variety of benefits for children, families and society at large. However, these benefits are conditional on funding that ensures quality educators are recruited and retained in early years programs. Expand access without attention to quality and ECEs will not deliver the outcomes that the children need.

We are facing a huge issue with registered early child-hood educators in the province. We are coming up short. Our child care centres do not have fully qualified staff. We can't retain educators, and it's mostly connected to the wages. Currently, child care wages appear to be competitive with other occupations when workers are 15 to 24 years of age. However, child care wages are clearly uncompetitive with hourly wages paid to female workers who are 25 to 54 years of age in many occupations across the province. Compensation levels need to rise in child care if expansion is going to be possible, and particularly, compensation levels need to increase so that the staff that is recruited will be capable, well-qualified and will decide to stay in the sector.

I would like to turn my attention to some Indigenous funding concerns. I'd like to speak on the educators, as well as programs. As the former Indigenous program coordinator with Oshki-Wenjack, a post-secondary institute in Thunder Bay under the jurisdiction of Nishinawbe Aski Nation, a position I held for nine years, I have borne witness to the inequitable funding and educators' wages that fall way behind the rest of the province.

I would like to remind and inform the committee that Ontario Aboriginal Head Start funding has been capped since the mid-1990s, which means many of the programs have no outdoor playground equipment and are working within under-resourced circumstances. I am aware that Aboriginal Head Start programming falls under federal funding, but these programs are located in Ontario and many of these Aboriginal Head Start programs are sharing funding with provincial licensed child care centres.

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Lori Huston: For example, I've been supporting a First Nation licensed child care centre in Grassy Narrows which has not had an outdoor play structure for over nine years. We're on our third proposal and hoping to be securing a playground.

A transition to a high-quality, non-profit child care system looks like affordable fees, decent work and expanding public and non-profit spaces.

It's important that we shed light on and recognize the diversity of our Ontario families today. If we continue to overlook their experiences, it will be difficult to better understand them and create more inclusive policies.

Finally, to ensure reliable access to these vital services, Ontario should continue to steadily expand public and non-profit spaces with a goal of access for all families who need space and care.

Thank you. Merci. Meegwetch.

The Chair (Mr. Amarjot Sandhu): Thank you. We will go to the government side for questioning. MPP Piccini.

Mr. David Piccini: Thank you very much for your deposition today. I appreciate the opportunity. There's no doubt that child care is a big issue across Ontario and something our government wants to address and is working on. How we look at that choice and those decisions—I know, coming from a rural municipality, certainly the decision with the childhood tax credit was to give shift workers and others a little more choice in child care. We've got OPG's expansion with refurbishment and a number of advanced manufacturing jobs in our riding.

I was wondering if you could comment a bit on that choice piece, reflective of the different realities of working today, and what you would like to see the government further do to help expand choice in child care and just support families.

Ms. Lori Huston: We need access to care. Like myself, I had no access. I couldn't go to work. You can't pick work over your children. I totally surrendered.

We need spaces available and we need quality. Quality is non-profit, in a sense. Quality is qualified staff. We're seeing in the provinces of Manitoba, Quebec and PEI, where the government is supporting their programs and parent fees, which helps with a wage scale for early childhood educators—so it is moving to universal child care. BC has adopted the \$10 a day—so those types of things. But we need to see the money to have these centres operating in the spaces available.

1100

Mr. David Piccini: I hate to use local examples, but it's what I know and am comfortable with. I know that the EarlyON centre that we recently opened in Grafton in my riding was really critical—Grafton is a more rural area—for families.

When we look at that choice piece—you, in part, spoke about not-for-profits. Anything else you can elaborate on, on that choice and flexibility?

Ms. Lori Huston: Expanding spaces in the schools makes sense. It works for our families. Full-day kindergarten is universal child care. That's what saved me. It cut a whole year—my boys were young three-year-olds until November. That helped me. That was universal child care. We need to make sure full-day kindergarten is existing and stays in place. There is a ton of benefits and research already supporting the work that's done in full-day kindergarten with the designated early childhood educators in partnership. That really takes care of our preschoolers. We need to just look at our—

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. David Piccini: Sorry, you were saying that the full-day kindergarten was child care?

Ms. Lori Huston: There is a full designated early childhood educator teacher team that works in the kindergartens in Ontario, right? So that, to me, is not licensed child care. But between the two of them, it is reflective of our philosophies in early childhood, and it allows us as parents and educators to feel comfortable letting our three-

to four-year-olds go to school at an earlier start in junior kindergarten, because we have that support.

Mr. David Piccini: Why the focus solely on non-profits? I know that families in my area haven't been unanimous in just saying "non-profits." They have appreciated a variety of models and offerings.

Ms. Lori Huston: Sometimes there is a higher fee attached for families—for-profit—and it could be competitive to our average families trying to get into spaces. And so they are pinned up against—a for-profit may charge more. They may have different programs attached to their—

Mr. David Piccini: Would you just say that more choice is better though, writ large? Families want choice—

The Chair (Mr. Amarjot Sandhu): Thank you. Sorry to cut you off.

We'll have to move to the opposition side now. MPP Monteith-Farrell.

Ms. Judith Monteith-Farrell: I have two questions. One is: What is the cost of play equipment in Grassy Narrows?

The second question is: Do you have any ideas about the wait-list? How many families are waiting for your child care?

Ms. Lori Huston: The proposals that we're submitting for the Grassy Narrows play structures are \$100,000. If you are aware, Grassy Narrows is also a community that is affected by an environmental disability. We're looking at installing an inclusive playground that supports the disability of children being affected by mercury poisoning. These children are struggling with mobility, so there are different ramps, railings and different things that we're trying to emplace into this playground. So we're at just over \$100,000. I think that's comparable to playgrounds.

The second question, on the wait-lists in Thunder Bay: I don't have that number today for you. I just have my experience, where I've waited over a year.

Ms. Judith Monteith-Farrell: I know that in my family, that was the case. In my son's case, it's over two and a half years that they waited for space.

Ms. Lori Huston: And Marilyn, as the executive director for the Aboriginal Head Start here in Thunder Bay, has a two-year waiting list.

Thank you for your questions.

The Chair (Mr. Amarjot Sandhu): Any further questions? MPP Shaw.

Ms. Sandy Shaw: Thank you for your presentation.

I would just like to echo MPP Monteith-Farrell's comments about the cost to provide a play structure in Grassy Narrows. We are well aware of the injustice that has unfolded in that community. It has been many, many governments that have neglected—neglected—the poisoning of the water in Grassy Narrows. There have been promises, and they haven't been kept.

Something that governments have done is this jurisdictional football. They say, "It's not our responsibility." It's somebody's responsibility. In the meantime, people continue to get sick and suffer.

When you talk about children, and that all you are asking for is \$100,000 for a play structure for children who are suffering disabilities from the poisoning of their community, it seems very, very little to ask. It's hard to believe that it's being denied.

I guess my question around this very specifically, is: What funding have you applied for? Has it been under the Liberal government? Is it under this current provincial government? And is there anything we can do to make sure that the very least this community can see is a playground for their children?

Ms. Lori Huston: This has been an ongoing discussion between the supervisor and the licence, the provincial Ministry of Education and funding for their child care centre—which is no, no. They told them nine years ago that what they did have wasn't safe. That all had to be removed. So they have a few loose parts. They do have all their fencing and everything else up to standard. Then they recently campaigned through Building Skills for Change, with Olivia Chow-

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Lori Huston: —and then the supervisor just applied for Jordan's Principle funding and was denied. Now we're working with Jumpstart Canadian Tire.

Ms. Sandy Shaw: So, essentially, you've had to go to a private corporation, Jumpstart Canadian Tire, to get access to a play structure for children that are suffering from-

Ms. Judith Monteith-Farrell: Mercury poisoning.

Ms. Sandy Shaw: Yes. So I have to say to you that there are many things that have been raised at these committees that are just outrageous injustices. They seem like they're small things to this committee, but they're huge for communities. I just want to pledge to you that I know that as a caucus, the New Democrats will do whatever we can to make sure the kids of Grassy Narrows have, at least—if they can't have clean drinking water, that they at least have a playground.

Thank you for your testimony here today.

Ms. Lori Huston: That's not uncommon, in the remote, fly-in communities—and so we'll respond to any of the licence or the Aboriginal Head Starts. They don't have outdoor equipment. They don't have slides or anything like that. Those don't exist in the remote communities-

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. That concludes our time. Thank you so much for your presentation.

LAKEHEAD DISTRICT SCHOOL BOARD

The Chair (Mr. Amarjot Sandhu): Next, I will call on Lakehead District School Board. Please come forward.

Please state your name for the record. You have seven

minutes for your presentation.

Ms. Ellen Chambers: Thank you very much. Ellen Chambers, chair of Lakehead District School Board and on the board of directors for the Ontario Public School Boards' Association. I have with me-

Ms. Sue Doughty-Smith: Sue Doughty-Smith. I'm a trustee at Lakehead Public Schools.

Ms. Ellen Chambers: Thank you very much for this opportunity to present today. I've been a trustee for five years, and Sue is in her first term. It's nice to meet some of the people I saw at the Legislature in November over there. Between us, we are trustees, but we do have over 80 years of experience in Ontario education in our previous occupations that we retired from, as a teacher and as a student support professional.

As you know, the top funding pressures for most school boards across the province continue to be special education, supports for mental health, student transportation, and facilities and capital-related costs. In the north, we have the added pressure of ensuring that we improve our graduation rates. All of this takes appropriate and adequate funding.

A recent poll by the Ontario Public School Boards' Association, in partnership with Nanos Research, found that a majority of Ontarians agree that spending in public education is an investment in the future, and without it, we could not have the government's present focus on industry and resource development. Education of our children is always the key. If Ontario is open for business, we need to be open for education to meet the future business and social needs of the future. It is essential that our children are as important as business, and they deserve adequate funding. I'm sure we all agree on that.

Eighty-three per cent of Ontarians, in the Nanos-OPSBA survey, support or somewhat support school boards having more autonomy to ensure that their budgets reflect local needs. Ontarians are twice as likely to say that spending on public education is more important than eliminating the deficit. Two-thirds of Ontarians oppose or somewhat oppose having larger class sizes and less course selection in order to save money.

While the government may have increased overall spending on education, per student funding has actually decreased. This is felt dearly when we do our budgets, and it affects all of our students.

At Lakehead District School Board, we have just under 10,000 students. That's including our adult education. Our school district reaches from the Minnesota border of the United States to the south; three hours north of Thunder Bay, in Armstrong, Ontario; and along the CN north line to Collins, which is only accessible by rail, float plane or, if you choose to, you can canoe and portage in. Our population is diverse and includes many newcomers, and 21.2% self-identified Indigenous children. Many Indigenous students are full-time residents of Thunder Bay, while others come from the 22 other First Nation communities in northwestern Ontario and northern Ontario, and 21 of those communities are remote and from the Far North.

Needless to say, we're proud of our students, teachers and education workers. We could fill our entire 15 minutes here talking about our incredible education experiences. However, we have also felt the direct impact of past funding decisions.

Transportation: In 2017 and 2018, our transportation costs rose 18%. We significantly reduced our transportation services by overhauling them and looking at them, but we have to consider extreme temperatures, very little daylight in the winter months, a lack of sidewalks, and high snowbanks. The Ministry of Education at that time recognized insufficient funding across the province, and approved funding increases to boards based on efficiency and effective reviews. That was last done in 2010 at Lakehead public schools. Therefore, it wasn't looking at what we had already done to save efficiencies, so we didn't get the additional costs that the ministry had funded to offset those increases. We are presently struggling with that area, without those additional costs reflecting what we've done.

School operations funding also needs to be addressed. At Lakehead District School Board, our funding was reduced by \$1.5 million, and on an ongoing annual basis, there is about a \$1-million discrepancy between our school operations funding and our actual expenses. Imagine how difficult it is to provide services that are expected, with a critical discrepancy like that. In such a difficult situation, reinstating the top-up would alleviate this pressure.

There is also a moratorium on accommodation review processes, placed by the last government, and yet there is no direction from this present government as to when that will be lifted. We've endured three years of this. The government needs to address the moratorium on accommodation review processes, as school boards are funded on the utilization of space. Proposed larger classes at the secondary level will further exacerbate the utilization of space, creating empty spaces—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Ellen Chambers: Oh, good Lord—within the building.

Class size is a huge issue, as you know. It is not possible to run proper and adequate courses for secondary students on anything higher than 22.5 to 1. In other words, anything greater than that ratio is not workable. We would never be able to provide the breadth of courses to allow students to have a pathway to choose their future upon leaving secondary school, as we'd have to reduce the breadth of courses that we have.

Mandatory e-learning—and I will be frank—simply does not work. It would put students at risk, and would need board discretion for students to be excused from using it. This, too, would cause a ripple effect on class sizes.

Special education funding has been problematic for years with boards all across the province. In 2019, we had—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. We have to move to the opposition side for questioning now. MPP Shaw.

Ms. Sandy Shaw: Thank you very much for your presentation. I'm sorry you ran out of time, but I think I'll ask some questions that will allow you to fill in what you omitted.

Ms. Ellen Chambers: Thank you so much.

Ms. Sandy Shaw: I would just like to say that we have been hearing from school boards all across Ontario that the cuts to education have had dramatic impacts. There are three areas that I wanted to focus on, which are the cuts to education—and you did identify that in Ontario, we spend at the bottom of the pack, in terms of per capita spending on our education system. So I think it needs to be clearly identified that these cuts do have impact in the classroom.

While people certainly are concerned about getting our financial house in order in the province of Ontario, nobody asked to balance the budget by increased class sizes—no parents asked for that—and nobody asked for mandatory e-learning classes. No one asked for that.

My question to you, as a school board: Can you just talk about the impacts? What classes have been lost? What teacher layoffs? What kinds of special supports in schools have been lost with the cuts that we've seen to education in this province?

Ms. Ellen Chambers: Thank you. At the moment, the losses have been through attrition. In our particular school board, we have a collective agreement with the secondary school teachers. We honour our collective agreements; that's what we have to do, and we always do. We do have class size caps in our collective agreement, so at this point, we haven't increased any class sizes because of that.

But it has had an impact that teachers have retired. We have had to have some stay, in order to make those class sizes. But without the funding that we're getting to maintain those class sizes, which are in the collective agreement, that further causes us to take more money out of our reserves, which we have to use for that.

Frankly, we are not being funded enough to put the classes into place. We're not being funded enough to have all of the spaces in our schools. So it all goes down to funding.

Ms. Sandy Shaw: And your funding is tax dollars. I mean, your funding also is using taxpayer dollars—

Ms. Ellen Chambers: It is always; absolutely.

Ms. Sandy Shaw: Did you have a comment on this?

Ms. Sue Doughty-Smith: I would say the same thing that Ellen just spoke about. But also, when it comes down to the dollar figure, even for our board—we spend \$600,000 a year from that reserve to be able to do that. And because of those collective agreements, we have to do that. Even when you talk about things like hard-tech classes, for an example—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Sue Doughty-Smith: —you can't raise class caps that high, because they're capped at 24. Then what do you do with the rest of those students? So there's all that that you have to take into consideration—hard tech and soft tech.

Ms. Sandy Shaw: Okay. I'm going to pass to MPP Arthur.

The Chair (Mr. Amarjot Sandhu): MPP Arthur.

Mr. Ian Arthur: Just very quickly, because we don't have a lot of time left: The government is leaning back, in the midst of negotiations right now, on the wages and the percentage increase of the wages. They like to lean on how

Ontario teachers are some of the highest-paid in the country, which they are, but when you start looking at other demographics like plumbers or doctors or anything else, they're also the highest-paid, because it reflects the high cost of living. BC is the province that actually awards their teachers more, and the cost of living in Vancouver is also out of control, and there are a lot of remote areas. So there are many, many similarities in that.

Do you think that teachers are asking for too much right now?

Ms. Ellen Chambers: You're asking a question about negotiations here?

Mr. Ian Arthur: I'm asking for your opinion in the public realm.

Ms. Ellen Chambers: Personal opinion? No, I don't think they're asking for too much—

The Chair (Mr. Amarjot Sandhu): Thank you. We'll have to move to the government side for questioning now. MPP Piccini.

Mr. David Piccini: Thank you both very much for the work you're doing in our education system, and for coming here today. I appreciate the opportunity to speak with you.

I know you spoke on the accommodation review. I think that's important. Certainly, as an MPP from rural Ontario, I think the previous government had a very poor track record when it came to understanding the unique realities of rural Ontario, and subsequently we saw a number of closures. We committed to upholding the moratorium on school closures.

I know the minister has indicated that they are reviewing the accommodation review, reviewing that process. Have you written in to the ministry on that process and provided any feedback of local realities you'd like to see reflected? Or is there any message I can pass along on that to the minister?

Ms. Ellen Chambers: I haven't personally, no, but I know that the Ontario public school board has, and we have a deputation to them on that.

Mr. David Piccini: Okay, perfect. Thank you. Please feel free to share that with us—anything—and we will certainly pass that along to the minister.

Ms. Ellen Chambers: Okay.

Mr. David Piccini: I was just curious about the enrolment piece too. Is enrolment in Lakehead DSB up or down this year?

Ms. Ellen Chambers: I believe we increased some students this year. Actually, I'm going to tell you that there are two main—there's the separate school board and the English school board, so it kind of goes between the two of us here.

Mr. David Piccini: Overall,numbers that we had were down—

Ms. Ellen Chambers: Northwestern Ontario is not a growth area.

Mr. David Piccini: Such is the case in rural Ontario, so I can absolutely appreciate the challenges there.

You spoke about transportation. I know that in my local board, the transportation funding was up. Do you have the number? I have your number here, but it was up for student transportation, correct?

Ms. Ellen Chambers: You mean we got more money for it?

Mr. David Piccini: Yes.

1120

Ms. Ellen Chambers: Yes, we did, but we didn't get enough. We didn't get enough because it was based on that efficiency review, and our efficiency review here was done in 2010. Then we're talking about 2018. In 2018-19, we put efficiencies in, so we're being funded for things that we hadn't—actually, we're being punished for an old review.

Mr. David Piccini: Was special-ed funding up or down as well?

Ms. Ellen Chambers: From last year?

Mr. David Piccini: Yes, relative to last year.

Ms. Ellen Chambers: I don't have the budget in front of me and I can't answer that question.

Mr. David Piccini: The numbers I have are that special-ed funding is up \$16 million, transportation funding is up \$6.8 million and—

Ms. Ellen Chambers: You're talking about across Ontario.

Mr. David Piccini: Sorry, just let me finish—the Indigenous Education Grant is up \$1.8 million, yet enrolment is down in the board. I'm just looking for—

Ms. Ellen Chambers: Are you trying to get me to explain why I'm asking for more money—or you've given us more money and we still need money? I'm not exactly sure what you're asking.

Mr. David Piccini: I'm just saying the funding is up. But if you could take a deeper dive on where you'd like to see more money and why—you've explained the transportation piece.

Ms. Ellen Chambers: I can tell you that the special education money that we received is not adequate—end of story.

Mr. David Piccini: But it is up, relative to last year.

Ms. Ellen Chambers: I actually can't say that for sure, because we haven't done our budget for this year.

Mr. David Piccini: Okay. And transportation is up as well.

Ms. Ellen Chambers: It's not enough money for what we need. I'm just going to say that.

Mr. David Piccini: I'm just trying to understand, because enrolment is down, but transportation funding is up, and I think—

Ms. Ellen Chambers: Our costs are very high here in northern Ontario. We have to take into consideration in this city that we have to bus children because of the high snowbanks, because there are no sidewalks. It's not a matter of saying that we can make more efficiencies.

I don't know what you're doing. You just want to argue—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. That concludes our time. Thank you so much for your presentation.

MATAWA CHIEFS COUNCIL

The Chair (Mr. Amarjot Sandhu): Next, I will call on the Matawa Chiefs Council. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Chief Cornelius Wabasse: Good morning. My name is Cornelius Wabasse. I'm chief of Webequie First Nation. Webequie First Nation is a remote community, accessible by air and winter road only. Webequie First Nation is part of the Matawa tribal council, which includes nine other First Nations. We are here today to present northern and remote First Nations priorities.

