



Reference Paper

The Origins and Evolution of Veterans Benefits in Canada 1914-2004

*written in support of
the Discussion Paper*

**Honouring Canada's Commitment:
"Opportunity with Security" for Canadian Forces
Veterans and the Families in the 21st Century**

prepared by
Veterans Affairs Canada – Canadian Forces Advisory Council
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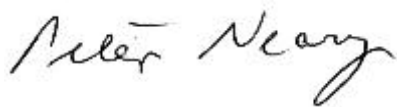
Foreword

In July 2000 the Veterans Affairs Canada – Canadian Forces Advisory Council was established to offer the Department of Veterans Affairs advice, within the scope of its mandate, on how to address a number of challenges facing members and veterans of the Canadian Forces and their families. The Advisory Council has been meeting twice a year ever since to advance this aim.

During a meeting in October 2002, the Advisory Council concluded that despite numerous and ongoing improvements in the existing range of services and benefits available to Canadian Forces veterans and their families, the time had come to propose comprehensive reform. In order to place the case for renewal squarely on the public agenda, the Advisory Council has produced “Honouring Canada’s Commitment: ‘Opportunity with Security’ for Canadian Forces Veterans and Their Families in the Twenty-First Century” and this companion reference document, “The Origins and Evolution of Veterans Benefits in Canada, 1914-2004.”

It is imperative that the men and women of the Canadian Forces should be assured at all times that our country has a comprehensive, coordinated, and easily understood plan for their future. Today, Veterans Affairs Canada, working closely with the Department of National Defence, is working towards the renewal of services and programs required to achieve this goal.

In submitting this document, the Veterans Affairs Canada – Canadian Forces Advisory Council wishes to chronicle the evolution of veterans benefits in Canada in order to enhance understanding of the historical commitment that has been made to those who serve our nation in uniform. It is upon this foundation – this trust – that we build today.



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I Creating Opportunity with Security

Why does Canada have a program of veterans benefits? And why is there a unit of government called Veterans Affairs Canada? The answer to these questions is to be found in the service that Canadians gave and the sacrifices they made during the two world wars of the twentieth century (1914-18 and 1939-45), the Korean War (1950-53), and other military operations since 1950 in the continuing cause of national defence, world peace, and security.

During the First World War, more than 600,000 Canadians enlisted, including 3,000 women who served as nursing sisters. The number approaches 700,000 when enlistment in Canadian units outside the Canadian Expeditionary Force and in the British forces is taken into account.¹ Of these, the war dead numbered nearly 67,000. During the Second World War, more than a million Canadians donned uniform, of whom 45,000 lost their lives. About 27,000 Canadians served in the United Nations' forces during the Korean War, and the names of 516 who never returned are recorded in the Korean Book of Remembrance in the Parliament Buildings, Ottawa.

In the last half-century, the men and women of the Canadian Forces (CF) have defended our territory, have acted in concert – at home and abroad – with our North Atlantic Treaty Organization (NATO) and North American Aerospace Defence Command (NORAD) allies, have helped win the Cold War, and have carried out difficult and demanding peacekeeping and peacemaking duties in many parts of the world. Over 500 were buried in England, France and Germany while serving during the Cold War, 115 lost their lives in other overseas military operations (peacekeeping, peacemaking, etc.), and many lost their lives training in Canada for war. This is an exemplary record, and the Government of Canada has recognized it as such.

A. Covenant and Commitment

To put on the uniform of one's country – and this is as true today as it was in 1914 – is to make an extraordinary commitment: to put oneself at risk, as required, in the interests of the nation. It is this commitment that explains and justifies veterans benefits and the branch of government that administers them.

Wisely, Canada has understood that extraordinary sacrifice and service require extraordinary recognition. Veterans benefits and the military record that lies behind them are central to the narrative of Canadian nationhood. Canada has a comprehensive program of these benefits because of its long and distinguished military history. By the same token, a well-thought-out and up-to-date scheme of veterans benefits – one that links recruitment, retention, and recognition – is essential to the well-being and operational effectiveness of today's Canadian Forces.

Between those in uniform and the country they serve there is an implicit social covenant that must be honoured. All this was well understood by previous generations of Canadians, as evidenced by the fact

that veterans benefits as such have never been an issue in party politics. Rather, there has been support across the political spectrum for measures designed to fully carry out the country's obligation to those who enlist. There have been differences of opinion about the extent of programs and their administration, but not about the fundamental concept of veterans benefits or the need for Canada to have a comprehensive benefits program. This is all to the good and is an important legacy in dealing with contemporary issues. Translating the social covenant between the public and the military into practical policy and judicious administration is the work of Veterans Affairs Canada.

In Canada as elsewhere, recognition of veterans has taken two forms: commemoration and tangible benefits. The commitment of Canadians and their government to commemoration has been truly inspirational. The country has cared for the graves of its war dead, created national Books of Remembrance, built monuments like the National War Memorial in Ottawa and the Canadian National Vimy Memorial in France, and maintained historic battlefields in such places as Beaumont Hamel. Canada has preserved war records, organized veteran and youth pilgrimages, and solemnly honoured 11 November as Remembrance Day, which is now the focus of Veterans' Week. This is an exceptional record of achievement of which all Canadians can be proud. We have not forgotten and we will not forget.

In terms of tangible benefits, the country has given priority to looking after the families of the war dead while making benefits generally available to veterans, based on disability status and length and place of service. During the First World War, as the conflict deepened and casualties mounted, Canada scrambled to meet an emerging need and to carry out the promise made by the Union Government in 1917: "The men by whose sacrifice and endurance the free institutions of Canada will be preserved must be re-educated where necessary and re-established on the land or in such pursuits or vocations as they may desire to follow. The maimed and the broken will be protected, the widow and the orphan will be helped and cherished. Duty and decency demand that those who are saving democracy shall not find democracy a house of privilege, or a school of poverty and hardship."² This was a big commitment, and by definition it led the federal government into activities – in health and education, for example – that were normally under provincial jurisdiction.

The federal government was responsible for national defence and, by extension, it became responsible for veterans affairs. Veterans had served the nation, and they expected the national government to act on their behalf. The Government of Canada accepted this responsibility. War obliterated many federal-provincial distinctions, and the administration of veterans benefits followed suit. Veterans benefits have, therefore, cut across regional, ethnic, language, class, and gender lines. As such, they have done more than assist tens of thousands of individual Canadians and their families – they have also been a unifying force in the country.

Veterans benefits have been a building block of the Canadian social welfare state. They have provided a social laboratory for Canadians and made them aware of what is possible when government acts decisively to meet a demonstrated social and economic need (and, in the case of the Second World

War, to anticipate it). By serving the particular good, veterans benefits have also served the common good. Many of the social benefits we take for granted today originated or were pioneered in the context of Canadian veterans benefits, including free hospital coverage, vocational retraining for the disabled, federal support to post-secondary educational institutions, business development loans, publicly funded legal aid, income support for the needy, and home care.

B. The First World War

On 1 November 1914, less than three months after Canada entered the First World War and a month before the first members of the Canadian Expeditionary Force landed in France, four Canadian midshipmen aboard the cruiser HMS Good Hope lost their lives in battle off Coronel, Chile. The young men's sacrifices was followed by 66,650 more and four years of heartbreaking bloodshed until Canada's last loss on 11 November 1918. On that day, two minutes before the Great War's armistice was signed, Private George Price of the Saskatchewan Regiment was killed by an enemy sniper in Mons, Belgium. Along the road to peace, 172,950 other Canadians had been wounded, many grievously.

As Canadians prepared for the Battle of Vimy Ridge in 1917, they were visited by the prime minister, Sir Robert Borden, who offered this commitment:

You can go into this action feeling assured of this, and as the head of the government I give you this assurance; that you need have no fear that the government and the country will fail to show just appreciation of your service to the country in what you are about to do and what you have already done. The government and the country will consider it their first duty to ... prove to the returned men its just and due appreciation of the inestimable value of the services rendered to the country and Empire; and that no man, whether he goes back or whether he remains in Flanders, will have just cause to reproach the government for having broken faith with the men who won and the men who died.³

As the soldiers, sailors, and air pioneers of the First World War returned to Canada, they wondered how well Borden's commitments would be translated into positive, practical assistance. By the standards of that time, the program the government had devised for returning veterans was groundbreaking and controversial. Certainly it offered more than the medals and land scrip provided to veterans of the Northwest Campaign of 1885, and it far eclipsed the little that was done through the Canadian Patriotic Fund for those who served during the South African War. Still, by today's standards, the First World War program was decidedly limited in scope.

On 30 June 1915, the Government of Canada established the Military Hospitals Commission, which by 1918 was running fifty hospitals and sanatoria with 10,754 beds.⁴ In time, this organization evolved into a network of veterans' hospitals that extended from Halifax to Vancouver, bringing the federal government into the health-care field in an unprecedented fashion.

On 21 February 1918, the Department of Soldiers' Civil Re-establishment was created under the leadership of Sir James Lougheed, who had previously headed the Military Hospitals Commission.⁵ The new department transferred most of the Military Hospitals Commission's medical facilities to the army and began to focus on rehabilitation. The vocational training it sponsored was confined to the disabled and those who had enlisted as minors. This necessarily limited the scope of its work. Still, over five years the new department provided 40,000 veterans with vocational training in 140 different occupations, though perhaps its signal legacy was the provision, with full support from the medical community, of free, all-embracing medical treatment for almost 100,000 veterans. This program offered the first glimpse of what later became Medicare, a touchstone of Canadian social policy.

Disabled veterans were also eligible for pensions under the *Pension Act*,⁶ passed in 1919 following a series of actions to meet the wartime emergency. This Act established the Board of Pension Commissioners for Canada (which continued the work of a board of the same name that had been established on 3 June 1916),⁷ and it specified the terms of veterans' pensions for death and disability. Disability pensions, based on application and medical assessment, were to be awarded on a percentage basis according to a table of disabilities. Percentage disability, as determined from the table, was translated into actual pension according to a schedule of payments with twenty classes (5 to 100 percent), and amounts varying by rank or rating while in the forces. Later, a twenty-first class was added to cover disabilities of less than 5 percent. Pension payments were related to employment in the general labour market, and occupation or income before joining the forces was specifically excluded in determining the amount. This, of course, was unlike tort law, which recognizes actual and potential earnings in determining compensation. For able-bodied veterans, Ottawa's plan for re-establishment offered only limited help. There was a small clothing allowance, but the main benefit was a war service gratuity, which varied in amount according to the duration and location of the veteran's service, either at home or overseas.

From 1 September 1920, all veterans of the First World War, including Imperial and Allied veterans living in Canada on 4 August 1914, also became eligible for the benefits of the *Returned Soldiers' Insurance Act*.⁸ This provided life insurance at preferential rates in amounts varying from \$500 to \$5,000 and was meant to encourage veterans to provide for their dependants. Policies could not be used as collateral for loans, and benefits were payable only on "the death or total and permanent disablement of the insured."⁹

By an order-in-council passed in February 1918, all honourably discharged veterans with overseas service were given a preference in appointments to the civil service.¹⁰ This measure offered welcome support to some, but in fact many found it very difficult to obtain appointments to

vacant public service positions, especially during the Great Depression. A different approach to assisting veterans was followed, first in *An Act to Assist Returned Soldiers in Settling upon the Land and to Increase Agricultural Production* (1917) and then in *An Act to Assist Returned Soldiers in Settling upon the Land* (1919).¹¹ Under the 1919 Act, a veteran with a 10 percent down payment could apply to the Soldier Settlement Board for support to get started in farming or to improve an existing farm.

Walter Sainsbury Woods, a British-born veteran of the Canadian Expeditionary Force, who was wounded in France (and who later played a leading role in devising the Government of Canada's program for veterans of the Second World War) remembered his return from the Great War's battlefields as follows:

There were only about six of us de-training in Calgary late at night, one of whom was Private Kinross who had won the Victoria Cross. I proceeded to the local hall of the Great War Veterans' Association, and they directed me to a house where I could get a room. I had decided to take my discharge in Calgary instead of Edmonton where I had enlisted, for personal reasons. I had no pleasant recollections of Edmonton, since it was there that I had lost the mother of my two children just before my enlistment.

So here I was in Calgary entering another phase of my life after almost four and a half years of absence. No job, no home, and no future mapped out, although I was sustained by the knowledge that I was in the best country on earth.

We had been informed regarding the rehabilitation programme that was available to us. It comprised:

1. Pensions and hospital treatment for those suffering from disability or disease as a result of their service.
2. Vocational Training or modest help in university training for those whose war disability precluded their following their previous occupation. This included those who had joined the Forces as minors.
3. A clothing allowance of \$35.
4. A service gratuity based on length and zone of service. A single veteran who served over three years in France and Belgium was eligible for the maximum of \$420 and, if married, \$600.
5. Those experienced in farming could borrow up to \$7,500 from the Government at 5% interest, repayable in 25 years. A 10% deposit was required in the purchase of land.
6. An opportunity to purchase life insurance from the Government.

7. Subject to passing the regular examinations, a preference in civil service employment for those with service overseas.

Ninety-five per cent of those who had served (amongst whom was the writer) found themselves eligible for the clothing allowance of \$35, the gratuity, in my case \$420 (the balance of \$180 being paid to the foster-parents of my children), and a chance to borrow money to settle on the land. I did not want to settle on the land and my assets were therefore \$455 with which to start anew.¹²

C. The Rise of Veteran Advocacy

This scheme had few entitlements and, especially in the case of the *Pension Act*, there were complex eligibility criteria, which produced considerable and continuing disappointment. As might be expected, veterans had their own sense of what their benefits should be, and, sensibly and patriotically, they organized themselves in the interest of remembrance, comradeship, patriotic endeavour, public service, and mutual aid.

In 1917 the Great War Veterans' Association (GWVA), to which Walter S. Woods turned for assistance, was formed in Winnipeg. In 1925 it joined forces with other veterans' organizations to launch the Canadian Legion of the British Empire Service League, now the Royal Canadian Legion. It has ever since been the largest veterans' organization in the country and has worked with other ex-service organizations, of which there have been many, to ensure that nobody who put on their country's uniform would be left out, ignored, or forgotten. Members of the GWVA called one another Comrade, and this remains the practice of the Legion and of veterans' organizations generally, emphasizing the solidarity of all those who have served and the need for veterans to support one another for the common good. Through their constructive work and their philosophy of solidarity and sharing, the veterans' organizations have been the Government of Canada's partners in identifying veterans' needs and defining their benefits.

Within the government itself it was taken for granted, after the First World War, that veterans benefits would be administered by senior officials who were themselves veterans. Thus, the values and ideals of organized veterans could directly influence policy towards those who had served. This continued to be the case in Canada until, with the passage of time, veterans of the Second World War gradually retired from the role.

In the short run, however, there were some trying times in the history of veterans benefits. The soldier settlers of the First World War ran up against a major agricultural recession in the early 1920s and were then hit by the Great Depression of the 1930s. The result was that many of them failed to make it as settlers, and on several occasions the government had to come to the rescue of those who persevered. Similarly, many of those who received vocational training following the war discovered that there was no market for their new-found skills in a Canada stricken by recession and depression.

The *Pension Act* was likewise fraught with administrative difficulties and personal disappointments, and in 1923-24 it was investigated by a royal commission headed by Lieutenant Colonel J.L. Ralston, who was later Minister of National Defence.¹³ The royal commission was launched after a period of intense complaints by the GWVA about the Pension Board's increasingly restrictive application of eligibility guidelines. During the commission hearings, "the GWVA counsel forced board officials and unit medical directors to reveal the confusing instructions, one-sided reports, and arbitrary rulings that had fuelled the veterans' grievances."¹⁴

Dismayed by the board's lack of transparency and its cavalier attitude, the commissioners asked to review a couple of hundred actual pension files – forcing the Board of Pension Commissioners to defend its decisions publicly for the first time. The examination yielded troubling signs of merited compensation denied. A 38-day trip across Canada to hear from veterans and to visit the hospitals, sanatoria, and orphanages upon which they relied confirmed Ralston's belief that much was amiss in Canada's system of benefits for war pensioners. He was particularly critical of the Pension Board's absolute authority: "To those familiar with judicial systems it will seem somewhat striking that the *Pension Act* ... vests in a body consisting of three Commissioners at Ottawa, the sole, original and final jurisdiction to determine the right of applicants for pension for the whole of Canada. There is no appeal, control or effective review by any outside body and the Pension Board is not subject nor amenable to any ministerial or departmental instruction."¹⁵

The Ralston Commission produced four reports and offered numerous recommendations designed to make the nation's system of disability pensions and veterans benefits more transparent, compassionate, and effective. Many of these received support in the House of Commons but were savaged by unsympathetic forces in the Senate. And while a new Federal Appeal Board was created to offer recourse to veterans who were unsatisfied with the Pension Board's rulings, it was given so few teeth that it was ineffective. Far too many veterans' grievances remained unanswered by the government's response to the Ralston Commission and its relatively modest, if numerous, recommendations for reform.

In 1928 government responsibility for the administration of veterans benefits passed to the Department of Pensions and National Health. Two years later an amendment to the *Pension Act* provided for the establishment of a Veterans' Bureau, to be "completely independent" of the Board of Pension Commissioners.¹⁶ The purpose of the Veterans' Bureau was to assist veterans in making pension applications. In practice this work was carried out by pension advocates, lawyers who worked with applicants in preparing their submissions and assisted them in presenting arguments before the board. In effect, through the pension advocate program and in the interest of equity and fairness, the Government of Canada funded applicants to press claims which, if successful, it would have to meet. This was a new concept in Canadian public administration, and it was indicative of how veterans policy fostered innovation that would gain more general application years later.

In 1933 responsibility for pension adjudication was transferred to the Canadian Pension Commission,¹⁷ which performed this function until 1995 and at first reported to Parliament through the Minister of Pensions and National Health. Until 1933 payments under the *Pension Act* were exempt from income

tax, but in that year of Great Depression hardship the advantage was cancelled.¹⁸ By a separate 1930 bill, Parliament had provided for a War Veterans' Allowance,¹⁹ which until 1987 was administered by the War Veterans' Allowance Board. This allowance, known among veterans as the "burnt-out pension," was a discretionary benefit made available to veterans with overseas service who could no longer make a living. Its support for those caught on the economic margins of society presaged later income support schemes such as the Canada Assistance Plan and Old Age Security.

By 1936 there were an estimated 35,000 unemployed veterans in depression-era Canada. In response to the need implied by this statistic, the government established the Veterans' Assistance Commission, which sought to equip unemployed veterans for jobs and provide at least some of them with work.²⁰ One of its achievements was the establishment and initial funding of the Canadian Corps of Commissionaires. In February 1937 the Department of Pensions and National Health renewed and updated the corps' letters patent (which had originally been granted in 1915) and Governor General Lord Tweedsmuir, became the first patron-in-chief of the corps, which made initial plans to enrol 2,000 members. Today the corps maintains seventeen divisions, employing over 17,000 members. It has become the largest security company in Canada and is a major source of employment for former members of the Canadian Forces.²¹

Despite the rigours and economies of the Great Depression, the government had proceeded with its plan to mark the major Canadian battlefields of the First World War and to commemorate the nation's war dead. The greatest of these memorials was raised on Vimy Ridge, site of one of the nation's costliest victories, on land granted for all time to Canada by the Government of France in 1922. Work on the memorial began in 1925. The monument would take eleven years and \$1.5 million to build. On 26 July 1936 a massive delegation of more than 6,000 Canadian veterans and thousands of Allied comrades gathered on Vimy Ridge to see King Edward VIII unveil the twin pylons of Walter Allward's masterpiece. Among those present was the Silver Cross mother, Mrs C.S. Woods of Winnipeg, who had lost eight sons in the Great War. Along with thousands of others from all walks of life, gathered on soil consecrated by Canadian blood, her presence bespoke Canada's resolve to honour those who had served and to remember those who had died.

D. The Second World War

These were worthy efforts, but with war clouds gathering again on the horizon, there was a growing sense that Canada should have done more for its First World War veterans. Even four years later, the sentiment persisted. It was nicely captured in a 1944 letter which Captain Donald Thompson, a young Canadian officer serving in England, wrote to his mother in Saint John, New Brunswick:

Arrived home from leave tonight and had a dozen letters and two parcels and one parcel of cigarettes awaiting for me so I sure was lucky. I certainly felt bad about Wink Johnson [killed in action]; he was a good lad and very well liked. I feel very deeply for his father and mother and will write to them right away. Please don't think that there is any note of weariness or anything in my letter at any time because I am always quite happy, but what worries me most is to think of after the war. What are the people at home going to do for all these lads and the parents or wives and family of the lads that get it? Will they have the same attitude as after the last war, that they are a lot of bums? Or will they face facts and realise the situation and plan now so that lads will be able to go home to an organized country instead of a lot of people worried about paying too many pensions. We all wonder about those things and can you blame us.²²

Not surprisingly, these very matters had for some time been greatly preoccupying both government officials and veterans' organizations. In the aftermath of the First World War, there had been considerable social and economic upheaval in Canada, and there was a determination in Ottawa that nothing similar must happen again. Mobilization for total war, it was now well understood, could destroy the existing order after the conflict ended – unless there was a carefully constructed plan for demobilization and civil re-establishment.

Accordingly, even as the nation ramped up mobilization efforts, the Government of Canada began to plan for the end of hostilities.²³ The first step in a long and complex planning process was taken on 8 December 1939, when a Cabinet committee on demobilization was appointed. This committee, which sought to define the obligation of the state “to those whose lives were interrupted by their service to their Country,”²⁴ was supported by a General Advisory Committee on Demobilization and Rehabilitation, which in turn had fourteen subcommittees. This effort led to Privy Council order 7633 of 1 October 1941, a landmark document in Canadian social history, which promised a rehabilitation benefit to everyone who served in the armed forces during the war. This, of course, was a big advance over what had been done after the First World War, when rehabilitation benefits had been confined to the disabled and those who had enlisted as minors.

E. Opportunity with Security: The Veterans Charter

Fulfilling the promise of PC 7633 and getting the country ready to receive a new generation of veterans was an enormous task and one that fell to a reinvigorated Department of Pensions and National Health, of which, from 1941, Walters S. Woods was associate deputy minister. He well remembered the limited support he had received on his return to Calgary from overseas service twenty years earlier, and he was determined that a new generation of veterans would be served better.

The size of the task facing the government can be appreciated by looking at Canada's Second World War mobilization numbers. In 1941 the nation's population was only 11,506,655, yet as many as 1,032,538 men and 49,327 women enlisted during the war, for a total population in

uniform of 1,081,865.²⁵ During the war's six years, 53,145 of them were wounded and required special care and re-establishment assistance. Over a million more would have to pick up the thread of interrupted lives, careers, and relationships. Planning to return so large a group to civilian life was indeed a daunting task, but it was tackled with imagination, creativity, and goodwill in wartime Ottawa.

The government was ably assisted in this challenge by the Canadian Legion and the other veterans' organizations. The Legion, which was superbly led during the war, ran an educational service overseas and took an inclusive and innovative approach. It quickly succeeded in making itself the voice of those serving in the Second World War, and it advanced their cause as future veterans across a broad front. As always, many of the very best ideas about the benefits Canada should make available to war veterans came from the veterans themselves.

The plan adopted by the government assumed as a "basic truth ... that the great majority of veterans would much rather work than receive relief in any form from the State."²⁶ The purpose of the rehabilitation program was, therefore, to provide "opportunity with security."²⁷ This, together with a comprehensive long-term program for those who could not be expected to look after themselves (the sick, the disabled, and the dependants of those who had died or been incapacitated) was what the situation required. The plan was put into effect in a flurry of statutes and regulations, which took account of duration and location of service (Canada or overseas) and the nature of service (volunteer or conscript). The government's actions also recognized the fact that there were now women's branches of the three armed forces and tens of thousands of women in uniform: in the Royal Canadian Air Force Women's Division, or RCAF (WD), formed in 1941 as the Canadian Women's Auxiliary Air Force; in the Canadian Women's Army Corps, or CWAC (formed in 1941); and in the Women's Royal Canadian Navy Service, or WRCNS (formed in 1942).

On 2 September 1939, by an order-in-council, the government extended the benefits of the *Pension Act* to those who served during the Second World War. But by a further order-in-council, dated 21 May 1940,²⁸ an important qualification was made. By this change an enduring distinction was made between coverage under the "insurance principle" and "compensation principle."²⁹ Thenceforth, those serving outside the country were covered by the insurance principle, which provided coverage on a round-the-clock basis for disability or death incurred during military service, regardless of cause. By contrast, under the compensation principle, those serving inside Canada would be pensionable only for death or disability that could be directly linked to their military service.

As Ian Mackenzie, Minister of Pensions and National Health and a veteran of the Great War, explained in the House of Commons on 6 December 1940:

The chief principle involved in the order in council of May, 1940, was a clearer definition of the responsibility of the state, in relation to those whose service occurred in Canada. It was provided that, when the man served in Canada only, the liability for war pension should exist only when disability or death arose as a direct result of the

performance of military duties. It will be realized that thousands of the men on active service in Canada are engaged in their military duties for only a limited number of hours per day and that, in the evenings and on week-ends, they are at liberty in very much the same way as the ordinary civil employees of the government. . . . Actually, many of them are living normal civilian lives except for the hours during which they are on duty. Full protection is given where death or disability arise as the result of the performance of duty. But a number of cases arose in which men were the victims of accident while away from their military duties and under circumstances in no way associated with their service. It was not considered that any claim for war pension should arise from the consequences of accidents and incidents which come to all of us in the course of our ordinary lives. A special regulation was necessary to meet this set of conditions because the original pension act was based on conditions of the last war, when the assumption was that every man enlisted would proceed as rapidly as possible to a theatre of war.³⁰

In 1941 the *Pension Act* was amended to take account of wartime developments, and beginning in the 1942 tax year, pensions were again exempted from income tax, a provision that remains in effect.³¹ During the same year the *Veterans' Land Act, 1942*, became law. This new Land Act built on the experience of First World War soldier settlers (many of whom were still trying to pay off their properties) and emphasized "part-time farming coupled with other employment," an activity that was said to be "an increasingly important aspect of rural and semi-rural life in Canada."³²

By the *War Service Grants Act, 1944*, provision was made for the payment of gratuities and re-establishment credits. These were entitlements rather than discretionary benefits. The amount of the War Service gratuity was graduated according to duration and location of service, and there was a supplementary gratuity payable for every six months of overseas service. The gratuity was paid in monthly instalments and was available both to volunteers and to those conscripted under the *National Resources Mobilization Act, 1940*, provided they had served overseas. The amount of the Re-establishment Credit was related to the amount of the gratuity, and it could be obtained by sending in bills as they accumulated. It could be used for a variety of purposes, including the purchase of household goods, getting started in work, paying government insurance premiums, or buying a government annuity. The Re-establishment Credit was the rehabilitation benefit received by most Canadian veterans in fulfilment of the promise of PC 7633.

Alternatively, veterans could apply for property under the *Veterans' Land Act, 1942*, or for education and training under the *Veterans Rehabilitation Act* of 1945, which also featured "awaiting returns" for fledgling businesses, temporary incapacity payments, and unemployment benefits for those ineligible for unemployment insurance. The land, education, and training benefits, along with the benefits provided in the *Veterans' Business and Professional Loans Act* of 1946, were not entitlements; they were discretionary benefits that needed official approval.

Other benefits made available to Second World War veterans included a clothing allowance of \$100; free transportation to their place of enlistment or elsewhere in Canada at no more than the same cost; revised civil service preference; veterans' insurance and War Veterans' Allowance schemes; the right to reinstatement in civil employment; preference for jobs with the National Employment Service; and a comprehensive medical plan.

In 1944 The *Department of Veterans Affairs Act* became law. Ian Mackenzie was appointed minister of the new department, with Walter S. Woods as his deputy minister. As well as administering its own programs, the Department of Veterans Affairs (DVA) was intended to act as a coordinating agency within the government for all activities on behalf of veterans. The rehabilitation program for Second World War veterans was designed within the government as a "combined operation" (Woods's phrase), and from its inception the department was involved in complex joint efforts with many other federal and provincial governments and private institutions. For instance, War Service Gratuities were administered by the Department of National Defence; the civil service preference was the responsibility of the Civil Service Commission; and reinstatement in civil employment was the job of the National Employment Service. This inclusive and cooperative approach lives on in Veterans Affairs Canada (VAC), the name by which the original department is now known.

Under the terms of the 1944 Act, the duties, powers, and functions of the Minister of Veterans Affairs extended "to the administration of statutes enacted by the Parliament of Canada, and of orders of the Governor in Council, as are not by law assigned to any other Department of the Government of Canada or any Minister thereof, relating to the care, treatment, training, or re-establishment in civil life, of any person who served in the naval, military, or air forces of His Majesty, any person who has otherwise engaged in pursuits relating to war, and of any other person designated by the Governor in Council, and to the care of the dependents of any such person, and shall extend and apply as well to all such other matters and such boards and other public bodies, subjects, services and properties of the Crown as may be designated, or assigned to the Minister by the Governor in Council."³³

This was a broad mandate, providing the flexibility to meet an urgent and unprecedented social and economic need. To help staff the new department, which had district offices from Halifax to Victoria, Woods went overseas in 1945 and recruited thirty-four men in uniform for senior executive positions. They returned to Ottawa immediately to take up their duties. Their presence was proof that the Department of Veterans Affairs was determined to give priority to the men and women it had been called into existence to serve and that it would be scrupulously fair in the distribution of appointments to those still on duty abroad.

F. Back to Civil Life

One of the early actions of the Department of Veterans Affairs was to inform members of the forces about the government's plan for their re-establishment in civil life. This was done in the booklet *Back to Civil Life*, which went through several printings and was updated as required. In his preface, the

Minister of Veterans Affairs wrote: “The purpose of this booklet is twofold: it is essential that those at present in the armed services shall be fully informed of the steps which have been taken towards their rehabilitation in civil life, and it is of equal importance that prospective employers of these people, and the Canadian public as a whole, shall know what has been done to fit them for their return to the Dominion’s normal peace-time occupations.”³⁴ “Canada’s rehabilitation belief,” he continued, “is that the answer to civil-re-establishment is a job, and the answer to a job is fitness and training for that job. Our aim is that these men and women who have taken up arms in defence of their country and their ideals of freedom shall not be penalized for the time they have spent in the services and our desire is that they shall be fitted in every way possible to take their place in Canada's civil and economic life.”³⁵

In short, Canada was not promising to provide veterans with jobs; rather it would provide them with the opportunity to get jobs. This fundamental message was reiterated in the opening sentence of the booklet, which went straight to the point: “The object of Canada’s plan for the rehabilitation of her Armed forces is that every man or woman discharged from the forces shall be in a position to earn a living.”³⁶ According to this philosophy, success would involve self-help, informed counselling, government assistance, voluntary effort, and business cooperation. In the section of the booklet on “Canadian Pensions,” procedures were reviewed and readers were cautioned, in capital letters: “EXCEPT WHERE TOTAL DISABILITY EXISTS, DISABILITY PENSION IS NOT INTENDED TO PROVIDE COMPLETE MAINTENANCE. DISABILITY PENSION IS COMPENSATION, FOR HANDICAP IN THE GENERAL LABOUR MARKET, WHICH IS PAID BY THE STATE TO ENSURE FOR THE PENSIONER AND HIS DEPENDENTS MAINTENANCE WHICH HE IS UNABLE TO PROVIDE.”³⁷

Retrospectively, the diverse and comprehensive program of benefits devised for the veterans of the Second World War was given an all-encompassing name – the Veterans Charter. This was the title of a 1947 Government of Canada publication, which brought all the statutes and regulations together under one cover and advanced the ministerial claim that what Canada had on offer was “the most ambitious program of rehabilitation ever undertaken, in this or any other country.”³⁸

In truth, the Veterans Charter was a great Canadian success and, as such, remains a source of pride and accomplishment for the nation. Before VE-Day, 250,000 individuals were discharged from the armed forces. During the whole of 1945 a further 395,013 were discharged, and in 1946 they were joined by an additional 381,031 veterans.³⁹ These were very big numbers, and to provide for the reception and counselling of so many, the Department of Veterans Affairs established Rehabilitation Centres across the country. In general, administration proceeded smoothly. Instead of the disruption that had followed the First World War, the country this time went from strength to strength, making the 1950s a golden time of economic prosperity. No doubt, Canada’s favourable position in the world economy contributed to this, but so did the extensive wartime planning on behalf of veterans. Veterans benefits allowed the Government of Canada to keep up the population’s purchasing power while keeping spending within predictable limits and making an investment in young Canadians.

G. “A Social Investment of Unmatched Success”

This investment produced exceptional results. The gratuities and re-establishment credits provided for by the *War Services Grants Act* helped launch many young families and ushered the country into a “baby boom.” By 31 March 1951, more than 51,570 applications of various types, involving a projected outlay of \$251,434,279, had been approved under the *Veterans’ Land Act*, which the veterans’ organizations, through constructive and determined effort, had helped transform into a land and housing scheme.⁴⁰ Given the postwar accommodation shortage and the fact that a housing scheme specifically for veterans had not been included in the Veterans Charter (they were expected to use the *National Housing Act, 1944*), this change was badly needed and was most beneficial.

For training under the *Veterans Rehabilitation Act*, the Department of Veterans Affairs worked through Canadian Vocational Training, a wartime creation, and for university education it worked through an Advisory Committee on University Training for Veterans, which enjoyed the support of the National Council of Canadian Universities. Again, the results were extraordinary. To 31 March 1951, as many as 80,110 veterans had benefited from vocational training and 53,788 had been supported in their university studies. During the 1947-48 academic year, 49 percent of students at the University of Toronto, the institution most affected by the postwar surge in enrolment, were veterans. In 1949-50 veterans still accounted for 21 percent of all Canadian university students. The veterans approved to attend university were provided with living allowances that recognized family obligations; they had their tuition paid and had access to a loan scheme. At the same time, the institutions that admitted them received annual per capita supplementary payments from the federal government to facilitate necessary expansion. By these means the Veterans Charter quickly produced a whole generation of Canadian professionals and dramatically expanded the country’s academic infrastructure.

Using the preferential borrowing arrangements of the *Veterans Business and Professional Loans Act*, 7,371 veterans gained access to \$14,169,235 by the time the program closed on 31 December 1954. Along with farmers who were starting new agricultural enterprises, these new businesses were also eligible for up to twelve months of “awaiting returns” allowances. These were intended to bridge the entrepreneur until a sufficient number of customers, clients, or patients provided a steady cash flow to the business. By December 1947, \$27,500,000 had been paid out to 63,368 veterans in business or the professions.

One section of *Back to Civil Life* was entitled, “Women Are Fully Eligible.”⁴¹ They were indeed eligible, though within a program that had been designed primarily for men, who accounted for the vast majority of enlistments. Olive Ruth Russell, a psychologist who had served in the CWAC, was named executive assistant to the Director General of Rehabilitation and was put in charge of women’s rehabilitation. Under her direction, female veterans were counselled by fellow women at the Department of Veterans Affairs Rehabilitation Centres. Russell believed that the Veterans Charter offered an unprecedented opportunity to challenge the gender division of labour in Canada, but in

practice she had only limited success in this regard.⁴² Nevertheless, by 30 September 1947, a higher percentage of female than male veterans had taken vocational training or gone to university with government support. This was a hopeful sign for the future.

The fledgling Veterans Affairs department was also at the fore in resisting the postwar dismissal of women from the civil service and in advocating the right of married women to work for the Government of Canada. The case for this position was forcefully put by Major General E.L.M. Burns, the Director General of Rehabilitation, in a 1945 memorandum. Under the Charter of the United Nations, he wrote, Canada had agreed to “the realization of human rights and fundamental freedoms for all without distinction as to race, sex, language or religion,”⁴³ and prohibiting the employment of married women in the civil service would violate this pledge.⁴⁴

Groups that were not in the armed forces and some groups that had served in previous conflicts also benefited directly from the Veterans Charter. Through provisions of the *Allied Veterans Benefits Act*, the *Special Operators War Services Benefits Act*, the *Women’s Royal Naval Services and the South African Military Nursing Service (Benefits) Act*, the *Supervisors War Service Benefits Act*, the *Fire Fighters War Service Benefits Act*, and the *Civilian War Pensions and Allowances Act* – all of which were passed in 1946 – a limited number of Veterans Charter benefits were extended to individuals who, though not enlisted in the Canadian forces, had given distinguished wartime service overseas.

As originally passed, the *Civilian War Pensions and Allowances Act* covered nine categories of people: Canadian merchant seamen and salt-water fishermen; auxiliary services personnel; members of the Corps of (Civilian) Canadian Fire Fighters for Service in the United Kingdom; Royal Canadian Mounted Police special constables; air raid precautions workers; members of the Voluntary Aid Detachment; overseas welfare workers; Canadian civilian air crew of the Royal Air Force “Transport Command”; and finally – this was a mixed category – individuals called up for training, service, or duty under the *National Resources Mobilization Act, 1940*, along with anyone who had suffered injury as a result of remedial treatment from the Department of Veterans Affairs in preparation for training, service, or duty, and anyone who had volunteered for active service but had not been accepted because of physical condition.

In 1947 the Minister of Veterans Affairs wrote of the Veterans Charter: “Not for ten, perhaps twenty, years will it be known how much ex-service men and women have been able to contribute to a Canada at peace as a result of these re-establishment measures ... When that accounting is made, I know the program laid down in the VETERANS CHARTER will appear in true perspective as a social investment of unmatched success.”⁴⁵ This was prescient, because there can be no doubt that the Second World War generation, having served the country in uniform, went on to build the social welfare state and raise Canada’s stature in the world. A recent obituary of one of them remembered “a fine example of the generation of Canadians who grew up during the Depression, served their country, worked hard and raised a strong and appreciative family.”⁴⁶ This was true of many veterans, and their individual and collective success in life owed much to the enlightened but fiscally prudent programs of the Veterans Charter.

Beginning with PC 7633, Canada's evolving program for its Second World War veterans had a clear purpose: to build morale for the war effort and ensure a smooth and constructive transition to peacetime conditions once victory was won. It had clear goals: to look after those who could not be expected to look after themselves, while preparing the able-bodied for work in the market economy through the philosophy of "opportunity with security," a concept that respected the basic social and economic realities of the country. It had strong leadership from able administrators, who had learned from the past and had a deep sense of moral purpose and commitment to the public good. It was built on a fruitful partnership between the government and the veterans' organizations. It had support from all political parties and was advanced on this basis. It promoted equality between men and women. It promoted medical innovation, fostering a new understanding of, and a fresh approach to, disability. It mobilized public opinion in support of veterans, especially through the work of the citizens' committees which the Department of Veterans Affairs organized across the country.

The Veterans Charter program helped Canadians to help themselves, always a worthy and worthwhile objective. It discouraged dependency and promoted a healthy independence within the framework of community obligation. It also encouraged veterans to help one another, which they did to very good effect. It acknowledged a national responsibility and reminded Canadians that veterans benefits are nationally administered because the armed forces are a national institution. It effected a clear demarcation between the Department of National Defence (DND) and the Department of Veterans Affairs, the latter being a coordinating agency rather than one delivering all services for veterans. Above all, it promoted respect for those who had served their country. In sum, the Veterans Charter worked exceptionally well, and by 1954, when Deputy Minister Woods retired to Vancouver, the monumental job of civil re-establishment had mostly been done and Canada was a booming country.