Chief Harvey Yesno: Thank you, Chief. Good morning, Mr. Chairman, members of the committee. My name is Harvey Yesno. I'm chief of Eabametoong First Nation.

Remarks in Indigenous language.

This morning, I'm just going to highlight some of the challenges, I think. We've read all your material about Open for Business and the economy, and both long- and short-term goals. We do have an interest as Matawa First Nations; also as participating in the economy. Hopefully, what we will do here is provide constructive comments on how First Nations in Ontario can move forward together.

One of the things that I think you probably heard in your tour in the north here is about the high cost of operation and so on. I'm going to highlight the higher cost of living, program and service delivery, and the cost of infrastructure, like housing and so on, in the northern and particularly the remote First Nations, that's affecting families and members.

I think we all are facing the challenges as First Nations and we're saying, "Do not ignore us." As an example, just to give you some perspective here: In Eabametoong, a dozen eggs is \$5.60; a four-litre bag of milk is \$15.05; a litre of gasoline is \$2.20—in Neskantaga, it's \$2.69, which is a community just north of us. Our business power rate is 85 cents a kilowatt hour.

Chief Cornelius Wabasse: Thank you, Harvey. Up in Webequie, our gas price is \$3.06 a litre.

The rationale for presenting to the Standing Committee on Finance and Economic Affairs is to state the connection between land, treaty and revenue. The Matawa First Nations have worked to actively monitor and assess the scale of potential development in our homelands, our traditional territory. The preliminary estimate of \$60 billion related to the development of the Ring of Fire has been referenced and debated. The true potential of the development of the north may perhaps be in the trillions of dollars and must be considered in its full potential for wealth creation and revenue generation that will benefit First Nations, government and industry as a whole.

The development of the north will be multi-generational and international in scope. Certainty from First Nations is the key to the emerging northern economy. As such, the development of the north in Ontario must include equitable partnerships on a government-to-government basis between First Nations and the province of Ontario.

Matawa First Nations are not opposed to development; however, First Nations require a seat at the table. First Nations must be equitable partners with Ontario to deliver certainty for investment and development in the north. The basis of this partnership is recognition of Ontario's crown obligations, a government-to-government relationship that must be established, and a willingness to address our mutual interests and concerns.

Chief Harvey Yesno: This morning the Matawa First Nations are making recommendations to the Standing Committee on Finance and Economic Affairs to advise and report to the Ontario Legislature:

- (1) The province of Ontario consider Matawa member First Nations as equitable partners, and develop a comprehensive approach to wealth creation and revenue generation.
- (2) Discussions on a government-to-government basis must include time frames for specific deliverables and points of agreement to advance the Matawa member First Nations and Ontario economies forward.
- (3) The current realities of the north and remote First Nations must be a priority to be addressed, and that any economic plans are designed to produce immediate and tangible improvements in the quality of life and reduce the high cost of living for our First Nation families and members. This must be a priority and a joint effort of First Nations and the government of Ontario for development of the north and the emerging northern economy.

That's our presentation.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll go to the government side this time for questioning. MPP Smith.

Mr. Dave Smith: Meegwetch very much, Chiefs, for coming in today to speak to us about this stuff.

I have a couple of questions for you. You talked about the costs of some everyday items in your communities. It's kind of a rhetorical question. I think I know the answer to it, but I'm going to ask it anyway. What do you think is causing the largest increases in those items in your communities versus something in southern Ontario?

Chief Harvey Yesno: Probably the biggest factor is transportation. And just the size of the community. We don't have volume traffic. A smaller population.

Mr. Dave Smith: You have nine First Nations as part of your group.

Chief Harvey Yesno: Yes.

Mr. Dave Smith: How many of those are air access or winter road access only?

Chief Harvey Yesno: Five communities.

Mr. Dave Smith: So they would experience significantly higher costs because, really, it's seasonal that we can get things in with a truck; the rest of it is coming in by airplane. Things have to fly in during the summer. You can't drive across the lake like we do with the winter roads in the winter.

Chief Harvey Yesno: That's right. And the ice roads are very limited as well. We can't bring food and produce.

It's usually primarily for building materials and equipment.

1130

Mr. Dave Smith: So the reduction in the aviation tax—does that help your communities at all, in terms of the cost?

Chief Harvey Yesno: I haven't noticed a change. Mr. Dave Smith: Okav.

Chief Harvey Yesno: Our costs are high, so a little dip didn't—

Chief Cornelius Wabasse: There is very little change. When we have the winter road, in terms of prices—we don't really rely on the winter road for less cost. But still, we incur a lot of costs when we do the winter road season, anyway, too.

Mr. Dave Smith: And the winter road, really, is only open for about two months.

Chief Cornelius Wabasse: Yes. It depends on the weather.

Mr. Dave Smith: So it's very difficult to get product up into your area. Part of the reason that I'm asking these questions is that most people in Ontario really have no concept of what it's like to be in the isolated areas that you guys are in. I want to make sure that it gets on the record, that some of the challenges that you're facing are challenges that somebody, who has grown up in southern Ontario, would have no concept of and really couldn't appreciate. That's why I'm asking some of the questions that I'm asking.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Dave Smith: One of the things that has come up has been the carbon tax. Since all of your product has to be shipped in to you, is it fair to say that added costs from a carbon tax on transportation is going to add to the costs of everything that you have in your communities?

Chief Harvey Yesno: Again, I don't think we've noticed the change there. We're so busy. A little dip on a high cost of whatever doesn't really make any difference. We're still dealing with high costs. I have not observed the difference—let's put it that way—on fuel.

Mr. Dave Smith: Okay. Thank you very much. I appreciate your time.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll move to the opposition side now, for questioning. MPP Arthur.

Mr. Ian Arthur: After that rather failed attempt at confining you to an answer from the government, I'd like to talk a little bit—you talked about economies of scale. They're small communities. Goods cost more in small communities, outside the cost of transportation. It was high before the reduction in the aviation cost, and it was high before the introduction of cap-and-trade, and it continues to be high for your communities, the cost of goods, yes? You said yourself that there has not been a significant difference based on the introduction or the reduction of that one tax or the other.

Chief Harvey Yesno: No. An example we can give—I know how the national economy and cities pay attention to the unemployment rate. Up where we live, we're in a

sustained depression of 30% to 70% unemployment. So when there's a little change here and there, it doesn't really make any difference, because we're dealing with things in a far different scheme. We can't compare apples to apples here.

Mr. Ian Arthur: It's almost like an attempt to bring light to the differences of the north. He was looking at the problems in the north through a very southern lens.

Chief Harvey Yesno: Yes. I think we often have argued—and that's what we said here—that any planning that is done by the government here takes into account the geographical challenges that we face in the north, in programs and services and building infrastructure and maintaining infrastructure in the north.

Mr. Ian Arthur: And just very quickly, because I know Sol wants to ask some questions as well: What happens if climate change accelerates and the ice roads disappear entirely? What are the impacts on your communities? What if forest fires continue to get worse?

Chief Harvey Yesno: Well, I think one thing that we have observed is probably the use of winter roads. I think that it's undeniable, what has happened there in the last couple of decades already. That's probably all I can say to that question.

Mr. Ian Arthur: Okay. I'll pass it over.

The Chair (Mr. Amarjot Sandhu): MPP Mamakwa. Mr. Sol Mamakwa: Meegwetch for your presentation.

I know that when we talk about the cost of living, the cost of things in our fly-in communities, sometimes my colleagues across the way do not understand. When they want access to service, they just jump on a provincial highway or municipal roads, but us, we have to fly. That's the real difference.

But also, I'm wondering if you can explain to my colleagues and this committee—you talk about being partners, equitable partners, and that's being a treaty partner. Can you explain to them what "treaty" means to First Nations, to our people?

Chief Harvey Yesno: I know Ontario has taken a position that they were not a party to the treaty, but I think both Ontario and Canada passed an act to deal with Indian lands. I know that Ontario pays the \$4 each year, because they believe that is their legal obligation in the treaty, and in the 115 years of unlawful occupation of our lands, you paid less than \$10 million in that gratuity or whatever you call it.

We are occupiers of the land, and nine tenths of the law is possession of the land. We live there, and we're prepared to do whatever we can. We just want to benefit, as the treaty said, in sharing—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. That concludes our time. Thank you so much for your presentation.

CONFEDERATION COLLEGE

The Chair (Mr. Amarjot Sandhu): Next I will call on Confederation College. Please come forward.

Please state your name for the record, and you have seven minutes for your presentation.

Mr. Neil Cooke: Good morning. Neil Cooke, vice-president, Confederation College.

Ms. Michelle Salo: Michelle Salo, vice-president, finance and administration, Confederation College.

Mr. Neil Cooke: Thank you for this opportunity to speak to you today. I'm pleased to speak with you about the challenges facing workers today and in the near future, both here in northwestern Ontario and throughout the province.

This is a critical time for our province. There is a tremendous upheaval throughout our workforce as rapid advancements in artificial intelligence and robotics revolutionize every sector. Everything from manufacturing and forestry to the news media and the retail sector has been rocked by downsizing, layoffs, workplace reorganization and closures. At the same time, many employers struggle to find qualified people.

This is particularly true in technology and the trades, where the skills gap continues to widen and technologies evolve. We hear this regularly from employers, and I know none of this is news to any of you. As Finance Minister Rod Phillips said in his speech last fall to the Canadian Club of Toronto, the construction sector alone faces an unacceptable shortage of hundreds of thousands of skilled people here in Ontario. Ensuring more people acquire the professional expertise to succeed in this challenging and uncertain new world must be a priority for the 2020 Ontario budget.

Ontario's colleges have the ability to play a pivotal role in the province's success. The specialized skills and expertise that students acquire in a vast range of programs—in everything from 3-D manufacturing, engineering and aviation to health care, business and so much more—ensure that students of all ages across northwestern Ontario are equipped to land rewarding careers. Our programs are affordable, accessible and attract a full range of students from all income levels. This includes apprentices pursuing in-school training, and college and university graduates in postgrad programs, to prepare them for specific careers throughout our region.

We pride ourselves on our diverse student body of approximately one-third Indigenous, one-third international and one-third domestic students. Our students are the key to addressing the aging population and overall population decline in northwestern Ontario, as well as continuing to develop our skilled labour pool.

We have nine campuses that cover all of northwestern Ontario, from Wawa in the east to Kenora in the west to Red Lake in the north and all points in between, and we are currently engaging many other communities in our vast network of Indigenous communities throughout northwestern Ontario.

We currently offer 58 full-time programs in 11 areas of study, with 7,580 students currently enrolled this year as of our cut-off period last Friday. Some 3,621 of these students are full-time post-secondary students in all of our campus structure; 2,174 are domestic; 673 are self-identified Indigenous learners that we currently have in our ranks; 1,447 is our current number of international

students that are enrolled in the college; and 505 students who currently attend Confederation College are from southern Ontario, so they made a choice to come to this region. We have over 52,000 proud alumni—with about \$643 million in regional economic impact occurring as a result of what the college does.

1140

It will be essential in a new economy that we focus on producing college graduates with the professional and technical expertise to meet the needs of employers across Ontario and our north.

Having said that, we know that the budget process this year is challenging. There are limited resources and many pressures. Recent cuts and freezes to tuition have created even greater challenges to the Ontario college system in our ability to balance budgets. A lift on the freeze would allow colleges to better offset inflationary costs and help relieve the cost pressures to ensure the highest quality of program delivery.

Colleges recognize these challenges, and that's why our sector's submission to you this year is focused on a few specific priority items that help advance Ontario's workforce by strengthening our colleges.

Our first priority: As we all know, the demand for supports to help students with mental health challenges has grown dramatically in recent years. We conducted a survey in 2011 and again in 2019. This survey highlighted more issues affecting our Indigenous student population, which is not surprising given the history of how Indigenous people have been treated throughout Canada. These students indicate significantly higher mental health issues.

At Confederation College, our recent college health assessment survey in 2019 saw the mental-health-related disabilities grow 140% from our previous 2011-12 statistics. We know that the onset of mental health issues often coincides with the age of entry into colleges and universities. In our survey results, we see the need for more support for our Indigenous student body, given all of the integration issues that they face coming into a new situation like college.

Colleges recognize that early intervention on campus saves lives, helps to alleviate pressures on the Ontario health care system, and contributes to student success. However, that means there is an increased demand for more investment into mental health supports and services.

We are pleased that Ontario is investing \$3.8 billion over the next 10 years into a comprehensive mental health and addictions strategy. Knowing this, we are proposing that the government allocate a portion of this investment to all Ontario colleges. We are specifically seeking an additional \$75 million over the next three years to strengthen mental health services and supports on our campuses across Ontario. These monies will provide valuable support to northwestern Ontario.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Neil Cooke: Our second priority: As Ontario strives to become more energy efficient, we must reduce our energy usage on college campuses. There is an urgent

need to retrofit our college facilities and achieve breakthroughs in energy efficiencies.

We know first-hand that this is a good investment in Ontario. Confederation College received government support in the past to invest in energy reduction projects that reduced our carbon footprint while saving us approximately \$150,000 a year in energy costs. We have identified another list of projects which would further reduce our environmental emissions and result in additional cost savings.

Our third priority: We all know how important it is to boost apprenticeship training in Ontario. We desperately need more apprentices. This means that we must elevate apprenticeship training into its rightful place as something that is as respected and valued as every other post-secondary option. Ontario's colleges play a central role in this. We at Confederation currently deliver over 21 separate levels in 11 different trades to just about 400 apprentices annually, and we have the capacity to do much, much more

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. We have to move to the opposition side for questioning.

MPP Shaw.

Ms. Sandy Shaw: Thank you very much for your presentation. I want to focus on two areas that you presented here today. One is that we know that post-secondary has been underfunded for many years. The portion that is being paid is increasingly on the backs of students. It comes more from private corporations and students than it does from government. In the previous Liberal government, we know that we were underfunding education, and now with this Conservative government, we've seen a significant cut to the funding.

Can you explain to me how your institution has managed the cuts that you've received from the Minister of Colleges and Universities this year?

Ms. Michelle Salo: We're both fairly new, but our predecessors have gone through significant restructuring in order to accommodate the funding cuts, which obviously means stress in terms of quality of delivery and so forth.

Ms. Sandy Shaw: I'm interested in that. Some of the things that are important for students are experiential learning and the ability to extend access to post-secondary for all kinds of students. Do you think that would be a struggle for students to access the same kinds of education that have happened for generations before them?

Ms. Michelle Salo: No. I think we're still managing to deliver those services. It's just a much leaner process than what it has been in the past, so we've had to look internally at our processes and procedures to make sure that we can accommodate the funding changes.

With additional restructuring or changes, it would be difficult to deliver the service that we have today.

Ms. Sandy Shaw: So you're pretty lean as it is, and because you're professionals and because you're good at this, you're able to deliver the same kind of quality education. Would you agree that if you continue to see

more cuts, it will get very difficult for you to continue to offer quality education to students?

Ms. Michelle Salo: Absolutely.

Ms. Sandy Shaw: Thank you. The second area that I want to focus on—if there was any theme so far for our tour, it's the crisis that we're seeing in mental health in our province. We hear it from the people you would expect, from the health care system, talking about mental health, but we're hearing it from all kinds of organizations—public school boards, the legal aid clinic. Everyone is talking about how this mental health crisis, and the underfunding that we're seeing in mental health, is impacting them. There has been, even this year, a \$69-million cut from what would have been the investment in mental health from this government.

I guess I shouldn't be surprised, but it's disturbing in some way to see that even at the community college level, you're dealing with this mental health crisis.

Can you talk a little bit more about what you have done to assist your students, and what you see that the government could do more, to make sure that you're able to support the mental health and well-being of your students?

Mr. Neil Cooke: Yes. We've had to start to—

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Neil Cooke: We've had to diversify the amount of counselling and disability services that we provide to our students. We've tried to deal with more early intervention through our faculty members throughout the campuses.

Our students are coming in with a myriad of different issues and concerns, one of which is integration. Coming into a new system, into post-secondary education, is very stressful for a lot of learners. As they come in, if they're not prepared to come into the program to begin with, this just compounds that effect as it starts to snowball out of control. Depression and anxiety are probably two of the leading causes, but there are a lot of other physical disabilities that students come with that also complicate their learning environment.

Ms. Sandy Shaw: Thank you very much for your presentation. Good luck.

Mr. Neil Cooke: Thank you.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll move to the government side now. MPP Roberts.

Mr. Jeremy Roberts: Thank you so much for your presentation. A lot of really good topics were covered there.

On the mental health piece, we'll certainly bring that feedback back to our Minister of Mental Health and Addictions as he starts plotting out how we're going to invest those significant federal and provincial dollars into the sector.

I was particularly interested in the piece you were talking about, about the regional economic impacts of the college. Obviously, I'm sure you're well aware of the changes to the funding model that are being worked on right now through MCU. Obviously, one of those factors is moving to performance-based funding, and one of those

metrics will be the regional and community economic impacts.

I'm just wondering if there are any lessons learned from Confederation that you think other institutions can learn from, about how you've managed to translate your graduates back into the community, where they can stay here, become employed and help boost the local economy—that's really what we want to see right across the province—and what other things you might think we can do to help promote that here in this community for you.

Mr. Neil Cooke: I guess we can look at that from a couple of different perspectives. One is, when we're dealing in a lot of the partnership activity that we engage with, we're trying to meet the needs, and not necessarily direct but support those individuals who are looking for the educational needs for their community or their region. I think we really pride ourselves on developing those relationships.

If I look at it from an industry sector standpoint, what we are hearing loud and clear, through a number of different organizations here in Thunder Bay and across northwestern Ontario, is that they are looking for a workforce that is going to be trained and developed and is going to be located here. They feel that there is far more economic and social value by training our people locally and supporting their industries that they want to house here in this area. Whether it be resource-based, limited manufacturing or technology-based, they're looking for people in this region. That's what they want. They don't want to import workers.

I think the lesson learned for us is, listen and start to develop the resources that we currently have. Our people are our most valuable resource.

Mr. Jeremy Roberts: I appreciate that. I know my colleague also—

The Chair (Mr. Amarjot Sandhu): MPP Smith.

Mr. Dave Smith: I'll try to be quick on it. You've got 11 different trades.

Mr. Neil Cooke: Yes.

Mr. Dave Smith: And roughly 40% of your population is international students. How many of those international students would you guess are taking any of those trades? **1150**

Mr. Neil Cooke: I wouldn't have the statistics on it, but I think it would be relatively low. A lot of our international students can't take an introductory trades program to get into the trades because it doesn't fit into the confinements of their immigration status. A lot of them will go into multi-year programs so that they can seek out further immigration status from a different route. So it's probably relatively limited.

Mr. Dave Smith: So we have a shortage of about 150,000 skilled trade workers right now, and we're having difficulty getting people into the trades.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Dave Smith: Is there something we can do to help alleviate that with some of your international students, to get them into the trades?

Mr. Neil Cooke: Probably some of the things that coincide with the immigration pilot project here—if that were changed slightly to meet the needs from a more technology or trades-based perspective, that might help us. That may go beyond the reach of the provincial government, but that is something that definitely would encourage more international students to engage in trades and technology.

Mr. Dave Smith: Thank you. I'll pass it on to my colleague.

The Chair (Mr. Amarjot Sandhu): MPP Rasheed.

Mr. Kaleed Rasheed: Very quickly, I wanted to know how your outreach program in order to connect the Indigenous community members to other communities—what kind of outreach programs are you running or do you have?

Mr. Neil Cooke: Internally we look at integration strategies, trying to connect our Indigenous populations with our domestic and our international ones. We see that a real bridge to our future here in northwestern Ontario is integration. Again, that's a highlighted item that we've heard from the business community, that we lose a lot of our international—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. That concludes our time. Thank you so much for your presentation.

THUNDER BAY HEALTH COALITION

The Chair (Mr. Amarjot Sandhu): Next, I will call on the Thunder Bay Health Coalition. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Mr. Jules Tupker: Yes, good morning. My name is Jules Tupker. I chair the Thunder Bay Health Coalition. It's a pleasure to be here again today.