In retirement, Woods wrote *Rehabilitation (A Combined Operation)*, an account of the history of veterans affairs in Canada that remains the basic work on the subject. It celebrates a singular Canadian achievement. By Woods's estimate, up to 31 March 1951, the cost of rehabilitating the veterans of the Second World War was \$1,455,985,682, of which \$112,165,250 was for administration, \$106,380,000 for medical treatment, and \$1,237,440,432 for benefits and grants.⁴⁷ By comparison, the expenditure of the Government of Canada in the fiscal year 1950-51 was \$3,759,000,000.⁴⁸

Despite its many achievements, there was much leftover business from the Veterans Charter, which had been a broad-brush program of general application. As such, it did not always recognize or adequately address the legitimate needs and aspirations of many sub-groups who, either in uniform or as civilians, had directly served the country during the war. Addressing these gaps and correcting related oversights has been the continuing business of Veterans Affairs Canada down to the present.

H. Embracing Newfoundland Veterans

The Department of Veterans Affairs welcomed a new group of veterans when Newfoundland (named Newfoundland and Labrador since 2001) became a province of Canada following a referendum on 22 July 1948 that produced a very close result in favour of Confederation.⁴⁹ The union came into effect on 31 March 1949. Newfoundland had developed a modest program of benefits for its Great War veterans, and the British-appointed Commission of Government that administered the country from 1934 to 1949 provided Second World War veterans an improved scheme of benefits, including some training opportunities. The commission's scheme was explained in two booklets, *When You Come Home* and *Now That You Are Home*. It drew on the Canadian example, but in general Newfoundland's arrangements for its veterans of the two world wars offered much less than was available to veterans in Canada.

Consequently, in the negotiations leading to the union with Canada, one of the issues that had to be addressed was how two very different schemes, one less complex and comprehensive than the other, would be integrated. What Canadian benefits would apply in Newfoundland and how would they be administered? In the case of Newfoundlanders who were veterans of Canada's forces, Confederation held out the prospect of gaining access to Canadian benefits for which they did not qualify because of Canadian residency requirements.

On the Newfoundland side, the Great War Veterans' Association took the lead in addressing the veterans' issues raised by imminent constitutional change. The association had been formed in Newfoundland after the First World War, establishing itself as one of the most important organizations in the country, and it sent two officials to Ottawa to represent its interests:

W.R. Martin, a veteran of the First World War, and G. Campbell Eaton, who had won the Military Cross during the Second World War. Apart from the official delegation that the Commission of Government sent to Ottawa to negotiate the final terms of the union, Martin and Eaton were the only Newfoundlanders allowed to join directly in the negotiations. This standing was indicative of the influential role of the Great War Veterans' Association in Newfoundland life.

A key question considered during the 1948 Ottawa negotiations was whether or not the Canadian re-establishment credit scheme, which had a ten-year lifespan and was therefore still in operation – and which, furthermore, had no Newfoundland equivalent – would apply retroactively to Newfoundland's Second World War veterans. This idea met resistance in the Department of Veterans Affairs on the grounds that re-establishment credits were meant “to recompense Canadians who served in the Forces for service rendered to Canada,” and it therefore “did not seem logical to extend the same benefit to Newfoundlanders who were not able to render such service.”⁵⁰ Furthermore, re-establishment credits were tied to the value of Canadian War Service Gratuities, something that would make administration difficult in relation to Newfoundland veterans. All these concerns ran up against an irrefutable Newfoundland argument, which was put to Milton Gregg, VC, Canada's Minister of Veterans Affairs, as follows: “Mr. Minister, if we are coming into Confederation we are coming right into your living

room, we ain't staying on your back stoop."⁵¹ Ultimately, in the interests of "good relations,"⁵² Gregg accommodated the Newfoundland point of view, with the result that Newfoundland veterans entered Confederation under terms endorsed by the Great War Veterans' Association.

The agreed approach to veterans benefits was captured in term 38 of the Terms of Union, which were signed in Ottawa on 11 December 1948. Canada agreed to make available to Newfoundland veterans, "on the same basis as they are from time to time available to Canadian veterans," a comprehensive list of benefits.⁵³ In effect, term 38 extended to Newfoundland veterans most of the benefits of the Veterans Charter. In particular, it provided that a re-establishment credit was to "be made available to Newfoundland veterans who served in the Second World War equal to the re-establishment credit that might have been available to them under *The War Services Grants Act, 1944*, if their service in the Second World War had been service in the Canadian forces, less the amount of any pecuniary benefits of the same nature granted or paid by the Government of any country other than Canada."

The Department of Veterans Affairs explained all this in a booklet entitled *Canada's Veterans Charter: How It Applies in the Province of Newfoundland*. After a flurry of administrative preparation, the department opened for business in St John's on schedule, 1 April 1949, the first full day of the union. On that date eighty-six veterans were seen, twenty-six for the War Veterans' Allowance, twenty-four for re-establishment credits, ten for treatment, and nine for pensions. In addition, seventeen other veterans made general inquiries. When in June 1949 the central registry of Newfoundland veterans opened for departmental use, it recorded the totals of those who had served as follows: First World War, 11,922; Second World War, 8,975. Of the overall total of 20,897, approximately 2,500 were "active Pensioners."⁵⁴ By September 1949, \$500,000 had been paid out in the new province under the much-debated re-establishment credit scheme, a milestone that was duly noted in a ceremony attended by Premier Joseph R. Smallwood at the Department of Veterans Affairs' offices in Buckmaster's Field, St John's.

Through deep commitment, good planning, and the thoughtful arguments of W.R. Martin, Cam Eaton, and their comrades, the Great War Veterans' Association had largely secured for Newfoundlanders parity of benefits with their fellow Canadian veterans. Following Confederation, the association joined forces with the Canadian Legion, but its last chapter as a separate organization had indeed been historic.

Unquestionably, the smooth and skilful integration of Newfoundland ex-service men and women into the Canadian system of veterans benefits was also an administrative triumph for the Department of Veterans Affairs, but it left behind unfinished business regarding the Newfoundland Forestry Unit (NFU). In the autumn of 1939, at the request of the United Kingdom, the Commission of Government had begun recruiting for the Newfoundland Forestry Unit, which by 1942 had attracted 3,977 men. Members of the unit went overseas beginning in 1939 and were employed as loggers, mainly in Scotland. They were the largest single group of Newfoundlanders recruited during the Second World War and did the same sort of work as was done by Canada's Second World War foresters, who followed them overseas. Unlike Canada's foresters, however, they did not serve in uniform but signed service contracts as civilians.

In 1944 members of the Newfoundland Forestry Unit formed the Newfoundland Overseas Foresters Association (NOFA), but the Commission of Government did not include them in its re-establishment plans on the grounds that they had “been in civilian employment in comparative safety” and that many of them had accumulated “considerable savings.”⁵⁵ The only exception made in this regard was that former members of the unit were allowed to apply for a small land-settlement scheme on the understanding that the needs of veterans had to be met first.

In 1948 Lieutenant Colonel Jack Turner, a First World War veteran who had led the Newfoundland Forestry Unit overseas and was the first president of the Newfoundland Overseas Foresters Association, went to Ottawa to advance the cause of the Newfoundland foresters during the union negotiations. His purpose was to get them on the same footing as Canadian foresters, who qualified for the benefits of the Veterans Charter. Unfortunately, Turner died in his sleep while staying at the Lord Elgin Hotel in Ottawa, with the result that, at a decisive moment, the former members of the Newfoundland Forestry Unit, unlike the Newfoundlanders represented by the Great War Veterans’ Association, had no voice. Newfoundland’s First World War foresters were covered by term 38, but the former members of the Newfoundland Forestry Unit became Canadians without any entitlement under the Veterans Charter, an omission they worked long and hard to change.

Newfoundland members of the Rescue Tug Service, many of whom had done heroic work in connection with the D-Day landings, were likewise ignored in the Terms of Union. In 1952, thanks to a decision of the Canadian Pension Commission, both they and the members of the Newfoundland Forestry Unit, became eligible for benefits under the *Civilian War Pensions and Allowances Act*.

I. Extending the Charter: The Korean War

While it was busy integrating the Newfoundland veterans, the Department of Veterans Affairs was also addressing the needs of veterans of the Korean War. Almost 27,000 Canadians served in the Special Force sent to Korea, most of them in either the 25th Canadian Infantry Brigade or in assigned naval and air force squadrons. Technically, the Canadians who went to Korea were deemed to have participated in a United Nations “police action” rather than a “war,” but this was a hollow distinction that belied the brutal reality of service in a bitter conflict. Canadians serving in Korea witnessed the horrors of a campaign that claimed more than 359,000 United Nations combatants and untold thousands of civilians. The war left 516 Canadians dead and another 1,042 wounded.

Initially, the government met the benefit needs of veterans of the Korean War through orders-in-council, but in 1951 Parliament made comprehensive provision for veterans benefits for Korean service through the *Veterans Benefits Act, 1951*, which was extended in 1952 and 1953 and then expanded by the *Veterans Benefits Act, 1954*.⁵⁶ In effect, these Acts extended to veterans of the Korean War the benefits of the Veterans Charter except for those of the War Veterans’ Allowance, which were granted to them separately in 1952.

The government's purpose, explained Minister of Veterans Affairs Hughes Lapointe during second reading of the 1954 bill, was "to enact legislation in a form which, if it cannot be described as final, is as much so as any veterans legislation can be. That is, it is intended to meet present needs of the veterans in these operations for rehabilitation compensation for disabilities and other social protection established as a result of experience acquired during the last two world wars."⁵⁷ Over "the whole period of the operations" in Korea, he noted, "the majority of those serving ... were men on a regular engagement; that is, members of the regular force. A large number of these remained in the service. The rehabilitation problem is in many respects different in its nature and scope from that which followed World War II."⁵⁸

These differences were reflected in the extent to which veterans of the Korean War took advantage of their Veterans Charter entitlements. Some elements of the Charter were heavily used by all those who qualified. By 31 March 1956 disability pensions had been awarded to 1,330 disabled veterans and 145 dependents. A further 277 final payments had been made to veterans with disabilities assessed at less than 5 percent. By that time, 26,488 members of the Special Force, many still serving in the Regular Force, had received War Service Gratuities worth almost \$6.7 million. The Department of Veterans Affairs had approved 28,957 applications for Re-establishment Credits with a cumulative value of nearly \$2.8 million, most being used to purchase household furnishings.

By comparison, the call for training to assist veterans in re-establishing themselves had been modest following their return from Korea. The period 1953-54 saw a peak of 210 veterans of the Korean War taking vocational training, while a further 55 attended university. The next year those in university rose to 71, but the number in vocational training dropped to 159. The Department of Veterans Affairs' annual report for 1956 noted: "Applications for training under the *Veterans Benefits Act, 1954*, from those with qualifying service in the Korean theatre have settled down to a small but steady flow, governed by the numbers taking release from the Regular Forces. At March 31, 1956, 52 veterans of the Korean campaign were receiving university training ... In addition, 50 veterans with service in Korea were receiving vocational training."⁵⁹

The adaptation of the Veterans Charter to the needs of veterans of the Korean War was perhaps an approach the government might have followed in relation to the future needs of Canadian veterans generally. But the Korean example was not followed up, with the result that the relationship of Canadian Forces veterans and Veterans Affairs was confined to a limited use of the *Pension Act*. This eventually produced adverse consequences, which have not yet been fully addressed. Although all the statutes relating to the Veterans Charter remained on the books, Veterans Affairs Canada did not concern itself with the rehabilitation and re-establishment of former members of the Canadian Forces. The forces themselves eventually produced programs to fill some of this gap, but this was not the main business of National Defence. While the need for rehabilitation and re-establishment benefits continued, the government's commitment to deliver these through Veterans Affairs atrophied.

In practice relatively few veterans of the Korean War felt the need for retraining as an aid to re-establishment, but many keenly felt a lack of public recognition for the hazardous services they had rendered Canada and the fledgling United Nations. As one returning soldier noted: “There were no parades or big welcome home parties for anyone ... It was sure different than it had been when the Second World War ended. Now, I am not saying that we had to have big celebrations, but in my case at least, no one seemed to even *notice* that I was home.”⁶⁰

Canadian veterans of the Korean War faced a long struggle, even from some fellow veterans, for full recognition in the country’s military pantheon. In 1973 a group of them, meeting at Camp Borden, Ontario, formed the Korea Veterans Association of Canada (KVA), which worked hard to obtain a Canadian medal for those who had gone to Korea.⁶¹ Although a United Nations medal and a Canadian version of a Commonwealth medal had already been awarded, there was no truly Canadian medal for these veterans. Their goal was ultimately achieved in 1992 with the award of the Canadian Volunteer Service Medal for Korea. Their continuing quest for recognition also led to the dedication in 1997 of the privately funded Korea Veterans’ Memorial Wall in Brampton, Ontario. In April 2002 the Monument to Canadian Fallen, unveiled in November 2001, was dedicated in the United Nations Memorial Cemetery in Busan (formerly Pusan), Korea. An exact copy of this monument was unveiled in Ottawa, on 28 September 2003 to mark the fiftieth anniversary of the Korean ceasefire. In forming an organization to advance their comrades’ interests, the veterans of the Korean War set an example that was subsequently followed by other Canadian Forces veterans.

J. Consolidation and Adaptation

By the 1960s, the rehabilitation heyday of the Veterans Charter was over, though it still generated some business. For example, applications under the *Veterans’ Land Act, 1942*, continued until 31 March 1974, and payments under this Act are still being made.⁶² Nevertheless, the Department of Veterans Affairs had now clearly settled into its long-term business. This was mainly administration of the decisions of the Canadian Pension Commission and the War Veterans’ Allowance Board, provision of health services to those who qualified for them, and various commemorative activities. By order-in-council in April 1965, the Minister of Veterans Affairs had been assigned “primary responsibility for all matters relating to the commemoration of the war dead and recognition of the achievements of former members of the Canadian armed forces.”⁶³ A varied program, carried out in part through an association with the Commonwealth War Graves Commission, advanced this mandate.

Although this gave the department a large work agenda, its staff was much smaller than that needed in the immediate post-war years. In February 1947 the department had a staff of 22,000. By March 1951 this figure had been reduced to 15,500.⁶⁴ A decade later the staff numbered 13,453, including 366 (2.7 percent) at the Canadian Pension Commission and 29 (0.2 percent) at the War Veterans’ Allowance Board. Fully 10,127 (75.3 percent) were in Treatment Services, which accounted for most of the department’s work.⁶⁵

As the Department of Veterans Affairs changed, so did the generations of veterans it served. In effect, the department tracked the veterans through the course of their lives and adapted its policies accordingly. By the 1960s, the First World War generation was facing the problems of old age, while the big Second World War generation, which had successfully been launched back into civilian life in the late 1940s, was entering middle age.

During the interval, the social welfare system of the country, which inevitably affected veterans benefits, was changed. Unemployment insurance, which was taken into account in planning for the Veterans Charter, had been introduced in 1940. Family allowances followed in 1944, and a universal scheme of old age pensions was introduced in the good times of 1951. In 1957 public hospital insurance became a reality, and in the 1960s the Canada and Quebec Pension Plans and Medicare brought the Canadian welfare state to a new height of achievement. All Canadians – veterans and non-veterans alike – were eligible for these programs and, given this reality, the Department of Veterans Affairs had good reason to reflect and regroup.

This task was assisted by the 1962 Report of the Royal Commission on Government Organization, more often referred to as the Glassco Commission. It noted that one of the leading purposes of the Department of Veterans Affairs – to provide care for wounded veterans – had declined in significance, and most patients in departmental hospitals were those requiring chronic or nursing-home care. Having examined the issue further, in December 1963 the federal Cabinet agreed to transfer veterans' hospitals to provincial authorities, subject to three conditions: that space for treating service-connected disabilities must always be instantly available and must be provided according to Department of Veterans Affairs standards; that acceptable community facilities be available to meet the needs of those receiving the War Veterans' Allowance; and that the continued employment and pension status of departmental staff be assured.⁶⁶

So in 1964, with this policy framework in place and hospital insurance available across the country, the department changed direction in the administration of its treatment services. At the time it was running eleven hospitals, the Rideau Health and Occupational Centre in Ottawa, and homes for veterans in Saskatoon and Victoria. The hospitals, which on 31 March 1963 had 6,871 beds, were located across the country as follows: Camp Hill (Halifax, N.S.); Lancaster (Lancaster, N.B.); Ste-Foy (Ste-Foy, P.Q.); Ste Anne de Bellevue (Montreal, P.Q.); Queen Mary Veterans (Montreal, P.Q.); Sunnybrook (Toronto, Ont.); Westminster (London, Ont.); Deer Lodge (Winnipeg, Man.); Colonel Belcher (Calgary, Alta.); Shaughnessy (Vancouver, B.C.); and Veterans (Victoria, B.C.).⁶⁷ Negotiations now began to transfer the operation of these institutions to “non-federal agencies.”⁶⁸ This was to be done “at times, in places, and under conditions” that would “best protect the standards of care” to which veterans were entitled.

In keeping with the new policy, Sunnybrook Hospital was transferred to the University of Toronto in 1966 and the Ste-Foy Hospital to Le Centre Hospitalier de l'Université Laval in 1968.⁶⁹ The process of transfers and closures continued until, by 1992, the department was running only one institution, Ste Anne's Hospital (Ste Anne de Bellevue, P.Q.), which today operates in very different circumstances. As it went out of the hospital business, the department negotiated contracts for treatment and care with

numerous institutions across the country. In 2003 these contracts numbered 171 and represented an important and continuing source of federal assistance to provincial and private institutions. Negotiating and monitoring agreements, rather than running institutions, became the new health-care agenda of the Department of Veterans Affairs.

K. The Woods Committee

In September 1965 another process of reform was launched when the government announced the appointment of a three-person committee to survey the organization and work of the Canadian Pension Commission. It was to report to the Minister of Veterans Affairs but not be connected with either the Department of Veterans Affairs or the Canadian Pension Commission. The committee, “though not limited in the scope of its report,” was instructed “to study the organization, methods and procedures used in the adjudication of disability and other pensions paid under... the provisions of the *Pension Act*.”⁷⁰ Justice Mervyn Woods of the Saskatchewan Court of Appeal, a veteran of the Second World War, was chosen to chair the committee.⁷¹ He had served in the Royal Canadian Navy, had retired with the rank of Lieutenant Commander, and was dominion president of the Royal Canadian Legion from 1960 to 1962. The other committee members were Walter J. Lindal, a retired judge of the County Court of Manitoba and a veteran of the First World War, and Brigadier Jean-Pierre Giroux, who soon resigned to accept an appointment to the Quebec Civil Service Commission. Giroux’s successor was Colonel Gerard A.M. Nantel, a Second World War veteran and a member of the Quebec bar. He was still in uniform and was serving in the office of the Judge Advocate General. The secretary of the committee was H. Clifford (Cliff) Chadderton, executive secretary of the War Amputations of Canada and one of the country’s best-known Second World War veterans. H.A. Davis served as assistant secretary.

The committee was supposed to report in three months, but Woods and his colleagues laboured for a much longer period. When notices inviting submissions were placed in newspapers and veterans’ publications, the “response exceeded all expectations.”⁷² To deal with the volume of interest expressed the committee held forty-one hearings in Toronto, Ottawa, and Quebec City between 18 January and 20 June 1966. The committee heard from thirteen Members of Parliament, one private individual, and representatives of fourteen veterans’ and dependants’ organizations, as well as the Canadian Pension Commission, the Veterans’ Bureau, and the Canadian Forces. In addition, it received more than three hundred letters containing questions, recommendations, suggestions, and complaints, as well as briefs from organizations not represented at the hearings.⁷³

To inform themselves better, the committee members also attended various appeal and “leave to re-open” hearings in Montreal, Winnipeg, Regina, and Ottawa; they inspected the quarters of the Canadian Pension Commission, met with officials of the organization, and informally visited Veterans’ Bureau offices in Ottawa and Toronto.⁷⁴ Nowhere did they find a complete, organized collection of material that would enable them to conduct a thorough study of the commission. However, thanks to the “capable and untiring efforts” of Cliff Chadderton, the committee members had ready access to

“co-ordinated information bearing on many of the problems raised for consideration.”⁷⁵ Since many of these had originated in the *Pension Act* or “had been developing for some 40 years,” the committee quickly concluded that “examination, thorough research, and possible analysis of various approaches” was called for and that this could not be done hastily.⁷⁶

The committee spent its first six months on research, familiarization, and hearings.⁷⁷ It then evaluated the evidence before it and in 1967 produced a comprehensive and lengthy *Report of the Committee to Survey the Organization and Work of the Canadian Pension Commission*, which Minister of Veterans Affairs Roger Telliet tabled in the House of Commons on 26 March 1968.⁷⁸ In the report the committee concluded that its review had been “long overdue.” There had been “an understandable tendency” in the Canadian Pension Commission “to let sleeping dogs lie.”⁷⁹ Woods found that the Pension Commission had “a propensity to be satisfied with all that is not criticized” and “a tendency ... to be content with an answer to criticism that satisfies the one giving it.”⁸⁰ The committee found that the most serious flaw in administering the *Pension Act* was the commission’s tendency “to view its operation as one which can best be carried out on the basis of providing only limited public information in regard to its policies and interpretations.”⁸¹ Echoing remarks from the Ralston Commission forty years earlier, Woods found that the administration of the Act, on which so many Canadians depended, had about it an “air of secrecy” that “should disappear.”⁸²

Based on this analysis and taking care not to deal with financial aspects of pensions, the committee tabled 148 recommendations. These were designed to improve matters without interfering with the day-to-day work of the commission. The Pension Commission, the report pronounced, “has over the years since its inception developed its own way of doing things. In so far as we have been able to determine, it is on the whole operating satisfactorily, and generally speaking, has the confidence and respect of those it serves. While we are making a number of recommendations that would require some revision of its activities, we have tried to set these out in a way that will cause minimal disruption. We have tried to fit the recommendations to this pattern. This we trust will lead to minimal interference with established principles and procedures consistent with necessary or desirable change.”⁸³

On one key issue – how appeals should proceed under the *Pension Act* – the committee was divided. Under the existing system, an appeal was heard by a three-member appeal board drawn from the members of the commission itself, and it could include members who had already been involved in turning down the applicant. Not surprisingly, this system led to claims that the commissioners banded together to uphold their decisions. The majority recommendation of the committee, by Justice Woods and Colonel Nantel, was that a pension appeal board should be established.⁸⁴ This board would be independent but would report to Parliament through the Minister of Veterans Affairs. It would have the final say on both pension appeals and the interpretation of pension legislation. The minority recommendation (not acted upon) put forward by Judge Lindal, was that an ombudsman be appointed.⁸⁵ Lindal also suggested that the official should report through the Minister of Veterans Affairs and, in effect, should attempt to resolve pension issues by mediation.

The Woods Committee also called for the amendment of section 70 of the *Pension Act*, known as the “benefit of the doubt” section.⁸⁶ Under this provision, pension applicants did not have to prove their cases beyond a shadow of doubt. By the same token, the commission, when in doubt, was required to weigh evidence in favour of an applicant. The intention here was straightforward, but the administration of the section was controversial. Accordingly, the committee called for a revised section 70 that would be clear and unequivocal. In the same spirit of fairness and equity, the committee recommended that those taken prisoner at Hong Kong in 1941, who had endured a long captivity of privation, should be given special consideration in the payment of pensions.⁸⁷

The Woods Report, the work of three veterans of the world wars (one of them still serving), was well received by Canada’s veterans’ organizations. In 1969 ten of them issued a joint statement, which was distributed to all Members of Parliament, urging immediate action on the recommendations.⁸⁸ The organizations involved in this initiative, the first of its kind for some thirty-five years, were the Army, Navy & Air Force Veterans of Canada, L’Association du 22ième incorporatée, the Canadian Corps Association, Inc., the Canadian Paraplegic Association, the Hong Kong Veterans Association, the National Council of Veteran Associations in Canada, the Air Force Association of Canada, the Royal Canadian Legion, the Sir Arthur Pearson Association of War Blinded, the War Amputations of Canada, and the War Pensioners of Canada, Inc. These were the main veterans’ organizations operating in the country at the time, and they now spoke with one powerful national voice. The need to improve Canada’s system of veterans benefits, they argued, had been “clearly established” by Woods and his colleagues.

L. A Clear and Considered Plan of Action

Having benefited from the advice of an interdepartmental committee, in August 1969 the government responded to the Woods Report with a *White Paper on Veterans Pensions*, issued under the authority of Minister of Veterans Affairs Jean-Etudes Dubé. This sixteen-page document described the *Pension Act* as “the keystone of Canadian veterans legislation since 1919.”⁸⁹ In terms of the purpose and scope of the Act, the White Paper offered this summary of current thinking and practice:

For the past 50 years, Canada has recognized and freely accepted her obligation to pay compensation for disability and death arising out of military service, in so far as it is reasonable and practicable to equate monetary values with human suffering and bereavement. This is done through the *Pension Act*... [which] provides for the payment of pensions to the disabled veteran, his widow and his orphan; and to his dependent parents, sisters and brothers. In addition, an award of pension also makes the recipient or his family eligible for other benefits. The veteran himself becomes eligible for medical treatment for his pensioned

condition, special re-employment training if he needs it, war veterans allowance, and funeral and burial grants. After his death his widow is eligible for war veterans allowance, and his pensioned children for advanced educational assistance.⁹⁰

According to the White Paper, Canada's veteran population – said to be one-twelfth of the adult population of the country – then numbered 112,600 from the First World War and 832,600 from the Second World War and Korea (including veterans who served in both world wars) for a total of 945,200.⁹¹ Of this number, 136,800 were receiving pensions on 31 December 1968. On the same date, 29,800 pensions were being paid to dependants or survivors.

Within this context, the White Paper described how the government intended “to improve the *Pension Act* to enable it to fulfil its purpose in terms of present-day thinking and modern social justice.”⁹² Of the 148 recommendations of the Woods Report, “all but about 30” had been “accepted in whole or in part.”⁹³ About one-third of the recommendations could be carried out under existing departmental authority, and this was being done. In the case of the recommendations that required new legislative authority, action would be forthcoming.

On the crucial matter of “adjudication and appeals,” the White Paper committed the government to establishing a directorate of pensions within the Department of Veterans Affairs.⁹⁴ This directorate, which would have transferred to it the entire staff of the Canadian Pension Commission except the chairman, deputy chairman, commissioners, and appeal administrative service, would be responsible for the initial adjudication of pension applications. Dissatisfied applicants would be able to apply for redress to the reformed commission, which would have Administrative, Entitlement Hearing, and Appeal divisions. Under this arrangement the Pension Commission would function only as a quasi-judicial body, formed to hear and review evidence and to interpret legislation. As in the past, applicants for pensions would have access to the services of the Veterans' Bureau, but this would now be renamed the Bureau of Pensions Advocates (BPA).⁹⁵

This new unit would report directly to the Minister of Veterans Affairs as an independent agency. It would make available to its clients across the country the services of lawyers who were members of their various law societies and would have the same solicitor-client relationship with their clients as lawyers in private practice. Government funds would be made available to resource the bureau and to pay for medical opinions when the pensions advocates needed them to support pension claims.

With respect to the Act's problematic section 70, the government committed itself in the White Paper to clarifying what constituted “benefit of the doubt”: “Stated briefly, the revised Section will provide that the pension applicant will have discharged his responsibility when he has submitted credible evidence which, if uncontradicted, should entitle his claim to succeed; that the adjudicating body should draw from the evidence all reasonable inferences in favour of the

applicant; and that, when this has been done, the applicant shall be entitled to the benefit of the doubt and his claim may be allowed, even though he has not established it by a preponderance of evidence.”⁹⁶

The government likewise committed itself to legislate a basic minimum pension of 50 percent for all Hong Kong veterans who made the appropriate application and had “assessable degrees of disability.”⁹⁷ The legislation would bring increased benefits to the dependants of this special group of veterans, whether the latter were living or deceased. In the same spirit, the government committed itself to providing further financial assistance to “100 percent” pensioners whose disabilities caused them to “suffer extraordinary physical, social and psychological impairments.”⁹⁸ Thus was created the Exceptional Incapacity Allowance.

More generally, the government reported that it was studying current pension rates and “their relationship to the Canadian standard of living.”⁹⁹ Other improvements now promised covered such diverse topics as Retroactive Awards, Stabilizing Pensions, Dependant’s Remarriage, Posthumous Assessment, Legal Damages, Irregular Unions, Consequential Disability, Loss of Paired Organs, Attendance Allowance, and Clothing Allowance.¹⁰⁰

In the case of “irregular unions,” the *Pension Act* already provided for an additional pension payment to a veteran who had “resided with a woman and publicly represented her as his wife, for seven years,” but there had been problems in proving that legal marriage was not possible.¹⁰¹ In keeping with evolving attitudes on the subject, amendments would “allow broader discretionary authority in awarding additional pensions for ‘irregular unions’” and would “establish the procedure to be followed in proving ... a bar to celebrating a marriage.”¹⁰²

This sweeping agenda of change led legislatively to an amending Act that received royal assent on 30 March 1971.¹⁰³ In accordance with White Paper proposals, the Act established the Pension Review Board and Bureau of Pensions Advocates, which over the years has represented the overwhelming majority of those appealing disability pension and survivor benefit decisions. Also in keeping with the White Paper, the Act kept faith with members of the Hong Kong force and other prisoners of war of the Japanese. These changes, and many other improvements made as a result of the Woods Report, demonstrated convincingly that the historic partnership between organized veterans and the government remained strong. Indeed, in the memory of many Canadian veterans, the Woods Report and its aftermath came to constitute a high-water mark in veterans policy in the country. The government had responded to the findings of the Woods Report with a clear and considered plan of action, which respected the historical involvement of veterans in policy making.

In 1969 another important development in the evolution of Canadian Forces members’ benefits occurred when the Service Income Security Insurance Plan (SISIP) was introduced. The limitations on disability pension coverage under the “compensation principle” in the *Pension Act*, along with various provisions of the military pension program provided through the *Canadian Forces Superannuation Act*, meant that military personnel had insufficient financial protection against death or injury that was not attributable to military service. The result was a voluntary death and disability

insurance scheme. It initially provided a Survivor Income Benefit worth 50 percent of pay at time of death, with additional amounts for dependent children. There was also a Long Term Disability benefit for those who were totally disabled as a result of injury or illness that was non-attributable to service. The initial level of compensation provided was 60 percent of the member's pay at release, plus 5 percent for each dependent child, to a maximum of 75 percent of last pay rate. Further sums, varying in size and duration with the nature of the injury, were payable in cases of accidental dismemberment.

During 1974, changes to the plan were approved. There were particular concerns that recipients of Long Term Disability were reluctant to participate in vocational rehabilitation because subsequent employment would lead to an indefinite cessation of benefits. As a result, a five-year reinstatement waiver to the plan was approved. In 1995 the reinstatement waiver period was reduced to 36 months.

The desirability of integrating plan benefits with the *Pension Act* disability pension scheme also became evident. In their original form, SISIP benefits were not available to those receiving benefits under the *Pension Act*, since it was presumed that these individuals' needs were being met. But in practice, many recipients of disability pensions had low assessments and consequently needed additional income. With these considerations in mind, SISIP coverage was extended to disability arising from military service, but with benefit payments reflecting a claw-back or offset for any disability payment received under the *Pension Act*. The offset procedure was introduced to keep premium rates down and to ensure equity between those receiving SISIP benefits for disabilities not attributable to military service and those receiving benefits under the *Pension Act*. Participation in the Service Income Security Insurance Plan was made mandatory for all those who joined the Canadian Forces (Regular) on or after 1 April 1982.

M. Relocation

In 1976 the administration of veterans affairs in Canada entered a new phase. Following a Treasury Board task force study and funding approval, Minister of Veterans Affairs Daniel J. MacDonald announced that much of the Department of Veterans Affairs' operation would be relocated to Charlottetown, as part of a federal government decentralization initiative.¹⁰⁴ The move would also embrace the department's associated agencies – the Bureau of Pensions Advocates, the Canadian Pension Commission, the Pension Review Board, and the War Veterans' Allowance Board – and it would be made in stages as accommodation became available on Prince Edward Island.¹⁰⁵ The first employees to relocate arrived in Charlottetown in June 1979. Others followed as circumstances permitted.

On 28 June 1984 the Daniel J. MacDonald Building, named in honour of the now-deceased minister, one of Prince Edward Island's and Canada's most beloved veterans, was officially opened in Charlottetown to house the department. The relocation, which was completed three months later, cost approximately \$65 million over five years, of which \$20 million was for the new headquarters. Less than 5 percent of about 900 staff members whose positions were transferred from Ottawa to

Charlottetown actually made the move. Consequently, there was extensive hiring on Prince Edward Island during this period. The minister, of course, remained in Ottawa, as did a small support staff. Since 1991, the Ottawa operation has been located at 66 Slater Street. There had never been such a move before in the history of the Government of Canada, and nothing on the same scale has been attempted since.

In 1984 the “applied title” of the department became Veterans Affairs Canada, which acquired the acronym VAC.¹⁰⁶ The legal name of the Department in English, however, continued to be the Department of Veterans Affairs. Its French-language equivalent was *ministère des Affaires des anciens combattants*, but effective 12 December 1988, this was changed to *ministère des Anciens combattants*.

N. The Veterans Independence Program

While the department was busy transferring operations to Charlottetown, it launched an ambitious and innovative program of home care. The mid-1970s found most departmental priority-access hospital beds occupied by First World War veterans, with waiting lists for access to them growing. It became increasingly clear that the number of available beds would not be sufficient to meet the looming long-term institutional care needs of the country’s Second World War veterans. Alternative care approaches needed to be found or a potential doubling of veterans’ beds would be required.

In 1978, in the face of calls from veterans’ organizations for increases in the availability of long-term care facilities, a departmental study was commissioned to examine the issue and recommend alternatives to a costly major expansion of hospital facilities. Provincial home-care programs in Manitoba and British Columbia were reviewed in depth, as was Quebec’s emerging CLSC (*Centres locaux des services communautaires*) model. Advice was sought on alternative care approaches within Canada’s small community of geriatricians and gerontologists and from international experts such as Sir Ferguson Anderson of Scotland. As he put it, “Endeavours of any service for the elderly should be to improve the quality of life by ensuring they live in their own homes for as long as possible in as happy and healthy a state as possible.”¹⁰⁷ The study was also informed by the interdisciplinary care needs assessment approach developed by Drs Asa and Jack MacDonnell of Winnipeg’s Deer Lodge Hospital.

A number of principles emerged from these reviews and consultations, which formed the basis of a three-year home-care pilot project called the Aging Veterans Program.¹⁰⁸ Although most of the hospital managers, health professionals, and federal and provincial policy makers who were consulted on the concept offered only lukewarm support, the passion of a small group of advocates within Veterans Affairs, including Stu Tubb, Signe Hansen, Dr Blair Mitchell, Darragh Mogan, and Duncan Conrad, saw the ground-breaking program launched.

Their dedication was matched by the pioneering spirit of a Great War veteran, Jimmy Cannon, who agreed to leave his hospital bed in 1980, move back home, and record his experience with the home-care pilot. The video record of his experience became a personal legacy. He died shortly after playing a signal role in proving the value of the Aging Veterans Program, which he was convinced offered a better way for veterans to live their frail final years. His commitment, and that of the pioneers who created the program, was rewarded during George Hees's tenure as Minister of Veterans Affairs, when the pilot was declared a success and the home-care program's name changed to the Veterans Independence Program (VIP).

The VIP helps veterans maintain their independence through a combination of services that can include home care, ambulatory health care, home adaptations, and intermediate nursing-home care. It is based on a plan of needs assessment and care, which is created with support from Veterans Affairs staff and is self-managed by the recipients in cooperation with provincial and regional health authorities. It focuses on the social aspects of healthy living in the community, such as housekeeping, grounds keeping, and social transportation – an emphasis that was all but unique in North America in 1981 when the pilot program began. It is modelled on a continuum of service or graduated-care model that emphasizes early minimalist intervention to prevent veterans from becoming unduly dependent on the health system, allowing them to live with comfort, security, and dignity in their own homes for as long as possible.

Prior to VIP, a veteran who was admitted to a long-term care bed might have to travel several hundred kilometres to receive care. Often, important lifelong relationships, support networks, and geographical roots were disrupted. Spouses were often separated. With the introduction of VIP, veterans could choose to age in place, surrounded by their families and supported by community facilities, as required. The high appeal of this option has been reflected in the popularity of VIP among veterans, their families, and veterans' organizations.

During a 1977 focus group, a veteran's spouse described the importance of VIP to herself and her husband this way: "I have this special lady – an answer to a prayer – she gets him out of bed and does his toenails, changes his bedding and cleans the bathroom and bathes him and he doesn't mind her. He is getting used to her – he still needs me 24 hours a day – but she is pleasant and now that we are getting to know her, I might be able to do something on my own. I have had to give up everything. I felt that I wasn't able to give him the care he should be getting."¹⁰⁹

VIP is not only a boon to veterans and their families; it is also highly cost effective. Every effort is made to integrate VIP administration with provincial and local resources to ensure economical service delivery and avoid duplication. While the yearly cost of long-term care in an institution can range from \$30,000 to \$50,000, the average VIP expenditures per veteran are only about \$2,000. The home-care element of VIP is capped (at \$7,356.80 in 2003), and the figure is rarely reached. A 1989 evaluation of VIP indicated that it resulted in savings of between \$33 million and \$46 million a year.¹¹⁰

Initially, Treasury Board and Department of Finance officials were concerned that VIP would introduce additional cost pressures without producing offsetting savings in the draw on long-term care entitlements. Some health-care professionals also were hesitant to endorse a program based on self-managed care. In 1980 even Veterans Affairs staff had reservations about the introduction of VIP. For some time their focus had been on the delivery of welfare and pension programs, and VIP led to a major shift in focus for many of them, requiring training and reorientation to support a major new line of business.

As a result of these concerns, during its pilot years VIP was approved only for a small group of war pensioners whose needs arose directly from war-related disabilities. While the initial take-up rate was low, concerns that program costs would soar proved unfounded. Similarly, the concerns of veterans' organizations' that veterans would have to choose between their entitlement to a long-term care bed or VIP were allayed. Moreover, staff began to see VIP's value and actively supported its development and implementation. As a result, by 1983 there was considerable pressure to expand program eligibility for low-income veterans.

Between 1984 and 1988, further eligibility changes were phased in, leading to access for all low-income veterans who had demonstrated needs. This in turn led to an increase in the number of veterans participating in the program. In many ways, this lower-income group had been the target of choice for VIP from the outset. Research at the time showed low income to be a dominant predictor of demand for long-term care beds among the elderly. And with Veterans Affairs Canada's very low board and lodging rate, there was apparently a strong financial incentive for these individuals to seek admission to institutions as a solution to various problems (low income, social isolation, poor housing, widowhood) that were unrelated to the purpose of long-term care.

Other changes were made to VIP during the 1990s and beyond, dealing with such issues as palliative care at home and in institutions, caregiver support, dementia care at home, and health promotion. In June 1991, VIP was made available to former members of the Canadian Forces who had served in Special Duty Areas (e.g. peacekeeping) on the same basis as First and Second World War veterans and veterans of the Korean War. In 2001 further changes extended VIP eligibility to Regular Force service-related disability pensioners. By that time, 68,928 veterans and qualified Veterans Affairs clients were receiving the benefits of VIP.¹¹¹

Recognizing that VIP services for veterans affect the primary caregiver (usually the spouse), provision was made in 1990 to allow the continuation of specific program benefits for up to a year following the veteran's death. As the turn of the century neared, veterans' organizations argued that, in recognition of a caregiver's substantial and cost-saving support to her (or his) spouse, this period of VIP eligibility should be extended. In time, this program change became the number-one priority of veterans' organizations.