The report that you have in front of you—I don't think anybody who is here today was at the presentation last year, my pre-budget presentation. If you were, you'd recognize it, because it's exactly the same, other than an update on a couple of numbers that we had from previous years, and we had some updated numbers for 2018 that we put in the report. If I go back to my 2016 presentation to these pre-budget hearings, it's almost exactly the same. Things haven't changed. No matter how many times I come here and ask for improvements to the health care system, nothing ever happens. The previous Liberal government didn't do anything, and certainly this new Conservative government is also doing very little to improve that.

I would like to touch on each section in the report for a few moments.

In the hospital sector, our hospital, Thunder Bay Regional Health Sciences Centre, continues to experience gridlock situations—although not as frequently as in previous years, which is a good thing. The reason for this reduction in the gridlock, however, is due to the takeover of 64 long-term-care beds at the Hogarth Riverview

Manor, which had been left vacant because the home could not find staff to work in that facility. The filling of long-term-care beds, which we are in dire need of, with hospital patients to ease the overcrowding in our hospital is quite extraordinary—just amazing.

The situation in the emergency department has not eased at all. Patients are still left waiting on stretchers in the hallways for hours. A friend of mine who broke both his tibia and fibula just last Sunday was in the emergency department for over eight hours before a room could be found for him. He told me about police officers waiting in the emergency department for hours, waiting for violent, aggressive patients to be treated. Staff continue to be pushed to the limit as they try to deal with the backlog of emergency patients. The escalating drug and opioid crisis here in Thunder Bay has only exacerbated the situation.

In long-term care, the reports by staff of frustration at not being able to provide the care necessary to residents continue on a daily basis. Abuse and violent situations have not abated. The acuity of residents has risen dramatically over the years, resulting in staff injuries and burnout from trying to meet the needs of these residents.

The wages for PSWs in long-term care do not match the work that these workers perform, resulting in more and more PSWs leaving their chosen field, and fewer and fewer students enrolling in college nursing programs. The end result is a shortage of PSWs. As I have noted above, Hogarth Riverview Manor has not been able to find staff to work the 64-bed unit and has loaned the beds out to the hospital.

Here in Thunder Bay, as across the province, wait times have not improved. The wait times for a basic room in northwestern Ontario based on the North West LHIN's own figures average approximately 833 days. That's over two and a half years you have to wait for a long-term-care bed, with the wait times ranging anywhere from 61 days to 1,997 days in some communities—unbelievable.

The Liberal government, in their last budget while in power, announced a concerted effort to improve home care, but no significant changes were implemented. The current government has not taken any action on this important initiative, despite knowing that home care is more cost-efficient than hospitals and long-term-care facilities in caring for people. Private home care companies continue to dominate this field and continue to provide less-than-desirable service to patients and lower-than-required pay to workers.

I received an email from a home care worker yesterday outlining what is happening in one home care workplace. I recommend that you check out the video about Don and Penny—if you want to note this down, anybody, in writing—at www.stuckinthepast.ca. Have you got that? You click on that and you might find a very interesting Facebook video of a couple who were struggling with home care. It is stunning that this is a story that I have heard many, many times in the past from workers and families with other private home care providers here in Thunder Bay. The situation is unbelievable.

In mental heath, a drug and opioid crisis in Thunder Bay is well-known across the province, and puts an even greater strain on mental health workers. The opening of a new transitional facility is an important step in improving the situation, but a lot more needs to be done. I am certainly no expert in mental health services, but the people I know working in the field are very fearful of a lack of funding the government is providing here in Thunder Bay.

I just want to reiterate the recommendations that were made in the report that you have in front of you.

- (1) Increase hospital funding by 5.3% annually for at least the next four years to help hospitals overcome the issues they are facing.
- (2) Increase funding to long-term-care homes in order to allow for increases in staffing so that four hours of hands-on care per resident per day can be provided.
- (3) Move toward returning home care service to public not-for-profit providers, and provide increased funding to enable staff to be paid fair wages.
 - (4) Increase funding to all mental health programs. Thank you.

The Chair (Mr. Amarjot Sandhu): Thank you. We will go to the government side for questioning. MPP Roberts?

Mr. Jeremy Roberts: Thank you, Jules, for your presentation.

One of the common themes that has come up now across our two days of consultations here in the north—yesterday in Sioux Lookout and today in Thunder Bay—is the mental health crises that are being faced here in the north.

I've asked this question before of a few witnesses, and I'll ask it of you: If you could provide advice directly to our Associate Minister of Mental Health and Addictions on how to spend this \$3.8 billion that's coming in from the feds and the province in mental health here in Thunder Bay, what advice would you give him on how best to spend those dollars?

Then as a follow-up—obviously, as we start to spend this money, we want to make sure that we have clear metrics that will define success for these dollars spent. What are some of the metrics that you think we should be focusing on to measure the success of those dollars to make sure it's actually getting to the people who need it so desperately in these communities?

Mr. Jules Tupker: As I said in my presentation, I'm not a mental health worker—I'm not a mental health expert at all.

I can tell you that the people who work in mental health continue to tell me that their biggest problem is when the institutions were closed. The idea was to close the institution, which was a great idea, and bring the people into the public to allow them an opportunity to live in the regular community, and provide the services that are necessary for those people to lead a fair and healthy life. Those services have not been put in place at all. The previous Liberal government didn't do anything, and you have not done anything.

I would suggest that you either—I don't want to suggest opening institutions. But certainly there has to be some way of providing services to these people who are on

drugs, who are suffering mental illnesses—to have the services that they can access. Those services are not available here.

I don't know what it's like in southern Ontario, but again, you've heard it before: The situation in north-western Ontario and northern Ontario is totally different than southern Ontario. To access services here, you have to have those services. We don't have the services. People who are struggling with opioids and drugs and mental health issues do not have the services here that they need. That's what the money should be going to, to provide more and more services for these people.

Mr. Jeremy Roberts: I appreciate that. Thank you.
The Chair (Mr. Amarjot Sandhu): MPP Skelly.
Ms. Donna Skelly: Thank you for your presentation.

I'm from the Hamilton area, and we recently announced our Ontario health team. Hamilton has a very advanced, I would say, health sciences sector. We have a world-renowned cancer hospital research facility through McMaster University, so we are very fortunate to have such incredible institutions in the health sector.

1200

The experts in health care were pleased and actually embraced the new direction of the Ontario health teams. They feel it was long overdue to have an integrated continuum of care—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Donna Skelly: —and are quite looking forward to the transformation to address hallway health care, which is prevalent right across the province.

I'm just wondering—I know you're very critical of a lot of the things that have and have not been done in the health care sector. Have you looked at the rollout of the Ontario health teams? Just your thoughts: Do you see any advantage with that approach?

Mr. Jules Tupker: I do have some information on the Ontario health teams. It's very interesting. Ontario, a number of years ago, under the Harris government, tried to institute a system like that in Fort Frances. When I was a servicing rep with CUPE, we were able to put the kibosh to that, because we found that the whole idea of a health team involved rostering. So in other words, if you were a very ill patient and you had a bad history—

The Chair (Mr. Amarjot Sandhu): Thank you. Sorry to cut you off. We have to move to the opposition side for questioning. MPP Monteith-Farrell.

Ms. Judith Monteith-Farrell: Thank you. I'd just like you to continue on your thoughts on health teams.

Mr. Jules Tupker: The whole idea of the health team that was proposed in Fort Frances—which is a very out-of-the-way place, far away from Toronto, where anybody was paying attention—was the idea of rostering. So if you were a patient that had a lot of health issues, you would not qualify to join that health team. I'm serious: That was the intent. We raised that issue, and we brought that forward. We went public with that whole situation, and the idea was squashed.

Now, all of a sudden, your government has come up with this wonderful idea again. I think that's a very fearful thing—that I have about this whole idea.

The thought of a continuum of health care is great; I have no problem with that. The concern I have is that these health teams are going to be dominated by, probably, the hospitals, because they have the biggest budgets, and they are going to dominate. Maybe the funding that goes to each health team is going to be taken by the hospital, and some of the less-important organization parts of that team are not going to get the funding.

At the end of the day, there's still going to be rostering. I'll tell you, that is what's going to happen. That's what I'm fearful about, that these health teams are going to basically—the people that need the services the most are going to be not able to have those services.

Ms. Judith Monteith-Farrell: Thank you for that. We're in a time of evolution, and I'm sure the proof will be in the pudding. There are so many problems with our health system in Thunder Bay, and the frustration around this continued problem just staying around.

I'd like some comment with regard to the people that have to travel for health care in northwestern Ontario. As the health coalition, I know you know of some of the gaps that are in the Northern Health Travel Grant, and people who are unable to travel for health.

Mr. Jules Tupker: Exactly. We have all kinds of people that have to go to Toronto for specialized care. The travel grants: They are waiting months to get the funding back for a travel grant. It's untenable. That's the people from Thunder Bay going to southern Ontario for those special services. That's not even talking about the people that are coming from the northern reserves that have to fly in, and the cost for that, to come to Thunder Bay for referrals and then get referred to southern Ontario.

The cost and the delays for the payment of that is untenable. It's just not available.

Ms. Judith Monteith-Farrell: I'd like you to elaborate a bit more on long-term care. A majority of people coming to my office are coming with horror stories about the long-term-care system and home care systems. I'd like you to maybe speak a bit more about that. I think it's important that we know how critical it is here in Thunder Bay.

Mr. Jules Tupker: It's extremely critical. As I said in my presentation, if you have to wait 1,997 days—

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Jules Tupker: The average is two and a quarter years, just to find a bed. That's the average in Thunder Bay and northwestern Ontario. That's not just Thunder Bay, but it's also the district and Kenora. It's just untenable.

The people that are in long-term care—I had a mother-in-law who was in long-term care. Luckily, my wife and I would go there on a regular basis. I joined the family council, as the chair of the family council, at the long-term-care home that my mother-in-law was in. I constantly had people come up to me and say, "There's an issue here. My mother has missed her baths. She didn't get a bath at all this week." When I confronted the administration, they'd say, "Well, we don't have the staffing. We don't have the staff to allow them to do that, so we give them a bed bath." So they're getting a towelling. That's it.

Or I'd have other people coming and telling me about their family member sitting in a dirty diaper for hours. When I talked to the staff—because I used to be a staff rep for that home also—the staff would say, "We don't have the time. We're so busy trying to run around."

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. That concludes our time.

Mr. Jules Tupker: Thank you.

The Chair (Mr. Amarjot Sandhu): Thank you so much for your presentation.

Looking at the time on the clock, this committee stands in recess until 1 p.m., when we'll continue the public hearings. Thank you.

The committee recessed from 1205 to 1300.

The Chair (Mr. Amarjot Sandhu): Good afternoon, everyone. Welcome back. We'll continue the public hearings for the purpose of pre-budget consultations. As a reminder, each witness will receive up to seven minutes for his or her presentation, followed by eight minutes of questioning divided equally among the recognized parties. Are there any questions before we begin?

MR. JON POWERS

The Chair (Mr. Amarjot Sandhu): I would like to call the next witness, Jon Powers. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Mr. Jon Powers: Jon Powers. Mr. Chairman, thank you.

My presentation is to give you direction both in the short- and long-term spending priorities. The first one is climate change. I hate to break it to you, folks, but we're all human in this room and it is the humans who are going to be paying the price if we don't do anything about climate change. If you want a healthy, happy economy, you need healthy, happy humans, and you're not going to be able to have them if you don't take care of your species first. How dare anyone tell you otherwise. You're fighting for your race, your human race.

As far as keeping people on the margins that the province does, I would like to see one-stop shopping, for our disability board to merge with the federal government. You might be able to reduce your costs by half over the long term by having a shared board with the government of Canada, just like the province of Alberta is proposing and the province of Quebec is doing as well. I would like to see some adulting on these disabilities.

I want to see cancer killed. I don't want to see Cancer Care Ontario being closed. I want to see cancer killed. I want to see dementia killed. I want to see things like an autism cure. I don't want to see it as a political hot topic between parties; I want to see some adulting here. You're letting diseases kill your fellow humans. This needs to stop. Join with the feds, join with whomever you have to. Cancer can strike anyone, dementia can strike anyone and autism can happen to just about any child born in Ontario.

I want to see justice reforms. The costs of spending money on our prisons are absolutely outrageous. Nonviolent, first-time offenders should not have criminal records. The cost to society as a whole over the next 10

years in the entire country is that four million Canadians will have criminal records. That's \$2.8 trillion out of the economy over their lifetimes. I want you to think about that. Recoup some of that money back.

I would like to see changes in the Police Services Act. Currently, we have unelected, unaccountable chiefs of police dictating to municipalities what taxes they are going to pay. We have unelected, unaccountable police boards. In December 2018, the city of Toronto's police service was found guilty of human rights violations. The same happened in the same week in Thunder Bay for the OIPRD in the Senator Sinclair report. Perhaps if the service boards were elected and shown daylight, this racism garbage would not have happened in the first place. And it is garbage when police officers don't investigate homicides correctly. They're basically conspiring with the murderers.

I also want to see changes in the Police Services Act that would allow boards to fire chiefs of police who break their oaths of secrecy. In Thunder Bay we had a former chief of police who breached his oath of secrecy by blabbing about cases to our former mayor. I'm ex-military. I'm subject to criminal sanctions if I break my oath of secrecy. Yet chiefs of police walk away free.

I would like to see a merger. In Thunder Bay alone, we have two post-secondary institutions, yet none of their boards are elected or accountable for the money they receive. We have so many costs that can be shared. You can put them in the same student residence. You can share a cafeteria, a health centre, a fitness centre, a library, a governance model, student services, basic classrooms; yet we have two separate post-secondary institutions that should never have been allowed to be two. They should have only been one. That was made long before any of us in this room was probably born.

I would also like to see a non-partisan way of funding constituency offices. It is because of my constituency office that I am here today, with their assistance. If it was not for them, I would not be able to give you this information.

Thank you, Mr. Chairman. I think I'm done.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll start with the opposition side for questioning. MPP Monteith-Farrell.

Ms. Judith Monteith-Farrell: Thank you for presenting here today and for giving us some of the ideas that are coming from the citizens of Thunder Bay.

I'm wondering if you have some thoughts about the food insecurity in Thunder Bay.

Mr. Jon Powers: I did participate in our former MP, Don Rusnak's—I think it was in 2016 or 2017. I mentioned the idea of mandatory price equalization within the province. What that means is that people in Toronto will pay maybe five cents more per unit, whereas the people on First Nations, particularly in the north, would pay almost the same.

It is unconscionable for me to go to a grocery store in Thunder Bay and pay \$4 for something when they pay \$50 for the same thing up north. It's deplorable.

Ms. Judith Monteith-Farrell: Thank you.

The Chair (Mr. Amarjot Sandhu): Any further questions? MPP Shaw.

Ms. Sandy Shaw: You mentioned that you're concerned about climate change. I would just like to share with you that we also, on this side of the House, are very concerned about climate change. We moved an opposition day motion, to have the government declare a climate emergency in Ontario, and that didn't pass. We have other motions, most notably from MPP Arthur. We're looking for a ban on single-use plastics. So I'd like to let you know that we're trying to address climate change from the opposition side.

Do you have any very specific suggestions for what this government could be doing to address this climate change emergency that we're all facing?

Mr. Jon Powers: I have one simple answer to that. Do you remember being taught in school about the rock that killed off all the dinosaurs 65 million years ago? Do you know what the current rock that is going to kill off all the humans is? Climate change. You'd better start figuring out—there are no spaceships coming. There are no aliens that are going to come and rescue us and take us to another fancy fairy-tale land. It's up to us. We have to solve our own problems. It's our species.

It doesn't matter whether you're a woman, a man, Black, white, purple, orange or whomever. You are going to be paying the price—rich, poor, whatever. You've got to get that through your heads. When you go down to Toronto, you're fighting for your species. You're not fighting for your party; you're fighting for every human being in the province. That has to be told. Mathematics does not lie.

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Sandy Shaw: Thank you for your presentation today.

The Chair (Mr. Amarjot Sandhu): Any further questions? Thank you. We'll move to the government side. MPP Piccini.

Mr. David Piccini: Thank you very much for your presentation today, and thank you to MPP Monteith-Farrell for supporting constituents. I think this is what's good about pre-budget consultations and the grassroots democracy we live in, where people can do that. I know that I'm looking forward to locals in Belleville coming who have worked through my office. Irrespective of party colour, it's good that our elected officials support one in being able to testify before a government committee like this on the budget.

1310

I noticed in just doing some research that you spoke about fiscal prudence at the municipal level and at all levels of government, and really leading by example. You know the situation we're in. I'm the parliamentary assistant to the post-secondary file, colleges and universities, and one of the most alarming stats for me is that for every dollar we spend on post-secondary education, we spend four to service our debt. Talk to us about some measures you'd like to see our government taking in leading by example to help tackle that debt burden that we're in.

Mr. Jon Powers: Mr. Chairman, if Confederation College and Lakehead University were one single entity starting in 1965 to the present, I would imagine that the provincial debt would be about maybe \$15 billion less, both in duplication of capital and operations alone. That's just for one city.

Now, I don't know about the rest of the province, but it made no sense to me, studying the education system, that you would put one post-secondary institution in Port Arthur and one in Fort William, and then three years later you would merge them into one city. To me, that made no sense at all from the provincial perspective, but that was made long before either of us was born. We inherit good genes or bad genes. We have to work with what we've got and figure a way out of it.

Mr. David Piccini: Thank you.

The Chair (Mr. Amarjot Sandhu): Any further questions? Seeing none, thank you so much for your presentation.

Mr. Jon Powers: Thank you, Mr. Chairman.

THUNDER BAY DISTRICT HEALTH UNIT

The Chair (Mr. Amarjot Sandhu): Next I will call upon the Thunder Bay District Health Unit. Please come forward.

Please state your name for the record, and you have seven minutes for the presentation.

Mr. Jim Vezina: Jim Vezina.

Dr. Janet DeMille: And I'm Dr. Janet DeMille.

The Chair (Mr. Amarjot Sandhu): You may start.

Dr. Janet DeMille: Good afternoon. As I mentioned, I'm Dr. Janet DeMille, medical officer of health and CEO of the Thunder Bay District Health Unit. Mr. Vezina is a member of the Thunder Bay District Board of Health and mayor of the township of O'Connor. The Thunder Bay District Health Unit, or TBDHU, is one of 34 provincial public health units. The geographical area of the health unit is very broad, essentially the eastern half of northwestern Ontario. The population that we serve is 155,000 people.

Under the Health Protection and Promotion Act, or HPPA, the legislation that governs public health in Ontario, municipalities are responsible for public health. There are 15 obligated municipalities in the TBDHU area, the biggest of which is Thunder Bay, with 110,000 people. Consistent with the HPPA, governance of public health units is provided by the board of health, whose membership largely reflects the municipalities.

At the health unit, we deliver a wide variety of programming in the areas of health promotion and health protection, in accordance with the Ontario Public Health Standards, or the OPHS. As indicated by the HPPA, this is the mandate for public health that is developed by the province that boards of health are required to fulfill. The current version of the OPHS came into effect in January 2018

As you are aware, the government put forward significant changes to public health in Ontario in the budget of last April. These included changes to the structure of public health provincially and changes to the cost-sharing arrangement between the province and municipalities. It was very much appreciated when the timelines for implementing those changes were extended and the minister committed to a thorough consultation process.

The public health modernization consultation process which was launched in November is currently in progress. We were pleased to have the panel here in Thunder Bay for the first face-to-face meeting of this process. We will be providing further written input from the board of health, as well as on the part of our programs and staff. Guided by the ministry's discussion paper, we aim to provide meaningful input focused on ideas and solutions that will help strengthen public health in northwestern Ontario.

We are very supportive of the Minister of Health's vision of a strong, nimble, resilient and responsive public health sector that she has consistently articulated. The minister has also consistently recognized the importance of keeping Ontarians healthy as a part of health care transformation and ending hallway medicine.

Public health can help achieve that vision. Every day, public health staff work to keep people healthy and contribute to strong and healthy communities. As the saying goes, an ounce of prevention is worth a pound of cure. It is money well spent.

As medical officer of health, I am responsible for knowing and understanding about the health of the population, and the factors that are influencing it. It is in my capacity as medical officer of health, though, that I need to express considerable concerns about our current situation here in TBDHU.

In recent years, we have experienced significant public health pressures that have and will continue to pose challenges to us, to the community and to the health care system.

In March 2018, we declared a tuberculosis outbreak in the city of Thunder Bay that was centred in the homeless population. In June 2019, we declared an HIV outbreak in that same population. This is a significant impact on this community of people, who already bear a disproportionate burden of challenges, for many personal and societal reasons.

Related to the opioid crisis, TBDHU has the highest rates of morbidity and mortality related to opioids in the province. Rates of many infectious diseases are higher here, as are rates of chronic disease and associated risk factors such as smoking and alcohol consumption.

Issues such as vaping and the legalization of cannabis, and increased requirements in the Ontario Public Health Standards, 2018, are further examples of the pressures we have had to deal with.

Collectively, these issues significantly affect our capacity to deliver needed public health programs and services. Unfortunately, it actually moves us away from the minister's vision of a nimble and responsive public health system.

Further challenging this is our financial situation, especially in recent years. I would like to start off, though,

by acknowledging investments that the Ministry of Health has made, through us, that have allowed us to move forward on meaningful public health work in certain areas. This includes Indigenous communities funding, Northern Fruit and Vegetable Program funding and the Ontario Seniors Dental Care Program as examples. We are very much appreciative of these investments.

However, we have had no increases provincially in four out of the last five years that support general public health programming, which increasingly challenges our ability to deliver the public health programming that we need to.

In addition to our funding situation, we also have data that suggests significant disparities in funding levels across health units. TBDHU is the lowest on a number of indicators, when compared to other northern health units, for example.

We would strongly recommend that stable, predictable and sufficient funding be provided for the full delivery of public health programs, and that mechanisms to monitor and redress any funding disparities and to respond to emerging public health issues must be a part of this.

Further compounding the situation is the transfer of the cost for public health from the province to the municipalities.

The Chair (Mr. Amarjot Sandhu): One minute.

Dr. Janet DeMille: For TBDHU, the increase to the municipalities is 47%, and that is just to maintain the budget at 2019 levels. The ministry is keeping the increase to 10% for 2020. However, the full amount should be transferred in 2021, unless something changes.

I would like to end with some comments about public health and First Nations.

There are significant health disparities between Indigenous and non-Indigenous people that manifest in all of the issues that I have already mentioned. A strong and resilient public health system for northwestern Ontario needs to meaningfully include First Nations, to be able to improve and address these issues.

There was work being done on a number of fronts that advanced First Nations public health. We have been at the table for a number of these, including, for example, the Sioux Lookout First Nations Health Authority and the approaches to community well-being. We are aware of others as well, though, and are participatory in others.

I have two recommendations—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. We have to move to the government side for questioning now. MPP Piccini.

Mr. David Piccini: Thank you very much for coming here today and for the work you're doing.

Did you want to just finish on those two recommendations quickly?

Dr. Janet DeMille: The government has funded the work that we do with the Sioux Lookout First Nations Health Authority and other work, and I would encourage that. I would also encourage the updating of the Health Protection and Promotion Act to meaningfully include First Nations in that.

Mr. David Piccini: Thank you. I appreciate that. I know my colleague has a question here. There was just one

brief one I wanted to mention. You talked about the variance and the discrepancy between different public health agencies. This is a difficult subject, but I'll put it straight out there. When we look at all of the boards across—we live in a world of finite resources—and how we allocate those resources—I've spoken with my local public health unit, and we've talked about some of the work that they're doing and areas where they found internal efficiencies going forward. Can you speak to some areas that you're looking at, some core delivery? Has there been any room for those efficiencies or not over the past year?

1320

Dr. Janet DeMille: Under the direction of our board and leadership, we have been doing that for a number of years. We have documented examples of where we have found efficiencies and then reinvested them in some of those. I noted, for example, the tuberculosis outbreak. We actually added to our street outreach to better address those issues, and that was an internal reallocation. We've also, in the past, dropped some programming or aspects of programming in order to strengthen others.

Mr. David Piccini: Okay. Thank you very much.
The Chair (Mr. Amarjot Sandhu): MPP Rasheed.
Mr. Kaleed Rasheed: Thank you so much for joining us this afternoon.

I just wanted to get your feedback, your thoughts, on our government program for seniors' dental care. As you know, we are investing about \$90 million in this program. I just wanted to get your feedback, your thoughts, on what you have seen so far. Has there been any interest—I'm sure there must have been. But what kind of interest are you seeing right now in this region for this program?

Dr. Janet DeMille: We have been implementing that program. It has been quite a challenge. It's a big program, and it's new to us. We've launched the program, and we are currently trying to engage dental care providers to be able to deliver that and going through all of the basic work of implementing a program.

We do have people calling us, though, who are very much interested in it. I don't have the details with me right now—I certainly can provide that—but we do have people expressing interest in it. Unfortunately, right now, we're needing to put them on a waiting list as we build the capacity to be able to serve them.

Mr. Kaleed Rasheed: Awesome. Thank you, Chair. The Chair (Mr. Amarjot Sandhu): Any further questions? We will move to the opposition side. MPP Mamakwa.

Mr. Sol Mamakwa: Thank you very much for the presentation.

I know that in my riding of Kiiwetinoong, public health is pretty much non-existent in our communities. I know that there are currently 35 public health units in Ontario and that there's a merger, which has been delayed to this year sometime, into 10 new agencies. That would mean, I think, that you would be responsible for the fly-in communities up north once that merger happens. How will you provide good public health services, for example, in the community of Fort Severn?

Dr. Janet DeMille: That's a real challenge, and I have to say that I totally agree with you. I think there are huge disparities in health between First Nations and non-First Nations people. Public health can help redress those. Public health in First Nations communities has been inadequate.

It is certainly a challenge in delivering programming in those areas. However, we've been working with the Sioux Lookout First Nations Health Authority on their approaches to community well-being. It's basically a public health model, a First-Nations-controlled-and-governed public health system. I have to say, it's been challenging but a pleasure to be at that table to see SLFNHA and others taking ownership and control of public health service delivery. The two health units have worked to be able to very much support that, and the board of health, with Mr. Vezina and other members have really strongly supported that as well.

If we were to regionalize or even if we were to maintain independent public health units, I would really look to strengthening that, to working with that and to working with SLFNHA, guided by the chiefs, to really strengthen and look at what does public health across northwestern Ontario look like.

The Chair (Mr. Amarjot Sandhu): MPP Shaw.

Ms. Sandy Shaw: Thank you for that. I just wanted to let you know that we understand the role of public health. In some way, we went from a Premier who thought that public health were the people who put stickers in restaurants to understanding the depth of what you do now, especially with the impending notion of a coronavirus. We know that you're on the front lines, protecting people and keeping people safe.

In the limited time that we have, though, I wanted to refer my question to Mayor Vezina—I kind of wanted to ask you about a trophy, but we can maybe do that afterwards. I want to ask you about the impact that these cuts are going to have on the municipal tax base. We were at AMO, and we heard time and time again that this downloading of costs to the municipalities is going to either result in an increase to taxpayers or it's going to—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Sandy Shaw: —result in reduced levels of service that are already at reduced levels of service. Can you talk really quickly about the impact this is going to have on your municipality and your ability to deliver those services?

Mr. Jim Vezina: It's not only the health unit costs that are being downloaded onto municipalities. At the end of the day, municipalities will do what we have to do. If that means that we have to raise taxes to support the Thunder Bay District Health Unit, the policing costs, EMS, or the Thunder Bay district social administration board, that is what we are mandated to do. We have no choice in it; we're a creation of the province.

But we are also going to ensure that ownership of those debts is going to be passed on to where they belong. Municipalities should not be funding health care. We should not be funding social services. Those are the responsibility of the province—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. That concludes our time. Thank you so much for your presentation.

NESKANTAGA FIRST NATION

The Chair (Mr. Amarjot Sandhu): Our next witness is Neskantaga First Nation. Please state your name for the record. You have seven minutes for your presentation.

Chief Christopher Moonias: My name is Chris Moonias, Chief of Neskantaga.

Remarks in Oji-Cree.

Mr. Chair, members of the committee, I'm Chris Moonias, Neskantaga First Nation, a remote northern community approximately 400 kilometres north of Thunder Bay. There are about 400 members in the community.

I'm here not as a stakeholder but as a treaty rights holder and a partner. I am here today to speak about suicide. What we are seeing in our northern communities is more terrible and horrific than anyone should have to experience. Suicide is a disease and the leading cause of death of our young people. It is a crisis and an open wound which never seems to heal.

I am here today because I am sick and tired of burying our young people. I've been doing this for 30 years. My community suffers loss after loss, with no end in sight. In our northern communities, I have personally performed CPR on 23 suicide victims—unsuccessfully. For many of us, this is our reality.

We are small close-knit communities where we know everyone as relatives, friends, work mates, buddies. Although we are personally and intimately connected to those who attempted or committed suicide, we must still provide those services as first responders and crisis workers. I can tell you first-hand that it's traumatizing and affects you for the rest of your life.

During the holidays, there were seven suicides in NAN territory. Five of those were Matawa First Nation community members, including one from Neskantaga. While I was in a neighbouring community assisting with a suicide crisis in Nibinamik—I was carrying my young cousin's coffin from a plane when I received a call. I was notified that a young woman, my best friend's daughter and a mother of two children, had taken her life. This was on December 30, 2019. The entire community was devastated, in a state of unbearable grief. Rather than risk further tragedy, we worked around the clock, kept the community safe, having no time or space to grieve or cope. The community had little to no help from outside resources to stabilize the community.

Instead of being able to focus solely on addressing this crisis, we are asked to put together a proposal for funding to cover any costs incurred while there was this crisis. We are constantly dealing with crises caused by historical and current trauma—marginalization, sub-standard living conditions, including housing and infrastructure, and racism.

We have 26-year-olds who live in the community who have never been able to drink water from the tap. That's

how long we've been under a boil-water advisory. What kind of message do you think that sends to the community and to our youth? It is downright dehumanizing, and that's where the hopelessness comes from.

Neskantaga has had 16 suicides within the past nine years. Since 1980, 41% of those who have committed suicide were between the ages of 13 and 15; 40% were females and 60% were males. Neskantaga makes up more than 1% of NAN membership and yet our community accounts for 5% of suicides. Neskantaga First Nation declared a state of emergency in 2013 due to suicide. The state of emergency has not been lifted because nothing has been done.

My community is being asked to support a new development project in the north that will affect harvesting jurisdiction and stewardship of the land—a project that will ultimately change our way of life forever. Development cannot happen without Neskantaga's free, prior and informed consent. Free, prior and informed consent cannot be obtained while the community is in a constant state of crisis.

We need to start addressing suicide together as partners with the province, as the treaty land partners we are.

Our recommendations: We require an intergovernmental table to creatively fund and provide support for community-specific initiatives aimed at suicide prevention and crisis support; accessible, direct and flexible funding which is reflective of the realities of trauma and crisis services; and funding for community-specific planning and implementation.

The time of empty promises of help and further studies and plans without action has passed. Life is on the line and we need action.

In the coming weeks we will be rolling out our community-based prevention and crisis management approach. I will formally reach out to all levels of government to start addressing suicide together with action. I'm tired of this. I want to get things done. I need help. Thank you for your time.

The Chair (Mr. Amarjot Sandhu): Thank you so much. We'll go to the opposition side this time for questioning. MPP Mamakwa.

Mr. Sol Mamakwa: Thank you, Chief Moonias, for the presentation. Time and time again in question period, with colleagues working at Queen's Park, I bring these issues up.

Yesterday we were in Sioux Lookout; even today there were certainly a lot of issues brought up by people who spoke about the crisis, whether it's the mental health crisis or the suicide crisis. Some of the comments I got from my colleagues around the table were, "You talk about these things and we just need to believe you." I'm very happy that the group that is here is hearing these things first-hand at the community level.

I think the time for playing jurisdictional Ping-Pong in the lives of youth in the First Nations communities is not acceptable anymore. I think there's an opportunity here for the province, again, as a treaty partner. Ontario is a signatory to Treaty 9 where Neskantaga is located, and we need your help. I'm not sure if you have any questions. I just wanted to comment on that. Do any of you have any questions for him?

The Chair (Mr. Amarjot Sandhu): MPP Shaw.

Ms. Sandy Shaw: It has been a very emotional morning for us here. We're in the opposition. I sit beside Sol. We hear his pain. We hear him advocating—fighting the injustices that we're here hearing about first-hand.

I also want to say that we are on opposite sides from this government, but I'm hoping that what this government has seen with their very own eyes—they can't say they haven't seen it. It's one thing to hear numbers and not understand the depth of a tragedy, but we're here. They're seeing with their very own eyes. I have faith and hope that the government side will take this message back and make sure that something can be done, some resources can be sent your way, that there will be an acknowledgement that this is nothing short of a human tragedy and that we all should be responding to that.

We understand that you need help. Is there one very specific thing that you could ask here today that's coming from your understanding of the community that you lead that we could advocate for and fight for in the coming budget?

The Chair (Mr. Amarjot Sandhu): One minute.

Chief Christopher Moonias: I've always talked about—when we get funding, it gets eaten up somewhere else or gets used somewhere else, but it never reaches the community. That's what we want—to have direct-access funding.

Ms. Sandy Shaw: And control over it.

Chief Christopher Moonias: We know what we want. We want to control it. We know what we want. We know how to get there. We just need you guys, as partners, to help us get what we want.

Ms. Sandy Shaw: Yes. You live it. You know the problem.

Chief Christopher Moonias: I live it. I know it.

Ms. Sandy Shaw: You don't need to be told; you just need to get the resources you need.

Chief Christopher Moonias: Yes.

Ms. Sandy Shaw: Well, I want to thank you very much for your presentation here today.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll move to the government side. MPP Skelly.

Ms. Donna Skelly: Thank you, Chief Moonias. I would love to talk about the issues you've raised in terms of youth suicide, but four minutes does not give it justice. We have been discussing this, and I look forward to a more indepth conversation with MPP Mamakwa, because I think it's going to require far more than what we're talking about today.

I would, however, like to ask you about the Ring of Fire—the opportunities that it could present residents within your community with. Could the share from the revenue generated from that be used to create a proper water treatment facility, for example, to provide clean water? Is that the type of exercise that we need to look at and explore?

Chief Christopher Moonias: That's the thing. The community is not—that's not their priority right now. Their priority is ensuring that there's enough housing, making sure that their quality of life is addressed and their rights are protected. They always talk about community. That's how they're surviving right now—the land-based activities that they're doing.

Ms. Donna Skelly: Are you concerned, then, about the build-out of the Ring of Fire? Is there a conflict?

Chief Christopher Moonias: Well, what they want to do is be true partners if development is going to happen. They want to ensure that there's free, prior and informed consent for development to happen in the north. Right now, we're being dictated to on how we should make that decision.

Ms. Donna Skelly: By whom?

Chief Christopher Moonias: By Ontario, by the funding agreements that we got.

Ms. Donna Skelly: I honestly don't know; is there no conversation? Is there not an ongoing conversation to try to reach an agreement?

Chief Christopher Moonias: We were having some success in informing the community, to make them understand what is going to happen in the north—the impacts and the potential benefits in the north—with the Ring of Fire. But that funding has been pulled. When we were communicating, that gave us the opportunity to engage our community.

Ms. Donna Skelly: I don't know how much time we have left, but I wanted to ask you about money flowing. We hear, removed from your community, from the north, that there is a substantial amount of money—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Donna Skelly: —that flows to northern communities. Where does it stop? Why is it not getting to the people who need it most, or is that just incorrect information altogether?

1340

Chief Christopher Moonias: Well, it's a little bit of both. Some money flows, but sometimes we're busy, especially when those crises happen. We're obligated to pay for funerals. One crisis in a northern community may cost up to \$100,000. That's to bring families in and funeral costs and stuff like that. It does get very expensive. It's funding which we have no money for.

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize. That concludes our time. Thank you so much for your presentation.

Chief Christopher Moonias: Thank you.

ONTARIO ASSOCIATION OF CHILDREN'S AID SOCIETIES

The Chair (Mr. Amarjot Sandhu): Now I would like to call upon the Ontario Association of Children's Aid Societies. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Ms. Nicole Bonnie: Good afternoon, everyone. My name is Nicole Bonnie, and I am the chief executive

officer for the Ontario Association of Children's Aid Societies. We have existed and been in place in terms of supporting children's aid societies across Ontario for over 100 years; in addition, the sector in general of children's aid has existed for that same duration of time. We currently serve a membership that represents 47 of 50 children's aid societies and Indigenous child and family well-being organizations, as well as one pre-mandated agency in Ontario. I'm particularly grateful for the opportunity, and the association is grateful for the opportunity, to present to the Standing Committee on Finance and Economic Affairs today. We share joint desires to improve the outcomes for children and youth across Ontario.

The child welfare sector has been engaged in a collaborative and positive consultation process with the government to strengthen, modernize and improve the child welfare system, really working in strong partnership, and I want to highlight that in terms of multiple joint efforts. With that, we are working collectively towards strengthening the system so that every child, youth and family working within children's aid societies is placed at the absolute centre of decision-making, with high-quality and good supports. That includes community supports and children's aid supports.

Currently, in terms of my presentation today, I really want to urge the provincial government to invest that continual investment in change management within the child welfare system so that it can be sustainable and strong in order to serve the most vulnerable and most marginalized within all of our communities.

There will be six areas that I'll be covering today. The first that I want to highlight is around improving and looking at and fixing the current funding formula. As a part of modernization, we really want to urge the government to look at the current funding formula through which agencies are funded. This year there are an expected 50 agencies that will be directly funded in the province of Ontario. With this, we recognize that we are 9% of the overall Ministry of Children, Community and Social Services budget.

At the same time, approximately 42% of the province's children's aid societies were facing a deficit in 2019. We want to recognize that there is significant strain on the system, especially when we look at the fact that our agencies serve the most marginalized children and youth across the province, and so investments are needed to ensure the financial stability of these agencies, as well as the stability of the sector.

We also want to recognize that although there are great features to the current funding formula, there are areas that create disadvantages within the system, as well as inequities that we currently see. In order for there to be a successful modernization—and I know the government is very invested in this change and modernization within the system—we're asking for investment supports over the next five years in order to ensure the successful landing of modernization and the changes that are needed within this 100-year system.

Secondly, we also want to recognize, on the heels of a very moving presentation in support of Indigenous families and youth across our province, that we 100% stand behind Indigenous communities in their desire to care for their own children in communities. We stand behind that and certainly look at how we continue to support truth and reconciliation efforts, working alongside our sister association ANCFSAO as well as Indigenous communities. When we speak of Indigenous communities, of course, I'm referring to First Nations, Inuit and Métis. We're asking for there to be continued investment to support the repatriation of children and youth to Indigenous communities and stronger Indigenous agencies to be able to care for their youth and children, as well as to address the overrepresentation of First Nations, Inuit and Métis children in the system.

Thirdly, we are also looking at our service and our service provision. In order to increase alignment and reduce fragmentation, we are asking for support from this government to endorse the use of—a community practice—Signs of Safety, which is a service model that we are looking to implement across the province to improve outcomes and to bring better alignment. We recognize that in order for this to be adapted to the landscape of Ontario, we would need to effectively integrate truth and reconciliation principles as well as anti-oppression principles.

In addition to that, when we're talking about our vulnerable children and youth that we serve—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Nicole Bonnie: —human trafficking continues to be a growing form of abuse in Ontario. We're certainly looking at wanting investments to go alongside to produce strategy and education programs for workers to know how to effectively support children and youth who are involved in trafficking, because we know that children and youth in care are extremely vulnerable to this.