During June 2003, Veterans Affairs Canada extended eligibility for VIP to overseas veterans and totally disabled prisoners of war, who demonstrated a need for the program and were not otherwise qualified as veterans. At the same time, responding to the concerns of veterans' organizations, qualified

survivors (and, in cases where there is no survivor, other primary caregivers), became eligible to receive VIP housekeeping and grounds-maintenance services for life if this allowed them to remain self-sufficient in their homes or if access to the service was dictated by their medical condition. In this way, Veterans Affairs more fully recognized the valuable role of surviving spouses as lifelong caregivers to disabled veterans. Unfortunately, citing fiscal constraints, the government confined the extended benefits to the qualified survivors of those who were receiving VIP at the time the program change was announced. This left between 23,000 and 28,000 individuals, whose veteran spouse had passed away earlier, without ongoing access to VIP support for home maintenance. The Royal Canadian Legion, the Army, Navy & Air Force Veterans in Canada, and the National Council of Veteran Associations in Canada, protested the restriction. Cliff Chadderton, chair of the latter organization, called it “heartless” and the creation of “two classes of widows.”¹¹²

Public outcry at the program extension parameters, fuelled by the campaign of war widow Joyce Carter of St Peter’s, Nova Scotia, for access to VIP home-maintenance benefits, led to parliamentary reconsideration. During October 2003, Bob Wood, MP, introduced a motion in the House of Commons calling for an expansion of the eligibility criteria for VIP home-maintenance benefits for survivors. It received unanimous endorsement. Building on this support, on 6 November 2003, Dr Rey Pagtakhan, Minister of Veterans Affairs, informed the Commons that “thanks to the Prime Minister and the Minister of Finance and the government as a whole ... we will be able to reinstate the VIP program maintenance and ground services for qualified surviving spouses.”¹¹³

O. Speed, Generosity, and Courtesy

By the 1980's improvements generated by the Woods Report were more than a decade old. The population of veterans also was aging. By 1985, the majority had celebrated their sixty-fifth birthday. As they embarked on life as senior citizens, many were raising new concerns regarding veterans benefits and their administration.

On 6 November 1980 the Senate authorized its Standing Committee on Health, Welfare, and Science to examine a range of veterans’ issues. The following July it published a report entitled *They Served: We Care*.¹¹⁴ The report contained seven recommendations. A number related to inequities in the treatment of veterans’ survivors under the *Pension Act* and *War Veterans’ Allowance Act*. One recommended that pension increases reflect parity with the average wages of five categories of unskilled public servants or with increases in the Consumer Price Index, whichever was greater. Another recommended “that all necessary steps be taken to eliminate the unacceptable delays in processing pension applications and pension adjudications.” The last recommendation was that the government appoint a committee “to review and update those recommendations of the Woods Committee which have not been implemented and to identify, study and make recommendations about the anomalies that still exist in the treatment of veterans and their survivors.”

A fundamental review of the War Veterans' Allowance and Civilian War Allowance began during 1982-83 and addressed some of the senators' concerns. Additionally, during 1983-84, the War Veterans' Allowance Board made the precedent-setting decision to begin allowing applicants to present oral evidence in support of their appeals. Legislation was also drafted to allow Bureau of Pensions Advocates lawyers to represent War Veterans' Allowance applicants at hearings. At the same time, a computerized benefit delivery system was introduced in order to improve both the accuracy and timeliness of payments. While these were positive developments, complexities within the pension system and delays related to hiring and training new staff in Charlottetown were taking a visible toll on veterans' patience. Pension and benefit application backlogs continued to grow, and the timeliness of related decisions suffered.

Concurrently, heart-wrenching stories of veterans' frustration at the time taken to win apparently well-deserved disability pensions were making national headlines. During 1984 the investigative journalism program *W-5* twice aired stories about veterans who were suffering from illnesses related to radiation exposure and were having great difficulty in making their case for a disability pension. In both instances, the shows were highly critical of the Canadian Pension Commission and of delays in the pension program.

Grounds for such criticisms was found in cases like that of Second World War veteran and air force veteran of the Korean War, Bjarnie Paulson. In 1979 Paulson had applied for a disability pension after suffering through more than forty cancer-related operations. He asserted that his cancer had been caused by exposure to nuclear radiation while he was assigned to secret duties helping to decontaminate the Chalk River NRU reactor following a major accident there in 1958. His claim was frustrated by the fact that records had not been kept of military participants in the clean-up. When in April 1981 the Canadian Pension Commission declined to award him a disability pension, Paulson obtained help from the Canadian Coalition for Nuclear Responsibility and from the Royal Canadian Legion. Largely as a result of this high-profile case, in 1982 Veterans Affairs Canada commissioned studies on the effects of nuclear radiation on veterans who had witnessed atomic bomb testing in Nevada and Australia during the 1950s and those employed in decontaminating the Chalk River site after the 1953 and 1958 nuclear accidents.

With troubling cases like these fresh in the public's mind, in June 1984 the Minister of Veterans Affairs, W. Bennett Campbell, appointed René J. Marin to lead a Special Committee to Study Procedures under the Pension Act. The committee immediately went to work, focusing on delays in pension adjudication, which were seen as a major problem. It soon heard evidence from the Canadian Pension Commission, the Pension Review Board, the Bureau of Pensions Advocates, the Royal Canadian Legion, the National Council of Veteran Associations, the Canadian Forces, and Veterans Affairs Canada. Plans for cross-country hearings, however, and a second round of testimony from veterans' groups and stakeholders were overtaken by events.

Less than two months after Marin's appointment, Canadians went to the polls in the country's thirty-third federal general election and returned a new government. Shortly thereafter, George Hees, a distinguished veteran himself, was appointed Minister of Veterans Affairs.

Hees immediately set about imprinting his own brand on the work of his portfolio, and one of his earliest decisions was to terminate the work of the Marin Committee. On 4 December 1984, in testimony to the House of Commons Standing Committee on Veterans Affairs, Hees explained his decision:

As you know, there was a commission called the Marin Commission ... on things to do with veterans affairs, because there had been complaints about the delivery system, delays taking too long, veterans not getting the benefit of the doubt, not being treated generously and courteously ... When I took over I met with Judge Marin and asked him how long – we discussed the whole thing ... I could not wait for the nine months to get the information that would be provided by these hearings and the writing of a report; I wanted to get the information immediately and I decided [myself] to write to the people who had indicated a desire to be heard.¹¹⁵

Marin submitted a report on his committee's truncated activities containing 62 recommendations or observations. By the time of his testimony to the Standing Committee on Veterans Affairs in December 1984, Hees reported that Veterans Affairs officials had already agreed with 42 of the recommendations, were studying 16 of the more complex issues, and had offered a negative reaction to only four. Hees had received 175 further recommendations from those who had been scheduled to testify before Marin.

While the Marin Committee's work did yield useful results, the new minister's three-word credo probably had greater effect than any number of studies might have done. He outlined his approach when he met with parliamentary colleagues on the Standing Committee on Veterans Affairs during May 1985: "When I was appointed Minister, I told all employees to remember three words: speed, generosity, and courtesy. I believe my message is being heeded in all areas of the portfolio. Internal improvements have been made, and this is allowing us to get more money into the hands of veterans more quickly, in addition to doing a better job of solving their other problems."¹¹⁶

Hees's emphasis on having all those in the portfolio work as a team, guided by the concepts of speed, generosity, and courtesy, came at a critical time. After the move from Ottawa to Charlottetown, about 85 percent of Veterans Affairs' staff was newly hired, lacked a strong connection to the portfolio's past or mandate, and contained only a small number of veterans. Hees's memorable credo resonated with them, offering simple touchstones which they could fall back on as they learned the complex job of administering veterans programs.

In a bid to simplify that task, on 9 August 1985 Hees directed that 27 pieces of legislation establishing veterans programs be examined, with the objective of consolidating them into only one or two Acts. Desmond Rive, the Assistant Deputy Minister of Finance, Personnel, and Administration, was placed in charge of the review project. While Hees would not achieve the comprehensive rationalization desired, numerous major changes were made to veterans legislation during his tenure as minister.

During 1985 the government acted on a recommendation made back in 1972, and repeated by the Senate in 1980, to tie the rates for disability pensions to those of a composite group of junior Public Service employees. Legislation passed in March 1986 removed the existing ceiling on combined disability pension and prisoner-of-war compensation payments, largely to improve overall compensation levels for Hong Kong and Dieppe prisoners of war, who were among those incarcerated longest during the Second World War. Changes were made to allow the payment of benefits to veterans' dependent children up to age 18, increasing available benefits by one year. In the same vein, various measures improved the educational support available to veterans' dependent children and to orphans of the war dead. Veterans were allowed to have spouses made joint purchasers on agreements of sale for *Veterans' Land Act* properties, and numerous other changes were made to ensure that veterans' estates were more equitably and easily passed to their heirs.

These changes, and a staff whose efforts reflected the ethos of "speed, generosity, and courtesy," helped to generate remarkable improvements in the speed of the service to veterans. By mid-1986, Hees could report that since his appointment as minister, the time required to process first applications for pensions had been cut from 22 to 11 months, while the proportion of successful applications had almost doubled, from 28 to 50 percent. The time required to process applications to entitlement and assessment boards had been reduced from 33 to 10.5 months, with the relevant success rate rising from 40 to 60 percent. The time taken to process applications before the Pension Review Board had fallen from 23 to 11 months, while the rate of positive responses to such applications had almost tripled, from 13 to 36 percent. These results, which reflected admirably on the department's relatively new Charlottetown staff, had been achieved in the face of a 60 percent increase in caseloads.¹¹⁷

The nature of change was also informed by the studies completed as part of the government's Program Review. The project was designed to meet the twin objectives of "better service to the public and improved management of government programs."¹¹⁸ The departmental review recommended the development of a "one-stop" approach to service delivery in the field; amalgamation of the Pension Review Board and the War Veterans' Allowance Board; having the department take over from the Canadian Pension Commission the responsibility of delivering disability pensions; and purchasing more medical and dental services from the private sector.¹¹⁹ Less happily, Program Review also led to repeal of the Pensioner Training Regulations, a decision that proved to be short-sighted.

Between 1986 and 1987 a number of organizational changes were made to the portfolio in response to the Program Review recommendations. In 1986 a "one-stop service" pilot project was launched, which saw the field offices of Veterans Affairs and Veterans Land Administration located together with the offices of the Canadian Pension Commission. The pilot's success led to a national program of office consolidation within a year. In 1987 the Pension Review Board and War Veterans' Allowance Board were replaced by a single body, the Veterans Appeal Board. The Department of Veterans Affairs assumed full responsibility for service delivery of disability pensions, allowing the Canadian Pension Commission to concentrate on the adjudication of claims and improvements in the timeliness of decisions.

Another successful initiative led to the creation of a Treatment Accounts Processing System (TAPS) in the Ontario Region, which improved the quality and speed of service when veterans and clients submitted bills for treatment they had received. Hees's successor, Gerald Merrithew, built on this success, announcing in March 1989 a five-year, \$18.2 million contract with Blue Cross of Atlantic Canada to implement the TAPS system on a national basis. The contract allowed approximately 200,000 veterans across Canada to have easy access to a wide variety of health-care services provided by private suppliers. During 1989 pension benefits were restored to surviving veterans' spouses, whose benefits previously had been terminated when they remarried. This measure, which addressed a long-standing grievance, benefited approximately 4,000 individuals, mostly veterans' widows.

During the 1980s, other initiatives were undertaken to give greater recognition to the services, sacrifices, and achievements of Canadian veterans, especially those of the Korean War. On 29 May 1982 the National War Memorial, which had originally been dedicated to recognize the spirit of Canadians who had answered their country's call in the First World War – and, in many cases, had died in that conflict – was officially rededicated to include Canadians who had served and died in the Second World War and the Korean War. The inscriptions "1939-1945" and "1950-1953" were added to the base of the monument to reflect the years during which the two later wars had occurred. The rededication was performed by Governor General Edward Schreyer, with assistance from Minister of Veterans Affairs W. Bennett Campbell.

During April 1988, as veterans prepared to depart on a pilgrimage marking the thirty-fifth anniversary of the end of the Korean War, Minister of Veterans Affairs George Hees presented them with the first Korea Service Badges. Unlike First and Second World War veterans, Canadians who served in Korea had not received such badges at the end of hostilities. This belated acknowledgement recognized the individual contributions made by nearly 27,000 members of Canada's Special Force who served in that theatre between 1950 and 1953.

P. Pension Reform

By 1992 there was again growing criticism of the way in which pension claims were being handled and adjudicated. Veterans also objected to a 1993 decision to place Veterans Affairs and National Defence within the same portfolio, depriving them of a dedicated minister. (The measure was reversed in 1997.) Veterans' complaints were acknowledged by Kim Campbell, Minister of National Defence and Veterans Affairs, during her appearance before a House of Commons Standing Committee in 1993:

The pressure on all areas of our pension system has been unrelenting for some years now. Legislation has opened the door to new groups of veterans, and we have been busier than at any time since the years immediately after the end of the Second World War. Not surprisingly, the pressure caused a few cracks in the system and it was decided it needed to be reviewed. That review is now taking place. A pension evaluation study was undertaken and 3,000 disability pensioners participated. Overall,

the study found veterans were satisfied with the program. There was one noteworthy exception: the time it is taking to process applications. The study's recommendations are pointing the way towards faster turnaround times.¹²⁰

At the time of Campbell's testimony, the department indicated that it took an average of 542 days to process a favourable first application for a pension, and took 385 days to process a negative one.¹²¹ Notwithstanding the minister's assurances of progress in motion, on the conclusion of the committee hearings Members of Parliament passed a motion urging the Department of Veterans Affairs, the Canadian Pension Commission, and the Veterans Appeal Board to take all necessary measures to reduce considerably the time required to process and adjudicate disability pension claims and appeals.

While addressing a meeting of the Royal Canadian Legion during May 1994, Campbell's successor, Lawrence MacAulay, Secretary of State (Veterans), gave a commitment that the new government would introduce pension reform legislation that year. The announcement was accompanied by a promise that by 15 September 1997 at the latest, the time taken to process pension applications would be cut in half.

The promised legislation, Bill C-67, was duly shepherded through Parliament and came into effect on 15 September 1995. As a result, numerous organizational changes were made in an attempt to focus available resources on areas that would provide the most effective service. Authority and responsibility to render decisions at the first level of the pension adjudication process was given to the Minister of Veterans Affairs. The Bureau of Pensions Advocates, which had been a separate entity, was merged with the Department of Veterans Affairs. Its advocates, who had previously been involved in completing veterans' first applications for pensions, thenceforth focused on the more demanding task of preparing and presenting pension applicants' reviews and appeals. The Canadian Pension Commission was abolished, as was the Veterans Appeal Board. These two bodies were merged to form a new Veterans Review and Appeal Board (VRAB), providing disability pension applicants with two levels of appeal and applicants for War Veterans' Allowance with a final appeal. A small percentage of pension applicants have gone beyond VRAB – usually at their own expense – to the Federal Court of Canada.

Most importantly, the effects of the legislation, along with the hard work of those within Veterans Affairs and the infusion of additional funds in the 1995-97 federal budgets, achieved the reduction in turnaround times that had been promised. Success rates were improved too. While nearly 70 percent of first applications had been turned down by the Canadian Pension Commission, under the new system the departmental adjudicators made favourable or partially favourable first decisions more than 50 percent of the time. In tabling the report of his portfolio's performance for the year ending 31 March 1998, Minister of Veterans Affairs Fred Mifflin highlighted this feat: "One accomplishment that I am extremely pleased to report is our highly successful initiative to streamline the pension process. We have not only met our target to cut turnaround times in half, we have exceeded it. The turnaround

time for processing a claim, including appeals, has been reduced by 68 percent. This achievement is even more significant when you consider that the rate of incoming claims has increased over 30 percent between September 1995 and September 1997.”¹²²

At the same time as pension reform was advancing, changes were being made to the Service Income Security Insurance Plan. During 1991 members of the Reserve Force who were employed on a part-time basis or for short call-outs (classes A and B), were afforded optional coverage under the plan. Members of the Reserve Force on long-term call-outs filling Regular Force positions (class C) had been eligible for coverage since 1976. During 1995 the Service Income Security Insurance Plan was amended so that Long Term Disability payments were made to age sixty-five, rather than for life. Major medical benefits under the plan were updated to bring them in line with the Public Service Health Care Plan that covered other federal government employees.

Q. Better Late Than Never

Pension Reform capped a half-century of innovative updates and amendments to the Veterans Charter. Still, it did not extinguish all concerns about the manner in which Canada had repaid its debt of honour to those who had answered the call of duty during war and conflict. Calls for further action arose from several quarters, often supported by veterans’ organizations and the public at large. They were prompted, variously, by gaps that manifested themselves in the provisions of the original Veterans Charter, reflections on the disparate manner in which its benefits had been enjoyed by different groups, and evolving public perceptions about what was appropriately due to those whose services and sacrifices had helped secure Canadian freedoms. Public awareness of these issues was raised, too, by the Canada Remembers program, which saw the government and numerous domestic and international partners mark the fiftieth anniversary of major Second World War campaigns and victories. In response to these stimuli, the 1990s saw further extensions of veterans benefits or additional compensation paid to prisoners of war, to members of the Merchant Navy, to civilians with overseas wartime service, and to aboriginal veterans.

1. Prisoners of War

The 1971 decision that Canadians who had been held prisoner of war by Japan would be eligible for a minimum 50 percent assessment on disability pensions had been an important acknowledgement of the tribulations they had endured. However, many felt that those who had been prisoners of war in the European theatre deserved additional recognition as well. Having heard evidence from representatives of the Hong Kong Veterans’ Association of Canada, the National Prisoners of War Association, and the Dieppe Veterans and Prisoners of War Association, on 26 June 1972 the House of Commons Standing Committee on Veterans Affairs strongly urged “the Government to commence forthwith a thorough study on the former European prisoners of war ... to identify the adverse effects that

incarceration has had, and is continuing to have, on these veterans.”¹²³ Dr J. Douglas Hermann was subsequently engaged by the Department of Veterans Affairs to conduct the study. On the basis of findings related to prisoner-of-war health and mortality, his 1973 report recommended “that appropriate compensation on a continuing basis, over and above any disability pensions awarded, be paid to all Dieppe Prisoners of War” and that “provision be made to compensate similarly other former prisoners of war who, because of the extraordinary stress and trauma related to capture and imprisonment, also suffer from significant psychological and physiological disadvantages.”¹²⁴ In 1976 these hardships were recognized in the *Compensation for Former Prisoners of War Act*, which made them eligible for a basic disability pension of between 10 and 20 percent, depending on the length of their imprisonment. In 1986, a legislative amendment increased the 20 percent rate of POW compensation to 25 percent in recognition of the hardships those captured at Dieppe were forced to endure.

Notwithstanding more favourable benefits under the *Pension Act*, Canada’s Hong Kong prisoners of war had repeatedly claimed compensation for the forced labour they had endured under the Japanese, in violation of the Geneva Convention. For many years the Government of Canada contended that veterans’ rights to such compensation had been extinguished by the peace treaty with Japan that Canada had ratified in 1952. In 1987, with the support of the War Amputations of Canada, the Hong Kong Veterans pressed their compensation case through the United Nations Human Rights Commission in Geneva. Utilizing their non-governmental organization status with the Human Rights Tribunals within the United Nations system, the War Amputations of Canada initiated a claim against Japan pursuant to United Nations Resolution 1503. This resolution permits claims to be heard by the UN Human Rights Commission, and it provided a vehicle for the Hong Kong Veterans to underline the “grave violations” of the Geneva Convention committed by the Japanese and to pursue the wages owing to them for the slave labour they endured during the Second World War. In conjunction with the Resolution 1503 procedure, the War Amps and the Hong Kong Veterans also commenced an action before the United Nations Human Rights Committee in accordance with the Optional Protocol procedures of the International Covenant on Civil and Political Rights. This action was initiated against Canada for its failure to protect the interests of the Hong Kong POWs pursuant to the provisions of the Geneva Convention. The Hong Kong claim for compensation was eventually heard by the House of Commons Standing Committee on Foreign Affairs and International Trade, which in May 1998 issued a comprehensive report fully supporting these claims. On 11 December 1998 the Canadian government granted compensation of \$24,000 each to all Far East prisoners of war or their widows. It was estimated that payments would be made to 350 veterans and 500 widows.¹²⁵ On 17 August 2001, Veterans Affairs announced that the pension assessment for cases of avitaminosis (a debilitating condition associated with malnutrition, for which all Hong Kong veterans are compensated) would be increased from 50 to 100 percent. This decision served to increase benefits paid to approximately 150 remaining veterans.¹²⁶

In 1998, at the same time as compensation for Hong Kong prisoners of war was announced, the government indicated that it would also make *ex gratia* payments to the surviving veterans or spouses of a small number of Canadian airmen who had been incarcerated in Buchenwald concentration camp.¹²⁷ These airmen had mistakenly been arrested as civilians, detained under inhumane conditions

in a concentration camp instead of a prisoner-of-war camp, and compelled to work, contrary to the Geneva Convention. Despite numerous representations by the Canadian government, German authorities had refused to compensate them for this ordeal.

Eventually, Germany reconsidered its position. On 23 October 2001 it was announced that the fifteen surviving veteran airmen would receive financial compensation through the Foundation Remembrance, Responsibility, and Future, which was established by the German government and German industry to compensate former slave workers and forced labourers under the Nazi regime. In addition, the Canadian government made equivalent payments to the widows of four Buchenwald detainees whose deaths had denied them access to this belated compensation.¹²⁸

When the *Pension Act* was amended in 1987, a limitation on retroactivity was established, which affected total sums payable to those who had not applied for enhanced prisoner-of-war benefits before that date. The negative consequences of this provision were highlighted in 2002 by the case of Al Trotter, a decorated airman of the Second World War who had been a German prisoner of war for 268 days. He did not become aware of the 1976 legislation benefiting prisoners of war in the European theatre until 1990. While he did begin to receive his disability pension at that time, he did not receive retroactive benefits. His case was raised numerous times in the House of Commons and was widely covered by the media. A review of the case led Minister of Veterans Affairs Rey Pagtakhan to announce in December 2002 that all prisoners of war (or their spouses) who were in a situation similar to that of Mr Trotter would receive an *ex gratia* payment of up to \$20,000.

During November 2003, Bill C-50 was passed, approving compensation for the first time to prisoners of war who had been held captive for between 30 and 88 days. The legislation also enhanced existing prisoner-of-war benefits payable to those who had been incarcerated by the enemy for more than 911 days. As a result of associated regulatory amendments, prisoners of war were also granted access to VIP benefits in 2003.

2. The Merchant Navy

In defending limits that were placed on Merchant Navy access to Veterans Charter benefits, the Minister of Transport, Lionel Chevrier, said in 1945 that “benefits should not be of a nature which would encourage seamen to leave the industry at the end of the war to seek employment in other fields as the services of many skilled seamen will be required if Canada is to maintain a Merchant Marine.”¹²⁹ But by 1949 the federal government had decided to withdraw economic support for a nationally flagged fleet and this, combined with dramatic changes in the industry, led to the Merchant Navy’s collapse as a major source of employment. The 1945 premise that merchant sailors would not need support in developing second careers had proved short-sighted. Furthermore, the government’s abandonment of plans for a nationally flagged fleet ensured that Merchant Navy claims for additional compensation would persist. Although further benefits were extended to qualified members of the Merchant Navy from time to time, none of these measures met the group’s most fundamental wishes:

to be recognized as veterans on a par with those who had served in the armed forces during the Second World War and Korean War, and to be compensated for rehabilitation benefits which they were denied.

Extending veteran status to members of the Merchant Navy was recommended by a report of the Senate Subcommittee on Veterans Affairs in 1991. The report, *It's Almost Too Late*,¹³⁰ also recommended the creation of a Merchant Navy Book of Remembrance. Passage of the *Merchant Navy Veteran and Civilian War Related Benefits Act* in 1992 satisfied the first recommendation. In 1994 the second recommendation bore fruit, when Governor General Raymon Hnatyshyn presided over the installation of a sixth Book of Remembrance, dedicated to the memory of the Merchant Navy's war dead, in the Memorial Chamber of the Peace Tower. The ceremony fulfilled a long-standing objective of Gordon Olmstead, chair of the Merchant Navy Coalition and president of the Merchant Navy Prisoners of War Association, who had vigorously championed his colleagues' cause and their search for recognition.

In 1997 Merchant Navy veterans' organizations renewed their demands that they be compensated for the Veterans Charter benefits they had been denied. Their efforts won concerted support and advocacy from the National Council of Veteran Associations in Canada. Although 1999 parliamentary hearings held on the subject failed to produce a change of policy, Veterans Affairs' new deputy minister, Larry Murray, pursued discussions on the subject with representatives from the major veterans' organizations. These were given a boost in November 1999 when Governor General Adrienne Clarkson unveiled a new honour, the Gulf of St. Lawrence Commemorative Distinction, recognizing the Canadian and Newfoundland Merchant Navies' "courage, fortitude, and professionalism" during the Battle of the Gulf of St. Lawrence between 1942 and 1944.¹³¹

Finally, on 1 February 2000, Minister of Veterans Affairs George Baker announced a \$50 million tax-free special benefit for Merchant Navy veterans and surviving spouses, in order to resolve the group's historical grievances. Most veterans' payments were capped at \$20,000, but an additional 20 percent was paid to those who had been prisoners of war. In making the announcement, Baker applauded the role of Canadian veterans' organizations, which had played a pivotal role in the outcome. The number of qualifying applicants for the Merchant Navy Special Benefit dramatically exceeded initial estimates. Eventually, over 7,000 special benefit payments, totalling more than \$104 million, were made.¹³²

3. Civilian Groups

During the Second World War, numerous civilian groups supported or assisted the armed forces by performing a wide range of war work. As the war reached its conclusion and the broad outlines of the Veterans Charter became known, representations were made on behalf of many such groups for access to veterans benefits. On 9 May 1945, one day after celebrating Victory in Europe, Ian Mackenzie, Minister of Veterans Affairs, announced that two groups would receive significant access to Veterans Charter benefits: the Corps of (Civilian) Canadian Fire Fighters for Service in the United

Kingdom, who had fought fires in England during the Blitz; and Auxiliary Services Supervisors from the Canadian Legion War Services, the Knights of Columbus, the Salvation Army, and the Young Men's Christian Association, who had served overseas providing recreational services and equipment to the forces.

Notwithstanding Mackenzie's announcement of May 1945, a Special Committee of the House of Commons received many appeals for a further extension of Veterans Charter benefits to civilian groups. These groups included the civilian crews of government vessels and cable ships; Canadian Red Cross and St John Ambulance Brigade personnel; instructors in elementary flying training schools and air observer schools under the British Commonwealth Air Training Plan; orthopaedic nurses selected by the Canadian Red Cross Society for service in Scotland at the request of the Scottish Ministry of Health; Port of Halifax pilots; "Transport Command" pilots (No. 45 Group RAF civilian flying personnel, often referred to as Ferry Command); and those who had served in the Voluntary Aid Detachment.¹³³ These appeals, in turn, were investigated by an interdepartmental committee composed of representatives from the Departments of Veterans Affairs, National Defence, and Finance. Following their deliberations, limited access to rehabilitation benefits was extended to these groups in 1946, in a "degree appropriate to the hazards, hardships and monetary rewards of service which each rendered to the State."¹³⁴

On this basis, the civilian crews of government vessels and cable ships, instructors in the elementary flying schools and air observer schools, and members of the Voluntary Aid Detachment were denied access to veterans benefits. All remaining groups, if not already eligible, were provided with access to disability pensions, usually only for injuries incurred as a result of enemy action or counteraction, along with limited related access to medical treatment benefits.

By 1995 concerns were being raised in Parliament that some civilian groups who had supported the war effort overseas might not have received all that was owed them. On 6 June 1995, as they marked the fifty-first anniversary of D-Day, members of the Standing Committee on National Defence and Veterans Affairs directed that letters be sent to the Secretary of State (Veterans), inviting him to review the cases of those who had served in the Newfoundland Forestry Unit and in Ferry (Transport) Command. Eventually, such promptings yielded positive results.

On 15 March 2000, Minister of Veterans Affairs George Baker provided the remaining members of some civilian groups with the additional recognition they had sought immediately after the war. He announced that increased veterans benefits would be extended to all civilian groups who had served overseas in close support of the war effort. This included the civilian aircrews of Ferry Command; members of the Newfoundland Forestry Unit and the Corps of (Civilian) Canadian Fire Fighters; overseas welfare workers from the Canadian Red Cross and St John Ambulance; and those who had served in the Voluntary Aid Detachment during the First World War. "Canadians recognize and appreciate the efforts and sacrifice of all civilians who served overseas ..." Baker said. "Without their efforts, just think how differently the war in Europe might have turned out."

might have turned out.” After a delay of over half a century, they were granted better access to income support and disability pensions, as well as further health-care benefits and support through the Veterans Independence Program.

4. Aboriginal Veterans

When they demobilized following the Second World War and the Korean War, many of Canada’s estimated 4,500 First Nations veterans faced a continuation of the social prejudice against aboriginal people that had been common before the war, as did their numerous Métis and non-status comrades-in-arms. Many First Nations veterans, in particular, had to deal with additional layers of complexity in applying for veterans benefits through Indian agents and by not being eligible for loans under the Veterans’ Land Act if they chose to live on a reservation. Their treatment under the *Veterans’ Land Act* was a particular grievance, which was first aired in a significant fashion during the hearings into the *Indian Act* that were held jointly by the Senate and House of Commons between 1946 and 1947.¹³⁵ It featured prominently among a range of aboriginal veterans’ grievances that were confirmed during hearings held by the Royal Commission on Aboriginal Peoples nearly fifty years later.

Examples of the frustration aboriginal veterans experienced after their discharge can be found in the royal commission’s report:

Voluntary enlistment was high. Each war saw ... registered Indians and numerous Métis and non-status people serve in the forces ... Their contribution was well received, and most Aboriginal people found acceptance as partners in the country’s war effort. Only after the wars, when registered Indians returned to their reserves and Métis and non-status people to their own communities, did it become clear that the semblance of full citizenship had been only temporary ... As one veteran put it, “We as Aboriginal veterans got fooled ... we got acclimatized to the non-Native way of living through the war years, and for a period of time we became equal in the non-native world, or so we thought. Upon return to civil life, and back on the reservation, our bubble soon burst ...” The list of possible [veterans] benefits was long and complicated. Benefits had to be applied for; they were not automatic. This precondition required reliable sources of information, which clearly did not exist, since the IAB [Indian Affairs Branch] and its agents typically failed to perform this role. As one veteran said, “They told us what they were going to give us, not what we were qualified to get.” These veterans also maintain that fraud occurred in the delivery of benefits, because too much was left to the discretion of Indian agents, and record keeping was inadequate.¹³⁶

The 1996 *Report of the Royal Commission on Aboriginal Peoples* called for further work to be done to resolve disputes over “aboriginal veterans’ access to and just receipt of veterans benefits.” The commission’s recommendations, coupled with continued advocacy by the First Nations Veterans

and other aboriginal organizations, led to the National Round Table on First Nations Veterans Issues, which was launched on 10 November 2000. Its mandate was to conduct fact-finding work on issues raised by First Nations veterans about the way in which they and their dependants had been treated during and after the Second World War and the Korean War.¹³⁷ On 21 June 2002, the federal government responded to the report of the round table. It offered, as a gesture of goodwill, to pay qualifying veterans or their surviving spouses up to \$20,000 each in response to claims of differential treatment under the Veterans Charter.¹³⁸ A sum of up to \$39 million was set aside to administer and make payments under this First Nations Veterans Package.

Meanwhile, the federal government provided funding to the National Métis Veterans Association, established in 2000, to research grievances concerning Métis access to post-discharge benefits. Their concerns had not been addressed during the National Round Table on First Nations Veterans Issues. Although Veterans Affairs' preliminary research indicated that most Métis veterans had applied for and received Re-establishment Credits on a par with non-Métis veterans when they were discharged, this group continues to advocate access to a disbursement similar to that offered to First Nations and status Indian veterans under the First Nations Veterans Package.¹³⁹ It remains the position of the Métis and non-status Indians that the provisions of the Veterans Charter relating to rehabilitation training and the *Veterans' Land Act* either were not made available to these veterans or did not address their particular circumstances. Discussions between the government and relevant stakeholders continue on the subject.

Similarly, federal support was provided to the National Aboriginal Veterans Association to research and articulate the grievances of non-status Indians regarding their treatment following the Second World War and the Korean War. In June 2002 the National Aboriginal Veterans Association and the National Council of Veteran Associations in Canada presented the government with claims for an *ex gratia* payment to First Nations, Métis, and non-status Indians, in compensation for benefits which they contend were denied them. One month later, the National Council of Veteran Associations in Canada filed a similar claim with the United Nations Human Rights Committee on behalf of all aboriginal veterans.¹⁴⁰ It remains outstanding.

5. Authorson

Legislation provides that where veterans are incapable or unable to manage their own affairs, the Department of Veterans Affairs can administer monies on their behalf. In many cases, these veterans were placed in long-term care facilities where their health care and daily living needs were provided at no personal expense. During this time, unless sums were paid out to support an immediate family member, their veterans benefit payments accumulated in accounts managed by Veterans Affairs. Before 1990, no interest was paid on these accounts, which now number approximately 30. In 1999, a class action lawsuit seeking retroactive interest payments and related compensation for these veterans was certified in the name of Joseph P. Authorson.

Authorson had enlisted in 1939 and had served in Europe. As a result of emotional trauma suffered during combat, he was repatriated to Canada in 1943, admitted to hospital, and awarded a disability pension, which was paid into an administered account.

A decision favourable to the veterans involved in the class action was released on 13 March 2002. Citing the 1960 Canadian Bill of Rights, it found that the government should pay interest on all monies held in administered accounts between the end of the First World War and 1990. Estimates of associated costs for as many as 35,000 accounts ranged between \$657 million and \$3.2 billion. Three months after the decision was released, Joseph P. Authorson died. On 17 October 2002 the Government was granted leave to appeal the case to the Supreme Court of Canada, and on 17 July 2003, the Supreme Court released its decision, which addressed the government's 1990 legislation limiting any retroactive payment of interest on administered accounts. It found that "Parliament has the right to expropriate property, even without compensation, if it has made its intention clear" by the passage of unambiguous legislation.¹⁴¹ The Supreme Court found that the 1990 legislation passed this test.

On the day of the Supreme Court's ruling, Minister of Veterans Affairs Rey Pagtakhan noted in a public statement:

Authorson is a staged proceeding that involves more than just the claim for interest. The first stage deals with the Government's liability to pay pre-1990 interest. The second stage deals with the Government's liability to pay certain principal balances retained when the veterans died. The third stage deals with damages – i.e., how much the Government will have to pay if liable. The Supreme Court's decision relates only to the first stage ... The Ontario Superior Court has already determined in the second stage of the action that the Government is not liable to pay most of the principal balances it retained. The Authorson plaintiffs have appealed that decision. The appeal is still pending before the Ontario Court of Appeal. There has been no judgment on the third stage of the action yet ... [Consequently] there will still be residual issues to be resolved before the Ontario courts.

In December 2003 Ontario judge John Brockenshire ruled that veterans in the care of the federal government between 1918 and 1990 were entitled to damages in connection with funds held in trust on their behalf. Litigation on this issue continues.

6. Participants in Chemical Weapons Tests

During the Second World War, defence officials were concerned that chemical weapons, especially toxic gasses like those employed by German forces during the First World War, might again be used in combat. As a result, in 1939 the Department of National Defence established a secret chemical weapons research facility at Canadian Forces Base Suffield, in Alberta. Between 1941 and 1946, military personnel were asked to volunteer for secret services at Suffield but were not informed of their

full nature. While serving at the facility, approximately 2,500 of these volunteers were unwittingly exposed – often without proper protective equipment – to chlorine gas, mustard gas, and similar substances, during human experiments on the effects of chemical warfare. Many of those exposed to chemical weapons during these experiments later suffered from medical conditions which they believe had been caused by their exposure to toxic materials while serving at Suffield. Some had suffered severe burns, blistering, and chronic respiratory problems, while others reported psychological injuries or various forms of cancer.

The existence and status of these experiments was withheld from the public for decades under the provisions of the *Official Secrets Act*. They were finally declassified in 1997. On 5 May 2000, Art Eggleton, Minister of National Defence, unveiled a commemorative plaque at Canadian Forces Base Suffield to recognize Second World War veterans who had participated in the chemical agent experiments conducted there. A number of veterans who took part in the experiments have unsuccessfully sought compensation from the Department of National Defence for the harm they attribute to these services. As a result, in 2003 they sought legal assistance in launching a class action suit against the government to obtain damages.

On 19 February 2004, John McCallum, Minister of Veterans Affairs, and David Pratt, Minister of National Defence, announced a Recognition Program for Canadian veterans who participated in chemical warfare experiments beginning in the Second World War era, in Suffield, Alberta, and Ottawa, Ontario. Eligible veterans will be offered a one-time payment of \$24,000 in recognition of their service. This amount is in addition to pension benefits to which these veterans may already be entitled.

R. To Age in Safety, with Dignity

These developments took place against the backdrop of an aging veteran population. By the mid-1990s, most war veterans were well into their seventies, exceeding average life expectancy, and increasingly found themselves coping with the problems of advanced age: chronic ill health, dementia, frailty, and loss of mobility and independence. With these changes came increased demands from veterans and their families for health care, home care, and timely access to long-term care facilities. In 1993, Hugh Greene, first vice-president of the Royal Canadian Legion, highlighted some of these concerns during a presentation to the House of Commons Standing Committee on National Defence and Veterans Affairs:

The need to provide adequate medical long-term care facilities and sufficient veterans hospital beds continues to be a major problem. Long lead times for facility renovation or construction, combined with the rapidly advancing age of veterans adds urgency. No reduction can be accepted in the availability of services and facilities or access for veterans to these facilities when and as required. A solution to the problem of long waiting lists for long term care must be found soon. The obligation rests with Veterans Affairs Canada to address this need at the earliest possible time.¹⁴²

Growing pressure from veterans' groups and from individual veterans led Veterans Affairs to launch in October 1996 the *Review of Veterans' Care Needs*. The first two phases of the review studied, respectively, the care needs of community-dwelling veterans and those of veterans living in long-term care facilities. The research for this report included data gathered from focus groups, widespread consultations, reviews of the literature, and a comprehensive examination of the effectiveness of related Veterans Affairs programs and regulations.

The department's return to the tradition of formal consultation on veterans' issues was also supported by the establishment in 1997 of a Gerontological Advisory Council, which was to provide information and advice on policies and program development in the field of veterans' health and care. Dr Victor Marshall, one of Canada's leading gerontologists, accepted the position of chair of the council. The other twelve members included well-regarded experts in the fields of geriatrics, gerontology, and seniors' issues. Several members were invited to join as representatives of Canada's veterans' organizations.

By 1998 the *Review of Veterans' Care Needs* had yielded a number of key findings. One was that "veterans want to remain independent in their own homes or communities as long as possible and VAC's current health care programs do not fully facilitate this desire." The review found that the department's health-care eligibility criteria were too complex and impeded the staff's efforts to meet veterans' needs. Veterans' spouses, who assumed the wearying principal responsibility for care giving in the home, were facing burn-out and needed support. More needed to be done in the areas of preventive medicine and health promotion. The review also reported that Veterans Affairs staff needed additional training in gerontology and in assisting elderly veterans. The need for more long-term care facilities for veterans was confirmed, as was the desirability of a shift from hospital-based care to community-based care.