Fifthly, we want to ensure the success that we've seen and the investment from this province in addressing anti-Black racism through One Vision One Voice; that we reproduce this project to address other forms of overrepresentation in our system, including mental health and disabilities, LGBTQ youth and First Nations youth; that we create targeted practice frameworks to support that—and lastly, that we strengthen our Child Protection Information Network system that was launched in 2014 to improve data collection.

Thank you so much for hearing my submissions today. The Chair (Mr. Amarjot Sandhu): Thank you. We

will go to the government side this time for questioning. MPP Roberts.

Mr. Jeremy Roberts: Thank you so much for joining us today in Thunder Bay. I know you made the long trek up from Toronto to join us here today.

Ms. Nicole Bonnie: You're welcome.

Mr. Jeremy Roberts: It's much appreciated. Also, I need to commend you. Both your organization and all of our children's aid societies across the province have been great partners as we start to launch this modernization process. I know I speak for both myself and Minister Dunlop in saying we're excited about the path ahead.

Just to pull out some more thoughts from you on the modernization process: Obviously, modernization is exciting but also can come with a bit of anxiety because it's unknown change. Can you touch on what are some of the biggest anxieties right now—certainly, you mentioned the funding formula—but also touch upon some of the biggest opportunities you see for us in this modernization process?

Ms. Nicole Bonnie: Thank you for that question. I believe that some of the biggest opportunities that lie ahead for us are really to look at how we define child welfare within Ontario. Over 90% of the work that happens within our system happens in communities, in terms of preventive work, but we are often known for the 5%, in terms of when a child has to be removed from their home.

In terms of reconstructing how child welfare is seen, that it has strong preventive and protective features within Ontario—because really that's where 90% of the work is and that's where the investments should be, ensuring that children are able to stay at home safely within their communities and that community members have the supports they need within communities to support them in that. So I think in building strong collaborative partnerships with other systems and other sectors in order to accomplish that, like with health, education, disabilities, mental health, and violence against women, there is a wraparound approach that we can look at, redefining child welfare that encompasses other partners in order to accomplish this, and it's not just the responsibility of child welfare.

Mr. Jeremy Roberts: Sure. One of the things that I've really been struck by in my time working on this file is travelling around, visiting different children's aid societies, and finding some of them that are really excelling in different areas. When I visited Peel, they have a focus on new Canadians and dealing with diverse communities, because they represent the area that includes Pearson. In Ottawa, my home area, it seems that they are really leading the way on Indigenous partnerships and on pioneering and getting customary care ingrained into the system.

Because we're up here in northern Ontario, I'm just wondering: Are there any best practices that you're aware of in some of your member societies up here in the north that we could learn from in some of our communities down south?

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Nicole Bonnie: Yes, I would say that the north has a very—by way of geographical challenges, they have been forced to work with community in a very different way, similar to my first point, where a lot of innovative practice in terms of multi-service agencies, kind of one-stop-shop ways of serving the community, are different trends that we see happening in the north in a very different way than it's happening in the south, in terms of more isolated, independent—certainly, effort is made in the south, but the north has a stronger way of really collaborating.

One of the best practices I've also seen throughout all children's aid societies is recognizing the fact that we serve the most marginalized within the communities that we serve. These are children and youth and families where there are multiple intersections of poverty, mental health, racialized, Indigenous, and we have to recognize the identities of those we serve in order to do a better job.

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. We have to move to the opposition side now. MPP Monteith-Farrell.

Ms. Judith Monteith-Farrell: It's nice to see you again, and thank you for your presentation.

In our work in our constituency office in this area—I'm wondering about the role you see the children's aid society playing in supporting families. That's an area that it seems like, when you talk about that intersectionality of all the different issues, they come to rest in families. So from the perspective of children's aid societies, how do you see your role in dealing with families or helping families, and how do you see that that could be expanded?

Ms. Nicole Bonnie: Absolutely. Thank you for your question. Oftentimes there is a very singular narrative of children and youth, but the majority of our work is actually with families, and it's in the community in terms of being able to support that—as I said, over 90% of that.

I definitely recognize that there needs to be a stronger multidisciplinary approach in supporting families. I connect that to the fact that while we are supporting the safety of children and youth, there is a strong need around violence-against-women services, for instance, where many of our families come to our attention. I believe it's one of the leading factors, either the second or third, in terms of families coming to the attention of children's aid, which means that there is a broader issue and different levels of social determinants of health that include poverty and food security.

With that, children's aid cannot be all things, and so we really do need, when you talk about that intersection, that there is that investment and strong coordination within communities in order to support the family in a broader sense.

Ms. Judith Monteith-Farrell: Thank you.

The Chair (Mr. Amarjot Sandhu): MPP Arthur.

Mr. Ian Arthur: Thank you so much for your presentation. You talked a little bit about the funding formula and the government review being a positive thing, but that there are some areas that you would like specific attention paid to. Can you elaborate a bit more on what actually needs to happen with that funding formula, just so we have it on record, so there's a very specific ask for the government after this?

Ms. Nicole Bonnie: Absolutely. Currently, right now, specifically with the funding formula, it certainly has improved. The current iteration came from just being based on the children that you have, and children and youth in care in terms of numbers, to looking at also the socio-economic, more social determinants of health factors within communities. So part is funded by that, and the other part is funding the actual numbers that inform children and youth in care in your agency.

Because, as I said, we have seen a growing trend— Ontario has the lowest number of children in care when you compare Ontario to all other provinces.

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Nicole Bonnie: So we would like to see a funding formula that really speaks to the 90% of community work that's prevention-based, and strengthening that.

To the question that came earlier around how we better wrap around families and support families: The funding formula, to reflect that, would really strengthen the current practice that's happening and is trending in the right direction.

The Chair (Mr. Amarjot Sandhu): MPP Shaw?

Ms. Sandy Shaw: It's my understanding that in Brantford, the children's aid society there, the board resigned because Ontario is underfunding—and cuts to staff. Can you make any comments on that and the outcome of that? That's something we wouldn't like to see happening in other children's aid societies. It seems to me that that was a direct response to the underfunding of a much-needed service that your agencies are delivering.

Ms. Nicole Bonnie: Absolutely. I think that that really speaks to the sustainability of the sector and the financial pressures, and the—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. That concludes our time. Thank you so much for your presentation.

ONTARIO HUMAN RIGHTS COMMISSION

The Chair (Mr. Amarjot Sandhu): Next, I will call on the Ontario Human Rights Commission. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Ms. Renu Mandhane: Thanks. My name is Renu Mandhane. I'm the province's human rights commissioner. I am here with my colleague, counsel at the commission Insiya Essajee. Thank you for having us appear before you today.

I encourage members of this committee to review the commission's written submission, which was prepared jointly with front-line correctional staff. This joint submission is unprecedented. The commission and front-line staff have come together in the face of a crisis in Ontario corrections.

Ontario's jails have been neglected for decades. While it may not be a political priority, investment in corrections is essential to protect health, human rights and safety.

Society pays a high cost when people with mental health disabilities are warehoused in solitary confinement. Society pays a high cost when prisoners are released into the community after being held in inhumane conditions and without any rehabilitative opportunities. Society pays a high cost when these same people wind up in jail time and time again. Society pays a high cost when correctional staff are pushed to the brink, leading to a rise in sick days, absenteeism and long-term leaves. Society pays a high cost when people facing serious charges, including

murder, are released without trial because of unconstitutional treatment in Ontario's jails. And society pays a high cost when the government is forced to defend itself against multi-million dollar class-action lawsuits related to jail conditions and staff shortages. In short, the government can no longer afford to ignore what is happening in Ontario's correctional institutions.

"Out of sight" can no longer mean "out of mind." That's why, along with front-line correctional officers, we are calling on the government to take concrete action by earmarking funds in the 2020 budget that would provide immediate relief.

We're not asking for new infrastructure or even new legislation, though both are sorely needed. Our submission is much more pragmatic. We focused on investments that can be made this year and which would immediately reduce violence and save lives.

We call on the government to invest sufficient funds to reduce overcrowding, support front-line staff, ensure that prisoners have access to health care and rehabilitation, address the unique needs of Indigenous prisoners, enhance oversight and accountability, and modernize infrastructure and information management systems.

The need to direct more funding to corrections is critical. I know this because the commission has been working on these issues for many years, and our expertise is recognized internationally. I have personally visited 10 correctional facilities, from Monteith to Elgin-Middlesex, to speak directly with front-line staff and prisoners.

Just this morning I visited the Thunder Bay jail and experienced first-hand the dehumanizing conditions. I saw this morning four people crammed into one cell, one person sleeping underneath a bunk bed, and the weakest person forced to sleep on a thin mattress on the ground, with their head next to an open toilet. Sometimes people are housed overnight in program rooms, laundry facilities and even phone booths. When jails are short-staffed, which is often the case, prisoners can be locked in their cells for days or weeks.

1400

This situation is getting worse. The Auditor General recently reported that 16 Ontario correctional institutions have seen a more than 80% increase in their population. Overcrowding puts everyone on edge. It makes institutions more dangerous for prisoners and staff. The situation is exacerbated when our prisons have become warehouses for people with serious mental health issues and addictions, many of whom are in long-term solitary confinement.

Despite the unique opportunity to rehabilitate a vulnerable population, prisoners have inadequate access to physical and mental health care. Correctional staff are frustrated. They have not received the resources, training or support they need to do their jobs. They don't feel safe; 66% report feeling worried about being assaulted by an inmate at least once a week. Staff experience high rates of PTSD, which requires them to take time off of work and leaves many institutions short-staffed.

There's a widespread agreement amongst experts that funding is needed. Our submission was developed with input from mental health experts at Elizabeth Fry, John Howard and the Registered Nurses' Association of Ontario. Our recommendations mirror those made by Ontario's Independent Advisor on Corrections Reform, its expert advisory committee on health care transformation in corrections and, most recently, the Auditor General.

We don't need more studies or more recommendations; we need action and we need investment. By making crucial investments, this government will not only be taking steps to meet its human rights obligations, but averting the very real risk of further deaths in custody and physical and psychological harm to correctional officers.

While it may be tempting to continue with the status quo, the saying, "Penny-wise and pound foolish" comes to mind. Investment in corrections is never going to be popular, but savings today are insignificant compared to the costs we as a society face well into the future. Thank you.

Interruption.

The Chair (Mr. Amarjot Sandhu): Thank you. I'll advise the audience not to clap, please.

Opposition side: MPP Mamakwa.

Mr. Sol Mamakwa: Thank you for the presentation. Certainly, the approach that you took in the submission, with some of the different agencies—that's an approach that speaks volumes for the people. You're giving voice to the people who are not given that voice.

I think it was last April that I visited Thunder Bay District Jail, as well, and I visited Kenora Jail. Can you share some of the percentages of Indigenous people in those jails?

Ms. Renu Mandhane: Just today, I asked the superintendent at the Thunder Bay jail, who estimated that 75% of the population identifies as First Nations. I can tell you, during the tour of the jail, that was readily apparent with the prisoners that I engaged with this morning.

Mr. Sol Mamakwa: You said you visited other jails. Did you ever visit Kenora Jail?

Ms. Renu Mandhane: I have visited Kenora Jail as well. When I was at Kenora Jail, the estimate was that 100% of the population was First Nations and also that over 90% of the population had identified mental health and addictions issues.

The Chair (Mr. Amarjot Sandhu): MPP Monteith-Farrell.

Ms. Judith Monteith-Farrell: Several members of our caucus visited the Thunder Bay District Jail. We've also visited the Thunder Bay correctional institute as well. Everyone was shocked to see the conditions that people are forced into. We've had announcements about a new jail, a new facility, and that just keeps on being announced.

I also have met with correctional officers. What a lot of people don't know is that there have been riots there and serious injuries, people suffering from PTSD and also inmates being killed in that facility—people actually losing their lives—and opioid crises and people ending up in our hospitals because of violent actions. The other thing that's shocking is that many of those people have not been convicted of anything. They're awaiting trial.

I'm happy to hear that you've brought this to our attention. I'm wondering if you have any other ideas about solutions other than—the jail isn't going to be built overnight; obviously much needed, but—

Ms. Renu Mandhane: Yes, our number one recommendation is to reduce overcrowding, and that isn't going to happen necessarily through a new jail. What we're actually recommending is that the government work together to develop non-institutional forms of pretrial detention, including specialized treatment and support—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Renu Mandhane: —for people with mental health and addictions-related issues. I think that when we closed our mental health hospitals in the 1990s, all those people ended up in our jails. Jails aren't treatment facilities; we can't expect people to get better. So we need to actually reduce the population in our prisons.

The Chair (Mr. Amarjot Sandhu): MPP Arthur?

Mr. Ian Arthur: Just very quickly: We heard from a correctional officer last year before this talking about many of the same things. How long has this been going on for?

Ms. Renu Mandhane: I've been chief commissioner for four years, and we had ongoing litigation when I started that is continuing to date related to conditions in correctional facilities. I don't think it's an overstatement to say "decades."

Mr. Ian Arthur: Thank you so much for your presentation. I appreciate it.

The Chair (Mr. Amarjot Sandhu): We'll move to the government side now. MPP Smith.

Mr. Dave Smith: Just quickly: I've gone through your written submission. It's very comprehensive. There are a lot of very good ideas that are in it, but what I don't see is anything in terms of costing. Since this is budget consultations, do you have an idea of what it would cost to implement your suggestions?

Ms. Renu Mandhane: I don't. Unfortunately, a lot of the information that you would need to do the costing is considered security-protected information. My understanding is that some of these initiatives were costed out at cabinet over the course of the last fiscal year and the year before, so I think that there is some costing that exists—but unfortunately it is something that would require a costing attached to it.

We did try to think about a ballpark number. I think we're talking about tens of millions of dollars. The commission isn't the Auditor General, and we weren't able to provide that costing. I think the key thing to take away here is that these are all things that can be done without investment in infrastructure or legislation, so they are ideally things that can be done quickly. I think that there is a cost attached to them. But also, we are paying already for our failures in this system. We are paying because people go in and out of the system. They get no rehabilitation. It costs more to house somebody in jail than it does to provide them with community-based mental health treatment, and so we really need to shift the entire system away from corrections and into community mental health.

I know that this is something this government cares a lot about, and what I would say is that it's not just about students and families; it's actually about the most vulnerable people, and how we develop programs, and whether they are residential treatment programs, for people who really shouldn't be in jail.

Mr. Dave Smith: Thank you.

The Chair (Mr. Amarjot Sandhu): Any further questions? Seeing none, thank you so much for your presentation.

Ms. Renu Mandhane: Thanks for having me.

THUNDER BAY AND DISTRICT INJURED WORKERS SUPPORT GROUP

The Chair (Mr. Amarjot Sandhu): Next, I would like to call on the Thunder Bay and District Injured Workers Support Group. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Mr. Steve Mantis: My name is Steve Mantis, and I'm the treasurer of the Thunder Bay and District Injured Workers Support Group. Thank you for the opportunity to present today. Our group was started 36 years ago here in Thunder Bay. We are a totally voluntary group. We have no funding, and we operate to provide support and information to injured workers and their families, and also to engage with the government when we see systemic issues coming forward, to try to correct them so that people don't go through all the hardship that some of our members have done. We're also members of the Ontario Network of Injured Workers Groups. There are 22 groups across the province that come together to try to engage with the government, as well.

1410

It's been 35 or 36 years that I've been presenting to committees like this, and I've got to say, I just don't know if it's worth it. Things are getting worse. I think I've been around too long. When you have the lived experience, and you can compare what it was like 35 years ago and what it's like now, you ask, "Why are we going in this direction?" And the direction is—and I hear it in one presentation after another—that there's a lack of funds to provide our public services, to actually increase the public good.

Why is that? Well, it's because over the last 30 or 40 years, we have cut the taxes that corporations pay, and we've done it with glee. "Oh, we're doing the best damned thing. We're helping all those guys reinvest and do this and that and the other thing." But in fact, that's not what we see happening. What we see is they put pressure on you guys to reduce their financial burden, and government after government has said, "Okay. You guys are the right ones."

And what do we see? We see those corporations that are most successful putting the money not into our economy but into Third World countries, where they can hide it.

What we know, as workers' compensation and injured workers, is that the government's position is that companies should pay less. Vic Fedeli, just a couple of weeks ago,

as he was talking about the good things the government is doing for business, said, "Well, we're reducing the premiums they pay for workers' compensation."

What does that mean for workers who are injured and disabled on the job? That means that they don't get compensation. They don't get the help that they need. And not only do they not get the help, but it drives them crazy. They expect that a system that is there to help people recover would actually do that. Oh, my God, how can we expect such a thing in today's society, right? We should know better. We should know that it's a sham.

This week, I've had three different workers come to me and say, "I can't even talk to anyone at the WSIB who knows anything about my claim. I phone and no one is there." Yes, someone, a customer service person, answers the phone, but they can't make any decisions. They say, "Okay, I got a message that we'll get back to you in 24 hours." No. There's no getting back to you.

So, here you are, and you can't pay your mortgage for your family, you can't put food on the table, and no one will talk to you in the organization that's supposed to help you. It's so frustrating.

We see that, really, as an example of the course that this government and previous governments have gone—which is that we're not in an expense crisis; we're in a revenue crisis. We need to fund public services to help the public good, instead of saying, "Oh, you guys who have all the money, you don't have to pay. No, you're already doing good stuff. Take all your money and hide it somewhere else," instead of investing it into First Nations, into all kinds of things.

Do you know that 65% of the Indigenous students in the district of Thunder Bay don't finish high school? What's the government's response? "Let's make class sizes bigger."

You talk to teachers and they say, "We're sorry. We can't help these folks who are struggling. We just don't have enough time. And now, we've got to put more students in the classroom."

If we'd look at what actually happens to injured workers long-term, people who have serious injuries that are lifelong disabilities, 45% are ending up clinically depressed. They're living in poverty or near poverty. Their families are falling apart. The systems that are supposed to help people when they become disabled at work are failing.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Steve Mantis: Where are we going? We're starting to look, really, at legal challenges. It seems like that's the one thing that governments will finally somehow respond to—of course, not always. We've made a submission to the United Nations under the Convention on the Rights of Persons with Disabilities that shows the practices by the WSIB are discriminatory and are against our international human rights, the things that Canada and Ontario have signed onto, and are violating what they've already agreed to.

We really encourage you all to think about how we can create more revenue rather than how we can cut expenses. Thank you very much.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll go to the government side at this time for questioning. MPP Piccini.

Mr. David Piccini: Thank you very much. I appreciate your testimony today—deposition, I should say. I understand these time frames limit our discussion and your presentation. I think a slight oversimplification of the process—no doubt there are many challenges workers face on a day-to-day basis, and WSIB needs to be there for them. I think, over the past number of years, we've seen massive deficits and an increase in spending. I think it's just about that allocation and making sure that it's an effective use of the spending. I think we can all admit that we can do a better job as government in some of the siloed approaches we've seen ingrained over the past number of years.

When you talk about priorities—I just have to interject—of this government, if you look at the freeze on the WSIB premiums we did for non-profits, I think that signals our intent there. My colleague MPP Smith and I were there at the Big Brothers Big Sisters club in Peterborough, which literally was looking—they operate on shoestring budgets—at closing their doors based on the 30-plus percentage increase that they were expected to incur. I think that was lost in that.

I would be curious for you to comment on that, because those non-profits provide valuable services in the communities. I think if we're going to talk about some of the priorities—I'm open to criticism, but I think it's an important acknowledgement of the important step we took for our non-profits.

Mr. Steve Mantis: We have made submissions to the government that how the WSIB brings in their revenue needs to be reconsidered. What we're suggesting is that it should be funded much like OHIP: Everybody pays that same base amount. If you do that, it becomes a reasonable amount for all companies.

What we've seen is that they use the experience rating model, which is like insurance, and we know that if you're a teenager, you're going to pay really high insurance. Well, it's similar. Any areas that are higher risk, that have more accidents or that actually report their accidents and follow the law, which many companies don't do—then their rates go up.

What we're saying is, let's keep it all the same. What has happened is that when the companies start playing games with their workers' compensation premiums, it breaks the relationship between the worker and the employer. Rather than having a loyal workforce, the workforce says, "We can't trust you guys. You are challenging our claim."

I was just talking to a guy today who actually worked here and got hurt, and the hotel will not file the paperwork for the injury, so they deny his claim, because the hotel knows that they're going to save money if they contest the claim.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. David Piccini: Just on that idea—I appreciate that—have you put a costing associated to that?

Mr. Steve Mantis: Right now, the average, I think, is about \$1.80 per \$100 of payroll. If you did a flat line, everybody would pay \$1.80. Now if we do it like OHIP, we would say that smaller companies would pay a little bit less and the bigger companies would pay a little bit more. But then everybody would know this is the cost. It's a manageable cost. It's a cost that's spread all across society, which is what Sir William Meredith, who is the father of workers' compensation, recommended—that it's a collective liability; that we're all responsible for the industries and the types of jobs; and that cost should be spread across all of society, very much like OHIP.

1420

The Chair (Mr. Amarjot Sandhu): Thank you. We'll move to the opposition side. MPP Shaw.

Ms. Sandy Shaw: Thank you very much for your presentation. I just want to pick up on Sir William Meredith. I think people have forgotten that the reason why what was called "workmen's compensation" and now "workers' compensation," WSIB, was put in place is that workers gave up their right to sue their employer when they were injured on the job, whether through negligence, accident and otherwise. Employees have no other recourse than workers' compensation, WSIB, to see redress for injuries on the job, and I think people have forgotten that. This isn't a perk; this is something that workers gave up as a right, and they pay for it as well. I think that's important to note.

I do note that there are 22 groups across the province. That's because the need is so great. In Hamilton, we have a very active injured workers' group. We hear all the time about workers who have gone to work, a fair day's work, with the promise that they would return home safe from work, and if they were injured that they would be looked after. It is absolutely not the case in the province of Ontario.

Very specifically, though, I'd like you to address two things that this government has done. One is that they chose to cover the unfunded liability on behalf of employers but did not look at benefits to workers. Could you talk a little bit about how that impacted the sense that WSIB is there for workers when they get injured?

Mr. Steve Mantis: Really, in terms of that historic trade-off, where workers were prohibited from suing, the flip side was that the system would provide compensation for as long as the disability lasts. That idea has gone out the window. Workers no longer can actually get their side of the bargain, but they are also still prohibited from holding their employers accountable.

In terms of what has been the impact for workers, it's increasing levels of poverty and increasing levels of mental health issues. What we see is, people are forced back to work very quickly in order to reduce the costs of compensation payments. Research from the Institute for Work and Health—a well-respected organization in Toronto—found that 45% of those folks get re-injured when they go back to work. That ends up being a cycle where you're off and you go back to work and maybe you get injured a third or fourth time, and your disability gets

worse and worse and worse. So rather than the system saying, "Let's make sure that you're in a good place, that you've fully recovered and that your employer is able to accommodate your disability"—

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Steve Mantis: That would be a big gain for everybody, because what we're seeing is the injury rates going up. So the way we're changing our workplaces is to try to increase production, which puts more stress on the human body for repetitive tasks, and they're not accommodating the shortcomings in the physical body. That's really ending up with more injuries, more hardship and potentially greater cost that's now getting shifted to the provincial budget in terms of health care, in terms of mental health services and in terms of all kinds of social supports that are no longer available through the WSIB.

Ms. Sandy Shaw: And essentially, we are relieving the financial burden of employers, but workers are financially and physically paying that burden.

Steve, because we're probably going to run out of time—and I'm going to ask you one more question—I just want to say: Don't give up.

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. That concludes our time. Thank you so much for your presentation.

Mr. Steve Mantis: Thank you.

ALZHEIMER SOCIETY OF ONTARIO

The Chair (Mr. Amarjot Sandhu): Next, I will call on the Alzheimer Society of Ontario. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Mr. Ted Davis: Good afternoon. My name is Ted Davis. I'm the chairperson for the Alzheimer Society of Thunder Bay. I have the pleasure of being accompanied by Mr. Kyle Fitzgerald, who is the manager of government affairs and public policy with the Alzheimer Society of Ontario.

Thank you for inviting us to appear here today and assist with your deliberations on the Ontario budget. You picked the perfect month—January—as January, of course, is Alzheimer's Awareness Month, and fortunately enough, our city of Thunder Bay has passed that proclamation.

As I said, my name is Ted Davis, and I'm involved extremely at the local level. The Alzheimer Society is really a service provider, providing front-line service to over 86,000 people in the province of Ontario last year—86,000 persons living with dementia and their care partners. We have 29 societies.

Today in the province of Ontario, there is just under a quarter of a million people living with dementia. That number is expected to double within the next 20 years. Here in the district of Thunder Bay, for the society of Thunder Bay, which I am responsible for—which, roughly, has a catchment area the size of Germany. Last year our society delivered 1,846 direct units of service care

to both those living with dementia and their support groups. Of that 1,846, 644 people who identify with Alzheimer's in the support group were brand new to our system.

Every day we hear about the impact we make in their lives—people like, let's say, Andre and Betty. Andre, in his forties, had a heart attack, had some bypass surgery. Then he discovered he was having trouble with memory and was having night terrors. That went on, and then finally in 2015, Betty, his spouse, continually asked his health care provider to do a test, and certainly they found that Andre was affected with Lewy body dementia. He lived in a small community in northern Ontario.

So they got the diagnosis; they learned how to survive and continued to live a vibrant life with Alzheimer's. Then they moved to Thunder Bay, and fortunately connected with the Alzheimer Society of Thunder Bay. Now, today, they have support in the areas of gerontology, social work, activities we provide on a daily basis, and respite service. Betty and Andre, through the assistance and determination of their son, now live active community social lives.

Dementia is probably the greatest challenge we as a province face. In addition to that, it is the number one concern of people like me, who are getting older. It is our number one concern when we look towards aging. Dementia is something we have to work against.

Now I'm going to turn it over to the expert, the man who knows all things about public policy and government relations, because Kyle has presented to you a document regarding our submission that was given earlier. Thank you very much.

Mr. Kyle Fitzgerald: Thank you, Ted. Just in recognition of the time, you do have the submission in front of you, so I'll just quickly go over some of our ideas for the provincial budget this year.

First I'd like to start by saying that we're encouraged by recent moves to make our health care system more integrated and collaborative. We see our four pre-budget recommendations as a contribution to building this more connected system, and one that puts clients at the heart of their own care.

Our first recommendation calls for an additional investment in our First Link program, which would allow us to support a total of 12,500 individuals affected by dementia, so either those diagnosed or their care partners. First Link connects families with the supports they need, when and where they need them, but it's so much more than a system navigation service.

A diagnosis of dementia is a life-altering event. When you get this news, families can be left feeling overwhelmed, especially when they're left to fend for themselves. The First Link program has been shown to connect families with the supports and services they need 11 months sooner than if they were left on their own, which comes at a benefit not limited to the family, but to the health care system when you get that earlier intervention. Years of evaluation have shown that our clients see First Link as a lifeline when they need it most.

Our second recommendation speaks to the urgent need for greater respite for those affected by dementia. This urgent need was highlighted in the second report from the Premier's Council on Improving Healthcare and Ending Hallway Medicine, and we couldn't agree more. Respite can be anything from a day program to more intensive inhome services. The Alzheimer Society offers a wide spectrum of respite programs, including here in Thunder Bay, that are tailored to meet the needs of individual communities.

The constant theme across these programs is that they are operating above their capacity, and in some cases, beyond their intended function, meaning that they're serving clients who just don't have anywhere else to go. Wait-lists often stretch past four or five months, and even when caregivers get support, they often ask for more.

It's difficult to overstate the contribution that caregivers make to our health care system. They sacrifice their own mental, physical and financial well-being to care for someone close to them.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Kyle Fitzgerald: Last year, a care partner from Sault Ste. Marie wrote to us, and I just want to share his words with you. He said, "A caregiver must be given care, or you will end up with two patients."

The need for respite is such that we're not making a specific dollar ask. On page 7 of our budget, you'll see just a few scenarios that highlight the need for this service. What we're trying to say is that any investment will be put to immediate use.

Just in the interest of time, our final two recommendations both relate to the need for access to quality training and education in Ontario's LTC facilities. We're recommending that the government implement recommendation 21 of the Wettlaufer inquiry by creating a permanent funding envelope, including backfill costs, so that long-term-care homes aren't additionally burdened by this recommendation.

Finally, specifically, the recommendation relates to the Alzheimer Society's U-First! training program, which is grounded in respect for the person, focusing on personcentred care and adjusting approaches to better care for the individual.

Thank you.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll move to the opposition side for questioning this time. MPP Monteith-Farrell.

Ms. Judith Monteith-Farrell: Thank you for your presentation, and thank you for the work of the Alzheimer Society in Thunder Bay. I know it's a much-valued resource.

I was encouraged to see, in your submission, that need for health care navigation. In long-term care, trying to access care once people get to that stage is a very difficult journey. I'm wondering if there is any costing, or any ideas on how the Alzheimer Society could use funding to assist people who are having to transition to long-term care.

Mr. Kyle Fitzgerald: That's something that we're already doing at some level, in that our First Link navigator, from the moment of diagnosis until after end of life,

is one constant point of contact. If there is a decision that's made that a person has to transition to long-term care, the First Link navigator will support the family throughout that. The 7,500 Ontarians who are involved in First Link are already getting that.

We know that there's more need for that service, because we have wait-lists in every region of the province.

So in response to your question, it's something we're already doing, and we're fortunate that we did get a funding increase this year. But we know that there is more demand for that service.

Mr. Ted Davis: Just to add to that, as I mentioned earlier, we serve 1,846 direct people. The other thing we did in our local society was provide 4,350 hours of educational and training support to long-term-care facilities, the regional hospital and other community organizations. That's all part of that transition into long-term care. We're providing over 4,000 hours of training just in our district.

Ms. Judith Monteith-Farrell: Thank you.

The Chair (Mr. Amarjot Sandhu): MPP Arthur.

Mr. Ian Arthur: Thank you so much for your presentation.

Just so I understand a little bit more about the delivery of the services, 240,000 Ontarians today are living with Alzheimer's. You'd like the extra funding so that you can provide services to 12,000 of those. I assume those are the ones who most need it, who are most progressed. Or is it truly—not to diminish it—a drop in the bucket in terms of the services that are actually needed?

Mr. Kyle Fitzgerald: When you talk about First Link, it's geared mostly towards those who are living in the community. Of the 240,000, about 140,000 live in the community in Ontario. That's the subset that First Link would assist. It's not necessarily geared towards those who are at the end-of-life stage of the disease, just because at that point, the system navigation isn't their most urgent need.

To your point directly—is it a drop in the bucket?—there's certainly more demand than we're currently meeting.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Ian Arthur: Do you have any estimation of the cost offsets? You've kind of touched on keeping people out of long-term-care facilities, and the higher-cost parts of this.

Mr. Kyle Fitzgerald: Yes. We know that First Link specifically will delay admission to long-term care by approximately 11 months if the intervention is early enough. It costs us \$3 a day to care for someone in the Alzheimer Society, compared to about \$50,000 a year for the long-term-care aspect. We know that when you—

Mr. Ian Arthur: That's a fairly dramatic difference.

Mr. Kyle Fitzgerald: When you catch it early enough upstream, there is a cost saving.

Mr. Ted Davis: If I may add, just to your point—

Mr. Ian Arthur: We'll probably run out of time, but go for it.

Mr. Ted Davis: The other major thing is the savings in the emergency ward, because the service provider—such as my brother, who is 85 years old today and is taking care of his spouse. He will end up someday in emergency, along with his wife, and it's the cost of attending that emergency ward that becomes crippling.

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off.

We have to go to the government side now. MPP Roberts.

Mr. Jeremy Roberts: Did you want to finish that thought?

Mr. Ted Davis: No, I'm a man of short thoughts. We should be okay, but thank you.

Mr. Jeremy Roberts: Sure. Well, Ted and Kyle, thank you so much for your presentation today. It's a topic that I think all of us are very interested in—trying to sort out how we can best support Ontarians living with Alzheimer's and dementia. I have the great pleasure and honour of representing the riding in Ontario with the largest seniors population—second-largest in all of Canada; only Victoria has us beat. It's something about having slightly nicer weather than us over in Ottawa.

Of course, being in a community with a large seniors population, this is an issue that comes up time and time again. I was particularly pleased to see in your submission the focus on caregivers, because that has been an area that I've tried to focus on. My first private member's bill last year was the Caregiver Recognition Act, which lays out a number of principles about the important role that caregivers play in our health care and social services sector and encourages the government to take these principles into account in the development of any new policies. I was thrilled that that went through second reading last year with all-party support.

The next step on that for me—I think this budget process is a fantastic opportunity to kick-start that—is to start talking about what those policies are that can best support caregivers, whether they're caregivers for a spouse living with dementia, a child with a chronic illness or a family member with a disability, whatever that might be; the experiences are often quite similar.

I note two of your submissions here that are directly focused on caregivers. Any other ideas on policy measures that the Alzheimer Society would be advocating for to best support caregivers in our communities?

Mr. Kyle Fitzgerald: I'll begin by saying that we fully support the legislation that you put forward, the Caregiver Recognition Act, so thanks for that. In terms of going beyond the budget submission—of course, those are the four ideas that we'd like to draw your attention to, but something that you could really do on day one, and it wouldn't even cost any money, is to just have a greater ability for caregivers to schedule their own in-home care. When the LHIN tells somebody, "You have one hour of in-home support. It's on Thursday at 2 o'clock," that might not work for that caregiver.

Beyond that, having greater coordination of publicly funded in-home care and those who have the means and are fortunate enough to have private care as well—coordinate between those agencies so that you don't have four hours of care a day and then six hours of nothing. It's a very simple solution that, again, wouldn't cost any money. We'd be happy to work with you on that. It's just something simple, but it would make a difference.

Mr. Jeremy Roberts: Yes, absolutely. Thank you.

Ted, any further thoughts from the experience here in Thunder Bay and the north.

Mr. Ted Davis: I can only relate it to my own personal situation. As I said earlier, my brother, who is elderly, is the caregiver for his wife of 63 years. It's the respite so he can continue with his own life—

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Ted Davis: —so he can get relief, because it's a 24-hour-a-day job, and for a man who is certainly aging, just the ability to have someone give him a spell, give him a break, that will keep him out of emergency.

Mr. Jeremy Roberts: I appreciate that. Just in the final time remaining: You mentioned earlier, at the beginning of your presentation, Kyle, that you're pleased with some of the modernization efforts in the health care system. The Ontario health team is going to be a good thing for the Alzheimer Society moving forward?

Mr. Kyle Fitzgerald: We were part of 22 applications across the province. We're part of the majority of the 24 that were announced. Certainly, as a transformation of a system this big, there's always room for improvement, but we've been fairly happy. We've seen that the fears that some expressed early on in terms of hospitals taking it over—actually, everyone is getting along pretty well. We're all putting the patient first, which is, at the end of the day, what we're all here for.

Mr. Jeremy Roberts: Fantastic. Thank you so much for the work that both of you do.

The Chair (Mr. Amarjot Sandhu): That concludes our time, as well. Thank you so much for your presentation.

Mr. Ted Davis: Thank you all very much. **1440**

CANADIAN CANCER SOCIETY, ONTARIO DIVISION

The Chair (Mr. Amarjot Sandhu): Next I'll call the Canadian Cancer Society, Ontario division. Please come forward.

Please state your name for the record, and you have seven minutes for your presentation.

Ms. Helena Sonea: Thank you very much. My name is Helena Sonea. I am the senior manager of public issues for the Canadian Cancer Society. With me today is Stephen Piazza, the manager of public issues for the Ontario division.

Over the course of a lifetime, nearly one in two of us will hear the words, "You have cancer." These words will change you, but at the Canadian Cancer Society we believe that they don't have to define you.

We bring together hundreds of thousands of volunteers to deliver services that help people cope with a diagnosis and thrive, because life is bigger than cancer. In Ontario, this means providing support services through our 26 community offices, like the one here in Thunder Bay.

Here, and in communities throughout northwestern Ontario, we work to make life easier for people travelling to and from a cancer treatment. We coordinate and book travel through the Northern Health Travel Grant, and we even front the travel costs for people with cancer, so no one pays out of pocket to get to their treatment. We also provide over 150,000 rides to cancer appointments for Ontarians each year through our Wheels of Hope program.

We answer thousands of cancer-related questions from Ontarians each and every year through our Cancer Information Service, run peer support programs, provide wig and turban rooms, and offer many other supports to people living with cancer and to their caregivers.

Along with the \$52 million we spend on our information, community programs and support services, we also fund over \$40 million in groundbreaking research to accelerate progress so that more cancers can be prevented and more people will not just survive cancer, but live longer and fuller lives. Last week alone, we invested nearly \$450,000 into new technology to detect breast cancer at Lakehead University right here in Thunder Bay.

Part of our mission is to advocate to governments to improve lives in all aspects of the cancer journey, from prevention to palliative and end-of-life care.

Today, we're calling on the Ontario government to:

- —place a cost-recovery fee on the tobacco industry to pay the \$44-million cost of the Smoke-Free Ontario Strategy;
- —implement a tax on e-cigarettes to discourage youth purchasing these products; and finally
- —increase access to take-home cancer drugs by reinvesting a portion of the \$350 million in planned savings from the amalgamation of several provincial agencies, including Cancer Care Ontario and local health integration networks.

These requests represent significant revenue opportunities for the government or significant reinvestment opportunities to further improve cancer care in Ontario.

Mr. Stephen Piazza: Tobacco use continues to be the leading preventable cause of cancer in Canada. Smoking is responsible for an estimated 30% of all cancer deaths and about 72% of lung cancer cases throughout the country. Each year, cigarette smoking claims nearly 16,000 lives in Ontario.

Helping people quit smoking and stopping people from starting continues to be one of our top cancer prevention priorities. Ontario spends \$44 million on cessation and support programs through the Smoke-Free Ontario Strategy. We believe that the tobacco industry should bear the cost of helping people quit their harmful products.

Ontario can implement a cost-recovery fee that tobacco companies can pay based on their market share to recoup the costs of the Smoke-Free Ontario Strategy. A costrecovery fee has been used by the US Food and Drug Administration since 2009 to recover their tobacco control budget, generating C\$930 million in 2018-19 for tobacco control. Similarly, in Canada the federal government implemented an annual regulatory fee on the cannabis industry. Ontario could follow this model and the precedent set in the United States and fund the Smoke-Free Ontario Strategy through a cost-recovery fee on the tobacco industry.

Along with combustible tobacco, e-cigarette use is a growing concern, especially among young people. Recent studies show that e-cigarette prevalence rates have doubled among students over a two-year period and tripled over a four-year period. This rapid increase in youth vaping is creating a new generation of young people addicted to nicotine and threatening the work done over the years to reduce youth smoking. We can take the lessons learned from over 50 years of action against tobacco and act now to reduce youth vaping.

In particular, we know that young people are very pricesensitive. Higher cigarette prices are a proven incentive to get people to quit, reduce frequency of daily use, and prevent youth from starting to smoke. A tax on vaping products will yield similar results. This has already been implemented in British Columbia, with Alberta and PEI set to table a tax later this year. In the US, 20 states have implemented or announced their intention to implement a tax on e-cigarettes.

We are calling on Ontario to follow other provinces and US states and implement a tax on e-cigarettes to discourage use among young people.

Ms. Helena Sonea: Finally, we're continuing to ask for expanded access to take-home cancer medications. While IV drugs taken in hospital continue to be 100% funded for all people with cancer, regardless of age and income status, more than half of newly approved cancer medications are oral or injectable formulations that could be taken at home, but the costs of these drugs are not covered.

Cost continues to be a major barrier for Ontarians to realizing the benefits of these innovations. The average cost of a course of take-home cancer drugs is more than \$77,000. Even if someone has private insurance, a typical copayment of 20% could amount to someone paying more than \$15,000 out of pocket for their cancer medication.

Public coverage for take-home cancer drugs will reduce the financial pressures on people living with cancer, and their families, improve treatment outcomes and quality of life, and advance the government's goal of ending hallway medicine by keeping more Ontarians out of the hospitals.