While Veterans Affairs was examining veterans' health care and long-term care needs, the Senate was conducting its own review of the situation. Between November 1997 and February 1999, the Subcommittee on Veterans Affairs of the Standing Committee on Social Affairs made extensive inquiries and, accompanied by Veterans Affairs officials, it visited 70 percent of the veterans' care beds in Canada. The subcommittee's observations were captured in a pivotal report, *Raising the Bar: Creating a New Standard in Veterans Health Care*. It contained 68 often detailed recommendations on shortcomings or desirable improvements in veterans' long-term care facilities. These addressed such issues as meal quality, comfort, acceptable staffing levels, health and safety of residents, staff training and orientation to veterans' needs, and support for spouses visiting veterans in care facilities. Recommendations were also made that Veterans Affairs Canada "adopt the 'quality of life' of a veteran as the guiding principle of departmental policy and spending decisions on veterans health care" and that it "adopt accreditation in good standing by the relevant national organization as a condition of placing veterans in a hospital or long-term care facility." The report concluded:

If there is one message the Subcommittee would like to leave with the reader, the government, and those who work in veterans care, it is simply that by developing a national standard of care and adhering to it, we can better serve the men and women.

These are the same men and women who served without question on foreign soil so many years ago ... Veterans are a group apart. Having volunteered their all, including life itself, they are proud people not given to undue complaint, and they scorn to be importunate. They have earned the right of proper care within an environment which offers an acceptable quality of life.¹⁴³

The Senate report, along with findings from the *Review of Veterans' Care Needs* and input from the Gerontological Advisory Council, prompted a number of initiatives to address the needs of elderly veterans and their families.

A series of symposia on aging and wellness was launched in Charlottetown in 1998. In the effort to develop a national network of priority-access bed facilities and to support the dissemination of best practices in long-term care, in 2000 these symposia developed into annual National Long Term Care meetings hosted at major priority-access bed locations across Canada. Meanwhile, in 1999, an Overseas Service Veterans "at home" pilot project had been launched. Its purpose was to provide home-care benefits and make treatment benefits accessible to veterans who needed to move into priority-access beds and were living at home awaiting suitable placement.

During 2000 Veterans Affairs unveiled a comprehensive Residential Care Strategy, which addressed emerging issues such as dementia, palliative care, and respite care. In support of the strategy, it was announced that up to an additional 2,600 priority-access beds would be made available to eligible veterans across Canada. The next month Veterans Affairs agreed to provide Overseas Service Veterans awaiting priority-access beds with accommodation in community-care facilities at departmental expense, despite their eligibility for hospital-based priority-access beds only. By 2002, there were 3,750 veterans living in 170 facilities within which Veterans Affairs had contracted for priority-access beds. Another 4,500 veterans were receiving long-term care in more than 1,500 community-care facilities across Canada, while a further 550 were living in the one remaining veterans' hospital in Canada, Ste Anne's in Montreal.

A Health Promotion program was launched within the department. One of its programs involved the Alzheimer Wandering Registry, which was developed in conjunction with the Alzheimer Society of Canada and the Royal Canadian Mounted Police. There was also a Falls Prevention Initiative developed in partnership with Health Canada. As its name implies, this tackled the problem of falling – the most preventable health risk to seniors and the cause of more than half of all injuries to them. Another initiative, in some areas, was a day program to provide respite facilities for family members who care for veterans at home, providing them with much-needed support.

In January 2002 Veterans Affairs and the Canadian Council on Health Services Accreditation (CCHSA) signed a contract providing for the CCHSA to evaluate the quality of care given to veterans living in long-term care facilities. The aim was to monitor performance and ensure the maintenance of high standards. Speaking of the plan to delegates at the Royal Canadian Legion's Thirty-Ninth Dominion Convention in June 2002, Minister of Veterans Affairs Rey Pagtakhan explained: "In effect, the [CCHSA's] accreditation process is VAC's national standard for the delivery of care ...

Ultimately, this national standard will help us ensure that we meet the ongoing health, quality of life and long-term care needs of our war-era veterans whose advancing years bring a unique set of needs.”¹⁴⁴

Annual client satisfaction questionnaires were developed to ensure that veterans remained satisfied with the care they receive and the environment in which it is provided. The February 2002 survey reported an 88 percent overall satisfaction rating from participating veterans and family members. In June 2003 Veterans Affairs entered into an agreement with the Royal Canadian Legion to have Legion volunteers administer these surveys to about 4,500 veterans living in more than 1,500 community-care facilities.

Advances like these were supported by the implementation, commencing in 2000, of a Client-Centred Service Approach (CCSA) within Veterans Affairs. The CCSA “is an approach to service delivery that focuses on and serves the individual needs of the veteran or other client as a whole, including their family and care giver.” The approach was outlined by Minister of Veterans Affairs, Ronald J. Duhamel:

In the past, we have tried to fit our clients into one of the programs offered by the department. This approach was not very satisfactory. Too piecemeal. Not efficient enough from the veterans' perspective. We have now adopted a client-centred approach that identifies and meets the individual needs of each client, no matter what their age or circumstance. It is a model that allows us to offer, directly or indirectly, a full spectrum of interventions, through a “continuum of care” framework. In the process it addresses family needs and circumstances, and then allows for the development of a plan of action with them to ensure their well-being and quality of life. It amounts to multi-disciplinary care, and includes VAC services and benefits, as well as those available through partners in voluntary and private sectors and other levels of government. Once initiated, this system of service delivery follows the client throughout changes in their assessed needs.¹⁴⁵

Of course, the value of this approach could only be fully realized if Veterans Affairs Canada, other levels of government, and partners could offer a range of services that sufficiently addressed a veteran's unmet needs, as well as those of his or her family. As further studies showed, this was not always the case, especially for family members, who often devoted considerable time and energy to the veteran's care. In 2001 Veterans Affairs received the results of a study it had commissioned from Dr Norah Keating of the University of Alberta. Her report, written with Jacquie Eales and Janet Fast and entitled *The Differential Impact of Veterans Affairs Canada Policies on the Economic Well-Being of Informal Caregivers*,¹⁴⁶ found that Veterans Affairs Canada programs “have little impact on the employment-related costs, such as current and future income and employment-related benefits, which employed caregivers incur. It is these costs that have the most significant impact on caregivers' current and future economic well-being.” Noting that Veterans Affairs Canada was attempting to support informal caregivers by applying policies that were designed with the veteran and not the caregiver in

mind, the authors argued that “as VAC moves towards a focus on the veteran family unit, it should be prepared to provide direct benefits to informal caregivers.” Consideration of family compensation programs similar to those that exist in other developed countries was suggested. The Keating Report also noted that many veterans are caregivers for their spouses. Their support needs are not met by the range of existing veterans benefits, a fact that can lead to economic hardship, social isolation, and physical stress for the veteran. Keating estimated that more than 175,000 male caregivers may fall into this category of needy veterans.

Additionally, the Keating Report found that there are regions in Canada where caregiving supports which VAC contracts out (for instance, adult day programs and respite care) are not available: “VAC needs to address how such client and caregiver needs should be met in regions in which critical service gaps in communities are identified.” Noting disparities in the health-care services provided by different provincial jurisdictions, the report concluded: “If current trends continue, VAC will become increasingly involved in providing benefits to flatten regional disparities and ensure equity to veteran clients across Canada.”

While many of the above observations are especially applicable to elderly veterans and their families, they also apply to the circumstances of many of Canada’s younger veterans – those leaving the Canadian Forces.

II Re-imagining Opportunity with Security

A. Stretched Too Thin: the Canadian Forces in the 1990s

The last decade of the twentieth century proved an immensely challenging one for those serving in the Canadian Forces. It saw a dramatic increase in the size and complexity of operations undertaken abroad in support of the United Nations (UN), the North Atlantic Treaty Organization (NATO), and other international security bodies. At home, law enforcement challenges and natural disasters called for large military deployments as well. These were undertaken against a backdrop of constantly shrinking resources. The result was a military community placed under tremendous strain. Regrettably, it also led to a serious weakening of the implicit covenant that exists between a nation’s people and those who hazard their lives in its service as members of the armed forces.

The end of the Cold War found the Canadian Forces deploying about 1,600 personnel abroad each year to conduct peacekeeping operations. In support, they could draw on a resource base of about 86,000 Regular Force and 22,000 Reserve Force members, and the aid of about 36,000 civilian defence workers. The annual budget was more than \$12 billion. From 1989 onwards, these numbers declined dramatically. Over the following decade, defence spending cuts of more than \$8 billion were absorbed by the Department of National Defence, and significant capital replacement programs were delayed. Numerous bases and stations across Canada were closed, as well as bases that were

maintained in Germany to support NATO operations – bases that also served as important staging and logistical support facilities for peacekeeping. The size of the Canadian Forces was continually reduced until the Regular Force numbered only 58,000 members. Despite plans to offset some of these reductions by enlarging the Reserve Force to 40,000 and increasing its operational responsibilities, its numbers rose to only about 30,000. Meanwhile, the civilian workforce of National Defence was cut to 19,000. Pay freezes were instituted across the public service, which affected both military and civilian members of the defence team but had a disproportionately negative effect on the most junior members of the Canadian Forces and their families.

These cuts were not reflected in the operational tempo which the government set for our military. While its overall strength was falling, the number of Canadian Forces members deployed abroad in the 1990s rose to an average of about 2,500 personnel a year, a figure that more than doubled the percentage of armed forces members serving overseas. In some years more than 3,300 were serving abroad. As the size of Canada's commitment to international security operations was expanding, the nature of that role was changing too. No longer deployed on relatively "routine" peacekeeping operations patrolling a line of demarcation or observing a ceasefire, members of the Canadian Forces increasingly found themselves in war zones, attempting to suppress civil strife, trying to stave off genocide, or delivering humanitarian aid at the same time as they were attempting to enforce peace on unyielding, heavily armed militias.

On 2 August 1990 Iraqi troops invaded Kuwait, triggering a series of events that would see Canadians go to war for the first time in forty years. On 23 October the House of Commons approved the government's plan to send Canadian warships, aircraft, and military personnel to the Persian Gulf region to participate in a multinational military effort to secure Iraq's withdrawal. Nearly 4,600 members of the Canadian Forces were eventually deployed to the region, approximately 2,400 of whom served during the period of active combat operations between 23 and 28 February 2001. While Canada was fortunate in that it had no battle casualties or fatalities, many Gulf War veterans from Canada and allied nations have developed Gulf War illnesses and experience frustrations when trying to get their condition diagnosed or treated, or in obtaining compensation with a disability pension.

When members of the Canadian Forces left for the Persian Gulf and returned from it, there were warm send-offs and tearful reunions full of pomp and circumstance. But throughout the decade, thousands more soldiers, sailors, and members of the air force left to undertake largely unheralded United Nations missions. They assisted in Namibia's transition to independence (1989-90) and supervised the withdrawal of South African troops from Angola (1991-97). They helped bring an end to civil war in Nicaragua (1989-92) and El Salvador (1992-94), and observed elections that restored democracy to Haiti (1990-91). In the Asia Pacific region, they helped contain violence and offered humanitarian assistance in East Timor (1999-2001), and they worked to establish stable government and to clear mines in Cambodia (1991-93 and 1993-2000).

The Canadian Forces were also called upon to deliver an unprecedented level of humanitarian assistance around the globe during the 1990s. They provided medical and airlift support to Kurdish refugees in Turkey and Iran in 1991. Following the disastrous hurricane season of 1992, a Canadian warship sailed to Florida and the Bahamas to help rebuilding efforts. In the mid-1990's, Canadian Forces members supported humanitarian relief efforts in Zaire, Uganda, and Rwanda, and were deployed to Italy to help in the wake of massive mud slides in Sarno. The Disaster Assistance Relief Team went to Honduras in the devastating wake of Hurricane Mitch in 1998, and the next year it travelled to Serdivan, Turkey, to provide assistance following a massive earthquake. While heartwarming and rewarding, these deployments further sapped the stamina and resources of a hard-pressed Canadian military.

Probably the most extensive and taxing overseas operations of the 1990s were in the former Yugoslavia, where a bitter civil war and ethnic violence created some of the most dangerous conditions Canadian soldiers had experienced since the Korean War. Thousands of Canadians served with the United Nations Protection Force in 1992-95. They faced fierce battle and experienced the helplessness of constraining rules of engagement in places like the Medak Pocket. But their heroism and heartbreak was little recognized until 2002, when Governor General Adrienne Clarkson offered these words of praise and understanding:

It's been ten years now since the earliest days of the brutal Balkan conflict, when Yugoslavia crumbled as a country. The vicious horrible slaughter, to which every side delivered themselves, gave the world that dreadful term – ethnic cleansing ... as you – our peacekeepers – attempted to bring order to a hideous situation. In those 15 hours on September 15, you represented the concerns and the credibility of the United Nations, putting yourself in harm's way, exposing yourself to deliberate, sustained machine gun fire from Croat forces. To which you rightfully and skilfully replied. Finally a ceasefire was agreed ... But between the time of that negotiation and the withdrawal of Croat forces the next day, your battalion watched hopelessly as the Croats engaged in a last frenzy of "ethnic cleansing." The great historian Herodotus said: "This is the worst pain a man can suffer: to have insight into much and power over nothing." The problem is – and I think all Canadians are beginning to recognize this – that keeping the peace is not simple. Keeping the peace means that the peacekeeper not only stands up to the battle line: he is the battle line. The peacekeeper takes affronts from both sides. The operation in the Medak Pocket demonstrates beyond any debate that today's peacekeeping can, and does, involve armed struggle.¹⁴⁷

Thousands more Canadians completed hazardous tours of duty under NATO auspices, in the Balkans, in the skies above them, and in the adjacent Adriatic Sea as part of the NATO Implementation Force (1995-96), the Stabilization Force in Bosnia-Herzegovina (since 1996), and the Multinational Peace Force – Kosovo (1999-2000). Tours of duty in that region claimed the lives of twenty-one Canadian soldiers between 1992 and 2000. Many others returned home to suffer the recurring nightmares of post-traumatic stress disorder or to worry about the effect that depleted uranium munitions or other chemical hazards might have had on their health.

In response to a public outcry about starvation and rampant violence in Somalia, Canada sent a ship and a major contingent of troops to the Horn of Africa between 1992 and 1993, as part of the first peace enforcement operation of the post-Cold War era. Despite a record of remarkable humanity and courage in the face of great difficulties, the torture and murder of a Somali youth by Canadian soldiers scarred the reputation of the Canadian Forces, taxed morale, and left a proud Airborne Regiment disbanded. Between 1993 and 1994, other Canadian soldiers found themselves engaged in a futile attempt to halt a genocidal civil war in Rwanda. The mission saw them watching helplessly, having been refused sufficient support and shackled by United Nations orders, while more than 800,000 people were murdered. The experience tested the mettle of many, including one of Canada's top generals, Roméo Dallaire.

Closer to home, during 1990 Canadian soldiers faced the unpleasant duty of confronting and containing armed fellow citizens from the Mohawk community of Kanesatake. Later in the decade, members of the Canadian Forces from all elements delivered humanitarian assistance and helped fight flooding in Sherbrooke (1994), the Saguenay (1996), and the Red River valley (1997). The 1997 operation in Manitoba was the Canadian Forces' biggest domestic mission to that date, but it was eclipsed in 1998-99 during the massive Ontario and Quebec ice storms, which saw 16,000 military personnel responding to the crisis. Meanwhile, off the coast of Nova Scotia, members of the Canadian navy and air force had assisted in the hazardous and often gruesome recovery of human remains following the crash of Swissair Flight 111 in September 1998. Sandy Fraser, the clinical director of a civilian Critical Incident Response Team working at the crash site, recalled her experience:

We were asked to be part of a large team being assembled to provide debriefings for the entire crew of one of the frigates that had been at the scene of the crash ... The team I led worked with the divers and casualty clearers who had recovered human remains and aircraft debris. Here again the theme of futility arose. It is very difficult for those trained to rescue and mend people to be faced with no opportunity to do so. It also was evident that their job, while difficult, was manageable until something occurred to personalize it such as pictures of the victims in the newspapers or recovering a child's toy, or a wallet ... From our experiences working with the military we have developed a profound regard for the men and women who serve in our armed forces. When General Dallaire spoke to our Canadian Traumatic Stress Network conference last May we had a glimpse of their mettle, we saw it first hand in Halifax this fall.¹⁴⁸

But if some people respected their mettle, the members of the Canadian Forces often felt that their best efforts were unappreciated and unrecognized. By the mid-1990s, many military families were so cash-strapped that they were visiting food banks. Others were applying for welfare in an attempt to make ends meet. Soldiers hid the physical and psychological scars of hazardous duty, fearing that their careers would be cut short if their condition was known. As a result, spouses and children suffered secondary trauma from living with those who could not, or would not, seek treatment for operational

stress injuries. Moreover, while some widows who lost husbands on peacekeeping duty received the nation's official recognition of sacrifice – the Memorial Cross – in the mail, others did not receive one at all.

As the Canadian Forces declined in number, their commitments grew and it became increasingly difficult to assign non-operational duties to sick or injured members. Consequently, there was a more rigorous enforcement of the “universality of service” principle, which requires that each member must be continually available for service in any geographical region where the Canadian Forces are deployed, and each must maintain a reasonable level of physical fitness and be able to bear arms in any military operation authorized by the government. As a result, members who previously would have remained in the services were being released on medical grounds. Their careers unexpectedly shortened, they often found themselves unable to qualify for a disability pension, for career retraining, or for income support at a level sufficient to meet their needs and those of their families. As one veteran put it: “You served your country and lost something in the service of your country. The military treats you like used goods and throws you out because you're unfit to serve. Then DVA treats you as a malingerer or a cheat.”¹⁴⁹ Some reported waiting for more than four years before obtaining a meagre disability pension.

Eventually, members of the military community did what they had done so many times before to articulate their concerns and press for better support and recognition – they organized. In 1986 a group of Canadians who had served on United Nations peacekeeping missions met to form an association for those with similar service. The result was the Canadian Association of Veterans in United Nations Peacekeeping, which was incorporated in 1992. Its original focus was on the “new veterans” of United Nations peacekeeping, but its membership was later expanded to include veterans of the Gulf War and of other non-U.N. peacekeeping or monitoring missions sanctioned by Canada. The association's goals include commemorating fallen comrades who had lost their lives in the defence of freedom; raising public awareness of Canada's peacekeeping tradition and related issues; supporting charitable activities that are compatible with their purposes; and representing the interests of peacekeepers.

In 1991 another veterans' organization for peacekeepers was formed – the Canadian Peacekeeping Veterans Association (incorporated in 1993). Its mission is “to assist veterans and their families re-establish to civilian society.” Among its leading interests are improving the quality of life and well-being of veterans and their families, advising and educating Canadian society on the concerns of veterans and their families, ensuring that they are appropriately recognized, and assisting them in “regaining their rightful place in society.”

The Gulf War Veterans Association of Canada was formed in 1993, primarily to study the health problems being reported by fellow veterans from that theatre. The association was reorganized on a broader basis in 1997 and incorporated in 2001, to “ensure that Gulf War Veterans are not forgotten and that their concerns are treated with the dignity and respect due to men and women who put their lives on the line for their country.” The other aims of this reorganized association

were to advance veterans' rights, to develop a network of support for Gulf War veterans and their families, and to lobby the government to ensure proper health care for all military personnel placed in harm's way.

These organizations followed in the footsteps of the military spouses, mostly wives, who had formed a number of support networks during the 1980s and 1990s. One of the better known was the Organization of Spouses of Military Members. It was begun in 1984 by five Canadian Forces wives – Mary Anne Jablonski, Susan Kerr, Lucie Laliberté, Gayle Siford, and Leslie Taylor – whose husbands had been posted to CFB Penhold, Alberta. The founding president of the organization, which was incorporated nationally in 1989, was Lucie Laliberté. One of the group's original aims was to obtain a dental care plan for civilian members of military families. But lobbying for the benefit was deemed too controversial by Canada's military leadership, which barred the group from meeting on National Defence property.

In 1994 the association's concerns found public voice in a book that Laliberté co-authored with sociologist Dr Deborah Harrison, entitled *No Life Like It: Military Wives in Canada*.¹⁵⁰ The authors argued that “the unpaid work wives do is necessary to prop up the military organization. It is socially invisible work that keeps the military machine working.” The authors also raised awareness of the family abuse that too often occurs in the military community. “Isolation is a great tool of the abuser,” Laliberté noted, “and the military life provides complete isolation. There are moves every two years, and there is isolation on the base.” The book also pointed out how economically disadvantaged military wives were because of the peripatetic military lifestyle and how devastating their financial distress could be if their marriages end. The association continued to make these points in public forums, eventually becoming a strong and accepted advocate for military spouses and families.

In 1917 the Canadian government had made a solemn commitment to those in uniform that “the maimed and the broken will be protected, the widow and the orphan will be helped and cherished. Duty and decency demand that those who are saving democracy shall not find democracy a house of privilege or a school of poverty and hardship.” This commitment had been reaffirmed on behalf of those who served during the Second World War and in Korea. By the 1990s members of the Canadian Forces and those lobbying on their behalf had cause to ask why this commitment did not seem to apply to them. Their questions led to a lengthy and critical examination of the support the nation gives to those who serve it in uniform.

B. Diagnosis: Critical

In 1997 the Department of National Defence produced two reports that addressed the complaints of members of the forces who were concerned about the way that injured or medically released personnel were being treated. The first, *A Study of the Treatment of Members Released from the CF on Medical Grounds*, was completed by J.W. Stow.¹⁵¹ The second, *Care of Injured Personnel and Their Families Review: A Final Report*, was produced by Lieutenant Colonel R.G. MacLellan.¹⁵²

The Stow Report was based on the responses to a survey of 648 Regular Force members who were medically released between 1992 and 1996. It found that there was “significant dissatisfaction with the adequacy and quality of information, assistance and support provided to members throughout the release process; the length and complexity of the disability pension claim process; and the adequacy of financial compensation and benefits provided by existing pension and insurance schemes.”

The report found that 69 percent of respondents thought that the medical release process was unfair. While 80 percent had applied for a disability pension under the *Pension Act*, only 44 percent had received one to that date; 55 percent reported that their medical condition had prevented them from finding a new occupation; 41 percent reported having an income of between 50 and 74 percent of their salary at release; 29 percent reported an income that was less than half of that enjoyed at release; and 54 percent reported that their standard of living was significantly worse after their release. Generally speaking, the most junior members faced the worst prospects following release.

Stow offered numerous observations and fifteen specific recommendations, which were designed to improve the treatment of medically released personnel and to address their belief that the existing system had failed them. He suggested that injured members should have the opportunity to make submissions to the Career Review Boards that were making decisions about possible medical releases. He argued that the forces “must continue to examine the validity of policies such as the so-called ‘universality of service principle’ which is the basis for permitting the compulsory release of fully trained, skilled and experienced trades-persons” on medical grounds. He noted that “CF Medical, personnel and administrative authorities must take responsibility for ensuring that members who are to be released on medical grounds are properly and individually assisted and guided through the process of transition to civilian life.” And he argued that efforts must be made in many cases to “provide a source of income to bridge the gap between one career and the next.”

The report observed that “for those with less than 10 years of service (which comprise 27% of the members released for medical reasons since 1992), unless they are totally disabled and therefore qualify for CPP [Canada Pension Plan] and SISIP [Service Income Security Insurance Plan] benefits, the *Pension Act* provides the only other source of disability compensation ... Unfortunately ... the amounts awarded may be quite small unless the disability is severe, and bear little relationship to the loss of income and continuing financial needs of the member.”

With this observation in mind, Stow recommended that studies be done to assess the relevance of the *Pension Act*, the Service Income Security Insurance Plan, and related compensation measures. In recommending a thorough review and re-evaluation of the current situation, he put forward two propositions:

- a. When a member suffers illness, injury or death as a result of ... service, the member or the member's survivors should receive compensation for pain, suffering and resulting disability; to pay for associated and continuing medical treatment, therapy, drugs and equipment; to pay the cost of re-training and search for a civilian occupation; and to compensate for lost income.
- b. Members of the CF who suffer illness or injury which is not the result of service in the CF per se, but who must be released because of the occupational health standards of the CF, should be compensated for their premature release; insured for lost wages until such time as they are re-employed; and insured for the cost of re-training and search for civilian re-employment.¹⁵³

In making this case, Stow placed his findings in the context of broader concerns about the ongoing viability and effectiveness of the Canadian Forces:

In a country which relies upon the voluntary recruitment of its youth to fill its military ranks, potential recruits may well reconsider the choice of a physically challenging and potentially hazardous military occupation if it becomes evident to them that an injury or illness may result in the termination of one's career with little or no compensation, or adequate training and preparation for a return to civilian employment. Similarly, serving members are likely to be much less eager to place themselves in harm's way if they perceive that a resulting injury, disability, and release from the CF does not automatically result in immediate and adequate compensation, but often to a lengthy bureaucratic process which places the onus on the member to prove his claim for compensation that may fall well short of making up for the dual loss of both career and good health. In the implicit psychological contract between service members and the CF, members expect that if they sustain illness or injury in the line of duty, they will somehow be taken care of. If the CF is to retain and reinforce the loyalty and commitment of its members, and attract new recruits, CF policies must strive to ensure that such expectations are well met.¹⁵⁴

Stow's findings were confirmed and amplified by those of MacLellan's *Care of Injured Personnel and Their Families Review: A Final Report*. This review was launched by Vice-Admiral Larry Murray, Acting Chief of the Defence Staff, in the wake of widespread negative publicity about the treatment of injured members of the forces. Those conducting the review included members of Veterans Affairs Canada and the Royal Canadian Legion. Based on extensive surveys and interviews with 392 injured Regular or Reserve Force members or their families, the team reported:

The CF/DND has failed in its mission to provide adequate care to its injured personnel and their families post-injury. Moreover, the personal situations discovered ... were not isolated ones but ones which, together, formed only the tip of a much larger iceberg. This iceberg is made up of feelings of disillusionment, discontent and despair

which then engender mistrust, animosity and feelings of abandonment military members and their families experience. This is expressed towards a system which has socialized them to believe that when they needed it, the military would look after them, would not forget them.¹⁵⁵

Regular Force members expressed a high degree of dissatisfaction with many aspects of their medical care and with the levels of general support provided to them following injury. In particular, they experienced a considerable sense of disengagement on the part of their chain of command; they feared that following their injury, their superiors would take adverse action about their career advancement, treating them as malingerers, and many of them had these expectations confirmed. Reserve Force members reported significant problems in gaining access to appropriate medical care and support. They were especially concerned about who would support them and which organizations would pay for their treatment. Obtaining appropriate compensation for lost civilian income was also a major area of concern.

The families of those injured or killed spoke of a sense of abandonment. In the latter case, they “consistently ... told of how once the public functions of military honours were completed, they could no longer expect to obtain information or assistance. They felt that in many instances they were treated with disdain by the military, after the initial response to the accident.” Members of all groups described heartbreaking difficulties in getting information, support, or responsive service from those whose job it was to deliver the required services, especially National Defence, the Canadian Forces, Veterans Affairs Canada, and the Service Income Security Insurance Plan.

The need for ready income support following an accident was among the most pressing needs reported. “Disabled personnel and families of deceased have a need for some sort of income and it can’t be delayed for too long. Extended delays between the last pay cheque from the Canadian Forces, at release, and the first issue of disability benefits is unacceptable,” MacLellan wrote. “Many respondents told us about desperate situations and dire financial hardships while waiting for pension benefits to begin. In many cases, Social Welfare and/or the financial assistance from family and friends have been their only source of income and support.”¹⁵⁶

MacLellan made 78 recommendations, building on the belief that “the CF/DND is capable of positive change ... [and] that it really does care for its injured personnel and their families.”

The measures he recommended included the creation of a “one-stop” centre where the injured and their families could be helped in obtaining information, services, and benefits; this centre would be staffed by appropriate National Defence, Canadian Forces, and Veterans Affairs personnel. He suggested numerous reforms regarding the medical treatment, support, and care of injured personnel, including mandatory psychological assessments for those seriously injured and medical follow-ups on the impact of injuries, even after release. He recommended that families be informed in person and without delay when loved ones were injured. He also advised that families be provided with counselling following the injury or death of a member, and that presentation of the Memorial Crosses be made in person “by an individual whose status is in keeping with the significance of the award.”¹⁵⁷

Looking towards the longer term, MacLellan recommended a review of *Pension Act* provisions with an eye to improving benefits for those not serving in Special Duty Areas abroad, and a re-orientation of Veterans Affairs' mandate to include veterans of operations in Special Duty Areas. The need to finance widows' efforts to upgrade skills and earning potential was another issue he identified, as was the need for the children of Canadian Forces members who were killed on duty to receive educational scholarships. He recommended that those injured on duty and subsequently released be provided with retraining options and appropriate financial compensation to ease their transition to civilian life. The compensation should be equal to the salary earned when the member left the forces. In the case of Reserve Force members, the financial compensation offered should take the loss of civilian income into account.

With these two reports clearly pointing towards major shortcomings in the Canadian Forces' conditions of service and in the way that existing programs and policies fell short in supporting members who were injured or disabled, the Minister of National Defence asked the House of Commons Standing Committee on National Defence and Veterans Affairs (SCONDVA) to review the issue of social and economic challenges facing members of the Canadian Forces and their families. SCONDVA held meetings throughout the autumn of 1997 and the spring of 1998, visiting military bases across Canada and travelling to Bosnia and Germany to interview personnel there. The members of the committee heard testimony from a wide range of people and organizations: senior military leaders; National Defence, Veterans Affairs, and Treasury Board officials; the Royal Canadian Legion; the Canadian Association of Veterans in United Nations Peacekeeping; the Canadian Peacekeeping Veterans Association; the Federation of Military and United Services Institutes of Canada; academic experts, and a host of over 475 individuals, many of them serving or retired members of the Canadian Forces. The committee's report, *Moving Forward: A Strategic Plan for Quality of Life Improvements in the Canadian Forces*, was tabled in October 1998.

The report noted that military personnel serving in the 1990s had been faced with "economic hardship; inadequate housing; an increase in high-risk operations with equipment that was old and ill-suited ...; career stagnation; increased time away from home; multiple moves on short notice; and a perceived lack of public recognition for their efforts."¹⁵⁸ The committee members reported that they "could not have envisioned the degree of frustration and desperation expressed by countless witnesses." "Often," they said, "the stories we heard proved heart-wrenching, making us wonder how things could have gone so obviously wrong."¹⁵⁹ The committee also reached the conclusion "that *there really is no equivalent profession to that of service in the Forces*. Whatever programs we put in place, or adjustments we make, they must clearly reflect this reality."

The report, which contained 89 recommendations, established a comprehensive and compassionate forward-looking agenda that is still being pursued by the government. Its approach was grounded in five general principles that address the theme of a social contract between military personnel and the government and citizens they serve:

During our hearings it was suggested that we need to make explicit an unwritten “social contract” which has traditionally existed between the military and government, and by extension, with the public at large. The contract, so the argument goes, is an implicit one – guaranteeing military members adequate recognition and benefit for the sacrifices they make and the service they render. Unfortunately, attempts to articulate exactly what should be entailed in such a specific statement of intent were not easily come by ... Rather than ruminate in the realm of the abstract, we have concluded that our **national** commitment – *in essence a moral commitment* – to the Canadian Forces must be based on the following concrete principles:

- | That the members of the Canadian Forces are fairly and equitably compensated for the services they perform and the skills they exercise in performance of their many duties. And, that such compensation properly take into account the unique nature of military service.

- | That all members and their families are provided with ready access to suitable and affordable accommodation. Accommodation provided must conform to modern standards and the reasonable expectations of those living in today’s society.

- | That military personnel and their families be provided with access to a full and adequate range of support services, offered in both official languages, that will ensure their financial, physical and spiritual well-being.

- | That suitable recognition, care and compensation be provided to veterans and those injured in the service of Canada. Here, the guiding principle must always be compassion.

- | That members be assured of reasonable career progression and that their service be treated with dignity and respect. In addition, they must be provided with appropriate equipment and kit commensurate with their tasking.¹⁶⁰

Release of the SCONDVA report in October 1998 unleashed a host of initiatives aimed at improving the quality of life of members of the Canadian Forces and their families, including efforts to better address the needs of veterans. The report also validated the need to continue or expand a number of support programs that had been instituted previously. The government’s overall response to the SCONDVA report was punctuated by responses to two additional reports that rounded out the diagnosis of ills facing Canadian Forces members and veterans: one from the Croatia Board of Inquiry and the second from the final phase of Veterans Affairs’ *Review of Veterans’ Care Needs*.

Members of the Canadian Forces have been serving in the Balkans since 1991. In August 1999 the Department of National Defence established a Croatia Board of Inquiry to consider whether Canadian soldiers serving as peacekeepers in Croatia between 1993 and 1995 had been exposed to environmental toxins that posed a health hazard. The inquiry was established in the wake of adverse publicity on the subject and reports of poor treatment experienced by those who became ill following a tour of duty in the Balkans. As well as reporting on this issue, the board decided also to “examine a broad range of subjects that influence the health and welfare of Canadian soldiers.”¹⁶¹

While the Board of Inquiry’s 26 January 2000 report did not conclusively link Croatia veterans’ illnesses to soil-based toxins that had previously been identified as a possible cause of sickness, it did find that “many Canadian soldiers went to Croatia healthy and came back sick, or became sick after they returned.” The members of the board added: “In our view, they are sick as a result of their service, and regardless of the nature or specific causes of their illnesses, Canada has an obligation to provide for their support and care.”¹⁶² However, they considered that operational stress was a more likely cause of the illnesses reported:

Stress quickly emerged as an issue as we listened to soldiers ... They recounted desperate efforts to build defensive structures ... frequent shelling and small arms fire, the constant threats posed by landmines, the horrors of recovering bodies of victims of ethnic cleansing and weeks of living and operating in dire circumstances without a break ... The Board has been inexorably drawn to the conclusion that the health problems many have suffered relate to the horrific experiences and conditions experienced in theatre. The Board cannot ignore the link between service in Croatia and the problems we observed. Given the intensity and ferocity of modern conflict, it is essential to recognize and address the effects of exposure to stress.¹⁶³

Regrettably, the Board of Inquiry found that support and care had been hard to come by for those whose service had encompassed such horrific experiences. It described soldiers’ efforts to obtain assistance from an “unresponsive” system. It chronicled their reluctance to testify, “for fear of exposing their health problems and risking release because of the ‘Universality of Service’ principle.” And it reacted vehemently to soldiers’ stories of indifferent or even hostile responses to cries for help:

We were appalled to hear of the frustrations and humiliating treatment experienced by injured soldiers. Too many of them ran into difficulty trying to get the care, consideration and compensation they deserve. The treatment received by many of the injured that came to our attention has been, at best, arbitrary and certainly inadequate. This situation is a disgrace and cannot be allowed to continue. It must be emphasized that these soldiers suffered injuries in the service of their country.¹⁶⁴

The Board of Inquiry produced 33 recommendations designed to remedy some of the most egregious shortcomings identified during its hearings. Better efforts were required to protect the health and safety of deployed personnel. The need to record the circumstances and nature of soldiers' exposure to any environmental toxins or hazards was stressed, as was the need for those with medically unexplained symptoms to receive proper treatment. In-theatre critical incident stress debriefing was identified as essential. Equally important was a change of attitude within the Canadian Forces towards mental health issues.

With regard to the "universality of service" principle, the Board of Inquiry suggested a "standard and flexible process for all military occupations to accommodate personnel who can still be gainfully employed;" those who could not still be employed should go through a "seamless and continuous 'Fit for Release' process," whether they belonged to the Regular or Reserve Force. A number of recommendations were made on the need for better coordination and information sharing between the Canadian Forces/National Defence, Veterans Affairs Canada, and the Service Income Security Insurance Plan, all with the aim of "reducing the gap between the end of military service and the start of [disability] benefits." In the same vein, enhanced cooperation with veterans' organizations and those with an interest in peacekeeping veterans' issues was proposed.¹⁶⁵ Finally, the Board of Inquiry advocated "a comprehensive review and modernization, to at least current Canadian industry standards, of all relevant pension, compensation and benefits plans applicable to CF members."¹⁶⁶ These findings, reflecting a predominantly Canadian Forces perspective, resonated in a complementary set of findings produced by Veterans Affairs Canada.

C. Sir, Am I a Veteran?¹⁶⁷

In January 1999, Veterans Affairs Canada launched the third phase of its *Review of Veterans' Care Needs* (RVCN III), under the leadership of Bob Atkinson. Its mandate was "to conduct a study of the issues related to the care and support of CF clients and families, and to determine whether existing VAC programs and services are effective in meeting the needs of this increasing clientele."¹⁶⁷ The review team consulted widely with VAC staff, veterans' organizations, and other stakeholders, conducted twelve focus groups with Canadian Forces clients or their families, reviewed over 700 client files, analysed the results of a mail-out survey that gained responses from nearly 2,000 Canadian Forces veterans and clients, visited six Canadian Forces bases to gain a National Defence perspective, and consulted relevant literature and sources of expertise on a range of issues. Its final report was ready in March 2000.

The *Review of Veterans' Care Needs*, Phase III, found that Veterans Affairs' client base from the Canadian Forces was growing at an annual rate of 9 percent, doubling between March 1990 and March 1999 to reach 26,600 individuals. One-third of them had been medically released. Their average age was 39 years. More than 60 percent had served at least once in a Special Duty Area. About three-quarters of these clients were married, and 40 percent had dependent children. Many reported modest formal educational achievements: 21 percent had not completed high school, while a further 24 percent had no formal education beyond a high school diploma. All but 15 percent had

found employment after leaving the Canadian Forces. This client group experienced more long-term health problems than a comparable group in the general population. The vast majority (83 percent) reported pain that interfered with the activities of daily living. More than half (57 percent) had back problems, and nearly half (49 percent) reported arthritis or rheumatism. Non-food allergies and high blood pressure affected the health of about one-quarter of this group. About 25 percent reported symptoms that were consistent with, or that nearly met, the criteria for a diagnosis of post-traumatic stress disorder (PTSD). A slightly larger number (28 percent) reported symptoms of major depression. By way of comparison, major depression is experienced by only 2-3 percent of the general male population.¹⁶⁸

The *Review of Veterans' Care Needs* painted the picture of a Veterans Affairs organization that focused its energies on an established and well-known war veteran clientele at the expense of its wider mandate regarding “the care, treatment, training, or re-establishment in civil life, of *any* person who served in the naval, military, or air forces ... and ... the care of the dependents of any such person.” While this mandate clearly included retiring members of the Canadian Forces, they were not listed among the VAC clients who were “eligible for full service.” According to the report, in some VAC districts, the “staff have been directed to spend little time on the CF client because, in their words, ‘there is nothing we can do for them except take their pension application.’”¹⁶⁹

The differences in treatment experienced by Canadian Forces clients was often explained through the lens of “veteran” status. As the paper *Sir, Am I a Veteran?* put it:

At Veterans Affairs Canada, veterans enjoy a privileged status. They are regarded as heroes and are, in effect, put on a pedestal ... On the other hand, members of the Canadian Forces are not regarded as veterans with the result that they are not afforded the hero status conveyed through the veteran designation ... From the program and benefit perspective, there is no doubt that VAC looks after wartime veterans better than it does today’s members of the Canadian Forces. There is a perception that weak pension claims from World War II veterans are more likely to be ruled on favourably than those submitted by Canadian Forces members. CF clients feel that they have to provide “proof beyond a reasonable doubt” in submitting pension claims, instead of being afforded the “benefit of the doubt.”¹⁷⁰

Their most fundamental observation was perhaps that “the Government of Canada’s responsibility to CF personnel and their families” needed “to be confirmed,” as did Veterans Affairs’ obligation to extend them the full benefit of its mandate of care. This was seen as a critical stumbling block, in both policy and program delivery, to offering better services and benefits to Canadian Forces clients. The report also noted that a lack of clarity about the roles of various organizations was a major impediment: “The current range of service providers (e.g. the Service Income Security Insurance Plan (SISIP), Human Resources Development Canada, DND, Canada Pension Plan, provincial governments, local community resources and VAC itself), results in a lack of continuity of care for clients. For example, clients may have care plans from both the military and a civilian physician with no coordination. Roles need to be clarified.”¹⁷¹

The report yielded 28 key findings. It argued that members of the Canadian Forces needed to be better recognized. Veterans Affairs' three-tiered system of benefits and services reserved the best support for war veterans, and it met the needs of those who had served in Special Duty Areas better than the needs of other serving and former members of the Canadian Forces. This was described as unacceptable. Equally problematic were many aspects of the disability pension. The application process was described as confusing and unduly complex, and the tools and processes used to calculate pension entitlements were found to be outdated and illogical. Too many levels of decision making were involved, and the redress system was unsatisfactory.