We believe the government should reinvest a portion of the anticipated \$350 million—

The Chair (Mr. Amarjot Sandhu): One minute.

Ms. Helena Sonea: —in annual savings from the ongoing transformation of the health care system and put it into front-line health care services like take-home cancer drugs.

Cancer Care Ontario's estimates put the cost of expanding public coverage to individuals between ages 25 and 65 at \$142 million annually. But if the government was to just close the gap and become the second payer for take-home

cancer drugs, like the adjustment this government has made to OHIP+, the cost would be as low as \$42.5 million annually.

Covering take-home cancer drugs with no deductible or copayment, just like IV drugs that have to be taken in hospital, is a win for people with cancer, a win for cancer care, and a win for relieving pressure on our hospitals.

We look forward to expanding on this and other priorities we presented during the question-and-answer portion. Thank you very much for your time today.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll go to the government side this time. MPP Roberts.

Mr. Jeremy Roberts: Thank you so much for your presentation. I note that you've come all the way from Ottawa, so thank you for joining us.

I'm very curious about the vaping issue. I try to make a habit, as I'm sure many of my colleagues do, of visiting high school classes and talking to grade 10 civics classes. Every time I do, I ask, "What do you think is the number one issue facing people at your high school?" Time and time again, vaping is coming up as the answer.

I've said to them, "What do we have to do to make that behavioural change in your generation, to stop looking at vaping products as something cool, as something you want to do?" I said to them, "If you don't propose any innovative strategies, the government will do what it always does and try to make it more expensive." That's sort of our default policy option. If we want somebody to do something less, we make it more expensive, and if we want someone to do something more, we make it less expensive.

I appreciate that particular suggestion to look at the tax, and I imagine that's something that is being researched in the Ministry of Health.

I'm curious, though: Is there anything else that we're missing, from the education standpoint or from an advertising standpoint or whatever it might be, to help with that behavioural nudge to get these young people in high school to start turning away from vaping as a habit that they're building?

Mr. Stephen Piazza: First off, we certainly appreciated the government's move to restrict advertising of ecigarettes in convenience stores and gas stations. That will go a long way to helping to reduce youth vaping.

We'd like to see further measures that have been adopted by several other provinces. PEI, for instance, has adopted a minimum age of sale of 21. We know this will work because a large portion of youth receive their ecigarettes through social sources—friends, siblings and things like that. When you add a larger age restriction, it moves those products out of their social circle.

Similarly, we could have a ban on e-cigarettes in convenience stores and gas stations, a full ban. This was done in PEI, and it's being considered in several other jurisdictions. Reducing the points of sale will reduce access to these products.

We could have comprehensive restrictions on the flavours of e-cigarettes. There are over 7,000 flavours of these products. We know from our experience with

tobacco that flavours appeal to youth. Having comprehensive restrictions on flavours will also go a long way to reducing the sales.

Finally, we could look at a maximum nicotine concentration for these products. What is used in the EU, and now several provinces, is a maximum nicotine concentration of 20 milligrams per millilitre. Right now in Canada, these products could be sold with as high as 66 milligrams per millilitre of nicotine, which far exceeds a pack of cigarettes.

Mr. Jeremy Roberts: I appreciate that. I know one of my colleagues also has a question.

The Chair (Mr. Amarjot Sandhu): One minute. MPP Smith.

Mr. Dave Smith: I apologize if I missed this when you were talking about it earlier on. You said that the average cost for take-home cancer drugs is \$77,000?

Ms. Helena Sonea: Correct.

Mr. Dave Smith: How much would the equivalent IV drugs cost?

Ms. Helena Sonea: That's a great question. I don't have that numerical information right in front of me at this point, but I can get it for you after today's presentation, absolutely.

1450

Mr. Dave Smith: I'd appreciate that. Because cost is one thing—which I totally get, and we want to make sure we keep the cost down as much as possible. But having gone through personal experiences with a very close family member, one of the things that we found that was very helpful was actually the visits to SickKids on a weekly basis, because you got to spend time with other families who were going through exactly the same thing and it became part of your support network. There isn't a dollar value that we associate to that. If you had take-home drugs, you're losing some of that community aspect of it, which also helps in—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. We have to move to the opposition side now. MPP Shaw.

Ms. Sandy Shaw: Thank you for your presentation.

I want to focus on picking up where MPP Smith left off on the take-home cancer drugs. It's something we're very familiar with, the New Democrats. We campaigned on this. This was the promise that our leader, Andrea Horwath, made during the campaign. It is, in fact, an opposition day motion that we moved in November 2018, and we debated this in the House.

We support what you are saying here, the fact that when people get a cancer diagnosis, when they get the most unbelievable news that you can imagine in your life, you'd like to believe that the government has your back and the government would give you choice in the kind of treatment options that you would see. It's our opinion that Ontario can afford to be compassionate, that Ontario can afford to offer this kind of help, this kind of hope to people who are struggling with a cancer diagnosis.

What you laid out here is that, in fact, it's also less cost to the system. So could you just elaborate a little bit more on the numbers? Because I know the government side seems to be having a running tally on what these costs are that we've been hearing, and what we're looking at is a reduction to the net cost. So can you just talk about the \$142 million that you were talking about, and maybe just, again, touch on how this will actually relieve the crisis in hallway health care that we're facing right now?

Ms. Helena Sonea: Absolutely. Thank you so much for the question. Just to expand a little bit and kind of blend the questions, if you will: Cancer Care Ontario has provided these estimates. We're now under Ontario Health. That expertise does lie internally to make those types of health care decisions moving forward. I think that they clearly very well articulate the policy and costing options. So I don't really want to get into the weeds, necessarily, on precisely how—

Ms. Sandy Shaw: No, but in general.

Ms. Helena Sonea: But generally, the \$142 million really speaks to the coverage of deductibles and copayments, whereas the \$42.5 million would not cover those pieces, so that's really the disparity. I think with public drug programs versus private drug programs—you have 4,400 types of drugs that are available on a public drug plan, whereas with a private plan, you have over 12,000.

Ms. Sandy Shaw: But essentially, take-home drugs are lower cost for patients than being in the hospital, to the health care system?

Ms. Helena Sonea: Our objective at the Canadian Cancer Society is to ensure that the person receives the treatment choice of their choice, in the setting of their choice, at the most reduced financial burden, as much as possible.

Ms. Sandy Shaw: Thank you. I just can't help but add that we had the most unfortunate debate in the House when take-home cancer drugs were compared to children wanting an extra ice cream cone. I'm hoping that, at this point, the government side now understands the depth of how that comment was insulting and showed a lack of understanding of the importance of take-home cancer drugs.

I just want to now, as quickly as possible, move to the cost-recovery fee that you're talking about and the collapsing of Cancer Care Ontario. I think that's a really bold move, and I'd just like to hear a little bit about what are the very first steps that we can push on your behalf to make that happen?

Mr. Stephen Piazza: So the collapsing of Cancer Care Ontario?

Ms. Sandy Shaw: Yes, and using that money towards—well, either one. Using the cost savings you wanted to use towards—

Ms. Helena Sonea: Our priority is really just with the one in two Canadians that will be diagnosed with cancer—is to ensure that that cancer focus remains a priority of Ontario Health, and that the leadership that Cancer Care Ontario has shown throughout the many years remains intact in this new structure.

Ms. Sandy Shaw: Okay. That funding, the \$350-million savings going to drugs—

Ms. Helena Sonea: That is our recommendation.

Ms. Sandy Shaw: And then a cost-recovery fee would be an additional source of revenue for—

Mr. Stephen Piazza: Yes, so the cost-recovery fee would—

The Chair (Mr. Amarjot Sandhu): Thank you. I apologize to cut you off. That concludes our time. Thank you so much for your presentation.

WASAYA AIRWAYS

The Chair (Mr. Amarjot Sandhu): Next, I would like to call on Wasaya Airways. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Mr. Tom Morris: Tom Morris.

Mr. Donavon Macklin: I'm Donavon Macklin.

Mr. Derrick Flynn: Derrick Flynn.

The Chair (Mr. Amarjot Sandhu): You may start.

Mr. Tom Morris: My name is Tom Morris. I'm the president and CEO of Wasaya Airways LP. I have here with me Donnie Macklin on my far right—he's the vice-president of cargo—and Derrick Flynn is my director of operations.

Wasaya Airways is the leading provider of air transportation services in northwestern Ontario. We have been in operation for 31 years. We offer passenger service, cargo and fuel transportation to remote communities. In 2019, we transported 83,000 passengers on our airline; 41% of these people were flying for medical appointments. If we are unable to land or transport them, they are missing important medical appointments. Missed appointments also cost the government money.

Air transportation is an essential service for remote First Nation communities. We are the lifeline to transport people and necessity-of-life supplies into the communities. These communities rely on air transportation for everything from medical supplies, food, building materials, hydro and fuel. There is no other form of transportation to the communities other than the winter road access, which is limited to approximately two to three months a year.

We fly seven days a week to 24 communities. Our airline provides an essential service to remote First Nation communities. We're currently facing roadblocks which limit the service we provide. We have limited infrastructure and support at our northern airports, lack of runway maintenance, and reporting from our northern stations. It impacts our productivity and ability to provide service to our full potential.

Our terminal buildings in the north require upgrades. The structures are poor. Washrooms don't always work. Buildings are rundown and small. Terminal buildings in the north require room to provide proper security screening.

Mr. Donavon Macklin: For day-to-day flying operational issues that we're facing, the MTO staffing at the

airports in the north is a major concern. Currently, the airports are only staffed from 7 o'clock to 4 o'clock, five days a week. An airline service that offers essential service to a community that has no other access cannot operate in that time frame. The cost of airplanes: To lease throughout the year to use them for eight hours a day, five days a week just doesn't cut it.

As the federal government has mandated safety management systems on us and as we move forward safety for all of our customers no matter where they're from, the reality is that we have to have runways that are clean, runways that are serviced and runways that are reported so that we can dispatch into them safely. Right now, with the man-hours that the MTO is providing at the airports, this doesn't allow it for us. We cannot depart on our scheduled time in the morning with proper runway condition reports based on the hours that people are working.

To effectively work going forward, we would like to see staffing from 6 in the morning to 10 p.m. at all of the airports from Monday to Friday, and coverage for about a 10-hour shift on the weekend as well. Ideally, 24-hour coverage would be best, as we're not the only users of these airports. We don't do emergency and medical care; Ornge and other carriers do that. Right now, we would have no one at the airport if there's a nighttime flight into them. This is an essential service that has to happen.

The runway length: When we operate in Thunder Bay here, we're on a 7,000- or 8,000-foot paved runway. In the north, where we're the only lifeline to the outside world, it's a 3,500-foot gravel-surfaced runway. When you have a gravel-surfaced runway, there's damage to the aircraft, the level of safety is decreased, the overall cost of operating is higher because of wear and tear on an aircraft, and also a lot of modern aircraft aren't set up to run on gravel because there just aren't gravel runways in the world anymore. An improved surface and an improved runway length would allow us to operate more of a wider range of aircraft and get the full potential of the aircraft that are operating into them, driving down overall cost to all users.

In addition, with the surface, a lot of the aircraft operated by the Ontario government, such as the water-bombers, the CL-415s, which operate for emergency service to put fires out, cannot operate off of gravel. So here's your biggest, baddest-assed airplane to put fires out, and it can't operate up there. We're being asked to offer a lifeline to people for other services.

1500

As far as instrumentation goes, we're operating in an environment where the tallest thing is the radio tower in town, or the trees, which are 40 feet tall. Yet, because of a lack of holding the airport to an instrument standard, there is not the ability for us to go below a 500-foot minimum on an approach. So we can fly all the way to Fort Severn, and there's not a thing in the sky to run into, and we're stuck at the 500-foot level because the airport has been certified to an instrument approach, whereas if I go to Toronto, I can descend to 50 feet without seeing anything, and there are buildings and towers and everything all

around us. So it doesn't make sense, and the lack of funding towards getting the airport certified above a visual standard is holding us back.

Nav Canada, the federal mandated provider for such services, has stepped forward and started putting in an LPV approach, which is a type of approach that gives us vertical guidance, at a very low cost. We've stepped up and spent large amounts of money to get aircraft certified to that standard, yet we can't make use of it up north because the Ontario government has not paid to get the airport set up to that standard.

With lower approach minima, it allows us a safer way to get to the ground safely—

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Donavon Macklin: —and it allows us to perform in a much more cost-effective manner.

Mr. Tom Morris: In conclusion, to reiterate, we are asking for improved maintenance in our remote airport locations.

We are requesting the MTO to extend their hours of operation and offer additional resources to allow us to perform safely and efficiently within our SMS requirements.

We need the MTO to extend the lengths of the airport runways and implement the proper instrumentation, which would allow us to provide more cost-effective service for the First Nation people in the north.

We are requesting the funding to certify all of the provincially run airports to an instrument standard.

There is no other form of transportation to the communities other than the winter roads access, which is limited to approximately two to three months a year. Air transportation service is essential to remote First Nation community members. We should have the same airport standards in the north as other airport terminals in the south.

Thank you.

The Chair (Mr. Amarjot Sandhu): Thank you. We'll go to the opposition side for questioning. MPP Mamakwa.

Mr. Sol Mamakwa: Thank you, Tom, for presenting this issue with respect to remote airports. I know that it gives us a better understanding—my colleagues across the way, and on this side too—of how critical the airports are for the lives for the people who live in these communities when you refer to them as "lifelines."

I know that the airports up north are not—what I'm hearing is that they're not categorized as an essential service. Can you explain why you think that is?

Mr. Donavon Macklin: I think the biggest thing is the number of users. I think the lack of users, and the people who see it on a regular basis—it's held to a lower standard.

If you look at the acts that the federal government has put forward to protect passenger needs—imagine where you have no other way to get to a medical appointment except to go from the airport, and you can't fly because the runway clearer left at 4 o'clock and now the airport is snowed in.

I don't think people understand fully that it's not just frivolous travel or recreational travel. It's needed travel, and the services have to be there. Mr. Derrick Flynn: If I could add, as well—we transport teachers for education, and dentists and police. We have a contract for Nishnawbe Aski police, First Nations police, up in northwestern Ontario. They are an essential service, absolutely. We carry in their teams for the OPP to various locations.

Without this up-to-date information and coverage, and information on the runways, we're not able to provide that essential service that the airports and the communities in the south have.

Mr. Tom Morris: Last weekend, we couldn't go to three communities because of a lack of runway surface reports by MTO.

Mr. Sol Mamakwa: I know that's in the bullet of your second request—to add additional hours of operation for MTO staff at the community level. I know that sometimes there are medevacs that happen from Ornge and also SkyCare, at all times of the night.

Again, I'm asking the government representatives across the way to seriously consider this. People pay with their lives and with their health if there is no proper airport maintenance.

Also, in the back I see some pictures of the damage to your planes.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Sol Mamakwa: Can you explain the pictures a bit?

Mr. Donavon Macklin: Yes. Some of that damage—that's just overall rock damage. From day-to-day operations, that happens. We recently had an airplane fixed to that standard. I think we were in the half-million-dollar range for repairs to it. All that cost gets borne back to the user, which is either the government through health travel or the people travelling to actually get out of a First Nation community.

We also have propeller damage and wheel damage, where the airplane has been stuck up there because it could not operate out of there because of damage received.

Mr. Derrick Flynn: As a direct result of not maintaining the runway.

The Chair (Mr. Amarjot Sandhu): We'll move to the government side now. MPP Skelly.

Ms. Donna Skelly: Thank you for your presentation.

What is the financial formula? Who pays for what in terms of municipalities, provincial government and federal government when it comes to the airports in the north?

Mr. Tom Morris: The remote airport program is run by the Ministry of Transportation, by the Ontario government

Ms. Donna Skelly: So everything—the buildings, the runways, the staffing—is all MTO? There's no federal funding in these airports? Okay.

Mr. Donavon Macklin: Not for day-to-day operations.
Ms. Donna Skelly: That's what I'm saying. Day-to-day operations versus capital costs. I know that in Hamilton there's a discrepancy, and the feds came in with certain money. I think they cover the cost of the runways.

Mr. Donavon Macklin: No, there's no federal government coverage except for enhancements, and we haven't seen any of those in the north for a couple of decades probably.

Ms. Donna Skelly: What do you mean by "enhancements"?

Mr. Donavon Macklin: Improvements.

Ms. Donna Skelly: So in your opinion, this is a provincial jurisdiction.

Mr. Donavon Macklin: Yes.

Ms. Donna Skelly: Okay. We've talked about the gas tax, the aviation fuel tax rate and the cut to that rate. Has that been beneficial in any way?

Mr. Donavon Macklin: It doesn't affect us north of Thunder Bay.

Ms. Donna Skelly: Why is that?

Mr. Donavon Macklin: My understanding of the setup is that we do not see any benefits one way or the other because of the fact that we're an essential service north of Thunder Bay.

Ms. Donna Skelly: So you don't get a reduction in the tax rate?

Mr. Donavon Macklin: I don't know for sure. I can't answer that right now.

Ms. Donna Skelly: Okay. I would appreciate it if you could find out for us if that is indeed the reality. So it wouldn't be for any flights north of Thunder Bay? Okay.

You would like to see longer hours at the airports. Is access to staff an issue at all?

Mr. Donavon Macklin: Access to fully staffed can be an issue, but the fact is that they're only budgeted for two employees at each airport. The community of Sandy Lake, I think, is about 3,000 people. There are two employees to staff the airport for all travel links.

Ms. Donna Skelly: For everything.

Mr. Donavon Macklin: Everything.

Ms. Donna Skelly: And the hours would be your typical 9 to 5 and if you're flying in at night—or you wouldn't fly in at night regardless.

Mr. Donavon Macklin: You're taking a risk on your own to go and do it.

Ms. Donna Skelly: Do you use float planes and can any of these float planes land on the ground as well?

Mr. Donavon Macklin: We don't use float planes, but there are float planes out there with wheels. When you go with float planes, the cost to travel at least doubles. We're trying to find the most cost-effective and safest method for our people to travel.

Ms. Donna Skelly: Okay. Thank you.

The Chair (Mr. Amarjot Sandhu): Any further questions? MPP Smith.

Mr. Dave Smith: I appreciate everything you've got in here, talking about the deficiencies at the airports and asking for the enhancements and upgrades to them. Do you have an idea—this is the budget committee, basically, to come up with how much things are going to cost. Do you have any idea what the cost would be to implement what you're asking?

Mr. Donavon Macklin: We've worked with middle management at the MTO level here in Thunder Bay, and they have not shared costs with us. They have said that they've had programs in the past that they wanted to move forward with to give better coverage and—

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. Donavon Macklin: —better reporting, and it was turned down in the last few years.

Mr. Dave Smith: So internally you think we have the costing ourselves—

Mr. Donavon Macklin: To at least partially—

Mr. Dave Smith: —that I could call MTO and say, "Hey, tell me how much it would be."

Mr. Donavon Macklin: Yes.

Mr. Dave Smith: Thank you very much.

The Chair (Mr. Amarjot Sandhu): Thank you so much for your presentation.

FAYE PETERSON HOUSE

The Chair (Mr. Amarjot Sandhu): Our next presenter is Faye Peterson House. Please come forward.

Please state your name for the record. You can get right into your presentation.

Ms. Debbie Zweep: Hi. It's Debbie Zweep. First, thank you for the opportunity to speak to you today.

I am the executive director of Faye Peterson House. We're a 24-bed women's shelter that provides residence as well as outreach services in Thunder Bay and district. Ministry of Community and Social Services and Ministry of the Attorney General funding are critical to our work in supporting women and their families to be safe from violence and the risk of violence in their lives.

1510

Faye Peterson and our board were encouraged to see that the fiscal enhancements were continued this year by this government and that the goal of ending violence against women is shared by MPPs both at the local level and right across the board, I think. We, as a shelter and a board, continue to advocate for funding stabilization to core operating budgets for violence-against-women shelters and violence-against-women services right across the spectrum: prevention, early intervention and response.