Perhaps most importantly, the review found that the pension process was an overused and inappropriate tool with which to address many clients' needs: "The disability pension process is currently the sole gateway to VAC benefits and services for CF clients. There are many instances where clients' needs go unmet as they await decision on a pension application. There are also cases where the client neither wants nor needs the compensation provided by a disability pension payment, but rather needs ... rehabilitation or skills upgrading."¹⁷²

The *Review of Veterans' Care Needs* team also found that whatever their needs on release, Canadian Forces personnel and their families lacked appropriate access to transitional services to help them adjust to civilian life. Once they left the military community, they often discovered gaps in the coverage provided by provincial health-care programs and sometimes could not obtain needed health services. Finally, the review found that Veterans Affairs' own staff needed to be better equipped to both communicate with and serve Canadian Forces clients.

D. Healing Our Soldiers and Their Families

On 25 March 1999, Minister of National Defence Art Eggleton and Minister of Veterans Affairs Fred Mifflin delivered a comprehensive government response to the SCONDVA report on quality of life in the Canadian Forces. Fifty-nine of the committee's 89 recommendations were accepted as written. Twenty-four others were accepted in principle but were to be addressed in a manner other than that recommended by the Commons committee. The underlying causes of the remaining six recommendations would be addressed, but by means other than those originally recommended.¹⁷³ The response anticipated spending nearly \$2.4 billion over a five-year period. The primary responsibility for addressing shortcomings identified by SCONDVA fell to the Department of National Defence, which devoted most of the government's Quality of Life expenditures to pay increases for the Canadian Forces.

During the period since SCONDVA issued its Quality of Life strategic plan, the government has taken numerous other measures aimed at addressing needs of Canadian Forces veterans and their families that were identified through other means. Taken as a whole, these measures have substantially improved Canada's support to, and recognition of, this dedicated group of citizens. These measures constituted an extensive and complex work agenda for Larry Murray, Deputy Minister of Veterans Affairs, Verna Bruce, the Associate Deputy Minister, and the entire Veterans Affairs team and partnership network.

1. Consultation, Coordination, and Communications

Even as SCONDVA was launching its study of conditions facing the members and veterans of the Canadian Forces and their families, the government was working to improve understanding and enhance coordination between the Department of National Defence and Veterans Affairs Canada, a need that was frequently identified in the studies of the period.

In 1997 departmental liaison officer positions were established in both National Defence and Veterans Affairs. The same year, a DND-VAC Improvement Team reported on various issues, including the benefit and service needs of Canadian Forces clients, the development of protocols for assessing post-traumatic stress disorder, and ways to enhance interdepartmental communications. Their work was taken up by two different groups within Veterans Affairs: the Veterans Affairs – Canadian Forces Project, which was launched in June 1998; and the Continuum of Service Project, which commenced work in April 2000. While the former project was mandated to consider ways to improve service to Canadian Forces clients and their families within existing frameworks, the Continuum of Service Project team was directed to look into the future, helping to develop options for a modernized approach to this client group's needs. Particularly welcome among the Veterans Affairs Canada – Canadian Forces Project's many initiatives was the development of a series of publications and videos designed to better inform Canadian Forces members and former members about Veterans Affairs services and benefits. Information and training was also provided to Veterans Affairs staff to help them better understand Canadian Forces clients and their needs.

In February 1999 the VAC-DND Steering Committee was created. Co-chaired by Brian Ferguson, VAC's Assistant Deputy Minister Veterans Services, and Lieutenant General Christian Couture, DND's Assistant Deputy Minister (Human Resources Military), the committee was established to deepen liaison between the two departments and offer strategic guidance on meeting their respective responsibilities towards members of the Canadian Forces who were making the transition to civilian life.

Another important step towards understanding clients' needs better came in July 2000 with the establishment of the Veterans Affairs Canada – Canadian Forces Advisory Council (VAC-CFAC). Its role is to “provide guidance, expert advice and make recommendations to VAC management on the development of new or enhancements to existing policies, programs and services to meet the needs of the CF client and their family.”¹⁷⁴ The Advisory Council provides “a forum for discussion on the modernization of VAC programs and services and act[s] as a stimulant for the Department by introducing new ideas and strategies to meet the complex needs of this client group.” Its objectives are to “provide information, expertise and advice to VAC on trends, new ideas and other research identified in literature and research on issues relevant to the Department”; “advise VAC on the strategy for implementation and evaluation of new policies, programs, and models for service delivery that will benefit existing – and future – clients”; “identify issues critical to VAC's existing – and future – CF clients”; and “explore opportunities for partnership and service delivery.” The Advisory Council draws its membership from the ranks of academia, the retired Canadian Forces community, the Service

Income Security Insurance Plan Financial Services, and various federal government departments, including National Defence, Health Canada, Department of Social Development, and the Royal Canadian Mounted Police. Dr Peter Neary, Professor of History and former Dean of the Faculty of Social Science at the University of Western Ontario, is the Advisory Council's chair. Its ranks include representatives from the Army, Navy & Air Force Veterans in Canada, the Royal Canadian Legion, the National Council of Veteran Associations in Canada, the Air Force Association of Canada, the Canadian Association of Veterans in United Nations Peacekeeping, the Canadian Peacekeeping Veterans Association, the Gulf War Veterans Association of Canada, and the Organization of Spouses of Military Members.

As a result of input from all of these groups, the Veterans Affairs Canada Five-Year Strategic Plan, unveiled in June 2001, identified ten strategic priorities, the first of which was to clarify the department's role in relation to Canadian Forces veterans and to improve the quality of service provided to them. The plan highlighted the need to adapt the disability pension process to the needs of Canadian Forces veterans; the need for departmental staff to receive more and better training on this group's special needs; and the need to provide veterans and their families with assistance in making the transition from military to civilian life. In addressing the plan's second strategic priority – a review of commemoration programs – the need to incorporate appropriate recognition of Canada's peacekeeping tradition was also noted.¹⁷⁵

2. Care of the Injured

The SCONDVA report included sixteen recommendations on appropriate care for the injured and for retirees and veterans. One of the government's first responses was to establish in Ottawa the DND/VAC Centre for the Support of Injured and Retired Members and their Families (known as the Centre). In opening the Centre on 17 April 1999 Minister of Veterans Affairs Fred Mifflin said: "Members and their families told us that it was too easy for the injured to become lost in a maze of regulations – and too hard to try to understand the range of benefits offered by separate departments and agencies at different times during their service. With this Centre, there will be a coordinated approach in place to guide members and their families in the right direction. To help fill in the cracks. Smooth the way and provide information. And make the transition from injury to healing, from sickness to health, and from service life to civilian life as easy as possible."¹⁷⁶

The Centre, which is staffed by a team from both National Defence and Veterans Affairs, provides a confidential, non-crisis assistance and referral service for serving military personnel and veterans who are injured or who became ill during service, as well as for their families. It has become the focus of implementation for a number of additional SCONDVA Quality of Life recommendations.

The Centre includes the Casualty Administration Section, which manages a toll-free help line and reviews and adjudicates DND disability compensation requests for Reserve Force members who are injured as a result of service. Similarly, it reviews and adjudicates applications for lump-sum benefits

that are now payable, under the *Military Members Compensation Act*, to Canadian Forces personnel who suffered service-related injuries between 1972 and 2003. The section also verifies service dates for Veterans Affairs Canada staff who are processing disability pension applications under the *Pension Act*, and it takes the lead in numerous administrative areas within the Department of National Defence relating to military casualty and injury policies.

The Casualty Support Section provides a more in-depth service to those who contact the Centre looking for help. Its staff provide information on available services and benefits and give advice on accessing them. They also take action, when required, to expedite difficult or complex cases. This section also administers a short-term contingency fund that provides “aids to daily living” for injured and retired members, and it manages a Family Visitation Fund that helps those who must travel away from isolated postings to receive medical treatment.

The Centre’s Transition Services Section runs a Transition Assistance Program that encourages prospective public and private sector employers to consider the merits of hiring former military personnel. It helps those who were or are being medically released from the Canadian Forces to prepare for job searches, and it attempts to match them with available employment opportunities in its data banks. The Public Service Commission employs the Transition Assistance Program data bank as a referral inventory for employment in the Public Service. The section also coordinates both the provision of vocational retraining and related family support to qualified personnel who are being medically released.

The Centre serves as the focal point for a national peer-support program, which was started in 2001 to aid those with operational stress injuries. These could include persistent psychological conditions such as anxiety, depression or post-traumatic stress disorder, experienced as a result of operational duty in the Canadian Forces. The Operational Stress Injury Social Support Program network, a joint VAC/DND initiative, involves more than five hundred peers, most commonly drawn from those who served in Bosnia, Croatia, Cyprus, Kosovo, or during the Gulf War. In addition to offering support to individuals and their families, the network is playing a role in developing educational material on operational stress injuries and in helping to generate a change of attitude within the Canadian Forces towards those whose injuries are “invisible.”

Finally, the Centre’s new Pastoral Outreach Program, launched in 2003, aims to provide retired service members and their immediate families with support in dealing with “end of life” issues. This is to be done through a national network of accredited retired military chaplains and civilian clergy of all faiths, which is currently being established. Those in this section also manage the National Military Cemetery, established in Ottawa in 2001, in consultation with the civilian site operator.

Numerous other government initiatives of the period address the needs of those injured in the course of military service. Until 1999, the definition of “total disability” under the Service Income Security Insurance Plan (SISIP) was more restrictive than that in the Public Service’s and Royal Canadian Mounted Police’s Long Term Disability policies. As a result, many members of the Canadian Forces who were being medically released were not eligible for SISIP Long Term Disability benefits and the

vocational rehabilitation program accompanying them. This issue had been raised during the SCONDVA hearings that led to the Quality of Life report. In 1999 the definition of “disability” used by SISIP was modified so that many of the medically released Canadian Forces personnel would qualify for at least two years’ Long Term Disability benefits, including the vocational rehabilitation program. At the same time, Treasury Board agreed that it would fully fund Long Term Disability coverage for Primary Reserve Force personnel. Most had failed to purchase coverage following the 1991 changes that invited their voluntary participation, and they were thus at risk of financial hardship in the event of injury.

In October 2000 amendments were made to the *Pension Act* authorizing Veterans Affairs Canada to pay disability pensions to serving members of the Canadian Forces who had disabilities arising from service-related injuries sustained in non-Special Duty Areas, including Canada. The previous requirement that members await release before starting to collect benefits was removed. While this initiative was welcomed by those who advocated the more immediate recognition of those injured while serving in the Canadian Forces, it was not universally greeted by those in uniform, especially where the pension was for psychological injury. Some could not understand why a fellow soldier or shipmate who was injured (and therefore might be presumed to be a less effective member of the Canadian Forces) should be “paid more” than one who was not, for “doing the same job.” Many of these complaints were grounded in the common misbelief that disability pensions are a form of income replacement, when in fact they are intended to provide compensation for reductions in the quality, and sometimes the quantity, of life experienced by the disabled.

The challenges associated with this situation were outlined by André Marin, ombudsman to the Department of National Defence and the Canadian Forces, in his December 2002 follow-up report to the *Review of DND/CF Actions on Operational Stress Injuries*:

In the effort to treat stress-injured members properly, the system cannot afford to create situations where those who are not injured seem to be treated unfairly. First, inequality of any kind is a source of discontent and can lead to morale problems. Second, it increases the stigma already associated with members suffering from stress-related injuries ... [The] right to receive a VAC disability pension while still serving created even more inequity in the eyes of many soldiers ... In reality not a single patient we have talked to or any member of their family would ever choose to live the life of a PTSD victim ... Nevertheless, the perception of unfairness must be dealt with.¹⁷⁷

National Defence has established a number of Post-Deployment Regional Health Centres to ensure the provision of appropriate medical care to members of the forces who are returning from deployment abroad. Veterans Affairs is permitted to refer those who served in Special Duty Areas, such as the Persian Gulf or Croatia, to these centres for diagnostic work associated with their applications for a disability pension. The centres may also assist in the development of treatment plans for their disabilities.

In addition, National Defence has established a number of Operational Trauma and Stress Support Centres (OTSSCs). The first opened in Ottawa in 1998. Four more were subsequently opened in Halifax, N.S., Valcartier, P.Q., Edmonton, Alta., and Esquimalt, B.C., to expand the capacity of the Department of National Defence's mental health services. They are staffed by specialists in the delivery of care to personnel suffering from negative psychological, emotional, or spiritual reactions to military operations. In 2001 a new Ste. Anne's National Operational Stress Injury (OSI) Centre was created within Veterans Affairs' remaining hospital in Ste. Anne de Bellevue. The facility provides mental health care and supporting services to those whose trauma is the result of military service. It is staffed by a team of psychiatrists, psychologists, physicians, social workers, nurses, and other professionals who use an interdisciplinary approach to treat patients (and sometimes their family members as well) for conditions such as PTSD.

On 3 July 2002, Minister of National Defence John McCallum and Minister of Veterans Affairs Rey Pagtakhan jointly announced that DND's five OTSSC sites, the Ste. Anne's Centre, and a series of new mental health clinics to be opened at Veterans Affairs priority-access bed long-term care sites, would form a Centres of Excellence network aimed at improving the accessibility of mental health clinical services for both serving and retired members of the Canadian Forces.

In association with these measures, Veterans Affairs Canada made a series of changes in the way it handles PTSD and other psychiatric illnesses, including the development of new Pension and Health Care protocols designed to ensure better support to those suffering from mental illnesses. In 2001 the department and the Canadian Forces also launched a toll-free assistance service to offer crisis support to former and serving members of the forces and their families who need to obtain professional counselling.

The need for these changes and for improvements in the care extended to those with psychiatric illnesses was highlighted by the results of the Canadian Forces Supplement to the "Canadian Community Health Survey Version 1.2" (CCHS) conducted by Statistics Canada from May to December 2002. The CCHS measured the reporting of symptoms consistent with the diagnosis of depression, alcohol dependence, panic disorder, social phobia, and eating troubles. This last category correlated with the diagnosable conditions of anorexia nervosa and bulimia. Conditions measured in the parent CCHS that were not measured in the Canadian Forces Supplement included agoraphobia and mania. The supplement also measured the prevalence of PTSD and generalized anxiety disorder. The goal of the supplement was to determine the burden of suffering of mental health illness and injury in the Canadian Forces as well as to look at wellness measures and service utilization.

The results of the Canadian Forces Supplement were released in September 2003. They demonstrated that 15.1 percent of the Regular Force and 12.7 percent of the Reserve Force reported symptoms consistent with a diagnosis of one or more of the mental illnesses measured during the year preceding the survey. The mental illness most commonly reported in the Regular Force was depression (7.6 percent), followed by alcohol dependence (4.2 percent) and social phobia (3.6 percent). PTSD

was the fourth most common mental illness and, not surprisingly, its occurrence correlated with the total number of deployed missions in which an individual had taken part. Members of the Regular Force who had been deployed three or more times prior to taking the survey reported a lifetime PTSD prevalence of 10.3 percent. The rate of depression was not correlated with the number of past deployments. Experiencing less than twelve months between deployments was found to correlate with increased risk for having experienced symptoms consistent with one or more of the measured mental illnesses during a service member's lifetime.

While members of the Regular Force showed more mental illness in many of the categories studied than their counterparts serving in the Reserve Force did, they also showed improved access to care and satisfaction with it. In general, members of the forces reported having a greater percentage of needs met in relation to mental health services than was reported by civilians in the parent CCHS. Regrettably, only 24.5 percent of Regular Force members who reported having symptoms consistent with suffering from one or more of the mental illnesses measured in the survey felt that they had had their needs met. Significant improvement is required and is being addressed through a major Canadian Forces Health Care Reform Project, referred to as Project Rx2000.¹⁷⁸

Working in partnership, the Department of National Defence and Veterans Affairs Canada took a number of steps to address the serious health concerns expressed by Canadian Forces personnel who had served in the Gulf War and in the former Yugoslavia. National Defence established a Gulf War Registry in January 1995. This was closed in 1998 after 213 Gulf War veterans had added their names to the list and filled out a questionnaire detailing their symptoms and exposure. A Gulf War Clinic was operated in Ottawa from April 1995 until December 1997, during which 104 veterans were seen. The clinic took a history of each veteran and conducted a physical examination in sessions that were booked for an entire day but averaged three hours. This initial assessment was followed by a two-week admission to hospital for veterans who lived outside the National Capital Region. (This was to enable additional specialist consultations and diagnostic tests to be done more easily.) These evaluations were arguably the most thorough and intensive ever conducted on a veteran population. Diagnoses and treatment plans were developed and were conveyed to the referring physicians. Most patients were seen on at least one further occasion after their discharge in order to monitor their progress.

In 1998 National Defence set up a number of Post-Deployment Regional Health Centres at bases across Canada. These centres consisted of specialists in internal medicine who had expertise in post-deployment health issues. The centres were established when Canadian Forces specialists recognized that illnesses seen in Gulf War veterans were the same as those seen in veterans from all Canadian deployments. A Memorandum of Understanding was signed between the Department of National Defence and Veterans Affairs Canada in 1998 that allowed Canadian veterans from any deployment to be assessed by these specialists. The specialists may also assist in the development of treatment plans following diagnosis.

In 1997 Canada conducted an anonymous mail-out health survey of its Gulf War veterans (the Goss Gilroy Study), which was released in June 1998. The study examined 3,113 Gulf War veterans as well as 3,439 veterans who had not taken part in the Gulf War. The latter acted as a control group. Gulf War veterans reported more chronic fatigue, cognitive dysfunction, multiple chemical sensitivity, major depression, post-traumatic stress disorder, anxiety, fibromyalgia, and respiratory diseases (bronchitis and asthma together) than the control group. They had significantly more symptoms of ill health, a higher prevalence of days of reduced activity, a higher use of non-prescription drugs, and a higher reporting of life as “stressful.”

In February 2000, National Defence and Veterans Affairs agreed to cover the cost of depleted-uranium testing for former and serving members of the Canadian Forces who wished to have the tests. The tests are conducted by independent laboratories and have evolved to take account of available technologies. To date, all tests have returned results that are within the normal range established in agreed testing protocols.

In addition, Veterans Affairs instituted ongoing monitoring of research on the subject of Gulf War illnesses. Access to a disability pension under the *Pension Act* does not require the recognition of this or any other syndrome, or a precise cause of illness. Canadian veterans are eligible for a disability pension for any illness that was incurred during service in a Special Duty Area. However, emerging information can improve understanding of the cause and effect of disabling conditions, assisting physicians in providing the required treatment. Recent studies of the health of United States veterans of the Gulf War has identified an incidence of ALS, or Lou Gehrig’s disease, that is more than double the norm. ALS is a rare and fatal condition that destroys nerve cells in the brain and spinal cord.¹⁷⁹ As a result of the studies, the United States Department of Veterans Affairs has granted disability coverage to about forty veterans with ALS. To date 25 Canadian veterans have been considered for a pension based on ALS and 1 application has been approved.

The 1998 SCONDVA report endorsed existing *Pension Act* provisions that provide disability coverage on the basis of the insurance principle to members of the Canadian Forces serving abroad in Special Duty Areas. This extensive coverage, analogous to that provided to Canadians serving in theatres of war during 1939-45 and 1950-53, was considered appropriate in view of the heightened level of danger associated with peacemaking, peacekeeping, and peacebuilding operations abroad. SCONDVA noted, however, that during some domestic operations (for instance, ice storms) members of the forces may also face a heightened risk of injury or death. In these instances, the parliamentarians recommended that the insurance principle should also come into play, rather than the weaker provisions of the compensation principle, which requires that a clear link be established between injury or death and military service before a disability pension is awarded.

The government’s consideration of this recommendation was affected by the terrorist incidents of 11 September 2001 and the challenges faced in the subsequent international “war on terror,” which highlighted how difficult it can be to draw geographic boundaries around areas of elevated operational risk. As a result, in July 2003 amendments were made to the *Pension Act* and the *Royal Canadian*

Mounted Police Superannuation Act to create a new category of service, Special Duty Operations, in which individuals would be eligible for disability pension coverage under the insurance principle. Special Duty Operations could be designated by either the Minister of National Defence (for the Canadian Forces) or the Solicitor General of Canada (for the RCMP), in consultation with the Minister of Veterans Affairs, to cover operations that are not geographically limited and that expose members to conditions of elevated risk, either inside or outside Canada. Any appropriate operation occurring after 11 September 2001 is eligible for this designation, which complements but does not supplant the designation of Special Duty Areas (which cover geographically limited theatres of elevated risk abroad). It was anticipated that this provision would improve the benefits and extend peace of mind to those engaged in such hazardous operations as search and rescue, disaster relief, and anti-terrorism operations. To date, Special Duty Operations have been designated to cover Canadian Forces personnel who fought forest fires in British Columbia and who assisted in the Hurricane Juan cleanup in Nova Scotia, both during 2003.

In November 2002 the Subcommittee on Veterans Affairs of the Standing Senate Committee on National Security and Defence began to examine the lack of benefits for accidental death and dismemberment available to members of the Canadian Forces. This investigation was prompted by the high-profile case of Major Bruce Henwood. In 1995, while serving in Croatia, Major Henwood lost both legs when an anti-tank mine blew up under his vehicle. He discovered that he would receive no benefit under the Service Income Security Insurance Plan because his income was above the threshold for accidental dismemberment payments and therefore his SISIP benefit was reduced to zero. Thus, while he would be eligible for a disability pension under the *Pension Act*, he would receive no direct compensation for his lost limbs. He filed a grievance through military channels, noting that because of their assured comparability with civilian public servants, officers with ranks of colonel or higher received accidental death and dismemberment insurance that provided for lump sum payments of up to \$250,000. He argued that this created a double standard: "It violates the age-old principle of the military commanders looking after their men first and then themselves. They have taken something more important and fundamental than just an insurance policy perk. They have degraded the leadership ethos. This is a question of ethical conduct that has a direct impact on the morale of the Canadian Forces and challenges the integrity of the generals."¹⁸⁰

The day before senior defence officials were to appear before the Senate committee, the Minister of National Defence, John McCallum, announced that the Service Income Security Insurance Plan would begin to provide members of the Canadian Forces below the rank of colonel with sliding-scale unreduced lump-sum payments of up to \$250,000 for cases of accidental dismemberment in the line of duty. On 19 February 2003 when the Minister appeared before the Senate Committee, he also promised that the scheme would include a degree of retroactive coverage.¹⁸¹ Legislation enacting the proposed measures received royal assent on 19 June 2003. It provided for the payment of a lump-sum benefit for service-related injuries incurred on or after 1 October 1972 and before 13 February 2003. The legislation covered dismemberment (loss of a hand, foot, or thumb and index finger) as well as the total and irrecoverable loss of sight, hearing, or speech as a result of service in the Canadian Forces.

3. Transition to Civilian Life

Numerous studies, including SCNDVA's, have endorsed the benefit of providing releasing members of the Canadian Forces with greater assistance when they are making the transition from military to civilian life. The need for such support is often acute for those whose careers have been unexpectedly cut short by medical discharge.

During February 2001, Veterans Affairs launched the Transition Coordinators Pilot Project, with transition coordinators assigned to seven bases. The coordinators played a bridging role between National Defence and Veterans Affairs, providing information on Veterans Affairs services and benefits and offering assistance to those who were in transition to civilian life and new employment outside the military. The coordinators were especially concerned to help those being released for medical reasons.

As a result of the pilot's success, the joint VAC/DND Release Transition Project was launched. It will see the development of a common suite of transition services designed to meet the needs of members of the Canadian Forces who are being released, and their families. Delivery will be supported by Veterans Affairs client service teams, which established an on-base presence at seventeen locations from coast to coast during 2003. These teams will make their services available to approximately 80 percent of the Regular Force and will begin outreach activities with the Reserve Force. Teams at Canadian Forces bases in Halifax, Valcartier, Borden, and Winnipeg piloted a Veterans Affairs Transition Interview, which is being offered to members of the Regular Force who are being released. The purpose is to review Veterans Affairs benefits and services; to identify any unmet needs which these individuals may have; to refer them to relevant resources and service providers, where appropriate; and to initiate follow-up action if required.

For many, the most pressing transition concern involves finding new employment. Towards this end, the Public Service Commission approved priority hiring status for those injured during service in a Special Duty Area. It is now also acting to extend similar priority to those injured during domestic operations or in pursuit of inherently hazardous duties such as search and rescue. Additional efforts have likewise been made within the Departments of National Defence and Veterans Affairs to improve the access of disabled Canadian Forces members to jobs within their organizations, particularly through Employment Equity hiring initiatives.

The success of this transition counselling and care is to some extent dependent on the staff's access to data on the range of appropriate governmental services and benefits that are available, both federal and provincial. Promoting clients' accessibility to these programs can also prove a success factor. With this in mind, Veterans Affairs and National Defence co-hosted their first Intergovernmental Forum in November 2000 to promote collaboration and coordination among those responsible for both federal and provincial programs and services of interest to military personnel and families making the transition to civilian life.

Numerous forums have been hosted since then, involving representatives from a wide range of organizations: Health Canada, Human Resources Development Canada, Indian and Northern Affairs, the Public Service Commission, the Canada Mortgage and Housing Corporation, Public Works and Government Services Canada, and the Canada Customs and Revenue Agency; also representatives from provincial ministries of health, social services, training and employment, and education, as well as officials with responsibilities for disabled persons. In most provinces, these forums have led to the creation of working committees. These collect and share information of mutual interest and provide input to an embryonic data bank that can support quality service delivery to Canadian Forces clients.

4. Supporting Military Families

Military spouses are often economically disadvantaged and face considerable career challenges in adapting their lives to military imperatives, such as geographic transfers and extended spousal absence on operations. Their children often experience the social and educational dislocation of frequent moves and the stress of absent parents and the knowledge that their mothers or fathers can face daily dangers. Both spouses and children can face serious economic dislocation and disadvantages if the family's military breadwinner dies. So in addition to a number of recommendations on improving the housing available to members of the forces and their families, SCONDVA's 1998 report contained sixteen recommendations designed to improve conditions for military families.

In response, National Defence agreed to reimburse some professional fees and travel expenses incurred by military spouses when searching for employment. Employment assistance counsellors were hired at Military Family Resource Centres to help spouses look for work and to encourage their employment in local communities. In order to improve their chances of finding work and developing wider social support networks, access to second-language training was approved for spouses as well.

Deployment and emergency child care coordinators were added to the staff of the Military Family Resource Centres in 1999, and measures were introduced to ensure that service personnel leaving on deployments had made appropriate arrangements for the care of dependent children or elderly family members for whom they were responsible. Contingency funding was identified to reimburse members of the forces for emergency child care of up to 72 hours' duration. Since 2000, a Family Care Assistance plan has helped offset some expenses for families in which both parents are Canadian Forces members as well as for members who are single parents and who face extra family care costs associated with overnight absence on military duty. These and similar measures form part of the Canadian Forces Family Policy, which was promulgated in June 2000.

Although not identified by SCONDVA, another unmet family need identified by veterans' organizations was the provision of educational assistance to the children of those who had been killed while serving in the military. Until 1995, this was provided through the Education Assistance Program outlined in the

Children of Deceased Veterans Education Assistance Act. The program provided post-secondary education assistance to children of Canadian Forces members whose death was attributable to their service; it was also available to the children of veterans who had been receiving a pension at the disability rate of 48 percent or more for injuries attributable to service and who had subsequently died. On 18 September 2003 legislation was introduced in the House of Commons that would reinstate the Education Assistance Program and provide some retroactive reimbursement of expenses to those who otherwise would have been eligible but had completed their education after the program was suspended in 1995.

5. Recognition

For decades after Canadians first embarked on United Nations peacekeeping missions in 1947, their services abroad as servants of humanity went largely unrecognized. In 1988, when the Nobel Peace Prize was awarded to all United Nations peacekeepers, people proposed that Canada, as a major peacekeeping nation, should mark the occasion and honour those from the Canadian Forces who had made such an outstanding contribution to international peace and security.

Finally, it was decided that a monument would be built to honour Canada's peacekeeping legacy. It would be the first and only such tribute in the world. Plans for the monument were inaugurated by the Department of National Defence and the National Capital Commission. The project was managed by a well-known chronicler of Canadian peacekeeping, Colonel John Gardam (Retired). The face of the monument is inscribed with the names and dates of all peacekeeping missions undertaken by Canadians. As new missions arise, new inscriptions are added, creating a permanent record of Canada's peacekeeping legacy. The National Peacekeeping Monument was unveiled on 8 October 1992 by Governor General Ramon Hnatyshyn, who was accompanied by Prime Minister Brian Mulroney and the Chief of the Defence Staff, General Paul Manson.

The 1988 Nobel Prize award to peacekeepers gave further impetus to calls for a Canadian peacekeeping medal. Because Canadian Forces personnel have received United Nations medals to recognize their service during authorized missions abroad, government officials had resisted proposals that a new medal be created, arguing that this would result in individuals being recognized twice for the same service. Starting in 1991 and undaunted by the rebuff of two earlier private member's bills by John Brewin, Member of Parliament for Victoria, the Canadian Peacekeeping Veterans Association sought assistance from Colonel Jack Frazer (Retired), who was the Member of Parliament for Saanich and the Gulf Islands. The second of two private member's bills that he introduced received royal assent in April 1997, and the actual medal proposed was approved by Queen Elizabeth II in December, 1999. The first of approximately 125,000 medals were presented to 90 recipients by Governor General Adrienne Clarkson at the National Peacekeeping Monument on 6 September 2000.

These were welcome developments, providing long overdue national recognition of the services and sacrifices of Canadian sailors, soldiers, and air force personnel since the end of the Second World War. But one coveted honour was barred them – formal recognition as “veterans.” The importance of this issue was highlighted by the *Review of Veterans’ Care Needs*. Furthermore, SCNDVA’s 1998 report had endorsed the idea of designating as “veterans” all members of the forces who had served in Special Duty Areas. After extensive study, on 29 March 2001 Minister of Veterans Affairs, Ronald J. Duhamel, announced that the designation of “veteran” would be conferred upon any former Canadian Forces member who had achieved “trained” status by meeting military occupation classification standards and had subsequently received an honourable discharge. Although the new designation did not confer automatic access to veterans’ services or benefits, it did provide a meaningful and valued form of recognition to those who had accepted the unlimited liabilities of military service. Veterans in fact had become veterans officially. In Canada the conferring of official status has always been consequential, and the 2001 action of the government in relation to Canadian Forces veterans has understandably raised expectations that will have to be addressed.

These measures significantly advanced the objectives of better recognizing Canadian Forces personnel. But there were still clear gaps to be filled, especially in creating a national memorial to those who had been killed on peacekeeping or similarly hazardous military service. In some communities the inscription “In the Service of Peace” had been added to cenotaphs and war memorials. This was a welcome gesture, but it left the need for a national memorial unmet.

During 2002 the government finally announced plans to formally recognize those who had lost their lives as a result of “peacetime” military service. On 6 November, while making a Veterans’ Week statement in the House of Commons, Dr Rey Pagtakhan, Minister of Veterans Affairs, rose “to inform the House today of the government’s decision to create a new Book of Remembrance that will take its place with the others in the Memorial Chamber of Canada’s Parliament.”

Currently, there exist six Books of Remembrance containing the names of all Canadians who died in battle outside Canada since Confederation. There is one book obviously missing. And it is my honour to announce today the need for ... creation of a seventh book which will contain the names of peacekeepers and soldiers who had served and died since 1947. The recent tragic accident in Afghanistan that took the lives of four of our soldiers reminded all Canadians of the ongoing sacrifices asked of our men and women in uniform. They have toiled in the service of peace. Tragically, a considerable number of them have died in duty throughout the decades. They are equally worthy of a place in a Book of Remembrance, which we anticipate to complete and install in 2004, during Veterans’ Week of that year.¹⁸²

These forms of recognition have come as welcome balm to the wounded pride of Canadian Forces veterans, meeting many but by no means all of their concerns regarding recognition and remembrance.

Equally welcome have been the many program and service initiatives taken to heal their broken bodies and spirits and to assist them in adjusting to civilian life after their service in uniform ends. That these improvements are having a positive effect is suggested by a rise in overall client satisfaction ratings given to Veterans Affairs by its Canadian Forces clients – from 72 percent in 2001 to 80 percent in 2003. Even so, it remains clear that significant unmet needs remain and that the government's range of available responses is insufficient to address them all.

E. The Royal Canadian Mounted Police

While officials within Veterans Affairs Canada were immersed in efforts to meet the needs of Canadian Forces veterans better, they were also beginning to focus more attention on another client group, the Royal Canadian Mounted Police (RCMP). The Department's association with the RCMP began in 1948, when it assumed responsibility for adjudicating and assessing disability pension applications for their members under the *RCMP Pension Continuation Act* and the *Pension Act*. Under this arrangement, Veterans Affairs Canada conveys the results of its adjudications to the RCMP National Compensation Centre, which in turn informs applicants of the results and authorizes Public Works and Government Services Canada to issue pension cheques. Since passage of the *RCMP Superannuation Act* in 1960, Veterans Affairs has adjudicated pension-related health-care benefits for the RCMP as well.

By the late 1990s, a number of developments suggested the value of further cooperation between the partners. Like the Canadian Forces, the Royal Canadian Mounted Police became much more heavily involved in peacekeeping operations during the 1990s. In this, the force has continued a long tradition of service in theatres of war abroad. Its predecessor, the North-West Mounted Police, served during the Northwest Campaign of 1885. More than 250 of its members were deployed abroad during the South African War (1899-1902), most with the 2nd Canadian Mounted Rifles, Lord Strathcona's Horse, or the South African Constabulary. Seven were killed, and Sergeant A.H. Richardson won the Victoria Cross. During most of the First World War members of the Royal Northwest Mounted Police (RNWMP), as it was then known, were not permitted to resign from the Force for military enlistment. In 1918, however, the RNWMP sent a cavalry draft overseas, where it participated in Allied action at Mons. Another squadron was assigned to the Siberian Expeditionary Force in November 1918, with which it served for one year.

During the first year of the Second World War, the Royal Canadian Mounted Police's Marine Section was transferred to the Royal Canadian Navy, while its Air Section was transferred to the Royal Canadian Air Force. The 118-strong No. 1 Provost Company was also established using members of the police force and was assigned military police duties with the 1st Canadian Division. It shared the Canadian Army's path of duty through England, Italy, Sicily, and northwest Europe. Those who joined the Royal Canadian Mounted Police during the war were aware that they might be called upon to support the war effort and that by volunteering for service in the police they were also volunteering to serve, if required, in the No 1. Provost Company. A total of 215 members eventually served with the

Canadian Provost Corps in Europe. Numerous others provided military police services within Canada. Indeed, all RCMP members remaining in Canada during the Second World War performed war duties. During the six years of war, former members of the RCMP on military service won 31 gallantry awards. A large number, at least 58, were commissioned, and 14 made the ultimate sacrifice.¹⁸³

Since 1989, more than 1,200 members of the Royal Canadian Mounted Police and 28 other Canadian police forces have served on international missions: in Namibia (1989-90), the former Yugoslavia (1992-95), Haiti (1993-2000), South Africa (1994), Rwanda (1995-96), Bosnia (1996-2000), Guatemala (1996-2000), Croatia (1997-98), the Central African Republic (1998), Sierra Leone (1998, 1999, 2001), Western Sahara (1998-99), Kosovo (1999-2000), and East Timor (1999-2000). Many have been decorated for meritorious conduct or humanitarian service on these missions.

Increasing levels of peacekeeping duty have generated higher numbers of disability pension applications within the force. Like members of the Canadian Forces, since October 2000 members of the Royal Canadian Mounted Police have been able to collect disability pension benefits while still serving. These two factors have generated additional challenges in the administration of pension and health-care benefits, as has the need to continue providing effective health-care programs for the force's aging cadre of retired disability pensioners.

These developments have highlighted the commonalities that exist between the veteran client base of Veterans Affairs and the serving and former members of the Royal Canadian Mounted Police. But despite the many similarities, the Royal Canadian Mounted Police represents a unique group, whose services are primarily associated with keeping the peace and supporting public safety in Canada. The organization has its own heritage, customs, and culture. While police service can be every bit as stressful and dangerous as service in today's Canadian Forces, it is different and can generate special needs.

The families of the Royal Canadian Mounted Police, like those of the Canadian Forces, face the strains and challenges associated with postings across the country, often to remote locations, and of dealing with the at-home impact of various occupational stresses. They, too, have to cope with the sudden loss of a family member killed on duty. Since 1873, the Royal Canadian Mounted Police and its predecessors have lost 203 members on duty. Of these, 24 were killed during the 1980s and another 16 have been killed since 1990.

Looking for ways to better meet the needs of those facing these challenges, in 1999 the Royal Canadian Mounted Police entered into a new partnership with Veterans Affairs, which allows serving members of the force to share the health-claims processing system established for veterans with Atlantic Blue Cross Care. The partnership was expanded the following year to include the Department of National Defence and to provide service to Regular Force members too. In January 2002, Atlantic Blue Cross Care received a ten-year government contract to continue providing health-claims processing services for the three partners under the Federal Health Claims Processing System.

An opportunity to deepen the relationship between Veterans Affairs and the Royal Canadian Mounted Police came in January 2001, when the force asked Veterans Affairs to assume full responsibility for both the adjudication and payment of disability pensions to an estimated 4,000 of their regular and civilian pensioners. The department was also asked to extend its health-care benefit administration services to cover all civilian and retired RCMP members who were receiving a disability pension. Most of these objectives were being met by the end of 2002.

By that time, Veterans Affairs and the Royal Canadian Mounted Police had also established a Steering Committee that included senior managers from both departments, as well as RCMP staff relations officials and representatives of the RCMP Veterans' Association, to guide the course of partnership activities. In order to define more clearly the areas where further cooperation would prove fruitful, a joint Transition Needs Analysis was undertaken to identify the requirements of RCMP pensioners in such areas as transition services, health and social needs, and access to home care and long-term care. It noted: "As we have seen happen with [Veterans Affairs'] aging war service Veteran population, aging RCMP disability pensioners require a greater continuum of care as the combined effects of their pensioned disability and the chronic conditions associated with aging make it difficult to function in their homes and communities. Also, many still-serving or discharged RCMP members experience similar social, physical and psychological problems [as those] experienced by Canadian Forces Veterans."¹⁸⁴

The 2003 update of Veterans Affairs Canada's Five-Year Strategic Plan identified "partnering to serve the RCMP and eligible civilians" as one of its eight strategic priorities. The department committed itself to working closely with the Royal Canadian Mounted Police to address the home care, long-term care, and other support needs of its discharging members, and to determine the kinds of adjustments that might be required to existing legislation, health-care policies, and programs and service delivery mechanisms, to better meet the needs of RCMP clients. The strategic plan also indicated that Veterans Affairs Canada had embraced its responsibility to "ensure that the sacrifices made in the 20th century, as well as those of today's Canadian Forces and RCMP, continue to be remembered and actively honoured by all Canadians."¹⁸⁵ This was the first time that the department's Canada Remembers program was formally described to include the commemoration of appropriate Royal Canadian Mounted Police services, sacrifices, and achievements.

F. An Emerging Consensus for Comprehensive Reform

The last decade has seen significant and laudable advances in the support provided to the members, veterans, and families of the Canadian Forces and the Royal Canadian Mounted Police. Many improvements have been the result of the persistent advocacy and positive engagement of veterans' organizations. The inquiries and findings of Canadian parliamentarians, who have demonstrated a keen commitment to the well-being of members and former members of the forces and their families, have played a pivotal role in validating concerns and generating political support for change. The nation's leadership has responded with a host of new initiatives to address urgent needs, while offering the

assurance of continuing improvements. Public servants have applied commendable creativity and compassion, too, in their attempt to meet clients' needs within the bounds of legislative and regulatory constraints that often hamper their efforts.

Still, many significant gaps remain. Those who clearly deserve support from their government cannot always receive the help they require. Despite extensive, incremental reform to existing programs and authorities, some needs remain unmet, for a variety of reasons: the complexity of existing entitlement structures and application processes; a lack of program harmonization among benefit and service providers; the absence of a dedicated, overall case-management function for clients; and the need for new or dramatically amended programs. Successive observations by authorities and experts have made it increasingly clear that in order to fully address the needs of Canadian Forces members, veterans, and their families, the patchwork approach to reform needs to give way to more comprehensive initiatives.

Calls for significant change were given impetus by the 1998 release of the joint federal, provincial, and territorial report, *In Unison: A Canadian Approach to Disability Issues*. Outlining a vision of "full citizenship" for the disabled, the document highlighted the need to improve the inclusion and participation of persons with disabilities in the economic and social mainstream. In order to achieve this goal, the report advocated better access to educational and training opportunities for the disabled; encouraged greater labour force participation rates by persons with disabilities; and promoted the need for greater income equality for this group.

In Unison also articulated a new way of engaging disability management and issues, which was encapsulated by comparing old concepts and new approaches.

<u>Old Concepts</u>	<u>New Approach</u>
Recipients	Participants
Passive Income Support	Active measures to promote employment
Dependence	Independence
Government Responsibility	Shared Responsibility
Label as "unemployable"	Identification of work skills
Disincentives to leave income support	Incentives to seek employment
Inadequate employment supports	Develop skills and experience
Program-centred approach	Person-centred approach
Insufficient portability of benefits and services	Portable benefits and services
Multiple access requirements	Integrated access requirements

Clearly, making the changes required to bring the existing suite of disability programs for Canadian Forces members and veterans in line with this new vision would entail a major program of reform.

In 1999 the federal government released *Future Directions to Address Disability Issues for the Government of Canada: Working Together for Full Citizenship*. This document noted that “for many people with disabilities, getting a job is one of their greatest challenges.” With this in mind, the government indicated that an “emphasis will ... be placed on enhancing the Government of Canada’s role as an employer of people with disabilities, to promote best practices within the Federal Public Service and with private sector employers.”¹⁸⁶

In support of the government’s aim to become a model employer of people with disabilities, during 2002 the Treasury Board issued a new Policy on the Duty to Accommodate Persons with Disabilities in the Federal Public Service. It stated:

It is the policy of the Treasury Board and the Public Service Commission to create and maintain an inclusive, barrier-free environment in the federal Public Service to ensure the full participation of persons with disabilities. This policy will be implemented by:

- identifying and removing barriers to employment, career development and promotion of persons with disabilities unless doing so would result in undue hardship;
- designing all employment systems, processes and facilities to be accessible by building accommodation into workplace standards, systems, processes and facilities, and
- accommodating individuals when such barriers cannot be removed ...¹⁸⁷

While the Canadian Forces are largely exempt from compliance with the policy by virtue of the “universality of service” principle, the policy poses significant and potentially far-reaching questions about the federal government’s more general responsibility, in equity, to accommodate those who become disabled during military service. Such questions would have to be answered during the fundamental redesign of Canadian Forces veterans’ programs advocated by many stakeholders.

The 2003 update of Veterans Affairs Canada’s Five-Year Strategic Plan placed considerable emphasis on the need to do more for veterans and their families:

While the Department’s proud tradition of evolving to meet the emerging needs of war service Veterans has led to the development of a solid program base for this client group, VAC’s repertoire of benefits and services to meet the current and future needs of younger clients with different military experiences in the 21st century is less well developed ... It is with this in mind that our strategic priorities for the coming years

focus on building a modernized system of programs and services for our other client groups, such as members and former members of the Canadian Forces and their families, the RCMP and eligible civilians.¹⁸⁸

As Veterans Affairs refined its strategic direction, the Veterans Affairs – Canadian Forces Advisory Council decided to undertake a major fact-finding mission that would also help define the current state of affairs so that it could offer informed advice on the way ahead. As a result, members of the council organized an extensive series of visits to Canadian military bases between 2001 and 2002, where they heard from senior military commanders, a wide variety of commissioned and non-commissioned members and veterans of the Canadian Forces, and members of their families. As a result, the council offered 22 recommendations and observations to Veterans Affairs Canada. In considering the data collected and other available information, the council was drawn to conclude that the tools are not available to provide the type of assistance that is now required by a growing number of Canadian Forces veterans and their families. The council also concluded that modifying current legislation for today's veterans, who are facing new types of injuries in a changed society, would be an inappropriate response. Thus, if Canada is to fulfill its obligation, additional resources, changes to existing regulations, and new legislation will be required.

With this conclusion in mind, the Advisory Council produced a paper entitled *The Need for a Social Covenant: The Canadian People and the Armed Forces of Canada*.¹⁸⁹ The paper reviewed the often discussed idea of codifying the mutual moral obligations that tacitly govern the relationship between a country, its citizens, and those who serve in its armed forces. It noted how well the Veterans Charter of the 1940s had given effect to the government's moral obligation to those who served during the Second World War and the Korean War. Unfortunately, as the paper also noted,

today's CF personnel face a very different reality upon discharge than what awaited veterans returning from WW II ... VAC's programs have evolved from those aimed at re-establishment in civilian society to those that currently provide care and support to elderly senior veterans ... There is a pressing need to ensure that appropriate programs are put in place to allow the Government of Canada to fulfill its moral and legal responsibility towards members of the CF to the fullest extent ... The forging of a strong "Social Covenant" between the citizens of this country and those who serve or have served in the CF is an essential element in this process.¹⁹⁰

In pursuing the recommended comprehensive reform of the overall program offered to members of the Canadian Forces and their families, the council urged Veterans Affairs to consider four principles, which it believes should form the basis of a renewed relationship between Canadians and those who serve in the Canadian Forces. These are:

- z the uniqueness of military service and the experiences of military families;
- z that members of the CF are part of Canadian society, not separate from it;
- z that supporting serving CF members, CF veterans and their families cannot be divorced from a broader understanding of, and support for, the military role in our society, both nationally and at the community level; and
- z that the nation's obligation to serving CF members, CF veterans and their families has several dimensions: enhanced or new programs and services to meet the complex needs of individuals; assistance in a seamless transition from military to civilian life; as applicable, appropriate compensation; and recognition and commemoration.¹⁹¹

On 21 July 2003 the Department of National Defence's Quality of Life directorate released its Concept of Operations for a "Ready for Release" program like the one recommended by the Croatia Board of Inquiry.¹⁹² The program's ultimate goal is to "provide a seamless transition for CF members to civilian life that is efficient, effective and member focused." This would require a shift from program-focused service delivery towards addressing the unique needs of each releasing member and his or her family, and incorporating an immediate and appropriate assessment of the member's needs at the time of release. It would focus on member participation, timely and coordinated access to programs and benefits, and the continuity of such access, whether through Canadian Forces or Veterans Affairs facilities.

In moving forward the plan established, as guiding principles, that National Defence would continue to be responsible for the care and support of serving members, that Veterans Affairs Canada would continue to be responsible for the care and support of Canadian Forces veterans, and that the two organizations would provide joint care and support to those members or veterans who were in transition. The Concept of Operations called for the program to be developed and implemented, with input and support from all relevant stakeholders, by November 2005.¹⁹³

On 16 September 2003, Jack Stagg, the Deputy Minister of Veterans Affairs, announced the creation of a departmental Service and Program Modernization Task Force under the leadership of Darragh Mogan. The task force's principal job would be "to develop a comprehensive and improved suite of programs and services to aid the successful transition of Canadian Forces members and families to civilian life. Similar work on responding to the needs of our RCMP clients will also be co-ordinated by the Task Force." The Deputy Minister identified the success of the task force as the organization's "top priority in the areas of policy development and operational support for the foreseeable future." The Service and Program Modernization Task Force was assigned the staff and resources of the Canadian Forces Services Directorate, the Continuum of Service Project, and a number of additional staff, and was directed to develop and support the implementation of a modernized program of benefits for the Canadian Forces and the Royal Canadian Mounted Police by the end of 2005.

The task force will build on the good work that has been done in recent years through the cooperation of Veterans Affairs Canada and National Defence; it will adapt existing programs to new needs and devise rehabilitation and re-establishment programs that will give a new generation of veterans "opportunity with security" in the context of the twenty-first century. The appointment of the task force opens a new chapter in the history of Veterans Affairs Canada and promises a renewed and reinvigorated program of recognition and benefits for those who serve in the uniform of Canada.

G. The Canadian Forces Today

The operational tempo that put such strain on the Canadian Forces and military families in the 1990s has not abated. On 4 October 2001, Lord Robertson, Secretary General of NATO, announced that the previous month's devastating terrorist attacks on American targets would be interpreted as an attack on all NATO nations under Article 5 of the Treaty of Washington. In response, Prime Minister Jean Chrétien announced that Canada would contribute land, sea, and air forces to the international fight against terrorism.

On 8 October 2001, Minister of National Defence Art Eggleton announced Operation Apollo, Canada's support to international counterterrorism action. It would eventually see 1,500 navy personnel and six warships operating in the Persian Gulf; a contingent of approximately 750 soldiers deployed in Kandahar, Afghanistan, to support the new government and enhance security in that country; and approximately 400 air force personnel assigned to long-range patrol duties in the Persian Gulf or providing maritime air detachments and tactical airlift support in the region.

Members of the Princess Patricia's Canadian Light Infantry conducting night training exercises near Kandahar on 17 April 2002 were mistakenly identified as hostile forces by American aircraft and encountered "friendly fire." Four Canadian soldiers were killed: Sergeant Marc Leger, age 29, of Lancaster, Ont.; Corporal Ainsworth Dyer, age 24, of Montreal, P.Q.; Private Richard Green, age 21, of Mill Cove, N.S.; and Private Nathan Smith, age 27, of Porter's Lake, N.S. Eight of their comrades also were injured. The soldiers' deaths and injuries shocked the nation, and they underlined the hazardous nature of modern military duty and the continuing need to provide effective support to members of the Canadian Forces and their families.

On 20 December 2001 the United Nations Security Council authorized an International Security Assistance Force (ISAF) for Afghanistan to help maintain security in and around Kabul while providing a more secure environment for the delivery of international aid and the operation of the country's transitional government. On 11 August 2003, NATO assumed responsibility for the operation, which at the time engaged approximately 4,600 personnel drawn from 31 nations. That same month, Canada committed about 1,900 personnel to the theatre for two six-month rotations. This made Canada the largest contributor to the force.

Tragedy struck the Canadians on 2 October 2003, killing two soldiers whose jeep ran over a concealed explosive device while on patrol near Kabul. Sergeant Robert Short, age 42, of Fredericton, N.B., and Corporal Robbie Beerenfenger, age 29, of Ottawa were members of the Royal Canadian Regiment. Beerenfenger was a father of three. Short's son, Private Josh Short, is a serving member of the Royal Canadian Artillery. Josh Short's loss was compounded by the fact that his wife, Sapper Mariebeth Short, had been killed during a training accident at CFB Petawawa a year earlier. On 27 January 2004 another member of the Royal Canadian Regiment serving with the ISAF was killed: Corporal Jamie Brendan Murphy, age 26, of Conception Harbour, Nfld., lost his life when a suspected suicide bomber attacked his jeep during a patrol in western Kabul. Three other members of Murphy's regiment were injured in the explosion.

These terrible losses and the grief that they have brought to survivors and to fellow Canadians remind us of the sacrifice made by members of the Canadian Forces as they perform their duties.

Still, these deaths have not deterred our resolve to maintain a meaningful commitment to international peace and security – nor should they. Our commitment to ISAF continues, with Canada's Lieutenant General Rick Hillier assuming command of the NATO-led force for a one-year period commencing February 2004. He will undoubtedly be one of many Canadian Forces personnel to find themselves serving abroad on complex and dangerous missions this year.

The Canadian Forces' support to domestic operations, a significant element of their duties during the 1990s, has continued as well: 1,500 military personnel from across Canada fought fires in British Columbia during the summer of 2003, when the province experienced one of its worst fire seasons on record. The size of this commitment was eclipsed only by our force in Afghanistan. In October 2003 members of the Canadian Forces helped residents and civic officials in Halifax and the surrounding area after the city was struck by Hurricane Juan, the largest storm to hit the east coast in forty years. The military response involved about 800 Regular and Reserve Force members of Maritime Forces Atlantic as well as an Immediate Reaction Unit of about 420 soldiers from CFB Gagetown in New Brunswick.

Clearly, we have continuing need of operationally effective Canadian Forces for difficult and dangerous duties, both in Canada and on the world stage. The human cost of deploying them remains high, and VAC's Service and Program Modernization Task Force has been formed to meet a most urgent national need.

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NOTES

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1. **Social and economic determinants of health figure prominently in demands for institutional admission.** In effect, diminished capacity of the elderly to care for their surroundings and to maintain their dignity in the community was at least as influential a factor as diminished physical capacity.
 2. **Alternatives to institutional care should be as comprehensive in scope as institutional care itself.** This meant reducing mostly economic incentives to such institutional admission, or to match them in the alternative. With a maximum user pay charge for long-term institutional admission for Veterans of \$120 per month in 1980, and full access to the generous VAC treatment benefit program for patients, this principle had a significant effect on the structure of the VIP. In response to this need to match incentives among care choices, with VIP benefits comes full access to the VAC treatment program. No user charges are levied with VIP home-care benefits, as clients already cover housing costs and provide much of the care-giving labour at no cost to the state.
 3. **Full interdisciplinary assessment of care needs and the associated development of a care plan and follow-up monitoring are keys to a successful alternative.** This feature of the VIP began at its inception and has been re-emphasized and refined since.
 4. **Self-administered care, where the recipient or family chooses the service provider and, where possible, pays the supplier would ensure the “engagement” of the care recipient or the family in the care plan.** The result was that the VIP is a contribution program where payment is conditional on adherence to the care plan.

5. **Benefit maximums should be sufficient to meet changing needs over time.** The result of this was that VIP benefit maximums were set at approximately twice those of the then British Columbia home-care program.
6. **Family care responsibilities should not be “taken over” by the alternative.** The result of this finding was that VIP did not pay a contribution toward family members providing care to the Veteran. The application of this principle has been controversial at times, and it has been modified over time.
7. **The VIP would be national in scope with the same level of benefit and the same access, depending on assessed need, no matter where the recipient resided in Canada.**
8. **Wherever possible, Veterans’ eligibility for like provincial benefits would be used first with VIP supplementation where needed.** Currently, in some locales, the VIP and provincial programs work in cost-sharing harmony for the same client.

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ANNEX I

Canadian Disability Pension System

(Source: *Veterans Review and Appeal Board*)

Historical Background

From the outbreak of the Great War, the administration of regulations governing compensation on account of deaths, injuries and disease was administered by the Department of Militia and Defence. As the number of injuries and casualties mounted as a result of the war, it became obvious that a separate agency would be needed to process the applications for benefits. The first body which performed this function was the Board of Pension Commissioners, formed in 1916 by the government of the day at the request of veterans and their representatives.

With the advent of the Great War and mobilization of a large army mainly of civilians for active war service outside Canada, the inadequacy of existing disability legislation became apparent. Thus, the *Pension Act*, which governs the award of disability pensions for those persons who were injured or suffer from disease incurred during or attributable to their military service, or their survivors, came into effect after the First World War in 1919.

By the early 1920's it became obvious, considering the number of dissatisfied applicants, that some sort of an appeal process was necessary. Since 1923 there have been several variations, but one constant has remained, the final level of appeal has been in the hands of an independent agency. In 1923 the Federal Appeal Board was formed, followed in 1930 by the Pension Appeal Court and in 1933 an appeal level was added to the Canadian Pension Commission (the name of Board of Pension Commissioners was changed to Canadian Pension Commission). The awarding of disability pensions, and the appeal rights for those denied pensions remained the function of the Canadian Pension Commission for many years.

In 1965, the Minister of Veterans Affairs appointed the Woods Committee, to survey the organization and work of the Canadian Pension Commission. At that time the awarding of disability pensions and the appeal rights for those denied pensions remained the function of the Canadian Pension Commission. The chief criticism of that appeal procedure arose from the use of Appeal Boards made up of members of the Canadian Pension Commission, consequently, this did not represent a proper judicial system of appeals.

The Woods Committee, in its report to the Minister of Veterans Affairs, recommended that an appellate body be appointed. The recommendation was incorporated into Bill C-203 to amend the *Pension Act*. On 30 March 1971, the Pension Review Board was established to be the final level of appeal. The purpose was to provide veterans, dissatisfied with a previous ruling of the Commission, a new and improved adjudicating process for an appeal to a higher and independent body. At that time the disability pension process became a three-step process. Applicants for a disability pension still

made application to the Canadian Pension Commission. If they were dissatisfied with the first decision, they appealed to a second level at the Commission, and if they were still dissatisfied an appeal could be made to the Pension Review Board.

While pension appeals to the Pension Review Board increased over the years, allowance appeals to the War Veterans' Allowance Board (an agency which ruled on War Veterans' Allowance (WVA) claims) were decreasing. As a result, recommendations were made to the Ministerial Task Force on Program Review in 1985, to combine the Pension Review Board with the War Veterans' Allowance Board to form a single appeals tribunal, the Veterans Appeal Board. This Board, established under the *Veterans Appeal Board Act*, began operations on 14 September 1987. At that time, an applicant for a disability pension made application to the Canadian Pension Commission. If he/she was dissatisfied, the decision could be appealed to the second level at the Canadian Pension Commission, and if the applicant was still dissatisfied an appeal could be made to the Veterans Appeal Board.

In 1995, the government initiated "pension reform". Its intent was to streamline the veterans disability pensions and benefits program to improve timeliness in the delivery of benefits. Under pension reform, the Department of Veterans Affairs or "the Minister," makes the first decision with respect to an application for a disability pension. The Veterans Appeal Board and the Canadian Pension Commission merged to form one appeal body, the Veterans Review and Appeal Board (VRAB), which provides disability pension applicants with two levels of appeal and applicants for WVA with a final appeal.

Pension Process

The three levels of adjudication in the six-step pension process within the Veterans Affairs portfolio are the Minister (first decisions), VRAB reviews, and VRAB appeals. The option of judicial review at Federal Court exists outside the portfolio.

The six-step process is as follows:

1. The Minister (hereafter referred to as the Department).

Every application for disability pension is made to the Department. Staff at the District Office will help the applicant prepare an application and the decision will then be made by adjudicators at head office, who will give reasons for the decision. If a first application for disability pension succeeds, a medical examination may have to be arranged to determine the degree of disablement resulting from the accepted pensionable condition.

2. Ministerial Review

The Minister may, on his/her own motion, review a decision on error of fact or law, or on application if new evidence is presented.

3. VRAB Review Hearing

If an applicant is not satisfied with the decision made by the Department, the applicant has the right to appeal to a review panel of VRAB. VRAB review hearings are the first step in the appeal process. Applicants may be represented by the Bureau of Pensions Advocates, the service bureau of a veterans organization, other counsel at their own expense, or they may represent themselves. Applicants may appear with their representatives and present oral testimony in support of their claims. Review panel hearings are held across the country. Normally an application for review is dealt with by a panel of at least two members. In certain circumstances and with the consent of the applicant, one member may hear a review. A decision of the majority is the Board's decision, or in the absence of a majority decision, the decision most favourable to the applicant is the decision of the Board.

4. Reconsideration of Review Decision

A review panel may, on its own motion, reconsider a review decision, if the panel determines that the decision contains an error in fact or law. If the members of the review panel have ceased to hold office as members, the Board can constitute a new panel.

5. VRAB Appeal Hearing

An applicant who is dissatisfied with a decision of the review panel may appeal the decision to an appeal panel of the Board. An appeal panel of not fewer than three members will hear and determine the case. Members cannot sit on an appeal panel if they heard the case at the review level. Submissions are made on behalf of the applicants by their representatives; however, the legislation does not permit oral testimony by the applicants at this level of hearings. If an appellant chooses to appear before an appeal panel, it is at their own expense. Only documented evidence may be submitted. A decision of the majority of members of an appeal panel is a decision of the Board and is final and binding.

6. Reconsideration of Appeal

An appeal panel may reconsider an appeal decision on its own motion on an error of fact or law, or may do so on application if the person making the application alleges that an error was made with respect to any finding of fact or the interpretation of any law or if

new evidence is presented to the appeal panel. Reconsiderations are not a fourth level of appeal. If the members of the appeal panel have ceased to hold office as members, the Board can constitute a new panel.

7. Federal Court

Outside the portfolio of Veterans Affairs, a further recourse is to apply to the Federal Court for a judicial review at the applicant's own expense. The Federal Court cannot change a decision of the Board, but it can refer a matter back to the Board for rehearing. The Board's decision may remain unchanged.

ANNEX II

Veterans Review and Appeal Board

(Source: *Veterans Review and Appeal Board*)

Introduction

The Veterans Review and Appeal Board (VRAB) is an independent quasi-judicial tribunal. VRAB's mandate, authorized under the *Veterans Review and Appeal Board Act* and Regulations, includes the rendering of decisions on reviews and appeals of claims for disability pension under the *Pension Act* and other Acts of Parliament, and final appeals on War Veterans' Allowance cases under the *War Veterans Allowance Act*.

As well, VRAB adjudicates on disability pension appeals under the authority of the *Royal Canadian Mounted Police Pension Continuation Act* and the *Royal Canadian Mounted Police Superannuation Act* at both the review and appeal level. Through its mandate, the Board fulfils the government's commitment to provide an appeal process to eligible veterans, former and current members of the Canadian Forces and RCMP, their survivors and dependents.

Independent hearings of appeals for disability pensions and allowances are conducted by Members who are appointed to the Board from a broad cross-section of the Canadian public. They are responsible for interpreting the legislation and to applying the law to the particular circumstances of each claim.

The Members of the Veterans Review and Appeal Board take their responsibilities as the final appeal level for veterans and their dependents very seriously. Members of the Board carefully examine each case which is brought before them to determine if the applicant is entitled to a benefit under the law. The legislation passed by Parliament establishing the Veterans Review and Appeal Board has given the Board the power to amend, vary or reverse any decision of the Minister, where the evidence supports the finding.

Process

The procedures followed by the Board in conducting hearings are informal in nature and non-adversarial. They are open to the public. Hearings are conducted in the official language of the applicant's choice. While the *Pension Act* allows an applicant to choose the Bureau of Pensions Advocates, a veterans' organization, (i.e., The Royal Canadian Legion, War Amputations of Canada, etc.) or any other representative to present his/her case, the majority of all cases are presented by the Bureau of Pensions Advocates.

At review hearings, applicants who are dissatisfied with pension application decisions made by the Minister, can appear with their representatives and may present oral testimony before two Members of the Veterans Review and Appeal Board. Hearings are scheduled in more than thirty-five locations across Canada. Hearings are also conducted via video conference and teleconference in order to expedite the process. Applicants receive written reasons for the decision; they are also advised of their right to appeal the decision and their right to representation.

Appeal level applications are adjudicated in Head Office (Charlottetown) by three Members who did not sit on the review level decision. These hearings are also conducted via video conference and teleconference. Submissions are made on behalf of the appellants by their representatives; however, the legislation does not permit oral testimony at this level of hearings. Once again, written reasons for the decisions are provided to the appellants.

Policy

The Board does not draft or publish pension policy, as such, but through its adjudications strives to ensure that all applicants are treated fairly and are granted the benefits to which they are entitled. When the Board renders an appeal level decision, it makes it with the realization that this is the applicant's final level of appeal. Because of the independent nature of the Board and the independence of each individual adjudicator, both the appellant and members of the general public can rest assured that each decision is made based on the legislation, which has been passed by Parliament to protect and compensate those persons who suffer from a disability caused by their service.

As part of the pension reform carried out in 1995, the responsibility for drafting and administering the Table of Disabilities was given to the Minister. As a result of this change the Board is not responsible for the basic assessment ground rules for the disability pension system but continues the role of final arbiter in the interpretation of the legislation.

Current Practices

During the 2003-2004 fiscal year, the Veterans Review and Appeal Board developed a three-year strategic plan to manage risks and provide sustenance and improvement in its review and appeal process. The Board's long term plan is to ensure that applicants have confidence that their appeals will be dealt with fairly and consistently by VRAB members and staff. VRAB always keeps at the forefront the concept that clients should receive the benefits to which they are entitled under the law and that their claims will be dealt with knowledgeably, expeditiously and impartially.

As trained and knowledgeable adjudicators are key to ensuring fair consideration of the relevant facts and evidence, professional development for Members is concentrated on training Members

to interpret the legislation and apply it to the facts of evidence. New Members undergo a comprehensive three-month learning program at the beginning of their appointments and all Members receive extensive ongoing training and professional development to ensure consistency and quality in decision-making.

A priority of the Board is to improve service to clients by providing fully reasoned decisions within its service standard of thirty days from hearing date.

Planned Activities

As previously stated, the Board has developed a three-year Strategic Plan in order to streamline and improve VRAB's review and appeal process. Over the next three years, the Board aims to improve communication with appellants, staff and stakeholders; improve service delivery; improve management structure and capacity; and provide smooth transition/change management.

Better communication with appellants and stakeholders will increase the awareness of the Board's role, responsibilities and practices in the pensions and allowances appeal process. During this planning period, VRAB will develop a Communication Strategy to improve communication with appellants, staff and stakeholders, increase its communication with the client by making contact earlier and more frequently throughout the review and appeal process, and make more information available to veterans and other clients through written publications and its Web Site.

By July 2005, VRAB will complete implementation of four strategies for improved service delivery: a new case management system, improved member training, improved research capability, and a legislative and policy framework. The new case management system will involve improved case preparation earlier in the appeal process. Improved member training will strengthen the current training program and include a feedback/communication mechanism. The improved research capability will provide members with the most up-to-date and comprehensive medical and legal information available. The changes to legislative and policy framework will authorize and support the other three service delivery strategies.

In order to improve service delivery, VRAB will also improve its management structure and capacity to accommodate the upcoming changes. To do so, VRAB will review its financial and human resources, as well as its planning and information technology management capabilities. A plan will be created in 2004 specifying the necessary modifications to better allocate resources.

Implementing the above-stated priorities will require an overall change management strategy and action plan detailing how VRAB intends to fully implement its strategic plan. This action plan will be completed in 2004 and will address such items as improvements to VRAB's internal processes, potential challenges and risks, as well as training required for members and staff.

Monitoring of these priorities will take place through a number of avenues. An action plan will be used to measure progress and ensure that milestones are being reached as planned. Ongoing consultations with stakeholders will provide opportunities for input on how issues are being resolved during the implementation of VRAB's various initiatives. To give clients the opportunity to comment on VRAB's initiatives, a client satisfaction survey will be conducted by 2006. As well, continual review of information pertaining to turnaround times and the quality of decisions will confirm whether positive change has taken place as a result of VRAB's efforts.

Improving the way VRAB conducts its reviews and appeals will result in more coordinated, standardized, efficient service to our veterans and other clients. This will mean faster turnaround times for decisions if issues can be resolved before the hearing process. Clients will also have more information available to them through VRAB's staff, publications or Web Site, thus increasing the clients' awareness of their rights and the Board's processes. These changes will result in improved consistency in decision-making and a stronger, more collaborative working relationship amongst VRAB, the Department, and veterans' organizations.

ANNEX III

The Bureau of Pensions Advocates: A Long Tradition of Service to Released Members of the Canadian Forces

(Source: Bureau of Pensions Advocates)

The Bureau's Roots

As long ago as 1923, provision was made, under the Department of Soldiers Civil Re-establishment, for the appointment of "Soldiers' Advisers", charged with assisting ex-servicemen and their dependants in their claims for benefits arising from service in the Armed Forces. Then, in 1930, the Veterans' Bureau, which was comprised of lawyers, was constituted as a branch of the Department to assist and represent clients.

In 1971, following the recommendations of the Woods Committee, which was struck to survey the work and organization of the Canadian Pension Commission, the Bureau of Pensions Advocates (BPA) was formed. It reported directly to the Minister of Veterans Affairs as an independent Agency, and made available to its clients across the country the services of lawyers who afforded them the same solicitor-client privilege as lawyers in private practice. Government funds were made available to resource the Bureau and to pay for independent medical opinions where needed by Pensions Advocates in support of pension claims.

During the "Pension Reform" initiative of 1995, the Bureau of Pensions Advocates once again became part of Veterans Affairs Canada. The task of assisting clients in the preparation of first applications for pension was given to Veterans Services Branch staff, and the Bureau's lawyers now focussed on advising and representing clients who wished to seek review or appeal of departmental decisions before the Veterans Review and Appeal Board.

The Bureau of Pensions Advocates Today

The Bureau is a nation-wide legal organization, whose main function is to provide free advice, assistance and representation for individuals dissatisfied with decisions rendered by Veterans Affairs Canada with respect to their claims for entitlement to disability pension, or any assessment awarded for their pensioned conditions.

The Bureau's Head Office is in Charlottetown, Prince Edward Island. The Chief Pensions Advocate is the overall manager of operations and is assisted by two Regional Managers. The

Bureau of Pensions Advocates also has 14 District Offices across Canada, each staffed by at least one lawyer, as well as an Appeal Unit in Charlottetown. The solicitor-client relationship between client and lawyer endures to this day.

Given their experience in pension matters, Bureau lawyers are considered specialists in the area of disability pension claims. The lawyer assigned to a case provides information to the client about the options for redress available. If an Advocate, on a detailed review of the available documentation, comes to the conclusion that a claim is not meritorious, the client is so advised. The ultimate decision as to whether or not to proceed, however, rests with the client.

Re-Inventing the Bureau of Pensions Advocates

The Bureau is in a unique situation as Veterans Affairs Canada re-defines itself to better meet the needs of a younger client population. It remains an organization of competent, medico-legal specialists who are well-positioned to act in an expanded role as advocates on behalf of veterans and their families. Although currently the Bureau of Pensions Advocates provides services under the Pension Program (and, to a much lesser extent under the War Veterans' Allowance Program), there is room to consider new undertakings.

The Health Care Program, for example, provides for Veterans Affairs clients to appeal decisions with respect to their eligibility for treatment benefits, by writing to a Regional Office authority, or, ultimately, to a designated body in Head Office. The Bureau could offer information and advice, resulting in some clients being counselled not to appeal the health care decision, and other clients receiving assistance in the preparation of the letter seeking recourse. In either case, both the organization and the client benefit from the Bureau of Pensions Advocates' assistance - the organization would receive fewer and more cogent appeals on treatment matters, and the client would be in a position to make informed decisions as to whether or not to pursue recourse on health care decisions.

Bureau advocates, in their capacity as representing clients, are situated between the client and either Pension Adjudicators or the Veterans Review and Appeal Board, also have a fresh perspective to offer - they see first-hand the impact of departmental policies on the clients these policies are designed to serve. The Bureau, therefore, is in a position to offer valuable perspective in the early stages of Departmental policy formulation.

In re-inventing BPA, the objective could be recognition of the Bureau as Veterans Affairs Canada's "Centre of Expertise for Advocacy". While clients have long recognized the Bureau's expertise in pension matters, there is a possibility of enhancing its services in areas such as health care and rehabilitation. Moreover, the Department itself could benefit from a new look at the Bureau of Pensions Advocates' potential as a more frequent partner in conducting its business on behalf of Canada's newest veterans.

ANNEX IV

Veterans Health Care

(Source: Program and Service Policy Division, Veterans Affairs Canada)

Veterans Affairs Canada, provides Health Care according to the *Veterans Health Care Regulations*. Health Care is composed of three major programs: Health Care Benefits; the Veterans Independence Program (VIP); and Long Term Care. Access to these programs flows, for the most part, from the *Pension Act* and the *War Veterans' Allowance Act*.

Health Care Benefits

Health Care Benefits consist of treatment benefits, supplementary benefits such as travel to access approved treatment from a recognized health professional, treatment allowance and miscellaneous benefits.

Treatment Benefits

The treatment benefits provided to eligible clients consist of **14 Programs of Choice**, which include: aids to daily living, ambulance services, audio (hearing) services, dental services, hospital services (in-patient and out-patient services), medical services (physicians), medical supplies, nursing services, oxygen therapy (respiratory equipment), prescription drugs, prosthetics and orthotics, related health services (physiotherapy, psychological counselling), special equipment (scooters, wheelchairs, bath lifts) and vision care. In addition to the health care benefits noted, VAC can also provide assistance with cost of Home Adaptations, to enable the use of special aids such as wheelchairs.

Treatment Allowance

For disability pensioners, a **Treatment Allowance** is available, which is intended to provide the equivalent to a 100 percent pension, usually for a maximum of 60 days per year, during periods of in- or out-patient acute care of a pensioned condition; during periods of prescribed bed rest in preparation for surgery related to a pensioned condition; during periods of prescribed convalescence resulting from the acute care of a pensioned condition; and when a person undergoes a medical examination as requested by the Department.

Supplementary Benefits

For eligible clients, assistance may be provided with the cost of travel for medical services, the cost of travel for an escort who must accompany the client, and payment to an escort where the escort is not the spouse, common law partner or dependent.

Miscellaneous Benefits

Those requested to undergo a medical examination in order to determine eligibility for Health Care Benefits, VIP, Long Term Care or if requested by the Veterans Review and Appeal Board (VRAB), are eligible to receive reimbursement of their associated costs, including travel costs incurred to receive the examination.

The Veterans Independence Program

VIP was designed to enable eligible veterans to maintain their independence through the provision of home care services and community care. VIP services include: home care services (housekeeping, grounds maintenance and personal care), ambulatory health care, home adaptations, and intermediate nursing home care. Survivors, or in the absence of a survivor other primary caregivers, may be entitled to the continuation of the VIP housekeeping and grounds maintenance services provided to the Veteran at the time of his/her death, or if admitted to a long term care facility within a year of death, at the time of admission.

Long Term Care

Long Term Care may be provided to eligible clients in community facilities and departmental/contract beds. Contribution of clients towards cost of Long Term Care is dependent on their source of eligibility.

Other Services

Client Services

VAC, as a client-centred organization, is committed to providing a level of service consistent with one's need for assistance and in accordance with their eligibility. This may include one or all of the following:

- a. *Screening* by a member of a Client Services Team which is a standardized means to gather information, identify potential problems and the services or action required.
- b. *Provision of information* about programs and services available within the Department or about community supports.
- c. *Targeted Assistance* such as helping to obtain specific interventions on benefits.

- d. *Referral* to internal and/or community resources including advocacy support where necessary.
- e. *Assessment* by a Client Service Team members to determine unmet needs and client service requirements which may include specialized assessment conducted by health professionals.
- f. *Case Management* for clients who require ongoing involvement to address unmet needs. The case manager works with clients, their caregivers and families to access information and resources to assist them in maintaining a healthy lifestyle and to enhance their ability to manage and cope with situations which may arise.

Health Promotion and Rehabilitation

VAC is committed to improving clients' quality of life. Health Promotion programs and services focus on the promotion of the health of clients, their families and caregivers through a community-based approach. This involves partnerships with government departments, community agencies, seniors groups and client organizations. Health Promotion initiatives will support, educate and involve clients, their families and caregivers in adopting healthy behaviours and lifestyles to foster independence.

The development of programs and services related to Health Promotion and Rehabilitation is ongoing. For information on initiatives such as Falls Prevention, Rehabilitation, Alzheimer Wandering Registry Program for Veterans, and the Post-Traumatic Stress Disorder (PTSD) booklet you can contact the nearest Veterans Affairs Canada District Office.

ANNEX V

Veterans Independence Program

(Source: Program and Service Policy Division, Veterans Affairs Canada)

Chronology

1981 Aging Veterans Program introduced.

The program was aimed at encouraging and assisting eligible veterans to remain independent, healthy and in their own homes and communities, thus delaying and, where possible, preventing institutionalization.

Target clients: war disability pensioners for need related to their pensioned condition.

Benefits: nursing home intermediate care; adult residential care; home care; ambulatory health care services. These services were provided only if not available from a provincial program.

1984 A phased-in extension to the Aging Veterans Program was announced. The purpose of the extension was to assist a much broader and needier segment of clientele who, due to advancing age, required assistance to maintain their independence and quality of life. Newly-eligible veterans would be phased in over a four-year period:

Target clients:

Phase 1 (effective 1 October 1984):

- < war disability pensioners 65 years of age and older who also received WVA and who required services for needs not related to pensioned condition;
- < non-pensioned Veteran WVA recipients 75 years of age and older

Phase 2 (effective 1 January 1986):

- < remaining veteran WVA recipients 65 -74 years of age

Phase 3 (effective 1 January 1987):

- < war disability pensioners 65 years of age and older where payments under OAS (Old Age Security) legislation barred them from receiving WVA, who required services for needs not related to a pensioned condition.

Phase 4 (effective 1 January 1988):

- < non-pensioned veterans with theatre of war service 65 years of age and older where payments under OAS bar them from receiving WVA.

Benefits: same as 1981, with the addition of transportation to assist in the social activities of daily living, for income-qualified clients.

- 1984 Aging Veterans Program renamed the “Veterans Independence Program” (VIP).
- 1989 VIP benefits extended to Canada Service Veterans.
- 1990 VIP housekeeping and grounds maintenance benefits extended to survivor for one year following death of veteran in receipt of VIP benefits.
- 1991 VIP benefits extended to special duty area pensioners.
- 1992 VIP benefits extended to income-qualified veterans under 65 years of age, veteran pensioners, overseas service veterans and merchant navy veterans.
- 1993 Access under VIP to adult residential care in community facilities discontinued for veterans seeking such care after 30 June 1993.
- 1994 Canada Service Veterans included in regulatory provision of regulations that protect eligibility of clients for VIP services when cost of such services reduces monthly income of clients below income ceilings established for WVA Program.
- 2001 VIP benefits extended, based on income level, to the following civilian groups who served overseas in wartime: the Newfoundland Forestry Unit; the Corps of (Civilian) Canadian Fire Fighters for Service in the United Kingdom; nursing aids and other members of the Canadian Red Cross and St. John’s Ambulance; Ferry Command personnel.