Reducing the prevalence of gender-based violence in Ontario needs to be the urgent priority of this government. We'd like you to invest in the safety of women and children. I think you heard from Marlene Ham in Toronto, from OAITH, that we have been working in a strong lobby to address the long-standing funding crisis of violence-against-women shelters. Through this collaboration with OAITH and with this government, we were pleased with the 4% to 6% fiscal increase that was stabilized in 2018 and 2019, and then we were really pleased in the fall of this year when this government announced that the shelters were given a similar fiscal increase to be provided. We do appreciate the funding to our sector.

Understanding the difference between the number of women served compared to the number of bed-nights provides a better understanding of how many nights shelters were either at capacity, under capacity or over capacity. Shelters will often run over capacity, and they do this by using unfunded beds. When women are in danger and we provide them no space, it's equivalent to a 911

operator or to the ambulance officer saying, "We can't come and save your life."

Further to this, women are staying longer in shelters, simply because there is nowhere for them to go due to the lack of affordable housing. Women have to stay longer in shelter, and that creates the domino effect of women not being able to access a shelter bed. While some shelters may be able to use the unfunded beds, other shelters simply don't have those unfunded beds.

I've given you some research from Women's Shelters Canada's Shelter Voices report, which indicates that in one snapshot day, 78.8% of women and children were turned away when trying to access a shelter bed, leaving shelters to pull out a cot, find a shelter bed in another community if it exists, or offer other services to support women until a shelter bed could become available. If you look at some of the statistics I've given you there, in 2016-17, the violence-against-women crisis lines received 51,700 calls, and if you look three years later, we're at 65,700 crisis calls. That's just in three years. Clearly those facts can't be erased. We need more support to women, to be able to get them into our shelter.

Violence-against-women shelters must respond to the community crisis and not to my bank account. It's really hard for me to say no to a woman when I am full, simply because I don't have the funds to be able to bring that woman into shelter. We are falling behind in our staffing ratios, wages and compensation. One of the things I'll just point out to you on page 4 is that we are always losing our staff to systems that can pay higher, things like the hospital and certainly child protection, so even when I do have really qualified workers, they are often taking jobs in other sectors due to the lack of funding.

We believe that good fiscal health requires planning and vision in order for us to achieve our goals. However, incremental fiscal investment models are posing a significant challenge. While we certainly appreciate the enhancements, we need to be adopted into the core funding contracts for 2020. Fiscal enhancements create uncertainty and instability in our sector. We trust that over the past two years, we, as violence-against-women shelters, have demonstrated to this government that these investments would be better served with a plan to annualize them so that they can do the work that they need to be doing.

Let me speak to you about a couple of programs. The Family Court Support Worker Program is certainly in need of this government's attention. We are in 42 court jurisdictions, but this program has just grown exponentially. I currently have 1.4 staff to serve all of Thunder Bay and region, and right now that person can only respond to the highest-risk situations, because we have so many of them. The ongoing needs of women and their children utilizing this program cannot be overstated. These cases are complex and traumatic—not only to the women and children involved, but also to the staff.

The safety of children must have this government's attention. Children don't have the choice of what happens to them. They must rely on the court system to protect

them when it comes to custody and access. Strong advocates in the Family Court Support Worker Program put children's safety first.

We have always known, but it has been demonstrated repeatedly with the development of this program, that in order for Family Court to be more effective, Family Court support workers need to be available to more women. We know that women are safer and that their primary concern when in Family Court is their safety.

My second point is mental health and addiction. Many women coming to us have a co-occurrence of violence, substance use and trauma. This is well documented in our research, but our system and services significantly miss the mark in addressing the needs of survivors when gender-based violence, trauma and substance use are co-occurring. As a result, VAW shelter programs and services are left filling the gap, with no resources to do so.

I'm going to say that 90% of the women that I work with are struggling with co-occurrence, that they're living with substance use and/or mental health barriers, along with the trauma that has spanned their life, perhaps. They are now—

The Chair (Mr. Amarjot Sandhu): One minute. Ms. Debbie Zweep: Oh, good God. Sorry.

I want to tell you that children are also significantly impacted by violence in the home, often experiencing PTSD, which leads to learning difficulties, delays in reaching milestones and brain development.

Ms. Donna Skelly: You can take our time if you have more to say.

Ms. Debbie Zweep: Oh, okay. Good.

Recommendations: I'm really asking that the enhancements that this government has given to us—that you continue to do that. It allows us to provide child care. It allows us to provide resources to the women. There is value in the money that you are giving us.

The smaller shelters, I want to tell you, don't have access to child care workers because they don't have the budget. So there are children—even though we serve more children than we do women—who don't have children-specific services.

In the two 10-bed shelters, in Marjorie House and Greenstone, their budgets are \$450,000 or less to run 10 beds. Without this fiscal funding, they would have to actually close their doors. Can this government look at a minimum base funding for 10-bed shelters and consider—

The Chair (Mr. Amarjot Sandhu): I apologize to cut you off. Your time is over, but the government side has allotted their share of time to finish. You can continue, thank you.

Ms. Debbie Zweep: Okay. Can this government look at a minimum base funding for 10-bed shelters—we've talked about this a number of times—to consider the cost of travel, food and basic resources like heat and water for the shelters, and annualize their funding to reflect these realities? Marjorie House in Marathon has been over capacity for months, where women don't want to leave their community, and there are no dollars to support those additional women in the shelter.

The cost of flying women and their families from the north into Sioux Lookout and Red Lake has continued to increase, and yet there has been no increase in that funding. So we are asking the government to consider our Far North shelters, where often women are most at risk.

I guess one of the things around investing in community prevention programs—years ago, when the Conservatives were in government, we had a wonderful program called school-based services, where we were able to work with school boards and violence-against-women agencies to work with the teachers and the kids, to teach them what they were actually seeing. We would love to see that program reintroduced.

Finally, invest in decent, accessible, affordable housing that offers flexibility. Right now, Faye Peterson has an application in to Canada Mortgage and Housing for a 10-bed apartment. We ask that this government continue to support the housing strategy and to support the physical maintenance of these housing complexes.

The Chair (Mr. Amarjot Sandhu): MPP Skelly? Ms. Donna Skelly: Go ahead.

The Chair (Mr. Amarjot Sandhu): MPP Piccini?

Mr. David Piccini: Thank you for the vital work you do. I know in my riding—Cornerstone, the vital work that they do. I've supported them over the past number of years. It's just remarkable, so thank you.

One of the issues that was flagged that I've seen is siloed funding to different organizations. Shed some light. I know that VAW funding went to three different organizations in my riding, one of which was outsourced to another organization.

Ms. Debbie Zweep: Yes, that can happen for sure.

Mr. David Piccini: Can you talk to me about how to better integrate those services? At the end of the day, someone who is the most vulnerable struggles to navigate that. If I'm struggling to navigate that, how are they going to do that?

Ms. Debbie Zweep: In Thunder Bay, here I would say that we navigate it pretty well because we're smaller and we all know each other, and we'll make sure they don't fall through the cracks. But the last thing we want is someone to be involved, for instance, in hospital services in the domestic violence sexual assault centre and to receive services there that doesn't have a relationship with a shelter or with counselling services. That's an example of where we might get siloed.

Women's services in our women's centre: They might have a pot of money around poverty reduction, right? And many women who are living in violence have poverty as a root cause for their violence. So that's another area. It really then becomes based on relationships. If we had more of an inter-ministerial government that was looking at the issue of poverty and violence against women, then we would be able to do that.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. David Piccini: Okay. Thank you.

The Chair (Mr. Amarjot Sandhu): MPP Skelly? 1520

Ms. Donna Skelly: Thank you for your presentation.

My question is about unique services, or I should say unique needs, in the north. Can you share your experience and how that would differ from southern Ontario?

Ms. Debbie Zweep: Yes, for sure. Geographically, we're very challenged in getting women to services. If you talk about Marathon, for instance, there is one service that will get a woman there if they're seeking safety. If they're coming from the Far North—the cost of flying women in to Sioux Lookout and Red Lake has, as I said, grown exponentially, so you're always looking at that line, especially at this time of year. You only have so much money in your transportation line. My shelter director friend Tana Troniak will tell you, "The women in Sioux Lookout are eating Kraft Dinner and wieners, because I have to use the money to bring those women in." That's the reality of the cost.

But with regard to the trauma, we serve many women who have had a life of trauma, and the children as well. So the needs are complex, because women will seek substances; they will also have mental health issues arise from the violence, and then those co-occur. It becomes very complex in working with women, and we have many women coming to us who have these complex needs. And I think that they are different.

The Chair (Mr. Amarjot Sandhu): Thank you. We have to move to the opposition side now. MPP Monteith-Farrell.

Ms. Judith Monteith-Farrell: Hi. I'd like to thank you for your presentation and thank you for your work in our community, which has been exceptional, and your dedication to this cause.

From your presentation, I think the main focus that I heard is that you require stable funding that is not something that can be taken away, so you can do some planning. Is that fair?

Ms. Debbie Zweep: That's correct. I think that we were really pleased this fall when the government gave us the fiscal piece. It allowed, for instance, many of us to have child care not just from 9 to 5, but to have it on the weekends, provide resources to our families like a taxi when it's cold instead of the bus. So, yes, we'd like that piece stabilized for sure by seeing it annualized in 2020-21.

Ms. Judith Monteith-Farrell: I know your organization has done work around outcomes for women and children. Can you elaborate a bit on the impact you've had?

Ms. Debbie Zweep: Oh, yes. We have a number of reports written with regard to women's success in being able to live lives free of violence. A woman may come to us 10 times—and that is a reality, certainly, for some women. But at the end of the day, women will tell you that they have been safer, their lives have been saved, they have been able to move on and be great mothers and raise great children. That's what we want—for everyone to have that experience.

Ms. Judith Monteith-Farrell: Thank you.

The Chair (Mr. Amarjot Sandhu): Any further questions? Seeing none, thank you so much for your presentation.

Ms. Debbie Zweep: Thank you.

CITY OF THUNDER BAY

The Chair (Mr. Amarjot Sandhu): Our last presenter of the day is the city of Thunder Bay. Please come forward.

Please state your name for the record. You have seven minutes for your presentation.

Ms. Shelby Ch'ng: Thank you very much. My name is Shelby Ch'ng and I am a city council member in Thunder Bay.

I'd like to address four issues for this budget consultation, the first being the OMPF.

The city of Thunder Bay is faced with higher costs due to geographic location, low assessment growth and an above-average senior population. With the reduction in the OMPF grant, representing 10% of our taxation revenue, to maintain even the status quo, we are pricing people and businesses out of our city.

We would like to thank the government of Ontario for the grant funding on our services review to find efficiencies. We are also undertaking two additional core reviews on fire and emergency services departments. While it looks promising to find efficiencies, it isn't enough to close the gap left by the OMPF reductions.

I am here representing the will of my council and the citizens of Thunder Bay to ask for two things regarding the OMPF. The first is that the city of Thunder Bay recommends that the provincial government commit to stabilizing the OMPF and ensure that the funding allocation formula clearly reflects the unique needs of communities in northwestern Ontario. The second is, we recommend that the provincial government continue to provide early allocation notices to assist with budget preparations at the municipal level.

The second issue I'd like to bring to your attention is our multi-use indoor turf. Thunder Bay has a long history of hosting major sporting and tourism events in the city. As a hub in the north, we place a strong emphasis on ensuring that our athletes and tourists have a place that not only meets the demands of our community, but also acts as an economic driver. Thunder Bay is always punching above its weight class when it comes to hosting sporting, tourism and cultural events. My council has placed the multi-use indoor turf as the number one priority for the ICIF funding envelope.

As an active ultimate Frisbee player myself, I can tell you that I've seen the bleed of our tourism dollars and sports tourism head just south of the border and out west to fund Manitoba tourism. Our tourism, sporting and cultural event dollars are leaving our city and our province. We need not only to mitigate our dollars leaving the community, but we desperately need to keep pace with the changing expectations of such events and be able to compete with abutting municipalities to Ontario.

This project isn't about the entertainment of sport, tourism and culture, but the economic multiplier that accompanies such events. We have done the preliminary work, and my council has approved moving forward with a preengineered metal building for the facility. We are hopeful that the province will see this as an investment opportunity in the north, and nominate the project to the federal Investing in Canada Infrastructure Program.

The third issue I'd like to bring to your attention is mental illness and addictions. Mental health and addiction issues are disproportionately high in northwestern Ontario, and clients have increasingly complex needs, often a dual diagnosis of addiction and mental health.

A lot of money and resources are spent in crisismanaging those suffering from mental health and addiction issues. A dedicated facility would ease the pressure off our overburdened emergency room, freeing up muchneeded space and creating a more efficient use of resources. A dedicated facility to treat and manage mental health and addiction issues will also have a positive effect on the way we police and we respond to medical emergencies, and have a major effect on creating a safer, more efficient use of our shelters and homelessness programs. A wellmaintained and -controlled facility for mental health and addictions will have major cost-savings implications, compared to the system of crisis-managing that we have

As a representative of my council and the citizens of Thunder Bay, I am here to request that the province of Ontario consider establishing a comprehensive centre for people with mental health and addiction issues in Thunder Bay. We understand the importance and cost mitigation associated with such a dedicated facility, and are committed to supporting a location that meets the needs, goals and objectives of the agencies and organizations involved, as well as those of the province.

My fourth and final issue is around guns and gangs. I would like to begin by thanking the province for the grants we received through the joint mobile crisis response team, Floodway river safety patrols, and human trafficking. While we are thankful for funding, we have a major issue that still needs to be addressed in our community: guns and gangs.

I've lived in Thunder Bay my whole life. I remember a time when Thunder Bay would go almost a year without a murder. Not much time has passed, and yet I find myself living in a very different city than the one I grew up in. As a member of council, I receive the police briefings on the arrests that are made in my community. Almost on a weekly basis, our police are arresting gang members from Ottawa and Toronto who see our mental health, poverty and homelessness issues as a fertile breeding ground for their economic adventures.

I am truly happy for the cities like Ottawa, Toronto and Waterloo, who are given millions of dollars without having to apply through grant applications to deal with their guns-and-gangs issues. The disruption of guns-and-gangs activities may help in those particular municipalities, but it has pushed the activity further north.

We are living in unprecedented times in Thunder Bay in regard to guns and gangs. I believe that the province needs to be treated as a whole to truly solve this issue. Gangs are more mobile than they ever have been before, and when their black market economy is disrupted, they will look for new markets. Thunder Bay has been their new market. With our mental health and addiction issues that I mentioned in the last issue, we are the perfect breeding ground for such nefarious activity.

We are understaffed and continue to be ranked by Statistics Canada as a place for violent crimes and homicides. Mitigating the guns-and-gangs issues will not only cost less in crisis spending, but will also help with setting up the north as a place to live in Canada, and help us build a case for the economic and social prosperity that our province deserves.

My ask today is that you invest into Thunder Bay police as it relates to the guns-and-gangs issues that other municipalities have been able to take advantage of.

Thank you.

The Chair (Mr. Amarjot Sandhu): We'll go to the opposition side for questioning. MPP Mamakwa.

Mr. Sol Mamakwa: Thank you for the presentation, Shelby.

One of the things that we're hearing time and time again throughout the last two days is, of course, mental health—not just First Nation but also non-Indigenous institutions and organizations on the issue itself.

What effort has the city done with respect to perhaps partnering, working with Indigenous people, First Nation organizations, First Nation communities with regard to addressing mental health, for example?

Ms. Shelby Ch'ng: Thank you so much. The things that I'm most proud to be working on with the city of Thunder Bay are the items that came out of the inquest. I think they've played a role in helping the city understand and identify not only the issues faced by the Indigenous population, but mitigating the mental health and addictions crisis that's plaguing our city.

1530

Mr. Sol Mamakwa: Thank you for bringing up the inquest recommendations. I gave my colleagues a gift before coming up to Sioux Lookout and also joining me here in Thunder Bay: Seven Fallen Feathers. I've given it to them so that they have an understanding of what Thunder Bay faces—and not only that, but what First Nations face as well when they come here.

I know one of the things that the city and also the police have been faced with is the issue of systemic racism. I'm not attacking any police officers, but sometimes systems that are there just operate like that. I'm just wondering what work the city is doing with regard to that.

Ms. Shelby Ch'ng: Understandable. The municipal council, under the Municipal Act, isn't responsible for policing, because they are under the police act. However, we work as closely as we can with the police to ensure that they are well funded, as best we can in the economic crisis that we are actually in.

The Chair (Mr. Amarjot Sandhu): MPP Monteith-Farrell?

Ms. Judith Monteith-Farrell: Hi, Shelby. Thank you for your presentation. I'm glad you're here.

I'm just wondering—off the top of my head, I can't remember—what was the ask from Police Chief Hauth from the city for guns-and-gangs work?

Ms. Shelby Ch'ng: For the 2019 budget, I believe it was up by \$1.5 million. I know that included a number of things. I can't tell you off the top of my head what was specifically dedicated to guns and gangs. I do know that we are very short on what we need to properly fund our police department.

Ms. Judith Monteith-Farrell: I heard that we were looking at a \$6.2-million deficit as far as what we need to carry forward into the next fiscal year. Is that correct?

Ms. Shelby Ch'ng: That sounds pretty accurate.

Ms. Judith Monteith-Farrell: All right. Thank you.

The Chair (Mr. Amarjot Sandhu): Thank you. We will go to the government side now. MPP Piccini.

Mr. David Piccini: Thank you very much, Councillor, for presenting today. I really appreciate it. I think, as a rural Ontario MPP, that you hit on a couple of big issues for the 13 municipalities that I represent as well, OMPF being one.

Just talk a bit about the importance of budget planning. I know that we committed in 2021 to the \$500-million allocation. You have a government now that is listening and engaging on OMPF. I think for some of my smaller rural municipalities, there have been big challenges on that formula, especially with ag lands, when 75%-plus of the land is ag. Talk about the importance of that budget planning process and what you'd like to see for this community in OMPF, as we're now planning for 2021 a full year in advance. The government has committed to announcing it well before the budget planning cycle to give you predictability.

Ms. Shelby Ch'ng: I think predictability and just knowing ahead of time is probably one of our biggest strengths when planning our budget. We are experiencing lower economic growth than a lot of the province, and with a high senior population, we have nothing else to do but to raise property taxes. That essentially prices incoming businesses out, because of that funding formula with

MPAC, and our seniors out of their houses, so it has this domino effect. We're hopeful that the province and the municipalities can see the OMPF as a solid transfer, so that we can maintain at least the status quo, keep our seniors in their houses and attract business.

Mr. David Piccini: I want to move to mental health. I hate the "status quo" word. I know we all collectively in rural Ontario want to do better and attract businesses. I think that's a broader conversation, but one this government certainly is engaged in and wants to have with our municipalities, to make sure they're more competitive.

On mental health: With the centre of excellence that has now been announced and the unique ministry dedicated to that, if we could take one message back to Minister Tibollo on mental health with that new centre of excellence—you talked about a place unique here in Thunder Bay—what message do you want us to convey?

Ms. Shelby Ch'ng: If you have been in our emergency rooms in the last little while, you will see that EMS resources have been taxed to the max. People suffering from mental health issues and addictions are placed beside a senior who may have fallen and broken a hip inside the emergency room, and there's no real barrier between that person who is receiving care and the other person who is receiving care. Both are equally important; however, when you have the two side by side, it creates a lot of hostility.

To MPP Mamakwa's point, it's a breeding ground for racism and hatred, because people are just so at their wits' end in our emergency room. It's backlogged. It's understaffed. Just picture your elderly parent next to somebody who's suffering from a mental health or addiction issue.

The Chair (Mr. Amarjot Sandhu): One minute.

Mr. David Piccini: Thanks very much.

The Chair (Mr. Amarjot Sandhu): Any further questions?

Thank you so much for your presentation and for wrapping up the day.

Ms. Shelby Ch'ng: Thank you.

The Chair (Mr. Amarjot Sandhu): That concludes our business today. I would like to thank all the committee members, the presenters and the committee staff.

The committee is now adjourned until 9 a.m. tomorrow in Belleville. Thank you.

The committee adjourned at 1535.

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