Military service pensioners granted access to VIP for pensioned conditions.
- 2003 Lifetime VIP housekeeping and grounds maintenance benefits extended to qualified survivors.

ANNEX VI

Synopsis on the Evolution of the Service Income Security Insurance Plan (SISIP) Long Term Disability (LTD) Insurance Program

(Source: SISIP Financial Services)

A Canadian Forces (CF) comprehensive study in the late 1960's concluded that CF personnel did not have sufficient financial protection against injuries or death non-attributable to military service. The families of CF personnel who lost their life while off-duty, or CF personnel who suffered a disability non-attributable to military service during their first 10 years of service, were left with little or no income. Similarly, widows of CF personnel with more than 10 years of service experienced a substantial reduction in family income depending on the length of service of their late spouse. Replacement income protection was clearly required for CF personnel against death or disability non-attributable to military service.

This requirement gave impetus to the birth of SISIP as a Non-Public Property administrative construct under the *National Defence Act*. At that time, the Chief of the Defence Staff approved the terms of reference for the Board of Trustees and William M. Mercer Ltd (Mercer) were retained as the consulting experts. Specifications for such a plan were developed and distributed to insurance companies who were requested to submit proposals to become the Insurer. The plan submitted by a consortium headed by The Maritime Life Assurance Company was selected. Subsequently, SISIP was introduced on 1 December 1969 as a voluntary CF member paid income protection against death and disability.

The initial policy provided coverage for a Survivor Income Benefit (SIB) in the amount of 50 percent of pay at release plus additional amounts for dependent children. The benefit was paid to the surviving spouse provided that the member's death was non-attributable to military service, as the *Pension Act* protected those whose death was attributable to military service.

A LTD insurance coverage was provided as well to cover CF personnel in the event that they would become totally disabled as a result of an injury or an illness non-attributable to military service. The LTD monthly benefit equalled 60 percent of the member's pay at release plus 5 percent for each dependent child, up to a maximum benefit of 75 percent. In addition, a guaranteed minimum benefit period would be paid in the event of an accidental dismemberment which would not be attributable to military service. For example, the loss of both hands or both feet would provide a monthly benefit for 3 years. If the member would be considered totally disabled after this guaranteed minimum benefit period, benefits would continue as long as the member would be totally disabled.

To keep the cost of the SISIP LTD premium as low as possible, particularly for junior military personnel, the LTD monthly benefit was reduced by amounts received under the Canadian Forces Superannuation Act (CFSA) and the Canada Pension Plan (CPP). Also, if a former CF member qualified for disability benefits under the PA, this person was not entitled to any SISIP LTD or accidental dismemberment benefits. This structure underlined the mandate of the *Pension Act* regarding the compensation of CF personnel who lose their life or are injured due to military service. If a former member was subsequently approved for benefits under the *Pension Act*, then these benefits including retroactive *Pension Act* benefits, would be offset against the SISIP benefit as well. SISIP LTD was also linked to the SIB in that CF personnel who had dependents had to be insured under both plans.

In 1971, the Board of Trustees discussed the complicated nature of the SISIP program and its integration with benefits from the CFSA, CPP and the insurance plan itself. The Maritime Life Assurance Company analysed cost estimates on different plan design alternatives which would eliminate the offsetting formula. These proposals were never acted upon, mainly because of the excessive premium increases required for the elimination of offsets. The Board of Trustees also discussed the integration of *Pension Act* benefits with SISIP, as former members were disqualified from receiving SISIP benefits if in receipt of *Pension Act* benefits. *Pension Act* benefits were paid in accordance with a schedule based on the severity of the injury or illness attributable to military service. Awards ranged from 5 percent to 100 percent of the maximum award. Therefore, if a member received a lower award, there would still be a dramatic drop in the post release income, especially if the former member did not qualify for a service pension under the CFSA. The integration of SISIP and *Pension Act* benefits was supported in March 1972, but it was not actually implemented until 1976, as explained later. Government participation to LTD premium was approved for 1 December 1971. At that time, the Treasury Board Secretariat commenced the payment of 50 percent of the LTD premium for all SISIP members.

In 1974, a report on the LTD program concluded that some claimants were reluctant to participate in the vocational rehabilitation program which could ultimately result in their LTD benefit being ceased indefinitely if they found employment. Therefore, an agreement was reached with The Maritime Life Assurance Company to implement a five-year waiver to the LTD policy so that any claimant who would rejoin the workforce could do so in confidence, having the assurance that benefits could be reinstated if their original disability reoccurred within that five-year period.

Renewed discussions also ensued about the integration of SISIP LTD benefit as it became increasingly evident that some disabled former CF members in receipt of *Pension Act* benefits were in need of additional income. As a result, in 1975, the Board of Trustees recommended that the SISIP LTD benefits be modified to provide benefit payments in the event of disability due to military service, but with *Pension Act* benefits being applied as a direct offset for reasons of equity and cost. This program took effect on 1 June 1976. Also in 1975, the LTD benefit was increased to 75 percent and the monthly increments applicable to dependent children were

eliminated. The Maritime Life Assurance Company took over as the provider of vocational rehabilitation services and developed a program specifically tailored to former military members.

On 1 May 1976, Reserve Force Class C members became eligible for SISIP LTD benefits.

In May 1980, Mercer advised the Board of Trustees that the LTD premium rate should be increased to protect the financial solvency of the LTD plan. During its ten year history, the LTD benefit had experienced an overall deficit of \$570,000. It was agreed that subject to the approval of Treasury Board, the LTD premium rate would be increased to .35 percent of earnings from .25 percent of earnings effective 1 January 1981. Mercer also underlined that, due to high inflation, the purchasing power of the LTD benefit was dramatically reduced. The Board of Trustees agreed to provide one time increases to the LTD benefit equal to 12.5 percent for those whose benefit commenced prior to 1980, and 7.5 percent for those whose benefit commenced in 1980.

In June 1981, after evaluating the Mercer report on the redesign of SISIP LTD, the Board of Trustees approved the following motions:

- a. Effective 1 January 1982, the LTD benefit was made available to the Regular Force and to the Reserve Force on Class C service without the condition that personnel and dependents must also enrol in the Survivor Income Benefit;
- b. Effective 1 January 1982, the LTD benefit was made available to serving CF members without evidence of insurability during the period of 1 January 1982 to 30 June 1982; and
- c. Effective 1 April 1982, the LTD benefit was made compulsory for all CF enrolees, and the Treasury Board assumed full governance of the SISIP LTD policy.

In 1983, Mercer observed that the total amount of the LTD benefit was taxable under the *Income Tax Act* although the premium was shared 50/50 with the employer. This situation was considered problematic as CF members paid their share of the LTD premium with after-tax dollars. However, if in receipt of the LTD benefit, former members would be taxed on the full amount instead of 50 percent of the payment. The Board of Trustees tasked the Director of Compensation Development to investigate the possibility of splitting the present plan and setting up a new LTD policy solely paid by CF personnel.

Based on the Director of Compensation Development's recommendations, the Board of Trustees moved that, subject to the approval of Revenue Canada and the Treasury Board, SISIP implement two new LTD plans: one to be an employer paid plan and the other an employee paid plan. This amendment would increase the overall take home pay due to the non-taxability of the benefit received under the employee paid plan. Two new policies were implemented as a result, Policy # 911104 and 911105. However, following subsequent discussions with the Treasury Board Secretariat, the split Regular Force LTD plans were discontinued in 1989. Nevertheless,

the LTD benefits paid to former CF members under these plans would be grandparented. In 1988, both the primary and dependent benefits under the *Pension Act* became offsets to the LTD benefit. Prior to this, only the primary *Pension Act* benefits were used as an offset.

On 1 July 1990, the Treasury Board Secretariat increased their share to 2/3 of the LTD premium and the member share was reduced to 1/3. On 1 September 1990, the Treasury Board Secretariat share increased again to 3/4 and the members' share reduced to 1/4. For those Senior Officers who were entitled to the General Officers' Insurance Plan (GOIP), Treasury Board Secretariat assumed 100 percent of the cost associated with the LTD coverage in January 1990. Finally, on 1 April 1993, the cost sharing arrangement for the LTD coverage was changed to 85 percent Treasury Board Secretariat and 15 percent CF personnel.

Several changes to the LTD were implemented in 1995. These changes included:

- a. The LTD benefit would be payable up to age 65 instead of for life;
- b. The reinstatement waiver period in the case of recurrence of total disability was reduced from 60 months to 36 months; and
- c. The major medical benefits were amended to parallel benefits available under the Public Service Health Care Plan (PSHCP).

A SISIP LTD program was introduced for the Primary Reserve Force on Class A and B service in 1991 under the CF Total Force concept. This program would pay, in the event of total disability, 75 percent of a deemed salary amount of \$2,000 per month reduced by other designated disability benefits. Subject to an income test, optional insured salary levels of \$3,000 and \$4,000 per month could be purchased at the reservist's full cost.

In 1998, the department proposed to Treasury Board Secretariat the implementation of a renewed LTD program for CF personnel. Both the Regular Force and the Primary Reserve LTD plans included an "any" occupation definition of total disability. This "any" occupation definition of total disability was more restrictive compared to the Public Service Disability Insurance Plan and the RCMP LTD plan which included an "own" occupation definition. As a result of the "any" occupation definition, the majority of personnel released from the CF for medical reasons did not qualify for any LTD benefits. This matter was generating considerable public concern as evidenced in the Senate Committee on National Defence and Veterans Affairs (SCONDVA) hearings.

The problem was that many CF personnel released for medical reasons required vocational rehabilitation for the transition to civilian employment, but they did not qualify for the LTD benefit and the integrated vocational rehabilitation program. By including an "own" occupation definition of total disability for the first two years and thereafter an "any" occupation definition, insured CF personnel released for medical reasons would qualify for LTD benefits for a minimum two year period. The claim could continue up to age 65 if the former member

qualified under the “any” occupation definition of total disability after the initial two year period. Further, it was proposed that the Treasury Board approve 100 percent funding of the Primary Reserve Force LTD coverage. About 80 percent of primary reservists did not avail themselves of LTD protection in other than operational deployment scenarios because their financial resources were limited. Also, once their operational mission was completed, they allowed this coverage to lapse. For this reason, the CF requested that full funding of the LTD premium be considered and that blanket coverage be provided to Primary Reserve Force personnel. Treasury Board approved the amendments to the SISIP LTD insurance plans and the full coverage for the Primary Reserve Force effective 1 December 1999. Since then, the number of claimants eligible to vocational rehabilitation has increased significantly.

Concerns regarding the offsetting formula for the LTD benefit were previously mentioned in this review. SISIP LTD pays the 75 percent income replacement benefit up front often before VAC and CPP adjudication processes are completed. As a result, *Pension Act* and CPP retroactive benefit payments create SISIP LTD overpayments leading to an unpleasant recovery process. It must be noted that SISIP LTD claimants sign a condition of benefits agreement acknowledging that they agreed to reimburse the overpayments of benefits.

This matter has become an even more major source of dissatisfaction with many CF members and former members since the approval of Bill C-41 in October 2000. Bill C-41 allowed the payment of *Pension Act* benefits to CF personnel while still serving. Before C-41, only CF personnel with *Pension Act* benefits attributable to service in a special duty area (SDA) could receive the *Pension Act* benefits and their pay while serving. For all others, the *Pension Act* benefit payments started after release. As a result of C-41, *Pension Act* benefits are added to military pay while serving, but after release, they are offset against the SISIP LTD benefit. Consequently, it is difficult to explain the consistency of subtracting *Pension Act* benefits from the LTD benefit when CF personnel can receive both *Pension Act* benefits and their pay while in uniform. Many CF personnel believe that *Pension Act* benefits are paid as a compensation for their impairment while the LTD benefit is paid as income replacement. As a result, they believe that *Pension Act* benefits should not be offset.

On 13 February 2003, the Treasury Board approved a new insurance coverage paid by the Department of National Defence which provides CF personnel with a lump sum benefit for accidental dismemberments attributable to military service. This lump sum benefit is not linked to the SISIP LTD benefit formula. As a result, the SISIP LTD accidental dismemberment benefit clause was amended to apply solely to injuries non-attributable to military service.

In 2002, on average, approximately 1,800 CF members received LTD benefits and 1,600 participated in the vocational rehabilitation program, while the SISIP LTD programs for the CF paid \$29.3 million dollars in disability benefits and vocational rehabilitation support.

ANNEX VII

Government of Canada Remembrance Policy **Canada Remembers: Canadian Service in Wartime** **and Peace Actions**

(Source: Canada Remembers Division, Veterans Affairs Canada)

“Lest We Forget”

Preamble:

We have raised a generation of Canadians who, with few exceptions, have not personally experienced the human cost of war. For this blessing of peace we owe more than we will ever know to our fallen, our veterans, those who served our country on the home front, and those who served and will serve our nation in the cause of peace and freedom. It is essential that their sacrifice and legacy be honoured year round. In so doing, we are ever mindful of the values associated with peace and the horrors brought upon us by war.

During the last century more than 87,000,000 people around the world have died as a direct consequence of war and conflict. The numbers of wounded or otherwise afflicted are beyond measure. Canada's loss is equally staggering. Of the 2,000,000 Canadians who bravely served our nation in the wars and conflicts of the 20th century, 229,500 were wounded and another 114,000 died and are buried in foreign soil.

The numbers are so vast that they are incomprehensible on a human scale. We aim to bring these horrific numbers down to a personal level in our Canadian and international memorials; in the local, provincial and national monuments that list the names of those who served and died; in the cemeteries filled with row upon row of grave markers as far as the eye can see, and in the names of those who died, listed for all to see in the pages of our national Books of Remembrance. In these physical reminders, we commemorate not only their individual sacrifice, but that of their family and their community.

Following the Second World War, with the creation of the United Nations, Canada assumed a leadership role in the world community as a country committed to peaceful resolution of disputes and ongoing maintenance of peace. More than 110,000 Canadians have already served around the world in ongoing efforts to promote freedom and to maintain world peace.

Canada began the new millennium with a renewed commitment to remembrance as symbolized by the creation of the Tomb of the Unknown Soldier at the National War Memorial in Ottawa. Just as the Tomb stands as a powerful reminder of the Canadian sacrifice and commitment to peace and justice in the past, present, and future, this policy provides a basis for the Government of Canada to ensure that

all those who served the country during wartime, and all those who served and will serve Canada in the creation and preservation of peace will be appropriately remembered and honoured.

Canada committed to this remembrance in perpetuity as Canadian troops prepared to enter the battle at Vimy Ridge on April 9, 1917. The Prime Minister promised then that “the government and the country will consider it their first duty to prove its just and due appreciation of the inestimable value of the services rendered to the country and empire” and that none “will have just cause to reproach the government for having broken faith” with those who fought and those who died.

Throughout the 20th Century, Canada has been a world leader in the provision of health care and economic support to its veteran population. As their numbers rapidly decline, veterans are becoming increasingly concerned that their legacy not be forgotten. The challenge for the Government of Canada, and indeed for all Canadians, is to demonstrate the same leadership in remembrance that has been shown for the health and well-being of veterans and their families.

This policy is, therefore, intended to encourage Canadians to demonstrate a sense of gratitude and appreciation for those whose service contributed to the development of peace in our nation and to engage the youth of Canada in active exploration of their history and heritage: thereby inspiring Canadians of all backgrounds and interests, all walks of life and all ages, to remember.

As Canada continues to uphold the universal values of peace, truth, justice, freedom and knowledge, the values personified on the Canadian War Memorial at Vimy Ridge, this policy will guide the Government of Canada in its ongoing commitment to the preservation of these universal values and to the memory of the hundreds of thousands of people who have served and will continue to serve our country:

“They shall grow not old, as we that are left grow old:
Age shall not weary them, nor the years condemn.
At the going down of the sun and in the morning
We will remember them.”¹

Policy Objective

The Government of Canada recognizes that it is in the public interest to provide a clear statement of its policy regarding remembrance of Canadian service in wartime and peace actions. For the purposes of this policy, remembrance is defined as honouring and commemorating the sacrifices, achievements and legacy of those who served in Government of Canada sanctioned wars, conflicts, peacekeeping and aid missions, in both military and civilian capacities.

¹From ‘For the Fallen’ by Lawrence Binyon, written in 1914.

The primary objective of this policy, therefore, is to reaffirm that Canada will always remember the contributions and sacrifices of the fallen, the veterans, those who served our country on the home front, and those who served and will continue to serve our nation in the cause of peace throughout the world.

The policy will focus on the remembrance of Canadian service in post-Confederation (1867) wars, conflicts, peacekeeping and aid missions officially sanctioned by the Government of Canada.

Policy Statement

Canada is a model to the world of peace and democracy, a country built on collective achievements, shared experiences and bonds of mutual understanding and respect. Acts of remembrance enhance our shared sense of citizenship and its duties, help Canadians strengthen their sense of community and gain a better understanding of themselves, give support to those who are entrusted with national security, reaffirm Canada's legacy, and highlight Canada's role in world affairs.

To provide for the continuous remembrance and honouring of the sacrifices and achievements of all those who served the country during wartime, and all those who served and will serve Canada in the creation and preservation of peace, it is the policy of the Government of Canada, in perpetuity to:

- **engage citizens**, individual veterans and service members, veterans' and peacekeepers' organizations, local groups, and all levels of government in acts of remembrance and in participation in ceremonies, pilgrimages, cultural events, and other projects, and to support local efforts in the restoration of local monuments and memorials;
- **support the preservation and presentation of international and national memorials and monuments** which stand as a silent reminder that Canadians will not forget, including overseas Battlefield Memorials and Monuments that mark the very ground where Canadians and Newfoundlanders fought and died; and to acknowledge the contribution of individuals and groups for all time by visibly portraying for all Canadians the names of those who have sacrificed their lives in military service and by maintaining specified graves, grave markers and cemeteries; and
- **support remembrance through public information and research** so that all Canadians, and particularly young Canadians, develop an appreciation of the history, contribution and legacy of all those Canadians who have served their country in times of war and peace; and to support the gathering, preservation and interpretation of the historical record for the purpose of knowing and understanding the actions of our military past.

Application

This policy applies to all federal government departments and agencies with particular emphasis on the specific departments [or their successors] whose roles and responsibilities have been included as part of this policy.

Primary responsibility for supporting the implementation of this policy rests with the Minister of VA, in consultation with other federal government departments, the Canadian War Museum, veterans' organizations, the private sector, and local groups and individuals.

The Canadian Government encourages other levels of government in Canada, including provinces, territories, and municipalities, and organizations in the voluntary and private sectors to apply the principles of this policy in their own areas of jurisdiction or involvement.

This policy reaffirms the responsibility of the Government of Canada to provide ongoing resources to the Commonwealth War Graves Commission for its official work as specified by existing Orders in Council. The Government of Canada also reaffirms Canada's agreement with the Commonwealth War Graves Commission that the bodies of soldiers who were buried abroad prior to 1970 will continue to lie where they are buried; and that those who fell after that date would be buried either abroad or at home, depending upon the wishes of the family.

Policy Requirements

- A government advisory council, chaired by the Deputy Minister of VAC, and including senior representatives of appropriate federal government departments and agencies, will meet regularly to provide advice and guidance to the Minister on remembrance;
- Ongoing liaison with provincial ministries will be maintained when and where appropriate, in any area in which remembrance touches upon matters of provincial responsibility;
- Local involvement, input and opinions, and individual support, financial support and support-in-kind will be encouraged from the private sector, local groups, veterans' associations, and others.

Monitoring

Compliance with this policy will be monitored by the Deputy Minister, Department of VAC, through the Advisory Council.

References

This policy is issued under the commemorative mandate of the Government of Canada. This mandate is established under existing Government of Canada Acts, Orders in Council, and Regulations.

Enquiries

Enquiries concerning the interpretation of the policy or the intent and implementation of this policy should be directed to the Department of VAC, Charlottetown, Prince Edward Island.

Appendix to Annex VII: Roles and Responsibilities of Federal Departments and Agencies

The following federal government departments and agencies all have an active responsibility in providing remembrance-related services. Their roles with regard to remembrance are outlined in this appendix.

Veterans Affairs Canada

The legislative mandate for the commemorative component of VAC flows from the *Department of Veterans Affairs Act*, section 4 and from PC 1965-688 General Commemoration Order and other related Orders in Council. The commemorative mandate, as expressed in its Mission Statement is “to keep the memory of their [veterans, other clients, and their families] achievements and sacrifices alive for all Canadians.”

Veterans Affairs Canada is responsible to:

- Provide leadership among federal government departments in the remembrance of the service of Canadians in the cause of international peace and freedom;
- Provide encouragement and guidance to other levels of government and other organizations whose responsibilities include the remembrance of Canadian and Newfoundland veterans and service members;
- Maintain primary responsibility for remembrance policy and the Canada Remembers Program through the Minister of VA;
- Chairs the Advisory Council on remembrance of Canadian service in war and peace;
- Prepare ongoing strategic plans for remembrance;
- Prepare, produce and provide information and support materials related to those service members who served Canada overseas and on the home front in the post-Confederation [1867] wars and conflicts, peacekeeping and aid missions;
- Promote citizen engagement in remembrance activities both at a national level and through regional remembrance program delivery;
- Organize commemorative ceremonies and events to honour officially designated periods of remembrance year round across Canada;
- Build knowledge and skills capacity in remembrance programming calling upon the expertise of other government departments and stakeholders in this regard as required;
- Ensure care and maintenance of grave markers and cemeteries of those who died in military operations in the service of Canada both overseas and in Canada;
- Ensure maintenance, preservation and presentation of Canada’s international monuments and memorials and battlefields;
- Organize and participate in appropriate, official ceremonies and pilgrimages both internationally and in Canada whose primary purpose is commemorative, alone or in conjunction with other federal government departments, other groups or other organizations;

- Present and maintain the Books of Remembrance and co-ordinate with the House of Commons for their official updating and display;
- Issue designated, delegated, and closed service medals, awards and honours;
- Coordinate use of the site at the National War Memorial;
- Administer the veterans funeral and burial program.

Canadian Heritage Portfolio

Through the Canadian Heritage Portfolio, the Government of Canada plays a vital role in the preservation and promotion of Canada's heritage and culture. Guided by its mission to strengthen and celebrate Canada, the Canadian Heritage Portfolio has a broad scope of responsibilities, from Canadian identity and values, cultural development, arts, and heritage, to areas of natural and historic significance. The Portfolio includes both the Department of Canadian Heritage and a number of independent partner agencies with a specific focus. Collectively they provide support for the literary, visual and performing arts, for sports, broadcasting, film, new media, national parks, historic sites, museums and archives, and more. Through a variety of programs, the Department of Canadian Heritage also supports the creation and distribution of works with commemorative content.

The Department of Canadian Heritage and its independent partner agencies:

- Participate in organizing and delivering commemorative events and ceremonies at sites in the National Capital Region and other national historic sites;
- Advise on protocol for events and ceremonies;
- Conduct research on Canada's military and peacekeeping history collected by the Canadian War Museum, the Parks Canada Agency, the National Archives of Canada and the National Library of Canada;
- Develop programs and products presented by the Canadian War Museum, including museum tours, school visits, information kits and Web site content;
- Provide funding to assist the development of Canadian Studies learning materials and promote knowledge about the field of Canadian studies, including our military history through the Canadian Studies Program- Canadian Identity Sector;
- Preserve and present artifacts and records which document Canada's military past in order to sustain, honour and communicate about veterans;
- Engage in activities that ensure the long-term survival of the documentary evidence (acquisition, preservation, restoration, storage) and that promote Canadians' access to these treasures (description, interpretation, exhibitions, loans, digitization);
- Support the work of non-federal museums to preserve and present military artifacts through financial support from the Museums Assistance Program;
- Protect against the illegal export of cultural property and provide financial support to qualified institutions to retain cultural property in Canada, and play a role in administering tax incentives to encourage Canadians to donate or sell important objects to public institutions in Canada;

- Co-ordinate the production of heritage content for a collaborative Internet initiative titled the Virtual Museum of Canada, through the Canadian Heritage Information Network, a Special Operating Agency of the Department.
- Undertake research, disseminate knowledge, promote the preservation of local heritage resources and provide expert services regarding the care and conservation of military artifacts through the Canadian Conservation Institute (CCI), a Special Operating Agency of the Department of Canadian Heritage;
- Designate persons, sites, events of national significance upon recommendation by the Historic Sites and Monuments Board of Canada;
- Produce, distribute and present cultural products and artistic works with commemorative themes/subjects through Portfolio agencies such as the Canadian Broadcasting Corporation, the National Film Board and the National Arts Centre, the Canada Council of the Arts and the Department of Canadian Heritage.

Canadian War Museum

The Canadian War Museum (an affiliate museum of the Canadian Museum of Civilization) is responsible to:

- Act as a centre for research and the dissemination of information and expertise on all aspects of the country's military past from the pre-contact era to the present;
- Preserve the artifacts of Canadian military experience and interpret them for present and future generations;
- Advance the professional study of Canadian military history, including the effects of war and conflict on the nation and all its citizens.

National Capital Commission

The National Capital Commission (NCC), in consultation with federal and regional government departments is responsible to:

- Review proposals received from sponsoring groups for new commemorations on federal lands in the national capital region to ensure they meet the selection criteria outlined in the NCC's Commemorations Policy;
- Facilitate approved commemorative projects, offer a site on federal land in the national capital region and provide the expertise of its landscape architects and art curators;
- Ensure proper maintenance of commemorative structures on NCC land.

National Archives of Canada

The National Archives of Canada is responsible to:

- Preserve and provide access to nationally significant historical records relating to Canada's military history, including the service records of Canadian Forces personnel;
- Verify information regarding service for individuals included in the Books of Remembrance.

Parks Canada Agency

The legislative mandate of the Parks Canada Agency flows from the *Parks Canada Agency Act*, and from the legislation (such as the *Historic Sites and Monuments Act*) listed in Part 1 of the Schedule to the *Parks Canada Agency Act*. The Agency's mandate, as expressed in its Guiding Principles and Operational Policies is, "To fulfill national and international responsibilities in mandated areas of heritage recognition and conservation; and to commemorate, protect and present, both directly and indirectly, places which are significant examples of Canada's cultural and natural heritage in ways that encourage public understanding, appreciation and enjoyment of this heritage, while ensuring long-term ecological and commemorative integrity."

The Parks Canada Agency is responsible to:

- Carry out programs relating to the designation and marking of national historic sites, national historic persons and national historic events on behalf of the Minister of Canadian Heritage;
- Provide research and administrative support to the Historic Sites and Monuments Board of Canada;
- Ensure the commemorative integrity of national historic sites under the Minister's direction and control, and provide support to other owners of national historic sites in respect of commemorative integrity;
- Carry out public programming using a variety of media to celebrate and communicate the significance of national historic sites, national historic persons and national historic events.

Department of Foreign Affairs and International Trade

The Department of Foreign Affairs and International Trade is responsible to:

- Provide advice and counsel in co-ordinating international ceremonies and events related to commemoration activities for Canadian Government representatives abroad and for visiting dignitaries in Canada;

- Publicize, in conjunction with the Department of National Defence (DND) and the Solicitor General, Canadian peacekeeping and emergency relief operations conducted by the Canadian Forces, the Royal Canadian Mounted Police and other regional police forces;
- Disseminate information on international commemoration activities in which departmental officials from Canada, and in missions abroad, take part.
- Publish historical records, documents and narratives on diplomatic negotiations related to participation in wars and in peacekeeping;
- Publicize historical accounts related to Canada's diplomatic and international relations on the departmental web site The Department in History;
- Conduct outreach activities (exhibits program, speakers program, goodwill ambassadors program, tours of the Department of Foreign Affairs and International Trade) that, in part, highlight the contribution of Canadian peacekeepers;
- Announce and present, in co-ordination with DND, the awarding of peacekeeping medals to Canadian Forces personnel serving overseas.

Department of National Defence

The Department of National Defence is responsible to:

- Provide operational support within capabilities for both domestic and overseas commemorative ceremonies and events;
- Provide advice with regard to the correct implementation of military protocol and participate in ceremonies and events by following customary military procedures as required and as able to support such ceremonies and events;
- Provide to the public and other government departments and agencies, in keeping with legislative requirements, access to historical records;
- Provide advice and guidance to accredited Canadian Forces museums in keeping with their mandate to collect, protect and preserve Canada's military heritage;
- Assist in providing photographic work and other support to the House of Commons for the Books of Remembrance.

House of Commons [Office of the Speaker of the House]

Under the authority of various memoranda, decisions and established precedents, the House of Commons has the responsibility to:

- Co-ordinate with VAC in the preservation, presentation, display, update and maintenance of the Books of Remembrance;
- Co-ordinate with VAC in the development of new Books of Remembrance as required;

- Maintain the Memorial Chapel and conduct the official ceremony of the turning of the pages of the Books of Remembrance in the House of Commons;
- Provide facsimile pages from Books of Remembrance on request to members of the public.

Office of the Governor General

The Office of the Governor General is responsible to:

- Plan and coordinate with relevant federal departments and agencies, and administer the involvement of the Governor General at annual Remembrance ceremonies and at other events domestically and internationally honouring participants in peacekeeping and aid missions;
- Administer, on the basis of interdepartmental agreements, the issuance of certain existing honours and awards for veterans and service members;
- Review proposals for the creation of new honours involving veterans via the Honours Policy Committee;
- Assist in the creation of special commemorative distinctions honouring theatres of war, historic military programs or other events through the Canadian Heraldic Authority.

Public Works and Government Services Canada

The Department of Public Works and Government Services Act, Chapter P-38.2 [1996, c.16] stipulates that the Department shall operate as a common service agency for the Government of Canada directed mainly towards providing departments, boards, and agencies with services in support of their programs. As such, Public Works and Government Services Canada:

- Provides design and technical expertise, services and advice related to the planning, development, operations and maintenance of battlefield memorials, cemeteries and related heritage assets in support of the federal government's commemorative goals;
- Provides advice, coordination and contracting services related to commemorative interpretation programming;
- Acts as custodian and/or maintains certain monuments, memorials and other public commemorative sites.

Royal Canadian Mounted Police

In partnership with the other government agencies involved with Canada Remembers, the RCMP will:

- Participate in commemorative events deemed appropriate to preserve the memory of the accomplishments and the sacrifices of its members and its veterans;
- Provide advice on the correct protocol to be used in commemorative events in alignment with the regimental traditions of the Force;
- Provide to other agencies and the public information on the historical context of the participation of the RCMP in military and peacekeeping and peace building operations;
- Accord information and recognition as appropriate in connection with Canada Remembers in the RCMP museum and other exhibits and displays;
- Liaise with other Canadian police forces who have participated in peacekeeping and police building operations overseas when appropriate to invite their participation in commemorative events.

ANNEX VIII

Changes in Allied Veterans Benefits

Canada, like many of its allies, has recognized that the dramatically different support needs of those who seek a career in modern, voluntary, professional military organizations require tailored responses. Increasingly it has been realized that these approaches must take into account the nature of modern military operations and their effects, embrace the complex needs of military families, reflect best practices in disability and case management, and be congruent with evolving social values. While Canada has been developing new approaches to its veterans programs and services, Australia and the United Kingdom have also been making comprehensive changes to their systems of veterans benefits.

Australia

During a 1996 army training exercise, two Australian Black Hawk helicopters collided, causing the death of 18 soldiers and injuries to 12 others. The Board of Inquiry that resulted, in addition to making findings related to the accident itself, found that parts of the existing peacetime rehabilitation and compensation scheme for the Australian Defence Force were inappropriate.¹

As a result of further inquiries on the subject, Mr. Noel Tanzer, a former Secretary of the Department of Veterans Affairs, was appointed to conduct a review of the military compensation scheme in Australia and asked to develop options for a new self-contained scheme. The Tanzer review involved extensive consultation with ex-service organisations, the Australia Defence Force, various Government Departments and a wide range of interested individuals and organizations.

The Tanzer Review reported that the existing compensation scheme was far too complex to administer and fostered client confusion regarding entitlements. It concluded that the existing scheme did not appropriately meet the compensation and rehabilitation needs of a modern defence force and that a new one should be developed.

Mr. Tanzer recommended that the new scheme should apply to all military service, both in Australia and overseas, provide a better focus on specific military service requirements and take a more integrated approach toward the management of safety, rehabilitation, resettlement and compensation issues. It should be based on the best practice principles and attributes of a modern compensation system, with an appropriate emphasis on prevention and rehabilitation. It would promote a more integrated approach to injury prevention and management in the Defence Force,

¹ Minister for Defense Media Release, "Black Hawk Board of Inquiry - Defense Flying Safety Authority & Monthly Report on Implementation Plan" dated March 6, 1997

and provide for a closer integration of measures that address safety, rehabilitation, resettlement and compensation. This would be an entirely new scheme and would apply from the date of approval onwards, although entitlements under the former scheme would be preserved for existing recipients and those who could establish their eligibility in relation to an injury that occurred prior to the commencement date of the new scheme.

A significantly revised program along the lines Mr. Tanzer recommended was duly developed by the Australian government. The new scheme will provide lump sum compensation for death and injury, with income support – based on pre-injury earnings and provided until retiring age – for those who are incapacitated for work. Attendant care, household services, as well as car and home modifications, will be provided. The revisions place an emphasis on rehabilitation and incentives for return to work, with vocational rehabilitation featuring prominently in new arrangements. For those who are discharged, health care and treatment for accepted compensation conditions will continue for life. The new scheme eliminates much of the complexity and confusion found in former compensation arrangements.

On 27 June 2003, the Hon. Danna Vale, Australia's Minister for Veterans' Affairs and Minister Assisting the Minister for Defence, unveiled the *Military Rehabilitation and Compensation Bill 2003*, which is designed to give effect to the new program. It was described by the Chief of the Defence Force, General Peter Cosgrove, as "the first compensation scheme in the ADF's history to specifically deal with the special nature of military service in all its forms, warlike, non-warlike and peacetime."²

The United Kingdom

Since a 1990 government report on the efficiency of war pensions recommended efforts to consolidate and streamline their administration, numerous initiatives have been taken in the United Kingdom to better address veterans' needs. A separate War Pensions Agency was established in 1994, under the direction of the Department of Social Security. The Agency was transferred to the Ministry of Defense as part of a government restructuring program announced in 2001, and renamed the Veterans Agency. At the same time, the first Minister for Veterans, the Hon. Dr. Lewis Moonie, was appointed as a junior minister within the Ministry of Defense. The new Minister would be responsible for ensuring that veterans issues were properly understood, appropriately prioritised and effectively addressed across the government.

At the same time, the government launched a comprehensive, cross-government "Veterans Initiative", in partnership with United Kingdom veterans' organizations. Its aim, simply put, was to better address the needs of the country's veteran community. The Initiative's three priorities were: to pull together the Government's response to issues affecting Veterans that cut across Government departments; to ensure

² The New Military Rehabilitation and Compensation Scheme. Message from the Chief of the Defence Force, at: <http://www.defence.gov.au/dpe/militarycompensation2003/>

lessons learnt are absorbed into the Ministry of Defense's policies for Service personnel; and to improve communication by publicizing the assistance offered to veterans by various levels of government and by giving veterans' organizations the opportunity to represent their collective and individual concerns to Government at the Ministerial level.³

Under the Initiative, a Veterans Task Force, consisting of representatives from veterans' organizations and nine affected government departments, developed a strategic action plan to address veterans' concerns. The development of more detailed action plans was assigned to nine representative working groups, which considered issues like a pension and compensation review, better addressing the resettlement needs of the most vulnerable discharging service personnel, improving long-term care for veterans, investigating the merits of a veterans' identity and benefit card, enhancing veteran recognition and developing partnerships between veterans' organizations and the government. These groups concluded their initial work in July 2003.

Drawing from this work, on 25 March 2003, the Minister for Veterans launched a *Strategy for Veterans*. It outlined a three-pronged approach to meeting veterans' needs, designed to ensure "that veterans receive recognition for their contribution to society, excellent preparation for a successful transition to civilian life following service, and support from the Government and voluntary sector where needed."⁴

Consultation with veterans' organizations and serving members of the Armed Forces, together with a series of recommendations made by the House of Commons Defense Committee in 2002, led to the development of new Armed Forces Pension and Compensation Schemes, which were announced by the Minister for Veterans, the Hon. Ivor Caplin, on 15 September 2003. According to the Minister, "the new schemes are designed to be fairer, to reflect modern practice and to meet the needs of the Armed Forces in the 21st century, and offer a high level of assurance for Service personnel... It is fair, transparent, simple to understand and offers consistent outcomes, with more focus on the more severely disabled. It is a no-fault scheme."⁵

The program will apply to all new entrants to the Armed Forces as of 6 April 2005, although those already serving will have the opportunity to opt-in to the new scheme should they wish before April 2007. The new scheme would depart from previous practice, in providing the same benefits for officers and those in the enlisted ranks. The "death-in-service" benefit for survivors would increase from 1.5 to 4 times the pensionable pay of the deceased member, widows pensions would increase by

³ *Strategy for Veterans*, Ministry of Defense, 2003, p. 3

⁴ *Ibid.*, p. 9

⁵ Written Ministerial Statement – Monday 15 September 2003. The New Armed Forces Pension and Compensation Schemes. The Parliamentary Under-Secretary of State for Defense (Mr. Ivor Caplin).

25 percent, and survivor's benefits would be extended to common law and same sex partners. A new three-tier program of benefits was introduced for non-attributable ill health, ranging from gratuities awarded for minor disablement to a minimum pension guarantee valued at 20 years' service on discharge for the most severely disabled. Unlike previous arrangements, the scheme would provide in-service lump sum awards for pain and suffering, including for injuries resulting from warlike activities. Rights of redress will be provided through the independent Pensions Appeal Tribunal and the Social Security Commissioners, to applicants who believe that their claims have not been handled fairly by the Ministry of Defense.⁶

The United States

The Department of Veterans Affairs was established on 15 March 1989, succeeding the Veterans Administration. It is responsible for providing federal benefits to veterans and their dependents and is headed by the Secretary of Veterans Affairs. Of the 26 million veterans currently alive, nearly three-quarters served during a war or an official period of conflict. About a quarter of the nation's population, approximately 70 million people, are potentially eligible for Veterans Affairs benefits and services because they are veterans, family members or survivors of veterans.

In December 2003, President George W. Bush signed the *Veterans Benefits Act* of 2003, a bill which authorizes \$1 billion over the next ten years for new and expanded benefits for disabled veterans, surviving spouses, and children. The *Veterans Benefits Act* of 2003 will:

- Allow the department of Veterans Affairs to provide specially adapted housing grants to severely disabled servicemembers prior to their separation from active duty service.
- Increase the specially adapted automobile and housing grants.
- Restore Dependency and Indemnity Compensation (DIC), Department of Veterans Affairs home loan guarantee, and education benefit eligibility for spouses remarried after age 57, and burial eligibility for all remarried spouses.
- Increase monthly educational benefits for spouses and dependent children of disabled veterans.
- Expand benefits eligibility to children with spina bifida who were born to certain Vietnam-era veterans who served in Korea near the demilitarized zone.
- Allows the surviving spouse or dependent children to receive the full amount of accrued benefits if the veteran dies while their claim is still pending.
- Eliminate the 30-day requirement for Prisoners of War to qualify for presumptions of service-connection for certain disabilities: psychosis, any of the anxiety states, dysthymic disorder, organic residuals of frostbite, and post-traumatic osteoarthritis.

⁶ Written Ministerial Statement – Monday 15 September 2003. The New Armed Forces Pension and Compensation Schemes. The Parliamentary Under-Secretary of State for Defense (Mr. Ivor Caplin).

- Provide full compensation and DIC to members of the new Philippine Scouts if the individual resides in the United States as a citizen or permanent resident and also extends eligibility for burial in a national cemetery.
- Expand the *Montgomery GI Bill* program to cover self-employment training programs of less than six months and entrepreneurship courses at approved institutions.
- Allow federal agencies to create “sole-source” contracts for disabled veteran-owned small businesses – up to \$5 million for manufacturing contract awards and up to \$3 million for non-manufacturing contract awards.
- Allow federal agencies to restrict certain contracts to disabled veteran-owned small businesses if at least two such concerns are qualified to bid on the contract.
- Mandate that the Department of Labor place staff in veterans’ assistance offices at overseas military installations 90 days after date of enactment.

Approximately 215,000 to 225,000 people are discharged from the military each year. The Department of Veterans Affairs has a long history of special efforts to bring information on veterans’ benefits and services to active duty military personnel. These efforts include counselling about VA benefits through the Transition Assistance Program, a nationally coordinated federal effort to assist military men and women to ease the transition to civilian life through employment and job training assistance. A second component of the program, the Disabled Transition Assistance Program, helps servicemembers separated for medical reasons.

While the Transition Assistance Program and Disabled Transition Assistance Program are the centerpieces, the broader definition encompasses pre-separation and retirement briefings, outreach to Reserve and National Guard units, and liaison and counseling services with various military post activities such as personal affairs, community affairs, and education offices. The Department of Veterans Affairs also operates a growing Benefits Delivery at Discharge program that assists service members at 128 participating military bases with development of Veterans Affairs disability compensation claims prior to their discharge. This fosters continuity of care between the military and Department of Veterans Affairs systems and speeds up the processing of veterans’ application for compensation.

The Department of Veterans Affairs and the Department of Defense are committed to increasing collaborative and sharing activities between the Departments. This commitment is embodied in the work of the three joint councils established to facilitate collaborative initiatives and the workgroups and task forces that have emerged from them. Additional efforts to enhance cooperation and collaboration between the Departments have been initiated by individual offices/interest groups. At the current time there are three primary joint councils:

- a. Joint Executive Council (JEC), chaired by the Deputy Secretary of Veterans Affairs and the Under Secretary of Defense for Personnel and Readiness;
- b. Health Executive Council (HEC), chaired by the Department of Veterans Affairs’ Under Secretary for Health and the Assistant Secretary of Defense for Health Affairs;
and

- c. Benefits Executive (BEC), chaired by the Department of Veterans Affairs' Under Secretary for Benefits and the Assistant Secretary of Defense for Force Management

The *Servicemembers Civil Relief Act* is expected to be signed in early 2004. This legislation will help lessen personal financial and legal burdens service members and their loved ones may face at home while they are on active duty in Iraq, Afghanistan, or other locations around the world.

The *Servicemembers Civil Relief Act*, contains dozens of provisions to assist soldiers, sailors, airmen, and marines in managing their financial and legal obligations while they are away from home on active duty. Specific provisions of this Act will:

- Expand current law that protects service members and their families from eviction from housing while on active duty due to nonpayment of rents that are \$1,200 per month or less. Under the new provisions this protection would be significantly updated to meet today's higher cost of living – covering housing leases up to \$2,400 per month – and then be adjusted annually to account for inflation.
- Provide a service member who receives permanent change of station orders or who is deployed to a new location for 90 days or more the right to terminate a housing lease.
- Clarify and restate existing law that limits to 6 percent, interest on credit obligations, including credit card debt, for active duty service members.
- Update life insurance protections provided to activated Guard and reserve members by increasing from \$10,000 to \$250,000, the maximum policy coverage that the federal government will protect from default for non-payment while on active duty.
- Prevent service members from a form of double taxation that can occur when they have a spouse who works and is taxed in a state other than the state in which they maintain their permanent legal residence. HR 100 will prevent states from using the income earned by a service member in determining the spouse's tax rate when they do not maintain their permanent legal residence in that state.⁷

⁷Information on changes in veteran benefits in the United States provided by Christine Lecuyer, Director Foreign Countries Operations, and Violet Parker, Veterans Affairs Canada/ Department of National Defence Liaison Officer, Veterans Affairs Canada, 23 January 2004

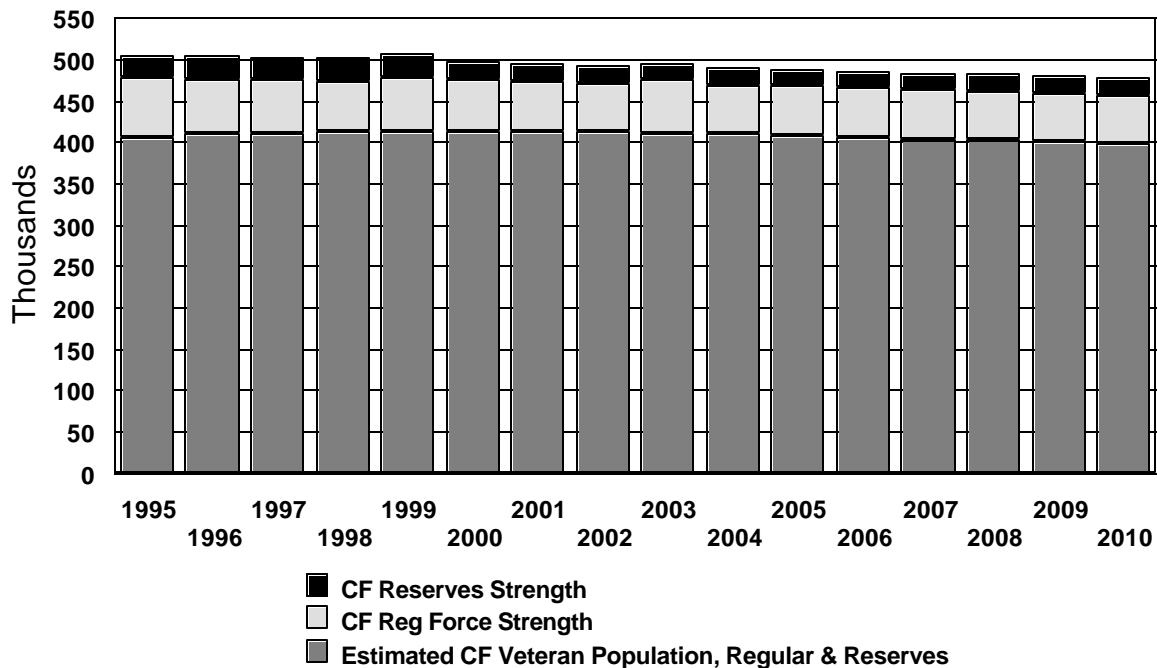
ANNEX IX

A Statistical Overview of Veterans Affairs Clients

(Source, Figures 1 - 8: Statistics Directorate, Veterans Affairs Canada)
(Source, Figure 9: Department of National Defence)

Figure 1: Total Eligible Canadian Forces Veteran Population

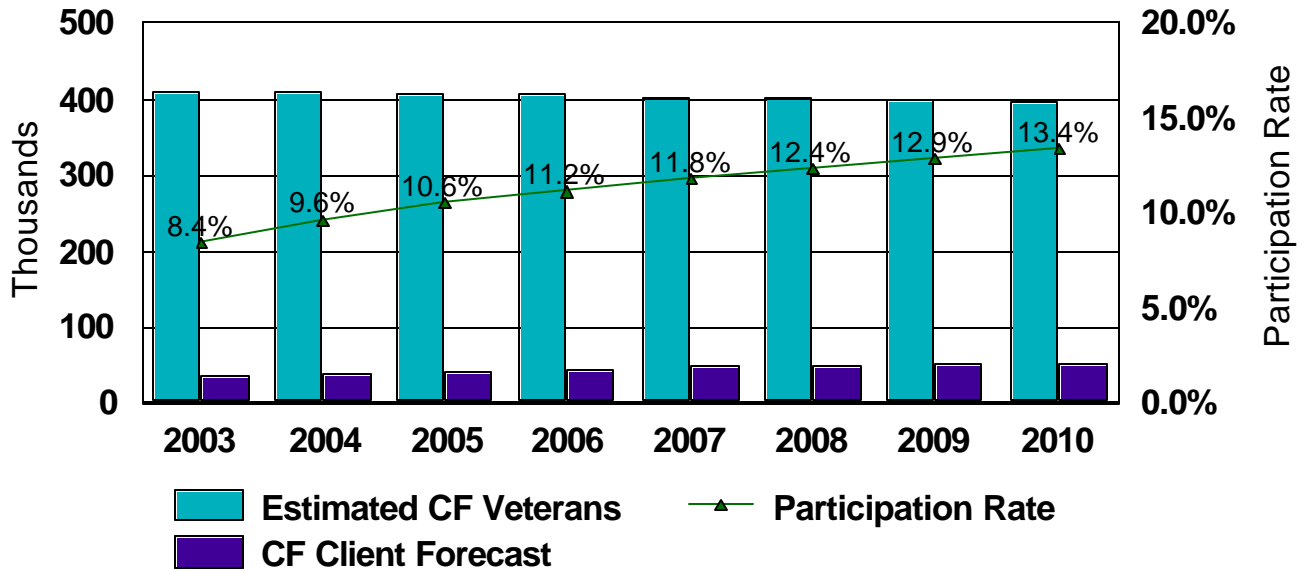
Statistics Canada sources provide a reliable estimate of the War Service veteran population. However, there is limited data specific to Canadian Forces (CF) veterans.



This CF veteran population estimate is based on:

- DND administrative data of releases from the CF Regular and Reserve forces from 1955 to 2003;
- Releases are aged forward and mortality rates applied; and,
- Adjusted for criteria to identify former CF members as Veterans

Figure 2: CF veteran participation in Veterans Affairs programs and services



Figures include former & current members of the Regular and Reserve Forces who have served in Special Duty Areas, but excludes Supplementary Reserves who are counted in other population groups.

Figure 3: Veterans Affairs intake from DND Releases

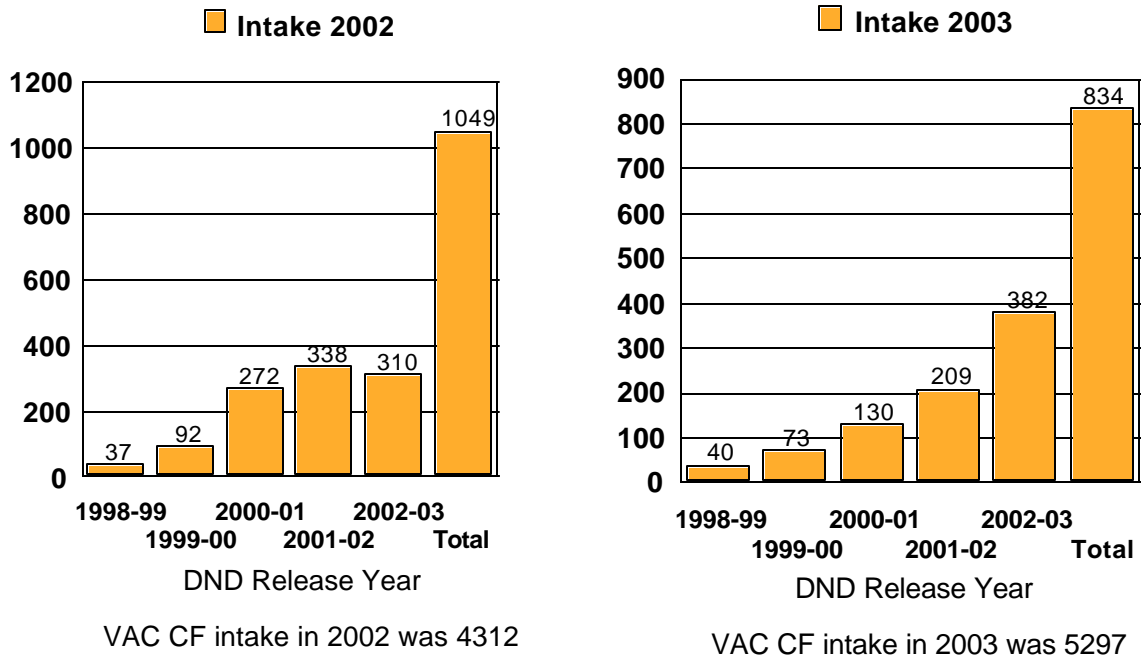


Figure 4: Veterans Affairs clients by type*

*Figures for 1995 to 2003 are actual. Remainder are forecast.

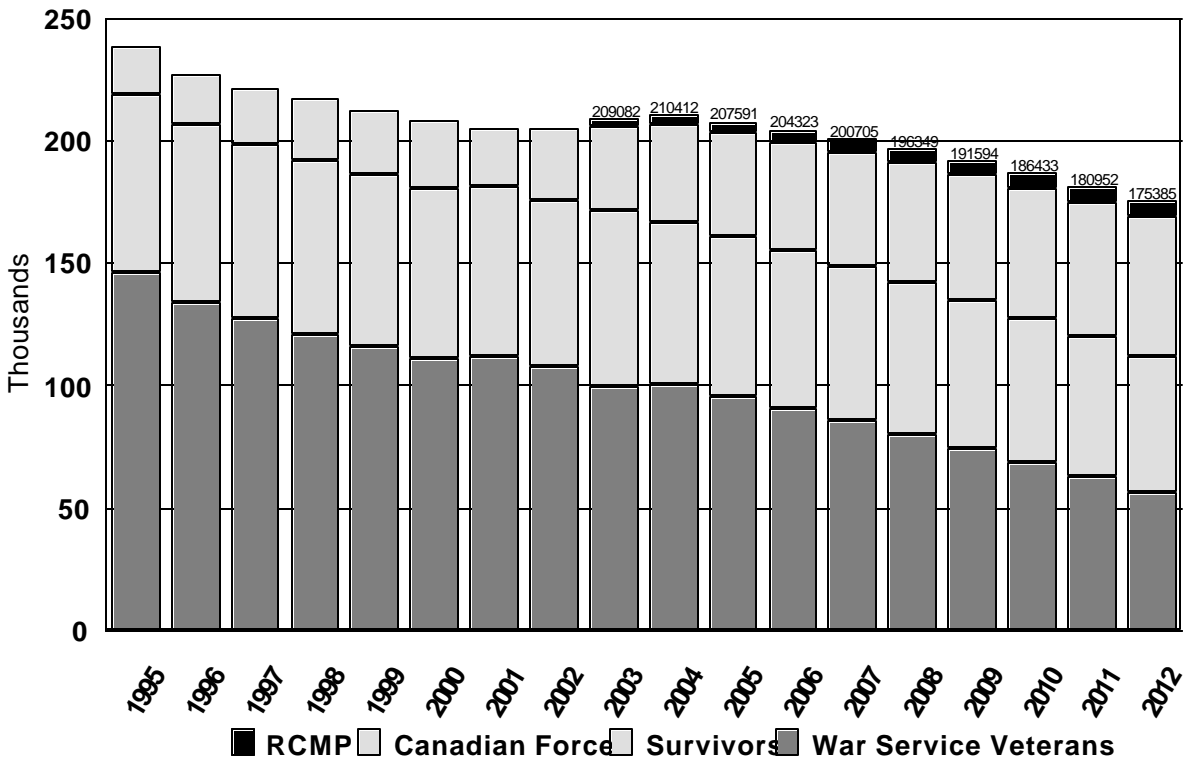


Figure 5: Unique Veterans Affairs Client Composition

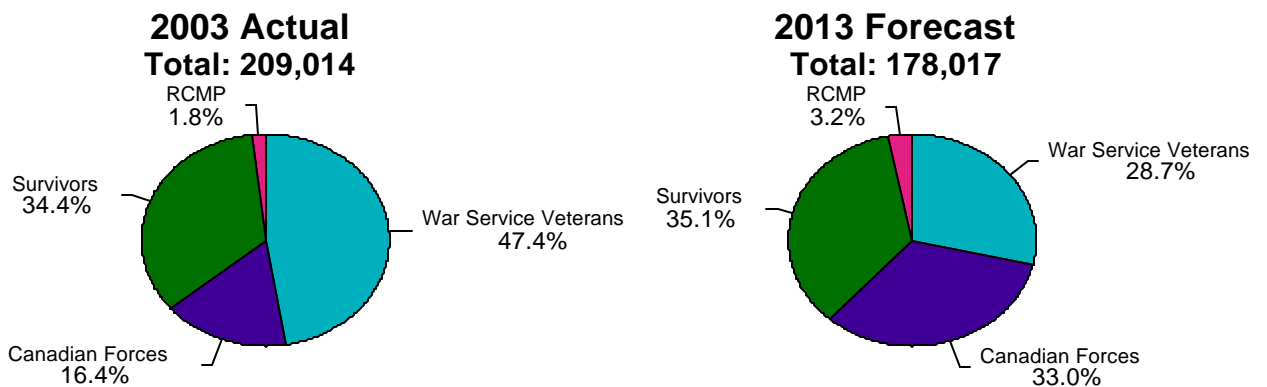
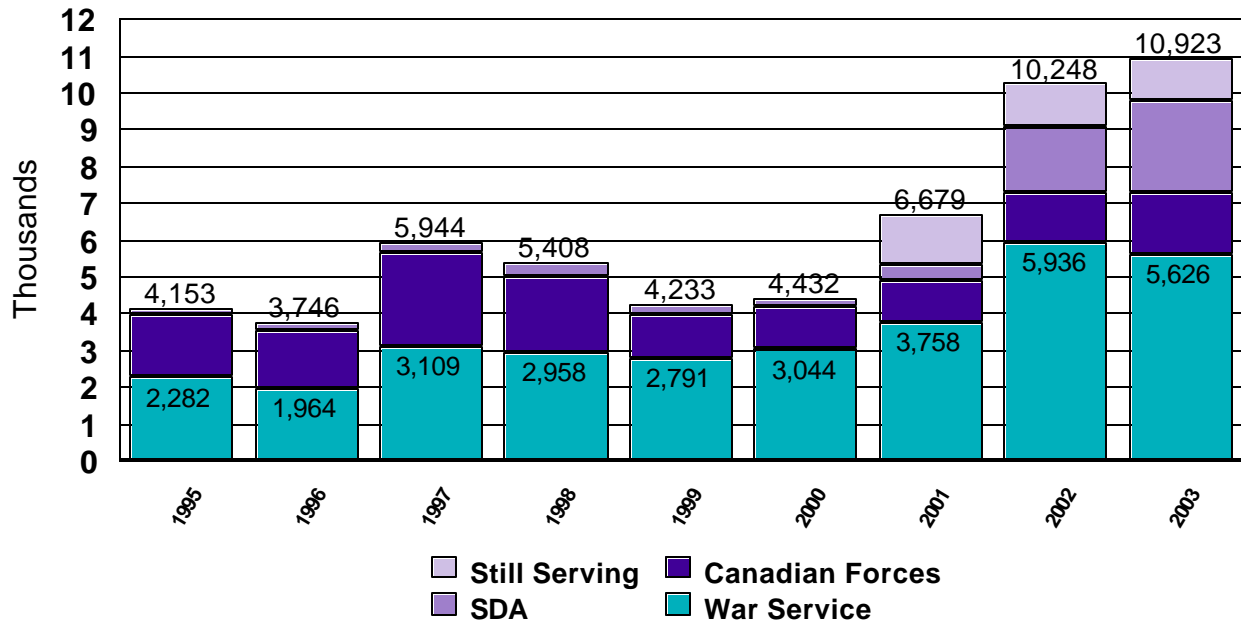
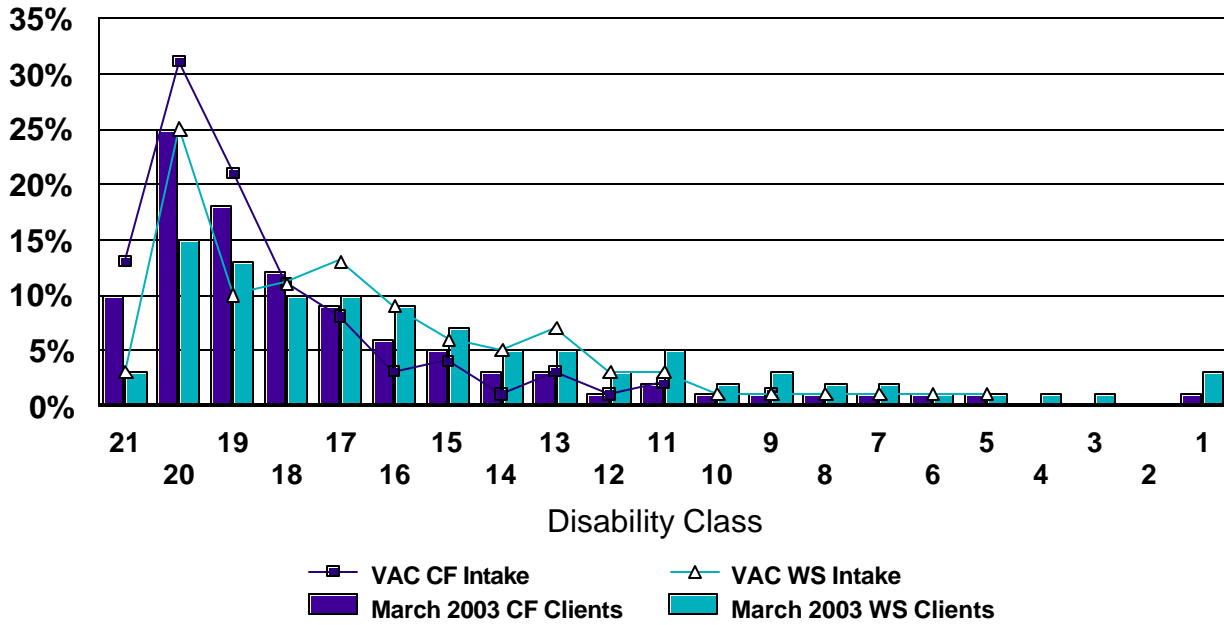


Figure 6: VAC Pension Client Intake by Service Type*

*SDA = Special Duty Area



**Figure 7: Disability Pension Class Comparison:
War Service and Canadian Forces Veterans**



* Class 21 = less than 5%, Class 20 = 5-7% and each succeeding class bracket increases by 5% until reaching Class 1, which represents a 98-100% pension.

Figure 8: Age of Veterans Affairs' CF Clients

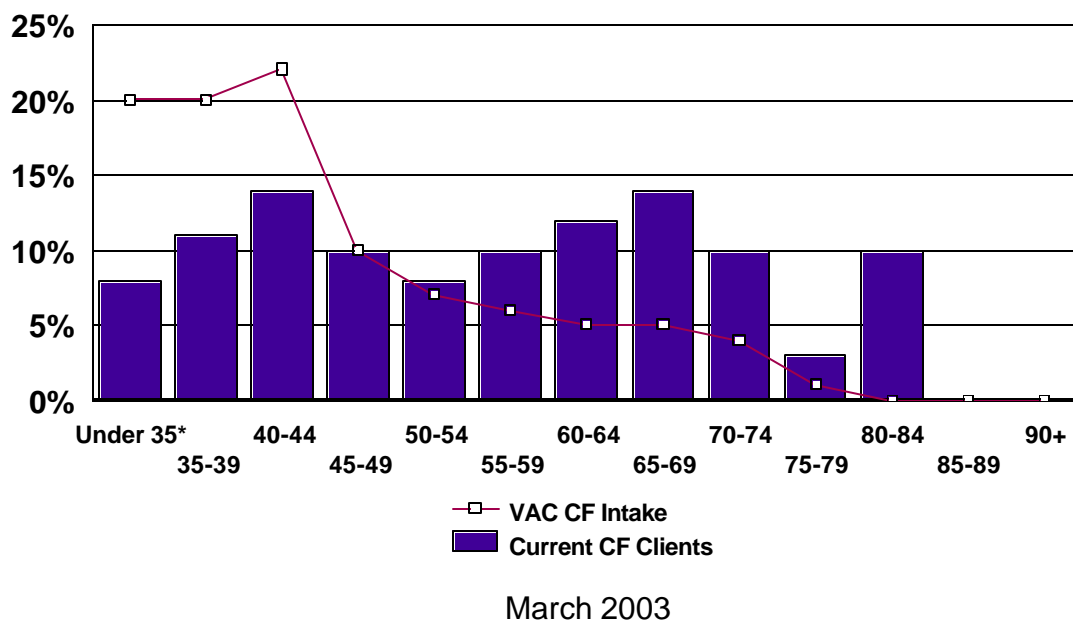


Figure 9: Canadian Forces Effective Strength and Number of personnel Deployed Internationally

Year	Effective Strength*	Number Deployed	Percentage Deployed*
1991	85,127	1,503	1.76
1992	81,542	1,488	1.82
1993	76,572	3,651	4.76
1994	73,458	3,346	4.55
1995	67,922	3,784	5.57
1996	63,742	2,148	3.37
1997	61,542	2,249	3.65
1998	60,422	1,704	2.82
1999	58,080	2,668	4.59
2000	58,092	2,551	4.39
2001	57,167	2,246	3.92
2002	58,149	3,282	5.64

*Effective strength does not include personnel in the training system.
 Percentage deployed internationally is based on effective strength.

ANNEX X

Senior Government Officials with Veteran Responsibilities*

*Titles and post-nomial letters used are those to which individuals were entitled at the time of their death, or at the time that this document was produced. Military ranks have not been used. Readers are invited to bring any errors or omissions in this listing to the attention of the Veterans Affairs Canada - Canadian Forces Advisory Council.

Chair, Military Hospitals Commission

The Hon. Sir James A. Lougheed, P.C., K.C.M.G., Q.C. (Senator)	1915 - 1918
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Ministers of Soldiers' Civil Re-establishment

The Hon. Sir James A. Lougheed, P.C., K.C.M.G., Q.C. (Senator)	1918 - 1920 1920 - 1921 (Acting)
---	-------------------------------------

The Hon. Dr. Robert J. Manion, M.C.	1921
-------------------------------------	------

The Hon. Dr. Henri Sévérin Béland (Senator)	1921 - 1926
---	-------------

The Hon. John Campbell Elliott, K.C.	1926
--------------------------------------	------

The Hon. Dr. Robert J. Manion, M.C.	1926 (Acting)
-------------------------------------	---------------

The Hon. Dr. Raymond D. Morand	1926 (Acting)
--------------------------------	---------------

The Hon. Dr. Eugene Paquet	1926
----------------------------	------

The Hon. Dr. James H. King	1926 - 1928
----------------------------	-------------

Ministers of Pensions and National Health

The Hon. Dr. James H. King (Senator)	1928 - 1930
--------------------------------------	-------------

The Hon. James L. Ralston, P.C., C.M.G., D.S.O., K.C.	1930
---	------

The Hon. Dr. Murray MacLaren, P.C., C.M.G., V.D.	1930 - 1934
--	-------------

The Hon. Dr. Donald M. Sutherland, P.C., D.S.O., V.D.	1934 - 1935
---	-------------

The Hon. Charles G. Power, M.C., K.C. 1935 - 1939

The Rt. Hon. Ian A. Mackenzie, K.C. 1939 - 1944

Ministers of Veterans Affairs

The Rt. Hon. Ian A. Mackenzie, K.C. 1944 - 1948

The Hon. Milton F. Gregg, V.C., P.C., O.C., C.B.E.,
M.C., E.D., C.D. 1948 - 1950

The Hon. Hugues Lapointe, P.C., Q.C. 1950 - 1957

The Hon. Alfred J. Brooks, P.C., V.D., Q.C. 1957 - 1960

The Hon. Gordon Churchill, P.C., D.S.O., E.D., Q.C. 1960 - 1963

The Hon. Marcel J.A. Lambert, P.C., Q.C. 1963

The Hon. Roger Joseph Teillet, P.C. 1963 - 1968

The Hon. Jean-Eudes Dubé, P.C., O.C., Q.C. 1968 - 1972

The Hon. Arthur Laing, P.C. 1972

The Hon. Daniel J. MacDonald, P.C. 1972 - 1979

The Hon. Allan B. McKinnon, P.C., M.C., C.D. 1979 - 1980

The Hon. Daniel J. MacDonald, P.C. 1980

The Hon. J. Gilles Lamontagne, P.C., O.C., C.Q., C.D. 1980 - 1981 (Acting)

The Hon. W. Bennett Campbell, P.C. 1981 - 1984

The Hon. George Hees, P.C., O.C. 1984 - 1988

The Hon. Gerald Merrithew, P.C., C.D. 1988 - 1993

The Rt. Hon. A. Kim Campbell, P.C. 1993

The Hon. Peter L. McCreath, P.C. 1993

The Hon David Collenette, P.C.	1993 - 1996
The Hon. Lawrence MacAulay, P.C. (Secretary of State for Veterans Affairs)	1993 - 1997
The Hon. Fred Mifflin, P.C., C.D.	1997 - 1999
The Hon. George Baker, P.C.	1999 - 2000
The Hon. Ronald J. Duhamel, P.C.	2000 - 2001
The Hon. Dr. Rey Pagtakhan, P.C.	2002 - 2003
The Hon. John McCallum, P.C.	2003 - date

Deputy Ministers of Soldiers' Civil Re-establishment

Samuel A. Anderson	1918
Frank Healey	1918
F.G. Robinson	1919 - 1920
Norman F. Parkinson	1920-1928

Deputy Ministers of Pensions and National Health

Dr. J.A. Amyot, C.M.G.	1919 - 1933
Dr. R.E. Wodehouse, O.B.E.	1933 - 1944

Deputy Ministers of Veterans Affairs

Walter S. Woods, C.M.G.	1944 - 1950
-------------------------	-------------

Eedson L.M. Burns, C.C., D.S.O., O.B.E., M.C., C.D.	1950 - 1955
G. Lucien Lalonde, O.B.E., E.D.	1954 - 1955 (Acting) 1955 - 1963
Paul M. Pelletier	1963 - 1967
Ernest A. Côté, M.B.E.	1968
John S. Hodgson, O.B.E.	1968 - 1974
William B. Brittain, D.F.C.	1974 - 1975 (Acting) 1975 - 1985
Pierre P. Sicard	1985 - 1987
David Broadbent, C.D.	1987 - 1992
David Nicholson	1992 - 1993 (Acting)
Nancy Hughes Anthony	1993 - 1994
David Nicholson	1994- 1999
Larry Murray, C.M.M., C.D.	1999 - 2003
Jack Stagg	2003 - date

Chairs of the Board of Pension Commissioners

John Kenneth L. Ross, O.B.E.	1916 - 1919
John T.C. Thompson, D.S.O., K.C.	1919 - 1933

Federal Appeal Board

C.W. Belton 1923 - 1930

Chair of the Pension Appeal Court

Hon. Mr. Justice James D. Hyndman, C.B.E. 1931 - 1940

Chairs of the Canadian Pension Commission

John T.C. Thompson, D.S.O., K.C. 1933 - 1934

Hon. Mr. Justice Fawcett G. Taylor, D.S.O. 1934 - 1936 (Acting)

H.F. McDonald, C.M.G., D.S.O. 1937 - 1943

J.L. Melville, C.B.E., M.C., E.D., C.D. 1943 - 1958

L.A. Mutch 1958 - 1959 (Acting)

Thomas D. Anderson 1959 - 1971

Allan Omar Solomon, C.D., Q.C. 1971 - 1981

Dr. Robert Blair Mitchell 1981 - 1985

John P. Wolfe, C.D., Q.C. 1985 - 1990

Marcel Chartier 1991 - 1995

Chairs of the War Veterans' Allowance Committee/Board

Walter S. Woods, C.M.G.	1931 - 1942
Dougall Carmichael, D.S.O., M.C., V.D.	1942 - 1944 (Acting) 1944 - 1945
F.J.G. Garneau, O.B.E., E.D.	1945 - 1960
W.T. Cromb, D.S.O., E.D.	1960 - 1969
W.G.H. Roaf, O.B.E., E.D.	1970 (Acting)
Donald M. Thompson, E.D., C.D.	1970 - 1987

Chair, Pension Review Board

René N. Jutras	1971 - 1982
Frank Oatley Plant, Q.C.	1982 - 1985
Just P. Letellier, C.D.	1985 - 1987

Chief Pensions Advocates

C. Beresford Topp, D.S.O., M.C.	1931 - 1939 1940 - 1945 (Active Service)
E.V. Wilson	1943 - 1945 (Acting)
C. Beresford Topp, D.S.O., M.C.	1945 - 1955
P.E. Reynolds, E.D.	1955 - 1969

Donald Kinsey Ward, Q.C.+	1969 (Acting) 1969 - 1977
Lloyd T. Aitken	1977 - 1982
Lawrence M. Hanway, M.C., E.D., C.D.	1982 - 1984
André Lemieux	1985 - 1992
Keith D. Bell	1992 - 1995
Simon Coakeley	1996 - 2001
Rick MacLeod	2001 - date

+ *independent Bureau of Pensions Advocates established in 1971, subsumed again in the Department of Veterans Affairs in 1995.*

Chair, Veterans Appeal Board

Just P. Letellier, C.D.	1987 - 1989
Norman A. Pinlott	1989 - 1991
Twila M. Whalen	1991 - 1995

Chair, Veterans Review and Appeal Board

Brian Chambers	1995 - 2003
Victor Marchand	2003 (Acting) 2003 - date

ANNEX XI

Veterans Affairs Organization

*represents an affiliated organization

(Source: Veterans Affairs Canada)

Minister of Veterans Affairs

Veterans Review and Appeal Board (Charlottetown, PE)

Chair, Veterans Review and Appeal Board

Executive Director, Veterans Review and Appeal Board

Department of Veterans Affairs

Head Office (Charlottetown, PE)

Deputy Minister of Veterans Affairs

Public Affairs Branch

Communications Division

Canada Remembers Division

Canadian National Vimy Memorial (France)

Newfoundland Beaumont Hamel Memorial (France)

60th Anniversary Task Force

Canadian Battlefield Memorials Restoration Project

Bureau of Pensions Advocates

Policy Planning and Liaison (Charlottetown)

Associate Deputy Minister of Veterans Affairs

Audit and Evaluation Division

Office of Early Conflict Resolution

Health Care Coordination Initiative Secretariat

Assistant Deputy Minister, Veterans Services

National Operations Division

DND-VAC Centre (Ottawa, ON)

Program and Service Policy Division

Service and Program Modernization Task Force

Assistant Deputy Minister, Corporate Services

Strategic Information Management Directorate

Government On-line Project

Security Services Directorate

Finance Division

Human Resources Division

Information and Technology Services Division

Management Support Services Directorate

Policy Planning and Liaison (Ottawa, ON)

Minister of Veterans Affairs

Deputy Minister of Veterans Affairs

Director General Policy Planning and Liaison

Ministerial Services Division

Cabinet Liaison and Legislative Development

Foreign Countries Operations

Communications Directorate

Canada Remembers Directorate

*Canadian Agency – Commonwealth War Graves Commission

Regional Operations

Regional Director General, Atlantic (Halifax, NS)

Regional Director Communications and Commemoration

National Call Centre Network (Atlantic office)

St. John's (NF) District Office

Treatment Authorization Centre (Atlantic)

Corner Brook (NF) District Office

Prince Edward Island (Charlottetown) District Office

Halifax (NS) District Office

Transition Services (serving CFBs Halifax/Greenwood)

Sydney (NS) District Office

Saint John (NB) District Office

Transition Services (serving CFB Gagetown)

Campbellton (NB) District Office

*Last Post Fund, Newfoundland Branch (St. John's, NF)

*Last Post Fund, New Brunswick and Prince Edward Island Branch (Saint John, NB)

*Last Post Fund, Nova Scotia Branch (Halifax, NS)

Regional Director General, Quebec (Quebec City, QC)

Regional Director Communications and Commemoration

Treatment Authorization Centre (Quebec)

Quebec (City, QC) District Office

Transition Services (serving CFBs Valcartier/Bagotville)

Sherbrooke (QC) District Office

Montreal (QC) District Office

Transition Services (serving CFB Montreal/St. Jean)

Gatineau (QC) District Office

*Last Post Fund National Office (Montreal, QC)

*Last Post Fund, Quebec Branch (Montreal, QC)

Executive Director, Ste. Anne's Hospital (Montreal, QC)

Ste. Anne's National Operational Stress Injuries Centre (Montreal, QC)

Regional Director General, Ontario (Kirkland Lake, ON)

Regional Director Communications and Commemoration

National Call Centre Network (Atlantic office)

War Veterans' Allowance Centre of Expertise

Brampton-Mississauga (Mississauga, ON) District Office

Transition Services (serving CFB Borden)

Owen Sound (ON) Satellite Office

Hamilton (ON) District Office

Kingston (ON) District Office

Transition Services (serving CFB Kingston)

London (ON) District Office

Tillsonburg Satellite Office

North Bay (ON) District Office

Ottawa (ON) District Office

Transition Services (serving NDHQ Ottawa/CFB Petawawa)

Peterborough (ON) District Office

Transition Services (serving CFB Trenton)

Scarborough (ON) Service Centre
Thunder Bay (ON) District Office
Toronto-Sunnybrook (Toronto, ON) District Office
 Transition Services (serving ASU Toronto)
Windsor (ON) District Office
*Last Post Fund, Ontario Branch (Toronto, ON)

Regional Director General, Prairie (Winnipeg, MB)
 Regional Director Communications and Commemoration
 National Call Centre Network (Prairie office)
 Manitoba (Winnipeg, MB) District Office
 Transition Services (serving CFBs Winnipeg/Shilo)
 Manitoba (Brandon, MB) District Office
 Saskatchewan (Regina, SK) District Office
 Saskatchewan (Saskatoon, SK) District Office
 Calgary (AB) District Office
 Edmonton (AB) District Office
 Transition Services (serving CFBs Edmonton/Cold Lake)
*Last Post Fund, Manitoba Branch (Winnipeg, MB)
*Last Post Fund, Saskatchewan Branch (Saskatoon, SK)
*Last Post Fund, Alberta Branch (Edmonton, AB)

Regional Director General, Pacific (Vancouver, BC)
 Regional Director Communications and Commemoration
 National Call Centre Network (Pacific office)
 Treatment Authorization Centre (Pacific)
 British Columbia Interior (Penticton, BC) District Office
 Kelowna (BC) Service Centre
 Prince George (BC) Service Centre
 Vancouver (BC) District Office
 Surrey (BC) Service Centre
 Victoria (BC) District Office
 Transition Services (serving CFB Esquimalt/Comox)
*Last Post Fund, British Columbia Branch (Surrey, BC)

Bureau of Pensions Advocates - Eastern Region (Ottawa, ON)

Bureau of Pensions Advocates District Office (St. John's, NF)

Bureau of Pensions Advocates District Office (Charlottetown, PE)

Bureau of Pensions Advocates District Office (Halifax, NS)

Bureau of Pensions Advocates District Office (Saint John, NB)

Bureau of Pensions Advocates District Office (Quebec City, QC)

Bureau of Pensions Advocates District Office (Montreal, QC)

Bureau of Pensions Advocates District Office (Ottawa, ON)

Bureau of Pensions Advocates – Western Region (Vancouver, BC)

Bureau of Pensions Advocates District Office (Toronto, ON)

Bureau of Pensions Advocates District Office (London, ON)

Bureau of Pensions Advocates District Office (Winnipeg, MB)

Bureau of Pensions Advocates District Office (Edmonton, AB)

Bureau of Pensions Advocates District Office (Vancouver, BC)

Bureau of Pensions Advocates District Office (Victoria, BC)

Bureau of Pensions Advocates District Office (Penticton, BC)

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